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### OPERATIONS MANUAL

#### STANDARD INSTRUCTION 02 SPECIAL OPERATIONS

#### SECTION 49 ACTIVE SHOOTER/MASS CASUALTY INCIDENT

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**I.     PURPOSE**

The intent of this policy is to provide direction for the correct intervention, at the correct time in order to stabilize and prevent death from readily treatable injuries in the event of an Active Shooter/Mass Casualty Incident (AS/MCI). These incidents require close coordination between law enforcement, fire, and EMS responders due to the threat complexity. These incidents involve the identification of zones (Hot, Warm and Cold) that indicate the level of threat in a given location.

**II.    SCOPE**

This policy shall apply to all San Diego Fire-Rescue Department (SDFD) personnel.

**III.   AUTHORITY**

The fire chief authorizes the information within this policy.

**IV.    DEFINITIONS**

A.     Active Shooter (AS)/Mass Casualty Incident (MCI)

One or more assailants participating in a random or systematic shooting spree, demonstrating their intent to continually harm others. Their overriding objective is to kill and injure as many people as possible. The assailant may also utilize other weapons (e.g. explosive devices, edged or blunt force trauma weapons, weapons of mass destruction, etc.).

B.     Body Armor

Body armor is protective clothing intended to protect personnel from gunfire and is graded according to effectiveness.

C.     Zones

1.       Hot Zone: The area where a direct and immediate threat exists. Fire and EMS personnel shall not operate in this zone unless assigned to the SWAT team as a tactical medic.
2.       Warm Zone: The area where a potential threat exists, but the threat is not direct or immediate. SDFD resources may be requested to enter into Warm Zones for treatment and transport, but this should be done with force protection.
3.       Cold Zone: The area where no significant danger or threat can be reasonably anticipated. This could be achieved by distance, geographic location or inaccessible areas from the incident. The cold zone is the location for staging areas, Incident Command Post (ICP), and the treatment and transportation of patients. The cold zone is the area where Rescue Task Forces are assembled between fire personnel and law enforcement.

D.     Casualty Collection Point (CCP)

An area designated in the Cold, Warm or Hot Zone, used to stabilize multiple casualties. It is established when it is not feasible to immediately evacuate casualties

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due to limited resource capability, long evacuation distances and adverse tactical circumstances.

E. Concealment

Anything that hides you from perpetrator observation and can be natural or man-made. Concealment does not protect personnel from gunfire.

F. Contact Team

A group of law enforcement (average size of two to five) deployed using immediate action rapid deployment (IARD) techniques to address the active shooter(s).

G. Cover

Cover gives protection from bullets, fragments from exploding rounds, flame, nuclear effects, and biological and chemical effects. Natural cover includes such objects as logs, trees, stumps, ravines, and hollows. Manmade cover includes such things as vehicles, trenches, walls, rubble and craters. Build or locate cover such as shielding behind vehicles, walls and /or natural barriers.

H. Force Protection

Actions taken by law enforcement to prevent or mitigate hostile actions against personnel, resources, facilities, and critical infrastructure. These actions allow the operational ability of fire and EMS resources to be deployed into the Warm Zone as needed.

I. Immediate Action and Rapid Deployment (IARD)

This is the swift and immediate deployment of law enforcement personnel in a crisis situation where delays could result in additional death or injury to innocent persons. Rapid deployment is intended to control, contain, and neutralize threats.

J. Rescue Task Force (RTF)

A team of fire and law enforcement, incident specific in size and number, formed to move into hostile or potentially hostile environments to potentially triage, treat, and move victims to safe areas. The RTF shall operate primarily in the Warm Zone. The Rescue Task Force shall be given radio designations in numerical order (i.e. RTF-1, RTF-2 etc.). The RTF is ideally comprised of (but not limited to) one fire captain, two (any combination of) firefighters or engineers and two law enforcement. Contracted EMS/ambulance personnel shall not operate in a RTF or in the Warm Zone.

K. Rescue Task Force Staging Officer

This is comprised of one fire company officer and one law enforcement officer. They are to work together to get the resources needed and to form up the personnel that make up the RTF. The RTF staging officers shall assemble the RTF at the perceived edge of the Warm Zone.

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L.     Improvised Explosive Device (IED)

A device placed or fabricated in an improvised manner incorporating destructive, lethal, noxious, pyrotechnic, incendiary or chemicals designed to destroy, incapacitate, harass or distract.

M.     Tactical Medic

The tactical medic (STAR team) is assigned to a SWAT team (SDPD) who has received specific tactical training. The primary role of the tactical medic is to provide field care and support of the SWAT team members who are engaged in missions and/or assignments in the Hot Zone.

N.     Tactical Combat Casualty Care (TCCC)/Tactical Emergency Casualty Care (TECC)

Tactical Combat Casualty Care (TCCC) is the standard of care in the prehospital battlefield environment. Tactical Emergency Casualty Care (TECC) is the civilian equivalent of TCCC. Both focus on treating the preventable causes of death including hemorrhage control techniques using tourniquets, pressure dressings, hemostatic agents and chest needle decompression.

O.     THREAT acronym for increased survivability

Developed by the Hartford Consensus after the Sandy Hook Elementary shooting:

T:     Threat suppression  
H:     Hemorrhage control  
RE:    Rapid Extrication to safety  
A:     Assessment by medical providers  
T:     Transport to definitive care

**V.     POLICY**

A.     The active shooter response should support the critical actions contained in the acronym

“THREAT” for the care of casualties:

1.     Threat suppression
2.     Hemorrhage control
3.     Rapid Extrication
4.     Transport to definitive care

B.     The first arriving fire officer or chief shall establish communications with law enforcement as soon as possible. Due to the dynamic nature of an AS/MCI incident, establishing communications with law enforcement may be delayed. Communications with law enforcement may occur after their initial tactical priorities are executed to contain and/or neutralize the threat. Once communications between law enforcement and fire are established, the following initial size up and response considerations should be made:

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1. Identify hazards, threats and/or intelligence
  - a) Identify control points and perimeter
  - b) Consider assessment for the presence of IEDs
2. Ensure responding crews scene safety and identify Hot, Warm and Cold zones
3. Order necessary resources
4. Establish a Unified Command and a single Incident Command Post
5. Determine appropriate access and response routes
6. Determine overhead and resource needs.
7. Establish casualty collection areas outside the Warm Zone
8. Establish needs and assignments for MCI under FIREScope

C. Fire and police shall establish a single Incident Command Post (ICP) and establish a Unified Command (UC). Under the Unified Command, law enforcement will make the determination of the Hot, Warm and Cold Zones. Once the Warm Zone boundaries are identified, resources may be assigned. The law enforcement IC will determine when the contact team will enter the Hot Zone. The fire IC will then establish a RTF staging officer who will form the Rescue Task Forces.

D. RTF Operations

1. The Rescue Task Force should consist of, but not limited to, at least two armed law enforcement officers, a fire captain and two (any combination of) firefighters or engineers.
2. Fire personnel shall wear structure helmets, brush coats, eye protection and medical gloves. When body armor is provided it will be worn underneath the brush coat.
3. The equipment carried should allow for optimal rescuer mobility and treatment of preventable causes of death. Equipment may consist of a trauma bag, tourniquets, Combat Gauze, Hyfin Chest Seal, additional medical gloves and equipment to provide for rapid extrication. Equipment assembled may be at the discretion of the company officer.
4. Once an RTF is made the company officer shall maintain communications and crew continuity while operating in the Warm Zone. The RTF will move through the Warm Zone assessing and treating the preventable causes of death under TECC.
5. Ideally the first RTF or first few RTFs will continue to move deeper into the Warm Zone while subsequent RTFs (i.e. RTF-2, RTF-3) will begin the removal of patients out of the Warm Zone and into casualty collection points. Once removed the patients become part of an MCI and operations in the Cold Zone shall reflect that of an MCI and follow San Diego Fire-Rescue Department's MCI policies.

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6. The RTF may establish a Casualty Collection Point (CCP) in the Warm Zone when deemed necessary. The CCP shall be secured by force protection at all times and should provide safe cover. A fire officer in the CCP will maintain communications with the IC and coordinate casualty evacuation.

7. The Warm Zone may expand and contract as needed during RTF operations.

8. The RTF company officer should expect to give timely updates on numbers of patients and needs inside the Warm Zone. This will assist the IC with the ordering of replacement RTFs and triage, treatment and transportation resources.

9. Once an RTF runs out of supplies to treat the preventable causes of death, they are to remove themselves from the Warm Zone evacuating patients they treated to the casualty collection points. The RTF may then be reassigned or may be resupplied and continue to operate as a RTF at the incident commander's discretion.

10. Consideration should be given to establishing a resupply area close to the RTF staging area to meet the needs of the RTF working in the Warm Zone.

E. MCI Operations

1. MCI operations shall be established by the fire IC and executed in the cold zone.

2. Triage may be deferred in the initial stages of the operation and the primary objective may be the evacuation of casualties to safety. Once the resources are available and tactical operations are established, MCI operations should be assigned by the IC.

3. MCI operations will follow Operations Manual Standard Instruction 09 EMS Section 12 Mass Casualty Incident.