Uvalde Texas: School Shooting Medical Response Teams

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DISCLAIMER

Our discussion today will focus solely on the medical response to the Robb Elementary School Shooting.

We will *not* be discussing the law enforcement response.
DISCLOSURE

No financial disclosure; no relevant, real, or apparent personal or professional financial relationships with proprietary entities that produce healthcare goods and services.
TEXAS IS A BIG PLACE…
REGIONAL ADVISORY COUNCILS

Created by legislature in 1989 via the Omnibus Rural Healthcare Rescue Act

Promote an environment of **coordinated care** between otherwise competitive organizations to ensure the **right patient** is cared for in the **right place** in the **right amount of time** and transported by the **right method**.
WHAT IS STRAC?

Mission: To reduce death / disability related to trauma, disaster, and acute illness through implementation of well-planned and coordinated regional emergency response systems.
STRAC ORGANIZATION

Acute Care
- Trauma/Cardiac/Stroke
- EMS and EMS Medical Directors
- Air Medical
- Pediatric
- MIH
- Perinatal
- MEDCOM
- EMS EMR
- Clinical Registries

Behavioral Health
- Southwest Texas Crisis Collaborative Steering Committee
- Law Enforcement Navigation
- Homeless Acute Care
- ER Crisis Transfer
- Social Determinants of Health
- Data Collection

Emergency Preparedness & Response
- Healthcare Coalition
- Regional Medical Operations Center
- Rescue Team
- Logistics
- EMTF
- Disaster IT
- Patient Tracking
- AssetTrak

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REGIONAL LTOWB PROGRAM

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REGIONAL LTOWB PROGRAM

Air and Ground Regional Distribution as of May 15 2021:
Map is not to scale

Rotation Sites:
- Acadian Ambulance (k2)
- AirEvac/EMAC (w6)
- AirLife (k4)
- Allegiance EMS
- Bandera EMS
- Bexar Co Emergency Services
- Bexar Co ESD 2 EMS
- Bexar Co ESD 7 EMS
- Bulverde-Spring Branch EMS
- Canyon Lake EMS
- Converse EMS
- Gonzales Co ESD 1 EMS
- Karnes Co EMS
- La Salle County EMS
- New Braunfels EMS
- San Antonio Fire Dep EMS (w8)
- Schertz EMS
- Seguin EMS
- UT Health SA EMS Fellows
- Wilson Co ESD 2 EMS
- Wilson Co ESD 3 EMS

Level IV Trauma Centers
- Level I Trauma Centers

Rotation Centers:
- University Hospital (LV I)
- Christus Santa Rosa New Braunfels (LV IV)

Other Regional Hospitals with LTOWB:
- Brooke Army Medical Center (LV I)
- Frio Regional Hospital (LV IV)
- Peterson Regional Medical Center (LV IV)

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MEDCOM (24/7)

- Trauma Transfers
- Air Medical Management
- Trauma Team Paging
- MCI load-balancing
- Navigation of mental health patients via Law Enforcement directly to psychiatric facilities
RMOC DISASTER RESPONSE

- Regional Trauma System is the backbone of effective disaster response
- An effective, integrated day to day Regional Trauma System is best way to immunize against MCI
- Functional communications systems used daily, are essential
ESCALATING MEDICAL RESPONSE IN TEXAS

- Federal Response
- State EMTF Response
- Local Incident
- Local Response
- Regional EMTF Response
- Mutual Aid Response

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Medical Incident Mgmt. Team
- Subject Matter Experts & Leaders in the ESF-8, Health & Medical Arena

Ambulance Staging Mgmt. Team
- Public Safety Logistics
- Subject Matter Experts in Staging Large Numbers of Assets
- Manages the Staging Site, Mobilization, & Tracking of Activated ESF-8 Resources

AMBUS / MPV
- Teams of 5 Ambulances with a Strike Team Leader
- Supplemental Medical Transport of Large-Scale Patient Movement Missions
- Teams of 5 Nurses with a Strike Team Leader
- Augment Nursing Staff Shortages in Disasters that are Specialty Specific (ED, ICU, Burn, etc.)

Registered Nurse Strike Team
- Dedicated Medical Response & Force Protection Teams & Assets for Firefighters Working Moderate- to Large-Scale Wildland Fires
- Covering the Fireline to Staging & Base Camps to Incident Command Posts

Wildland Fire Support Unit
- Dedicated Medical Support for Law Enforcement Entities During High Risk Incidents
- Specialized Teams of 2 Paramedics / APPs / Physicians & an ALS / MICU Ambulance

Mobile Medical Unit
- Temporary Healthcare Infrastructure that Rapidly Deploys & Provides High Quality Patient Care in the Field
- Deployable Emergency Room with Scalable Teams & Assets

Ambulance Strike Team
- Deployable Pre-Hospital & Hospital Teams Capable of Caring for & Transporting a HCID Patient
- PPE Caches Pre-Positioned Across the State

Infectious Disease Response Unit
- Air Medical Strike Team
- Teams of 5 Air Ambulances with a Strike Team Leader
- Supplemental Medical Transport for Critical and Large-Scale Patient Movement Missions

Mass Fatality Operations Response Team
- Provide Assistance with Site, Morgue, Victim Identification & Information Center Operations to Medical/LEGAL Authorities in a Mass Fatality Incident

Tactical Medic Support Unit
Over 600 EMS Providers, Hospitals, and Physician Groups have signed the MOA.

Single, state-wide MOA signed by all TX EMTF Sponsoring Entities.

Sets up the mechanisms for activation on behalf of the State through a State Mission Assignment.

Sponsoring Entities have the right to accept or decline an activation request.

Sponsoring Entity personnel deploying on a State Mission Assignment remain employees of the Sponsoring Entity.
SUTHERLAND SPRINGS SHOOTING

November 5th, 2017
26 dead, 22 injured.
26 dead
22 injured

- University Hospital: 5 patients
- Brooke Army Medical Center: 8 patients
- Connally Memorial Medical Center: 8 patients

Distances:
- 10 miles
- 13 miles
- 29 miles
- 40 miles
- 44 miles
REGIONAL RESPONSE TO THE UVALDE SHOOTING

May 24th, 2022 – 113 days ago
11:33 – Shooter enters school
11:36 – MEDCOM contacted by Uvalde EMS Chief advising of possible AS at elementary school
11:44 – MEDCOM notifies STRAC leadership
11:48 – MIST enroute
11:53 – Regional notification to all EMS leaders
WHAT DOES REGIONAL MUTUAL AID LOOK LIKE
ON SCENE RESPONSE
UVALDE, TX

Population estimate: 15,217
Population per square mile: 15.8

Persons under 18 years: 28.1%
Ethnicity: 72.5% Latino
Median home value: $103,000
Median household income: $41,683
Without healthcare coverage: 18.8%
Persons in poverty: 21%
Language other than English spoken at home: 56.8%

Source: 2020 US Census
https://data.census.gov/cedsci/profile?g=1600000US4874588
LOCAL MEDICAL RESOURCES

Uvalde Volunteer FD
(1) Full-time paid firefighter on 24 hours a day
(1) Station
Do not run any EMS-related calls
Uvalde PD dispatched

Uvalde EMS
501c3 non-Profit
Runs 911 and transports from Uvalde Memorial
Staffs 3 full-time ambulances
Annual transports 4,000
Uvalde PD dispatched

Alamo Area Ambulance
Backup to Uvalde EMS, Crystal City, and Zavala
2-5 ambulances on per day
Dispatched by three different agencies

Uvalde Memorial Hospital
501c3 non-profit
25 in-patient beds
16 ER beds
New facility (3 months old)

AirLife
Bell 407 helicopter
Single patient transport
11:44 – MEDCOM notifies STRAC leadership
11:48 – Jordan departs STRAC for Robb

90 miles
1.5 hours by ground
Regional EMTF Coordinator adds AMBUS Crew-chief

Eric adds Deputy Chief for statewide emergency management

STRAC EP&R Director adds Uvalde hospital emergency manager

LTOWB MCI push-pack

Eric adds Level 1 Surgery Chair
12:46 – Jordan arrives at Robb Elementary

58 minutes after leaving STRAC
STAGING
STAGING (cont.)
12:50 – Shooter is neutralized
Gunman crashes truck.

Fires into school from parking lot.

Enters school through this door.

Shoots students and teachers in two connected fourth-grade classrooms.
COORDINATION

San Antonio Fire AMBUS
Additional aircraft inbound
MEDCOM ensuring that we are load-balancing patients
Setting expectations

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“FOG OF WAR”

There has been a threat made to the school allegedly from shooter’s relative.

Head on a swivel. No description.
SUPPORTING HOSPITAL

2.1 miles from Robb to Hospital (7 mins)
SUPPORTING HOSPITAL

Walter Ball MIST 2
Uvalde - 5 current pending transfers needed

1 Red GSW - 45y/o male
1 Red GSW - 10y/o female

The other 3 transfers are not related to the Shooting but require emergent transfer.

As of now the remaining 13 patient are less acute shrapnel Injuries and will hold at this time.

They also 2 fatalities - one male/one female both pediatric

Michael Keaton (Air Evac Pearsall)
AE48 just landed at the helipad

Eric Epley
Thx. Both UH and BAMC are in great shape, tell them send away, plenty of capacity.

Eric Epley
@Walter Ball MIST 2 How is the 20 pack of MCI blood holding up? Do we need to consider sending another pack of blood to you?
21 dead
18 injured
REPLACING LOCAL EMS COVERAGE
REPLACING LOCAL EMS COVERAGE (cont.)
It doesn’t need to be fancy. It just needs to work.
Not sure if its correlation or causation, but you should always find the mustached firemen
At 1953, MEDCOM was notified of an MCI in Kerrville.

Released two units from scene to support.

1 DOS, 1 refusal, and 9 transports
DECEDENT CARE

Jordan Ghawi
8-01 and 8-01 are in position for decedent loading. No active loading at this time.

Jordan Ghawi
Current plan is

Plan is to put 9 on MPV 8-02 and 9 on MPV 8-01.

Shooter will not travel with.

Total of 18 will be transported between the two busses.

We have a DPS escort secured for them as well.

Loading to be done by funeral home personnel under supervision of AMBUS crews.

Jordan Ghawi
Destination with be BCME and an off-road plan was made by SAFD leadership. Sounds like it will be medical fellows and ME’s office.

May 24, 2022 at 8:48 PM

Jordan Ghawi
Finalizing paperwork prior to decedent loading.

May 24, 2022 at 9:13 PM
Uvalde has Tesla police cars? That helps explain why such an incompetent police department can still suck up 40% of the town’s budget.
LAW ENFORCEMENT SUPPORT
REMAINING 21 DAYS

Funeral home media issues
  • Family privacy
Requested additional EMTF assets
  • 2 MICU
  • 2 ASAP
  • 1 MMU (graveside)
Governor visits
  • Allocate (1) MICU and (1) MIST
POTUS visit
  • Allocate (1) MICU and (1) MIST
  • Integrate Uvalde EMS into procession and PR
Increase RN Strike Team
Continued media (civilian interaction) issues

Utilization of MMU at gravesite
  • State LE providing security overnight
Additional VIP/Dignitary visits
CISD/CISM Teams
  • Overwhelming
Billeting
Mental Health awareness of EMTF
Heat became an issue early
  • Memorial and gravesite Bailouts

Continued ER Support
PD dispatch support
PD threats
  • Home coverage
  • Package searches
Disaster Planning

A Hospital Perspective on the Robb Elementary Shooting Response on May 24, 2022
Where to Begin?
✓ Common misconceptions/barriers
✓ UMH Preparedness prior to 5.24
  ✓ Hospital Response on 5.24
  ✓ Post Event Response
  ✓ Lessons Learned
Common Misconceptions and Barriers

- “We’re a small town”
- “It’s such a peaceful community”
- We do drills...
- “We’re a big hospital...we can handle...”
- “It’ll NEVER happen here”

- Staffing
- Cost
- Turnover
- Experience or lack of
- Training
- Drills in silos
Are We Prepared?

- Ready today?
- Evaluate your readiness
  - Processes/Protocols
  - Resources
  - Staff training
- Drills
  - When was the last and how often do they happen?
  - What kind
  - What resulted/improvements made?
  - Who participated?
UMH Preparedness Before 5.24

- Prior MCIs
- Drills - use actual people of all ages
- Processes/Protocols
  - Internal vs Regional
- Staff Training
  - Investing in staff
- Resources
  - Internal vs Regional
UMH Response on 5.24
Response on 5.24
The Aftermath
ELEMENTARY SCHOOL SHOOTING VICTIMS
UVALDE, TEXAS
Moving Forward

HOW?!
It’s a Balancing Act

Community

Hospital/ Emergency Care

RESOURCES & SUPPORT

Grieving

Loss

Staff Wellbeing

Family Wellbeing

Personal Wellbeing
Lessons Learned

- Early activation is critical
- Incident Command Center
- Effective communication
- Safety and Crowd Control
- Resource management
- Communication w/ EOC
- Collaboration w/ external resources
- Designated Care Teams
- Briefings
- Staff response and availability
- Supplies
Lessons Learned (cont.)

- Availability of ORs
- Intake/Registration
- Triage stations
- Patient identification
- Clear roles
- WebEOC
- Outcomes
- Post event debriefing
- Post event follow up/counseling
- Post event nursing support response
- Continued assistance
Questions?
Thank you

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