



FDNY TACTICS AND PROCEDURES
EMS OGP 105-01
EMERGENCY RESPONSE PLAN
ADDENDUM 3A
November 16, 2015

**INTERAGENCY RESPONSE PROTOCOL TO
ACTIVE SHOOTER INCIDENTS**

1. INTRODUCTION

- 1.1 Incidents involving active shooters, violent extremists, barricade situations or aggressive deadly behavior represent some of the most challenging responses to the first responder community. These types of responses test the strategic, operational, and tactical capabilities of first responders regarding mitigation, evacuation, and mass-casualty care. It is from this perspective that the FDNY, in cooperation with the NYPD, have partnered to develop the following *Interagency Response Protocol*.

An **active shooter** is defined by the U.S. Department of Homeland Security as *individual(s) actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearms, and there is no pattern or method to their selection of victims.*

- 1.2 The FDNY/NYPD Interagency Response Protocol provides common terminology and flexible operational guidelines to execute each agency's core competencies of threat mitigation and lifesaving procedures. Primarily, this type of incident involves the NYPD for threat suppression, site security, and force protection; and the FDNY for pre-hospital care including triage, treatment and transport of victims.

2. SAFETY CONSIDERATIONS

- 2.1 The primary incident objective is civilian and first responder life safety. Since these incidents may change rapidly, first responders shall maintain 360° horizontal and vertical attentiveness, use distance and shielding for protection and exchange information for situational awareness.
- 2.2 The NYPD may have difficulty distinguishing between the perpetrators, victims or first responders. A NYPD officer may confront FDNY members to verify their identity. This is called a "*challenge situation*". In this situation, the FDNY member shall strictly adhere to the following procedures:
- Comply with the commands of law enforcement personnel.
 - Remain motionless (no sudden movements).
 - Do not turn your body unless instructed to do so by the challenging officer.
 - Verbally identify yourself as a member of the FDNY by rank and name.
 - Await command of law enforcement to resume current operations.

3. ZONE THREAT DESIGNATIONS

3.1 In order to facilitate interagency communications and operations, adjustable threat areas are designated as Hot, Warm, and Cold Zones:

- **HOT ZONE:** Areas of a known hazard, where the perpetrator(s) are shooting, roaming free, or are engaged by law enforcement. IEDs may be present. No FDNY personnel are to operate in designated Hot Zones. Only law enforcement personnel with the appropriate level of ballistic protection equipment will operate in Hot Zones.
- **WARM ZONE:** A cleared area that has been deliberately searched by law enforcement, contains no identifiable threats, but has not been declared a Cold Zone. Firefighters and EMS personnel may be deployed for life safety operations only and shall be escorted by NYPD personnel, operating under their security. More than one Warm Zone may be designated by the NYPD.
 - **WARM CORRIDOR:** Route that has been cleared and under NYPD control for escorted entry & egress of responders, and for victims to & from the Warm Zone.
- **COLD ZONE:** Areas where there is normal risk due to geographic distance from the threat, or the area has been secured by the NYPD. The Command Post, Operations Post, Staging Areas, and medical triage, treatment, and transportation areas shall be located in the Cold Zone.

4. ENCOUNTER PRIOR TO NYPD ARRIVAL

4.1 If FDNY members encounter an active shooter(s) prior to NYPD arrival, they shall immediately withdraw, notify units on the scene and request a forthwith police response. When withdrawal is not possible, seek hard cover/concealment.

Concealment is an obstacle that hides your exact location, but can be penetrated by ballistic weapons. (e.g. sheetrock)

Hard Cover is an area impenetrable to ballistic weapons. (e.g. thick concrete wall)

4.2 Communicate unit identity and location via the Borough Dispatcher to the NYPD. If possible, provide the following information to the NYPD:

- Number, location(s), and description of shooter(s).
- Number & location(s) of victims and hostages, if any.
- Types of weapons in use (e.g., semiautomatic rifles, hand guns, explosives).
- Communication method used by shooters, if apparent (cell phones, etc.)

Note: EMS units should also consider direct notification to NYPD on EMS Channel 16.

5. RESPONSE AFTER ARRIVAL OF NYPD

5.1 If FDNY arrives after NYPD, they shall confer with the NYPD Incident Commander on the nature of threat, types of weapons, and location of victims, hostages and zones.

5.1.1 FDNY shall then:

- Alert on scene and incoming units via HT and dispatcher of the active shooter incident and provide additional information that was gathered from NYPD.
Note: EMS MDTs may receive updates from the NYPD.
- Designate and communicate staging areas and the Incident Command Post for on scene and incoming units.

5.2 FDNY units shall stage outside of the designated Warm and Hot Zones, with due regard for safety and the advice of the NYPD. They shall remain behind hard cover and out of the line-of-sight of any building that contains a shooter. Units shall use distance and shielding to increase safety.

5.3 FDNY members shall not operate in the Hot Zone.

5.4 FDNY members shall only operate inside the Warm Zone when **requested by the NYPD for life saving intervention**. This operation must be **approved by a FDNY Deputy Chief**, unless the NYPD Incident Commander requests entry for immediate life-saving intervention. In such cases, an on-scene FDNY Battalion Chief may grant this approval. **An FDNY Staff Chief must be immediately notified of active shooter incidents.**

5.5 All escorts in and out of the incident location (for first responders, hostages, victims, etc.) will be provided by, and under the direction of, NYPD personnel. Before entry, the NYPD shall brief personnel on the location of zones, interagency communications, and tasks.

5.6 When NYPD has confirmed that the assailant(s) is either no longer on scene or the threat is mitigated (Cold Zone), members can then engage in normal operations

6. COMMAND

6.1 This interagency plan is based on the **Citywide Incident Management System (CIMS)**. The establishment of a Single or Unified Command will depend on the scope of the incident.

6.2 An active shooter incident is a **Single Command** incident with the NYPD as the IC. The FDNY will provide pre-hospital emergency care to patients and support NYPD operations with available building information.

6.3 A more complex situation that involves an active shooter using fire and smoke as a weapon will require a **Unified Command**.

6.4 The FDNY and NYPD commanders shall **co-locate** within sight, voice, and arm's distance of each other at an **Incident Command Post in the Cold Zone** (behind hard cover and out of the line-of-sight). Transmit ICP location to dispatcher for incoming chiefs.

6.5 A FDNY/NYPD Interoperability communications plan shall be established.

6.6 The Incident Objective is civilian and first responder **life safety**, which is achieved by:

- **Threat suppression.**
- **Hemorrhage/airway control of victims.**
- **Rapid Extrication of critical victims.**
- **Assessment and triage/sort by medical providers.**
- **Transport of victims to designated hospitals.**
- **Site management/investigation.**

6.7 **FDNY CHIEF DUTIES**

If the NYPD requests the FDNY to enter designated Warm Zones to address life safety and emergency medical concerns, **the IC for FDNY** will:

6.7.1 Consult and coordinate with NYPD at the Command Post:

- Define the threat
 - Number and location of shooter(s).
 - Weapons (hand guns, rifles, grenades, IEDs, fire, etc.).
- Identify the life hazard and evacuation status and zones
 - Number and location of victims, hostages and trapped occupants.
- Provide the NYPD with available information
 - Building Information Cards (BIC), digital floor plans, and information about stairwells, elevators, CCTV monitoring, HVAC systems, suppression systems, building loud speaker systems and other building systems.

6.7.2 Consult and coordinate with NYPD on the location of FDNY Medical Resources in the Cold Zone. FDNY IC should designate sectors to avoid crossing hot zones and assign EMS Officers to the Cold Zone sectors to set up triage transfer point, treatment areas and medical transport corridors.

- Identify ambulance routes to hospitals and ensure they are kept clear.

- 6.7.3 Confirm the NYPD request for the FDNY to enter Warm Zones for patient care.
 - Define the Rescue Task Force (RTF) and medical missions.

- 6.7.4 Discuss safety criteria to safely enter, operate and exit a building's Warm Zone:
 - Is there a Warm Corridor established to and from the Cold Zone?
 - In the Warm Zone:
 - Are police officers at each entry point?
 - Are the elevators controlled (Fireman Service)?
 - Are the exit stairs controlled?
 - Are access stairs serving the area controlled?
 - Are there designated areas of refuge?
 - Is there adequate force protection in the Warm Zone(s) and corridor(s)?
 - Give FDNY units specific direction on mission objectives and coordination with NYPD.

- 6.7.5 DEVELOP A FDNY/NYPD COMMUNICATIONS PLAN
 - Interoperable Command Channel.
 - Tactical channel: HT Channel and/or TAC-U channel.

- 6.7.6 ACCOUNT FOR ALL FDNY PERSONNEL DEPLOYED

7. OPERATIONS: RESCUE TASK FORCES (RTF)

An interagency Rescue Task Force is deployed to provide lifesaving medical treatment to victims in Warm Zone. The task force composition will be dependent on NYPD force protection and available units on the scene.

7.1 RTF COMPOSITION:

- 7.1.1 The initial rescue task force may be limited to **six FDNY members and NYPD force protection**. Optimally, a combination of one BLS ambulance and one CFR Engine (chauffeur remaining with rig) would allow for rapid triage, lifesaving intervention and critical patient removal. Entry should not be delayed awaiting specific FDNY resources.

- 7.1.2 The NYPD RTF-leader shall be in overall command of the RTF. However, FDNY Officers shall maintain immediate supervision over members and defer to the highest-level medical expertise for patient care. A Battalion Chief may be needed if multiple RTFs are deployed.

7.1.3 Additional RTF's composition shall be task-based such as deploying EMT/CFR for patient treatment and ladder companies for patient removal. FDNY shall maintain unit integrity if possible. Members remaining in the Cold Zone shall assist in preparing for patient arrival.

7.2 RTF EQUIPMENT:

RTF members shall only take equipment necessary for addressing life threatening conditions and to facilitate patient removal. This should be limited to tourniquets, hemostatic agent, occlusive dressings, triage tags and skeds.

- Oxygen and defibrillators shall NOT be brought into the Warm Zone.
- Safety equipment will be determined by the IC for the threat environment.

7.3 RTF ACCOUNTABILITY:

- Each RTF should be named (RTF 1, RTF 2 etc.).
- Establish a secondary tactical channel for Warm Zone operations.
- FDNY dispatchers and units on the scene shall be notified that members are entering the Warm Zone with NYPD Force Protection for patient treatment and removal.
- The FDNY IC shall assign a member to:
 - Maintain list of personnel assigned to RTF;
 - Document location where the RTF(s) is operating;
 - Monitor the secondary tactical channel;
 - Confirm entry/exit of RTF members operating in the Warm Zone.

7.4 PRIOR TO WARM ZONE ENTRY:

7.4.1 FDNY RTF supervisor shall confer with the NYPD RTF Leader and:

- Confirm identity of RTF and identify all members in the task force
- Confirm RTF mission and operating location
- Discuss emergency procedures
- Review member equipment
- Ensure RTF members switch to the assigned secondary tactical channel

7.4.2 NYPD RTF-Leader and FDNY RTF supervisor shall brief all members prior to entry.

7.5 WARM ZONE ENTRY:

7.5.1 NYPD RTF-Leader and FDNY RTF-Supervisor shall collaborate and coordinate to ensure:

- Members stay within force protection envelope
- Members maintain situational awareness and coordinate actions
- Members focus on critical patients and removal of Red Tag patients
- Contact is maintained with ICP at all times and updates are provided to IC
 - Number, location and status of patients, especially Red Tags
 - Additional resources that may be needed for patient care
- If the area is determined not safe, FDNY members will follow the direction of NYPD RTF-Leader to leave the area and return to the Cold Zone or shelter in protected area until threat is removed.

7.6 WARM ZONE MEDICAL CARE:

7.6.1 Due to the dynamic nature of the threat and mechanism of injury, medical treatment should be limited to hemorrhage and airway control. To maximize lifesaving operations and interventions:

- Rapidly triage and identify critical victims (Red Tags);
- Apply hemorrhage control and airway management on these patients;
- Prioritize patient removal.

7.7 COLD ZONE MEDICAL CARE:

7.7.1 The Mass Casualty Incident plan, as detailed in ERP Addendum 3, Section 5.2, should be established and staffed as soon as possible in order to receive patients from the Warm Zone. Effective and timely management of life-threatening injuries is dependent on the early establishment of the following:

- Triage Transfer Point from warm to cold zones
- Treatment areas for yellow and green tags
- Medical Transport Corridor
- Transportation to a hospital. Critical patients need to undergo surgery to control bleeding and are quickly transported by ambulance. A Medevac is only used when there is more time and in special circumstances. (EMS determines transport mode)

7.7.2 The FDNY IC shall dedicate ALS & BLS ambulances (*Hot Truck*) for first responders.

8. FIRE AND SMOKE AS A WEAPON

- 8.1 A more complex situation that involves an active shooter using fire and smoke as a weapon will require a **Unified Command**. The blinding effects of smoke and toxic gases, when inhaled, can cause confusion, disorientation, and death; creating a complex incident that can hamper interagency efforts of threat mitigation, evacuations, and life-saving operations.
- 8.2 Upon arrival at a fire and/or smoke condition (smoke grenades), in which active shooting is occurring or **possible** firearms could be used against firefighters, members shall:
- Remain behind hard cover and out of the line-of-sight.
 - Question law enforcement if weapons are known or possibly present.
 - If yes, consider the area a Hot Zone and do not operate.
 - Alert on scene and incoming units of an active shooter.
 - For heightened situational awareness and greater range, consider using the **emergency alert tone with an urgent message** to notify units that this is an active shooter incident and not a routine fire.
 - Collaborate with NYPD on possible Warm/Cold Zone exposure protection and emergency medical needs.
 - Follow the guidelines of this ERP if a Warm Zone is established.
- 8.3 Fire suppression forces and the NYPD can consult with building engineers to gain information on sprinkler and standpipe systems, the location of control and shutoff valves, the location of section valves, and the use of Heating, Ventilation, and Air Conditioning (HVAC) systems. The rapid restoration of fire suppression systems by the FDNY may take place in the Warm Zone(s) under NYPD force protection.

9. CONCLUSION

The rapid and seamless integration of FDNY resources as a component of NYPD operations during an evolving, multi-hazard active threat incident will require both agencies to work closely together. Ensuring that rescue, incident mitigation, medical interventions and public and personnel safety objectives are met in a timely manner will require a high level of interagency communication, collaboration, and coordination.

BY ORDER OF THE FIRE COMMISSIONER AND CHIEF OF DEPARTMENT