



Roosevelt Fire District

Standard Operating Guidelines

Section:
Operations

Guideline: 19
Rescue Task Force

Purpose: To establish policies and procedures for the use and dispatch of the Rescue Task Force.

Scope: This SOG applies to all members of the Roosevelt Fire District. Specific Rescue Task Force duties only apply to members of the Task Force

Training: Training will be scheduled and conducted under the direction and guidelines set forth by the Roosevelt Fire District and the Hyde Park Police Department.

Procedure:

The Rescue Task Force (RTF) is a set of teams deployed to provide point of wound care to victims where there is an on-going ballistic or explosive threat. These teams treat, stabilize, and remove the injured while wearing Ballistic Protective Equipment (BPE) in a rapid manner under the protection of law enforcement. Roosevelt Fire District (RFD) will train and work primarily with the Hyde Park Police Department (HPPD) although may include Dutchess County Sheriff Office (DCSO) or New York State Police (NYSP).

An RTF team must include minimum 2 RFD RTF members, at least one being an EMS provider and 2 Law enforcement officers. This response can be deployed to work in, but not limited to, the following.

- A. Active shooter in a school, business, mall, conference, special event, etc.
- B. Any other scene that is or has the possibility of an on-going ballistic or explosive threat.

General Information:

- A. Hyde Park Police (HPPD) and Roosevelt Fire District (RFD) will establish a Unified Command to rapidly deploy RTF teams into established zones.
- B. Prior to deploying an RTF team, threat zones must be identified:
 - a. Hot Zone - Area where there is known hazard or life threat that is direct and immediate. An example of this would be any uncontrolled area where the active shooter could directly engage an RTF team. RTF teams will not be deployed into a Hot Zone.
 - b. Warm Zone - (also known as the area of indirect threat) Areas that law enforcement has either cleared or isolated the threat where there is minimal or mitigated risk. This area can be considered clear but not secure. This is where the RTF will deploy, with security, to treat victims.
 - c. Cold Zone - Areas where there is little or no threat, either by geography to threat or after area has been secured by Police (i.e. Casualty Collection Points). An area where RFD will stage to triage, treat, and transport victims once removed from the warm zone.
- C. Depending on the size of the incident and location, injured victims may need to be placed in a Casualty Collection Point (CCP) before transition to the cold zone. This will be predetermined by initial units, secured by law enforcement, and relayed to the RTF teams through Unified Command. As this area will be secure, it may be considered a Cold Zone and may be staffed with non-RTF RFD Fire/EMS personnel.

Operations:

A. RTF Dispatch

- a. When the 911 Center (DC 911) receives a call for a shooting the original dispatch will be for a “gunshot wound” (GSW) call type. This will generate the following response:
 - i. 63-71
 - ii. 1 ALS Unit

B. Command Post

- a. Upon establishing command and coordinating with law enforcement, the following resources should be considered
 - i. Field Communications truck
 - ii. Additional EMS units
 - iii. Fairview with RTF
 - iv. Hazardous Materials Team
 - v. Bomb Team
- C. The first arriving unit should identify a staging area for all initial units. Consider an area out of the line of sight of incident, in line of approach to location, or possible predetermined area from pre-plans
- D. The first arriving Chief or Officer should:
 - a. Establish command for Fire Department units
 - b. Meet with HPPD to establish Unified Command
 - c. Work with HPPD to identify the RTF working zones
 - d. Consider adding an additional EMS Taskforce or MCI Alarm for patient treatment and transport
 - e. Consider moving primary staging to a larger or safer area if needed
 - f. Create RTF teams from deployed units
 - g. Once Unified Command has declared the working zones, RTF teams must be informed of their working limits
 - h. Use the ICS system to label and keep track of RTF teams
- E. The following ICS components should be established:
 - a. Operations
 - i. RTF GROUP
 - ii. MEDICAL GROUP
 - b. Medical Group
 - i. Treatment Unit
 - ii. Triage Unit
 - iii. Transportation Group
 - c. RTF Group
 - i. RTF Team 1 through as needed #
 - 1. LEO
 - 2. RTF Member
 - 3. RTF EMT
 - 4. LEO
 - d. Planning
 - e. Staging
 - f. Public Information
 - g. Logistics
- F. Equipment
 - a. The equipment needed for the individual RTF members are located on 63-71, and Chiefs vehicles.
 - i. Each RTF member should equip themselves with a minimum of a Kevlar helmet, body armor, flashlight, radio, and first aid kit.
 - ii. RFD RTF members WILL NOT be permitted to carry any type of firearms.
- G. Communications
 - a. All communications should follow the county radio plan for dispatch, response, and command 3
 - b. RFD channel 63 should be used by Fire Police.

- c. The IC should request 2 fire ground channels from DC911, 1 for the medical group and 1 strictly for the RTF group.
- d. All members should keep radio traffic to important transmissions only.
 - i. UNDER NO CIRCUMSTANCES WILL LOCATIONS, NAMES OR SPECIFIC INFORMATION ABOUT VICTIMS BE GIVEN OVER THE RADIO.

H. Deployment

- a. Once unified command has agreed to RTF deployment, teams will deploy to the warm zone to begin victim care.
- b. Command will dispatch RTF teams by numbers, i.e., RTF Team 1. RTF Teams are not to deploy unless they have two personnel from HPPD as security. Do not self-deploy into the warm zone.
- c. The first RTF team to make entry should notify the EMS branch through the Medical Group Supervisor of possible number of injured
- d. When teams make entry, they will treat the injured using Tactical Emergency Casualty Care (TECC) guidelines.
- e. The first two RTF teams will enter the area and treat as many patients as possible until they run out of equipment to use or all accessible victims have been treated. Once this point has been reached, these RTF teams start the evacuation of injured. Additional RTF teams that enter the area should be primarily tasked with extrication of the victims treated by the initial two teams. If needed, additional RTF teams may be sent into areas unreachable by the initial teams or to other areas with accessible victims.
- f. When the RTF is operation in the Warm Zone, no triage will be conducted. All patients encountered by the RTF teams will be treated as they are accessed. Any patient who can ambulate without assistance will be directed by the team to self-evacuate down the cleared corridor under Police direction, and any patient who is dead will be visibly marked to allow for easy identification and to avoid repeated evaluations by additional RTF teams.
- g. To coordinate RTF teams inside a warm zone, a single RFD officer may deploy into the warm zone under law enforcement security. This will help guide the RTF teams and allow ease of communications with the EMS branch.
- h. RTF can be deployed for the following reasons
 - i. Victim treatment
 - ii. Victim removal from warm to cold zone
 - iii. Movement of supplies from cold to warm zone
 - iv. Any other duties deemed necessary to accomplish the mission
- i. RTF teams will always work within the security of their group