

Talking to Patients About Gun Safety

Presented by:



Massachusetts Office of the Attorney General



Endorsed by:



Massachusetts Chiefs of Police Association



Massachusetts Major City Chiefs of Police

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CME Overview

- 1. Firearm Safety and Public Health
- 2. Laws Concerning Gun Ownership
- 3. Practical Advice for Patients
- 4. Guidance on Patient Privacy
- 5. How to Begin the Conversation
- 6. Clinical Scenarios





Gun Owners Are Serious About Safety

Most gun owners take their responsibilities very seriously

- Knowledgeable about their weapons
- Committed to gun safety
- Diligent about safe storage





Why Individuals Own Firearms

- Self-protection/defense (63%)
- Hunting (40%)
- Sporting use/target shooting (28%)
- Collection (34%)





Firearm Safety is a Public Health Issue

Every day, 91 Americans are killed by guns

- Approximately 33,000 per year
- Car accidents cause similar numbers of deaths each year

If all gun deaths are grouped together, they would be ranked 13th for causes of death nationally





Firearm Safety is a Public Health Issue

Child Protection: Every day, 7 children or teens are killed with guns

Domestic Violence: Every month, 51 women are shot to death by intimate partners

Mental Health: More than 60% of deaths by firearm are suicides

Racial Justice: Guns are the leading cause of death for black males ages 15-34





Comparing MA to the US

Massachusetts has the lowest rate of gun deaths in the country

- Approximately 3 gun-related deaths per 100,000 residents
- Approximately 11 nationwide

722 people are injured by firearms every year in Massachusetts, and 225 are killed





Why Talk to Patients About Responsible Gun Ownership?

Physicians routinely inquire and counsel patients about health-related behaviors, conditions, and risks

Physicians have opportunity to educate patients about:

- safe storage
- household risk factors
- how to mitigate risk

This education is particularly important where increased risk factors apply





Barriers to Discussing Guns with Patients

Reasons why doctors choose not to discuss firearm safety with patients:

- Time constraints
- Concerns about confrontation
- Belief that it is unlawful to inquire
- Lack of training/information about guns and gun safety







What are the laws about gun ownership in MA?





Legal Framework: Licenses

A person must be licensed to have a gun. Licenses can be either:

- A firearms ID card (FID) or
- A license to carry (LTC)

Licenses are issued and renewed by the local police department

Licenses are valid for 6 years

Safety course required





Legal Framework: Licenses

Licenses are denied, suspended, or revoked if one of the following applies:

- Felony, violent crime, and drug or gun conviction
- Domestic abuse or protection order
- Commitment by a court for mental illness, alcohol, or substance abuse
- Unlawful use of or addiction to a controlled substance
- Appointment of a guardian or conservator because of decreased mental capacity

Licenses may also be denied, suspended, or revoked if the applicant is deemed "unsuitable."











Asking Questions and Recording Answers

Free to Ask: No restrictions on talking to patients about firearm safety.

Free to record: No restrictions on recording gun safety-related health information in a patient's record





What <u>must</u> I report to law enforcement or others?





Laws About Reporting

What you <u>must</u> report:

Gunshot wounds (WRISS)

Abuse of

- Children (or neglect)
- Elders
- Disabled persons

Mental health professionals' duty to warn/protect

Information in response to a court order or subpoena





When <u>may</u> I share patient information with others?





Laws About Reporting

What you <u>may</u> report:

"Serious and imminent" threats

- To "any person" who would be "reasonably able to prevent or lessen the threat"
- Good faith belief standard

Minors' records (to parents or guardians) Patient authorized information

Criminal activity in some circumstances











What the law says regarding safe storage:

A stored firearm must be:

"secured in a locked container or equipped with a tamper-resistant mechanical lock or other safety device, properly engaged so as to render such weapon inoperable by any person other than the owner or other lawfully authorized user." G.L. c. 140, § 131L(a).

Additional penalties apply when a firearm is kept somewhere a minor can access it. G.L. c. 140, § 131L(c) and (d).





Safest way to store a gun in your home:

- Unloaded
- Securely locked
- Ammunition locked in a separate container





Storing a gun in a car to transport it:

- Best practices: unloaded and locked inside a case or trunk.
- The law: A gun stored in a car for transportation must be unloaded and securely locked. G.L. c. 140, § 131C.
 - Exception for handguns under direct control of properly licensed person





Specific options for safe storage:

Trigger and cable locks (\$10 - \$50)

Gun cases (\$10 -\$200)

Lock boxes (up to \$350)









Specific options for safe storage:

- Gun cabinets (\$150 \$500)
- Gun safes (\$550 \$2,500+)
- Fireproof document safes (\$50 \$200)

Items available at retail stores, sporting goods stores, and online





Consider household members' access to firearms:

- Young children
- Teenagers
- Suicidal thoughts or depression
- History of violence
- Drug addiction
- Alzheimer's or other form of dementia





Making a gun less accessible:

- Storage at a remote location
- Disposal or separate storage of ammunition
- Deactivation





Disposing of an unwanted firearm:

- Sale to licensed dealer or individual
- Surrender to the police department
- Gun buy-back programs
- Donation to training programs





Concerned that a loved one is at risk of violence, suicide, or accidental injury by firearm:

- Talk to the friend or family member about safe storage or gun disposal options
- Recommend counseling or treatment, if appropriate
- Patient could report the concern to the local police





How do I start the conversation without offending my patient?





How to Engage

When approaching conversations with patients about guns:

- Remember that most gun owners are knowledgeable about and deeply committed to gun safety.
- Focus on health
- Provide context for questions
- Avoid accusatory questions
- Start with open-ended questions
- Avoid being overly prescriptive





How to Engage







But how does this all apply in specific situations?





A 38-year-old patient was recently discharged after a voluntary psychiatric commitment but had a relapse of symptoms and is brought to your office by his wife. His wife divulges that the patient has a firearm and is concerned about his access to the weapon.





A 6-year-old patient comes to the ER by ambulance with a gunshot wound. He says he was home alone and playing with his father's unlocked gun.





A 50-year-old female patient is concerned because her 16-year-old son now has an illegal gun. She wants to get the gun out of the house, but she does not want her son to go to jail.





A 40-year-old female patient comes in for a routine check-up. She has three young children in her household. When asked about gun safety, she refuses to answer.





A 22-year-old female patient comes in for a check up with a deep cut on her cheek and bruises in various stages of healing all over her body. She states that her boyfriend hit her and that her boyfriend has a gun.





Additional Resources

- Gun Safety and Your Health (for patients)
- Talking to Patients About Gun Safety (for providers)
- MA Firearms Records Bureau
- Approved Firearms Safety Courses
- Email questions to: <u>ProviderGuidance@state.ma.us</u>



