



NMVC

National Mass Violence Center

Providing Resources to Victims,
Survivors, & Those Who Serve Them

How to Create a Coordinated, Survivor-centric Community Response Plan for Mass Violence Incidents

May 14, 2024



10th Virtual National Town Hall on Mass Violence

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NATIONAL TOWN HALL ON MASS VIOLENCE

Sponsored by the
National Mass Violence Center (NMVC)

Providing Resources to Victims, Survivors & Those Who Serve Them

with support from
U.S. Department of Justice, Office for Victims of Crime



Housekeeping Announcements

- ♥ This National Town Hall is being recorded and has live ASL interpretation.
- ♥ Closed captioning is available to attendees; please go to your setting at the bottom of your screen and turn on "closed captions" (available in multiple languages).
- ♥ After being posted to our website, the recording, slide deck and resources will be available for download at www.nmvvrc.org.
- ♥ **Joining us by telephone?** Please email us at nmvc@musc.edu with your full name and email address to receive credit for attending.
- ♥ Thanks to many of you who sent questions to our presenters in advance – we will save time at the end to answer the most frequently asked questions.

Learning Objectives

- ♥ Recognize the importance of advance preparation to create a coordinated plan for mass violence response.
- ♥ Describe the agencies, organizations, and professionals necessary for effective planning and response, as well as the roles of each involved entity.
- ♥ Identify the “16 Best Practices of Emergency Response” that are foundational to coordinated planning efforts.
- ♥ Describe the technical assistance resources available from the National Mass Violence Center and its partners to support coordinated community response planning.
- ♥ Determine the most important skills and strategies needed to create a coordinated, survivor-centric community response plan.

National Town Hall Presenters

Anne Seymour, Moderator
Associate Academic Program Director, NMVC

Eugenia Pedley, OVC Senior Program Manager,
U.S. Department of Justice, Office for Victims of
Crime

Elizabeth Cronin, Esq.
Associate Academic Program Director, NMVC

Corey Crickenberger, ASL/English Interpreter
Courtney Workman, ASL/English Interpreter

Erik Gaull, CEM[®], CISSP[®], CPP[®], CBCP[®], PMP[®], MEP
NMVC Consultant

Angela Moreland, Ph.D.
Associate Director and Director of the Improving
Community Preparedness Division, NMVC

Welcoming Remarks

Eugenia Pedley


Senior Program Manager, USDOJ Office for Victims of Crime



Office for Victims of Crime
OVC



Messages from Lived Experience

 *Note for incoming video clips: Please feel free to adjust the volume on your personal computer as needed.*

Gregory Mullen

*Chief of Police, Associate Vice President of Public Safety at
Clemson University, and NMVC Consultant*

Video link provided

Video link provided

Deborah Howard-Burton, Ph.D.
*Retired Law Enforcement Victim Advocate; NOVA
Crisis Responder; Group Crisis Intervention
Facilitator, S.O.A.R Professional Services; and
NMVC Consultant*

Elizabeth Cronin, Esq.

Associate Academic Program Director, NMVC



Everything We Do Is About the Victims, Survivors and Families



This is Why We are Here.



Preparedness Must be Trauma-informed and Based upon Best Practices



Preparedness Must Be Based on Local Needs



Every...

...Mass violence incident is different.

...Community is different.

...Survivor's needs are different.

...Resources needed are different.

Buffalo, New York



Buffalo, New York - Statistics

- 46.5% White
- 33.3% African American/Black
- 12.3% Hispanic/Latino
- 7.6% Asian American
- Other



Buffalo, New York - East Side

- Population 45,000+ (predominately Black)
- 85% Black Buffalo residents live on the East Side
- Largest neighborhood in Buffalo
- Densely urban
- Deindustrialization and disinvestment over decades changed East Buffalo more than anywhere else in the city.
- Food and development desert
- Disproportionate number of vacant and abandoned properties and “urban prairies”
- Described as “beat up”
- Higher crime rate than other parts of the city

What Happened?

- Tops Friendly Supermarket, East Buffalo
- May 14, 2022, 2:30 PM
- 10 killed, three shot and physically injured
- Present Not Injured (PNI)
- Shooter arrested
- Hate crime

HATE CRIME

Readiness and Response

- Prior planning
- Coordination
- Who responds?
- Immediate response
- Knowledge of dynamics of the area
- What resources are available?
- What resources are needed?

Mobilization of Victim/Survivor Services

- Who to take?
- Who is available?
- What to take?
- Where to go?
- With whom to connect?

Community Dynamics Questions

- With whom are you working in the community?
- Who is not there?
- Who needs to be there?
- Are the right people responding?
- What does the community need?
- How do you ascertain needs?
- Federal, state, local partners – do you know them? Have you worked with them?



Expect Some

CHAOS™

Some Lessons Learned

- Every MVI is about the victims, survivors and families.
- Victim/survivor services must be part of the planning and preparation.
- You're never *fully prepared* no matter how much you prepare; but having a plan and practicing reduce the chaos and enable a better response.
- Collaborate before, during and after a MVI - *needs do not end at the conclusion of the actual incident.*
- Understand your resources and capabilities.
- Be flexible and adaptable.
- All incidents are local, but may require a broader response from county, state, Tribal and/or federal officials.
- Entire communities may be affected by an MVI – consider this when planning!
- Anticipate and manage expectations and politics.

Some Lessons Learned (*cont.*)

- Know beforehand who does the work vs who says they do the work.
- Don't make a plan and then put it away – revisit and practice the plan regularly, and make changes as needed.
- Be inclusive in who your helpers are (SNUG).
- Consider the dynamics of the community.
- Be prepared for conflict – the community is traumatized.





Buffalo – May 14, 2022



Buffalo Saw an "Unheard Of" Drop in Gun Violence Last Year.

What's Behind the Success?

Community leaders say it's not attributable to a single initiative, but rather to a tapestry of collaborative, mostly grassroots efforts.

Chip Brownlee, The Trace April 16, 2024

<https://www.thetrace.org/2024/04/buffalo-homicide-rate-data-peacemakers/>

One Year



Erik Gaull

CEM[®], CISSP[®], CPP[®], CBCP[®], PMP[®], MEP
Consultant



**Plans are nothing;
planning is everything**



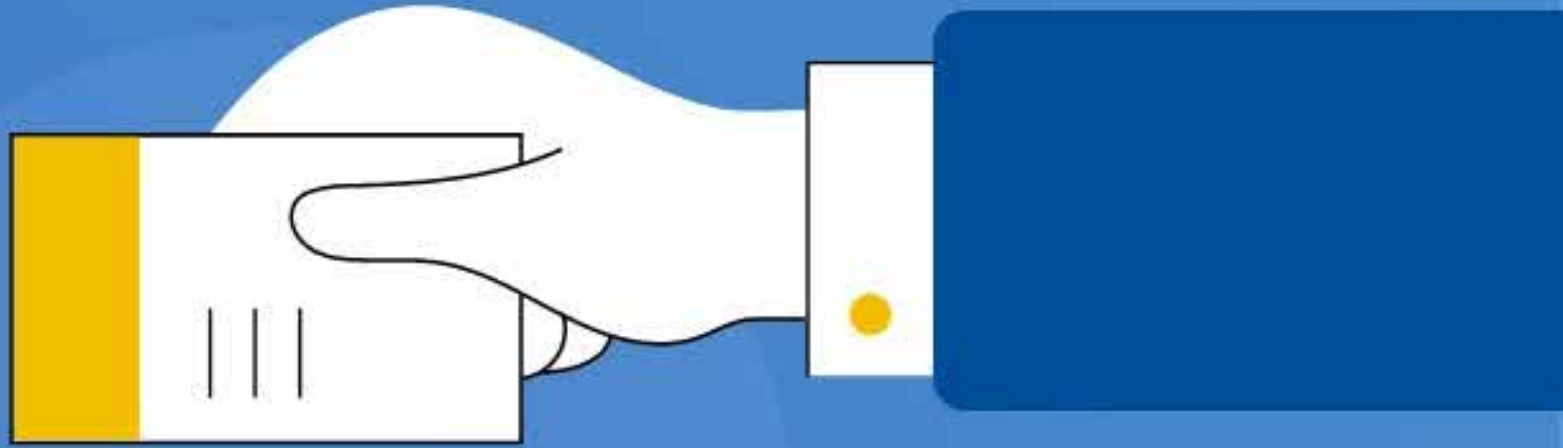
How Do We Prepare?

- Reach out to your local emergency manager – this is what they do!
- Start now!
- Train and do exercises so everyone knows the game plan if mass violence comes to your community

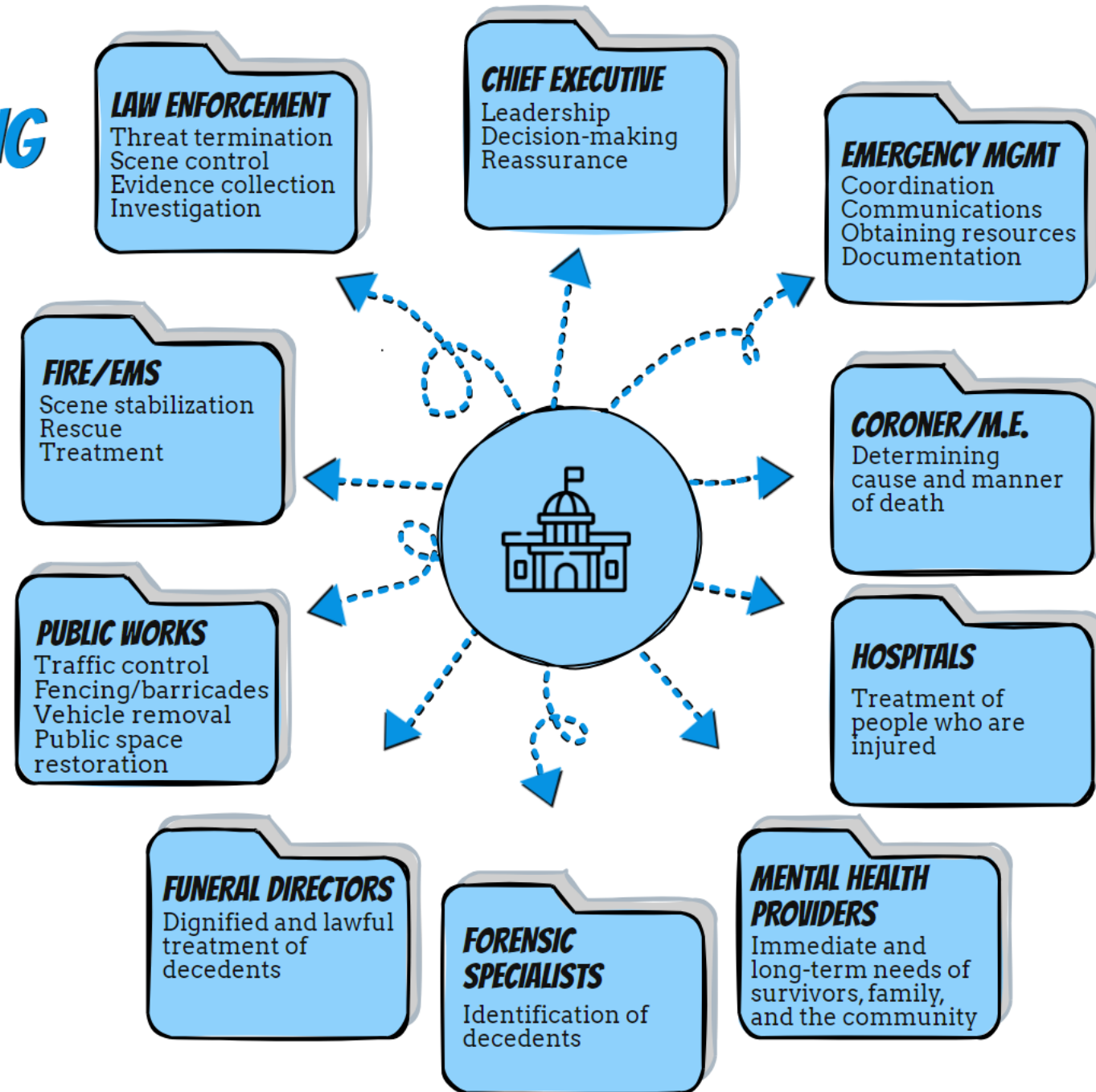


It's better to
exchange business
cards before the
emergency.

— An emergency manager aphorism



EFFECTIVE PLANNING AND RESPONSE



What Do Emergency Managers Do?

“The behind-the-scenes people”

Convene

Bring stakeholders together before, during, and after an event



Collaborate

Lead multi-agency planning and preparedness,



Communicate

Connect, share information between players, and disseminate information to the public



Coordinate

Identify, procure, and deploy resources; ensure people stay in their lanes; document everything



Organizations with Helpful Planning Resources In Addition to the NMVC



- www.apwa.org
- www.iacp.org
- www.iaem.org
- www.iafc.org
- www.naccho.org
- www.naemt.org
- www.nfda.org
- www.sheriffs.org
- State Hospital Associations
- www.thename.org

Angela Moreland, Ph.D.

Associate Director and Director of the Improving
Community Preparedness Division, NMVC



Building a Preparedness Framework
& Introduction to 16 Best Practices

National Mass Violence Center Focus

- Develop and provide evidence-based programs, services and strategies:
 - To identify and meet the needs of individuals, communities, VSPs, BH/MH providers, first responders, and others who have been impacted by MVIs or who work closely with impacted individuals.
- Assess the BH/MH impact of MVI exposure.
 - Includes MVI victims/survivors and MVI-affected community members.
- Build and sustain partnerships for MVI preparedness, response, recovery and resilience.

NMVC – Improving Community Preparedness

Transition from Improving Community Preparedness (ICP) TTA Project to the NMVC

TTA to individual communities/sites

- Provide individualized TTA to assist in developing partnerships, policies, and procedures to proactively prepare to address the needs of victims after MVIs.
- Expand capacity of agencies and local governments by providing supplemental resources to those seeking to augment their existing emergency response plans.

Webinars

Trainings (virtual or in person)

Case studies/scenarios

Review of emergency response plans

Short-term TTA

Long-term TTA

Phases of MVI Victim Assistance

Planning

Continuous

Response

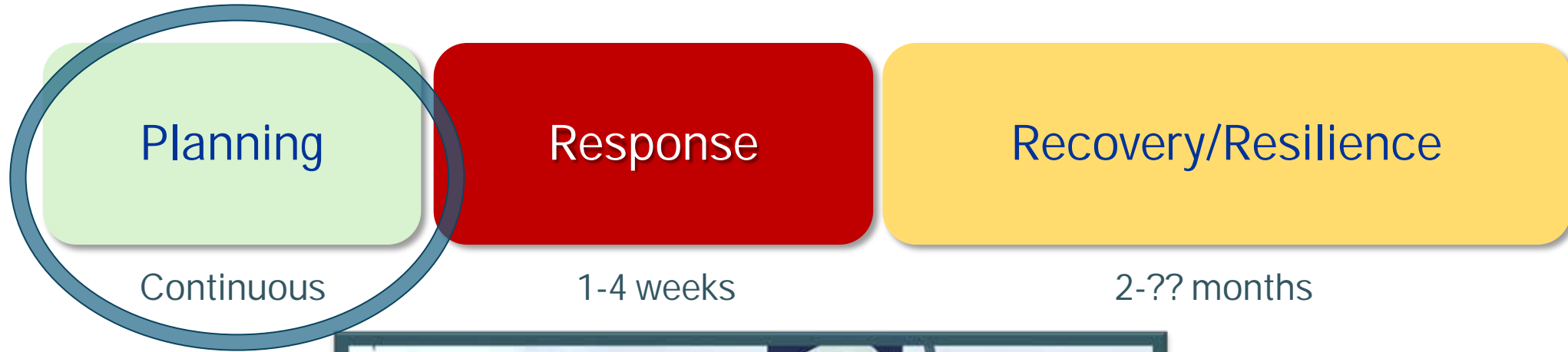
1-4 weeks

Recovery/Resilience








2-?? months & even years



Phases of MVI Victim Assistance



16 Best Practices

<p>1. Incident Command</p> 	<p>2. Committee Identification & Engagement</p> 	<p>3. Up-to-Date Contact List</p> 	<p>4. Family & Friends Center (FC)</p> 
<p>5. Victim Identification & Notification Protocol</p> 	<p>6. Public Information & Crisis Communications Protocol</p> 	<p>7. Volunteer Management Protocol</p> 	<p>8. Family & Friends Assistance Center (FAC) Plan</p> 
<p>9. Financial Donation Management Protocol</p> 	<p>10. Memorial & Special Event Management Protocols</p> 	<p>11. Community Behavioral Health Response</p> 	<p>12. First Responder Support</p> 
<p>13. Planning & Preparedness Grants and Emergency Funding Assistance</p> 	<p>14. Community Resilience Planning</p> 	<p>15. Criminal Justice System – Victim Support</p> 	<p>16. Training and Exercise</p> 

16 Best Practices



1. Incident Command

- The Incident Command System (ICS) is a common organizational structure used by emergency responders to aid in the management of resources during response to incidents.
- Includes common procedures, personnel, facilities, equipment, and means of communication.
- Ensuring that victim services professionals and other non-traditional response allies are trained in ICS is important.
- They must understand the framework, lines of reporting, and their role within the ICS.
- Relying on the ICS environment will reduce chaos in the response and allow non-traditional responders to integrate into an existing and trusted response framework.

16 Best Practices

2. Committee Identification and Engagement

- Key allies identified during the planning process will meet regularly to conduct planning and coordination efforts.
- This includes victim service providers, government agencies, and non-profit organizations with identified victim care responsibilities.
- Once a specific plan exists, the group should continue to meet to maintain relationships and ensure the plan is up to date.
- When an incident occurs, committee members will be activated as leadership in their respective roles, and will have the authority to make decisions and allocate resources.
- Each non-traditional agency will maintain its own list of responders, and will activate additional, appropriately trained staff as needed.

16 Best Practices



3. Up-to-Date Contact List

- Contact list of key responding agencies and their points of contact should be updated routinely and be easily accessible (with backups).
- An activation notification process – including the triggering mechanism and method of notification – should be determined.
- Who needs to be contacted? By whom? When?
 - Once the primary points of contact are activated, those individuals will deploy additional agency personnel.

16 Best Practices



4. Family & Friends Center (FC)

- Following an MVI, reliable, validated information is the overwhelming need that must be addressed.
- Victims need to know what happened, where they can go for safety, where and how they will be united with their support systems, and how to access services.
- Families and friends of presumed victims will be looking for information about the safety and whereabouts of their loved ones.
- Common gathering place to provide information and basic support services for survivors and families.
- Short-term facility needed to provide just-in-time services, while more long-term services are being organized (open for 24-48 hours).

16 Best Practices

5. Victim Identification and Notification Protocol

- MVIs involve multiple victims – physical casualties and fatalities as well as many emotionally-impacted individuals in need of assistance.
- Jurisdictions need to develop processes for identifying and tracking all victims – including information about victims' health and location.
- Information should be centralized to facilitate notifications of involvement, injury, or death as well as connections to loved ones.
- Processes for massive numbers of missing persons reports must developed.
- Fatality notifications must be compliant with local and state laws; and delivered in-person, in pairs, with sensitivity and respect.
- FBI – Trauma Notification Training

16 Best Practices

6. Public Information & Crisis Communications Protocol

- Information is the most valuable resource following an MVI.
- Communications professionals will need to provide continuous, accurate, and accessible information to victims, families, and the public.
- Processes need to be developed to manage these tasks.
- Platforms must be selected and developed.
- Staff must be identified and trained.
- Victims and families will be highly sought after by the media – they need information regarding how to manage media inquiries.

16 Best Practices



7. Volunteer Management Protocol

- Details how a jurisdiction will identify, train, credential, and collaborate with volunteer agencies prior to an incident.
- Helps ensure the capabilities, resources, and services of NGOs, places of worship, and private sector organizations are coordinated with local, state, Tribal, territorial, national, and federal responses.
- It's critical to also develop a detailed process for dealing with spontaneous volunteers – otherwise, potential masses of well-intentioned people can quickly overwhelm response agencies, and cause unintended harm to victims and families.

16 Best Practices



8. Family Assistance Center (FAC)

- Safe and secure facility established to support victims and their families.
- FAC provides services to meet the immediate needs of those identified as victims by lead law enforcement and prosecution entities, in coordination with the lead victim service agency
- Streamlined access to agencies, resources, and information to meet their immediate needs (behavioral/mental health and spiritual care support, initial victim advocacy and access to victim compensation, return of personal effects, legal guidance, vital document replacement, immediate transportation and lodging).
- Referrals to local and regional services to meet longer-term needs (mental health counseling, health care, guidance with legal matters, work-related issues, financial planning, insurance benefits, Social Security/Disability).
- Coordinated case management *begins* at the FAC.

16 Best Practices



9. Financial Management Donation Protocol

- Allows jurisdictions to accept, manage, and distribute solicited and unsolicited resources such as facilities and goods, as well as monetary donations.
- Identify donation facilities, staging locations, and protocols for distribution. Staff for these functions will need to be determined.
- Financial donations are likely to come in quickly - sometimes to a variety of funds – a trauma-informed, victim-centered system must be developed to manage these funds.
- Consider working with a designated 501(c)3 organization to manage donated funds.
- Jurisdictions can access the guidance of the National Compassion Fund through the ICP TTA program to assist with setting up systems for managing financial donations.

16 Best Practices

10. Memorial & Special Event Planning Protocols

- Memorials, vigils, and special events tend to be quite spontaneous – both in timing and location.
- Special events can include dignitary visits and incident site visits for victims and families – require flexibility and rapid response by the event planners and community to ensure safety for all participants.
- Focus on creating trauma-informed interactions for victims and families in attendance.
- At a minimum, jurisdictions likely need to coordinate with victim service professionals, Faith-based leaders, law enforcement, public works, and/or the news media.
- Additional partners may be involved depending on the type of event.

16 Best Practices

11. Community Behavioral Health Response

- MVIs can be traumatic for victims, families, and the surrounding community.
- Following an incident, people may experience a variety of temporary reactions that will dissipate over a period of several weeks to a couple of months.
- Others will experience a range of longer-term reactions that include depression, anxiety, increased use/abuse of substances, weight fluctuations, anger, and challenges in stress management.
- Need to understand community's behavioral health services landscape (mental health, psychiatric care, and substance use disorders services).
- Develop a process to identify gaps that may exist as the volume of need increases.

16 Best Practices



12. First Responder Support

- Exposure to an MVI may be challenging for first responders – as it is an acute exposure to a critical event, following an accumulation of exposure to stressful responses throughout a career.
- First responders are typically *first* to enter the scene of an MVI, and the *last* to ask for help.
- Understand how MVIs can be more challenging for many responders than more common critical incidents and prepare for the often more complicated and longer lasting behavioral health needs of first responders.

16 Best Practices



13. Planning & Preparedness Grants and Emergency Funding Assistance

- Communities, victims and their loved ones have a number of needs following an MVI:
 - Communities will have initial response costs, as well as costs for continued care.
 - Victims may need medical assistance, adaptive equipment, physical therapy, trauma and grief counseling, lost wages, and assistance with funeral costs/arrangements.
- There are numerous grants and financial resources available to support victims and communities:
 - Victims of Crime Act (VOCA) funding
 - Antiterrorism and Emergency Assistance Program (AEAP)
 - State VOCA funding
- Prior to an incident, it is extremely helpful to form a multi-agency team with the ability to gather information and write grant applications, as many funding opportunities have strict, and often short, timeframes.

16 Best Practices



14. Community Resilience Planning

- Resiliency Centers reflect the desire for communities to provide for healing, health, and support to victims and the community at large.
- Identify and address the longer-term needs of victims and/or the local community, depending on the funding secured.
- Services are free for identified and funded populations.
- Provides a safe and supportive healing environment for individuals and groups seeking improved emotional and physical health related to the MVI.

16 Best Practices

15. Criminal Justice System – Victim Support

- Should there be a living defendant, victims and family members will need support as the case moves through the criminal justice system.
- Assistance with victim impact statements, media management, emotional support, and information regarding the investigation, prosecution, adjudication, sentencing, and any appeals.
- Due to the large number of identified victims, unique strategies are often employed to meet the needs during high demand times – an example being Hospitality Centers during trials.
- NMVC Court Guide

16 Best Practices



16. Training and Exercise

- Exercises are a key component of national preparedness – they provide the whole community with the opportunity to influence plans, address and validate capabilities, and identify areas of improvement.
- Jurisdictions should incorporate victim/survivor services into existing emergency management exercises.
- ICPTTA Exercises Guide can assist communities in incorporating victim services into emergency management exercises – contains sample exercise templates aligned with Homeland Security Exercise and Evaluation Program (HSEEP) Doctrine.

Key Partners in Planning

State and Local Resources

Governor's Office

- Office of Emergency Management/Services/Planning
- State Homeland Security
- Criminal Justice Policy and Planning
- Criminal Justice Council
- Office for the Aging
- Parks Department

County and Local Executives

- County Executive
- City Manager
- Mayor
- District Attorney
- Town Supervisor
- Medical Examiner/Coroner
- County Department of Parks
- Emergency Manager County

Education

- State Board of Education
- Superintendent of Public Instruction
- Chancellor's Office for Higher Education
- State Board of Community Colleges
- School Resource Officers
- School Counselors
- Board of Governors State Universities
- Parent/Teacher Association

Social Services

- Department of Health and Human Services/Social Services
- Adult Mental Health Services
- Child and Family Wellbeing
- Child Protective Services
- Adult Protective Services
- Rural Health
- Public Health
- Homeless Services

Public Safety and Emergency Management

- Department of Public Safety
- Department of Emergency Management
- Environmental Protection Agency
- State Office of the Chief Medical Examiner

Law Enforcement and Firefighters

- State Police
- Sheriff's Department
- Bureau of Investigation
- Department of Homeland Security
- Tribal Law Enforcement
- State/City Transit Police
- Local police departments
- Local fire departments and paramedics
- Park Rangers

Criminal Justice System

- Attorney General
- State Department of Justice
- District Attorneys' Offices
- State's Attorneys
- Court System (judges, clerks, managers)
- Community Safety Managers

Victim/Survivor Assistance

- State VOCA Administrator
- State Crime Victim Compensation Program
- State victim/survivor assistance coalitions (DV, SA, general, Child Abuse)
- Prosecutor-based Victim/Witness Staff
- Local Victim Assistance Programs
- Street Outreach Programs
- Trauma Recovery Centers

Community-Based Organizations

- Red Cross
- United Way
- State Funeral Directors' Assn
- Faith-Based Organizations
- State Convention Bureau
- State Lodging/Restaurant Association
- Designated Travel Agency
- Translation and Interpretation Services

Health Care/Hospitals

- State Department of Health
- State Emergency Medical Services
- Statewide Health Planning and Development
- State Department of Mental Health
- State Department of Behavioral Health
- State Office of Rural Health
- State Hospital Association
- Hospital Chaplains
- Hospital Department of Security
- Trauma Recovery Centers – Hospital Based
- Level One Trauma Centers

"Bonus" Best Practice News Media & Social Media

- MVI victims/survivors need support from trained VSPs to help explain how the news media work; and advocate for those who choose to interact with the news media.
- VSPs can also explain "the positives and perils" of social media to survivors; and help them decide whether or not to limit their exposure.
- The NMVC has seven tip sheets specific to victims and the media; and two Mass Violence Podcasts about this subject.

Key Partners in Planning

Federal Resources

Law Enforcement

- FBI
- US Attorney
- ATF
- Department of Homeland Security
- Department of Interior – National Parks Service Park Police
- Park Rangers
- Tribal Law Enforcement
- DEA
- NTSB
- FEMA
- US Customs and Border Protection

Federal and National Resources:

Victim Assistance

- FBI Victim Services Response Team
- NOVA Crisis Response Team
- DEA Victim/Witness Program
- Department of Interior National Park Service Victim/Witness Assistance
- NTSB Disaster Assistance Division
- ATF Victim Witness Assistance Program
- OVS TTAC

Associations

Executive

- National Governor's Association
- State Mayor's Association
- Nation Council of County Association Executives
- Conference of Mayors
- National Association of Towns and Townships

Law Enforcement

- Tribal Law Enforcement Association
- State Association of EMS Administrators
- State Association of Rescue and Emergency Management Services
- State Association of Chiefs of Police
- State Sheriff's Assn
- State Law Enforcement Officers Association
- State Association of Fire Chiefs
- State Association of EMS Administrators

Health Care

- State Hospital Association
- State Healthcare Association
- American Hospital Association
- Hospital Chaplains Association

Education

- State Principals and Assistant Principals Association

Press Officers

- Governor
- Attorney General
- Mayor
- Law Enforcement
- Prosecutors

ONE STRATEGY OR SKILL

 *For those seeking to help create a Coordinated, Survivor-centric Community Response Plan for Mass Violence Incidents*

To Request an NMVC Consultation or Technical Assistance:

 *For Consultations: nmvc@musc.edu*

 *For Technical Assistance: ICP-TTA@musc.edu*

Questions from the Field

Thank you for submitting questions in advance.



Let's answer a few frequently asked questions.

WRAP-UP & EVALUATION

Upon ending your session, a survey will appear.

We ask that you please take the time to complete this brief survey. Your feedback and suggestions are appreciated and helpful to improve our National Town Hall series; and to identify topics for the future.

We appreciate your time and attention.

Next National Town Hall 11

AUGUST 2024

SUN	MON	TUE	WED	THU	FRI	SAT
28	29	30	31	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31

Topic: "TBD"
Date: August 22, 2024

