The purpose of this training is to provide attendees with the tools necessary to respond safely and successfully to an in progress Active Shooter Incident.

1) Introductions

A) Housekeeping

1) Bathrooms

2) Food

3) Media

a) The media may be present for some of the training. Various media organizations in the past have filmed, taken photographs or written about the training. If you do not want your face/name in the media, please tell one of the staff and we will do our best to keep you out of the spotlight.

B) Perimeter and parking/area security

1) If officers brought prohibited weapons to the training day, they will be asked to place them in their locked vehicle or drive them to a local police agency for temporary storage.

2) There will be roaming patrols in the parking lot throughout the training day.

3) There will be numerous staff placed along the perimeter of the training area to prevent people from entering the training zones as well as provide information to the public that may show interest.

4) Signage will be placed around the entire perimeter warning the public that the area is closed for police training. Use of yellow scene tape is also encouraged, so there is a clear “line” of where the training zones begin and end.

C) The surrounding communities will have been given notification a week or so prior to the first day of the training

2) Safety

A) (Lethal) Weapon check/storage (*1st of 3 safety checks*)

1) No weapons (lethal firearms, batons, OC, TASER, knives, live (lethal) ammunition, magazines with lethal ammunition) in the training area.

2) **ALL** non-lethal firearms (i.e. Simunitions ready pistols/rifles) **WILL** be left at the “*Gun Table*”. All non-lethal marking, non-marking and blank rounds **WILL** be left at the Gun Table. All magazines **WILL** be left at the Gun Table. Training staff will do a safety inspection of all the above listed items to make sure they comply with our safety policy and training requirements.

B) Zones (Safety zones for Simunitions training)

1) Staging Area: *There will be* ***NO*** *lethal weapons of any kind in the Staging Area.*

*This area may be located in the Safe Zone. This area must be free from impact of FX projectiles from the Safe Zone. Lectures, gear storage and protective gear are issued in this area. Any training done in the Staging Area will* ***NOT*** *involve FX marking/non-marking rounds and/or their associated weapons.*

2) Safe Zone: *There will be* ***NO*** *lethal weapons of any kind in the Safe Zone.*

*This is where the FX training takes place. No one enters without a safety inspection. When the range is “hot”, everyone* ***MUST*** *have the required safety equipment on. The Safe Zone* ***WILL*** *have a barrier between the Safe Zone(s) and Staging Area(s). Barriers can be solid or distance defined by max range of FX. Students will be briefed in this area regarding the next scenario, mandatory safety equipment is put on (mask, throat, groin) and non-lethal weapons are issued and made “hot” with the supplied magazines (w/marking or non-marking rounds).*

3) Unsafe zone(s): *All areas outside of the Staging Area and Safe Zone should be considered unsafe. An Unsafe Zone may also be an area where lethal weapons, rounds, batons, OC, TASERs, etc. are being purposely stored for security/safety reasons.*

3) Lecture/PowerPoint on current law and terminology

A) Assembly Bill 1598: *Requires the development of collaborative protocols and relationships between local and state first response entities, including law enforcement agencies, fire departments, and emergency medical service providers and agencies, in order that those entities shall act effectively and in concert to address active shooter incidents across California.*

B) Penal Code 13519.12: *The Commission on Peace Officer Standards and Training (POST) shall establish training standards and a course of instruction that includes response to terrorism incidents. The training standards and course of instruction may (if appropriate) include coordination with emergency medical services providers that respond to an incident, tactical casualty care, and other standards of emergency care as established pursuant to Section 1799.50 of the Health and Safety Code by the Commission on Emergency Medical Services.*

C) Active Shooter Terminology/Definitions

1) Active Shooter: *An armed person who has used deadly force on other persons and continuous to do so while having unrestricted access to additional victims. In an active shooter incident, the individual is actively engaged in killing people or is attempting to kill people.*

2) Contact Team (CT): *A team comprised of up to four law enforcement officers who deploy at an active shooter incident to immediately engage the shooter to suppress or eliminate the threat and prevent further injury or loss of life*.

3) Rescue Team (RT): *A resource comprised of law enforcement officers whose mission is to enter a Hot Zone under direct fire to rescue a victim such as in a hostage situation.*

4) Rescue Task Force (RTF): *A resource comprised of fire department personnel and law enforcement personnel assigned as a single unit that is deployed in a Warm Zone to provide Life Saving Intervention (LSI) and rapid extraction of victims.*

5) Casualty Collection Point (CCP): *In a tactical environment, a secured area typically located in the Hot or Warm Zone where victims can be brought to initiate LSI while waiting to be extracted by RTFs to treatment areas in the Cold Zone. Multiple CCPs may be established based on incident needs. The physical location of a CCP must be adequate cover and protection from the potential threat for safety of personnel and victims. Consider locating CCPs in the vicinity of adjacent zones to better facilitate moving victims from one zone to another.*

6) Zones (Zone terminology for Active Shooter incidents)

a) Hot zone: *An operational area where a direct and immediate threat exists. An unsearched area or an area in range of direct gunfire is considered a Hot Zone.*

b) Warm zone: *An operational area where a potential threat exists, but the threat is not direct or immediate. The threat still exists elsewhere in the building or venue, but law enforcement has cleared and secured as area for which fire and EMS personnel with appropriate Personal Protective Equipment (PPE) can operate in.*

c) Cold zone: *The operational area where no significant danger or threat can be reasonably anticipated as determined by law enforcement and where most incident support functions are located.*

7) 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.*

8) Define roles/responsibilities of LE, Fire and EMS

9) Any officer may be asked to, or any officer may personally take charge of the initial command, control, and communication of an active shooter incident (until relieved) involving the distribution of resources and contact with Fire in order to set up/initiate RTF.

10) The scene must be WARM, a perimeter set and a clear entrance/exit route must be established prior to the start of the RTF. Officers must contact Fire and provide the following information when requested.

D) Lessons learned from:

1) UC Merced

a) Knives

b) Inspired/Terrorism

2) UCLA

a) Self dispatched officers

b) Rumors of another shooter

c) Multiple locations

d) Professors/faculty did not take the alert seriously

3) San Bernardino

a) Self dispatched officers

b) Second suspect

c) Fire sprinklers (water) caused casualty care issues

c) IED-Explosive device(s)

d) Suspects went mobile

E) Blue/blue concerns

1) Different uniforms

2) Self-deployed officers (off duty)

3) Undercover officers

F) De-escalation

G) Communication

1) Verbal

2) Non-verbal

4) Lecture/PowerPoint on Tactical Casualty Care

A) Tactical Casualty Care

1) Hemostatic Dressing/Wound packing

a) Apply hemostatic dressing with wound packing utilizing California EMSA approved products.

2) Direct Pressure & Pressure Dressing

3) Tourniquet application

4) Basic airway management

a) Perform Chin lift/Jaw thrust, airway adjuncts (NPA, OA) if approved by local EMSA agency.

5) Chest Seals

6) Recovery position

7) Casualty Collection Point

8) Scope of practice/skills/procedures by level of training.

a) Basic life support

b) EMT

c) AEMT

d) Paramedics

e) MD

9) Lifts, drags/carries

5) Tactical Casualty Care and Entry Tactics Practical (Split in 2 groups)

A) Group A w/instructor will do hands-on situations requiring the application of tactical emergency casualty care. No Simunitions

1) Hemostatic Dressing/Wound packing

2) Direct Pressure & Pressure Dressing

3) Tourniquet application

4) Basic airway management

5) Chest Seals

6) Casualty Collection Point

7) Lifts, drags/carries

B) Group B w/instructor will do hands-on tactical movement. No Simunitions

1) Team movement

a) Bounding

b) Hallways

c) Stairwell

d) Room entry

2) Moving with a firearm

a) Muzzle awareness

b) Finger off the trigger

c) Sympathetic reaction

d) Backdrop

3) Formations

a) Diamond

b) T

c) Stack

d) One or two officer entry

4) Cover/Concealment

a) Cover: *A law enforcement term that refers to a location or hard barrier that provides protection from gunfire, blast or shrapnel hazard. Cover can be natural or manmade but must be dense enough to provide adequate protection. The higher the caliber of weapon the more substantial the barrier must be.*

b) Concealment: *A law enforcement term that refers to a location that hides an individual from view but does not provide protection from gunfire.*

5) Brief firearms familiarization for Fire/EMS

a) Semi-automatic pistol

b) Semi-automatic rifle

6) Team movement (depending on circumstances)

a) Dynamic- suspect is actively shooting/engaging

b) Deliberate- suspect has gone “quiet”. Systematic search, clearing of area/zones, etc.

C) Group B w/instructor will do hands-on situations requiring the application of tactical emergency casualty care. No Simunitions

1) Hemostatic Dressing/Wound packing

2) Direct Pressure & Pressure Dressing

3) Tourniquet application

4) Basic airway management

5) Chest Seals

6) Casualty Collection Point

7) Lifts, drags/carries

D) Group A w/instructor will do hands-on tactical movement. No Simunitions

1) Team movement

a) Bounding

b) Hallways

c) Stairwell

d) Room entry

2) Moving with a firearm

a) Muzzle awareness

b) Finger off the trigger

c) Sympathetic reaction

d) Backdrop

3) Formations

a) Diamond

b) T

c) Stack

d) One or two officer entry

4) Cover/Concealment

a) Cover

b) Concealment

5) Brief firearms familiarization for Fire/EMS

a) Semi-automatic pistol

b) Semi-automatic rifle

6) Team movement (depending on circumstances)

a) Dynamic- suspect is actively shooting/engaging

b) Deliberate- suspect has gone “quiet”. Systematic search, clearing of area/zones, etc.

6) Safety Brief & Search

A) **Safety Brief** (Refer to #16 “Instructor/Student- Active Shooter Response Training Safety Policy” for the complete training policy.)

1) Brief on use of Simunitions (marking, non-marking, blanks)

2) Brief on firearms safety practices

3) Brief on medical plan/care

a) Different injuries and related procedures/care

4) *Four firearms safety rules*:

a) **Always loaded**

1) Treat EVERY firearm as if it is loaded until you check the chamber and clear the firearm.

b) **Finger off the trigger**

1) Your finger is kept off the trigger, outside of the trigger guard and should be indexed along the frame of the firearm until you make the decision to shoot.

c) **Muzzle discipline**

1) Always keep the muzzle of the firearm pointed in a safe direction. Do not let the muzzle cover anything that you are not willing to destroy.

d) **Target area**

1) Be aware of your target, the area in front of and the area behind it.

B) **Safety search** (Instructors & role players MUST also be searched)

1) Self and friend (2nd of 3 safety checks).

2) Instructor check of students (3rd of 3 safety checks).

3) *EVERYONE is a SAFETY OFFICER*!

C) Review hot, warm and cold zones

D) *Review Simunitions training commands*

1) **Safety gear** on (minimum)

a) Head

b) Neck

c) Groin

2) **Load and make ready**

a) With safety gear on, load non-lethal firearm(s) with provided magazines, holster or sling (on safe) and wait for further commands.

3) **Scenario is hot**

a) Scenario is now starting and has gone “live”

4) **Cease Fire**

a) Stop what you are doing, point the non-lethal firearm(s) in a safe direction and listen to commands from the safety staff

5) **Scenario is cold**

a) Once all non-lethal firearms have been cleared, “scenario is cold” is announced. It is now safe to remove your safety gear

4) **Red, red, red**

a) This is used when students become too physically aggressive with role players. There will be no brutalizing of role players.

7) Scenarios

A) Scenario #1

1) Basic w/CT, RT, RTF. Simunitions (marking)

2) Scenario will include one (1) active shooter (AS) who will engage officers on their approach. AS will run to and enter a classroom/office. Officers must engage AS in the room. The AS will go down after the appropriate use of force is applied. There will be numerous people in/around the area. A Contact Team, Rescue Team and Recue Task Force will be used.

B) Scenario #2

1) Intermediate w/CT, RT, RTF. Simunitions (marking)

2) Scenario will include two (2) active shooters. One will engage officers after they enter the building. The second will attempt to come around behind the Contact Team, prior to the arrival of the Rescue Team, and test the rear guard position. AS will go down after the appropriate use of force is applied. There will be numerous people in/around the area. A Contact Team, Rescue Team and Recue Task Force will be used.

8) Lecture/PowerPoint on areas of concern frequently encountered on a college campus

A) Hospitals

1) Immediate patient care

B) Laboratories

1) Chemical

2) Biological

3) Radiological

4) Concerns related to ruptured containers, etc.

5) Types of munitions that may cause more problems for emergency response personnel in this environment.

a) OC, CN, CS, Smoke

b) Flash bangs

c) Standard handgun, rifle and shotgun munitions

6) Animal research

C) Large density housing

1) Access into buildings (card key, standard key, etc.)

D) Large venues

E) Child care/daycare centers

F) Large open space

G) Mental health concerns

1) Age and population

H) Government research

I) Cruz Alert system

J) Use of social media

K) Terrorism

1) Radicalization

2) Multiple suspects

3) Use of IEDs

4) Secondary Devices

***Staff will download all marking rounds and check all firearms/magazines. Role players, students will be searched to insure no marking rounds make it into this phase of the training.***

***Radios will be issued for this scenario***

***Staged “IED” explosion and dispatch broadcast***

***Required eye protection issued (only eye protection needed for blanks).***

***Ear protection is optional and up to the students and staff if they want to use/wear it.***

9) Scenario #3

A) Advanced w/CT, RT, RTF.

1) Casualty Collection

2) Force Protection

3) Perimeter

4) Unified Command

5) Triage/Treatment

6) Patient movement

a) Evacuation to Ambulance

b) Evacuation to helicopter

7) Scenario will include one (1) active shooter and one (1) active bomber (AB). AB will “detonate” a simulated bomb vest prior as officers are dispatched to the call but prior to the officer’s arrival. As the Contact Team arrives they will be engaged (outside) by AS. AS will go down after the appropriate use of force is applied. There will be numerous people in/around the area. This is a MASS CASULATY scenario and a Contact Team, multiple Rescue Teams and multiple Recue Task Force teams will be used.

10) Debrief/equipment return