

# ASHER (Active Shooter/Hostile Event Response)

## **KEY CONSIDERATIONS:**

- Don't let traditional triage and treatment get in the way of rapid extraction and transport of patients.
- Assign the Contact Teams and Rescue Task Forces their own tactical frequencies; don't forget to let command know of critical communications.
- Not all Fire/EMS agencies will be outfitted with ballistic PPE.
- Assign Law Enforcement to secure the Casualty Collection Point (CCP).
- Collect and hold all persons involved in the incident at a location that has been cleared.
- Secure the scene and prepare for the recovery stages.
- The reunification process and release of information can quickly overwhelm a command structure. Staff the functions early and appropriately.
- Our own response vehicles often become the greatest hindrance to rapid transport. Consider dispatching tow trucks.
- Rapid transport may be successfully achieved by means other than ambulance.

This protocol is in place to coordinate response and identify the initial actions to be taken by Law Enforcement (LE) and Fire Department personnel **during the first 30 minutes** of an ASHER event. It will be the responsibility of all LE and FD personnel to be familiar with and practice these guidelines as set forth.

## **PURPOSE:**

All too often, active shooter incidents victims perish of potentially survivable injuries while awaiting medical treatment. Quick actions to open the airway, control external hemorrhage, and prevent tension pneumothorax on the part of first responders, bystanders and the wounded themselves can provide effective, lifesaving, first-line treatment in what remains a critical step in reducing preventable prehospital death.

As timeliness is such an issue, early deployment of fire department personnel into warm zones to render immediate lifesaving care is a high priority. This follows our long standing philosophy of "accepting increased risk to save savable lives". This increased risk will be minimized by jointly training responding personnel to operate in this environment with protection from a law enforcement security detail, while fire/ems personnel provide wound care and extraction.

The following protocol has been jointly adopted by all Jackson County Law Enforcement and fire agencies to swiftly neutralize the threat and increase survivability of those impacted. This protocol does not provide the guidance for reunification, release of information, or recovery.

## **TERMINOLOGY:**

**Active Shooter (AS) aka (Threat):** Any armed person who uses or has used lethal force on other persons and continues to do so while having unrestricted access to additional victims.

**Casualty Collection Point (CCP):** An area designated by command that will be used to collect the injured. The CCP may act as the jump off point for RTFs early in the incident. The CCP should be located in an area that can be secured by dedicated LE personnel.

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## TERMINOLOGY CONTINUED:

**Clear(ed):** An area that during an initial sweep revealed no immediate or direct life threat. Area should be considered to be in the warm zone. Law enforcement may or may not maintain a presence in a cleared area.

**Cold Zone:** Areas where there is little or no threat, due to distance, shielding and or secured by LE (i.e. Casualty Collection Points, UCP).

**Contact Team (CT):** Initial LE teams of 1 to 4 officers who form immediately on arrival to a scene and deploy into the Hot Zone, moving rapidly with objective of initiating contact to contain, distract and/or eliminate the active shooter to prevent further injury or loss of life.

**Contact Team Group Supervisor (CGS):** LE member who assumes overhead position early in the incident to direct and coordinate the operations of the CT(s). The CGS will most likely serve as the "LE" side of the initial unified command structure.

**Hot Zone:** Area where there is known hazard or life threat that is direct and immediate. An example of this would be any uncontrolled area where the active shooter could directly engage a RTF team. RTF teams will not be deployed into a Hot Zone.

**Protected Corridor Operations:** A warm zone response concept in where LE forms a secure path through which fire and EMS responders can care for and extract victims.

**Protected Island Operations:** A warm zone response concept in where LE forms a secure perimeter around fire and EMS responders.

**Rescue Task Force (RTF):** A team of both Fire and LE personnel (4-6 members) deployed in the Warm Zone. LE provides force protection while Fire provides wound care to victims. These teams treat, triage, stabilize, and extract the injured.

**Rescue Group Supervisor (RGS):** Fire department member who assumes overhead position early in the incident to direct and coordinate the operations of the RTF(s). The RGS will most likely serve as the "Fire" side of the initial unified command structure.

**Security Detail:** Previously trained LE component of a RTF that provides protection for fire department personnel.

**Tactical Emergency Casualty Care (TECC):** The evidence-based best practice guidelines for trauma care that make up the standard of care in prehospital trauma cases.

**Treatment Area:** The area in the Cold Zone where patients are brought from the CCP for triage, treatment, and transport to a medical facility.

**Unified Command (UC):** An incident command system where both Fire and Law Enforcement (LE) agencies provide commanders to manage an incident by establishing a common set of incident strategies and objectives.

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## TERMINOLOGY CONTINUED:

**Unified Command Post (UCP):** Location from where unified commanders will establish command and direct tactical control of an incident. In many cases the UCP will be the Chief Officers vehicle. The UCP should be located in the Cold Zone.

**Warm Zone:** Areas that LE have cleared where there is minimal or mitigated threat. This area can be considered clear but not secure; this is where Rescue Task Forces deploy to treat and extract victims.

**Secure(d):** An area that has been determined free of any immediate or direct life threats and a presence is maintained by law enforcement.

## PRIORITIES FOR INITIAL ACTIONS:

Priorities and primary goals during the first 30 minutes are:

- **Deny the threat access to additional targets**
- **Rapidly access victims for TECC treatment**
- **Establish a unified command**
- **Rapidly extract and transport victims to the hospital**

## PROTOCOL FOR INITIAL ACTIONS:

1. Following dispatch, all incoming units will switch to the primary LE agencies primary radio frequency (Table 1). Fire personnel will monitor the frequency for situational updates and refrain from transmitting unless emergent. Fire agencies will establish command on their primary tactical channel.

Jurisdiction	Law Frequency	Fire Frequency
Ashland	Ashland Main	AFD Primary
Medford	MPD Primary	Medford Tac RPT
Central Point	MPD Primary	RV Tac 1
All other surrounding areas	JCSO Primary	RV Tac 1
Southern Oregon Veteran's Rehabilitation Center	JCSO Primary	RV Tac 1

2. Arriving LE personnel will attempt to engage the threat while forming into Contact Teams (CT). Once a team has been formed the senior-ranking member of the CT will announce their name, the number of personnel, and location. Example, "Contact Team Whipple with 3, entering Taylor Hall 1<sup>st</sup> floor from the West".
3. A Senior Officer will assume Incident Command and establish a Command Post in the Cold Zone.
4. One of the first arriving ranking Law Enforcement Officers will join with the Senior Officer to establish Unified Command.
5. Unified Commanders will assume the roles of Contact Team Group Supervisor (CGS) and Rescue Group Supervisor (RGS) in each of their disciplines (LE and Fire). These roles may be delegated to others as additional Chief Officers arrive at the UCP.

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6. UC shall establish a Casualty Collection Point (CCP). It will be beneficial if the CCP is adjacent to the Warm Zone and next to a street that can be used by responding ambulances.
7. Incoming Fire Department personnel will report to staging with appropriate PPE and Active Shooter Medical Kits. A CCP or treatment area may already be established; units may be assigned directly prior to arrival. Stage out of the way; do not block roadways near the CCP or Treatment Area (keep lane clear for ambulances).
8. At whatever point the CGS identifies that there are enough resources engaged or pursuing the threat they should assign further incoming LE personnel to the CCP for protection of Fire personnel. Do not block roadways near the CCP (keep lane clear for ambulances).
9. As soon as feasible, Fire and LE personnel will form into Rescue Task Forces and respond into the Warm Zone. The senior ranking LE member will contact command and announce their name, the number of personnel and location. Example, "*Rescue Task Force Parks with 5, entering Taylor Hall 1<sup>st</sup> floor from the West*".
10. Conduct a primary search of the Warm Zone, triage victims that might be injured and/or in hiding.
11. Perform rapid TECC treatment and/or extraction of victims.
12. Implement the Jackson County Fire / EMS Agency Mass Casualty Incident Protocol. Transporting agencies priority will be the rapid transport of victims.