

Active Shooter Plan for the El Paso Department of Public Health, El Paso, TX 5115 El Paso Dr, El Paso, TX 79905

Kristen Amick, Ali Husain, Tom O'Neill, Faria Putal

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### PART I-V: Base Plan

#### **Preface**

This disaster management plan and strategy are in response to the mass shooting events in El Paso. On August 3, 2019, a man native to Texas arrived at the Cielo Vista Walmart in El Paso and killed 23 people, while injuring 22 more (DOJ, 2023). Taking into account El Paso's geographic location in such proximity to Mexico, its demographics, and the perpetrator's motives, Assistant Attorney General Kristen Clarke of the Justice Department's Civil Rights Division labeled this heinous crime as "white-nationalist fueled violence" (DOJ, 2023). According to the United States Census Bureau, the population of El Paso as of 2021 was 678,415 people and the city covers an area of 259 square miles. Of this figure, nearly 82% of people identify as Hispanic or of Latino origin. Only about 27% of the city's population has received a bachelor's degree or higher, and nearly 20% of the population is in poverty (USCB, 2021).

Most Americans think that "gun violence" surfaces only when there is a mass shooting. In 2020, more than 100 people will die and more than 200 will be injured by firearms (Ranney, 2021). We must approach firearm injury as a public health epidemic, rather than a debate about gun rights or control. Our group chose this topic as we are passionate about addressing mass shootings; one of our group members once had to respond to a mass shooting incident in their capacity as a first responder. Moreover, mass shootings have become a terrible phenomenon all too common only in the United States. It's nearly inconceivable that deadly disasters that arise from mass shootings have the highest frequency in the world's most powerful high-income country. This can be attributed to the legality behind gun ownership in this country amongst other factors. It is a matter of grave concern that the "gun homicide rate in the US is 26 times higher than other high-income countries" (Everytown, 2021). We hope that this disaster management plan will strategically address these mass shootings more effectively when they do occur, so that with far more organization and coordination in place, there can be a more effective treatment of victims, resulting in more lives saved.

A successful public health approach to mass shootings requires the need for communication across inter-agencies. By acknowledging that firearm injury is, at its root, a public health problem, we can reduce gun deaths.

## **Mission Statement of Facility**

"Our mission at the City of El Paso Department of Public Health is to deliver exceptional services to improve the overall health and well-being of the citizens of El Paso and the region; based on the research and data analysis of a comprehensive community health assessment, addressing healthcare disparities in support of a high quality of life for all."

## **Statement of Purpose**

This plan aims to ensure that the El Paso Health Department is part of a uniform and unified response to the tragedy of mass shooting events. This plan was created in response to the multiple mass shootings in surrounding communities, including various grocery establishments in El Paso. This plan provides guidance for El Paso to ensure that safety is of the utmost importance to our citizens. Our Department of Public Health personnel are dedicated to reducing the risk and personal loss and damage from a mass shooting event. The plan is to: treat and transport the injured to hospitals; transport and care for the survivors at reunification centers; reunite the survivors with their families; identify the deceased and inform their next of kin; get survivors and their families longer-term care through community and faith-based institutions.

## **Signatures Page:**

THE UNDERSIGNED STAFF AGREES WITH THE JURISDICTIONAL AND DEPARTMENTAL FEATURES OF THE FOLLOWING ALL-HAZARDS DISASTER PLAN GUIDE.

| Name/Position/El Paso Police Department  | Date |
|--|------|
| Name/Position/El Paso Fire Department  | Date |
| Name/Position/El Paso County Medical Examiner's Office                                 | Date |
| Name/Position/Federal Bureau of Investigation El Paso Field Office                     | Date |
| Name/Position/Bureau of Alcohol, Tobacco, Firearms and Explosives El Paso Field Office | Date |
| Name/Position/University Medical Center of El Paso                                     | Date |
| Name/Position/West Texas American Red Cross  | Date |
| Name/Position/InterFaith Alliance of the Southwest                                     | Date |

# List of Abbreviations/Acronyms/Initializations

| Term      | Definition  |
|-----------|---|
| CFR       | Code of Federal Regulations                             |
| Cold Zone | The area where there is no or minimal danger            |
| DHS       | Department of Homeland Security                         |
| DOH       | Department of Health                                    |
| EHN       | Emergence Health Network                                |
| EMS       | Emergency Medical Services                              |
| EOC       | Emergency Operations Center                             |
| EPFD      | El Paso Fire Department                                 |
| EPOEM     | El Paso Office of Emergency Management                  |
| EPPD      | El Paso Police Department                               |
| EPTMD     | El Paso Transportation Management Division              |
| FBI       | Federal Bureau of Investigation                         |
| FEMA      | Federal Emergency Management Agency                     |
| Hot Zone  | The area where there is immediate danger                |
| ICS       | Incident Command System                                 |
| LEO       | Law enforcement officer                                 |
| LIDDA     | Local Intellectual/Developmental Disabilities Authority |
| LMHA      | Local Mental Health Authority                           |
| ME        | Medical Examiner  |
| PHEP      | Public Health Emergency Preparedness Program            |
| PIO       | Public Information Officer                              |
| SOC       | State Operations Center                                 |
| STEAR     | State of Texas Emergency Assistance Registry            |
| TDPS      | Texas Department of Public Safety                       |
| Warm Zone | An area that has been cleared but not secured by police |

#### **Authorities**

During an active shooting situation, units from each level outlined below will follow the disaster plan prepared by the EPOEM, enabling an effective response and resource mobility network and structure to help overcome the disastrous event of an active shooting.

#### Local:

The EPPD will initially deputize the situation and act as the primary agency. The priority action of the first respondents is to engage and diffuse the threat of the shooter. Facility SOP should incorporate action to coordinate with EPTMD to provide resources to assist the EPPD, including closing off roads and providing vehicles for people to be sent to the hospital. Other local authorities supporting EPPD include EPFD, EMS personnel, and local hospitals in the surrounding area. After the event, EHN and LMHA should be available for all who've experienced the shooter event. EHN provides crisis and trauma-centered responses and is an integral element in supplying support around the needs of individuals with intellectual and developmental disabilities, behavioral health, and substance use treatment needs.

#### State:

Local and state law enforcement authorities will be first on the scene. State actors, SOC, El Paso DOH, STEAR, and TDPS offer a coordinated response, identify, prepare, prevent, and effectively respond to an active shooter incident in a coordinated fashion. All occupants in the facility should not interfere with local and state first responders to an active shooter event. Once the threat of the shooter is not present, staff should cooperate with any local/state/federal agency with information and video surveillance.

#### Federal:

After the event, the FBI and DHS will step in and mandate the investigation and incident, supporting the response to offer capacity, security, expertise, and resources after an incident occurs. Within DHS, the FBI manages operational, behaviorally-based threat assessments for major entities and communities to help prepare against violent threats of an active shooter.

#### **Communication Plans**

Upon the beginning of the mass shooting event, the EI Paso Health Department will send an emergency management specialist to the cold zone to help coordinate the EMS response and patient transportation to the hospitals. DOH will help direct the mobilization of the family unification center and family support center. Trained guidance counselors (and if available, trained support animals) will be deployed. The DOH will also contact the EI Paso Medical Examiner's Office, Red Cross, and faith-based groups active in disaster response and begin to mobilize them. The EI Paso PD will keep in constant contact with the EI Paso FD and alert them to which areas are secured and they can begin moving in and treating and transporting the wounded. The Communications Officer on the scene will contact local hospitals, starting with the University Medical Center of EI Paso as the only level 1 trauma center in the city, to coordinate how many trauma patients each can take. The Health Department representative will communicate with the survivors and transport them to the reunification center that will be staffed by the Red Cross. Once the deceased have been either moved to the ME's office or identified on the scene, the Health Department will begin the process of notifying the families.

## **Mutual Aid Agreement**

The mutual agreements the EI Paso Health Department has entered into are concerned with the care of the victims and families of victims of a mass shooting. While other organizations like the EPPD and FBI will be in charge of stopping the shooter and following up with any investigation, the Health Department will primarily interact with organizations that are focused on supporting the physical and mental health of those involved and the community at large. Nearby hospitals will be involved to treat any injured parties from the shooting, as well as the EPFD as the city's primary EMS provider to transport the patient from the scene to the hospitals. Both institutions will be briefed on this plan and will require their approval. In addition to them, local faith-based organizations will be involved in the Health Department's response in order to help the survivors and families.

Following the days, weeks, and months after the shooting, the Red Cross will also approve these plans as they will be the primary group running the reunification centers and they will provide immediate care for the survivors who were not transported to the hospital. In addition, the ME's office will approve these plans as they will have a significant role in identifying and transporting the deceased as well as informing their families. Local and federal law enforcement agencies will also approve the plans to make sure that there is interdepartmental synergy and that there is a cohesive and unified response.

### The Role of Public Health with Respect to Mass Shooting Incidents

Public health departments have an important role to play in response to active shooters, terrorism, or any mass fatality event. They are involved if there is a surge in injuries that must be managed by local hospitals and first responders. While they are usually not involved as first responders, their role in emergency management is significant. They are the agencies that primarily deal with the mitigation, preparedness, and recovery phases. Along with the Office of Emergency Management, they often serve as the main coordinator centers for the management of these events. While not as visible as the response phase, each phase is critical to the success of the management of a large-scale disaster.

## PART VI: El Paso Evacuee Support Concept of Operations (CONOPS)

#### **Purpose Intended Use**

This Evacuee Support Concept of Operations (ConOps) identifies evacuee support-specific Emergency Support Function (ESF) roles and responsibilities of government and Nongovernmental Organizations (NGO) (U.S. Government Department of Justice, n.d.). It also provides task lists and checklists for use in evacuee support operations.

The El Paso Emergency Operations Plan (EOP) is the primary document for support of response and recovery when El Paso is affected by a disaster or is requested by another State or the Federal Emergency Management Agency (FEMA) to support a State affected by a disaster.

This ConOps supplements existing EOPs with a focus specific to supporting evacuees. It is an all-hazards document designed for use in both a "notice" event, such as a hurricane, and a "no-notice" event, such as an earthquake or hazardous materials release. It is most effective when used in conjunction with the Evacuee Support Planning Guide.

#### **Audience**

The intended audience for this ConOps includes the El Paso Public Health Department and any other ESFs, agencies, or organizations as deemed appropriate to the specific situation.

## **Background: El Paso**

## **Assessing the Needs of the Affected Population**

Following a mass shooting, the affected population has a wide range of needs. For example, there may be members of the community who have witnessed the shooting, survived the shooting, or lost loved ones in the shooting incident. Following the incident, victims of the shooting typically require immediate medical attention, including emergency treatment and surgery. They may also need ongoing medical care, such as rehabilitation and counseling. People who witnessed the shooting and who survived the shooting, or lost loved ones in the shooting may experience a range of psychological symptoms such as complex bereavement, and post-traumatic stress disorder (PTSD). They may need immediate psychological first aid, longer-term counseling, therapy, and other mental health services to help them cope with their symptoms.

Hospitals, ME, and EMS will need to coordinate and work together to provide families with information about loved ones; reunification centers will be set up for this. At these Centers, family members may also be asked to provide samples for DNA testing, dental records, and so forth to aid in the identification of badly disfigured family members. The entire community affected by the shooting may need support to help them process their emotions and collectively heal together. This may involve community events, memorials, and other activities designed to help people unite and support one another. Victims may need social support from family, friends, and community members. They may benefit from support groups, peer counseling, and other forms of social support.

Victims or those who lost loved ones may face significant financial burdens, including medical bills, funeral expenses, and loss of income. They may need financial assistance to help them cover these expenses. They may also need legal help to navigate the aftermath of the shooting, including filing insurance claims, obtaining compensation for injuries or damages, and seeking justice through the legal system. It's important to note that the specific needs of the affected population may vary depending on the severity of the shooting, the number of casualties, and the demographics of the affected community. The community's needs may also evolve, as people move through different stages of recovery and healing.

#### **Assessing Surge Capacity**

To prepare for possible disasters, the El Paso Health Department will conduct regular audits of the local trauma centers and hospitals to have a working knowledge of the capacity of trauma beds at each facility. After the onset of a shooting event, the survivors of the shooting will require immediate aid. Those who have been injured in the event will need first aid and transport to a hospital for more critical care. It will be the job of the Health Department to coordinate with the local hospitals and EMS personnel on the scene. After getting a situational report from the Incident Commander and confirming the injuries, the Health Department will communicate with the local hospitals and assess how many trauma patients each can take. The numbers will be given to EMS personnel, who will transport the correct number of wounded to each appropriate facility. Once all the wounded have

been brought to the hospitals, the Health Department will confirm the number of patients at each facility as well as their identities.

## Matching Available Resources & Needs of Vulnerable Populations

## **Managing Mass Fatalities**

After the incident has ended and the medical examiners are allowed on the scene, the Health Department will begin interfacing with them and will confirm the number and the identities of the fatalities. They will then set about contacting the families of the deceased.

The Health Department will also set up reunification centers for the uninjured involved in the shooting and their families. In coordination with the El Paso Police, they will group the uninjured in a secure location and confirm their identities. Working with the Red Cross and other volunteer organizations, they will provide basic necessities for the survivors and help them contact their families.

#### **Mental Health Care and Services**

Behavioral health is an integral part of the public health and medical emergency management system and is planned to be integrated into preparedness, response, and recovery activities. Oftentimes, shootings can be the result of a person struggling with their behavioral health due to past/current trauma. It is critical to assist those afflicted by mass shootings and offer the proper support to the most vulnerable groups. The EPHD will work with trauma counseling organizations to offer psychological counseling to any of the survivors, their families, and the families of the deceased. Working with established counseling groups for first responders, the EPHD will interface with the EMS, Fire, Police, and Hospital personnel that responded to the incident.

### The Role of Faith-Based Organizations

Gun violence in the United States affects all communities and is often manifested in suicide, violent crime, abuse, and accidental death. Faith communities are often sites for funeral rituals, collective grieving, and long-term support networks for survivors. Research reveals that religious Americans overwhelmingly support commonsense policies aimed at gun violence prevention, including background checks for all gun sales, requiring a person to be 21 to purchase a gun, banning firearms from schools and college campuses nationally, and banning assault-style weapons. Additionally, in 2019, 60 percent of deaths by gun violence in America were suicides. Some faith groups are working with local faith communities to help address mental health issues, and one diocese has created a curriculum to help leaders prevent suicide. Volunteer organizations, such as the National Voluntary Organizations Active in Disaster (VOAD) are a coalition of faith-based, community-based, and other non-profit organizations throughout the country that are dedicated to sharing knowledge and coordinating resources in response to the disaster cycle of preparation, response, and recovery.

# Immediate and Long-Term Tasks

| Task   | Supplying Function  |
|--|---|
| Request casework support   | El Paso Social Services Agency, NGOs, community organizations, private sector |
| Provide evacuee-related recovery services, such as:  Reunification Crisis counseling, referral to long-term behavioral and mental health resources Referral to El Paso social services system State and/or Federal benefits processing assistance, as applicable. Community information, such as laundry facilities, pharmacies, employment, schools, transportation, social services, faith-based organizations, banking, financial assistance, and support groups Housing resource options | El Paso Social Services Agency, NGOs, community organizations, private sector |
| Arrange access to information for evacuees seeking assistance: Local area support services Online and phone registration for assistance services   | Support organizations, FEMA   |
| Direct evacuees to El Paso social/human services agencies for replacement of identification and transfer of pre-existing benefits and services (e.g., Social Security, food stamps, driver's licenses)   | El Paso social/human services agencies  |
| Contact local law firms and legal services organizations to seek support in donated time and services to legal clinics. If there is a Federal disaster declaration for the Impact-State, request FEMA to activate the Disaster Legal Services program  | The private sector, FEMA  |

## **Evaluating the Effectiveness of the Disaster Response**

#### What do we want to assess?

- How quickly people got to a hospital
  - By checking the records of the EMS branch of the EPFD, the Health Department will be able to determine how quickly all wounded victims of the shooting were moved to a hospital.
- Were any hospitals overwhelmed?
  - The Health Department will contact all hospitals that received patients from the shooting, and learn whether or not they were at any time overwhelmed by the number of patients that they had, both related to the shooting and not related to the shooting.
- Were first responders reached for counseling
  - The Health Department will contact the ELPFD and EPPD and any other first-responding agencies. It will be determined whether or not counseling services were offered and available for the first responders. If they were, it will be determined what type: group therapy, individual therapy, etc. It will also be determined how well attended and utilized each form was.
- Were victims reached for counseling
  - The Health Department will make contact with each of the survivors and families and offer counseling services. The Department will keep note of how many people use the services.
- How quickly people were reunified
  - O By coordinating with the Red Cross and other organizations at the reunification center, the Health Department will learn how quickly the reunification process went. Using the data on when people were reunified, the Health Department will take special note of the time the first person was reunified and the time the last person was.
- How quickly families were told about the deceased
  - The Health Department will contact the ME's office and determine how quickly the families of the deceased were told, the Department will take special note of the time the first family was told and the time the last person was.
- How well people were cared for at the reunification center
  - The Health Department will investigate the state of the treatment at the reunification center. By interviewing the survivors, families, and members of the Red Cross, the Department will gain an understanding of the quality of the service there. Special points of interest are treatments of minor wounds not significant enough for a hospital, quality, and speed of nonmedical care, psychological care given, the speed at which people were reunited, and overall satisfaction with the Red Cross's service.
- What organizations like the red cross did we involve in?
  - The Health Department will review and document all responding non-first responder organizations that assisted in post-event care.
- Did we successfully involve community leaders in caring for people?

The Health Department will review how successful it was at reaching out to community leaders and organizations after the incident. A database of which organizations and how quickly they were reached will be created. Special care will be made to make sure that a diverse group of organizations is contacted and involved. The Department will also review any initiatives that the community organizations choose to begin with dealing with survivors and families.

#### **Annexes**

#### Annex 2: Drills & Exercises

**Training Seminar Title:** Community Response Groups Preparation for a Mass Shooting Event

Objectives of your Training Seminar (What mitigation strategy are you advocating?)

To prepare Health Department staff, Red Cross staff, first responders, and hospital staff for responding to a mass shooting. By conducting a training exercise for the groups who would respond to a shooting, but allowing community members to be a part of it, both the responders and community will be trained. The police, EMS, and hospitals will all gain practical skills and general know-how about how to act during such an emergency. The community will be taught at the exercises briefing and debriefing about how the 911 system responds to mass shootings, as well as tips for surviving one.

The Health Department staff should gain knowledge and experience in quickly contacting the necessary organizations and community groups such as the Red Cross, the medical examiner's office, local hospitals, and other community and faith-based organizations.

The Red Cross staff will gain experience setting up a reunification center and establishing supply lines to

|   | maintain the centers for a few hours.  Train the first responders on communication with the Health Department and hospital staff. As well as experience staging and transport at and from the scene.  To train hospital staff on communication with first responders and the Health Department staff. As well as managing an influx of trauma patients in a short period of time.  Community members who participate in the training as potential victims will also be taught the basics of "run, hide, fight" in order to better prepare them for the possibility of a real active shooter scenario. |
|---|---|
| Estimate Length of Training   | 1 hour  |
| Target Audience and max size of audience.   | Health Department staff, Red<br>Cross staff, first responders,<br>community members, and<br>hospital staff.  Potentially up to 150 people.  |
| Who would be a good candidate (e.g., structural engineer, health dept. official, first responder?) as Facilitator of this session? Why? | Ideally, we will have facilitators from all of the groups who participate in the training. The value of a multidisciplinary team creating the training is that they will be able to judge   |

each organization's performance much more effectively than a person from a different organization. What do you want community members to do as a To create plans for their result of their attending this session? response to active shootings in their community survive an active shooter situation and be continually aware of the best routes of egress of any given location. Strategies to increase community uptake of your Due to active shooters being mitigation (We have lots of useful links for checklists such a large current issue, we on the Course Home page under the Important Links expect that there will be a lot page.) of professional response interest and participation in List the ones you think might be useful (in the the drill. Active shooter drills appropriate language) or provide a title or two of a list or are usually fairly shocking handout that you think would be good to give out to and memorable for the attendees. people involved, so we expect participants to remember and implement the things they learned. Other supports and literature will be available at the training for participants to take, as well as encouraging them to go to the Health Department website where they will find additional information.

Annex 3: Active Shooting Emergency Operations Plan, Short-term Strategies for El Paso, TX

| Necessities | Possible Resources  | Distribution Strategies   |
|-------------|---|---|
| Water       | Donation of water from schools, churches, and neighboring communities  Requisition of bottled water from Walmart, Costco, Sam's Club, and other large outlet stores.  | Mobile distribution: This involves using trucks or other vehicles to deliver water to people in need. This can be a good option for reaching people who are unable to travel to a central location. |
| Food        | Donations of food from local food banks and pantries.  Collaborate with organizations such as El Pasoans Fighting Hunger Food Bank and No Lost Food to raise funds for food.  Requisition canned goods and other non-perishable foods from Krogers, Sam's Club, Wal-Mart, and other local grocery chain stores. | Centralized distribution points and  Decentralized distribution system (for reaching people who may not be able to get to a centralized distribution point)   |
| Housing     | Contact nearby schools, community centers, and churches for temporary shelter and community support.  Connect people to hospitals, shooter victims  | Temporary housing. This involves providing people with temporary housing, such as hotel rooms or apartments, while they are looking for permanent housing. Temporary housing can be helpful in      |

|              | and family members may require overnight stays in the hospital. | providing people with a safe and stable place to live while they are trying to rebuild their lives. |
|--------------|---|---|
| Medical care | Medical resources and on-site care from the first respondents   | Centralized distribution point for medical on-site for those affected.                              |

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