

DYNAMIC VIOLENT INCIDENTS

**THE DYNAMICS OF CASUALTY COLLECTION POINTS & AND NOT
SUCKING AT WHAT YOU DO...**

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PURPOSE:

- ▶ This presentation was made / adjusted to augment the "***Task Force - Land Pirate Code: Hacking CCP's***" podcast from Element Rescue.
- ▶ This presentation does NOT tell you what to do, it does identify principles common to successful acquisition, management, and evacuation concerning CCP's.
- ▶ Every agency / municipality has different organic assets and will encounter varied environmental pathology, so you will have the best vantage point on how to implement these principles.



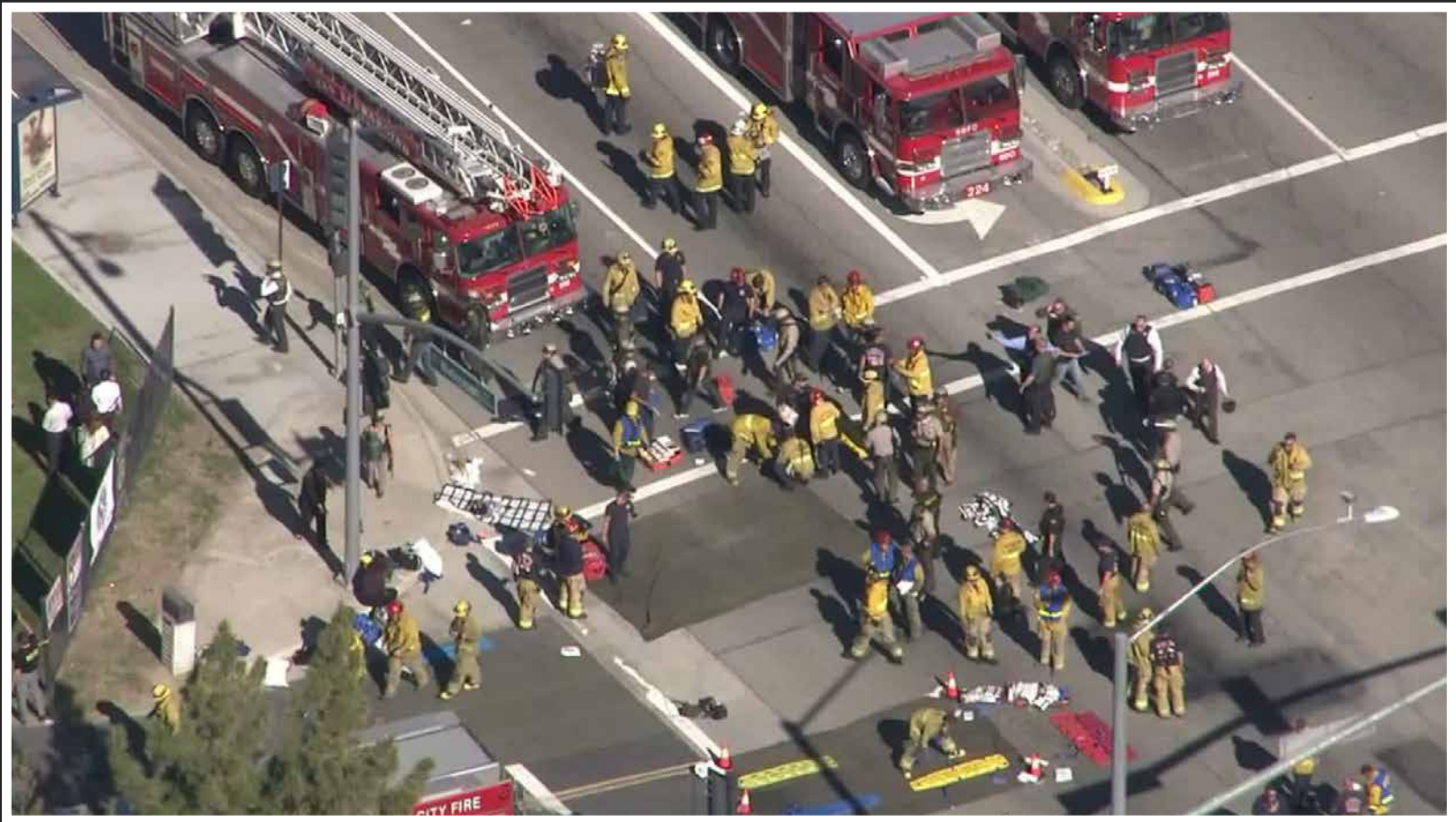
ORIGIN OF THE CCP WORKING GROUP

- ▶ Purpose:
 - ▶ Develop a working group comprised of various First Responder disciplines to;
 - ▶ Develop principles for the acquisition and management of CCP's during the civilian response to ASI/Violent MCI
 - ▶ Develop a GAP Analysis of civilian CCP tactics, techniques, and procedures (TTP's)
 - ▶ Analyze KPP's of DoD CCP's for application into civilian environment.

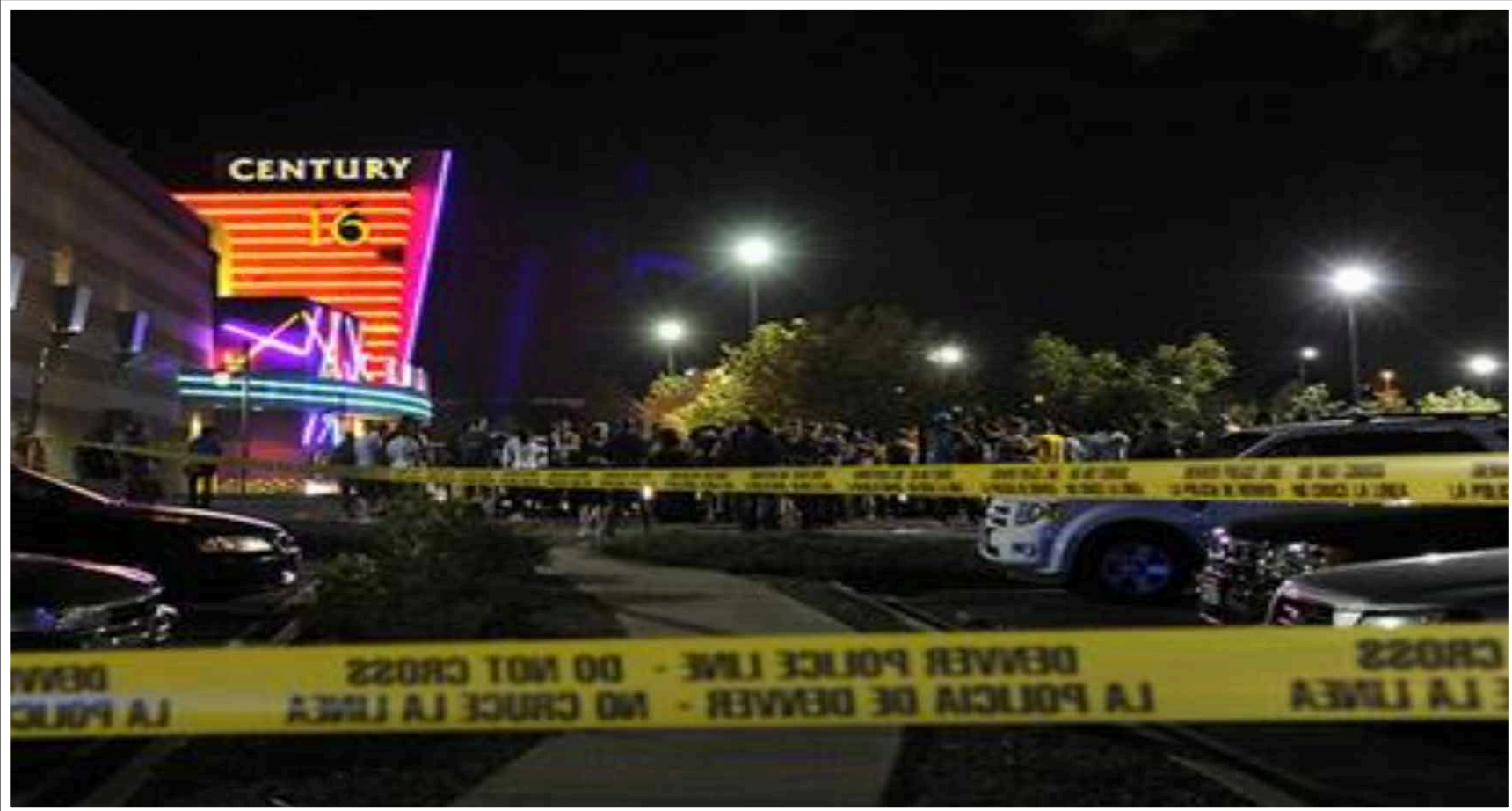


STEP 1 – DON'T SUCK AT WHAT YOU DO – FINDING OPERATIONAL GAPS

- ▶ The platonic fold... Where Worlds Collide...
 - ▶ “the explosive boundary where the Platonic mind (oversimplified) - set enters in contact with messy reality, where the gap between what you know and what you think you know becomes dangerously wide. It is here that the Black Swan is produced.”



Number Transported to Hospital	Mode
20	Ambulance
27-28	Police Vehicle
13-14	Private Vehicle or walked (one)
60	Total

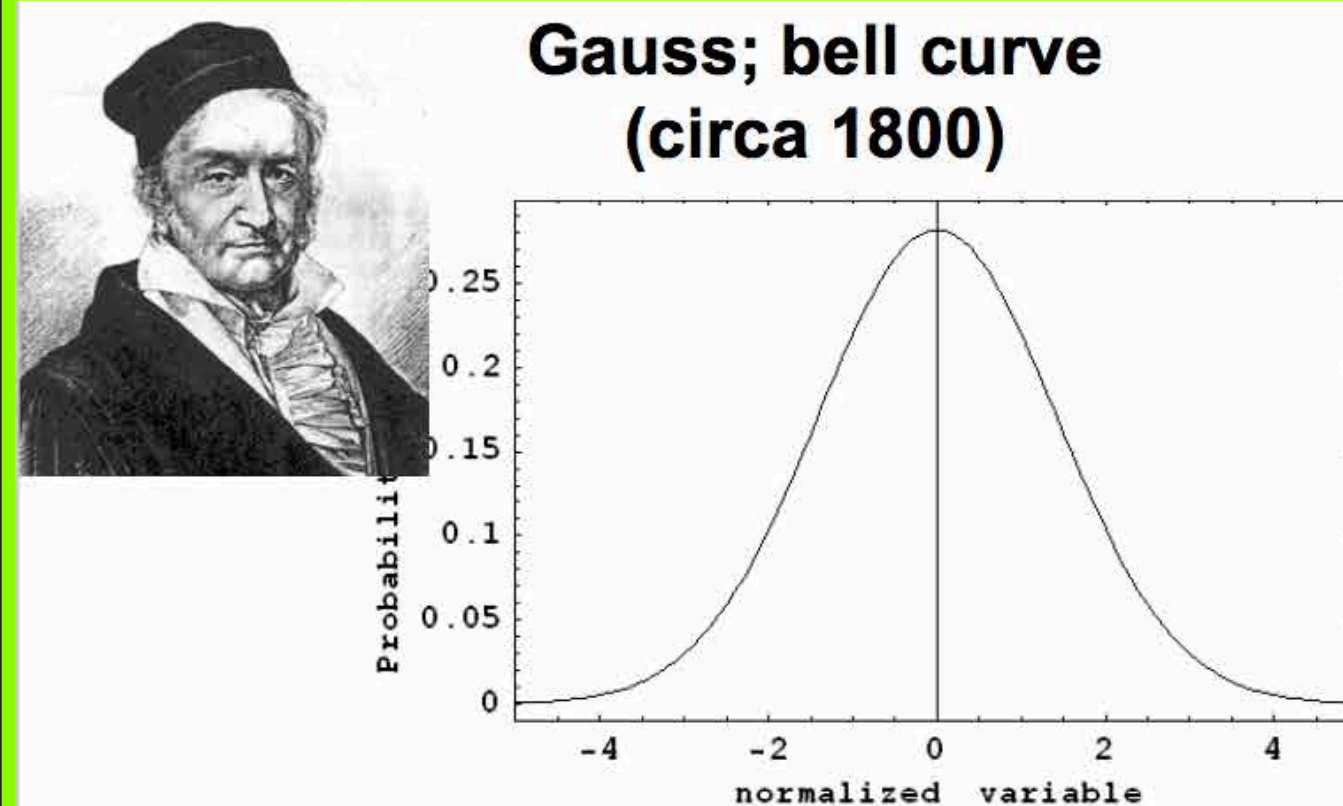


FIRST... SOME SA FOR UPCOMING SLIDES...

Nonlinear Dynamics- study of systems governed by equations in which a small change in one variable can induce a large systematic change; the discipline is more popularly known as chaos (theory)

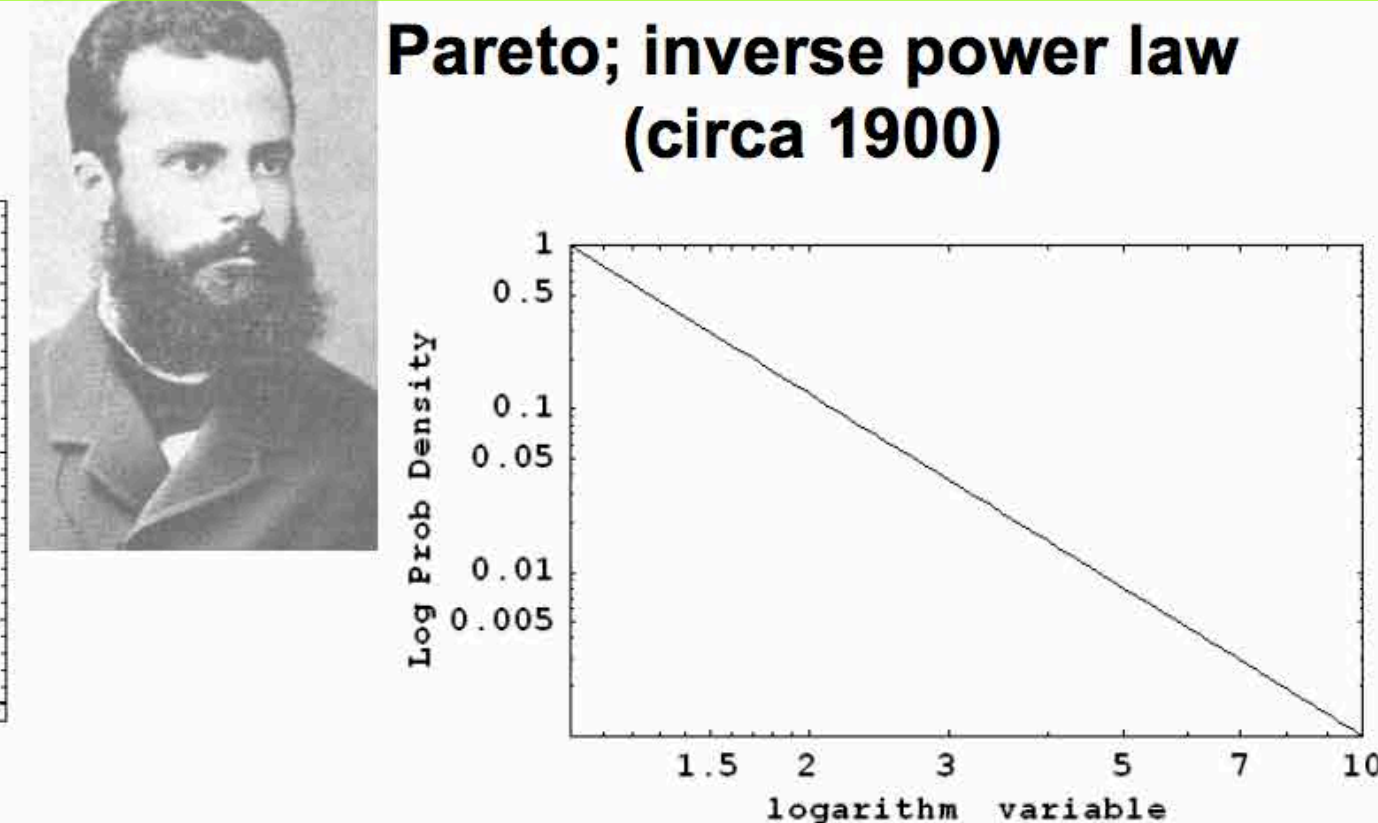
EBM

Simple - Low Context -
Limited Variables



- **Simple scientific world view**

- linear; output is proportional to input
- additive
- simple rules yield simple results
- stable
- predictable
- quantitative
- normal distribution




- **Complex scientific world view**

- nonlinear; small changes may diverge
- multiplicative
- simple rules yield complex results
- unstable
- limited predictability
- qualitative plus quantitative
- inverse power-law distributions

HRO

Complex - High Context -
Environmental Variables


AND, SOME MORE SA FOR UPCOMING SLIDES... WHY DO WE KEEP CREATING IRRELEVANCY?



A **mass casualty incident**, often shortened to **MCI**, is any incident in which EMS resources, such as personnel and equipment, are overwhelmed by the number and severity of casualties.

Pathology of Inaccurate Perception - The Illusion of Patterns

We oversimplify complexity (remove variables / randomness); “Due to humans natural fear of uncertainty in the brain - it tries to exercise control over their environment” - *Journal of Consciousness Studies*



Active Shooter Incidents / IED Response - These are nonlinear events. The response is interdependent with one another, threat(s), and casualties. By definition - a linear solution will not work - due to the inability to predict incident and actions.

On the morning of October 1st, 2017, how many SOP's addressed or predicted the requirement for response to a shooter on the 32nd floor of a hotel overlooking an open field concert?

Black Swan Events

- Unpredictable - Outlier
- Large Impact
- Retrospectively smart people concoct ways to make it predictable

Ludic Fallacy

Triplet of Opacity - the human mind suffers from 3 ailments as it comes into contact with history;

- The illusion of understanding - when the world / situation is more complex / random than we realize
- Retrospective distortion - we assess data only after the fact - it seems clearer / more organized than in reality
- Overevaluation of factual information and the handicap of authoritative and learned people, particularly when they create categories - when we platonify...

THREATS...COMMANDERS INTENT...THINK DAY TO DAY OPERATIONS AT A HIGHER TEMPO / TIME COMPRESSION

- NOT A COMPLETELY NEW PROTOCOL THAT IS UNTESTED AND TIGHTLY COUPLED

Threat - what is it, and how does the first responder engage?

- ▶ **LE - Behavioral** = LE engages unpredictable, uncontrolled behavior that is intentional, thinking, and mobile; threats change in less than a second. This behavioral threat can expand indefinitely in size, scope, and time. Mitigation of threat is attained through containment, isolating and ending the capability of the threat to continue to injure others, and ensuring physical space is safe and secure.
- ▶ **FD - Physical** = generally uncontrolled energy in the five more common forms (thermal, chemical, mechanical, electrical, and ionizing radiation). The uncontrolled dissipation of energy or uncontrolled transformation of energy between forms, following the laws of thermodynamics, damages property, injures people, and kills. This is finite, ending when the energy source becomes depleted, is not intentional in that energy does not think or plan, and, except for explosions, changes over minutes.
- ▶ **FD/EMS - Physiological** = engage immediate physiological threats to health through medical treatment of unstable, life-threatening medical conditions. This care is given in the public safety environment where the environment, itself, can act as a distinct pathology.

CCP'S

- ▶ What ...
- ▶ Who...
- ▶ Where...
- ▶ When...
- ▶ How...



CCP'S

"Don't believe the hype"
- Public Enemy



- ▶ A CCP for dynamic acts of violence do not have the same Key Performance Parameters as the typical PHTLS / ITLS MVC CCP.
- ▶ "A CCP is just a CCP" attitude is **NOT** a "thing"... neither is "Tac Evac Inertia"
- ▶ The Active Shooter / IED response has not only casualty pathology but environmental pathology.

CCP'S DEMYSTIFIED...

- ▶ What is a casualty collection point?
 - ▶ A control measure
 - ▶ Tool to create clarity in chaos (complexity)
 - ▶ Critical point in the continuum of care
 - ▶ A step off location
 - ▶ Common point link up between systems

CCP'S DEMYSTIFIED... PRINCIPLES VS. PRACTICES

- ▶ What is common to all CCPs
 - ▶ Security
 - ▶ Easy identification from inside and outside (markings)
 - ▶ Command and Control integration
 - ▶ Effective Work Space
 - ▶ Rapid Evacuation Capability

ERNEST - Example



The first responder may not be able to meet all of these benchmarks - effect what you can - based on incident...

RUN-THE-CCP'S - BREAKIN' DOWN THE PRINCIPLES

- ▶ **Security** - Use words wisely... Semantics
 - ▶ LE vs. EMS vs. Fire
 - ▶ How many personnel are needed? Can we change our TTP to become more efficient?
- ▶ **Easy identification from inside and outside (markings)**
 - ▶ How? Disposable Strobes, Chem-Lights, etc...?
- ▶ **Command and Control integration**
 - ▶ Needs an operational level understanding... Location(s), cax flow, assets, evac options
- ▶ **Effective Work Space**
 - ▶ How much room do you need? What is the sq ft of a cax and med kit (open)
- ▶ **Rapid Evacuation Capability**
 - ▶ What is your evac plan? How many points of egress? Why?
 - ▶ Sidebar - What if... a potential explosive is identified outside your CCP?



CCP'S DEMYSTIFIED...

- ▶ What a CCP is at a basic level: A CCP is a *control point*. Basically the term is no different than a primary breach, HLZ, or Fall out points (Go to shit spots) etc.
- ▶ These are all control points that are planned for and placed based off of the location of the Target building, with consideration for what the specific control point is controlling. As well as the optimum ingress and egress from these points to other control points.
 - ▶ **Breach points** control where teams enter and exit a building
 - ▶ **HLZs** control where air assets meet up with personnel on the ground
 - ▶ **Fall-out points** Control where personnel inside the target building fall back to in the event of an emergency (bomb found inside etc).
 - ▶ **CCP's** Control the flow of patients, medical personnel and medical supplies.

CCP'S DEMYSTIFIED...

- ▶ The purpose of a Control point is to guide teams to the right area ... they are especially important in the ambiguous and dynamic nature of active shooter / IED mass casualty incidents.
- ▶ Control points allow teams to regroup, reorganize and regain the initiative for the tactical, medical, and rescue problems that are present in these situations.

CCP'S DEMYSTIFIED...

- ▶ CCP's are the friction point between lots of organizations (LE, Fire, & EMS) and an ambiguous tactical and medical problem. Having a smooth operational flow in training will prevent the chaos from progressing into a crisis during a real world situation.
- ▶ Typically CCP operations start off Chaotic but a well drilled team will be able to take charge and bring order to the chaos fairly quickly... if all the units involved understand the basics of what a CCP needs to function and reach an optimal outcome.

CCP'S DEMYSTIFIED...

- ▶ Everyone involved in an active shooter/MCI needs to have the ability to perform a basic **MAR**CH assessment. Apply a TQ, pack a bleeder, be able to employ a positional airway (Recovery position), stick something over a hole in the chest, and keep the casualty warm.
 - ▶ Understand the severity of a wound inside the box
- ▶ Have non-medics communicate with the medics in simple verbiage the injuries and condition of the patient they just did the assessment on. (Hands-on Hand-off)
- ▶ EMT's and Medics must engage the chaos, and make decisions when information may be lacking, inaccurate, or nonexistent (OODA Loop)

CASUALTY COLLECTION POINTS

CCP WRAP-UP...

Become a student of your craft, research, and utilize HRO principles when creating and training for your response

As a responder, be comfortable working within chaos & uncertainty. No response algorithm, mnemonic, cheat sheet - just know and train on principles / capabilities and call audibles as needed.

Don't get hung up on whether it is inside, outside, hasty, dynamic, mobile, or static... Make it work based on how the situation unfolds - and what allows you to reach the optimal end-state.

CCP's are critical for...

- Getting your head above water and obtaining a semi-accurate picture of your medical asset requirement ,
- Allocating resources and assets effectively
- Transporting / dispersing patients to the correct facility



Like most things in life, we can turn to gangster rap for methodologies...

"You deal in dirty work, do the deed...then dash...disappear in the smoke like you're a Freakin' magician" - RTJ



THANKS...HIT US UP WITH ANY QUESTIONS
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