

**Standard Operating Procedures Manual**  
**City of Poquoson Fire and Rescue**



**City of Poquoson  
Fire and Rescue**

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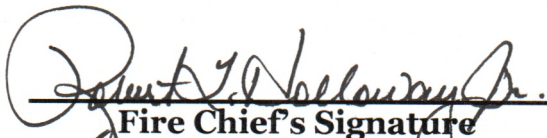
**Rescue Task Force**

**SOP#:** SO 13.00

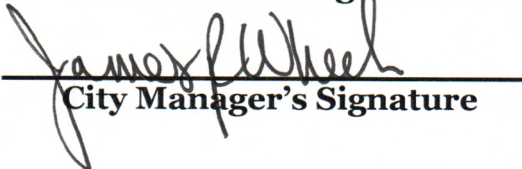
**Title:** Rescue Task Force  
Administration

**Effective Date:** 06/15/2019

**Revised Date:**   

  
**Fire Chief's Signature**

  
**Police Chief's Signature**

  
**City Manager's Signature**

**Rescue Task Force**

**I. PURPOSE**

This SOP serves as the basis for developing an interagency / interdisciplinary local and community based response team, hereafter referred to as the Rescue Task Force (RTF) for Active Shooter/Hostile Incident (ASHI) attacks with the potential for incident escalation (e.g. CBRNE, hostage, mass casualty, etc.).

This SOP is not all-inclusive and cannot encompass all situations that may be encountered.

**II. POLICY**

The integrated response required for RTF operations requires elements beyond Law Enforcement in order to support the ultimate goal of victim survivability, rescue, and life safety operations. This goal requires the interaction of local Fire and EMS in support of a Law Enforcement led response. The Rescue Task Force is a program that brings the local first responder community together to have a seamless and integrated response.

### **III. Definition of Acronyms**

ALS – Advanced Life Support  
ASHI – Active Shooter/Hostile Incident  
BCON – Bleeding Control  
BLS – Basic Life Support  
BPE – Ballistic Protective Equipment  
CBRNE – Chemical, biological, radiological, nuclear, explosive  
CCP – Casualty Collection Point  
CISD – Critical Incident Stress Debriefing  
EMS – Emergency Medical Services  
ICS – Incident Command System  
IFAK – Individual First Aid Kit  
LEFR-TCC - Law Enforcement and First Responder- Tactical Casualty Care  
NAEMT – National Association of Emergency Medical Technicians  
NIMS – National Incident Management System  
RTF – Rescue Task Force  
SCBA – Self-Contained Breathing Apparatus  
SOP – Standard Operating Procedure  
START – Simple Triage and Rapid Treatment  
TECC – Tactical Emergency Casualty Care  
TCCC -Tactical Combat Casualty Care

M. Massive Hemorrhage  
A. Airway  
R. Respiratory  
C. Circulation  
H. Head/Hypothermia

### **IV. OBJECTIVE**

The primary goal for the RTF is rapid wound stabilization and rapid extraction to definitive care, through a multi-discipline, integrated response in accordance with NFPA 3000 guidelines



## **V. Threat Designation Areas**

**Hot Zone:** An area where the suspect(s) are present, roaming free, or engaged by Law Enforcement.

Potential presence of a primary improvised explosive device or other threatening device, such as a secondary device, including fire as a weapon.

**Warm Zone:** Potential for incident escalation present, “cleared but not secured”

Ballistic gear required for operations within the Warm Zone.

**Cold Zone:** Law Enforcement determination that no suspect(s) or secondary devices are present.

Ballistic gear is not required within the Cold Zone.

- May serve as treatment areas, casualty collection points, and transportation points for patients.
- May serve as location for command operations and traditional mass casualty response staging.

## **VI. Concept of Operations**

### **Overview of Interagency Operations**

In support of Law Enforcement operations during an ASHI, interagency operations serve to address non-law enforcement related activities including rescue, patient extraction and care, and fire suppression.

The following components must be understood and agreed to by all involved agencies and individuals participating as part of the RTF:

- Fire and EMS personnel will not be permitted to operate within a Hot Zone.
- EMS and Fire components operate under Law Enforcement direction at all times for patient rescue and removal from a Warm Zone.
- Law Enforcement escort(s) will be available whenever possible.

- EMS and Fire will first seek to extricate patients from the Warm Zone with patient treatment limited to only what is needed to make the patient movable, unless lifesaving interventions are required prior to movement.
- Lifesaving interventions may only be carried out based on the scenario and scene circumstances without jeopardizing the safety any of the RTF responders.
- All other patient treatment should be avoided within the Warm Zone, when possible.
- Under certain circumstances, a Warm Zone CCP (Casualty Collection Point) may be established due to limited egress, or due to emergency issues which requires the RTF responders to immediately establish an Internal Warm Zone CCP.
- A Warm Zone CCP will only be established at the direction of Law Enforcement.
- Extraction of living victims should be conducted as soon as possible, or when it is determined safe by Law Enforcement.

Fire as a weapon is a current threat – RTF integration of the fire discipline is critical to minimizing this threat.

- Fire components operate, under Law Enforcement escort(s) whenever possible, to restore damaged or disabled fire protection systems, or to create a water supply to extinguish a fire.
- Fire components operate, under Law Enforcement escort(s) whenever possible, for search, evacuation, and fire suppression for rescue operations.



**Command and Control:**

- The National Incident Management System (NIMS) and Incident Command System (ICS) will serve as the basis for command and control for the RTF.
- Law Enforcement will serve as the primary agency responsible for establishing and serving as incident command.
- When serving within the RTF function, Fire and EMS will adhere to directions provided by Law Enforcement personnel serving as Law Enforcement Branch Leadership.

**Common Operating Language:**

- Participating agencies should establish a common operating language in order to ensure clear communication amongst RTF members.
- Use plain language to enhance communication and response. Terms used during RTF operation, and training, should be easy for all participating RTF members to understand under stressful conditions.
- Ensure a common language is agreed upon, and practiced by, all participating agencies prior to an ASHI situation.

**RTF Composition:**

- Selection for participation of RTF personnel is determined by the leadership of each respective agency.
- The Chief in charge of special operation will be designated the RTF leader, however the EMS Officer or Liaison to the Police department may make changes to the program as needed to ensure compliance, safety, and overall wellbeing of the team.
- The ultimate authority to approve, or remove, RTF prospective candidates or active members from all disciplines is the decision of RTF leader in consult with the leadership of the respective agencies.
- Each RTF Team may consist of, but is not limited to, 4 members.

- A RTF response may be composed of one responder, at a minimum.
- Law Enforcement team member(s) will serve as escort(s) assigned to the front and rear of the RTF Team, when possible.
- Fire/EMS participating member(s) will be medically trained or rescue trained.

Minimum standard for application:

- The applicant must be a member in good standing and have completed his/her probationary period with a participating fire/rescue or police department.
- Applicants must have a minimum of two (2) years field experience as an EMS provider.
- Candidate can have NO disciplinary issues that result in a written reprimand for 12 months prior to application.
- Candidate must have proven history of good judgement and decision making.
- Candidate must have proven record of being able to effectively adapt and perform during high stress events.
- The successful applicant must hold a current State of Virginia EMS certification (ALS Preferred), American Heart Association CPR certification, Basic Trauma Life Support or equivalent certification and HAZMAT operations certification.
- Additional training in courses such as Tactical EMS, PALS, ACLS, etc. is not a requirement for applicants but will be considered beneficial in consideration.

\*\*Note Law Enforcement may appoint non-EMS certified individuals to the team to act as security and provide tactical training to the rest of the team. All members will be taught basic Self Aid/Buddy Aid techniques in accordance with TCCC guidelines



## **Dispatch & Response**

### Activation/Notification

- Poquoson Police Department will receive notification from Communications indicating a response to a potential ASHI situation.
- Poquoson Police Department will assess the need for Fire and EMS response, along with the potential activation of the RTF.
- If the incident requires a RTF response, a minimum of the on duty RTF members and the RTF leader will be notified. If additional resources are required off duty personnel can be requested.

### Staging

- For immediate RTF deployment, staging should be unified, integrated, and located as close to the incident as possible, but at a distance that is determined safe by Law Enforcement.
- When arriving on scene, EMS, Fire, and related RTF components, will stage in a specific location, ready for immediate deployment at the direction of Law Enforcement, through a dispatch request or direct communications with the Law Enforcement.

### Health and Safety

- Fire and EMS personnel are not permitted to enter the scene unless directed by Law Enforcement personnel responsible for command of the event.
- All Fire and EMS personnel must have a Law Enforcement escort(s) in order to operate outside of the Cold Zone, unless the circumstances of the event prevent this and Law Enforcement command directs otherwise.
- Consider the possibility of primary and secondary IEDs at the scene and maintain situational awareness of your surroundings at all times.

### Hazardous Materials Response Team

- At the request of Law Enforcement, HazMat may be required to assist responders with on-site operations.
- Chemical, biological, radiological, nuclear, and/or explosive (CBRNE) incidents may require HazMat related integration into the response.
- Responders using a Self-Contained Breathing Apparatus (SCBA), other higher level protective respiratory equipment, or other equipment in such incidents, may be monitored for proper usage by the HazMat Response Team.

### Lack of Law Enforcement Escorts

- In the event that Law Enforcement escort(s) are unavailable, the RTF Team should be capable of entering the unsecured scene when directed to do so to perform lifesaving and rescue operations. This movement must be solely at the direction of Law Enforcement.

### Casualty Collection Points (CCP)

- Victim rescue and removal may be to a Warm Zone CCP, or a Cold Zone CCP, or to an armored tactical vehicle for extraction operations.
- The preferred CCP will be located at a safe distance away from the incident scene in a Cold Zone.
- If egress to a Cold Zone is not immediately attainable, a Warm Zone CCP can be established, at the direction of Law Enforcement.

### Deployment

- Law Enforcement will contact dispatch to relay deployment requests, and instruction, for RTF members.
- Law Enforcement will continually reassess the deployment of assets.
- RTF members must be prepared for redeployment as areas of needs change as it is determined by Law Enforcement.



- RTF teams will deploy into the Warm Zone to begin victim rescue and extraction once the RTF request has been received from dispatch.

RTF can be deployed for the following reasons:

- Victim treatment within an austere environment
- Victim removal from a Warm Zone to a Cold Zone
- Movement of rescue, EMS and Fire equipment from a Cold Zone to a Warm Zone
- Any other duties deemed necessary by Law Enforcement to accomplish the mission

When the RTF is operating in the Warm Zone:

- All patients encountered by the RTF teams will be treated as they are accessed, utilizing the M.A.R.C.H. acronym (M. Massive Hemorrhage A. Airway R. Respiratory C. Circulation H. Head/Hypothermia)
- Any patient who can ambulate without assistance (Green), will be directed by the team to self-evacuate down the cleared corridor, under Law Enforcement direction.

Triage

- Traditional Simple Triage and Rapid Treatment (START) is not the preferred method of triage due to the unpredictable circumstances surrounding an incident.
- On-scene triage in the Warm Zone will be conducted as part of the scene size up, at the direction of Law Enforcement.
- On-scene triage will consist of minimal patient assessment based on airway, breathing, and circulation.
- The RTF may use a Warm Zone Triage Bag and associated ribbons to triage patients as green, yellow, red, or black to allow for rapid warm zone triage.
- Upon initial patient contact, responders will perform basic lifesaving medical techniques based on the M.A.R.C.H. acronym, if necessary.

- In instances where unconscious patients cannot be immediately extricated, responders should place patient in a left or right rescue position.
- Walking wounded should be escorted immediately out of the Warm Zone, only when it is determined by Law Enforcement that the scene is safe enough to do so.

#### **Tactical Emergency Casualty Care (TECC)**

- EMS will address life threatening injuries to stabilize and ready the patient for transportation away from the scene.
- Lifesaving techniques performed, when necessary, within the Warm Zone will be used with the ultimate purpose of transporting the patient to the Cold Zone CCP for further treatment, evaluation, and if necessary, transportation to a medical facility.

Each RTF Team may be authorized to operate with issued equipment consisting of the following, as directed by Law Enforcement:

- Ballistic Protective Equipment (BPE)
- Individual First Aid Kit (IFAK)
- Shield, when available and appropriate
- Outer carrier with response approved equipment
- Extraction and victim movement devices

#### **Incident Documentation**

##### **Post-Operations Documentation**

- Once the immediate threat has been eliminated, and the RTF has successfully completed their primary objective of life safety, RTF members must begin the documentation process.
- Documentation includes the record of events leading up to, and including, RTF operations. RTF members will complete associated paperwork indicating the following:
  - RTF Team Number (ie. Team 1 or Team 2 designated for a particular incident)



- Contact with Patients/Patient Extraction
  - Account of Notable Events/Incidents during Operations
- Documentation must be reviewed, and approved, by the EMS Branch Director, or the designated agency head in a timely manner.
- RTF members will be expected to provide full and complete details of operations to the best of their ability, given the extreme circumstances surrounding a RTF deployment.

#### **RTF Debriefing**

- Once RTF operations have ceased, and the response folds into a traditional, operational ICS structure, RTF members must be debriefed by the Incident Commander and Operations Section Chief.
- RTF members will be provided with information regarding Critical Incident Stress Debriefing (CISD) and mental health awareness, and/or counseling and offered services, if necessary.
- The Incident Commander, or Operations Section Chief, may mandate CISD, or appropriate mental health referrals, if it is determined to be warranted.
- Appropriate referrals can be done in consult with the Fire and Police Chiefs.

#### **Training and Exercise**

- RTF members from all disciplines are to attend mandatory training as requested by the RTF leadership.
- Acceptable training programs for RTF participation will be reviewed and approved by Poquoson Police Dept. and Fire/Rescue training staff
- Personnel may be trained in the following areas
  - Bleeding Control for the Injured (BCon)
  - Law Enforcement and First Responder- Tactical Casualty Care (LEFR-TCC)
  - Tactical Combat Casualty Care (TCCC)
  - Tactical Emergency Casualty Care (TECC)
  - Ballistic Shield Principles
  - Tactical Movement and Team Discipline

- Internal and External CCP Operations
  - Operations within the Warm Zone
  - Donning/Doffing RTF Equipment
  - Firearms Handling
  - Evidence Preservation
  - Operating with an IFAK
- RTF members will train using the equipment necessary to provide lifesaving skills, as well as the basic techniques for rescue and extraction procedures.
- Team members will be required to attend 6 hours monthly (on duty) proficiency training in one or more of the following areas.
  - Planning
  - Command
  - Team Movement
  - Patient Care
  - Patient Evacuation
  - Any other topics deemed necessary by command staff

### Practical Scenario Training

- These scenarios should not be considered functional exercises, but rather responder-tailored scenarios that focus on the practical application of skills learned in the RTF Training Program.
- Practical Scenario Training may be conducted in a private facility, educational facility, or City operated property.
- These scenarios will not use members of the public during training, unless the individual has been approved by Police or Fire Department leadership.
- A catalog of available training resources, and appropriate RTF operational equipment is provided in the RTF Program.
- When applicable, Law Enforcement and Fire and EMS may invite stakeholders from private organizations and school districts to participate in training opportunities related to public capability to respond to ASHIs.



### Exercises

- A minimum of two (2) functional RTF Exercises should be conducted per year, in a facility that is likely a vulnerable target for an ASHI.
- These facilities may include schools, corporate business offices, or shopping malls, places of worship, or any building with a large gathering.
- Agency leadership is encouraged to conduct regular communications to facility owners and the School Superintendent to engage them in exercise initiatives.
- Exercises in ASHI target facilities should be conducted outside of normal operating hours to maintain operational security, and to minimize disruption of normal facility operations.
- Public participants (e.g. actors, observers, and controllers) in RTF Exercises must be vetted, and approved by the primary Law Enforcement agency, before the exercise information is shared.
- Approval of participants may be contingent upon the following factors:
  - Successful completion of a background check
  - Character references
  - Position within the facility organization chart
  - Completion of a non-disclosure agreement barring the participant from sharing RTF information with non-vetted individuals
  - Other factors as decided by Law Enforcement
- All training exercises will be free of all weapons by all exercise participants.
- Appropriate signage and notification will be made indicating that the exercise is taking place and/or in progress to avoid any mistake of the exercise as a real-world incident.

### Equipment

- Ballistic Protective Equipment (BPE)
- This SOP only addresses the BPE that may be issued to EMS and Fire.
- The BPE that may be issued to Law Enforcement will include equipment normally used during operations, as per Law Enforcement protocol.
- RTF members are required to wear BPE during RTF operations and training when directed to do so.
- BPE for Fire and EMS will include, at a minimum:
  - Ballistic Vests – minimum rating of IIIA
  - Individual First Aid Kit (IFAK)
  - Personal Protection Equipment (PPE) Gloves
  - EMS equipment approved by Operational Medical Director

### Shields

- If available, shields will be used during RTF operations. Shields, if available, will be provided by Law Enforcement.
- EMS and Fire should practice utilizing a shield to support RTF rescue and extraction within a Warm Zone, as directed by Law Enforcement.

### Equipment Return Due to Unsatisfactory Participation

- If the participating members are not engaging in RTF training to the satisfaction of the team leader or his/her designee, all issued RTF equipment will be returned to the purchasing agency.

### Administration and Logistics

#### Pre-Incident Coordination

- Fire and EMS, are responsible for maintaining the issued tactical equipment in their care.
- The Training Officers from both Police and Fire/EMS are responsible for coordinating trainings and exercises.



- It will be the responsibility of the individual participating agency to replace any expired equipment and to maintain all equipment in working order to ensure equipment is ready for deployment and use.

#### Records

- All agency specific documentation from RTF members will take place according to individual agency protocol.

#### Resources

- All requests for additional resources will be coordinated by the on-scene incident commander unless otherwise determined.

#### Post-Incident Coordination

- The team members respective agency will maintain and compile relevant documentation regarding RTF operations.

#### After Action Review and Report

- After Action Reviews are vital for post-incident analysis and RTF improvement planning.
- An After Action Review should be conducted, and an After Action Report should be completed, after every exercise and real world response.

#### Development and Maintenance

- Poquoson Fire/Rescue is responsible for the maintenance of the RTF SOP, and for ensuring that necessary changes and revisions to the SOP are prepared, coordinated, approved, and distributed.
- Poquoson Fire/Rescue is responsible for the coordination of the review and update of the SOP, attachments, and appendices based on issues identified through drills, exercises, and actual incidents on an annual basis.
- Poquoson Police Department personnel assigned to the RTF, are responsible for assisting Poquoson Fire/Rescue in the review and update of this SOP.