

MONTEREY COUNTY ACTIVE ATTACKER / CRIMINAL MASS CASUALTY PROTOCOL

2024

Monterey County Chief Law Enforcement Officers'
Association &
Monterey County Fire Chiefs' Association



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POLICY STATEMENT

After the Columbine tragedy in 1999, law enforcement agencies across the nation transitioned to the rapid response model in addressing active attacker scenarios, and the Monterey County Police and Fire Chiefs Associations developed the original Active Shooter Protocol in 2015. The County Chiefs' Associations acknowledge a shared commitment to properly train, equip, and exercise for such an incident. This protocol is indicative of the County Chiefs' Associations' commitment to a well-coordinated response to an Active Attacker / Criminal Mass Casualty Incident.

Tragically, over the last two decades, the frequency and severity of active attacker incidents have increased dramatically. Law enforcement researchers and practitioners continue to study these incidents and evaluate best practices. This protocol seeks to update these best practices to provide a framework to facilitate a comprehensive and effective response.

Because of the many varying factors that can influence an Active Attacker / Criminal Mass Casualty Incident, there should not be one universal tactical policy. There are, however, some known factors that should be considered to guide the tactical decision-making:

1. Field officers and supervisors should be capable of distinguishing between an active attacker event and a traditional criminal action (e.g., a hostage/barricade situation), and be able to direct an appropriate immediate tactical response to either event.
2. All personnel involved in the response must seek to realistically assess the initial situation and the perceived threats involved (e.g., number of suspects, skill level, types of weapons). As the incident unfolds, responders must continually reassess the situation and the effectiveness of the response.
3. Law enforcement must be prepared to take immediate steps to neutralize or resolve those conditions that are life-threatening. Before deploying personnel into a dangerous situation, the following factors must be considered:
 - a. The mission or objective should be clear and obtainable, given the circumstances known at the time.
 - b. The appropriate number of personnel with the equipment, skill, and ability should be assigned to reasonably accomplish the objective.
 - i. In some cases, intervention by a solo law enforcement officer may be necessary to save lives.
 - ii. In all cases, responding officers must assess the situation and implement a plan of action that maximizes the potential for success while minimizing the possibility of casualties.
4. The actions of all responders should be consistent with their statutory authority, training, certifications, and the responsibilities of their employing agency. However, unusual assignments are likely, and all responders should expect that they may be assigned to perform tasks they have not experienced in past incidents.
5. Care and evacuation of the injured victims must be initiated as soon as practical following neutralization or containment of the active threat or arrival of sufficient resources to allow the implementation of Rescue Task Forces.

This Monterey County (MOCO) Active Attacker / Criminal Mass Casualty Protocol, utilizes an Active Attacker Incident Management System based on the C3 Pathways "Active Shooter Incident Management Checklist." This protocol is consistent with Active Attacker "Option Based Processes and Programs" such as The FBI "**Run / Hide / Fight**" Active Attacker Training; The Texas State University, Advanced Law Enforcement Rapid Response Training (ALERT) Center

"Avoid / Deny / Defend" Active Attacker Training; and the Monterey County Office of Education (MCOE) approved **"Big Five Safety Protocol"** – **Shelter in Place** (environmental hazards) / **Drop, Cover and Hold On** (earthquake and explosions) / **Secure Campus** (potential threats of violence nearby, continue learning) / **Lockdown & Barricade** (immediate threat of violence on premises) / **Evacuation** (when conditions outside are safer than inside) all hazards training. This MOCO Active Attacker / Criminal Mass Casualty protocol should be discussed with our school districts and our communities to prepare in the event their institutions become involved in an Active Attacker/ Criminal Mass Casualty incident.

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1. DEFINITIONS

A. **Active Shooter / Active Attacker**

- a. An incident, normally occurring in a confined and populated area, during which one or more armed suspects are using deadly force in an ongoing manner and where persons have been killed, injured, or are under imminent threat of death or serious bodily harm by such suspects. Consider the suspect(s) an “Active Attacker” if after law enforcement arrives, the suspect is still active, has access to additional potential victims or injured victims who require lifesaving medical attention, or an immediate active response would be required to save lives.
- b. “Active Attackers” may be heavily armed (i.e., explosives, booby traps, and body armor).
- c. “Active Attackers” may have a planned attack and be prepared for a sustained confrontation with law enforcement.

B. Incident Command System (ICS) A scalable response system of organization used for the command, control, and coordination of emergency operations of all types and complexities. ICS provides a standard management hierarchy that allows personnel from a wide variety of agencies to meld rapidly into a common management structure working toward a single set of objectives as developed through an Incident Action Plan (IAP). Fundamental concepts of ICS include unity of command, span of control, common terminology, and comprehensive resource management. It provides logistical and administrative support to operational staff. ICS is a subcomponent of the National Incident Management System (NIMS) and California's Standardized Emergency Management System (SEMS) and is adopted as the incident management system to be used for operations under this policy.

C. Incident Commander (IC) The person responsible for all aspects of an emergency response, including quickly developing incident objectives, managing all incident operations, application of resources, and responsibility for all persons involved. The role of Incident Commander (IC) *may* be assumed by senior or higher-qualified officers upon their arrival or as the situation dictates. The IC performs all ICS command and staff responsibilities unless those functions are delegated and assigned. The first arriving law enforcement officer, regardless of actions taken, still assumes the responsibilities and functions of the IC until relieved of command by a subsequent arriving officer of higher qualification.

D. Unified Command Unified Command is a team effort that allows all agencies with jurisdictional responsibility for an incident, either geographical or functional, to participate in the management of the incident. Unified Command establishes a common set of incident objectives and strategies that all can subscribe to, without losing or abdicating agency authority, responsibility, or accountability. Those organizations that participate in Unified Command should have statutory responsibility for some portion of the incident or event. Assisting and cooperating agencies with no statutory responsibility that nonetheless contribute resources to the incident should not function at the Unified Command level. These agencies should instead assign Agency Representatives to represent their resources through the Liaison Officer. In these ways, the principles that define Unified Command provide all the necessary mechanisms for organizational representation and interagency management within a multi-agency incident response.

NOTE: To ensure effective communications, command staff at the incident command post should physically stand “shoulder to shoulder.”

- E. **Liaison Officer (LOFR)** A member of the Command Staff responsible for coordinating with representatives from cooperating and assisting agencies. The Liaison Officer may have assistants.
- F. **Forward Control Point (FCP)** The first position of an exterior command element. Occupied by the TGS and RGS, this is situated in the Warm Zone and within view of the crisis site.
- G. **Contact Team** An organized group of 1-4 law enforcement officers who enter an area or building where an active threat is believed to be currently using deadly force. The sole function of the Contact Team is to isolate, capture, or neutralize the suspect(s).
- H. **Corridor Team** Law Enforcement personnel that establish safe and secure evacuation corridors for access and egress for incoming personnel or the safe extraction of victims from critical areas. They may follow the Contact Team's route with the responsibility of searching and securing rooms and areas that were bypassed by the Contact Team and RTFs.
- I. **Rescue Task Force (RTF)** A team deployed into a potential Warm Zone to provide point-of-wound care to victims. This team(s) treats, stabilizes, and rapidly removes the injured under the protection of law enforcement personnel. An RTF may be comprised of 2-4 law enforcement personnel providing force protection along with 2-4 Fire-based EMS providers. RTF functions are very discipline-specific (the primary and sole purpose of fire personnel is the rescue and treatment of injured persons, while the primary and sole purpose of law enforcement personnel is force protection).
Rescue Task Force



- J. **Force Protection** Actions taken by law enforcement to prevent or mitigate hostile actions against response personnel, resources, and facilities. Force protection for fire personnel will only be provided by law enforcement personnel.
- K. **Tactical Group Supervisor (TGS)** A law enforcement officer working from the Forward Control Point, the person responsible for the operations and deployment of tactical team(s), including but not limited to the deployment of the initial responding police officers such as Contact Teams, containment officers, and RTF teams. The Tactical Group Supervisor will work closely with a Rescue Group Supervisor (Fire) on the deployment of fire personnel in RTFs.

- L. **Rescue Group Supervisor (RGS)** A Fire/EMS member working from the Forward Control Point, the person who is responsible for directly supervising rescue operations within the Warm Zone. Working with the TGS, they facilitate the deployment of the RTF, warm zone treatment efforts, and patient extraction.
- M. **Medical Group Supervisor (MGS)** The Fire or EMS supervisor responsible for managing the formal triage, treatment, and transportation of casualties from the incident.
- N. **Transport Group Supervisor** Working from the FCP, oversees directing the ambulance to the exchange point and determining which hospitals the ambulance will transport casualties to.
- O. **Staging Manager(s)** Responsible for managing all activities in the Staging Area, and deploying resources requested by the TGS, RGS, Transport Group Supervisor, or other element leaders. This position is staffed by both Fire/EMS and Law Enforcement, who work cooperatively in the organization and deployment of resources.
- P. **Hot Zone/Active Threat** The area where a direct and immediate threat exists. Activities in this area are restricted to Contact Teams working to isolate, capture, or neutralize the active threat. A direct and immediate threat is very dynamic and is determined by the complexity and unique circumstances of the incident. Fire personnel will not intentionally work in this zone. The IC shall ensure Hot Zone boundaries are established and communicated to on-scene personnel.
- Q. **Warm Zone** The area where a potential threat exists, but the threat is not direct or immediate. The Warm Zone is an area that law enforcement Contact Teams and/or RTF Force Protection officers have moved through and do not observe an active threat. RTFs may and should operate in Warm Zones to deliver life-saving medical care and immediate evacuations under force protection.
- R. **Cold Zone** The area where no significant danger or threat can be reasonably anticipated. This could be achieved by distance, geographic location, or areas inaccessible from the incident. The Cold Zone is the location for staging of resources, ICP, treatment, and transportation of patients.
- S. **Cleared Area** An area that has been initially cleared by Contact Team members and is determined to be safe for RTF. This area may contain Casualty Collection Points (CCPs).
- T. **Secured Area** An area that has been systematically cleared by law enforcement and found to be free of threats. These areas have had secondary searches, and security has been actively maintained.
- U. **Cover** Any physical object or barrier that can provide a responder with protection from gunfire.
- V. **Concealment** An area or object that prevents or limits a suspect's ability to observe a responder, but that may not protect from gunfire.

W. Staging Area The Staging Area is a centralized location in the Cold Zone, near the incident scene where arriving resources will assemble once ready for assignment. It should be close enough to the incident scene to provide timely access but located in an area that is out of the way and not exposed to the incident's hazards. Unless assigned en route by the IC, all arriving extra-jurisdictional resources should respond to the identified Staging Area. Police, fire, and ambulance staging should be co-located in the same area when possible. Ambulance staging locations should have easy access to Patient Treatment Areas. Establishing a Staging Area and Staging Area Manager reduces apparatus and vehicle congestion, enhances emergency scene accountability, and places resources in uncommitted locations close to the scene to facilitate effective assignment by command.

X. Casualty A person injured or killed by an event or situation.

Y. Casualty Collection Point (CCP) Is a location within the Warm Zone, under force protection, where casualties MAY be kept and receive medical until they can be safely moved to a Patient Treatment Area. Fire-based EMS providers will work as RTFs with law enforcement protection in this area. Based on the situation and physical layout of the scene, establishing a CCP may not be advantageous to rapid treatment and transportation of patients. In some cases, patients should be moved directly from where they are found to either a Patient Triage/Treatment Area (Cold Zone) or a transport ambulance.

The physical location of a CCP must provide adequate cover and protection from the potential threat to safety personnel and victims. Consider locating CCPs in the vicinity of adjacent zones to better facilitate moving victims from one zone to another. Identify each CCP with room number/label or physical descriptor to differentiate in the case of multiple CCPs (this communication will aid in collecting accurate victim counts and locations).

Hot, Warm, and Cold Zone perimeters may or may not be contiguous or concentric circles around the threat zone. The building or venue layout may determine the zone perimeters. Hot and Warm Zones may not be static. A Warm Zone may become a Hot Zone due to a change in the location of the threat or due to additional intelligence.

Law enforcement assessment of the threat (sniper, high-caliber weapon, explosive potential, location) will determine the Hot, Warm, and Cold Zone perimeters including CCPs. Communication and status reports from law enforcement Contact Teams are vital. Zone perimeters and CCPs should be approved with the concurrence of the law enforcement and fire agency Unified Commanders.

Z. Triage/Treatment/Transportation Area The Triage Area is located in the Cold Zone and is where the process of determining the priority of patients' treatment based on the severity of their condition occurs. In Monterey County, the Simple Triage and Rapid Treatment/Transport (START) method shall be employed for the assignment of patient acuity levels. Patients shall be moved from the Triage Area to the appropriate Medical Treatment Area when feasible.

a. Triage categories include:

- Black- Dead
- Red- Immediate

- Yellow- Delayed Need
- Green- Walking Wounded

AA. Ambulance Exchange Point (AEP) A specific location where an ambulance is sent to pick up evacuated casualties from a team operating in the warm zone. The ambulance may or may not transport directly to a hospital after picking up casualties, based on the medical needs of the patient.

BB. Patient Treatment Area An area in a multi-casualty event under the control of the Medical Group Supervisor. Patient Treatment Areas should be established in a safe location in the Cold Zone, easily accessible to EMS transport vehicles arriving from medical staging. Patient Treatment Areas are staffed with EMS personnel who provide advanced and basic life support care, stabilizations, and/or packaging of patients before transportation to definitive care.

CC. Evacuation Corridor An area inside the Warm Zone, secured by law enforcement personnel (force protection), that allows for the egress of victims to a CCP, or from the CCP to a triage/ treatment area, in a mitigated risk environment.

DD. Incident Command Post (ICP) The field location at which the primary tactical-level, on-scene incident command functions are performed. The ICP may be collocated with the incident base or other incident facilities and is normally identified by a green rotating or flashing light.

EE. Stop Point Term used to describe a situation in which an RTF alters its objective or encounters a change of conditions that affects its movement (e.g. running out of supplies, encountering an IED, reaching the edge of the Hot Zone, or determining that there are no additional patients). When using this term, the reason should be communicated (i.e., "We've reached a stop point as we have advanced to the edge of the Hot Zone.").

FF. Inner Perimeter The defined area where the suspect(s) or threat are contained, with entry and egress controlled by law enforcement. The Inner Perimeter is considered an Immediately Dangerous to Life and Health (IDLH) zone or Hot Zone.

GG. Outer Perimeter A larger area controlled by law enforcement that encompasses the inner perimeter and the incident support functions, which the public is excluded. This area would include the hot, warm, and cold zones. This zone is utilized to control traffic flow around an incident, exclude unauthorized persons from entering potential danger areas, or otherwise prevent interference with response operations.

HH. Tactical Emergency Casualty Care (TECC) Forward deployment of stabilizing medical interventions in civilian disaster scenarios, based on military Tactical Casualty Combat Care (TCCC) principles. These principles focus on the three most common causes of preventable death in combat (active attacker) situations:

- 1) extremity hemorrhage
- 2) tension pneumothorax
- 3) airway obstructions.

All three conditions are treatable in the field with minimal equipment.

- II. **Family Reunification Center** Is a place where family members can be reunited after an incident or where family members of victims can seek information and services. It should be a location that is near the incident and capable of handling mass numbers of family members, witnesses, or involved parties that will not interfere with incident operations. This should be identified, staffed, and communicated.
- JJ. **Joint Information Center (JIC)** A location that is identified to provide media releases and public information related to the event.
- KK. **Family Assistance Center** This is created after the tactical incident has been resolved and provides financial aid, grief counselors, community partners, and a victim's personal property release point.
- LL. **Law Enforcement Officer (LEO)** Law enforcement personnel.
- MM. **FIRE**- Fire personnel.

2. INITIAL OPERATIONAL PRIORITIES

- I. **Locate, Contain, and Neutralize** - The initial priority for responding law enforcement must be locating, containing, and stopping any active threat.
- II. **Immediate Lifesaving Efforts** – Initiate casualty identification, consolidation, and treatment. All personnel not engaged in locating, containing, or neutralizing threats, or other mission-critical tasks, should immediately engage in locating, consolidating (if advantageous), and treating casualties.
- III. **Triage, Treat, and Transport** – Establish and deploy Rescue Task Forces into the Warm Zone and expeditiously stabilize and move patients to the triage/transportation area.
- IV. **Organize** – Establish Unified Command and robust ICS Organization to effectively execute tactical objectives (evacuation of casualties, triage/treatment operations, containment, secondary searches, reunification, etc.)

3. INITIAL INCIDENT COMMAND SYSTEM (ICS) PRIORITIES

- I. Phases of Command
 - a. Generally, an incident consists of several transfers of command
 - i. The initial responding Law Enforcement Officer (LEO) assumes command
 - ii. The **Tactical Group Supervisor (TGS) (TACTICAL)** assumes command from the initial responding LEO.
 - iii. The **Incident Commander (IC)** assumes command from the TGS.
 - b. Designate Tactical Group Supervisor (TGS) and Rescue Group Supervisor (RGS)
 - i. Engage in the “**5th PERSON**” concept of active attacker incident management. The 5th PERSON concept formalizes the root incident command structure. As the event unfolds, this person will become the Tactical Group Supervisor (**TGS**) and will use the callsign “**TACTICAL.**” This individual will assume command from the first responding LEO until

- relieved by a higher authority who accepts Incident Command (IC). The Tactical Group Supervisor (TGS) will designate the **Forward Control Point (FCP)**.
- ii. After sufficient resources are committed to locate, contain, and neutralize the objective, establishing **Rescue Task Forces (RTF)** becomes the priority.
 - iii. At this point, the **Rescue Group Supervisor (RGS)** and **Transport Group Supervisor** can co-locate with the Tactical Group Supervisor (**TGS**). This will result in the clear communication of needs between law and fire/med personnel within the scene and will promote the expeditious deployment of Rescue Task Force (**RTF**) members and the movement of injured subjects from the scene to triage.
- c. Request additional resources based on conditions, actions, and needs relayed from engaged units.
 - i. Mutual Aid, Ambulances, Traffic Control, Evacuee Transportation, Specialized Units.
 - d. Designate a Staging Area and Staging Manager
 - i. Identify a location for resource management and request a unit to assume Staging Manager duties.
 - e. Establish Unified Command and a Command Post
 - i. Supervisors (law enforcement and fire) should assume the IC role from initial responding units to form Unified Command in the Cold Zone.
 - ii. Co-location of law and fire incident commanders will aid in establishing unified command and expedite the sharing of incident information.
 - f. Designate Law and Medical Groups
 - i. After sufficient resources are committed to the Rescue Task Force (**RTF**) objective, addressing other law enforcement tasks, and establishing triage/treatment/transportation areas becomes the priority.
 - g. Designate Task Groups as indicated by incident status
 - i. Fire, HazMat, EOD, etc.
 - h. Designate Press Information Officer (PIO)
 - i. As soon as it is practical, without detracting from lifesaving or life safety efforts, initiating the process of collecting and disseminating information to internal and external stakeholders becomes the priority.
 - i. Designate other ICS positions
 - i. Logistics, Planning, Safety, Administration, etc.
 - j. Consider and implement recovery phase efforts as indicated by incident status.
 - i. If indicated, establish an EOC, Joint Information Center, Reunification Center, etc.

4. AGENCY RESPONSE TO AN ACTIVE ATTACKER

- I. Factors
 - a. Because of the many varying factors that can influence an Active Attacker / Criminal Mass Casualty Incident, it is best to have a set of sound tactical principles to use as they fit the needs of the incident instead of one universal tactical policy:
 - i. Field officers and supervisors should be capable of distinguishing between an Active Attacker event and a traditional criminal action (e.g., a

hostage/barricade situation), and be able to direct an appropriate immediate tactical response to either event.

- ii. All personnel involved in the response must seek to realistically assess the initial situation and the perceived threats involved (e.g., number of suspects, skill level, types of weapons). As the incident unfolds, responders must continually reassess the situation and the effectiveness of the response.
- iii. Law Enforcement must be prepared to take immediate steps to neutralize or resolve life-threatening conditions.
- iv. The actions of all responders should be consistent with their statutory authority, training, certifications, and the responsibilities of their employing agency. However, unusual assignments are likely, and all responders should expect that they may be assigned to perform tasks they have not experienced in past incidents.
- v. Care and evacuation of the injured victims must be initiated as soon as practical following neutralization or containment of the active threat.

II. Law Enforcement Officer (LEO) Response – Initial Officer

- a. The first arriving officer should move immediately to the threat and relay relevant information to other responding units to help direct their initial actions.
 - i. Assess the situation and determine whether the incident is active or passive. Deploy swiftly and immediately if:
 1. Suspects actively engaged in causing death or great bodily injury.
 2. The incident location is believed to contain the victim(s) in need of life-saving medical care.
 - ii. Provide a **SIZE UP REPORT - Location, Condition, Action, Needs (LCAN)**
 - iii. Identify the Hot Zone.
 - iv. Establish Command.
 - v. Assume the call sign of "**CONTACT 1**" via radio.
 - vi. Additional officers should self-deploy into the Active Attacker incident as quickly as possible and from as many locations as possible. If geographically capable, additional officers should link with **CONTACT 1** until a 4-person element is created.
 - vii. Officers responding and unable to link with **CONTACT 1** should assume the callsign "**CONTACT 2.**"
 - viii. Bypass injured victims.
 - ix. Be aware of the possibility of secondary threats.

III. Contact Team

- a. The **Contact Team** is an organized group of 1-4 Law Enforcement Officers (LEO) who enter an area or building where an active threat is believed to be currently using deadly force or preventing injured victims from receiving lifesaving medical treatment.
- b. The sole function of a **Contact Team** is to locate, contain, and neutralize the suspect(s) by containment, arrest, or deadly force.
- c. A **Contact Team(s)** should continue past victims in pursuing active threats.
- d. Maintain communications with the dispatch center to indicate the direction of travel, victim locations, and suspect(s) location.

- e. Movement is made in a direction, in conjunction with other **Contact Teams** to “**shrink the perimeter**” and locate the suspect(s).
- IV. 5TH Person Concept – Tactical Group Supervisor (TGS) “TACTICAL”
- a. This role focuses on controlling the actions inside the inner perimeter so help can reach people as quickly and effectively as possible. They should be positioned near the scene at the **Forward Control Point (FCP)**. This person will remain as **TACTICAL** until relieved by higher authority.
 - i. Assume the call sign **TACTICAL**
 - ii. Receive briefing from **CONTACT 1**
 - iii. Assume Command
 - iv. Set **Staging Area** location for incoming LE and Fire Resources
 - v. Request additional resources
 - vi. Assign additional **Contact Teams**
- V. Law Enforcement Officer (LEO) Response – Initial Supervisor
- a. Receive briefing from **TACTICAL**
 - b. Assume **INCIDENT COMMAND** and establish **UNIFIED COMMAND** with Fire Department (**FIRE**).
 - c. Set Command Post (**CP**) location.
 - d. Assign **STAGING MANAGER**.
 - e. Assign **PERIMETER GROUP**
 - f. Assign **MEDICAL BRANCH** to **FIRE/EMS** supervisor and initiate **UNIFIED COMMAND**
 - g. Provide Dispatch with an initial overview, including:
 - i. Location, number description of suspects.
 - ii. Types of weapons involved.
 - iii. Safe approach routes.
 - iv. **CP** Location
 - v. **STAGING** area Location
 - vi. Number of known victims.
 - h. Request appropriate resources
 - i. Prioritize deployment of arriving units.
- VI. Law Enforcement Officer (LEO) Response – Second Supervisor
- a. Receive briefing from Initial Supervisor
 - b. Assume Incident Command (**IC**)
 - c. Request additional resources.
 - d. Designate the Initial Supervisor as **Law Enforcement Branch** of Incident Command System (**ICS**)
 - e. Assign **Intelligence Section** of ICS
 - f. Assign a Press Information Officer (**PIO**) to establish a **Joint Information Center (JIC)**
 - g. Assess **TACTICAL** and re-assign as necessary.
- VII. Fire Response (FIRE)
- a. Establish **Unified Command** with law enforcement and develop **Unified Tactical Objectives**.
 - b. Determine cause/mechanism and current threat. Establish **HOT, WARM, and COLD Zones** accordingly.

- c. Identify **Incident Command Post (ICP)** and **Staging Area Locations**.
 - d. Control “Walking Wounded” and assist with rapid egress of victims.
 - e. Estimate patient count and location(s).
 - f. Request appropriate resources via the appropriate Fire Communications channel to accomplish tactical objectives.
 - g. Identify safe travel routes to and from the incident.
 - h. Coordinate with law for potential deployment of **Rescue Task Forces (RTF)s**.
 - i. Establish **Medical Branch/Group, Rescue Group, Triage/Treatment/Transportation Groups** and **Areas as needed**.
 - j. Determine support needs (i.e., Overhead Support Team, Mobile Command Center, etc.)
- VIII. Rescue Task Force (RTF)
- a. The objective of the **Rescue Task Force (RTF)** is to identify/triage, treat, stabilize, and rapidly remove the injured under force protection.
 - b. Notify **TACTICAL** when deploying from the Staging Area to ensure awareness by **TACTICAL** and **CONTACT** teams.
 - c. If not already done, establish a **Casualty Collection Point (CCP)** in consultation with **TACTICAL**. A **Rescue Task Force (RTF)** may directly evacuate victims to the **Triage/Treatment/Transportation Area** depending on incident status, victim condition, available personnel, and distance to be traveled.
 - d. **RTFs** may be task-focused by the **RGS** (i.e., one **RTF** can focus on moving victims to a **CCP** while a second **RTF** focuses on providing care in the **CCP** and a third **RTF** focuses on moving victims from the **CCP** to the **Triage/Treatment/Transportation area**). The focus of an **RTF** may change depending on the **RTF’s** supplies and capability.
 - e. FIRE personnel may work independently within a protected corridor with approval from the **RGS**.
 - f. Establish an **Ambulance Exchange Point (AEP)** in conjunction with **TACTICAL**. Security should be staged at the **AEP**.
- IX. Initial Rescue Task Force (RTF)
- a. The **Initial** Rescue Task Force (**RTF**) should immediately engage in reconnaissance and rapid triage of victims to begin to understand the scope of the incident and request appropriate resources.
 - b. Assign one member of the **Initial RTF** as **Rescue Group Supervisor (RGS)** and have them at the **Forward Control Point (FCP)** as the remainder of their crew deploys as an **RTF**. The **RGS** should co-locate with **TACTICAL** and will coordinate rescue efforts with the **Tactical Group Supervisor (TGS)**. The **RGS** will utilize the callsign **RESCUE GROUP SUPERVISOR** and maintain radio communications via the established FIRE/EMS radio channel.
 - c. Patients encountered with an IMMEDIATE life threat which can be addressed QUICKLY can be treated before resuming reconnaissance and triage.
 - d. Based on incident conditions (geographic size, number of patients, activity level of suspects) the **Initial RTF** may designate or establish **Casualty Collection Points (CCP)s**.
- X. Communications Centers

- a. Once advised of an “Active Attacker” incident by personnel on-scene, clear a channel, and advise all units of such. Notify other agencies immediately by radio or phone.
- b. Advise all units of the location, specific threats, shots fired, suspect description, location of the reporting party, injuries, and any other pertinent information.
- c. Confirm that the Watch Commander/Field Supervisor is aware/en route to the scene.
- d. Advise all available units from the agency of jurisdiction to respond.
- e. If an active attacker incident is confirmed, initiate a “**CODE RED**” response.
- f. Pending confirmation of an active attacker incident, the supervisor of jurisdiction shall request mutual aid as necessary.
- g. Dispatch appropriate FIRE and EMS resources.
- h. Request tactical air resources.
- i. Notify those within your agency that need to be notified (administration, management, etc.)
- j. Maintain limited traffic on the main channel. Prepare multiple encrypted and unencrypted County-Wide Radio Talk Groups (channels, frequencies) for use by different elements.

5. INCIDENT COMMAND

I. Unified Command

- a. As early as practical during an incident, a **JOINT COMMAND POST** should be established by supervisors from each responding discipline (**LAW, FIRE, and EMS**). As an incident progresses, representatives from supporting disciplines/agencies and from impacted entities should be included in the **Incident Command System (ICS)** structure as appropriate. **Unified Command** will work cooperatively per **ICS** Principles.
- b. Incident Commander (IC)
 - i. Activate the **Incident Command System (ICS)**/establish an **Incident Command Post (ICP)**.
 - ii. Identify and implement common incident objectives.
 - iii. Create an incident organization commensurate with the current situation.
 - iv. Provide operational and logistical resources sufficient to mitigate the situation and/or support extended operations.
 - v. Provide for the safety of citizens and responding personnel.
 - vi. Provide timely and accurate information and notifications.
- c. Safety Officer (SOF)
 - i. If designated by the **Incident Commander (IC)**, a Safety Officer (**SOF**) develops and recommends measures for assuring personnel safety and assesses and/or anticipates hazardous and unsafe situations. The **Incident Safety Plan** shall contain strategies and tactics developed by the **SOF** based on the **IC’s Incident Objectives** and the type of incident. One **SOF** will be assigned at each incident, but assistants may be designated as necessary. Responsibilities may include:
 1. Prepare and enforce the **Medical Plan**.
 2. Investigate and report all accidents.
 3. Monitor the physical and mental health of responders.

4. Assign Assistant Safety Officers as necessary.
- ii. The Safety Officer will ensure the following:
 1. **Inner/Outer Perimeter** and **Control Zones** are established and communicated to all personnel.
 2. The **Incident Command Post (ICP)** is in a safe and secure area.
 3. Adequate Force Protection for the ICP, Triage/Treatment/Transportation Area, Staging Area, and other functional areas.
 4. All personnel are adequately briefed before entering Warm/Hot Zones.
 5. Appropriate Personal Protective Equipment (PPE) and tools are available and in use.
 6. Adequate rehabilitation processes and facilities are in place relative to duration, exertion levels, and environmental conditions.
 7. Apparatus and vehicles are parked in a manner to provide for easy ingress and rapid egress for changing conditions.
 8. A Safe Landing Zone is established, if necessary.
- d. Public Information Officer (PIO)
 - i. If designated by the **Incident Commander (IC)**, the **Public Information Officer (PIO)** serves as the official conduit of information from the **Command Post (CP)** to the public and the media. All communications related to the incident will be approved and distributed by the **PIO**. Public contact with the **PIO**, and/or establishing a **Joint Information Center (JIC)** shall NOT occur at the **CP** and will be a safe distance from the incident. The **IC/Unified Command** shall approve any information released to the **PIO** or directly to the media.
 - ii. Utilize a Joint Information Center (**JIC**). Do NOT co-locate the JIC at the **Incident Command Post (ICP)**.
 - iii. Develop a plan for media announcements regarding the **Family Reunification Center** for parents/relatives of victims.
 - iv. Consider the use of social media and emergency notification systems to disseminate information to the community. Utilize the Monterey County Department of Emergency Management to issue alerts when necessary.
 - v. Designate a media staging area and communicate its location to the media.
 - vi. Coordinate with the Monterey County Department of Emergency Management to provide additional PIO support.
 - vii. Ensure the Monterey County Emergency Communications Department has PIO contact information available for authorized media representatives.
- e. Planning Section Chief (PSC)
 - i. If designated by the Incident Commander (**IC**), the Planning Section Chief (**PSC**) is responsible for the collection, evaluation, dissemination, and use of information about the development of the incident and the status of resources. The **PSC** is also responsible for facilitating the **Planning Process**. For extended incidents, discipline-specific **Deputy PSC** should be considered to address planning needs specific to the mission set.

- ii. The **IC** should ensure that a specific Law Enforcement Officer (**LEO**) is designated as the **PSC** or **Deputy PSC**. This **PSC LEO** shall be responsible for coordinating incoming information and serve in the central role in the creation of the **Law Enforcement Report** after the incident.
- iii. The **PSC** Coordinates the collection of pertinent investigative information on the situation and suspect(s) including:
 - 1. Identity
 - 2. Crimes committed, intent
 - 3. Additional threats
 - 4. Residence and vehicle(s)
 - 5. Known associates
 - 6. Secondary victim locations
 - 7. Ensure that, as reasonably practicable, escaping innocent persons are identified, separated, and interviewed promptly.
 - 8. Process information to develop new intelligence about the suspect and the situation
 - 9. Arrange for additional investigation and information gathering.
 - 10. Ensure accurate information is gathered regarding the identities, locations, and status of any persons involved in or seriously affected by the incident.
- iv. The Planning Section Chief (**PSC**) or **Deputy PSC** not assigned to intelligence shall be responsible for the collection, evaluation, dissemination, and use of information about the development of the incident and the status of resources.
 - 1. This person is also responsible for the **Planning Process** and to facilitate preparation of the **Incident Action Plan (IAP)**, including:
 - a. Situation Status
 - b. Resource Status
 - c. Technical Specialists
 - d. Incident Demobilization
- f. Logistics Section Chief (**LSC**)
 - i. If designated by the **Incident Commander (IC)**, the Logistics Section Chief (**LSC**) is responsible for providing facilities, services, and supplies in support of the incident. For extended incidents, discipline-specific **Deputy LSC** should be considered to address logistical needs specific to the mission set.
 - 1. Designated as the primary authority to order resources.
 - 2. Establish single-point ordering
 - 3. Medical unit
 - 4. Food
 - 5. Personnel rotation
 - 6. Communications
 - 7. Transportation
 - 8. Supplies
 - 9. Specialized teams/equipment
 - 10. Hygiene and restroom access

6. INCIDENT COMMUNICATIONS

- I. Communications Plan
 - a. Initially, responding personnel should communicate using their assigned radio frequencies unless otherwise directed by the Incident Commander (**IC**), and after receiving approval from the Communications Center.
 - b. At the discretion of the **IC**, units of the same functionality should be advised to utilize common radio frequencies to facilitate inter-agency communication.
 - c. Law Enforcement and Fire/EMS personnel should maintain separate frequencies designed to accomplish their specific missions. The co-location of Law and Fire/EMS units, such as RTF, TGS/RGS, and Unified Command is essential for direct and precise communication and shall be made a priority.
 - d. The **IC** may assign common frequencies to specific tasks, i.e., **PERIMETER GROUP, MEDICAL BRANCH, TACTICAL**, etc.
 - e. Cross-discipline radio communication and the distribution of mission-critical information needs to be facilitated by the Command Post (**CP**). Incident Command System (**ICS**) staff should consider monitoring radio frequencies assigned to other disciplines as appropriate and available.

7. OPERATIONS

- I. Operations Section Chief (OSC)
 - a. If designated by the Incident Commander (**IC**), the **Operations Section Chief (OSC)** is responsible for all actions directed at accomplishing **Tactical Objectives** within the incident. When practical, the **OSC** should be supported by a **Deputy OSC** of a complementing discipline (a **LEO OSC** should have a **FIRE Deputy OSC** or vice versa). Shifting tactical objectives may indicate transitioning the **OSC** to a discipline more in line with the new objectives (LAW, FIRE). In the initial phases of the event, it may work best with LAW serving as the OSC with FIRE servicing as the Deputy OSC. This arrangement provides the discipline-specific expertise/technical knowledge necessary to establish the division assignments in support of the overall **Incident Objectives**. If the incident transitions from a threat-neutralization focus to a patient treatment/transportation focus, the **IC** may elect to transition the LAW Officer out of the OSC position, replacing them with the FIRE Deputy OSC. Likewise, if the patient treatment/transportation piece of the event is complete, the **IC** may demobilize the Deputy OSC position. The OSC and Deputy OSC shall work cooperatively to:
 - i. Gather information from active field units
 - ii. Identify critical factors and establish **Tactical Objectives**
 - iii. Directs activities of assigned Divisions/Groups
 - iv. Identify and establish **Staging Area(s)** if not already completed
- II. Tactical Group Supervisor (TGS)
 - a. The **Tactical Group Supervisor (TGS)** shall have specific operational control of the crime scene and **Law Enforcement Operations** from the **Inner Perimeter forward**, working from the **Forward Control Point (FCP)**. The **TGS** should be a supervisor from the law enforcement agency having primary jurisdiction over the incident. This person may replace the initial officer designated as **TACTICAL**. It shall be the responsibility of the Tactical Group Supervisor (**TGS**), upon the

- direction of the Incident Commander (**IC**), to supervise the **Tactical Response** segment of the **Plan of Action**.
- b. The **Tactical Response** shall be designed to affect a timely and effective resolution of the incident.
 - c. The scope of this response shall depend on the known threat conditions, available law enforcement resources, and the likelihood of a successful **Tactical Intervention**.
 - d. The **objective(s)** of the **Tactical Response** shall be:
 - i. Stop the criminal acts being committed by either eliminating the threat or by confining the suspect(s) to a point where the threat to others is eliminated.
 - ii. Protect against or minimize injuries or the loss of life to victims, hostages, citizens, or residents and officers who may be so imperiled.
 - iii. Apprehend suspect(s) and secure a crime scene.
 - iv. Protect against or minimize the loss of property.
 - e. Although terminology may differ among agencies and tactics will depend upon the nature of the situation and the availability of resources, it is of paramount importance that the Incident Commander (**IC**) consider the following basic contingencies and universal priority:
 - i. **Contact Teams**
 1. Move quickly toward the location of the active Attacker
 2. Report the location of the threat to the **IC**
 3. Stop the threat by utilizing the appropriate level of force for the situation.
 4. Communicate the location of injured victims for the **Rescue Task Force (RTF)**.
 - ii. **Rescue Task Force(s) (RTF)**
 1. Coordinates with **Rescue Group Supervisor (RGS)**
 2. Determines the need and location of the **Casualty Collection Point (CCP)**
 3. Determines the need and number of **Rescue Task Force (RTF)s**
 4. Provides force protection for **RTF**
 5. Provide briefing to RTF FIRE and LEO Officer
 - iii. Point of radio contact for LEO personnel in the **Rescue Task Force (RTF)**
 1. Directs route of travel and destination of **RTF**
 2. Identifies **Evacuation Corridors** and maintains overall security of these corridors
 - iv. **Corridor Teams**
 1. Establish safe and secure evacuation corridors for access and egress for incoming personnel or the safe extraction of personnel from critical areas.
 2. Follow the **Contact Team's** route with the responsibility of searching and securing rooms and areas that were bypassed by the **Contact Team** and **RTFs**
 3. Stand prepared to assist either the **Contact Team** or **RTF**.
 - v. Once the **Tactical Response** segment of the Plan of Action is initiated, the Tactical Group Supervisor (**TGS**) will work with the Rescue Group Supervisor (**RGS**) to coordinate the formation and deployment of the **RTFs** into the **Warm Zone**.

- vi. The Tactical Group Supervisor (**TGS**) shall maintain a timely and continual line of communication with the Incident Commander (**IC**), keeping them apprised of all progress and significant developments.
- vii. The **Tactical Response** shall continue until such time as the threat is captured or neutralized.
 - 1. The Tactical Group Supervisor (**TGS**) shall immediately inform the Incident Commander (**IC**) when the threat is isolated, captured and/or neutralized.
 - 2. The **IC** shall provide further direction to the Tactical Group Supervisor (**TGS**) and make other notifications consistent with agency protocol and chain of command.
 - 3. In the event of neutralization, the **IC** shall make immediate arrangements for:
 - a. Site security
 - b. Medical assistance to victims
 - c. Preservation of the crime scene
 - d. Initiation of the investigative process
 - e. Preparations for a return to normal activity
 - 4. In the event a situation is neutralized, the **IC** shall evaluate the situation for the appropriate deployment of additional tactics and resources.

III. Rescue Group Supervisor (**RGS**)

- a. If designated by the Incident Commander (**IC**), the **Rescue Group Supervisor (RGS)** is a **FIRE** supervisor responsible for coordinating the treatment and extraction of viable patients from the **Warm Zone** to the **Triage/Treatment/Transportation Area**. The **RGS** coordinates with the Tactical Group Supervisor (**TGS**) to secure force protection for the Rescue Task Force (**RTF**) and **Safety Corridors** and to initiate **RTF Operations**. The **RGS** should be co-located with the Tactical Group Supervisor (**TGS**).
- b. The Rescue Group Supervisor (**RGS**) coordinates with the Tactical Group Supervisor (**TGS**)
 - i. Determines the need and location of the **Casualty Collection Point (CCP)**
 - ii. Determines the need and number of Rescue Task Forces (**RTF**)s based on:
 - 1. Victim count and ambulatory status.
 - 2. Casualty Collection Point (**CCP**) needs.
 - 3. Available resources
 - iii. Provides briefing to Rescue Task Force (**RTF**) **FIRE** and Law Enforcement Officers (**LEO**).
 - iv. Coordinates extraction and movement of patients from **Warm Zone CCP** to **Patient Triage/Treatment/Transportation Area**.
 - v. Designates launch area for **RTF**.
 - 1. An area in the **Cold Zone** should provide both cover and concealment.
 - 2. **FIRE** and **LEO** personnel report to the area in full Personal Protective Equipment (**PPE**) with tactical, mission-specific EMS kits, and patient extraction equipment.
 - 3. Access to established evacuation corridors.

- vi. Point of radio contact for **FIRE** personnel in **RTF**
 - 1. Communicate patient information from **RTF** to the Medical Group Supervisor (**MGS**).
 - 2. Coordinate with the Tactical Group Supervisor (**TGS**) regarding patient location and **CCP** location within the **Warm Zone**.
- vii. Rescue Task Force (**RTF**) Procedures
 - 1. **RTF** can be deployed to provide the following:
 - a. Provide point of wound care where there is an ongoing ballistic or explosive threat.
 - b. Threat, stabilize, and provide patient movement in the **Warm Zone** or from the **Warm Zone** to the **Cold Zone**.
 - c. Movement of supplies from **Cold Zone** to **Warm Zone**.
 - d. Other duties deemed necessary to accomplish the mission.
 - 2. **Initial** Rescue Task Force (**RTF**)s
 - a. Primary objective is to reduce mortality using life-saving interventions for rapid hemorrhage, tension pneumothorax, and airway control in accordance with Tactical Emergency Casualty Care (**TECC**) guidelines.
 - b. **RTF** shall advance in the **Warm Zone** treating as many patients as possible until they reach the furthest accessible patient, stop point, or run out of supplies. The **RTF** should communicate the number of patients, location, and the extent of injuries (Red, Yellow, Black) back to the Rescue Group Supervisor (**RGS**) and begin extracting the furthest patients to the Casualty Collection Point (**CCP**) or Patient Triage Area.
 - c. Activities of **RTFs** in the **Warm Zone** will transition from treating patients where they lie to extracting them to **CCPs** or the **Triage Area**. This will occur as the number of available **RTFs** outstrips the number of patients who have not yet been contacted.
 - 3. **Additional** Rescue Task Force (**RTF**)s
 - a. Provide stabilizing treatment of patients.
 - b. Extracting/evacuating critical patients identified by initial **RTFs** to **Patient Triage/Treatment/Transportation Area** or **CCP**.
 - c. Provide secondary care to patients in established **CCP**.
 - 4. Law Enforcement Officer (**LEO**) personnel assigned to **RTF**
 - a. Will provide security and control movement of **RTF**. They should not assist with any patient care or movement of patients.
 - b. Shall remain with the **RTF** and should not separate themselves from **FIRE** personnel. There may be instances where the **Warm Zone** suddenly becomes a **Hot Zone**. The **LEO** members of the **RTF** must be able to immediately respond to that threat to ensure the safety of the team.
 - 5. Rescue Task Force (**RTF**) - **Deployment**
 - a. **RTF** should move in and out of the **Warm Zone** only through entrances and corridors cleared by initial **Contact**

- Teams** as identified by the Tactical Group Supervisor (**TGS**).
- b. Initial **RTF** continues moving through the **Warm Zone** until they run out of medical supplies or patients. At that time, they can start extracting patients to the **CCP** or **Triage Area**.
 - c. **RTF** shall be identified numerically in order of deployment (i.e., **RTF 1**; **RTF 2**; etc.)
 - d. **RTF** will not deploy with less than 2 **LEO** members for force protection and will not self-deploy into the **Warm Zone**.
 - e. **RTFs** must be able to move quickly. As such, it is generally not advisable for them to be equipped with defibrillators, large drug boxes, gurneys, or other equipment that can affect their agility.
6. **Rescue Task Force (RTF) - Communications**
- a. The **FIRE** team leader and the **LEO** team leader within the **RTF** will engage in continuous face-to-face communication.
 - b. **FIRE** team leader in **RTF** shall maintain communication with the Rescue Group Supervisor (**RGS**) via radio.
 - c. **LEO** team leader in **RTF** shall maintain communication with the Tactical Groups Supervisor (**TGS**) via radio.
7. **Situational Awareness**
- a. All **RTF** members must maintain situational awareness and report to **LEO** force protection if they see a weapon, explosive device, or any unusual situation.
 - b. The **RTF** will identify areas of safe refuge as the team moves through the **Warm Zone**.
 - c. If the zone in which the **RTF** is operating changes from a **Warm Zone** to a **Hot Zone** due to a direct or immediate threat, **LEO** force protection personnel will direct the immediate evacuation of the **RTF** team to appropriate cover.
 - d. The suspect(s) may be among the victims. Fire/EMS personnel will be aware of the potential for casualties to possess weapons or other dangerous items and shall notify an **LEO** if an item is located.

IV. **Medical Group Supervisor (MGS)**

- a. The Medical Branch Supervisor manages the medical tactical element within the Incident Site. The Medical Branch Supervisor (**MGS**) supervises the Triage, Treatment, and Transportation groups.
- b. If designated by the Incident Commander (**IC**), The Medical Group Supervisor (**MGS**) is **FIRE** or **EMS** personnel responsible for managing the formal triage, treatment, and transportation of casualties from the incident. Operates in the **Cold Zone**.
- c. Provides for the rapid triage, treatment, and transportation of injured persons.
- d. Establishes/manages **Patient Treatment Areas**.
- e. Provides tracking of patient transport.

- f. Responsible for overall medical treatment and transportation accountability.
 - g. Litter or SKED operations.
 - h. Develop a traffic plan for the ingress, loading, and egress of ambulances.
 - i. Identify and secure the **Landing Zone (LZ)** in coordination with **LEO**.
 - j. Consider directing personnel to impacted hospitals to serve in MCI roles.
- V. Triage Group Supervisor**
- a. Responsible for communication with the initial point **Triage / CCPs** outside of the warm zone, and the movement of patients to the treatment area in accordance with Monterey County MCI policy.
- VI. Treatment Group Supervisor**
- a. Responsible for establishing and operating a Treatment Area at a suitable location.
 - b. Responsible for the re-triage of extricated casualties.
- VII. Transport Group Supervisor**
- The Transportation Group Supervisor (normally the first transport agency representative having jurisdiction, paramedic supervisor, or transporting paramedic on-scene) is responsible for providing and coordinating patient transportation and destination. This individual is responsible for maintaining records regarding patient destination and ensuring the role of Medical Communications Coordinator is filled as needed.
- a. Assigned based on the agency of jurisdiction.
 - b. Responsible for the coordination of casualties from the **AEP** to the correct hospitals.
 - c. Determine the required ambulance count based on information from the **RGS**.
 - d. Verify best routes to approved medical facilities.
 - e. Determine available capacity and various hospitals.
 - f. Coordinate air assets as necessary.
 - g. Ideally, co-located at the **FCP** with the **TGS** and **RGS** to allow rapid coordination.
- VIII. Medical Communication Coordinator**
- a. Reports to the Transportation Group Supervisor.
 - b. Assists in coordinating patient destinations
 - c. Responsible for communications with Fire Comm, EMS Dispatch, and receiving hospitals.
- IX. FIRE Group Supervisor (FGS)**
- a. If designated by the Incident Commander (**IC**), the FIRE Group Supervisor (**FGS**) is responsible for the coordination and supervision of the suppression of fires and non-EMS operational **FIRE** discipline needs of the incident (i.e., fire suppression, US&R, HazMat, etc.)
 - b. Assist **LEO** with the evacuation of non-injured/walking wounded to appropriate collection points.
 - c. HazMat
 - i. Hazard mitigation.
 - ii. Patient/Responder decontamination.
 - d. FIRE suppression
 - i. Attack strategy (offensive vs. defensive).

- ii. Consider unstaffed master streams.
- iii. Fast attack.
- iv. Limited salvage, overhaul, ventilation.
- v. Pre-plan water sources and routes into the incident.
- e. Mitigate Immediate Danger to Life/Health (**IDLH**) conditions by extinguishment, denying entry, or isolation.
- f. Utility control.

X. **Law Group Supervisor (LGS)**

- a. If designated by the Incident Commander (**IC**), the Law Group Supervisor (**LGS**) is responsible for all law enforcement functions not under the supervision of the Tactical Group Supervisor (**TGS**). The **LGS** should be a supervisor from the law enforcement agency with primary jurisdiction.
 - i. Outer Perimeter and access points.
 - ii. Coordinates **Force Protection** for Incident Command Post (**ICP**) and other **Cold Zone** operations including search for secondary threats.
 - iii. Witness coordination.
 - iv. Coordinate the criminal investigation. For incidents resulting in an Officer Involved Shooting (OIS), refer to the Monterey County Chief Law Enforcement Officer's Association (MCCLEOA) *Officer-Involved Incident Guidelines*.
 - v. **Family Reunification Center** – Near the incident and capable of handling mass numbers of family members, witnesses, or involved parties that will not interfere with incident operations should be identified, staffed, and communicated.

XI. **Casualty Collection Point Supervisor (CCPS)**

- a. The Casualty Collection Point Supervisor (**CCPS**) is a **FIRE** supervisor responsible for the short-term collection, sorting, and limited first aid treatment of patients for rapid removal as soon as reasonably practicable to the **Triage/Treatment/Transportation Area**. The **CCPS** initially reports to the Rescue Group Supervisor (**RGS**).
- b. Formal triage procedures may or may not be initiated or completed at the **CCP** depending on conditions, patients, resources, etc.
- c. Point of wound medical stabilization should occur before evacuation to **CCP**. However, in extended incidents, ongoing treatment and/or advanced life support may be delivered in **CCP**.
- d. Efforts should be made to not bring uninjured or deceased persons to the **CCP**.
- e. Patient tracking should be instituted at the **CCP** to ensure accountabilities for all patients. Every attempt should be made to ensure that patients have been searched for weapons inside the **CCP** and before movement to a **Triage/Treatment/Transportation Area**.
- f. The **CCPS** provides the **RGS** and **Transport Group Supervisor** with current information on patients (e.g., total, acuity levels, and resource needs.)

8. RESPONSIBILITIES OF ALLIED/ADJOINING LAW ENFORCEMENT AGENCIES

- I. Upon notification of an Active Attacker /Criminal Mass Casualty event, the allied jurisdiction field supervisors shall immediately initiate the process of staging available

resources to appropriate locations that could complement a timely response if deployment of resources is requested.

- II. It shall be the primary responsibility of the ranking allied agency field supervisor, watch commander, or senior field officer on duty, to evaluate the nature of the developing Active Attacker Incident and to deploy available resources consistent with that evaluation. The officer or supervisor who initiates that decision shall proceed only under the following conditions:
 - a. Any deployment shall be concurrent with the notification of the agency of jurisdiction via Monterey County Emergency Communications.
 - b. Self-deployment without notification and concurrence of the agency of jurisdiction shall only commence after all reasonable attempts to notify the agency have failed.
 - c. In all cases involving a decision to deploy law enforcement resources to an allied jurisdiction, the ranking agency field supervisor, or senior field officer who initiates that decision, shall ensure all proper notifications consistent with that agency's chain of command are complied with or initiated.
 - d. Law Enforcement resources responding from an allied jurisdiction should respond to the designated staging area unless otherwise directed.
- III. If ALL resources of the agency of jurisdiction are deployed in the incident, it shall be the responsibility of the initial arriving units from adjoining jurisdictions to evaluate the need to establish Incident Command.
- IV. Officers responding to an Active Attacker incident in plain clothes shall notify the dispatch center and provide a description of their clothing. Officers displaying firearms shall verbally identify themselves as law enforcement and conspicuously display a badge and/or law enforcement identification to other law enforcement officers, security personnel and/or armed civilians present. Plainclothes officers should holster firearms prior to contact with uniformed officers (if safe to do so) and comply with the orders of uniformed officers.

9. RESPONSIBILITIES OF ALLIED/ADJOINING FIRE AGENCIES

- I. Upon receiving information that an Active Attacker Incident is occurring the Monterey County Emergency Communication Dispatch Center will initiate FIRE and EMS resource dispatching per preloaded alarm assignments or based on input from responding units.
- II. FIRE and EMS units are to adhere to their home agency's policy for self-attaching or self-dispatching to a reported Active Attacker Incident in their jurisdiction.
- III. FIRE and EMS units are not to self-attach or self-dispatch to a reported Active Attacker Incident in another jurisdiction unless a standing policy between the two agencies exists.
- IV. All FIRE and EMS units responding to a reported Active Attacker Incident are to mass at the designated staging location(s) until given an assignment and reporting location from the Incident Commander (IC), or other incident command and control authority.

- V. FIRE and EMS units are to remain in the Cold Zone until Force Protection is secured and the appropriate Incident Command System (**ICS**) position (**IC**, Rescue Group Supervisor (**RGS**), Fire Group Supervisor (**FGS**), etc.) has given them direction to do so.
- VI. The standard PPE for FIRE units responding to a reported Active Attacker Incident is a ballistic vest and helmet, eye protection, medical gloves, radio, and limited medical gear specifically for treating trauma and evacuating casualties. Flashlights and breaching tools should also be considered based on incident specifics or requests.
- VII. Any personnel responding to a reported Active Attacker Incident in civilian clothes and/or by private vehicle need to check in with the Staging Manager and take active steps to make their presence and status known and to make themselves easily identifiable as FIRE personnel. Any personnel in plain clothes must always comply with the orders and instructions of any uniformed personnel.

INCIDENT SUPPORT CONSIDERATIONS

1. Consider activation of the agency’s Emergency Operations Center.
2. Consider resources and assistance provided by the Monterey County Department of Emergency Management.
3. Consider a local disaster declaration.
4. Consider establishing a Reunification Center to reunite family members, employees, etc.
5. Consider establishing a Family Assistance Center (FAC). Consider using community organizations and the Federal Bureau of Investigations to support the FAC.
6. Consider establishing a Witness Collection Point.
7. Consider establishing a “tip line” or information line.
8. Consider establishing a base to support the “expanding incident.”
9. Work with Monterey County Behavioral Health Services, Fire and Law Peer Support Groups, and other mental health professionals to support the long-term wellness of the victims, families, and first responders.

POST-INCIDENT INVESTIGATION

1. In most Active Attacker/ Criminal Mass Casualty events, the investigative process will last much longer than the actual event and may involve multiple agencies. Involved agencies need to continue to work together to provide a complete and thorough investigation. Large events such as these may warrant mutual aid assistance through the Monterey County Mutual Aid Plan, as coordinated through the Monterey County Sheriff’s Office.
2. The primary investigative responsibility of an Active Attacker Incident shall lie with the law enforcement agency having jurisdiction over the location of the incident unless another law enforcement agency assumes primary investigative responsibility.
3. A critical first step in the transition to the Post-Incident Investigation phase is a thorough briefing by initial responders at all levels.
4. Agencies are encouraged to coordinate their investigative efforts with:

- a. Monterey County Office of the District Attorney
 - b. Office of the District Attorney Bureau of Investigations
 - c. Federal Bureau of Investigation
 - d. Monterey County EMS Agency
5. The Investigative Assistance for Violent Crimes Act of 2012 (HR 2076) authorizes the U.S. Attorney (through the deployment of the FBI) to assist, at the request of state or local authorities, with providing investigatory assistance in response to violent acts or shootings occurring in a place of public use and in investigation of mass killings (3 or more) and attempted mass killings.

DEPARTMENTAL ADMINISTRATIVE COMMITMENTS & RESPONSIBILITIES

1. Each agency is committed to ensuring its staff receives the necessary training to respond to an active attacker event.
2. Agencies should develop and review their department Active Attacker procedures, training, and tactics at least annually to ensure their system incorporates the most current technologies and tactical philosophies. Training should include tactical-level and command-level scenarios. Training should also include a multi-jurisdictional and multi-discipline component when possible. Consideration should be given to training in a variety of scenarios, including enclosed spaces and open spaces.
3. In the event of an Active Attacker Incident, it shall be the responsibility of the law enforcement agency of jurisdiction to sponsor and organize an incident debriefing of the action for all interested regional agencies.
 - a. The debriefing should follow the event as soon as circumstances allow.
 - b. The intention and direction of the debriefing shall be for the education and preparedness of all regional interests.
 - c. The debriefing should include all involved parties from every agency involved. The use of a Critical Incident Stress Management Team should be strongly considered during this phase of the debriefing.
4. Agencies are encouraged to pre-plan for all large-scale events.
 - a. For large-scale pre-planned events, agencies should consider forming joint Fire - Law Incident Action Plans for emergency response scenarios, including active attacker incidents and other incidents of mass violence.
 - b. Agencies should consider pre-staging resources and establishing Unified Command at joint ICP during large-scale events.

START HERE	
LE First arriving	<ul style="list-style-type: none"> <input type="checkbox"/> Size up report <input type="checkbox"/> Identify Hot Zone <input type="checkbox"/> Establish COMMAND (mobile) <input type="checkbox"/> Radio ID: CONTACT 1 <input type="checkbox"/> Engage
LE 2nd-4th arriving	<ul style="list-style-type: none"> <input type="checkbox"/> Communicate with CONTACT 1 <input type="checkbox"/> Link-up
LE 5th arriving (5th Man)	<ul style="list-style-type: none"> <input type="checkbox"/> Radio ID: TACTICAL <input type="checkbox"/> Get briefing (verbal) <input type="checkbox"/> Assume COMMAND <input type="checkbox"/> Set STAGING location <input type="checkbox"/> Request additional resources <input type="checkbox"/> Assign more CONTACT TEAMS
First LE Supervisor	<ul style="list-style-type: none"> <input type="checkbox"/> Get briefing (verbal) <input type="checkbox"/> Assume COMMAND <input type="checkbox"/> Set COMMAND POST location <input type="checkbox"/> Assign STAGING manager <input type="checkbox"/> Assign PERIMETER GROUP <input type="checkbox"/> Assign MEDICAL BRANCH to FD/EMS
Second LE Supervisor	<ul style="list-style-type: none"> <input type="checkbox"/> Get briefing (verbal) <input type="checkbox"/> Assume COMMAND <input type="checkbox"/> Request additional resources <input type="checkbox"/> Designate First LE Supervisor as LAW ENFORCEMENT BRANCH <input type="checkbox"/> Assign INTELLIGENCE SECTION <input type="checkbox"/> Assign LEAD PIO to establish JOINT INFORMATION CENTER
First FD/EMS Supervisor	<ul style="list-style-type: none"> <input type="checkbox"/> Go to COMMAND POST <input type="checkbox"/> Request MEDICAL BRANCH assignment

Law Enforcement	
LAW ENFORCEMENT BRANCH	<ul style="list-style-type: none"> <input type="checkbox"/> Get briefing (verbal) <input type="checkbox"/> Co-locate with MEDICAL BRANCH <input type="checkbox"/> Coordinate with INTELLIGENCE SECTION
TACTICAL GROUP	<ul style="list-style-type: none"> <input type="checkbox"/> Coordinate CONTACT TEAM(s) <input type="checkbox"/> Prioritize 1Threat, 2Rescue, 3Clear <input type="checkbox"/> Update Hot and Warm Zones <input type="checkbox"/> Update casualty information to Triage Group
CONTACT TEAM	<ul style="list-style-type: none"> <input type="checkbox"/> Contain or neutralize threat <input type="checkbox"/> Update location as moving <input type="checkbox"/> Report casualty locations, numbers <input type="checkbox"/> Establish Casualty Collection Point(s)
PERIMETER GROUP	<ul style="list-style-type: none"> <input type="checkbox"/> Separate radio channel* <input type="checkbox"/> Establish INNER PERIMETER <input type="checkbox"/> Establish OUTER PERIMETER
INTELLIGENCE / INVESTIGATIONS SECTION	<ul style="list-style-type: none"> <input type="checkbox"/> Get briefing (verbal) <input type="checkbox"/> Separate radio channel* <input type="checkbox"/> Coordinate with Communications Center <input type="checkbox"/> Collect incoming information, tips, leads <input type="checkbox"/> Brief COMMAND <input type="checkbox"/> Consider REUNIFICATION BRANCH <input type="checkbox"/> Assign INVESTIGATIVE OPERATIONS GROUP <input type="checkbox"/> Assign INTELLIGENCE GROUP

Fire / EMS	
MEDICAL BRANCH	<ul style="list-style-type: none"> <input type="checkbox"/> Get briefing (verbal) <input type="checkbox"/> Request additional resources <input type="checkbox"/> Assign TRIAGE GROUP <input type="checkbox"/> Assign TRANSPORT GROUP <input type="checkbox"/> Co-locate with LAW ENFORCEMENT BRANCH <input type="checkbox"/> Consider TREATMENT GROUP
TRIAGE GROUP	<ul style="list-style-type: none"> <input type="checkbox"/> Get briefing (verbal) <input type="checkbox"/> Stand-up RESCUE TASK FORCE(s) <input type="checkbox"/> Co-locate with TACTICAL GROUP <input type="checkbox"/> Get operable areas, routes, and Casualty Collection Point location(s) <input type="checkbox"/> Deploy RESCUE TASK FORCE(s)
RESCUE TASK FORCE ¹	<ul style="list-style-type: none"> <input type="checkbox"/> Assemble team and equipment <input type="checkbox"/> Notify TACTICAL when deploying <input type="checkbox"/> If not done, establish Casualty Collection Point(s) <input type="checkbox"/> Rapidly assess casualties <input type="checkbox"/> Report counts to TRIAGE GROUP <input type="checkbox"/> Identify Ambulance Exchange Point and confirm with TACTICAL <input type="checkbox"/> Coordinate casualty evacuation
TRANSPORT GROUP	<ul style="list-style-type: none"> <input type="checkbox"/> Get briefing (verbal) <input type="checkbox"/> Co-locate with TACTICAL GROUP <input type="checkbox"/> Determine routes <input type="checkbox"/> Separate radio channel* <input type="checkbox"/> Get Hospital capacity count <input type="checkbox"/> Transport casualties from Ambulance Exchange Point(s) <input type="checkbox"/> Target 3 per ambulance (Tea Red/Yel/Grn) <input type="checkbox"/> Distribute to Hospitals <input type="checkbox"/> Keep Transport Log

Multi-Discipline	
STAGING	<ul style="list-style-type: none"> <input type="checkbox"/> Check-in and list resources <input type="checkbox"/> Give resources assignment, location, and channel <input type="checkbox"/> Prioritize assignments as directed <input type="checkbox"/> Maintain minimum resources as directed
LEAD PIO (JOINT INFORMATION CENTER)	<ul style="list-style-type: none"> <input type="checkbox"/> Establish JOINT INFORMATION CENTER <input type="checkbox"/> Establish Media Staging Area <input type="checkbox"/> Clear all messaging and releases with COMMAND <input type="checkbox"/> Announce Reunification site when authorized
REUNIFICATION BRANCH	<ul style="list-style-type: none"> <input type="checkbox"/> Get briefing (verbal) <input type="checkbox"/> Select Reunification Location <input type="checkbox"/> Location approved by INTELLIGENCE SECTION <input type="checkbox"/> Notify DISPATCH of Location <small>Not for public release</small> <input type="checkbox"/> Assign REUNIFICATION STAGING MANAGER <input type="checkbox"/> Request additional resources <input type="checkbox"/> Assign SERVICES GROUP <input type="checkbox"/> Assign ACCOUNTABILITY GROUP <input type="checkbox"/> Assign ASSEMBLY GROUP <input type="checkbox"/> Assign INTELLIGENCE SECTION when ready to announce Location to public
REUNIFICATION SERVICES GROUP	<ul style="list-style-type: none"> <input type="checkbox"/> Assign Set-up Unit <input type="checkbox"/> Assign Law Enforcement Unit <input type="checkbox"/> Assign Transportation Unit <input type="checkbox"/> Assign Medical Unit <input type="checkbox"/> Establish Family Assistance Center
REUNIFICATION ACCOUNTABILITY GROUP	<ul style="list-style-type: none"> <input type="checkbox"/> Assign Accountant Unit <input type="checkbox"/> Assign Checker Unit <input type="checkbox"/> Assign Greeter Unit <input type="checkbox"/> Assign Reunifier Unit <input type="checkbox"/> Assign Exit Control Unit
REUNIFICATION ASSEMBLY GROUP	<ul style="list-style-type: none"> <input type="checkbox"/> Assign Class Leader Unit <input type="checkbox"/> Assign Nutritional Support Unit <input type="checkbox"/> Assign Entertainment Support Unit <input type="checkbox"/> Consider Entertainment Unit

*Leader monitors two channels, their channel and the assigned BRANCH / COMMAND channel.
Target minimum staffing 2 LE, 2 Medical for each RTE.

ACTIVE SHOOTER INCIDENT MANAGEMENT CHECKLIST

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Endorsed by
National Tactical
Officers Association

- Improvised Explosive Device (IED)**
- DISCOVERY or DETONATION**
- Announce "Bomb Cover" or "Bomb Go"
 - Secondary threat scan (device, 5ft, 25ft)
 - Maintain 540° scan
 - NEVER TOUCH Bombs
 - Bombers are Bombs
- CONTACT and RESCUE**
- Consider threat to life and alternate route
 - Mark (Chem Lights) and bypass
 - Provide security element if possible
- EXPOSED SURVIVOR RESCUE**
- Direct survivor movement explicitly
 - View area for secondary threats
 - Establish narrow cordon in/out of area
 - Provide Direct Threat Care only
 - Evacuate to standoff / Isolate / Barricade
- FROM RADIO SAFE DISTANCE (300ft or standoff)**
- Report IED location, description, size
 - Report action taken
 - Request Bomb Squad
- NO SURVIVORS THREATENED**
- View area for secondary threats
 - Reposition personnel to safe standoff
 - Report impact to assignment and priority
 - Cordon off 360° device kill zone
 - Control cordon security awaiting Bomb Squad

Standoff Distance:

IED	Size	Minimum with Cover	Preferred
Pipe Bomb	5 lb	70 ft	1200 ft
Suicide Bomber	20	110	1700
Briefcase/Suitcase	50	150	1850
SUV / Van	1000	400	2400

*See Help Guide and DHS reference for IMPROVISED INFORMATION.

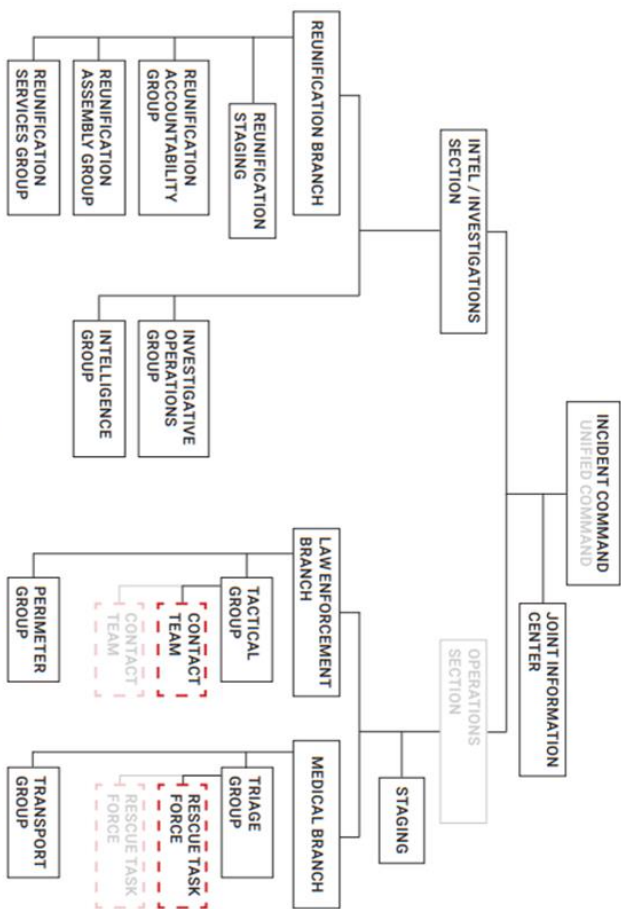


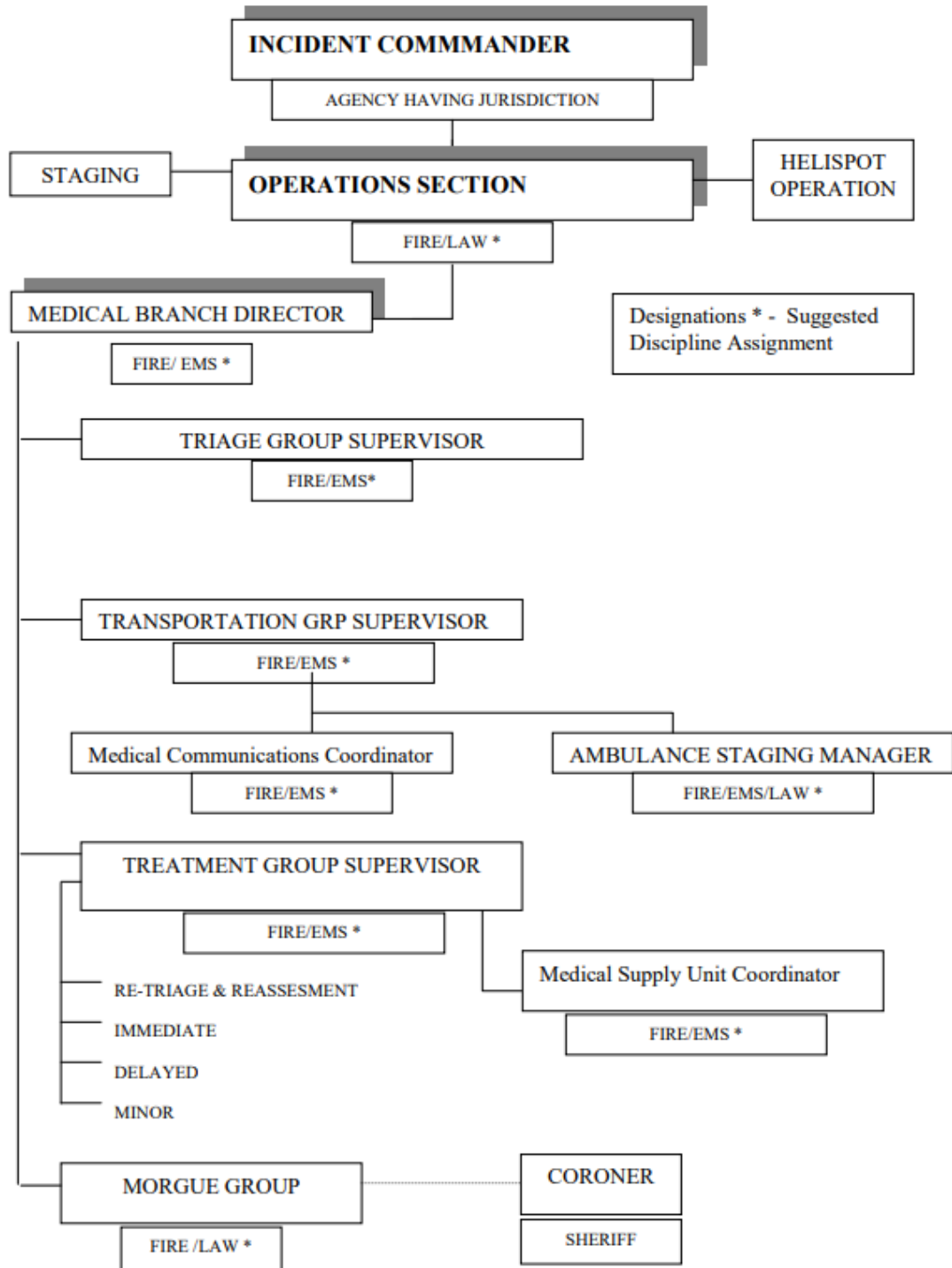
Fig 1. Active Shooter Incident Command Organizational Chart

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START ON OTHER SIDE

**MONTEREY COUNTY MCI
MEDICAL BRANCH OVERVIEW**



APPENDIX 3: ACTIVE ATTACKER RESPONSE RECOMMENDED EQUIPMENT ITEMS FOR LAW ENFORCEMENT PERSONNEL

Equipment items listed below are suggested and recommended for initial deployment during an Active Attacker Incident. Based on evolving tactics, situational awareness, department, and personnel limitations, and debriefing of prior incidents, the list of individual equipment items for responding personnel is a guide and recommendation only.

A. Responding Law Personnel (Readily Available Equipment)

1. Ballistic Vest Carriers (Kevlar or Plate Carriers)
2. Credential Identification Affixed to Vest Carriers (Police, Sheriff, EMS, Fire)
3. Ballistic Helmets
4. Ballistic Shields
5. Rifle / Shotgun
6. Gas Masks / PPE
7. Breaching Tool Pack (Ram, Halogen, Bolt Cutters)
8. Automated External Defibrillator (AED)
9. Additional Radio Batteries

B. Active Attacker Trauma Response Bag (LEO)

1. Extra Rifle / Handgun Magazines
2. Flashlights / Weapon Lights
3. Flex Handcuffs
4. Chem Lights / Sticks
5. Doorstops / Wedges
6. Dump / Foldable Pouch
7. Water Bottle
8. Tourniquets (Multiple)
9. Medical Scissors
10. PPE / Medical Gloves
11. Trauma Wound Dressing / Bleed Control Kit
12. Quik Litter / Rescue Sled

APPENDIX 4: ACTIVE ATTACKER RESPONSE RECOMMENDED EQUIPMENT ITEMS FOR FIRE/EMS PERSONNEL

Equipment items listed below are suggested and recommended for initial deployment during an Active Attacker Incident. Based on evolving tactics, situational awareness, department, and personnel limitations, and debriefing of prior incidents, the list of individual equipment items for responding personnel is a guide and recommendation only.

A. Responding FIRE/EMS Personnel (Readily Available Equipment)

1. Ballistic Helmet with eye protection
2. Ballistic Body Armor (NIJ Level III or higher)
3. Active Attacker EMS waist pack or trauma bag
4. Radio for each team member
5. Optional considerations:
 - a. Patient Extrication Device (SKED, Backboard, Patient carry-all)
 - b. Forcible Entry Tools
 - c. Flashlight
 - d. Thermal Imaging Camera

B. Triage / Treatment Bag for FIRE/EMS:

1. Triage Ribbon
2. Medical Tape
3. Shears
4. Eye Protection
5. Needle decompression (10G)
6. Stretch Gauze 3"
7. Stretch Gauze 4"
8. Abdominal Pad
9. Extra Gloves
10. Multiple (3-5) Ziplock Bags with Treatment Kits including:
 - a. Emergency Trauma Dressing
 - b. 4X4 Dressing
 - c. CAT Tourniquet
 - d. Stretch Gauze 3"
 - e. SWAT Tourniquet
 - f. Nasal Pharyngeal Airway 30 and Lube
 - g. petroleum Gauze 5X9
 - h. Abdominal Pad
 - i. Vented Chest Seal
 - j. Needle Decompression 10G