



POLK COUNTY FIRE CHIEFS ASSOCIATION

The policy proposed here has been reviewed by the Polk County Fire Chiefs and is intended to provide the minimum requirements for all Polk County Fire Departments and to create some level of uniformity to policies in the metro area.

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Active Threat SOG Template

Adopted: 1/13/25

Updated:

The Polk County Fire Chief's Association has adopted a standardized procedure for Active Threat Events. The intent is to have each fire department respond in a like manner for the safety purposes of all personnel in the event of a mutual aid call.

Purpose:

This procedure outlines methods for integration between Fire and EMS agencies and law enforcement agencies during Active Threat Events. It is designed to provide a clear understanding of the actions that Fire, and EMS will perform throughout the incident to assure that all savable lives are treated in the most expeditious manner possible without undue risk to first responders. Fire Departments will assume additional responsibilities should there be a fire or hazardous materials at these types of incidents.

Definitions

1. **Ambulance Exchange Point:** 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 to hospitals.
2. **Casualty Collection Point (CCP):** A specific Warm Zone location with security measures to assemble nearby casualties and provide Indirect Threat Care.
3. **Loading Zone/Treatment Area** - A large open area where all casualties from an incident are assembled, organized, and loaded into awaiting ambulances that are then transported to directed hospitals. Typically used when casualties outnumber available transport ambulances.
4. **Operational Zones** – Incident operational areas are defined by hazards present and restricted to personnel trained and equipped to operate in them.



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- **Hot Zone** – Area that has not been cleared by law enforcement personnel and has a direct high potential threat that the perpetrator is in this area. Rescue Task Force Teams (RTFs) should NOT be deployed in this area.
 - **Warm Zone** – Area of indirect threat where the perpetrator is not believed to be and is available for entry by a trained RTF to treat victims and extract them to the CCP/AEP.
 - **Cold Zone** - Secure area, outside the area of immediate threat
5. **Contact Team:** A team of law enforcement officers formed up tactically to rapidly move toward the active threat in an effort to neutralize the threat in order to prevent further injury or loss of life.
 6. **Rescue Task Force (RTF):** A mixed grouping of resources comprised of a security element, a medical element, and a team leader with the mission of entering the Warm Zone of an Active Threat, locating victims, providing rapid life-saving interventions (focused on major hemorrhage control), and rapid evacuation of these victims. At a minimum, this unit is comprised of two (2) law enforcement officers and two (2) EMS personnel. One (1) law enforcement officer serves on the point and one (1) other officer serves as the rear guard, escorting EMS personnel and providing security only.
 7. **Secured:** A systematic and methodical search of an area wherein there is a high level of certainty there are no remaining threats, and this same area's continued security is probable.
 8. **Staging:** is a designated location for incoming apparatus to stop and await assignment. Units in staging are considered immediately available for deployment where needed at an incident. A staging officer will coordinate the resources on hand at staging.
 9. **Tactical/ Tactical Group Supervisor:** Within the unified command structure, Tactical will be the LE Group Supervisor forward deployed who is responsible for establishing the CCP and managing resources in or near the hot zone. This position of "tactical" is similar to what FD/EMS personnel typically equate with an Operations Group Supervisor. The Officer assigned EMS Group Supervisor should be co-located with Tactical.
 10. **Unified Command (UC):** A location and function where lead personnel from all agencies with responsibility for the incident will coordinate its management without giving up each individual agency's authority, responsibility, or accountability by establishing a common set of incident objectives and strategies and communicating directly until termination.



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Guidelines

Priorities

During the beginning stages of such an event, the priority of will be life Safety through the following:

1. Establishment of a Staging area/Staging manager by the first arriving Company Officer (CO) and assistants.
2. Establishment of Medical group Supervisor by a Chief Officer or Company Officer co-located with Law Enforcement (LE) - "Tactical".
3. Establishment of the Medical Branch by a Chief Officer co-located with the LE Branch at the Incident Command Post.
4. The development and deployment of RTF's.
5. The deployment of Medic units to AEP.

Initial Considerations

- Medic units should park separate from fire apparatus in the staging area, ensuring access for deployment is maintained.

Apparatus Upon arriving at staging, announce arrival, collect active threat kit and report to Staging Officer.

Staging area Manager/Officer:

1. First arriving apparatus CO will be Staging area manager and establish Staging Area. Identify assistants:
 - Scribe - to immediately record location, arriving apparatus, incoming apparatus and personnel assigned to RTF units.
 - RTF coordinator – as Law enforcement and Fire/EMS arrive. Assemble RTF teams (4-5 personnel)
2. Unite with LE liaison in staging to coordinate LE personnel.
3. Declare location of staging area via radio notifying dispatch and incoming apparatus on assigned operational channel.
4. Assure MCI kits are procured and cached at staging area.
5. Request any additional resources/Medic units/manpower needed based on information gathered throughout incident.
6. Deploy RTF(s) as requested by Unified/Tactical Command.



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“Tactical” Officer (1st arriving Chief Officer or 2nd arriving Company Officer)

- Establish EMS Group Supervisor at arrival.
- Unite with LE liaison and designate Tactical location for forward operations.
- Along with LE, designate CCP and AEP.
- Coordinate the deployment and management of RTF’s at CCP and Medic units to the AEP.

Medical Branch Director/Unified Command (2nd arriving Chief Officer)

- Unite with LE liaison - Establish Unified Command Post and assume role of Medical Branch Director.
 - this location should be as close to the Staging area as possible – IC/UC should, if not already identified, declare location of Staging area or change location to best suit needs of operations or new information.
- Considerations: (When circumstances allow, and size of incident requires)
 - Assigning Transport (Priority), Triage and Treatment Supervisors.
 - Expand appropriate MCI plan at discretion.

Rescue Task Force(s) RTF

After/during RTF’s organization and assignment in the staging area these actions/tasks should be completed:

- **“MED BOSS”** -Whether one or multiple RTFs are responding to warm zone together, a Med-Boss should be designated for each responding group.
 - The Med-Boss will be responsible for directing actions of RTF and radio communications.
 - The Med-Boss assume command and control of CCP.
 - If multiple CCPs develop, the first arriving RTF should have command and control of that CCP.
 - Each CCP should have a location-based name (gym, lunchroom, office, etc.) – Not numbered.
- Once entry/contact with patients is made:
 - Advise UC/Tactical of contact, number of patients, treatment and movement if necessary.
 - Triage and treat patients as necessary, collect patients at CCP and then move to AEP (if not the same location).
 - Notify UC/Tactical of location of AEP and request response of Medic Unit(s).
 - Assist in loading patients into medic units at AEP.
 - Notify UC/Tactical of assignment completion and wait for further assignment.



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Medic Unit Response

These actions/tasks should be completed:

Once leaving staging, move to transport channel – per Transport Supervisor/UC/Tactical.

- As assigned, deploy to the appropriate AEP.
- Receive/assist RTF team with exchanging patient(s) at AEP.
- Notify UC of patient(s) information including: number and priority (Red, Yellow, Green) and further actions.
- Move medic unit to either safe location for immediate lifesaving treatment, transport to assigned facility or drop green patients off at local treatment area (Treatment area).
- If law enforcement personnel available – place in passenger seat of Medic unit.

RIG	Duties	
First Arriving Apparatus	Staging – Assume command, assess information and announce staging area. Assign Scribe and RTF Coordinator	
Medic units	Report to staging Ready unit for patient care	
Incoming apparatus	Report to staging manager – RTF's Active threat kit Smith cot/Redd sled	
First Arriving Chief Officer	Report to Tactical with PD MCI kits at staging	
2 nd arriving Chief Officer	Establish/report to Unified command Establish EMS Branch MCI kits at staging	