

Close Call/ Hazard Report



Hostile Patient with a Weapon
3178 Summit Square Drive
July 5, 2008



Table of Contents

Executive Summary:	2
Investigation Team:	3
Incident Information:	4
Dispatch Information:	4
Findings, Contributing Factors, and Recommendations:	5
1. Command	5
2. Situational Awareness	6-7
3. Communication.....	7
Scene Photographs:	8
Appendix A: Event History Information:	10
Appendix B: Radio Traffic on the Tactical Channel:	12
Appendix C: Safety Position Statement:	14



Executive Summary:

On July 5, 2008, emergency response units from Fairfax County and the City of Fairfax responded to a 9-1-1 call located at 3178 Summit Square Drive in Fairfax County. E434, A434, M403, EMS403 and Fairfax County Police units were dispatched at 23:16 for a possible suicide attempt. The 9-1-1 caller told the call taker that he had cut his wrists. The event was entered as a suicide attempt.¹

Company 434 and surrounding units had been dispatched to the same location numerous times in the past several weeks and were familiar with the patient. Units had actually responded to this location within the last 48 hours for an EMS event. In previous encounters, the patient had not shown signs of hostility towards the Fire and Rescue or Police Departments. Based on this history, the first due engine officer communicated this to DPSC and made a decision not to stage for the police and proceeded to the scene.

As the crew approached the apartment, it was noticed that the shades were drawn and there was no light on in the apartment. Personnel knocked on the front door and announced their presence. The door handle was unlocked as the dispatch data had indicated. The door was opened by a crew member, and the patient's name was called out.

The engine officer directed the crew to back away from the door. As they were backing away, a noise was heard by the OIC that came from a back room in the apartment. The door to that room suddenly opened and the occupant came out of the room with a hand gun pointed at the crew. Engine 434's Officer directed the crew to retreat. Crews immediately retreated to the opposite side of the street and positioned behind E434 for cover approximately 30 yards from the apartment.

The engine OIC advised over the radio that the patient had a weapon. Moments later, the patient came out of his apartment brandishing a handgun. E434's crew re-located to an adjacent apartment building behind them. Ambulance 434 approached the scene, assessed the situation, and took cover behind a parked car next to the sidewalk. When the police arrived on the scene, they immediately ordered the patient to drop the weapon. When the patient failed to comply with the orders given, he was shot by the police.

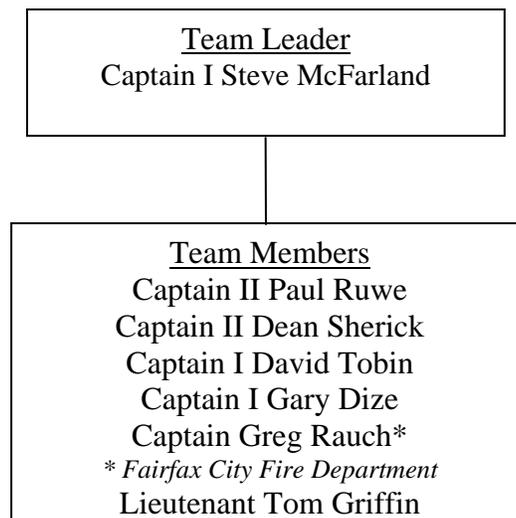
A resuscitation effort was initiated by FRD units, and the victim was transported to INOVA Fairfax Trauma Center. The patient was pronounced dead later that evening.

¹ Refer to Appendix A and B for transcripts of the incident.



Investigation Team:

A close call incident review team was assembled by Battalion Chief Daniel Gray to review the circumstances that occurred leading up to and during the incident. Battalion Chief Gray appointed Captain I Steve McFarland as the Team Leader.



Investigative Tasks:

- Review all written statements.
- Conduct follow-up interviews as needed.
- Review pictures.
- Review information regarding similar incidents within the fire service.
- Review all relevant departmental procedures, operational manuals and other pertinent documents for insight into the need for preventative action and procedural changes by the department.



Incident Information:

Date: July 5, 2008
Dispatch Time: 2318 Hours
Incident number: 20081873077
Incident Address: 3178 Summit Square Drive
Fire Box number: 3409

Weather²:

Time: 2318 Hours
Temperature: 72.5 °F
Precipitation: None
Wind: SSE 4.6 MPH
Sky: Hazy
Humidity: 90%

Dispatch Information:

Suicide Attempt – 3178 Summit Square Dr #A2

Units Dispatched:

23:18: E434, A434, M403, and EMS403

Additional units added on to call: BC403 and DFCCO

² Wunderground.com, Dulles Airport, VA.



Findings, Contributing Factors, and Recommendations:

1. Command:

Finding:

E434's officer made the decision not to stage for the police in lieu of information regarding the situation that was provided by the Department of Public Safety Communications (DPSC).

Contributing Factor:

Information regarding the circumstances surrounding the event and the advice to stage were not considered fully due to familiarity with the patient. Information that the patient was threatening to use a knife to cause harm to himself was provided over the radio and by Mobile Computer Terminal (MCT). DPSC advised units to stage and wait for the arrival of the Police Department.

Recommendations:

The department shall provide additional training re-enforcing EMS staging procedures and utilize training from the Police Department on threat recognition, enhance situational awareness, retreat, cover, and concealment tactics. Additionally, staging should be practiced on emergency events that involve a hostile or suicidal patient, regardless of familiarity with the patient or previous events at the dispatched address. The Communication Manual provides the following information:

Communications Manual Revised May 2007, Page 13, and Section 2 "Hostile Events"

Anytime a scene is determined to be a hostile situation, based on information provided (shooting, stabbing, fight, domestic violence, etc.), the following procedure shall be followed:

- a. During the initial dispatch, the dispatcher shall voice, "The scene is not secure. All units are to stage prior to arrival."*
- b. Once units have been given ample time to switch to the appropriate channel, a first due unit shall be contacted to determine a staging location. Unit officer may elect to stage at the fire station, due to its proximity to the event and to the safety of department personnel.*
- c. Once the staging location is determined, all units shall be contacted to confirm their knowledge of the staging location.*



d. The controlling dispatcher shall supplement the event to indicate the staging location and the determining unit.

e. The dispatcher shall confirm receipt of the staging location by the controlling police dispatcher.

f. Once the dispatcher is notified that the scene has been secured by police, the dispatcher shall announce "Attention all units in staging for [give address], police advise scene is secure, and all units shall proceed to the dispatched location."

2. Situational Awareness:

Finding:

The lights were out in the apartment and the door was unlocked. Normally, the patient has all lights on and is sitting on the couch.

Contributing Factors:

The OIC knocked on the front door and announced their presence. The door handle was unlocked as the dispatch data had indicated. The door was opened by the OIC, and the patient's name was called out.

Recommendations:

Situational awareness and threat recognition need to be maintained by all crew members in all FRD responses. The concept of situational awareness is to be applied to any type of FRD response.

Information critical to the incident or safety of personnel should be voiced and not just transmitted via MCT. Officers shall make sure crew members are made aware of the situation and any updates. This information can be communicated face-to-face or with mobile/portable radios.



3. Situational Awareness:

Finding:

Company 434's crew scattered to different locations after being confronted by the patient carrying the gun.

Contributing Factor:

After the patient presented from the structure brandishing a handgun, the engine crew fled, and the approaching ambulance crew was verbally warned by the fleeing engine crew (at the courtyard sidewalk interface) that the patient had a gun. The ambulance crew remained in place for almost a minute before they saw the patient with a firearm. They then sought cover behind a car door only 15 feet away from the assailant and in the proximity of gunfire between the assailant and the police officers.

Recommendation:

Establish a "Rally Point" strategy. Ascertaining accountability after an event that causes personnel to "scatter" is much more effective when a rally point is utilized. This practice is currently used by the military to identify safe areas or evacuation points. The OIC can identify or announce the location prior to entering any area deemed suspicious.

4. Communication:

Finding:

Not every member of E434 had their portable radio with them.

Contributing Factors:

As the crew of E434 was retreating, the OIC verbally yelled to A434's crew that the patient had a gun. Both crews sought initial refuge when the patient presented himself outside the apartment and, then, the engine crew relocated to a safer area. As they were relocating, the crew of E434 became separated because each crew member ran in different directions. Some members did not have their portable radios with them, leaving them unable to safely communicate their location and welfare.

Recommendations:

All crew members should ensure that they carry their portable radios at all times. This enables individual members to call for help, maintain accountability, and monitor the event. Supplements regarding updated information need to be voiced to all responding units.



Scene Photographs:



**View of the front door
of the patient's apartment**

**A434's crew observed patient
with a weapon on the sidewalk.**



**A434 took cover between black
and silver car when shots were
fired. Diamond is where the
patient was at time of shooting.**



Appendix A: Event History Information

The dispatch information below was "cut and pasted" from the actual Altaris printout. Spacing has been adjusted for this report to assist the reader in following the sequence of events. The asterisk was used for this document to conceal information that may identify the patient.

EVENT HISTORY RECORDS

Event #: F081873077 Priority: 1
Time: 05-Jul-2008/23:16:52 Type: SHOTF
Atom: 3409 Response Area: 434 Dispatch Group: F2
Response Level: 1
Src: 9
Lac: 3178 SQUARESUMMIT DR #A2 ,OKTN
_ Info: Caller: ****
Phone: 703-***-**** SiC: Y

EVENT REMARKS

05-Jul-2008/23:16:52 008699 PD02
MALE SAYING HE CUT HIS WRISTS/

05-Jul-2008/23:18:24 008699
SAID CUTS ARE SUPERFICIAL// SAID PD02
GOODBYE AND DIDN'T WANT TO WAIT ON PHONE//
SAID HE WOULD LEAVE FRONT DOOR OPEN// CALLING BACK

05-Jul-2008/23:20:10 008699 PD02
APT NUMBER IS MOST LIKELY A2 PER PREMISE HISTORY/ NO ANSWER ON CALL
BACK/ WILL CONTINUE TO TRY

05-Jul-2008/23:20:23 008929 FD04
PER E434, FD IS FAMILAR WI THE SUBJ AND ISN'T BELIEVED TO BE DANGEROUS
// FD WILL NOT BE STAGING

.05-Jul-2008/23:22:23 008699 PDO~
CUT HIMSELF W/A KNIFE/ UNK LOCATION OF KNIFE SINCE SUBJ
DISCONNECTED/

05-Jul-2008/23: 23: 2.7. 00B929 FD04
E434 ONS // SUBJ CAME TO THE DOOR W/ A WEAPON // FD SAID PO ARE ONS



05-Jul-2008/23:25:37 009081 PDOE

SHOTS FIRED -SUBJ SHOT // RESCUE ONS

05-Jul-2008/23:26:04 009158 FD03
HELO DIRECT AND ENR

05-Jul-2008/23:26:11 008929 FD04.
SHOTS FIRE BY PD // ASSESSING THE PT // ALL FD AND PD PERSONNELL ARE
ACCOUNTED FOR

05-Jul-2008/23: 27: n 009081 PD06
WEAP SECURE // RESCUE CAN COME IN

05-Jul-2008/23:28:47 008929 FD04
PER COMMAND PROB 10-61, CHECKING THE PT NOW

05-Jul-2008/23:32:40 008929 FD04
PER COMMAND // M403 WORKING THE PT, GROUND TRANSPORTING

05-Jul-2008/23: 40:.'2..°. 008929 FD04
RECIEVED INFO THAT THE PT IS HEP-C // US PERCAUTIONS

05-Jul-2008/23:41:05 007514 PDOO
CS01 DIRECT, CS06 & CS11 RESPONDING, MARSH (IA) DIRECT,***** DIRECT
FOR PEER

05-Jul-2008/23:41:33 008979 PDOS
per loc hx... event #2546 od... subj has hepatitis-c

05-Jul-2008/23:42:34 008929 FD04
PER COMMAND -- PERFORMING CPR, MOVING THE PT TO M403 NOW

06-Jul-2008/02:05:12 007514 PDOO
PER DET HARRIS' REQ - METROPOLITAN FUNERAL SERVICES ENR TO TRANSPORT
FROM FFX ER TRAUMA ROOM 2 TO MEDICAL EXAMINERS OFFICE



Appendix B: Radio Traffic on the Tactical Channel

The radio communications from the FRD have been transcribed so the reader can see how the incident originated and evolved. Unfortunately, the times of each transmission were not able to be captured on the recording.

Talk Group 4-A

<u>Unit</u>	<u>Message</u>
DPSC	Engine Ambulance 434, Medic 403, EMS403 Channel 4-Bravo, Box 3409 for a Suicide Attempt, 3178 Summit Square Drive, Apartment 82
DPSC	Engine Ambulance 434, Medic 403, EMS403 Channel 4-Bravo, Box 3409 for a Suicide Attempt, 3178 Summit Square Drive, Apartment 82, cross-street of Bushman Dr. Male saying he has cut his wrists. Police responding, all units advise to stage. 23:18
BC403	Battalion 403 to Fairfax, I've added to Summit Square going to 4-Charlie
DPSC	23:26

Talk Group 4-B

<u>Unit</u>	<u>Message</u>
E434	Engine 434 to Fairfax
DPSC	Engine 434
E434	Uh just for your uh information, the units responding, we're very familiar with this individual, we've run him several times before uh believe him to not be uh hazardous to us at all
DPSC	10-4, did you want to keep all units enroute?
E434	Uh yes, we'll be onscene shortly and I'll call you right back
DPSC	10-4, 23:19
	Unintelligible Sound
E434	Engine 434 to Fairfax
DPSC	Engine 434
E434	Uh, gentlemen came to the front door with a weapon, switch us to four uh, correction, alternate channel, I'll have Summit Square Command, Police are on the scene
DPSC	10-4 switch over to 4-Charlie, 4-Charlie
E434	Summit Square Command to Fairfax
DPSC	Porter Drive Command, switch over to channel 4-Charlie
E434	OK, my error, I'll switch over
DPSC	10-4, 23:24



Talk Group 4-C

Unit	Message
E434	Summit Square Command to Fairfax
DPSC	Summit Square Command go ahead
E434	Have all units stage
DPSC	10-4, Attention all units still responding or on the scene of the suicide attempt, Summit Square Drive, all units stage at 23:24 hours
E434	Summit Square Command to Fair (<i>transmission stops as a sound similar to a gunshot is heard</i>)
DPSC	Command go ahead, you keep breaking...
E434	Command to Fairfax
DPSC	Command go ahead, you keep breaking out
E434	Sorry, Command Fairfax, individual came out of the building, Police have shot the individual (<i>three noises similar to gunshots are heard as transmission ends</i>)
E434	All fire department personnel are accounted for, all police personnel are accounted for but I believe the victim is seriously injured
DPSC	10-4, do you want us to start a helicopter?
E434	Yes sir, uh correction, ma'm, stand by one moment stand by one moment while I assess the situation just a little further
DPSC	10-4, 23:25
EMS403	EMS403 to Fairfax, advise the Battalion Chief
DPSC	We're in process of doing that now
E434	Command to Engine 434's crew, please go to Medic 403 uh and uh stand by there please
BC403	Battalion 403 on Charlie responding
DPSC	10-4 Battalion 403, just want to give you an update, all fire department and police department personnel have been accounted for, units onscene are assessing the patient now
E434	Command to Medic 403, could you come forward please uh we need to assess the patient, probable 10-61
M403	Alright we're heading up now
E434	Command to Fairfax
DPSC	Command
E434	The situation's stable, the officers have uh subdued the the uh victim, uh we're assessing now, probable 10-61
DPSC	10-4, Battalion 403 you direct?
BC403	Battalion 403 message received
DPSC	10-4, 23:28
E434	Summit Square Command to Fairfax
DPSC	Go ahead command



E434	We'll be able to handle with the fire department units on scene, we will not need the fire, the uh helicopter
DPSC	10-4, helicopter not needed at 23:29 hours
FFX-1	Fairfax One to Fairfax on 4-Charlie
DPSC	Fairfax One go ahead
FFX-1	Ma'm we were monitoring, uh is it confirmed 10-61?
E434	Uh command to Fairfax I'll advise that final in one moment, we're asses...we're doing a final assessment
DPSC	10-4, Fairfax One are you direct?
FFX-1	We're direct, we're in the air just in case, we'll be monitoring police and fire side
DPSC	10-4 Fairfax One at 23:20, correction 23:30 hours
E434	Command to Fairfax
DPSC	Go ahead command
E434	Medic 3 will be working the patient, will be transporting by ground
DPSC	10-4 Fairfax One are you direct?
FFX-1	Fairfax One we are direct, Medic 3 is going to be working the patient, we're going to be overhead in just a moment in case that changes
DPSC	10-4, 23:32
E434	Command to Engine 434's crew, uh if you could bring some lights this way forward please
BC403	Battalion 403 on scene reporting to command
DPSC	10-4 Battalion 403 at 23:32
BC403	Battalion 403 Fairfax, I've assumed Summit Square Drive Command and I'm in front of the address on the Alpha side OK?
DPSC	10-4, Battalion 403 assuming command of Summit Square Drive, gonna be in front of the building on the Alpha side at 23:34
BDPSC	Fairfax to Summit Square Command
BC403	Go ahead
DPSC	I need the unit that's, units or subjects checking on this patient to read the last supplement in the event for precautions
BC403	Alright Fairfax, hang on a second uh none of us are near CAD, how critical is it, can you read it to us uh or do you need to call me?
DPSC	We'll have the UFO call you
DPSC	23:41
BC403	Fairfax uh Summit Square Command again, uh we're performing CPR, we're moving the patient to Medic 403 at this time OK?
DPSC	10-4, 23:42
EMS403	EMS403 to Fairfax



DPSC	EMS403
EMS403	Yes ma'm, could you call Fairfax Hospital and have Medic 403 call me on my cell phone?
DPSC	10-4, do they have your number?
EMS403	Probably not, it's 571-221-1309
DPSC	10-4, 00:26
E424	Engine 424 to Fairfax, advise incoming units we will be the first Engine, we will be laying our line from the intersection of Richmond Highway and Blankenship
DPSC	10-4 Engine 424, you need to switch over to 4-Delta, 4-Delta and I'll advise that dispatcher
	<i>Unintelligible Sound</i>
BC403	Summit Square Command Fairfax
DPSC	Go ahead Summit Square Command
BC403	You can go ahead and release the channel, if we need you we'll go to we'll go to Baker OK?
DPSC	10-4, attention all units still onscene of the incident Summit Square Drive, all units switch back to 4-Alpha, 4-Bravo as ready, 4-Charlie's gonna be clear at 00:41 hours

Appendix C: Safety Position Statement:

Personnel should follow department policy and procedure pertaining to safe staging and enhanced situational awareness on any reported hostile event, regardless of familiarity with the patient or previous events at the dispatched address. Multi-agency unified command training should be conducted with the Police Department to include effective communications, threat recognition, and retreat and cover tactics at the emergency scene. Training may be conducted during in-station drills, battalion multi-unit drills, Academy OARS, and included in the department's Training Matrix.