

## COMMONWEALTH OF VIRGINIA Office of the State Inspector General

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October 28, 2021

The Honorable Ralph Northam Governor of Virginia P.O. Box 1475 Richmond, VA 23219

Members of the Virginia General Assembly Pocahontas Building 900 E. Main St. Richmond, VA 23219

Re: Commission on the May 31, 2019, Virginia Beach Mass Shooting Interim Report

Dear Governor Northam and Members of the Virginia General Assembly:

Pursuant to the 2021 Budget Bill, HB 1800, Chapter 552, item 27.20, the Commission on the May 31, 2019, Virginia Beach Mass Shooting submits its interim report below.

The Office of the State Inspector General sends you this report on behalf of and written by the Commission as OSIG serves as staff support to the Commission. Please contact Commission Chair Ryant Washington via OSIG at <u>communications@osig.virginia.gov</u> with any questions.

Sincerely,

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Michael C. Westfall, CPA State Inspector General

cc: Clark Mercer, Chief of Staff for Governor Northam Division of Legislative Automated Systems <u>§ 30-34.15</u>

## COMMISSION ON THE MAY 31, 2019, VIRGINIA BEACH MASS SHOOTING Interim Report October 29, 2021

Dear Governor Northam and Members of the Virginia General Assembly:

In the 2021 Budget Bill, HB 1800, Chapter 552, item 27.20, the General Assembly established, authorized and resourced the Commission on the May 31, 2019, Virginia Beach Mass Shooting. The Commission membership is appended to this report as Annex A.

The Commission met June 9, 2021 (virtually), August 4, 2021 (in person in Richmond), September 9, 2021 (in person in Virginia Beach) and October 20, 2021 (in person in Richmond). The approved minutes of the June, August and September meetings and the draft minutes of the October meeting are appended to this report as Annex B.

The work accomplished by the Commission to date includes:

- Initial organization.
- Selection of leadership (Chair, Vice-Chair, Secretary).
- Briefings on the applicability of Virginia Freedom of Information Act and Open Meetings laws.
- Review of various prior investigation reports: Virginia Beach Police Department report, the Hilliard Heintze report, the Virginia Beach response to the Hilliard Heintze report, the FBI's Behavioral Analysis Unit report, the report of the Review Panel that investigated the 2007 Virginia Tech mass shooting, and various other documents submitted by citizens and surviving family members.
- Briefing from the FBI's BAU.
- Public hearing in Virginia Beach wherein the Commission received public comments.
- Initial question and answer session with the Virginia Beach City Manager, Chief of Police and support staff.

The Commission has also formed a report writing team.

The Commission will continue to meet regularly to receive information, refine its tasks and synthesize all available information into a final report. The Commission anticipates investigative work will continue into 2022, and has set a target for completion of the investigation of June 3, 2022. This target date is prior to the expiration of the Commission's mandate on June 30, 2022, permitting a little more than three weeks for report finalization and closeout.

The Commission's initial impressions follow:

- 1) The FBI's BAU report shed the best light to date on the motivations of the shooter. The BAU's work on this aspect of the May 31, 2019, event is science-based and provides keen insights into the shooter's spiraling mental state prior to the date of the tragedy.
- 2) The Commission intends to probe further into the issue of workplace grievances, the human resources interaction (system design and execution) with workplace supervisors, and disciplinary and administrative issues that may have given rise to the shooter's perceived grievances and workplace insecurities.
- 3) The Commission intends to explore further workplace security practices.
- 4) The Commission intends to explore the adequacy of Virginia Beach's recovery and resilience efforts, including ongoing emotional and physical support to surviving staff members and family members.
- 5) The Commission intends to shape lessons learned and best practices to be included in the final report.

The Office of the State Inspector General has capably supported the Commission.

In terms of authority required to continue its work, the Commission requests reauthorization of the Commission's mandate until the end of 2022.

Financial support and resources to the Commission's work to date has been adequate, assuming those funds remain available throughout calendar year 2022. If the General Assembly elects to extend the Commission's mandate, the Commission requests that the General Assembly make available the funds provided in fiscal year 2021 for the Commission's work in fiscal year 2022.

Respectfully submitted,

Ryant Washington Commission Chair October 29, 2021

#### ANNEX A: COMMISSION MEMBERSHIP

Ryant Washington-Chair Robert Bracknell-Vice-Chair James Redick, Secretary

Dr. Robert Archer John Bell Dr. Adolph Brown, III David Cariens Kristofer Chester Dr. Francis Counselman Steve Cover Rebecca Cowan Saly Jamil Fayez Robert Geis Jaison Harris The Honorable Jerrauld Jones Aaron F. Kass, Esq David Lord Col. Gary Settle James Thomas The Honorable David Whitted

#### ANNEX B: MEETING MINUTES

Please see attached meeting minutes for June 9, 2021, August 4, 2021, September 9, 2021 and October 20, 2021.

## Minutes for the Commission on the May 31, 2019, Virginia Beach Mass Shooting Meeting on June 9, 2021, 10 a.m.

Twenty-seven people attended the meeting.

Introductions by the 19 Commission members in attendance: Saly Fayez Steve Cover James Thomas David Lord John Bell Aaron Kass The Honorable Jerrauld Jones Dr. Robert Archer **Robert Geis** Judge David Whitted James Redick Rebecca Cowan Kris Chester **Butch Bracknell Ryant Washington** Jaison Harris **Richard Diviney** David Cariens Col. Gary Settle Introduction of OSIG staff:

State Inspector General Michael C. Westfall Deputy Inspector General Corrine Louden Communications Director Kate Hourin Technology and Security Manager Greg Williams Information Security Officer Bob Thomas OAG Senior Assistant Attorney General/Section Chief Mike Jagels

Other attendees: Del. Kelly Convirs-Fowler Virginia Freedom of Information Advisory Council Executive Director Alan Gernhardt

FOIA Council presentation by Alan Gernhardt

Review of Parliamentary procedures, quorum – majority of voting members (11).

Election of Chair and Vice-Chair

Col. Gary Settle made a motion to nominate Ryant Washington as Commission Chair. The motion was seconded by James Thomas and it carried unanimously.

Ryant Washington made a motion to nominate Robert Bracknell as Commission Vice-Chair. The motion was seconded by James Thomas and it carried unanimously.

**Discussion Points** 

Meeting platform – keep it virtual for now, but in-person in the future.

Direction of review – OSIG staff will send previous reports about the May 31, 2019, mass shooting to Commission members. Each member will review their area of expertise and send questions and comments to OSIG staff by July 2, 2021.

Adjournment at 11:35 a.m.

## Minutes for the Commission on the May 31, 2019, Virginia Beach Mass Shooting Meeting on August 4, 2021, 10 a.m. in James Monroe Building

The meeting commenced at 10:05 a.m.

Commission members in attendance: Steve Cover James Thomas Aaron Kass Robert Geis James Redick Rebecca Cowan Butch Bracknell Ryant Washington David Cariens Gary Settle

OSIG staff in attendance: Michael Westfall Corrine Louden Kate Hourin Katrina Goodman Bob Thomas

FBI agents in attendance: Jordan Kennedy Brian Dugan Karie Gibson John Wyman Brad Hentschel

Other attendees: Debra Bryan, City of Virginia Beach CJ Pegram Stolle, Two Capitols Consulting

Commission members discussed the five reports related to the May 31, 2019, incident.

Members decided against having small working groups to review and research various aspects of the shooting. Jim Redick offered to look into industry standards for human resources, security alerts, civil liberties, workforce safety, etc.

The FBI Behavioral Analysis Unit made a presentation about the offender's timeline and took questions from 11:40 a.m. to 1:25 p.m.

Members discussed having the next Commission meeting in Virginia Beach on September 9, with Commission business to take place from 2- 4 p.m. and hosting a public comment meeting from 5-7 p.m.

Adjournment at 1:45 p.m.

## Minutes for the Commission on the May 31, 2019, Virginia Beach Mass Shooting Meeting on September 9, 2021, at 2 p.m. and 5:30 p.m. in Virginia beach Training Academy, Virginia Beach, VA

The meeting started at 2 p.m.

## **Commission members in attendance:**

Butch Bracknell Steve Cover James Thomas Aaron Kass Robert Geis James Redick Rebecca Cowan David Cariens Jaison Harris David Whitted Bob Archer Rich Diviney Frank Counselman Kris Chester

## **OSIG staff in attendance:**

Michael Westfall Corrine Louden Kate Hourin Katrina Goodman

## Media in attendance:

WAVY, Associated Press, WTKR-Channel 3, WVEC-Channel 13

Commission members adopted the meeting minutes from June 9 and August 4, 2021.

Randy Campbell, Active Attack Training Specialist, Virginia Center for School and Campus Safety, Virginia Department of Criminal Justice Services, gave a presentation on how all stakeholders in an incident should know how to try to save a life; called it the whole community approach.

Commission members discussed how to receive information from external sources.

Commission members accepted the 531 Letter as a form of evidence after a discussion about its contents.

On a motion made by Butch Bracknell and seconded by David Cariens, Commission members adopted a resolution that members not conduct interviews individually, and that information received by individual members be shared immediately with the entire Commission.

On a motion made by Bob Geis and seconded by Jaison Harris, Commission members approved a resolution stating that members may passively accept information from external sources, but not actively seek it.

Commission member Aaron Kass moved that the Commission establish a request for information process and send those requests to the Virginia Beach City Attorney (see attached questions). Butch Bracknell seconded the motion, and the motion carried.

With the Commission's interim report due to the General Assembly by November 1, 2021, Butch Bracknell volunteered to lead the writing team.

Kate Hourin gave a brief summary about travel reimbursements.

The meeting recessed for dinner at 4:15 p.m.

The meeting reconvened at 5:30 p.m. for a public comment session.

Seven people spoke publicly: Jason Nixon Debbie Borato Beth Mann Joseph Samaha Barb Messner Al Brewster Brock Beckstedt

The meeting adjourned at 7:15 p.m.

## Minutes for the Commission on the May 31, 2019, Virginia Beach Mass Shooting Meeting on October 20, 2021, 10 a.m., Patrick Henry Building, Richmond, VA

The meeting began at 10 a.m.

Commission members in attendance: Steve Cover John Bell Aaron Kass The Honorable Jerrauld Jones Robert Geis The Honorable David Whitted James Redick Rebecca Cowan Kris Chester Butch Bracknell Ryant Washington Richard Diviney David Cariens Col. Gary Settle

OSIG staff in attendance: State Inspector General Michael C. Westfall Deputy Inspector General Corrine Louden Communications Director Kate Hourin Chief of Investigations Katrina Goodman

Other attendees: OAG Senior Assistant Attorney General/Section Chief Mike Jagels Jason Nixon, victim's husband

Commission members adopted the meeting minutes from September 9, 2021 (motion made by Jim Redick with a second from Butch Bracknell).

Commission members elected Jim Redick as the Commission Secretary (motion made by Aaron Kass with a second from XXXXX XXXX).

Virginia Beach officials (see names below) answered questions from Commission members. City Manager Patrick Duhaney, Assistant to the City Manager Melissa Zibutis, Police Chief Paul Neudigate Deputy Police Chief William Dean

Commission members discussed Jim Redick's draft document for the Commission's final report (see attached).

David Cariens discussed the possibility of an endowment fund for victims of the mass shooting, similar to the fund set up for the 177 victims of the VA Teach mass shooting. Members agreed to Cariens recommendation that Joe Samaha be invited to speak to the Commission on his efforts to ensure all victims from VT receive the care they need in perpetuity. See https://www.vtvcare.org/.

Commission agreed that it should invite the FBI for second presentation (same as the first).

Commission members reviewed Butch Bracknell's draft interim report to the General Assembly line by line (see attached).

Commission members adopted a virtual meeting policy (motion made by David Whitted with a second from Steve Cover).

Jason Nixon spoke to the Commission about seeking subpoena power.

Commission members picked November 23, 2021, as the next meeting date.

The meeting adjourned at 1:25 p.m.

#### Commission Meeting Notes – 10-20-2021

#### Review and approval of September 9, 2021, meeting minutes.

Minutes approved.

#### Discussion about secretary position for the Commission - Chairman

Mr. Jim Redick was nominated and approved to serve as secretary. After concern about the installation of this position for the purposes of capturing notes for which such detail has not been captured previously, the Commission discussed that the meeting was only the fourth so far. The first occurred virtually on June 9, 2021 and is available for review on YouTube. The second meeting was an in-person meeting (without a quorum) in Richmond on August 4, 2021 which included a presentation by the FBI. The third meeting was in Virginia Beach on September 9, 2021 and included a public meeting as well as media coverage. And this October 20, 2021 meeting in Richmond, which has assigned a secretary for note taking, is the fourth.

#### **Presentation by Virginia Beach officials**

Virginia Beach City Manager Mr. Patrick A. Duhaney was joined by Police Chief Paul Neudigate, Deputy Police Chief Bill Dean, and Ms. Melissa Zibutis from the City Manager's Office to present and otherwise answer the Commissions questions related to their October 12, 2021 document. Mr. Duhaney and Chief Neudigate were not employed by the city at the time of the incident. Ms. Zibutis and Deputy Chief Dean were, with Deputy Chief Dean overseeing response operations for the patrol division at the time.

With the guidance of Chairman Washington, Mr. Duhaney summarized the questions and answers and opened it up to discussion.

## Question 1: (see October 15 document)

Mr. Duhaney spoke the the impact COVID has had on their budget, particularly the recommendations detailed in the Hilard Heintze report. In anticipation for the potential economic hit, Virginia Beach City Council withdrew \$67 million which included some of the recommended actions as well as freezing positions. It was with his first proposed budget as City Manager, and because the impact from COVID was not as bad as originally anticipated, he was able to include more of the recommendations. This includes hiring enough Human Resources staff to achieve centralization and also making the Human Resource Director a direct report to the City Manager.

Commission Member Kass referenced Ms. Zibutis' October 12, 2021 update presentation to the Virginia Beach City Council and asked for more details related to different 'phases' in terms of the disciplinary process and also what alternatives employees may pursue to report problems or seek assistance. Mr. Duhaney reported the city implemented an ombudsman program approximately six months prior as another independent opportunity to express concerns outside of the chain of command. Therefore, at least three ways of communicating a concern are 1.) report it to their HR representative (a department which reports directly to the City Manager's Office), 2.) Contact the City's auditor, an independent agency which reports to City

Council, and 3.) the ombudsman which is available on a contract basis. Mr. Dehaney also informed the group that he authorized Human Resources to ensure all employees in supervisor positions attend a 'supervisory boot camp.' What was previously encouraged is now required.

Mr. Kass also inquired about the downgrade from 4 FTE security positions to just 1 FTE in the budget document. Mr. Dehaney explained their new physical security manager was hired in the August – September timeframe. One of the individual's missions will be to conduct an assessment and determine the needs of the security office. He is located within the Office of Emergency Management and is resourced financially to develop the plan for moving forward.

Mr. Bracknell inquired about the availability of the ombudsman resources to employees who work outside of the regular workday, to which Mr. Dehaney responded the ombudsman would be available 24/7. It was also mentioned the Sentara's VB Strong process was coming to a wrap up and efforts are underway to build additional partnerships to ensure services continue for those in need.

Mr. Cariens asked about the 2001 VB Security Plan and asked if the City has made any revisions since the incident. Mr. Dehaney shared that the City had conducted an exercise prior to the May 31 incident, that training had been in place, and that the gunman had also received the training. As for the plan revision, this is one of the tasks assigned to the new physical security manager. Deputy Chief Dean offered that the latest exercise prior to May 31 was at an elementary school whereby lessons learned from previous training events were incorporated and tested – a continuous cycle of training and exercising since the Columbine incident. Mr. Cariens asked about counseling availability for the responders of May 31 and Deputy Chief reported that was a need identified early on with resources and benefits made available.

Mr. Chester expressed concern that the first request of the Commission was to review all the material reports and ascertain what might be missing, and that hasn't necessarily been done. He was interested in seeing more evidence of technology and security plan updates than what is stated on a budget. Mr. Dehaney made mention of a new rapid alert system the City is deploying. He also expressed his willingness to provide access to information throughout this process, but is concerned about turning over sensitive materials which must remain protected.

Mr. Kass recalled a question from a previous meeting about therapy being made unavailable, that current supervisors have limited the amount of sessions at the VB Strong Center. He asked if their next recourse would be a call to the Ombudsman. Mr. Dehaney was not aware of anyone denied the opportunity who requested it, and that was something he wants and needs to know. He emphasized everyone experiencing trauma needs help, but it may not be approved the immediate instant the employee asks to go.

#### Question 2: (see October 15 document)

In response to the question whether the entire interview panel was killed, Mr. Dehany explained the gunman was career progressed which did not require an application or interview. And this topic did not come up during post-incident investigations.

#### Question 3: (see October 15 document)

Mr. Dehaney discussed the issue surrounding the errant \$3,027.48 transaction. Having served as a Finance Director, he explained it was not a significant issue in the overall big picture of finance and large-scale project management. Chairman Washington asked how this mistake may have related to the City's progression of discipline, but Mr. Dehaney said he wasn't even sure it would have reached that level. There was no illegal intent to defraud and employees may fall behind in their work. He explained there were no red flags.

Mr. Bracknell asked might the way the issue was handled by his supervisor a potential trigger? Could it have been mishandled? Mr. Dehaney replied that the person who dealt with the issue was the person responsible for doing so and that the gunman's supervisor was kept in the loop. Deputy Chief Dean added that nobody had mentioned this as a potential reason why during the investigation interviews. Mr. Dehaney concluded by saying he believe the way it was handled was appropriate.

Mr. Kass referred to the Hillard Heintze report, citing "A supervisor tasked a co-worker to inform the gunman his actions were illegal and a terminatable offense." He went on to ask if the Supervisor treated the gunman differently by not reach out to him himself, and also made note that the co-worker charged with making contact didn't relay the words exactly but instead asked for more information. Mr. Kass made the points that, mere days before the shooting occurred, both took a hands-off approach which led to the question whether they knew something that hasn't yet surfaced. What did they know, when, or was it appropriate? Did their approach indicate any type of concern days before the shooting? Did know co-worker ask for more documentation because they knew it wasn't a terminatable offense? Deputy Chief Dean bring what answers he may have back to the Commission.

## Question 4: (see October 15 document)

Mr. Cairens made note of concern related to Friday afternoon meetings and a supervisor reportedly telling the gunman "If I have to stay, so do you." Mr. Geis made noted, however, the meeting(s) occurred during the regular workday.

Mr. Diviney commented about the need to connect efforts which go 'upstream' and that which goes 'downstream,' to which Mr. Dehaney shared their monthly "STAT" process. He stated the STAT process is meant to bring subject matter experts, lower-level management, and executive staff to work through issues for which their Recovery STAT is one. This group is comprised of Budget, Finance, Human Resources, Ms. Zibutis, and the Chief Performance Officer. Their goal is to work the plan and be accountable.

## **Discussion of Document from Jim Redick**

Chairman Washington introduced a document which was sent to the Commission as Confidential Working Document prior to the meeting. Mr. Redick explained it was an attempt to organize all of the information the Commission has received, from all various sources, and place them in the categories assigned by the General Assembly. As more information is received during the Commission meetings, the working document will continue to be updated and can potentially serve as an outline for the final report.

Mr. Redick also sought clarification as to the recommendations to be made by the Commission, that they are intended for the entire Commonwealth and not just Virginia Beach. Chairman Washington concurred that there are some aspects specific to Virginia Beach the Commission is to address, and that recommendations should be made with the Commonwealth in mind.

Mr. Cariens addressed the section in the document related to long-term needs for the survivors and families of the victims. He shared information he received from Mr. Joe Samaha who, like Mr. Cariens, experienced a personal loss during the Virginia Tech incident. Mr. Samaha was instrumental in having the Commonwealth set up a fund through DCJS for the victims and families (including extended family impacted by the Virginia Tech incident, reimbursing them for all out-of-pocket counseling and care expenses not covered by insurance in perpetuity and with no tax-payer money involved. The program is called VTVCare (vtvcare.org) and Mr. Cariens recommended Mr. Samaha be invited to speak to the Commission on these efforts. The group agreed.

## **Discussion of Document from Rebecca Cowan**

Ms. Cowan forwarded to the group a link to the October 12, 20201 Virginia Beach City Council Workshop: <u>https://youtu.be/3R1EAI7SUdo</u>. The briefing, which begins around the 22<sup>nd</sup> minute, highlights much of what the City is doing related to the Hillard Heintze recommendations. All Commission members are encouraged to view it.

## Draft General Assembly report – Butch Bracknell

Mr. Bracknell presented to the group a draft report for consideration, explaining the intent is to describe to the General Assembly what the Commission has been doing since appointment. He further explained it does not need to be comprehensive or lengthy; rather, just a point-in-time update. The group then went through the document line by line with Mr. Bracknell documenting the recommended changes. Of particular note from the discussion: The Chair of the Commission submits the report, not the Commission as a whole. As such there is no need for a formal vote (and public meeting to do so). Also, the Commission agreed more time will be needed to complete the work. The Chair is prepared to request a six-month extension – June 30, 2022 to December 30, 2022 – to make up for lost time resulting from late appointments and also ensure the work is made complete.

## **FBI Presentation Request**

Chairman Washington made mention of previous requests for the FBI to return and present again, particularly as some members of the Commission had not been appointed by the first presentation on August 4. The group agreed that Mr. Washington should make this request.

## Discussion about the virtual meeting policy and member participation

Staff from the OIG passed out a document related to the permissibility of attending Commission meetings virtually and under what conditions. It was stated that the Commission can meet virtually as a whole, for presentation, etc.; however, no voting can take place. Votes can only take place in-person. The ability for an individual to participate virtually during an in-person meeting is allowable, but only during certain and specific circumstances.

The Commission adopted the virtual meeting policy.

## **Public Comment**

Chairman Washington opened the meeting up to public comment.

## Choose next meeting date and location

The next Commission meeting is scheduled for 10:00a.m. to 1:00p.m. on Tuesday, November 23, 2021. Location to be determined.

## Adjourned

## Virginia Beach Mass Shooting Commission Electronic Participation Policy

It is the policy of the Virginia Beach Mass Shooting Commission that individual Commission members may participate in meetings of the Commission or other committees of the Commission by electronic means, as permitted by Virginia Code § 2.2- 3708.2(A)(1), when such members are unable to attend the meeting due to a temporary or permanent disability or medical condition that prevents physical attendance, or due to a personal matter identified with specificity. This policy shall apply to the entire membership and without regard to the identity of the member requesting remote participation or the matters that will be considered or voted on at the meeting. Whenever an individual member wishes to participate from a remote location due to a temporary or permanent disability, medical condition, or personal matter, the law requires a quorum of Commission or committee members to be physically assembled at the primary or central meeting location, and there must be arrangements for the voice of the remote participant to be heard by all persons at the primary or central meeting location. When an individual member wishes to participate from a remote location in accordance with this policy, the reason that the member is unable to attend the meeting and the remote location from which the member participates must be recorded in the meeting minutes, and if the participation is approved due to a personal matter, the specific nature of the specific matter cited by the member must also be recorded in the minutes. When such individual participation is due to a personal matter, such participation is limited by law to two meetings each calendar year or 25 percent of the meetings held per calendar year rounded up to the next whole number, whichever is greater. Individual participation from a remote location shall be approved unless such participation would violate this policy or the provisions of the Virginia Freedom of Information Act. If a member's participation from a remote location is challenged, then Commission members or the committee that is meeting shall vote whether to allow such participation. If Commission or committee members vote to disapprove of the member's participation because such participation would violate this policy, such disapproval shall be recorded in the minutes with specificity.

## Policy Background

The Virginia Freedom of Information Act (FOIA) allows state public bodies to hold electronic meetings using audio or audio/visual means in certain circumstances. Section 2.2-3708.2(D) of the Code of Virginia sets forth the procedures and requirements that a state public body must follow to conduct a meeting through electronic communication means. Section 2.2- 3708.2(A)(1) outlines limited circumstances under which individual Commission members may have additional flexibility to participate in meetings using electronic means provided that the Commission adopts a written policy consistent with those provisions. This policy has been developed to conform to the requirements of Va. Code §2.2-3708.2(A)(1).

According to the 2020 Virginia Acts of Assembly Chapter 1289 – Budget Bill – Item 27.20, the Commission to Investigate the May 31, 2019, Virginia Beach Mass Shooting is established as an independent commission. The purpose of the Commission is to conduct an independent, thorough, <u>objective</u> incident review of the May 31, 2019, tragedy and make recommendations regarding improvements that can be made in the Commonwealth's laws, policies, procedures, systems, and institutions, as well as those of other governmental agencies and private providers.

The Commission shall: (i) investigate the underlying motive for the May 31, 2019, Virginia Beach mass shooting; (ii) investigate the gunman's personal background and entire prior employment history with the City of Virginia Beach and his interactions with coworkers and supervisors, including but not limited to formal documentation and informal incidents; (iii) determine how the gunman was able to carry out his actions; (iv) identify any obstacles confronted by first responders; (v) identify and examine the security procedures and protocols in place immediately prior to the mass shooting; (vi) examine the post-shooting communications between law enforcement and the families of the victims; (vii) assess such other matters as it deems necessary to gain a comprehensive understanding of the tragic events of May 31, 2019, and (viii) develop recommendations regarding improvements that can be made in the Commonwealth's laws, policies, procedures, systems, and institutions, as well as those of other government agencies and private providers, to minimize the risk of a tragedy of this nature from ever occurring again in the Commonwealth.

This Commission has similarities to another which was in place in 2007 following the **Virginia Tech Mass Shooting**. While that incident occurred in an educational setting and the gunman exhibited signs if mental health problems, many of the findings are consistent and research useful. Unfortunately, this may suggest not all lessons have been learned nearly 15 years later; nonetheless, some of their findings are interspersed to further validate some of the efforts currently underway now in 2021.

Comments to the Commission offered by the families and loved ones, either verbally or in writing, are included where appropriate.

Some of my thoughts, comments, requests, recommendations are in red.

To borrow the phrase from the 9/11 Commission Report, moving forward there should not be a "Failure of Imagination" with these types of incidents. They have occurred too many times and too frequently to not have a comprehensive strategy. That's not to suggest all attacks can be prevented; rather, our responses to them should be thorough and complete.

## (i) investigate the underlying motive for the May 31, 2019, Virginia Beach mass shooting;

Since the establishment of the Commission, an assessment on the gunman's motive was provided by the FBI's Behavioral Analysis Unit (BAU) in their June 9, 2021 briefing document in which they identify

"perceived workplace grievances, which he fixated on for years", but "that no individual or group was in a position to see the confluence of behaviors that may have forewarned the attack." This was also mentioned in the Hillard Heintze full report (p. 18).

Pubic Comment: Hiring process of Engineer 4... there was a supposed correlation between those on the interview panel and those targeted (plus others with whom gunman had grievances).

Recommendation: FBI present their findings again to the Commission as well as to the 5/31 Virginia Beach Building 2 Stronger Together Peer Group.

## (ii) investigate the gunman's personal background and entire prior employment history with the City of Virginia Beach and his interactions with coworkers and supervisors, including but not limited to formal documentation and informal incidents;

No criminal history (full report, p. 38+), nor is a background check required for the gunman's position (p. 123).

HH Full Report, p. 43: "The subject made inappropriate remarks to coworkers, both verbally and in writing. Additionally, his supervisor cited him for occasionally demonstrating insubordination regarding specific instructions from management."

Gunman voiced concern that he was being assigned work above his ability level. (Job performance issues, Full Report, p. 43) ... \$3,027.48 issue mentioned on Full Report, p. 46...

- I THINK I heard members of the Commission asking why his leadership told the gunman not to worry about the \$3,027.48 and that it will work out. Some could see this as a \$3,027.48 "training" incident that with coaching and documented counseling, there would be confidence it wouldn't happen again. Not sure this is the case, just thinking out loud.

He submitted 2-week resignation; was not fired (and thus no need to solicit a security presence).

The August 25, 2021 letter submitted by the 5/31 Virginia Beach Building 2 Stronger Together Peer Group suggests a level of toxicity in the workplace that they believe may be been a contributing factor. These claims were shared verbally during the meeting for public comment to the Commission held in Virginia Beach on September 9, 2021. Some expressed concern the toxic environment remains and another shooting incident could happen.

## Can a locality be liable for a toxic work environment?

## https://www.eeoc.gov/harassment - Was there harassment by a supervisor?

"If the supervisor's *harassment* results in a hostile work environment, the employer can avoid liability only if it can prove that: 1) it reasonably tried to prevent and promptly correct the harassing behavior; and 2) the employee unreasonably failed to take advantage of any preventive or corrective opportunities provided by the employer.

Public Comment: One speaker mentioned the gunman had been accused of sexual harassment.

Public Comment: Question whether there was a communicated threat / concern of violence in VB "days before the tragedy?" "Flags were there but not addressed."

## - But were they visible at the time? Actionable?

Request for Information: What was the relationship between the gunman and the victims? (see HH full report, p. 61-63).

## (iii) determine how the gunman was able to carry out his actions;

An insider threat, the military-trained gunman had both access throughout the building in which he worked and could otherwise bypass protective security measures.

## (iv) identify any obstacles confronted by first responders;

See HH full report, pg. 72+

For the sake of clarity and appropriate recognition, the first of the first responders on scene were those who worked in the building of the attack and engaged with the gunman.

P. 28 – SWAT response to the building within 10 minutes of initial 9-1-1 call is very quick. SWAT will never be first on scene; rather, the nearest units will be.. This latter comment is emphasized in the VT report on page 18.

Tactically, law enforcement experienced key card access issues. (Full Report, p. 26).

Gap in notification process to VBPD: "VBPD does not use an internal, structured notification or preprogrammed response and tasking protocol for critical events. Key operational personnel who responded to the attack indicated they learned of the event through various informal communication channels, including social media and phone calls." (HH Full report, p. 70).

## Public Comment: Not a hinderance to the response, but there were questions as to why the responders did not have functioning body cams.

Another gap in the response efforts had to do with those affected by the incident and needing to get home. This is not a first responder role; however, the accommodation to assist these individuals in reaching their loved ones (see page 88 of HH full report) and otherwise coordinating transportation home (since vehicles remained within a crime scene) should be in the overall active threat plan.

Recommendation: Active Threat plans to include the need to assist individuals reach their loved ones with a safe and well message and help coordinate transportation home. This should be the responsibility of the impacted facility / organization.

Recommendation: Leverage the City's current alert / notification system (Rave 911 according to HH Full Report, p. 118) for internal notifications, including the ability for departments – especially VBPD – to send necessary notifications and updates during a no-notice incident. This may also assist in preventing officers from self-dispatching. For VBPD specifically, update VBPD General Order 11.02, First Responder

Notifications (see HH Full Report, p. 71) accordingly. Or is this still an issue for response agencies who are using E Staff 911, P Staff 911, and F Staff 911 (HH Full Report, p. 118).

## (v) identify and examine the security procedures and protocols in place immediately prior to the mass shooting;

Security measures are detailed in full on p. 26-27 of the Hillard Heintze Full Report.

Public Comment: "Need to prevent this from happening again."

Recommendation: Work with the region's Department of Homeland Security Protective Security Advisor (PSA) to conduct a threat analysis (in line with HH Full Report, p. 147); however, there must be an understanding that 1.) it will take time to do every City building, 2.) the ability of localities throughout the Commonwealth to invest and implement various protective measures will be based on available resources, and 3.) while not comfortable to discuss, there must be a cost / benefit discussion involved – every locality is constrained with limited funding and competing priorities. **The VT report states "Security requirements vary across universities, and each must do its own threat assessment to** *determine what security measures are appropriate.*" I interpret "appropriate" as meaning that which provides the greatest degree of protection based on available resources.

## (vi) examine the post-shooting communications between law enforcement and the families of the victims;

These issues were addressed in the Hillard Heintze Executive Summary Report, Item 3.5: Next-of-Kin Notification and Supervisor Training as well as 3.6: Case Management (p. 33). The victim identification and next-of-kin notification responsibilities is mentioned on page 98-99 of the HH Full Report. To be clear, in Virginia the Office of the Chief Medical Examiner (OCME) assumes jurisdiction over all the fatalities based upon the Code of Virginia § 32.1-277 to 32.1-288. OCME informs local law enforcement, and only local law enforcement communicates with the next of kin the names of the deceased.

Processes prolonged the ability to verify the identity of the victims. (p. 99). VBPD began formal notifications at 9:00 p.m. (p. 102), approximately 5 hours after the initial 911 call received at 4:06:32.

The frustration surrounding the next-of-kin death notification was highlighted and explained in the VT report (p. 124) where the first notification occurred 16 hours after OCME first became aware of the incident. The issue has to do with "forensic identification of the victims as opposed to presumptive identifications. Forensic identifications use methods such as fingerprinting, dental records, DNA matches, or other scientific means for identification. Presumptive identification includes photographs, driver's licenses and visual recognition by family or friends." (p. 129).

Role of the OCME during the VT incident is described in the VT report, Chapter 10: Office of the Chief Medical Examiner (p. 123+). I am under the impression through numerous trainings and exercises many of the Recommendations detailed on page 132 of the VT report have been addressed and proved more successful during the VB incident.

Honor Guards / Family Liaisons: HH Full report, p. 106. The use of family liaisons deployed at VT, the pros and cons, are outlined in their report, p. 136+

Notification Management at the Family Reunification Center detailed in HH full report, starting on page 101.

Public Comment: One family member was notified by VBPD at 12am, after he was notified by national news on his cell phone.

Public Comment: Next-of-kin residing in another state was unable to get information until notified by her local police department around 2:30am. (HH Full Report, page 102, states this notification occurred at 1:00 a.m.).

VT Report Recommendation XI-7: "Law enforcement agencies should ensure that they have a victim services section or identified individuals trained and skilled to respond directly and immediately to the needs of victims of crime from within the department." (p. 147)

Request for Information: Commission should get clarity as to the VDH/OCME standard for identifications during an active shooter incident – forensic or presumptive – with the understanding of the pain and trauma being felt by the families and loved ones.

Recommendation: Ensure plan meets the NFPA 3000 (PS): Standard for an Active Shooter / Hostile Event Response (ASHER) Program (2018), Chapter 20 – Recovery.

- 20.2.2.8\* Death notifications shall be coordinated and implemented as early as practical by qualified individuals or teams who are familiar with laws regarding the protection of personal identifiable information.
- 20.2.2.8.1 Death notifications shall be coordinated with the law enforcement agency having jurisdiction and the medical examiner.
- 20.2.2.8.2 Entities other than law enforcement, the medical examiner, and other trained entities shall not release death notification.

# (vii) assess such other matters as it deems necessary to gain a comprehensive understanding of the tragic events of May 31, 2019,

## Incident Investigation

General investigation details provided on page 98 of the HH full report.

The Peer Group letter suggests the size of the incident and the direct involvement of the Virginia Beach Police Department should have precluded the VBPD from investigating the incident.

I would just mention most all public safety agencies conduct an immediate "hot wash" after an incident to identify actions which worked well and where improvements could be made which then leads to an after-action discussion and report. This is commonplace.

Request for Information: Is there an after action report the Commission could review (more than VBPD's Investigation Report)?

There were also concerns expressed during the September 9, 2021 Public Input Meeting that some witnesses had not been interviewed by law enforcement, VBPD or FBI. One individual claimed city personnel were not permitted to speak about their jobs or the incident.

The Commission should be aware of Public Law 112 - 265 - Investigative Assistance for Violent Crimes Act of 2012: At the request of an appropriate law enforcement official of a State or political subdivision, the Attorney General may assist in the investigation of violent acts and shootings occurring in a place of public use and in the investigation of mass killings and attempted mass killings. Any assistance provided under this subparagraph shall be presumed to be within the scope of Federal office or employment.

#### Concerns about HR position in the department(s)

Described on Page 119+ of HH Full Report... "The majority of employee engagement is decentralized, including all performance improvement plans and discipline decisions that result in up to 40 hours of time off." HH adds that "Staff within the various departments are tasked with HR-related duties, but most are not trained in HR and most perform other duties."

Public Comment: the department HR liaison was a 'stop all' position; HR unaware of what was going on with the gunman.

Human Resources departments will differ according to the size, resources, and leadership preference of a locality. After speaking with HR professionals, there does not seem to be an industry standard for how a Human Resources department is organized or performs their functions so long as they ensure compliance with all legal mandates. Of course, personnel fulfilling the roles of an HR representative should have the necessary training (including how to meet with difficult employees – HH Full Report, p. 148). Without the proper and effective training, issues could unnecessarily escalate.

Recommendation: Staff serving in the role of an HR representative should be trained on the competencies of the position to ensure the proper level of service for all employees. To operate otherwise could open the city to liability.

## Civil Liberty / Privacy Protections

Hillard Heintze report suggests managers and supervisors should be trained on how to identify early warning behaviors and that the City HR department needs to work with supervisors and managers to manage difficult employees and situations quickly and proactively. (Exec. Summary, p. 14).

The Hillard Heintze Executive Summary Report (p. 31) states the subject had no known history of mental health care or treatment? In such a case, what interventions could have occurred without infringing on the gunman's civil liberties?

The HH Full Report, p. 137+ discusses guidance which should be considered when developing a policy on recognizing and reporting issues regarding concerning workplace behaviors. Incidentally, they reference work / findings / outcomes from the 2007 Virginia Tech Review Panel.

This issue Information Privacy Laws made up Chapter 5 of the VT report (p. 63-70).

Recommendation: Commission should review the **2007 Virginia Tech Review Panel Report:** <u>https://scholar.lib.vt.edu/prevail/docs/VTReviewPanelReport.pdf</u>, especially Chapter 5, it's discussion related to HIPAA, and follow up on its Key Findings and Recommendations related to the disclosure of information (Recommendations IV-21 and IV-22, p. 61; V-1, V-2, p. 68).

Recommendation: State should establish and deliver training on the law related to recognizing and reporting issues regarding concerning workplace behaviors. This is necessary to ensure consistency among all local Human Resources departments.

## Logistical Issues for those impacted by the incident

Hillard Heintze report suggests... vehicles inaccessible...- crime scene. Not so much the job of a first responder... other capabilities are needed and should be incorporated into the plan.

## Firearms in public buildings

Bottom line: the public can possess firearms in local government buildings, but local government employees cannot. Of course, this was a non-factor since the gunman was an employee.

Per HH Full Report, p. 146, "**The City** has a zero-tolerance policy that prohibits individuals from possessing, brandishing or using any weapon while (a) working; (b) acting as a representative of the City; (c) in a City-insured vehicle; and/or (d) on City property. Incidentally, Virginia Code permits a local government employees to store at that locality's workplace a lawfully possessed firearm and ammunition in a locked private motor vehicle (§ 15.2-915).

The General Assembly now made the ability to permit or prohibit firearms in local government buildings a local option:

Approved April 22, 2020 - Be it enacted by the General Assembly of Virginia: § 15.2-915. Control of firearms; applicability to authorities and local governmental agencies.

E. Notwithstanding the provisions of this section, *a locality may adopt an ordinance that prohibits the possession, carrying, or transportation of any firearms, ammunition, or components or combination thereof (i) in any building, or part thereof, owned or used by such locality, or by any authority or local governmental entity created or controlled by the locality, for governmental purposes;* (ii) in any public park owned or operated by the locality, or by any authority or local governmental entity created or controlled or community center facility operated by the locality, or by any authority or local governmental entity created or controlled by the locality; (iii) in any recreation or community center facility operated by the locality, or by any authority or local governmental entity created or controlled by the locality; or (iv) in any public street, road, alley, or sidewalk or public right-of-way or any other place of whatever nature that is open to the public and is being used by or is adjacent to a permitted event or an event that would otherwise require a permit. In buildings that are not owned by a locality, or by any authority or local governmental entity created or controlled by the locality, is by any authority or local governmental entity created or controlled by the locality, or by any authority or local governmental entity created or a permit. In buildings that are not owned by a locality, or by any authority or local governmental entity created or controlled by the locality, such ordinance shall apply only to the part of the building that is being used for a governmental purpose and when such building, or part thereof, is being used for a governmental purpose.

Any such ordinance may include security measures that are designed to reasonably prevent the unauthorized access of such buildings, parks, recreation or community center facilities, or public streets, roads, alleys, or sidewalks or public rights-of-way or any other place of whatever nature that is open to the public and is being used by or is adjacent to a permitted event or an event that would otherwise require a permit by a person with any firearms, ammunition, or components or combination thereof, such as the use of metal detectors and increased use of security personnel.

F. Notice of any ordinance adopted pursuant to subsection E shall be posted (i) at all entrances of any building, or part thereof, owned or used by the locality, or by any authority or local governmental entity created or controlled by the locality, for governmental purposes; (ii) at all entrances of any public park owned or operated by the locality, or by any authority or local governmental entity created or controlled by the locality; (iii) at all entrances of any recreation or community center facilities operated by the locality, or by any authority or local governmental entity created or controlled by the locality; (iii) at all entrances of any recreation or community center facilities operated by the locality, or by any authority or local governmental entity created or controlled by the locality; and (iv) at all entrances or other appropriate places of ingress and egress to any public street, road, alley, or sidewalk or public right-of-way or any other place of whatever nature that is open to the public and is being used by or is adjacent to a permitted event or an event that would otherwise require a permit.

## Each locality will need to decide what is best for their local ordinance.

## Emergency Operations Plans (Family Assistance / Reunification Center / Community Resilience Center)

The Family Reunification Center process was outlined beginning on page 99 of the HH full report.

The VT report discussed "Family Treatment" beginning on page 129. Incidentally, many of the frustrations being expressed to the Commission are similar to those shared on page 130 of the VT report.

## Details of VT's Family Assistance Center, including family concerns, is provided in their report, p. 139-147.

Recommendation: Ensure local plans meet the minimum NFPA 3000 (PS): Standard for an Active Shooter / Hostile Event Response (ASHER) Program (2018).

- 3.3.30 Family Assistance Center: "A physical and/or virtual center where victims and family members can seek referrals to FEMA and local services for mental health counseling, healthcare, an childcare; legal, travel, creditor, employee, and financial planning assistance; and information or insurance benefits, IRS and tax policies, social security and disability and so forth." (p. 3000-8).
- 3.3.43 Notification and Reunification Center: "A secure facility in a centralized location that provides information about missing or unaccounted-for persons and the deceased and that helps reunite victims with their loved ones. Notification / reunification centers also help displaced disaster survivors, including children, to re-establish contact with their family and friends after a period of separation." (p. 3000-9)

Resources:

 U.S. Department of Justice: Mass Fatality Incident Family Assistance Operations <u>https://www.ntsb.gov/tda/TDADocuments/Mass%20Fatality%20Incident%20Fa</u> <u>mily%20Assistance%20Operations.pdf</u>

Maybe consider changing the name of "Family Assistance Center" to something else. Many employees were unaware of the resources available to them as victims believing the FAC was for family members only.

Employee Services / VB Strong Center, HH Full Report, p. 107.

The VB Strong Center (VBSC) is a partnership between the City of Virginia Beach and Sentara Healthcare. The primary function is to provide resources, support, education, and connection to community partners critically needed in the response to the tragic events of 5-31-2019. The VBSC focuses on a trauma-informed approach to empowering and uplifting everyone in their journey to healing and resiliency.

The VBSC is a grant funded resiliency center that offers case management services and other programs at no-cost as a "starting point" for the journey of healing to those directly impacted by the 5/31 shooting. Our team includes masters prepared and licensed mental health professionals that have the knowledge, experience, and ability to respond to the effects of mass trauma. https://thevbstrongcenter.org/about/

Accusations made during September 9 Public Comment meeting that individuals were NOT receiving the resources needed or requested.

VT report provides FAC recommendations: Recommendation XI-3, XI-4 XI-5, p. 146-147.

VT report provides long-term recovery recommendations: Recommendation XI-5, p. 147.

Recommendation: Ensure local plans meet the minimum NFPA 3000 (PS): Standard for an Active Shooter / Hostile Event Response (ASHER) Program (2018), 20.3.2 Resource Needs Analysis.

- 20.3.2.2.1 This analysis should include real and potential mental health and emotional needs of first responders, victims, families of victims, bystanders and witnesses, community members, businesses, and the general public.
- 20.3.2.2.2 This analysis shall focus on short-term consequences of the events until medium- and long-term consequences analysis can be conducted.

More in 20.4 Continued Recovery

- 20.4.2 Victim Assistance. Continued victim assistance shall provide for ongoing assessment and services for victims and their families, first responders, and community members.
- 20.4.2.2\* Organizations shall ensure that victim services liaison, receive the necessary training and support to meet the comprehensive short and long-term needs of victims and family members.
- 20.4.2.2.1 This training shall include the emotional and psychological needs by providing mental health support, counseling, screening, and treatment.

- 20.4.2.2.2 This training shall include atypical victim service providers who meet the unique needs of the population.
- o ...
- 20.4.2.5.3\* The family assistance center shall be permitted to transition to a community resilience center (CRC) that provides ongoing services and assistance to victims, family members, first responders, and community members.
- 20.4.2.5.6 The CRC shall ensure that victims receive the necessary support and services to address symptoms of secondary / vicarious trauma.

During public comments meeting, one speaker discussed an endowment which was created following the VT incident which was meant to support the long-term needs of anyone directly impacted. I could not find anything about this in the VT report.

Recommend someone from the VB Strong Center present to the Commission on what is being done, how, for whom and for how long.

Recommendation: Follow up with the 5/31 Virginia Beach Building 2 Stronger Together Peer Group to learn more about this opportunity.

## Emergency Operations Plans (Alert / Notification of incident)

The Hillard Heintze Executive Summary specifically states "The City's mass communication capabilities were not robust enough to address communication requirements on May 31, 2019." (p. 18). This appears to have been the case given the fact the Human Resources department was called upon to send emails to staff throughout the complex (p. 28) and goes into much more detail starting on page 85 and 118 in the HH full report. But this requires one piece of clarification. The **Virginia Emergency Services and Disaster Law, § 44-146.19. Powers and duties of political subdivisions**, Part G states the following:

"By July 1, 2005, all localities with a population greater than 50,000 shall establish an alert and warning plan for the dissemination of adequate and timely warning to the public in the event of an emergency or threatened disaster. The governing body of the locality, in consultation with its local emergency management organization, shall amend its local emergency operations plan that may include rules for the operation of its alert and warning system, to include sirens, Emergency Alert System (EAS), NOAA Weather Radios, or other personal notification systems, amateur radio operators, or any combination thereof."

(https://law.lis.virginia.gov/vacodepopularnames/emergency-services-and-disaster-law/)

Key verbiage is "adequate and timely warning <u>to the public</u>" and thus the City was in compliance of this legal mandate. What is more curious is the comment that "While the City has mass-notification systems in place, employee enrollment in them is voluntary and, as of the day, of the attack, enrollment was not high enough to give Emergency Communication & Citizen Services (ECCS) supervisors confidence in using this communication channel." (p. 18). The qualifier could perhaps be the version of their mass-notification system, which at the time was Everbridge. There are other localities who also operate from Everbridge with more robust capabilities to include internal communications – of course, with greater capabilities come greater costs. Nonetheless, it is also worth noting that at the time of the incident they were transitioning from Everbridge to another system (Rave 911). Interestingly, Virginia Code §23.1-803 calls higher education institutions to a higher standard requiring the ability to notify "students, faculty, and staff, both on and off campus." Moreover, Part B mandates "Each public institution of higher

education shall designate individuals authorized to activate the first warning notification and emergency broadcast system and provide such individuals with appropriate training for its use." (<u>https://law.lis.virginia.gov/vacode/title23.1/chapter8/section23.1-803/</u>).

The issue of immediate emergency notifications was also in the VT report (p, 14+, Key Finding on p. 17, and Recommendation II-7, p. 19). I believe this issue has been resolved for Virginia high education campuses (§ 23.1-803); however, localities should determine who is best equipped (and authorized) to send alerts in the most expeditious manner. Due to the number of calls being received during such a high-visibility incident, this may not always be the 911 center. (Note: In the case of VB, their ECCS is comprised of both 911 and 311).

As it relates to an industry standard and the speed by which active threat notifications are disseminated, there isn't one. Incidents like these are often over in 12-14 minutes. Additionally, it might be unfair and unrealistic to place the burden on 911 who will be engaged with a surge of calls and text messages.

Policy Recommendation: Include requirement of internal staff notifications as well to locality requirement rather than just public (or define 'public' as anyone affected by incident).

Recommendation: Consider investment in an alert / notification system Panic Button feature. (instead of fire alarm as mentioned on page 88 of the HH full report). Panic alerts should be programmed to on-call personnel with the knowledge, skills and abilities to send immediate alerts to the appropriate audiences.

Policy Recommendation: Training, access and testing of WEA capability. The <u>Wireless Emergency Alert</u> (<u>WEA</u>) capability is a free and effective Federal tool to send alerts to geographic areas (related to location to cell towers). There are a variety of specific threats for which the tool is authorized for use; one is "Imminent Threat Alerts" which includes natural or human-made disasters, extreme weather, active shooters, and other threatening emergencies that are current or emerging. One benefit of this tool is that subscriptions are irrelevant unless the end user specifically opts out. Additionally, alerts may be given a time period. This means if someone enters the area *after* the alert had been sent, but within the expiration of the period defined (say, an hour or so), the message would still be received upon entry of that defined perimeter / geographic area. The challenge of citizens continuing to arriving on scene was detailed on page 93 of the HH full report.

Potential downside of WEA, as with any alert/notification system, is that the shooter 1.) may also be the recipient of the messages, but more importantly, the ring tones and vibrations may give away the position of someone trying to hide.

See HH Recommendation in Full Report, p. 76, Item 2.6.

Recommend local Crisis Communications Plans meet the minimum standards of NFPA 3000 (PS): Standard for an Active Shooter / Hostile Event Response (ASHER) Program (2018):

- o 17.3 Warning, Notification, and Crisis Communications:
  - 17.3.1 Organizations shall evaluate and plan for people who are not regularly on mass notification systems or who don't have access to mass notification devices / conduits or vulnerable populations.
  - 17.3.2 Organizations shall develop pre-scripted mass warning messaging that displays preparedness measures and protective actions.

- 17.3.2.1 Pre-scripted mass warning messaging shall include the following:
  - 1. Who is sending the alert?
  - 2. What is happening?
  - 3. Who is affected?
  - 4. \*\*\*What action should be taken? [NEEDS MORE DISCUSSION]
  - 5. Time and date stamp.
- 17.3.3 Organizations shall develop plans with the ability to communicate internally and externally.

\*\*\* Important: The sender may not know which protective action the recipient(s) should take – whether they should run, hide, or fight. Every individual will be in a different situation; perhaps the message should be to fall back on your training? This was also mentioned in the VT report, Recommendation VIII-2, p. 99).

(viii) develop recommendations regarding improvements that can be made in the Commonwealth's laws, policies, procedures, systems, and institutions, as well as those of other government agencies and private providers, to minimize the risk of a tragedy of this nature from ever occurring again in the Commonwealth.

Physical and Technical Security Measures in Building 2 – See HH Full Report, p. 113+

Make mention of the City of Virginia Beach's responses and commitments to recommendations / improvements starting on page 10 of their May 3, 2020 report to City Council entitled "Response to Independent Investigation Report."

Overall, the HH report recommend strategies – particularly personnel issues - which are helpful in general, and some physical protective measures much more costly – many of which would not have made a difference preventing the May 31, 2019 incident, particularly since the shooter was an insider with access / credentials.

One items of note: obviously the size of the agency and how they're resourced will determine their ability to act on these recommendations. While every agency would like to take every precaution to prevent this threat, each City or agency must determine to what level or protection their public facilities should be and at what cost.

Provide recommendations below that are OTHER THAN the recommendations in the HH report?

## Low-Cost Investment

- Building a culture of workplace safety
- Localities should update their active threat plans and Family Reunification / Family Assistance Center Functional Annexes.
  - Leverage state templates
  - $\circ$  ~ Include lessons learned from VT and VB incident.
- Training and exercises (Active threat, stop the bleed, ...)

- Include as part of VDEM regional T&EPW, 4-5 year training and exercise program.
- Annual training was also a recommendation in the VT report. (II-4, p. 19)
- Training in crisis management was a recommendation in the VT report (XI-6, p. 147).
- Policy Recommendation: Include requirement of internal staff notifications as well to locality emergency alert requirement rather than just public (or define 'public' as anyone affected by incident.
- Policy Recommendation: emergency alert Training, access and testing of WEA capability.
- Ensure HR investigation, evaluation, disciplinary protocols are in line with state and Federal standards.
- Reminder of locality's Employee Relations Program (rather than creating a new "Public Advocate's Office" as recommended in HH full report, p. 22).
- Do not reinvent the wheel; there are individuals who were directly impacted by other incidents in Virginia willing to share their experiences and ideas. (This may be happening?).

## Modest Investment

- Behavioral Threat Assessment Team (recommendation 4.3) good idea... p. 39 also HH Full Report, p. 152+... which also mentions CA and HR... protection of the individual's civil liberties and patient protections... + plus info sharing plans w/ public safety? (Recommendation 4.33, p. 41). Path forward may be provided by the VT report (Recommendation II-3, p. 19) and the Team should also include law enforcement Recommendation II-9, p. 19)
- Recommendation related to establishing a centralized database of all performance and workplace issues (Full report, p. 22 and 157). Managing personally identifiable information (PII) appropriately, managing who has access, etc... Would this info be routinely accessed and discussed among a Threat Assessment Team? Or just serve as crumbs which later, in hindsight, make sense after an incident?
- NFPA 3000(PS): A.9.3.7 Facilities should implement a public access bleeding control kit program that addresses all of the preventable causes of death from bleeding.

## **Major Investment**

Panic Button feature for \$\$\$. (Click Here)

#### Other accusations, concerns, complaints

Public Comment: Accusation that then-City Manager Dave Hansen said "there was nothing wrong" with gunman.

Public Comment: Accusations that computer / network files were removed / missing from the building; not accessible to FBI and their investigation.

Public Comment: Accusations of corrupt economic develop decisions... projects being planned / illegally funded by city.

Public Comment: Complaint about incident memorial decisions.

Public Comment: City more concerned about the image of the City than long-term recovery efforts.

Public Comment: City is negligent with Public Safety

Public Comment: Claim that Sentara Norfolk General IS a Level-1 Trauma Center and CHKD is a pediatric Level-1 Trauma Center. THIS IS FALSE. Both are Level-1 certified (confirmed Monday, Sept. 13, 2021).

Public Comment: Could have called the National Guard to help. This is not necessarily true, at least for immediate response. Even if the Governor immediately declared a state of emergency authorizing the Guard's deployment, they would need to be notified, given time to muster and receive mission assignment, time to travel to a local point of contact. If the idea is that the Guard assist with the Family Reunification Center, the law mandates <u>local law enforcement</u> be the agency to make official next of kin notifications.

Public Comment: When was the last staff satisfaction survey? Recommendation of a "Unit Climate Assessment." Hillard Heintze contracted People Element to conduct a confidential workplace survey to better understand City of Virginia Beach employee perceptions. This report, published October 21, 2019, focused on the following categories:

- Values & Ethics
- Leadership
- Communication
- Training & Development
- Recognition
- Work Environment

The overall mean score on a 1 (lowest) to 5 (highest) scale was 3.6.

Public Comment: Must change the culture.



## October 15, 2021

## City of Virginia Beach Responses to Questions from the Commonwealth of Virginia Commission on the May 31, 2019, Virginia Beach Mass Shooting

1. The City's response to the Hillard-Heintze report noted it had put many of the report's recommended items into the City's budget (pages 11-21). A letter received by the Commission asserted that some or all of those items were removed from the budget due to the COVID-19 pandemic. Is that the case, and if so have those items been put back into the budget?

The original FY 2020-21 city manager's proposed budget was presented to City Council in late March 2020. It included several initiatives and recommendations from the Hillard Heintze report. Shortly thereafter, the reality of the COVID-19 pandemic set in and, given the uncertainty of how it would affect City revenues, the proposed budget was amended to reflect over \$67 million in anticipated revenue losses. To accommodate the loss of that much revenue, all new initiatives, including those recommended by Hillard Heintze, were cut, current services were reduced, and some positions were eliminated. However, because City Council believes the recovery efforts associated with 5/31 are critical, it restored some of those original reductions with offsets elsewhere within the FY 2020-21 operating budget.

The current FY 2021-22 operating budget Council was approved in May of 2021 and took effect July 1, 2021. It has funded other recommendations from the Hillard Heintze report. The following table summarizes the allocations to date:

	Original City Manager FY 21 Proposed	FY 21 Adopted Operating Budget/CIP	FY 22 Adopted Operating Budget/CIP
CIP 100047 Facility Access Systems	\$300,000	\$0	\$300,000
CIP 100392 City Security and Safety Enhancements	\$2,220,585	\$0	\$2,977,837
Security Office	\$1,000,000 (4 FTEs)	\$64,504 (1 FTE)	\$64,504 (1 FTE)
Emergency Training	\$200,000	\$0	Incorporated into CIP100392
Public Safety Building Access	\$150,000	\$0	Incorporated into CIP100392
Employee Training	\$200,000	\$0	Incorporated into CIP100392
HR Staffing	\$1,490,147 (15 FTEs)	\$397,373 (4 FTEs)	* \$1,001,824 (10 total FTEs w/6 added this yr)

\* Phasing in positions

Although the pandemic has slowed implementation of the original plan, these initiatives remain priorities for the City and with the recent hiring of a Security Manager we have been assessing the original plan and exploring alternatives for accomplishing the work. For example, the original placeholder for outsourced training might not be a resource that requires additional funding in the future as City staff has and continues to develop internal training programs. Other options being explored are places where contracted services can be acquired to accomplish the work in lieu of added FTEs. Additional resources are dedicated to recovery initiatives, including mental health services and planning for the 5/31 memorial.

More information is available on pages 29-30 of the FY 22 Adopted Budget Executive Summary: <u>https://www.vbgov.com/government/departments/budget-office-management-services/budget-archives/Documents/fy22-budget/FY2021-22-Adopted-Budget-ES-WEB.pdf</u>

2. A letter received by the Commission asserted that each member of the interview panel for a newly created position in the assailant's department were killed. The Hillard Heintze report noted this was a "significant rumor" and "no nexus was identified between this role and the subject, as he had not formally sought a promotion" (page 62) however it also noted that an "individual close to him [the assailant] reported that he was frustrated about management passing him over for a promotion" (page 53). Was the entire interview panel, in fact, killed?

No.

Neither Hillard Heintze's investigation nor City records can corroborate these rumors. At the request of his supervisor, the shooter was career-progressed from an Engineer II to an Engineer III in 2011. Career progressions do not require employee applications. There are no records of the shooter submitting applications for any lateral or promotion opportunities in the City organization. The Virginia Beach Police have talked with interviewees involved in relevant hiring processes and each confirmed they either did not know the shooter or did not have any conversations with him involving promotion opportunities. As a result, we do not know whether someone shared with the shooter that they were frustrated about being passed over for promotion or who that might have been and no evidence that substantiates this rumor.

3. Regarding the \$3,027.48 procurement issue in the days leading up to the shooting, the Hillard-Heintze report notes "A supervisor tasked a coworker assigned to Public Utilities Contracts to inform the subject that his actions in this matter were in violation of the law and his employment was subject to termination. This coworker stated that he did not tell the subject this, but rather sent an email to the subject explaining that he needed to provide full documentation..." and in response to a negative voice mail the subject received regarding the issue "the unit management team minimized the issue and told the subject they would handle it on his behalf" (pages 47-48). Given the apparent seriousness of this issue, does the City have any information as to why his supervisor did not address this with him directly, why the coworker assigned to address it did so in an indirect fashion, and why the unit management team took such an apparently supportive role? Was it standard operating procedure to offer such support to employees in such matters or did the assailant's supervisor and coworkers treat this situation outside of the standard operating procedure?

The issue was addressed by several people, including his supervisor. We believe the coworker referenced here worked in the Business Office of Public Utilities, with responsibility for contracting issues, so it is appropriate for that person to be tasked with addressing this issue with the employee. The City takes very seriously its financial obligations and has controls in place to minimize errors. This error was caught, acknowledged, and addressed with the employee in a manner consistent with established policies and procedures. The unit management team assured the employee that this was not a big deal and would be rectified while also underscoring the steps the employee needed to follow to ensure it didn't happen again.

4. A letter received by the Commission asserted that, as it relates to the Public Works department, the City has stringent financial controls in place for procurement/purchasing, has Friday afternoon management meetings and some employees have multiple supervisors - all contributing to an alleged dysfunctional workplace culture. Recognizing some of these policies may be viewed differently by management than line employees, could the City address whether these policies exist and their rationale?

Having stringent financial controls in place for procurement/purchasing is a fundamental responsibility of any organization, especially governmental bodies that must be accountable for taxpayer dollars.

Given the nature of the work, it is common for an employee to be part of various project teams and therefore be accountable to more than one project manager, but each employee only has one supervisor.

We believe you meant to reference Public Utilities (not Public Works) in this question. Fridays are part of the regular work week and Public Utilities has had management team meetings on Friday mornings (not afternoons) for 30 years or more. It does not supersede employees' requests for leave, especially for those who are not even required to attend it.

Dave,

There was a carve out in the VA Commonwealth/VT and VT Family and Survivor settlement agreement that allows for 177 identified victims, including grandparents, parents, spouses, children, siblings, and injured survivors, to be reimbursed out of pocket physical or psychological care expenses, not covered by our personal insurance, by the Virginia Dept of Criminal Justice Services (DCJS), in perpetuity. This goes far beyond the limited Virginia Criminal Injuries Compensation Fund (CICF).

Important to note that taxpayer dollars are not involved in reimbursement funds.

I have a conference call with DCJS officials on 10/21 to seek their input and guidance to create such a program for the VB Victims either as a separate fund or by funding VTVCare so that we can manage the (endowment) fund.

Hope this answers your question re availability of resources for future care.

Look forward to the "where we go from here" piece. I am already anticipating the direction and align a needs-based program for VB and the victims.

Best, Joe

