

## After Action Report

Event: 14<sup>th</sup> Annual Star Scape 2012

Date/ Time: June 9, 2012, 1400 hrs- June 10, 2012, 0700 hrs.

Location: Fort Armistead Park (4000 Ft. Armistead Rd, 21226)

Summary: On June 9, 2012, a “rave-like” festival was held at Ft. Armistead Park. The waterfront park is located on a peninsula at the end of a single road, in the industrial periphery of the City. The festival is hallmarked by: heavy crowds of people in their twenties, drug use, 16 hours of live music and DJ’s. This year’s event strained city resources due to the heat, over-crowding, poor ingress and egress, poor management of the event by the event organizers, and a lack of attentive EMS care provided by a private Ambulance Company.

In Attendance: Deputy Fire Chief Raymond O’Brocki (Fire Marshal), Deputy Fire Chief Alex Perricone (Director of EMS), Captain Doug Hipp (OFM, Public Assembly), Captain Harvey Webster (OFM, OIC for the event), Lieutenant Scott Brillman (OEM), via telephone: Deputy Fire Chief Mark Wagner (SCO, in charge of field operations the night of Star Scape).

### Problems identified:

1) Overcrowding: It was the estimate of OFM members, that the crowd was as high as 14,000 (one verbal report had ticket sales at 11,200) when the event was ticketed at under 8,000. The festival has occurred for the previous 13 years without significant incident. The festival has grown in size and scope and draws people from out of the state. The perimeter of the park was porous, facilitating people bypassing the front entrance and jumping the fence. This further contributed to the overcrowded conditions.

An issue related to overcrowding, was the overcrowding of scaffolding erected for the event. There was no limit set for scaffolding, because the presence of scaffolding was not reported to the OFM. There was no documentation that the scaffolding was permitted or inspected by the building department or any other agency.

Chief Wagner was also concerned about water safety. The large, mostly intoxicated, crowd in close proximity with open water could have lead to a drowning. He was so concerned about this possibility that he had fire rescue boat #1 respond and patrol the water side of the event.

2) Lack on ingress and egress: Because of the large crowd size and the single road access; moving within the park grounds was significantly reduced, vehicle travel was nearly impossible. Vehicle parking along the single access road further exacerbated the limited entry. No barrier was installed to segregate the road egress and ingress. Furthermore, there were no crowd management efforts made to corral people into areas that least impacted ingress and egress. There was a noted lack of proper lighting for the event. Lighting is an essential element in the means of egress. At a minimum, the major pedestrian traffic areas needed to be illuminated and was not.

3) Emergency Medical Services: The private ambulance company (SYMS) was inadequate and ineffective in handling the EMS needs of the event. It was reported that the private provider only brought one ALS unit and one BLS unit and had no plans to transport anyone. BCFD EMS personnel witnessed several protocol breaches including, but not limited to, letting overdose

victims, “sleep it off.” In addition, a medical plan was never submitted by the private provider and approved by the BCFD Director of EMS as per COMAR.

Fire Communications dispatch log shows an ongoing response from the BCFD and mutual aid localities starting at 1848 hrs on June 9 continuously until 0654 hrs on June 10. The units involved in this single event were as follows: Medic 2 (3 responses), Engine 57, EMS 5, Anne Arundel Medic 11 (2 responses), Medic 46, Medic 23, Medic 9, Battalion Chief of EMS, Medic 5, EMS 3, Truck 21, Haz Mat Coordinator 1 and 2, Fire Rescue Boat 1, Engine 55, Anne Arundel Medic 33, Baltimore County Medic 6, Baltimore County Medic106, Medic 12, EMS 4. The majority of these responses involved overdoses and heat related illnesses such as dehydration.

Action Steps:

- 1) Develop a list of requirements for the promoter (OFM, EMS, OEM)
- 2) Engage the police in planning for this event (OEM)
- 3) Survey the property and develop a hyper accurate footprint including; crowd capacities for each identified habitable area and designate off limits areas (OFM)
- 4) Serve notice on SYMS medical regarding submission of a medical plan for any event/venue they are contracted to provide EMS coverage (EMS)
- 5) Develop a plan for the site which includes; layout, egress (using barriers to segregate the access road from pedestrians), stage location, scaffolding, lighting, entry into the park (an accurate count conducted by the OFM) and require a BCFD command post on site staffed by 4-7 OFM personnel and an EMS officer to oversee the private ambo company. (OFM)

- 6) Meet with event promoter prior to any event permit being issued. Notify the promoter of the new requirements for the continued presence of this event in the city.

Event Footprint:

