

UNITED STATES OF AMERICA

NATIONAL TRANSPORTATION SAFETY BOARD

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Investigation of:

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AMTRAK TRAIN 188 DERAILMENT NEAR

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PHILADELPHIA, PENNSYLVANIA

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Docket No.: DCA-15-MR-010

MAY 12, 2015

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Interview of: JOSEPH SULLIVAN, Chief

Philadelphia Police Department

Sheraton Society Hill
Philadelphia, Pennsylvania

Sunday,
May 17, 2015

The above-captioned matter convened, pursuant to notice.

BEFORE: RONALD KAMINSKI
Survival Factors Investigator

APPEARANCES:

RONALD KAMINISKI, Survival Factors Investigator
National Transportation Safety Board

THOMAS BARTH, Ph.D., Survival Factors Investigator
National Transportation Safety Board

CHARLES WHALEN, Passenger Railroad Safety Specialist
Federal Railroad Administration

<u>ITEM</u>	<u>I N D E X</u>	<u>PAGE</u>
Interview of Joseph Sullivan:		
By Mr. Kaminski		4
By Dr. Barth		6
By Mr. Kaminski		11
By Dr. Barth		23
By Mr. Whalen		29
By Mr. Kaminski		33

I N T E R V I E W

1
2 MR. KAMINSKI: Today's date is May 17, 2015. I'm Ronald
3 Kaminski with the NTSB. We're at the Sheraton Society Hill in
4 Philadelphia. Along with me is Charles Whalen with the Federal
5 Railroad Administration; Tom Barth, another survival factors
6 investigator; and Chief Joseph Sullivan with the Philadelphia
7 Police Department. And the chief is going to give us a
8 description of what all he did and experienced and saw when he was
9 on scene, when he got called out on the Amtrak crash on Tuesday.

INTERVIEW OF JOSEPH SULLIVAN

10
11 BY MR. KAMINSKI:

12 Q. So why don't you just start out from the point where you
13 got the call and you went out.

14 A. Yeah. I was notified at home by police radio that there
15 had been a derailment with injuries. I called the Office of
16 Emergency Management, their operations room, which is adjacent to
17 our fire communications, and confirmed with them that it was
18 severe in nature; that I turn on the radio and be on a monitor our
19 East Band, which is the band that covers the geographic area where
20 the crash occurred, and J-Band, which is our command band.

21 And got into my -- I called Deputy Commissioner Neil
22 Trugman of the Amtrak Police and made him aware of the incident.
23 I got into my vehicle, continued to monitor radio. At some point
24 I heard there was concern of getting the power off, so I did call
25 Deputy Trugman back while en route and asked him to make that a

1 priority.

2 I just want to say, without the benefit of the radio
3 tapes, I can give you a good sense of what I did. I'm not sure
4 that everything is going to be in the exact order.

5 Q. That's fine.

6 A. So, at that time I was monitoring police radio. I
7 notified radio that I was en route. I'm the department's liaison
8 to the fire -- both the fire department and the Office of
9 Emergency Management. I confirmed with radio that all available
10 emergency patrol wagons were being sent to the scene since this
11 was a mass casualty incident, and that's in case that we needed
12 additional transport vehicles.

13 DR. BARTH: So that's -- you're referring to the police
14 vans?

15 MR. SULLIVAN: Yes, sir.

16 MR. KAMINSKI: Paddy wagons that everybody's calling --

17 MR. WHALEN: Yeah. Do you know how many were sent?

18 MR. SULLIVAN: You know, I really don't. I mean, I just
19 couldn't get bogged down in that detail. I just made -- gave the
20 order that any that were available to take the scene.

21 Also, the police department has medics. They have
22 medics that are trained and certified by the fire department and
23 they have, basically, life support bags that they're assigned.
24 And the purpose is for an incident just like this where EMS is the
25 purview of the fire department. But in this situation like this

1 where they're likely to need help, those officers -- so I ordered
2 radio to activate any working police medics. I don't know exactly
3 what number that was, and I gave the order that they were to
4 report to the scene and then report to Fire EMS Command.

5 BY DR. BARTH:

6 Q. When we look at the dispatch logs, will those officers
7 that are designated a medic with a BLS support equipment be -- is
8 there some way to designate which of those --

9 A. No. The reason being is that we have some police medics
10 that again are just reserved medics to be activated in the event
11 of an emergency. I had S.W.A.T. operators that night that are
12 tactical medics that responded with medical equipment. Members of
13 the Homeland Security Unit that were recalled -- that was one of
14 the next steps I took is I recalled the Homeland Security Counter
15 Terror Operations Section to the scene. Those officers, in
16 addition to their normal duties, are cross-trained with the fire
17 department, Special Operations Command, in technical rescue and
18 the majority of them are also emergency medical technicians.

19 All the police officers working that night had been
20 issued tourniquets, several hundred of them had gunshot kits,
21 which can also be used for hemorrhage control, and it doesn't have
22 to be a gunshot wound. So, the officers were calling for
23 additional tourniquets over the radio. So my officers, both in
24 S.W.A.T. and in Homeland Security, we have -- they're designed for
25 active shooter scenarios but they work in any mass casualty.

1 They're designed -- they have the basics to maintain airways, to
2 control hemorrhaging. They have pressure bandages, chest seals,
3 tourniquets and nasopharyngeal airways, just the basics. So that
4 equipment was being brought to the scene as well.

5 But the concept is, is that although they're police
6 officers, if they're acting in an EMS role that they do so under
7 the medical command of the fire department.

8 So I had -- I made sure that all S.W.A.T. was directed
9 to the scene, but I believe they had already done -- they had
10 already self-dispatched. I ordered that the midnight to 8
11 S.W.A.T. members be called into the scene. Both the Homeland
12 Security unit and the S.W.A.T. unit have a light rescue truck
13 which has many of the same tools that the fire department uses as
14 far as Hurst tools, extrication tools, hand tools. So I wanted to
15 make sure both of those vehicles were brought to the scene, so
16 that was additional equipment. And again, these units are used to
17 working with the fire department. Chief Craig Murphy, is my
18 counterpart in the fire department and he was leading the rescue
19 effort.

20 So these are the things that I was doing on the way --

21 Q. Do you happen to know the unit designations for those
22 two rescue trucks? Like, how would we ID those on the CAD System?

23 A. Sam 132 and Sam -- so the S.W.A.T. unit is, I believe,
24 it's 132. It's a Sam 100 series. So if it says S-100, in the 100
25 series and it has an S in front of it, it's S.W.A.T. If it has an

1 S in front of it and the number is in the 700 series, it's the
2 Homeland Security unit. So that will at least --

3 Q. That will help us narrow it down.

4 A. -- narrow it down, and then we can help you from there.
5 I just don't -- I got a lot of vehicles in my fleet, so --

6 Q. Yeah, yeah.

7 A. I also directed radio to give an order that no 4 to 12
8 personnel throughout the city were to report off. I was cognizant
9 of the fact that despite the scale --

10 Q. Sorry that terminology, 4 to --

11 A. I'm sorry, the 4 P -- the night shift, the 4 P to 12
12 a.m.

13 MR. WHALEN: So they wouldn't go home and the other guys
14 coming on, it would be --

15 MR. SULLIVAN: Right, right. I moved it because,
16 despite the scale of this emergency, we are a very large and a
17 very busy city, so we have to make sure that we are providing some
18 minimal level of protection throughout the city.

19 MR. WHALEN: Backfill, yeah.

20 MR. SULLIVAN: And then I directed radio also to
21 initiate a recall of all 12 to 8 personnel, call them at home and
22 tell them to start to come into work --

23 MR. WHALEN: Come in early.

24 MR. SULLIVAN: -- as quickly as possible. And
25 obviously, that's going to take some time, but --

1 Also, the Highway Patrol unit works for me. The Highway
2 Patrol unit, they don't actually patrol the highways. They patrol
3 the high crime areas of the city. But several of my Highway
4 Patrol officers are actually medics as well and they all have
5 tourniquets and they all come with supervision and they're all
6 trained to back up my other units. All of my units are cross-
7 trained. All of my units are taught to back one another up.

8 So in this particular incident, Homeland Security would
9 have been the lead unit in terms of assisting the fire department
10 with tactical rescue. So they would take the responsibility of
11 telling my other units how they could best fall into that, if at
12 all. But I wanted to begin to set up that ready man power pool
13 that the fire department could draw upon. And we've already
14 worked all this out in advance, in terms of the fire department
15 gives us our medical training to make sure that we follow the same
16 medical protocols the fire department follows We come under the
17 same -- Dr. Meacham, the same medical director that the fire
18 department does. And then in terms of, to make sure that if we
19 are conducting tactical rescues, that we're doing it appropriately
20 and consistent with the fire department, we also get our training
21 from Philadelphia Fire Department Special Operations Command. So
22 they're aware of the equipment that we have, they've given us our
23 training, and they already know our officers. So we're not just
24 meeting at the scene of the emergency.

25 So that takes a little while to put together.

1 At this point, I arrived at the scene. I actually, I
2 did not approach from Wheatsheaf, I approached from the east when
3 I first -- there was some confusion initially because the accident
4 wasn't readily visible from the street. So I approached from the
5 east. I got an assessment at the scene. I located the ranking
6 fire department official; it was a battalion chief. In all the
7 excitement I don't remember the name. I conferred from the chief,
8 yeah; I asked him what he needed. He said right at that
9 particular point in time he needed stretcher bearers.

10 We did have plenty of police officers there. He did ask
11 me to move them back a little bit. I moved them back and then I
12 broke them up into working groups under supervision and I verbally
13 explained to the officers, this is what the fire department needs,
14 this is the priority. Right now, just stand by; stay where you
15 are; if the fire department calls you up, take a stretcher.

16 Now, as I had said before, the other issue the chief
17 made me aware of is there was a lot of -- we were having trouble
18 getting concrete information as to whether the power was on,
19 whether the power was off. There was some conflicting information
20 about that. At that point we were crossing the tracks right onto
21 Wheatsheaf Lane. That was the most expeditious route to take the
22 injured. It was difficult terrain, so carrying backboards and
23 stretchers was difficult. Just walking on that is difficult, as
24 I'm sure you guys know better than me.

25 UNIDENTIFIED SPEAKER: Right. Yeah.

1 MR. SULLIVAN: At some point the decision was to stop
2 crossing the tracks at Wheatsheaf due to concerns about the power
3 and to go in a southerly direction, and I just don't remember that
4 street. I had -- so as I arrive on location, I conferred with the
5 chief and Inspector Ray -- his call sign is Isaac 20 -- Evers.

6 UNIDENTIFIED SPEAKER: I got it --

7 MR. SULLIVAN: Inspector Ray Evers was there from the
8 police department. I'm on the north side of the crash just near
9 the footbridge. I had the chief there with me. I had the
10 inspector there with me. Chief Inspector Small was also on
11 location but he was on the outside -- he was actually on
12 Wheatsheaf Lane -- and him and then Captain Ginaldi were dealing
13 with the perimeters. Sergeant Beebe of the 24th District had done
14 a very good job of shutting the streets down.

15 BY MR. KAMINSKI:

16 Q. He was one of the first ones on the scene, is that
17 right?

18 A. Yes, yes, yes. He was doing -- it all fell to him, you
19 know, in the first several minutes and he did, I think, a very
20 good job of shutting the right streets down to create a perimeter.
21 But as you might imagine, it's a very congested area so there were
22 some issues with maintaining ingress and egress. I directed
23 Captain Ginaldi to take control of that particular responsibility.

24 I also -- one of the other problems that I had was, I
25 had some, initially I had someone from Amtrak with me at this

1 forward command post that I had established. So I had the fire
2 department, I had Inspector Evers was there from the police
3 department. I was in radio communications with Chief Small on the
4 outside, but the -- I needed someone from Amtrak to stay at that
5 location, but obviously they were quite busy and their expertise
6 was in great demand. That person kept getting pulled away.

7 The other issue was I summoned -- while en route I
8 confirmed to make sure that I had explosive detection K-9 dogs and
9 that my bomb squad was en route. These are more of the units that
10 actually work directly under my command. We make no assumptions
11 at that point that we've had an accident. I have to assume that
12 there's a possibility that this was some type of a terrorist
13 event.

14 So as soon as they arrived on location, the bomb squad
15 and the explosive detection K-9 dog -- I had a couple dogs there;
16 I don't know the exact number. The dogs began to do sweeps of the
17 perimeter to make sure we were working in a safe environment and
18 then when the technicians, with the help of Amtrak -- there was a
19 gentleman, I believe they told me he was an Asian gentleman, they
20 said he was extremely helpful. His knowledge was critical to
21 getting them to the point of being able to verify that that was
22 the point where the incident begins.

23 And so, they took a look at that. There was no evidence
24 of any type of detonation or device. The dogs went over that and
25 had no reaction. And then with the help of Amtrak they were able

1 to say that the cut in the track was related to weight and not --
2 Amtrak at that point and from the observations that was relayed to
3 me, that it was obviously not sabotage, that it was done by the
4 wheels of the train due to the weight.

5 So with that being said, for the time being we're still
6 focusing on that. I did make sure -- the Joint Terrorism Task
7 Force in Philadelphia works for me as well. So I did request that
8 the FBI come to the scene and they were there quite shortly
9 providing me with situational awareness, letting me know that
10 there was nothing going on anywhere else at that particular point
11 in time. There was no indication that there was multiple attacks
12 occurring both domestically and internationally. So they were
13 continuing to monitor that.

14 And as I said, this was all happening like I can't --
15 SEPTA police department, our transit agency, they were on scene.
16 I had a SEPTA sergeant. I told him he was now in charge of SEPTA
17 and that he was to stay with me.

18 DR. BARTH: I've been hearing about these SEPTA buses.
19 What's SEPTA?

20 MR. SULLIVAN: Southeastern Pennsylvania Transportation
21 Authority.

22 DR. BARTH: Got it. Okay.

23 MR. SULLIVAN: We work very close with the SEPTA Police.
24 We have interoperability with them, that they can transmit on our
25 bands, so it really is very helpful in a situation like this. But

1 I had -- someone brought to my attention that on the west side of
2 the tracks there was approximately 140 passengers that were, you
3 know, either walking wounded or they were not injured but they
4 were in need of transport.

5 So they were being tended to by the fire department but
6 there was a transportation issue. So I had the sergeant --
7 actually, I made a phone call to the chief of the SEPTA Police,
8 Tom Nestel, and -- no, I'm going to backtrack. I did not. The
9 sergeant took care of that. The SEPTA sergeant, a young man -- we
10 can get his name; I don't have it. I told him that was his
11 responsibility. He owned that, and he made the necessary phone
12 calls. He had two SEPTA buses brought to the scene and SEPTA took
13 the responsibility of putting the passengers on the bus. They
14 made sure there were SEPTA police officers on the bus. I believe
15 one bus went to a hospital and then another bus, I know there was
16 another bus that went to the initial family assistant center that
17 was set up --

18 MR. KAMINISKI: At 30th?

19 MR. SULLIVAN: -- at the corner on Frankford Avenue.

20 MR. KAMINKSKI: Oh, okay.

21 MR. SULLIVAN: Yeah, yeah.

22 DR. BARTH: That's the elementary school?

23 MR. SULLIVAN: Yes, yes. So that was a big thing off my
24 plate at that point because, again, those people -- they were in a
25 stable location but probably not the best location and obviously

1 traumatized and some needed medical attention. So this was --
2 these were people that it was safe to transport them in this way.
3 They had bumps and bruises and things like that, so --

4 MR. WHALEN: So SEPTA Police was on the scene then too?

5 MR. SULLIVAN: Oh, absolutely.

6 MR. WHALEN: Okay.

7 MR. SULLIVAN: Yeah, very initially. Because again,
8 they're receiving these calls the same time we're receiving these
9 calls and they utilize those tracks as well. And again, the SEPTA
10 Police, their chief is a former member of our department and they
11 always support the city.

12 MR. WHALEN: That's good.

13 MR. SULLIVAN: And again, there's cross-training there
14 as well. You know, my Homeland Security people cross-train with
15 their Special Operations Response Team and they do much of the
16 same work. Their primary responsibility is CBERN related. Both
17 my guys and their guys is chemical, biological, radiological,
18 nuclear detection and mitigation. But again, they're trained --
19 they have heavy rescue tools and we provide them with training as
20 well and we cross-train. So it worked out well in a situation
21 like that, that and the ability to be able to talk to them in real
22 time made a big difference, because they mobilized everything they
23 had including wagons to the scene so there was more transportation
24 vehicles.

25 Backing up a little bit, the ranking fire officer --

1 there was an issue with lighting. So very shortly after I arrived
2 at the scene, my helicopter was in the air -- the aviation unit
3 works out of my bureau. I directed the pilots to maintain light
4 on the scene for the chief and to activate a second helicopter as
5 quick as possible and also communicate with the media helicopters
6 to make sure that there was no safety issues and to keep them back
7 a safe distance, because the helicopters -- the light is good, but
8 the noise is bad; it inhibits communication. But that wasn't --
9 it didn't seem to be an issue that night and we really needed the
10 lighting.

11 But then I advised radio to contact the lieutenant of my
12 -- the tow trucks, the police tow trucks, work for me as well. We
13 have a lot of lighting equipment in our -- we call it tow squad,
14 and my lieutenant is very good with that stuff and he has a take-
15 home vehicle. So in surprisingly short order, he was pulling up
16 with lighting equipment. Plus, we have lighting equipment, again,
17 on all our light rescue vehicles. That equipment was being used.

18 The fire department, it kind of worked out well because
19 the fire department, their hands were busy. So although they have
20 that equipment, it just worked out better for us to set that
21 equipment up. The Office of Emergency Management -- that's one
22 thing I failed to say. Not long after I arrived on the scene our
23 director of emergency management, Samantha Phillips, arrived at
24 the scene. I updated her. I briefed her. She asked me if I
25 needed anything.

1 At that point, I probably mentioned the lights because
2 the Office of Emergency Management has lighting equipment, and
3 that was put in motion and brought to the scene as well. But then
4 she had informed me that our CP1, or the city command post -- the
5 police department has a mobile command post. The fire department
6 has a mobile command post, and the city, CP1. So when CP1
7 arrives, the other command posts go dark and then we work out of
8 CP1.

9 So after I briefed her up, she made some suggestions.
10 She notified me that CP1 was pulling up and she was going to leave
11 the actual scene and find an appropriate location for CP1 and get
12 CP1 up and running with her staff, which is exactly what she did.
13 So then my location went from being a command post to a forward
14 command post and CP1 became the center of operations. And she put
15 that -- she located that on Frankford Avenue. I just can't recall
16 the cross street, but that would have been maybe a block and a
17 half south of Wheatsheaf, so it was in a good location.

18 The other thing I did when I initially was en route --
19 the traffic unit works for me -- I sent the entire, our traffic
20 unit, all available units up there to take over the traffic posts
21 and I recalled my midnight/day traffic personnel to come in,
22 knowing that we were going to have a very large scene, a very
23 extended scene, so we activated them. So we closed down Frankford
24 Avenue and we located the command post on Frankford Avenue about a
25 block and a half south of Wheatsheaf, which for me was a good

1 location because it was close enough and far enough that it wasn't
2 interfering with operations but it was close enough that we could
3 get back and forth to it quickly.

4 So East detectives arrived on scene. It was a
5 lieutenant from East detectives, and I don't know his name. We're
6 a 6600-person police department, so I try to know everybody's name
7 but I can't, so --

8 DR. BARTH: I spoke to Ms. Phillips yesterday and I got
9 some of the primary contact points.

10 MR. SULLIVAN: I informed the lieutenant that he was now
11 in charge of operations -- I mean, investigations until he's
12 relieved by a higher authority from our detective bureau. I
13 directed him as his first assignment, he was to make sure that two
14 detectives -- he was to contact each detective division, we have
15 six, and to make sure that they dispatch two detectives to every
16 hospital within their area of responsibility and to stand by and
17 to record all incoming victims of the crash and then to report
18 their name and condition to our police radio so we could begin the
19 process of tracking patients.

20 Although I knew it was being done at the scene, I also
21 know that that gets confusing and sometimes people -- and as it
22 happened in this case, people walked into the hospitals on their
23 own or, you know, sometimes we grab people and off we go and we
24 don't tell the fire department, so this was a fail-safe. Plus, I
25 was already aware, for some reason, that, you know, the manifest

1 was going to be 95 percent correct but there could be additional
2 people that weren't on the manifest, so --

3 And also, we were aware that there was some information,
4 I was made aware by the Amtrak Police that was data that was being
5 downloaded to 30th Street, and so I told the detective, the
6 lieutenant, that he was in charge of maintaining anything and
7 everything regarding investigations. Because I knew Chief Kelly
8 was en route. I wasn't sure who else from the detective bureau
9 was en route, but I knew that Chief Inspector James Kelly was en
10 route, and he is the chief of detectives for the police
11 department. So he would ultimately, and now he is, you know,
12 leading the investigative actions on our side in regards to that.

13 Very shortly after I arrived on location, I sent
14 officers into the locomotive to clear the locomotive, confirm that
15 there was no crew in there and nobody needed medical attention.
16 They did see a bag, there was a backpack -- they did advise me
17 there was a backpack in there. So that was one of the other
18 things that we had a bomb technician went in and made a hand entry
19 into the bag and confirmed that there was nothing dangerous. And
20 then we taped off the locomotive just so that everyone knew that
21 it had been cleared and it was good to go.

22 Amtrak PD are on location at this point. One of the
23 things that Sam inquired about, and I requested CSX -- they were
24 probably already there, but I did request them through our police
25 radio, is the scene of the crash was adjacent to a long line of

1 tank cars.

2 MR. WHALEN: CSX, yeah. I know.

3 MR. SULLIVAN: The fire department had examined them and
4 confirmed that none had been struck, none were leaking. But,
5 obviously, not feeling real good about working in close proximity,
6 there's not much we can do at that point, but CSX Police did
7 respond very rapidly and did confirm for us that the material
8 inside, I think it was explained to me -- I can't remember what it
9 was, but I was told that theoretically it's flammable but it's not
10 hazardous and there's no threat --

11 MR. WHALEN: It was residue. It was an empty residue,
12 residue of what was in it, so --

13 MR. SULLIVAN: Oh, okay. Yeah, because I thought I got
14 (indiscernible) --

15 MR. WHALEN: (Indiscernible).

16 MR. SULLIVAN: Oh, okay. Yeah, oh, that's right because
17 of the vapors, yeah, yeah, yeah, yeah. So well, you know, the
18 fire department kind of took that part of it over, but, I mean,
19 there was no reason to stop what we were doing. That was my
20 initial concern.

21 I did -- I'm sure it had been done a long time before
22 but, you know, as things came to my mind I just did them. I told
23 radio to make sure that you guys had been notified. I'm sure you
24 had already been. But I requested the Action Investigation
25 Division, which works in my bureau, to come to the scene. We

1 don't investigate train accidents, but, I mean, they have camera
2 equipment and also, you know, because we in terms of DUI auto
3 accidents and interstates -- this was a learning experience for
4 me. But I wanted to make sure that somehow, some way that the
5 blood was -- that we located -- at this point, that was the other
6 thing the lieutenant from East detectives was told, we need to
7 find out where the engineer was taken, what hospital. And when we
8 had that, AID was sent to the hospital just to confirm that blood
9 was drawn medically and that, you know, it was --

10 MR. WHALEN: Do you have an audio/video team that would
11 videotape everything that was -- you know, some -- like L.A., I
12 know, does. When we did Chatsworth, they had it, and so did
13 Chicago.

14 MR. SULLIVAN: Well, what we do -- but I had called --
15 that was on my list. I called them to the scene because -- so at
16 some point the fire department, their commander informed me that
17 they had completed all rescues of all persons that they could see
18 or hear. The rescue operation was nowhere near over, but we made
19 a decision to, you know, again move the police officers back, let
20 them take a knee, relax a little bit because now it was really
21 getting into truly the technical part of things.

22 And then the fire department or OEM had spoken to
23 someone from the NTSB and they had said that, you know, we could
24 -- there was no problem with it, we could continue to move train
25 cars or do whatever we needed to do to complete technical rescue

1 but asked that, of course, there be documentation. So the crime
2 scene unit was dispatched to the scene along with our audio/visual
3 unit. The crime scene unit arrived on location first. And by
4 that time the lighting was in place, because we don't have -- in
5 terms of night vision, they don't have really the best equipment.
6 But by that point we had sufficient lighting up that we were able
7 to do that.

8 So the crime scene unit and eventually the audio/visual
9 -- they were delayed -- but initially it was the crime scene unit
10 worked in conjunction with the fire department and was documenting
11 anything that was moved or altered at the scene so we could
12 continue the technical rescue.

13 At that point the fire department continued doing what
14 they were doing. I don't believe that anyone else was located.
15 Now I'm probably into the early hours of Wednesday morning. I
16 know maybe around 1 a.m., I started to put police officer return,
17 officers from -- any officer from the 4 to 12 was thanked and sent
18 back to their assignment to report off. We started to go into a
19 de-escalation mode.

20 Again, the operation was not over, but it had reached a
21 point where it was becoming more and more technical --

22 MR. KAMINSKI: Kind of a search and rescue then at that
23 point?

24 MR. SULLIVAN: It was a search and rescue.

25 MR. WHALEN: So that's the fire department that would --

1 MR. SULLIVAN: Yes. The fire department -- at this
2 point I had resumed S.W.A.T. with the -- the CT Ops, Homeland
3 Security CT Ops guys stayed on scene to work with the fire
4 department because they're the police unit that is best qualified
5 to do this because they train so much with the fire department, so
6 we kept them on scene. Craig Murphy, Chief Craig Murphy, had
7 called to use our dogs, the cadaver dogs; he had summoned them to
8 the scene to help with the search, because at this point there was
9 no one -- we couldn't hear anyone calling for help, we couldn't
10 see anyone. I know train car -- it would have been, I think, the
11 third train car, we needed to get under there but it wasn't
12 stable; it had to be shored up. So we were doing what we -- the
13 fire department was doing what they could, where they could.

14 At this point the chief of Amtrak is on location.
15 Neil Trugman is on location. The mayor is on location. The
16 governor was en route.

17 DR. BARTH: Can you describe the --

18 MR. WHALEN: Murphy's Law.

19 BY DR. BARTH:

20 Q. Can you describe the unified command structure and what
21 roles you were obviously established by in that command structure?

22 A. I had incident command on scene. Chief Small had
23 incident command on the perimeters, in terms of ingress and
24 egress. It worked best that way because I was commanding the
25 tactical units that were on scene with the fire department and he

1 was dealing with everything off of the tracks in terms of
2 maintaining open traffic lanes and crowd control, the large
3 contingent of media, pedestrian traffic --

4 Q. Who was that security IC? Or the perimeter IC was who?

5 A. Chief Inspector Small, Scott Small.

6 Q. Okay.

7 A. Definitely, you'll have to interview him. I had the
8 fire department with me. I had detectives with me. I had a
9 representative -- what Sam did -- I'm sorry, Samantha Phillips,
10 our OEM director, she left, but then she sent a representative of
11 OEM to come back onto the tracks at the forward command post. So
12 I had OEM there. I was able to facilitate any --

13 Q. Coordinator, OEM coordinator?

14 A. Right, right. And we do this --

15 Q. Who -- do you remember who the OEM Coordinator was?

16 A. No.

17 Q. That's fine. I think I've got it from them.

18 A. Yeah.

19 Q. And so then the -- so you were the role of the overall
20 IC?

21 A. Yeah.

22 Q. And then who was the Fire IC, do you remember?

23 A. Car 2 was there eventually, Deputy Commissioner Jesse
24 Wilson. But I don't know --

25 Q. The initial guy? I have his name now that I think about

1 it, but --

2 A. Yeah.

3 Q. And then so the way you guys divide up the labor is, so
4 the Fire IC -- because it sounds like you were directing some work
5 with rescue operations and things.

6 A. No, no. I'm glad you asked that. Let me clarify that.
7 One of the things that we know going into this is that the fire
8 department is in charge.

9 Q. Okay.

10 A. The fire department is in charge. They have overall
11 incident command. So that's why when I arrive on location I seek
12 out the ranking fire officer and say, what do you need?

13 MR. KAMINKSI: Well, once you realized it wasn't a
14 terrorist operation or anything like that --

15 MR. SULLIVAN: Right, right. So until I -- but until I
16 do confirm that it is, and to be quite honest with you, even if I
17 had found an explosion, until those people -- until everyone is at
18 the hospital, unless there's some immediate need for law
19 enforcement to take over, we're going to leave that in the purview
20 of the fire department.

21 MR. KAMINSKI: Okay.

22 MR. SULLIVAN: And that happens instantaneously and
23 seamlessly.

24 BY DR. BARTH:

25 Q. Was there a designated EMS IC or transport coordinator?

1 A. There was, but he was at the location when the patients
2 were -- or she, at the location where the patients were being
3 taken. At one point that was 2000 Wheatsheaf and then because of
4 the confusion about power/no power -- first it was whether the
5 power was on or off. And then we finally confirmed the power was
6 off, but then we thought we were good to go but then we were told
7 the wires were grounded and that they were still a danger until
8 they're grounded. So then --

9 Q. Then they switched to Frankford?

10 A. Yeah, yeah.

11 Q. And so is that EMS coordinator, is that a police person
12 or a fire person?

13 A. No. Fire.

14 Q. Fire person. Got it.

15 A. No, the fire department has fire suppression and EMS --

16 Q. Right.

17 A. -- broken into two. So they would have, out with me --
18 I'm sure there was emergency medical supervisors out with me, but
19 that scene is handled by the fire suppression, in this case
20 Special Operations, which is heavy rescue doing the technical
21 rescue work. And then EMS runs the triage and the staging
22 transport.

23 Q. Right. So the EMS guys are doing triage and staging for
24 the equipment that they have and stuff on scene. But because the
25 number of people that were there, and there was a lot of police

1 vehicles transporting people, was there a separate police
2 designated transportation coordinator for those responding
3 vehicles?

4 A. Overall that would have been Captain Ginaldi. I tasked
5 him with that responsibility.

6 MR. WHALEN: And he's a police officer?

7 MR. SULLIVAN: Yes. Yes. But until --

8 MR. WHALEN: Was his name Ginaldi?

9 MR. SULLIVAN: Ginaldi, G-I-N-A-L-D-I.

10 MR. WHALEN: Okay.

11 MR. SULLIVAN: So when I say that what I mean is, it's
12 not that he's directing who gets transported where or triage, I
13 just meant from the police side our job is to support the fire
14 department.

15 BY DR. BARTH:

16 Q. Right.

17 A. So that was his responsibility to make sure that that
18 location was accessible both in and out.

19 Q. Okay. So when he -- so when they make the decision to
20 put some people into a police van and send them off to a hospital,
21 who's making the decision to allow that to go, like, does that --
22 does Captain Ginaldi need to check in with the EMS IC or does he
23 just go ahead and let that van go without them checking in with
24 the EMS coordinator?

25 A. It would depend on the condition of the person. I mean,

1 if they were severely injured we would just go. In Philadelphia
2 we do something that's called scoop and run. That saves a lot of
3 lives. Our policy is to wait for EMS, but if EMS is not -- if we
4 don't hear their siren and we have a critically injured patient,
5 then we go. Because the research is showing that we increase the
6 chance of survivability by expediting arrival to trauma center.

7 So they would have been following that policy. If it
8 was possible to provide that information or to clear it with the
9 fire department, they would. But one of the other issues with the
10 scene was, we had so many walkers -- thank God, there were so many
11 survivors from this crash; that was the good thing. The negative
12 thing is, it was an extremely dark area and it's an isolated area
13 and there were multiple times where I heard the police reporting
14 that passengers showed up at a location, that they had walked away
15 before police and fire had actually arrived.

16 MR. KAMINISKI: Yeah, we did a couple of interviews. Or
17 I did one where they just walked out on their own, had their dad
18 pick them up and he took them to the hospital. Right.

19 MR. SULLIVAN: Yeah. So in that case I need a police
20 officer --

21 BY DR. BARTH:

22 Q. Yeah, so -- yeah, I mean, if they're going to be walking
23 off the scene anyway, you might as well --

24 A. Right.

25 Q. -- put them in a police vehicle and let them go off the

1 scene, even if you don't have the opportunity --

2 A. And that was the purpose for the detectives at the
3 hospital so that they would catch that.

4 Q. Oh, so you had -- did you have -- you said -- I didn't
5 hear that.

6 A. Two detectives at every hospital.

7 Q. Okay, I hadn't heard that part.

8 A. I did that from the very beginning. You know, we had a
9 bad collapse --

10 BY MR. WHALEN:

11 Q. Yeah. So they explained that to us yesterday about the
12 scoop and go. And also when we did interviews of the hospital
13 staff, they said the same thing, you know, their policy is,
14 especially where this accident happened, is to just --

15 A. Yeah.

16 Q. That way the homicide rate goes, has gone down for you
17 guys, which is good.

18 A. It's amazing, it really is. And now, the tourniquet and
19 the first-aid program supports that. So that now that we're able
20 to -- you know, if it's a limb wound we can apply a tourniquet or
21 we're increasing other officers that are able to apply a pressure
22 bandage to a torso injury, and that can further enhance things.

23 Q. It sounds like you need to be evolving more into public
24 safety like other, you know -- down South, public safety is the
25 big thing with police departments now, where their EMTs, they

1 carry fire hoses in the trunk.

2 A. Yeah. Well, we're not going that far, but, you know,
3 lessons learned from Boston that all EMS units were -- in the
4 first 3 or 4 minutes, all EMS units were overwhelmed. And they
5 did the same thing at Boston, they utilized BPD wagons and
6 transported people any way they could and then used makeshift
7 tourniquets, and that's the reason that we distributed at least
8 5,000 tourniquets in our department so far and we're still
9 accounting for the number of tourniquets we used that night.

10 Q. When did Amtrak finally let you know it was safe, that
11 the ground sticks were -- and I know you had a thousand other
12 things going on, but --

13 A. We'd have to go back to the radio tapes.

14 Q. Yeah.

15 A. Because there is -- you know, I was a little
16 frustrated --

17 MR. KAMINSKI: You're losing track of time?

18 MR. SULLIVAN: What's that?

19 MR. KAMINSKI: And you're losing track of time.

20 MR. SULLIVAN: I'm losing track of time. And I know at
21 one point I said we were good and then someone come back and
22 said --

23 BY MR. WHALEN:

24 Q. Yeah. That's all --

25 A. -- someone else said we're not good, and so that was a

1 little --

2 Q. It's a long process to do what they had to do to --

3 A. And I know that and I'm not -- I'm just saying that it
4 just was a little confusing, you know, I mean, I realize --

5 Q. Do you think it interfered in any way with, you know,
6 how you guys were doing what you had to do?

7 A. I really don't. Well, what happened was, when we had to
8 start -- that was a long, long walk when we had to go to the
9 southern, go to the secondary location. Initially, we were going
10 right to Wheatsheaf; that was very convenient. When we had to go
11 to change the location to the streets south of Wheatsheaf, those
12 officers had a long walk.

13 DR. BARTH: Is that where they had to cut the fence to
14 get people through?

15 MR. SULLIVAN: I don't know. I think so, but don't hold
16 me to that.

17 DR. BARTH. Okay.

18 MR. SULLIVAN: But I talked to several officers and
19 firefighters and that was quite a long walk. That was nobody's
20 fault, I mean, it just -- picked a bad location to have a train
21 derailment, I mean.

22 DR. BARTH: Right.

23 MR. WHALEN: It's always the --

24 MR. SULLIVAN: as if there's a good one, right? But --

25 DR. BARTH: Do you have any questions for us while we're

1 still on tape? I mean, we can have a side conversation if we want
2 to discuss things offline. But, like, for the more direct
3 statement about what happened, do you have any questions for us or
4 other comments that you'd like to make that we didn't ask you
5 about?

6 MR. SULLIVAN: No, no. I just, you know, the only thing
7 I would add is that I know that I've been a -- I've been a police
8 officer for 32 years and I never saw anything like this, and I --

9 DR. BARTH: You don't want to see it again.

10 MR. SULLIVAN: Tragic as it is that the loss of life we
11 had, I'm absolutely amazed that the numbers are not greater than
12 they are. Other than that, I appreciate what you guys are doing
13 and --

14 MR. KAMINSKI: And especially with the one car it was
15 totally torn open, there was only eight fatalities.

16 MR. SULLIVAN Yeah, yeah. Yeah, yeah. And I understand
17 that there were actually people that walked away from that. I
18 know we, when we were running bodies down, I mean, at hospitals we
19 found someone that reported being in that car, which I just --

20 MR. KAMINSKI: Oh, we talked to that guy yesterday.

21 MR. WHALEN: We talked to a young girl that was --

22 MR. SULLIVAN: Yeah, that's the one.

23 MR. WHALEN: And she said -- said, I remember everything
24 that happened; the car went like this and then I was sitting on
25 the ground looking at the car covered with glass. She got ejected

1 out, but --

2 MR. SULLIVAN: I mean, I would just submit to you that
3 one of the things that -- just like the active shooter scenarios
4 they taught us, that this is an example of it's imperative that
5 police and fire are trained together and not apart. It's an
6 indication that giving medical, basic first-aid training and basic
7 first-aid tools to all police officers really pays off dividends
8 in a situation like this, just like it does in an active shooter
9 scenario. And the value of cross-training, you know, within your
10 police department to have a multi-disciplinary approach.

11 The police and the fire, I mean, the fire department and
12 especially the Homeland Security unit, you know, they worked all
13 day the next day and then we were back on until we found -- it was
14 actually a police detective that found the last victim. So that
15 again, because as you well know, you become exhausted very
16 quickly. You exhaust your resources very quickly. Being able to
17 mesh those two units together was a force multiplier and it really
18 worked out well in this situation.

19 BY MR. KAMINSKI:

20 Q. Now, the question I have is -- and maybe we need to
21 direct this to the fire department is, according to the one
22 hospital we talked to, Aria Health Systems up in Torresdale, I
23 guess?

24 A. Yeah.

25 Q. They said that out of the over 200 victims that the fire

1 department transported only 26. Is that --

2 A. I have no idea.

3 Q. Okay. That's something -- that's why I thought maybe we
4 need to bring that up with the fire department. That's just --

5 A. I have no idea. But again, you know, that could have a
6 lot to do with when you look at the overhead map and you picture
7 200 and some people pouring off a train, they're going in a lot of
8 divergent conditions. And remember also, I told you we had a 140
9 walking wounded that we put on a SEPTA bus.

10 I would submit to you that that wouldn't necessarily be
11 a bad thing because it would have been silly to pull paramedics
12 off of critical patients to deal with patients that were on that
13 bus because they were all bumps and bruises, thank God. But it
14 was, I think, a very excellent use of resources to load them on a
15 SEPTA bus and drive the bus to the hospital.

16 Now, was that coordinated like it should have been with
17 fire? I don't know and that's something that we'll look at
18 because obviously it should have been to make sure that patients
19 were being appropriately disbursed throughout the system. I
20 looked at the numbers. It wasn't perfect, but it wasn't bad
21 either. I mean, I thought that it was --

22 MR. WHALEN: Lessons learned, yeah.

23 MR. SULLIVAN: Yeah, yeah. But considering the
24 magnitude of the situation, I was very surprised at how quickly we
25 were able to get everyone to the hospital. I expected that

1 operation to go on for a lot longer. So I think use of the SEPTA
2 bus was very helpful and I think that it really contributes to
3 that number. If that's the number, I think, you know, that's one
4 of the things that contributed to it. That, and our scoop and run
5 policy, you know, that's the way our officers are, you know, are
6 engrained. They turn around; I don't see a paramedic, I mean,
7 they're going to stop the bleeding and they're going to transport.

8 MR. KAMINSKI: Right.

9 MR. SULLIVAN: And, you know, and we know empirically
10 that that -- you know, that's not the police department saying
11 that's the right thing to do; that's the medical profession
12 telling us that was the right thing do, because we have done the
13 empirical studies and we do have the data, so --

14 MR. WHALEN: Yeah, I can tell you at the hospital we
15 were at, they couldn't say enough about -- they have another
16 hospital in Frankford --

17 MR. SULLIVAN: Yes.

18 MR. WHALEN: -- but it doesn't have a trauma center.

19 MR. SULLIVAN: Right. Frankford Southern.

20 MR. WHALEN: So if a person showed up there that had to
21 go to the other hospital because of the trauma, your police were
22 there that kept the whole area clear from reporters and everything
23 so they could come in -- no, send them there, right back out with
24 the ambulance, without any traffic problems or anything. So it
25 was well coordinated.

1 MR. KAMINSKI: I think we'll conclude the interview.
2 Are there any other questions? Okay.

3 That concludes the interview here at approximately 5
4 after 2.

5 (Whereupon, at 2:05 p.m., the interview was concluded.)

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CERTIFICATE

This is to certify that the attached proceeding before the

NATIONAL TRANSPORTATION SAFETY BOARD

IN THE MATTER OF: AMTRAK TRAIN 188 DERAILMENT NEAR
 PHILADELPHIA, PENNSYLVANIA
 MAY 12, 2015
 Interview of Joseph Sullivan

DOCKET NUMBER: DCA-15-MR-010

PLACE: Philadelphia, PA

DATE: May 17, 2015

was held according to the record, and that this is the original,
complete, true and accurate transcript which has been transcribed
to the best of my skill and ability.

Michelle Smiroldo
Transcriber