

WORKING
TOGETHER

2017

COORDINATION
COOPERATION
COLLABORATION

Active Shooter/Hostile
Event

James Breen and David Nolen

31ST ANNUAL MEETING - MAY 22 - 26

Agenda

Quick Review of:

- Active Shooter Facts and incidents
- Prevention Strategies
- Response Goals
- Best Practices
- Incident Response Operations

Main Topics/Discussion

- Assumptions
- Challenges
- Misconceptions
- Drills and Exercises
- Questions



Presenters

- James Breen
 - Sandia National Labs – EM Instructor/procedure development
 - Albuquerque Fire Department
 - USAR Task Force
 - USAF Pararescue and LE K-9
- David Nolen
 - Sandia National Labs - Exercise Planner
 - State of New Mexico Preparedness Manager
 - 23+ year USAF – Emergency Manager/CBRN



FBI Active Shooter Study

- 160 incidents occurred between 2000 and 2013 resulting in 486 killed and 557 wounded
- 70% of the incidents occurred in either a commerce/business or educational environment
- 60% of the incidents ended before police arrived
- 40% of the shooters ultimately committed suicide
- 47% of the incidents resulted in law enforcement casualties
- In 64 incidents, where the duration of incident could be ascertained:
 - 69% ended in 5 minutes or less
 - 36% ended in 2 minutes or less

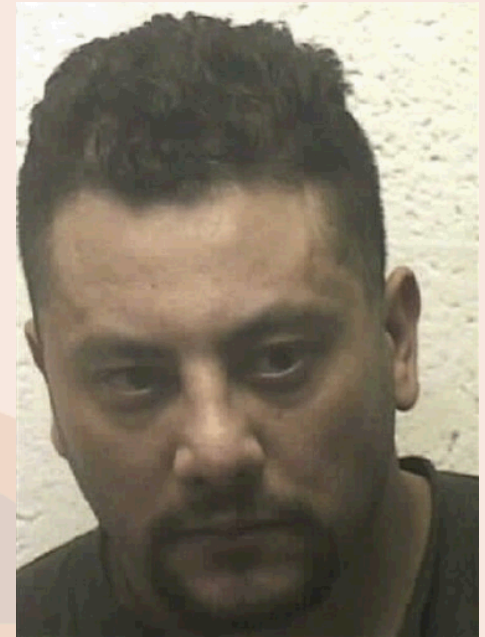


A Study of Active Shooter Incidents in the United States Between 2000 and 2013



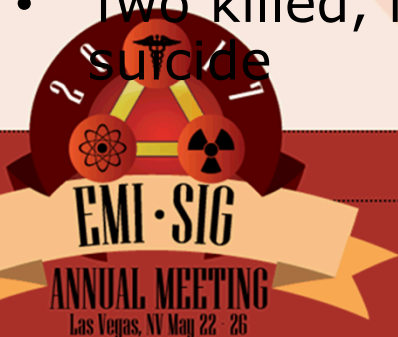
Emcore Active Shooter Incident

- On July 12, 2010 at 9:30am, Robert Reza, 37, began a killing spree that was targeted at his ex-girlfriend who worked at the Emcore Corp., located in Albuquerque, NM
- Incident occurred within 300 feet of a SNL controlled access gate
- Reza was a former employee of Emcore and knew the layout of the building and how to bypass security protection features



Domestic Violence spills into the Workplace

- Reza, armed with .45-caliber handgun, walked onto an open campus of a technology firm, and killed the first victim who was outside in a courtyard
- He then entered the main building and proceeded to a breakroom, where he shot and seriously wounded the ex-girlfriend and killed one of her co-workers.
- Reza then shot three others as he went through the building
- The killing ended when he shot himself in the head after recognizing that first responders were arriving on-scene
- Two killed, four wounded, and one suicide





Columbine High School Massacre
Eric Harris and Dylan Klebold
April 20, 1999
13 murdered and 21 injured with
GSW within 49 minutes

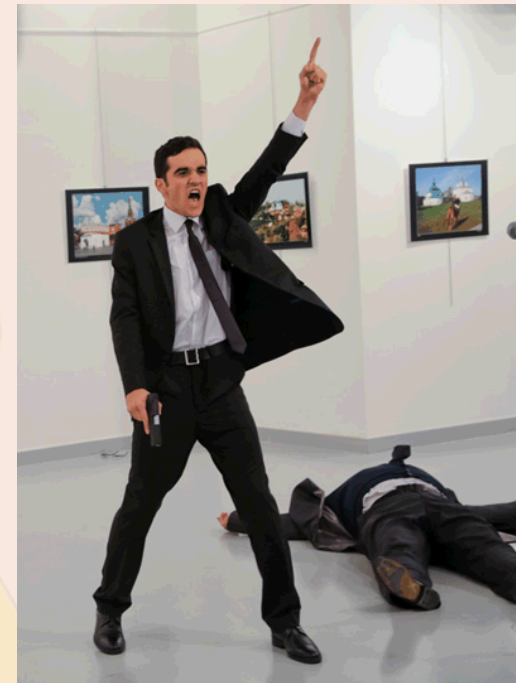


2008 Mumbai, India Terrorist Attack
Ajmal Kasab and Ismail Khan
58 murdered and 104 injured
within 15 minutes





Virginia Tech Shooting
April 16, 2007
Seung-Hui Cho
32 killed and 17 wounded
Within a three hours



Russian Ambassador Assassination
Ankara, Turkey
December 19, 2016
Mevlut Mert Altintas
1 killed



Vehicle as a Weapon

- **6/14/2016: Nice, France**
 - 84 killed, 200 injured
- **11/28/2016: Ohio State University**
 - 11 injured
- **12/19/2016: Berlin, Germany**
 - 12 killed, 48 injured
- **3/22/2017: London, England**
 - 4 killed, 50+ injured



What to Expect at a ASHE Event

- Chaos, confusion, denial, and panic
- Incomplete or inaccurate information
- Non-injured persons who are hiding, frightened, and/or unable to respond to directions
- Surreal incident scene with combat type injuries
- **Most assailant's don't plan on surviving**



Overall Response Goals

- Neutralize, contain, and secure the threat
- Provide EMS to the injured
- Provide care for the affected, non-injured persons
- Fully investigate
- Recover from the incident and return to normal operations
- Accomplished within a Unified Command Structure, most likely, using mutual aid resources to achieve strategic goals and tactical objectives



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Active Shooter/Hostile Event (ASHE) Best Practices

- Developed by the Interagency Board
 - US Attorney General, DOD, DOJ-FBI
 - Participants from Police and Fire Departments, medical professionals, and DHS
- *Improving Active Shooter/Hostile Event Response*, September 2015
 - Identified 10 best practices
- *Active Shooter/Hostile Event Guide* – July 2016
 - Outlines Standard Operating Procedures for:
 - Incident Command
 - Emergency Communications
 - Medical
 - Training and Exercises
 - Community Outreach and Engagement



ASHE Best Practices

- Organizational leadership prioritizes and supports development and implementation of joint procedures, training and exercises
- Create and implement common operating language – clear text
- Integrate command and incident management cross all responder disciplines/agencies
- Adopt the Rescue Task Force (RTF) Concept
- Employ Tactical Emergency Casualty Care (TECC)



ASHE Best Practices

- Implement Casualty Collection Points (CCP)
- Incorporate ballistic protective equipment for Fire/EMS
- Develop and implement related training and medical protocols for EMT's
- Promote two-way public communications (to include social media) for public response, first aid, shared intelligence, medical care, post incident activities



Active Shooter

- Individual(s) who is actively engaged in committing an act of violence, using firearms, in an attempt to inflict harm (killing or injuring) a specific person(s) or persons at random
- Shooter may be motivated by a domestic situation, mental illness, vengeance, or terrorism
- Means may be:
 - Handguns
 - Assault rifles

Hostile Event

- Incident where an individual(s) is actively engaged in committing an act of physical violence by any means other than by firearms, in an attempt to inflict harm (killing or injuring) a specific person(s) or persons at random
- Assailant may be motivated by a domestic situation, mental illness, vengeance, or terrorism
- Means may be:
 - Machete or sword
 - Knife
 - Fire as a weapon
 - Explosives
 - Civil Disturbances
 - Passenger Vehicle or Truck



Prevention Activities

- The best ASHE incident is the one that never occurs and was prevented
- Having a robust and vigorous prevention/reporting program is essential
- Nearly all AS/HE incidents have a mental illness or radicalization factor
- Workplace Violence
 - May be driven by vengeance or domestic situation
 - Workforce is the first line of defense
 - Understand there is a pathway that leads to violence; recognize the warning signs
 - Develop a culture of reporting behavior concerns to supervisors
 - Supervisors must take appropriate action by implementing an appropriate intervention strategy



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Prevention Activities

Terrorism

- Observe and report suspicious activity or packages immediately
 - Persons conducting surveillance
 - Suspicious questioning – Who/Why wants/needs to know?
 - Testing security protections
 - Impersonators or persons that are out of place
 - Rehearsals
 - Deployment activities
- Maintain situational awareness based on location and environment
- Know the details of your employer's Safe Guards and Security Program
- Be prepared and have a plan in order to respond safely in the event of a terrorist attack



Initial Response

within first few minutes

- 911 Call Taking and dispatch of resources
- Protective Force deploys Immediate Action Teams to neutralize, contain, or secure the threat
- Fire, ERT, EMS respond to a Level 2 staging area a safe distance from the incident scene
- Protective Actions initiated by Communications Center



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During Threat Neutralization

- Unified Command established with ProForce Supervisor at the Level 2 Staging area
- Fire, ERT, EMS remain staged until threat is neutralized, contained, secured, or departed
- Additional Resources/Mutual Aid requested based on best known information



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Security/LE Operations

- Assemble and deploy an Immediate Action Team (IAT) to neutralize, contain, and secure the threat
- Secures the immediate area following threat control
- Requests deployment of EMS/Rescue Task Force(s)
- Conducts Search of entire building/area for additional threats
- Establish perimeter control with traffic control points
- Gather hider's and non-injured, affected persons to a single location
- Assist with extrications to Casualty Collection Point/Treatment area



Threat Neutralized and Search

- Threat Neutralized
 - Incident area is secure based on best available information
 - Threat as known has been neutralized
 - Complete and thorough search has not been conducted
 - The area where violence occurred is considered a Warm Zone until the Search is completed
- Search
 - Building/area is thoroughly searched by visual means, K-9 Explosive and Patrol Teams, Explosive Ordinance Disposal Teams to include outside parking lots, suspicious items, and anything/anyplace associated with the shooter/assailant has been cleared
 - Every possible hiding place has been inspected
 - Concludes with "100% Secure/Clear" benchmark



Pro Force Post Assault Activities

- Secure/restrain the shooter
- Conduct search for additional shooter(s) and IED/secondary devices
- Provide lifesaving first aid using THREAT Gather "hider's" and non-injured, affected persons to a single location
- Assist with patient extractions to the CCP/Treatment area



2013 Hartford Consensus

Improving Survival from Active Shooter Incidents

- Identifies the importance of initial actions to control hemorrhage
- Number one cause of preventable death in victims of penetrating trauma is hemorrhage
- Focuses on early hemorrhage control to improve survival and critical actions that increase survival
- THREAT:
 - **T** - Threat suppression
 - **H** - Hemorrhage control
 - **RE** - Rapid Extrication to safety
 - **A** - Assessment by medical providers
 - **T** - Transport to definitive care



Key EMS Command Functions

- Keep responders safe through on-going threat assessment
- Control the communications process
- Make resource determinations/request additional resources
- Develop and communicate an effective IAP that addresses the needs of the incident
- Maintaining a effective ambulance transportation lane
- Establish Level 2 Staging with Staging Officer
- Communicate incident benchmarks
- Engage in incident recovery and termination activities



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Rescue Task Force (RTF)

- Security/LE and Fire/EMS/ERT assemble to form a RTF to conduct patient extractions from within the Warm Zone
- Primary function of Security/LE is to provide security/protection for the Rescue Task Force while ERT/EMS rapidly package patients and transport patients to the Causality Collection Point (CCP)
- Team consists of:
 - Four Security/LE officers
 - Four Fire/EMS providers
- Team stays together throughout the assignment



Initial Fire/EMS Deployment

- Once threat is neutralized, Unified Command Post should be established in a forward operating position in a location that is safe, accessible, and visible to scene
- All other initially staged resources should respond to Level 1 Staging option
- Command should determine scene access/layout and identify a ambulance transportation lane



EMS Deployment Incident Tasks/Benchmarks

- Triage
 - “Triage Report”
 - Declaration of Mass Casualty Incident
- Extraction - Deploy RTF’s
- Treatment
- Transportation
 - “All Immediate’s Transported”
 - “All Patients Transported”



Investigation Interview Facility Needs

- Communication with Family Assistance Center (FAC)
- EMS/Medical Assessment
- Grief counseling/psychological first aid
- Food/water/bathroom facilities
- Access to telephones/cell charging stations
- Coordinate the reunification of affected persons with family/love with FAC interviews
- Site Security



Family Assistance Center

- Notifications to family/loved ones of injured and deceased victims
- EMS/Medical support
- Grief counseling/psychological first aid
- Food/water/bathroom facilities
- Access to telephones/cell charging stations
- Coordinate the reunification of affected persons with family/love ones after law enforcement interviews
- Site Security



Resource Needs

- What are the limits of your on-site resources:
 - Fire, EMS, ERT
 - Protective Force
- What resources are available from off-site response agencies?
- What is your ability to communicate by radio with off-site resources?
 - Interoperability
 - Proficiency of Command Officers
 - Mutual Aid Communications Plan



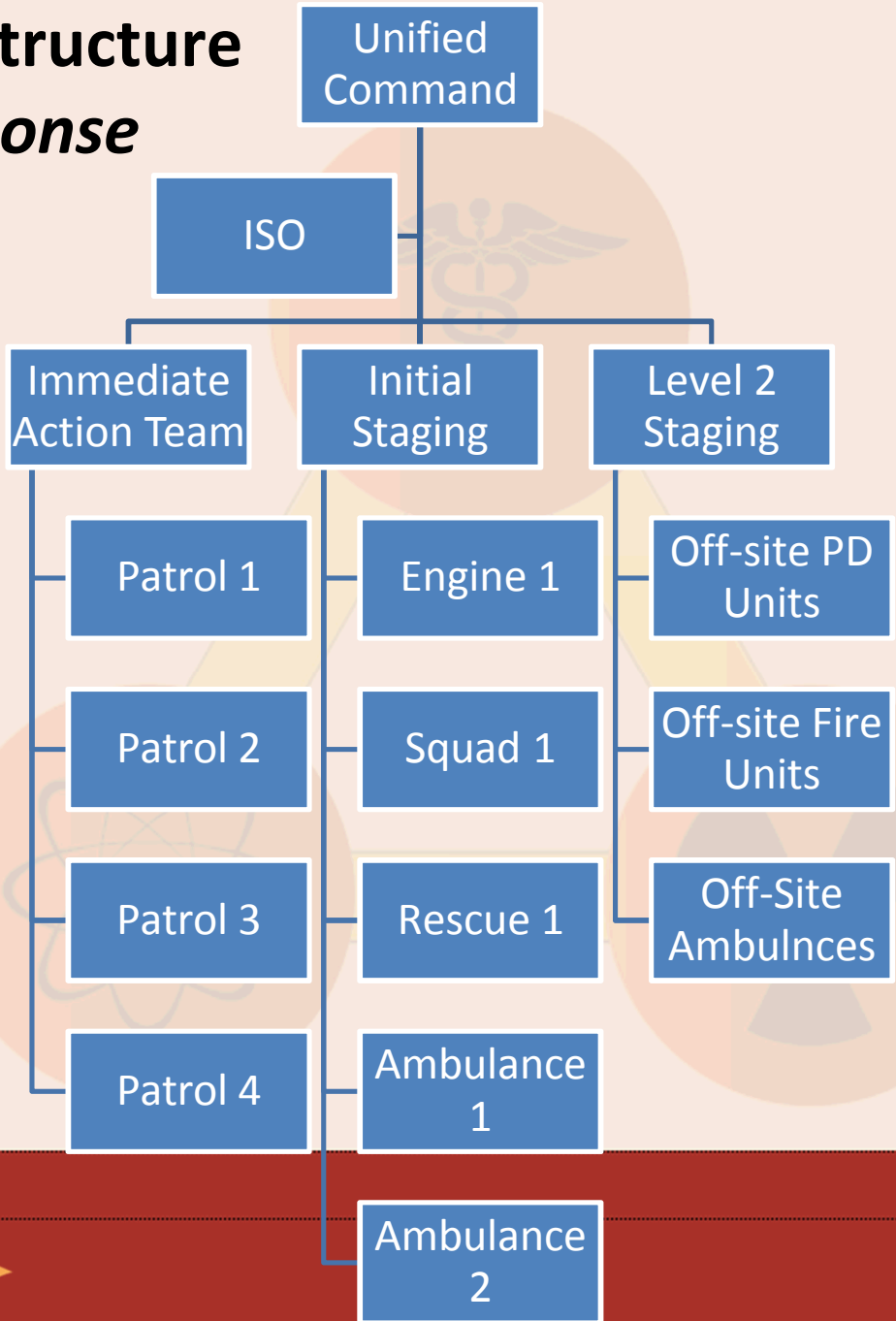
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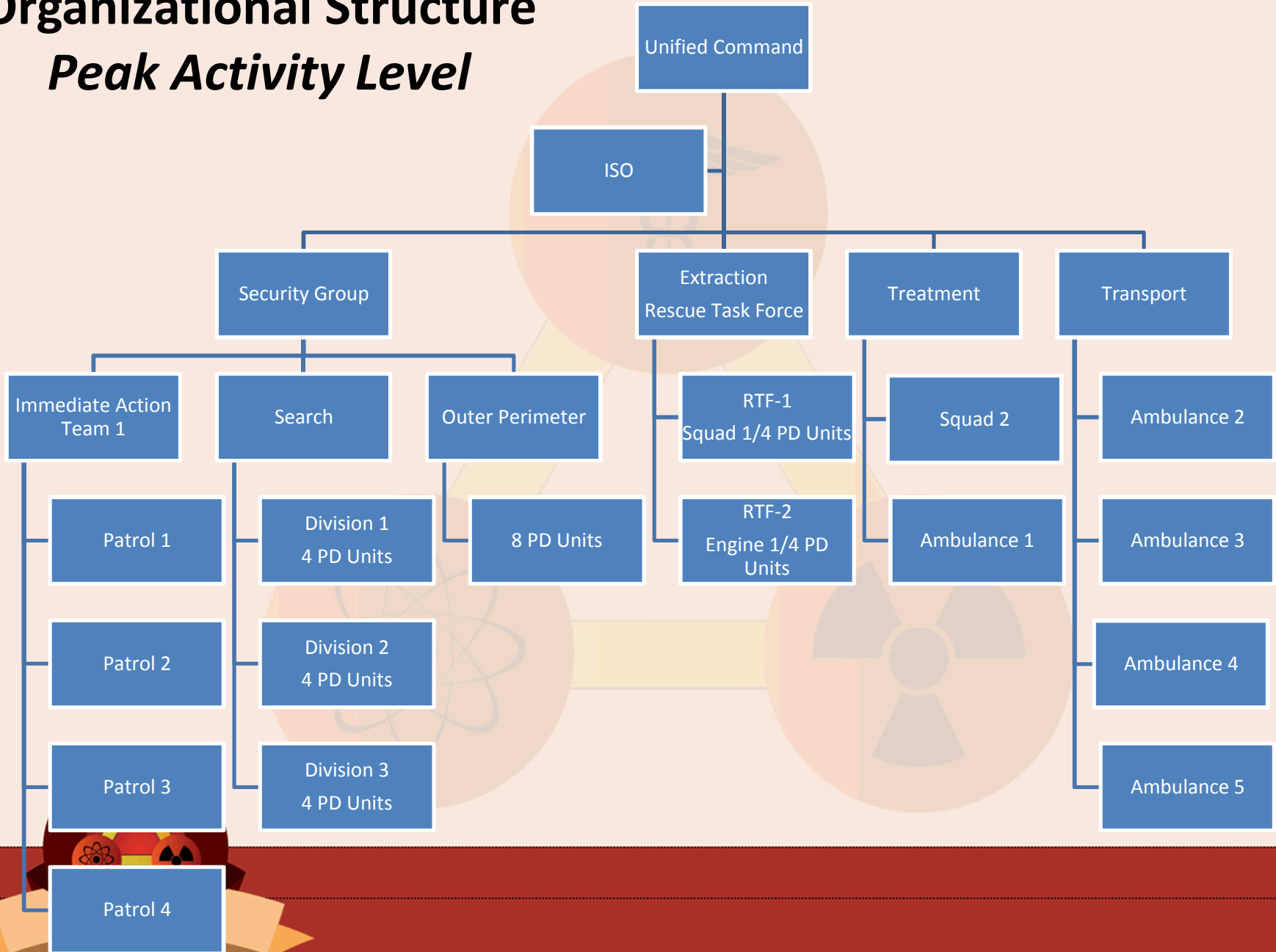
Organization Structure

Initial Response



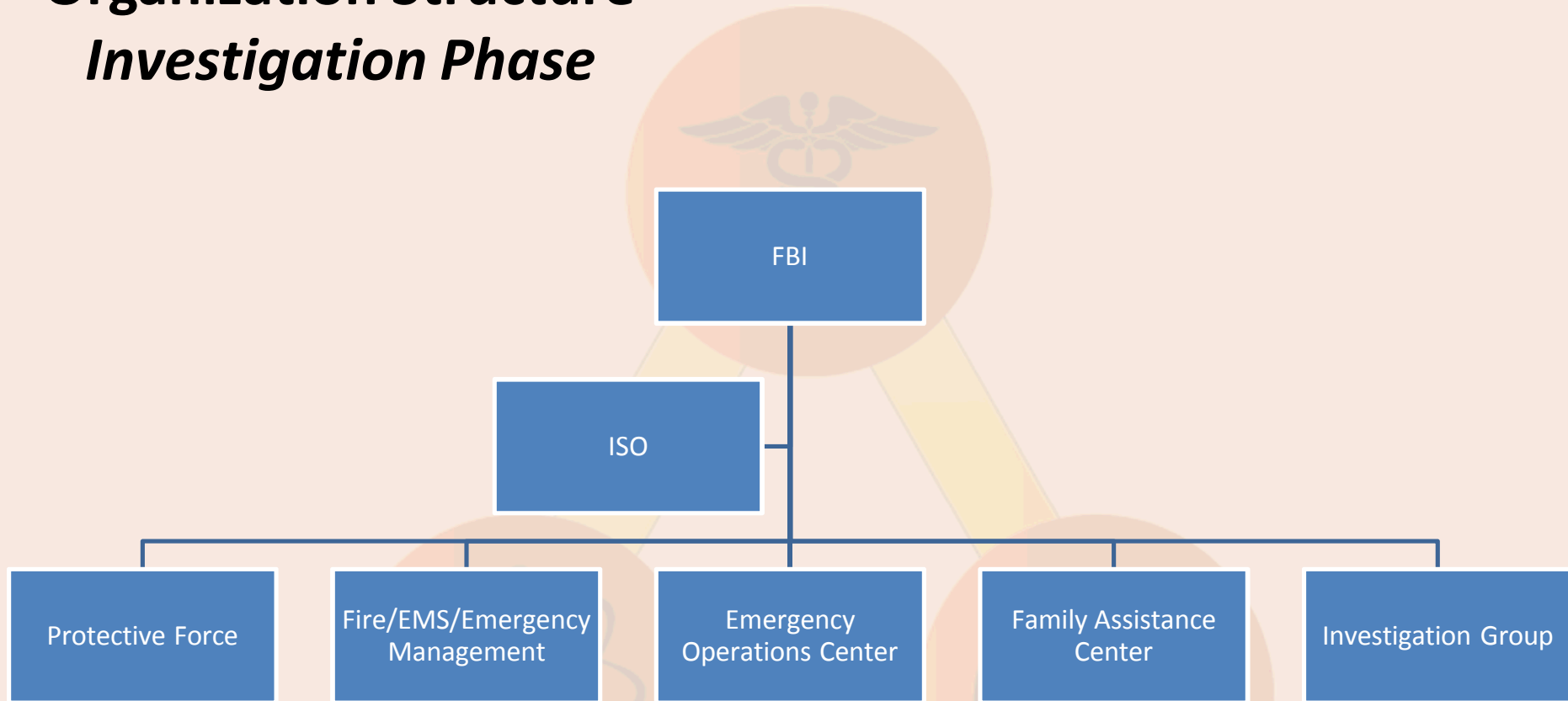
Organizational Structure

Peak Activity Level



Organization Structure

Investigation Phase



SNL FSE17

Timeline



- ▲ 08FEB17 - Event What-if" and Failure Mode Analysis / Hazard and Risk
- Assessment Meeting
- 13 & 16FEB17 - Facility ASR "Run, Hide, Fight" Training (855)
- ▲ 21FEB17 - Bldg. 855 Role Player Expectation Briefing
- 14JUN17 - Event What-if" and Failure Mode Analysis / Hazard and Risk
- Assessment Meeting (Tentative)
- ▲ 19 & 22JUN17 - Facility ASR "Run, Hide, Fight" Training (886) (Tentative)
- 27JUN17 Role Player Expectation Briefing (Tentative)
- 12JUL17 - Event What-if" and Failure Mode Analysis / Hazard and Risk
- ★ Assessment Meeting (Tentative)
- ✦ 17 & 20JUL17 - Facility ASR "Run, Hide, Fight" Training (877) (Tentative)
- 24JUL17 - SNL FSE17 Role Player Expectation Briefing (Tentative)



Assumptions

- Existing practices/procedures will meet incident needs
- Unified Command is easily established
- Existing MOU/MOA's will support incident needs
- The "go to" ambulance company can provide for incident needs
- Security/Law Enforcement can quickly deploy qualified Type 4 and 5 Incident Commanders



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Challenges

- Maintaining situational awareness between Security/LE and Fire/EMS/ERT command structures
- Site Access by off-site/mutual aid resources
 - Real World
 - Drills and Exercises
 - SNL within military installation
- Common terminology
- Mutual Aid Radio Communications



Establishing and Maintaining Scene Access



Misconceptions

- Containment of individuals running from danger
- Management's vision/expectation vs. the actual capabilities of task-level personnel
- Number of resources needed to mitigate the incident



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Questions?

