



Resilience and specialist operations team briefing note:

Over the last few years the Government have written and updated their Joint Operating Principles detailing how the emergency services would respond to a marauding terrorist attack (MTA).

There have been numerous MTA incidents around the world in recent years, including the attacks in London in 2017 and two separate attacks in Paris.

Following a marauding terrorist attack the areas will be split into three zones **Hot Zone** **Warn Zone** **Cold Zone**

Historically it was only Police Firearms Officers who would operate in the hot zone with Ambulance and Fire protected staff working in the warm zone and non-protected responders working in the cold zone. However, following reviews of incidents and taking the learning into account it has been decided to change this concept to allow all emergency services, where necessary and appropriate, to operate wherever they are needed, based on a dynamic risk assessment.

Zone	JOPs Definition	Consideration
Hot Zone	<i>'An area assessed to contain a credible and continuing threat to life, including the presence of attackers with weapons.'</i>	Where this is a knife attack, for example, such as the London Bridge attack it may be deemed safe to put non-protected Ambulance responders forward into the hot zone to save lives with Police Taser Officers as protection. On the other hand, if the attacker was using a firearm it could be deemed as too dangerous to deploy Ambulance personnel into this area.
Warm Zone	<i>'An area where the attackers are not believed to be present at this time, but an identified threat remains.'</i>	The response in the Warm Zone will vary depending on the attack methodology, the threat, and measures in place to mitigate that threat, but again may see protected and non-protected responders working in this area
Cold Zone	<i>'An area where no known threat exists or where appropriate control measures have been implemented.'</i>	The RVP and Forward Control Point (FCP) will be in the Cold Zone. Some Cold Zones will not require any control measures. Responders without ballistic PPE can work in this area

The new JOPs don't mean responders will automatically be entering into a hot or warm zone. Deploying into these zones should only happen following a dynamic risk assessment by the appropriate Commander (informed by the attack methodology). This revision to the JOPs places much greater emphasis on the dynamic assessment of risk and joint decision-making by Commanders from all 3 services, in particular those assigned to the RVP or FCP. As such there will now be occasions when the Trust may deploy non-protected responders forward, for example, where the attack weapon is a knife, to save life. The availability of armed police to escort responders is not guaranteed and should not delay responder deployment, however, a dynamic risk assessment should consider the risk to Ambulance staff.

Casualty Management

The overarching priority is the rapid deployment of responders to deliver clinical care to save life. The speed at which patients are treated and moved from the point of injury to definitive care will affect survival rates, however, responder safety must be considered before staff are authorised to move forward; this dynamic risk assessment must be recorded by the responding manager as quickly as possible.

Within the East of England 4 of our regional 6 Fire and Rescue Services have an MTA capability with specially trained Commanders and Fire Fighters who are able to wear ballistic PPE and work under the direction of the Ambulance service to save lives.

More Information

More information and videos can be found on East 24 and in the attached Aide Memoir Card

Fire Management

Fire as a weapon is becoming a significantly more popular attack method and while the FRS will support the delivery of patient care their primary role is the management and extinguishing of fires.