



5102

## MEMORANDUM

27 APR 2009

From:   
C. I. PEARSON, VADM  
COMDT (CG-01)

To: Distribution

Subj: CHIEF OF STAFF'S FINAL DECISION LETTER ON THE MARITIME SAFETY  
AND SECURITY TEAM ANCHORAGE (91111) CLASS "A" MISHAP; EJECTION  
FROM CG 25501 IN SEATTLE, WASHINGTON ON 25 MARCH 2007

Ref: (a) Safety and Environmental Health Manual, COMDTINST M5100.47  
(b) Department of Defense Human Factors Analysis and Classification System (DoD  
HFACS)  
(c) Response Boat Tactics, Techniques, and Procedures Manual,  
COMDTINST M16601.7 (series)

1. SYNOPSIS. This Decision Letter presents the findings of the investigation conducted pursuant to reference (a) for the purpose of identifying and assessing safety and health risks confronting Coast Guard personnel. Safety investigations are conducted to aid the Coast Guard in controlling risks to acceptable levels, consistent with the mission being performed. This Safety Investigation is distinct from the Administrative Investigation into the cause of this same Class "A" Mishap, which was the subject of the Final Action Memorandum released on December 17, 2007. On Sunday, 25 March 2007 on or about 1415 local, the crew of CG 25501 from MSST Anchorage was conducting an escort of a Washington State Ferry (WSF) in Puget Sound, Washington. During a high-speed maneuver to starboard, the boat gunner was ejected from the bow of CG 25501 and struck by the boat's propellers, suffering fatal injuries. CG 25501, along with CG 25493, were part of a two boat scheduled patrol under the Tactical Control (TACON) of Sector Seattle, tasked with conducting four WSF escorts and viewing nearby critical infrastructure. On the second escort, CG 25501 was maneuvering in the vicinity of the WSF TILLICUM. The coxswain was repositioning CG 25501 from the stern to the bow of the WSF. The boat gunner was manning the forward M240B gun mount as the coxswain executed an aggressive close aboard maneuver to starboard. During this turn, CG 25501's starboard performance fin caught the edge as it dug into the water, causing the boat to jerk and the boat gunner to be ejected over the port side, almost instantly passing under the boat. The coxswain immediately maneuvered CG 25501 to recover the boat gunner; a crewmember entered the water to assist the boat gunner who was floating face down. The boat gunner was recovered in less than one minute with significant head trauma. A Coast Guard Emergency Medical Technician (EMT) from CG 255002, on patrol in that area, arrived on scene within minutes. While the EMT performed first aid, the coxswain brought CG 25501 to the WSF Fauntleroy terminal. Seattle Fire and Rescue personnel met CG 25501 at the dock and provided emergency care for the boat gunner while en route Harborview Memorial Hospital. The boat gunner was pronounced dead on arrival at the hospital.

2. CLASSIFICATION. This is a Class "A" mishap due to a fatality per reference (a).
3. CAUSAL AND CONTRIBUTORY FACTORS. A factor is considered "causal" when if removed in the sequence of events it would most likely have broken the chain of errors and the mishap would not have occurred. A factor is considered "contributory" when it is not singularly responsible for the mishap; however, when combined with causal or other contributory errors it influenced the progression of the mishap.
  - A. CAPABILITIES: There were no limitations or failures of equipment that caused this mishap.
  - B. HUMAN FACTORS: The Department of Defense Human Factors Analysis and Classification System (DoD HFACS) provides a systematic, multidimensional approach to error analysis, standardizing the human factors analysis approach for the investigation of mishaps per reference (b). DoD HFACS examines four main tiers of failures/conditions: I Acts, II Preconditions, III Supervision, and IV Organizational.
    - I. ACTS: Are those factors that are most closely tied to the mishap, and can be described as active failures or actions committed by the operator that result in human error or unsafe situation.
      - 1) Errors: Judgment and Decision Making Error: (Causal) Risk Assessment – During Operations. The coxswain of CG 25501 did not adequately assess the risk of performing a high speed maneuver during low threat escort operations.
      - 2) Violations: (Causal)
        - a. Violation – Routine / Widespread. The frequent high speed maneuvers were inappropriate to the threat conditions. It was found that MSST Anchorage coxswains routinely executed high-speed maneuvers during scheduled patrols. Coxswains believe that these high-speed maneuvers are justified as an operational necessity to create officer presence and to harden the target. However, operating boats in the high-threat, high-consequence mode, while in a low-threat environment, unnecessarily exposes boat crews to risk and is inconsistent with Coast Guard Policy and Procedures, per reference (c).
        - b. Violation-Lack of Discipline.
          - i. The coxswain of CG 25501 failed to maintain situational awareness and vigilance in conducting his tasking. The crew's ability to maintain situational awareness amidst the radical motions associated with high speed maneuvers was impaired.



- ii. The coxswain of CG 25501 failed to communicate helm inputs to his crew prior to execution, as required by Coast Guard Policy and Procedures per reference (c).

II. PRECONDITIONS: Active and/or latent conditions of the operators prior to the mishap, or environmental or personnel factors which affect practices, conditions or actions of individuals and result in human error or an unsafe situation. The following preconditions existed:

1) Environmental Factors: Technological Environment:

a. Restraint System. (Causal) The lack of a gunner restraint system allowed the boat gunner to be ejected from the boat.

b. Communications – Equipment. (Contributory) No effective crew communications system was available to the MSST Anchorage boat crews that permitted direct verbal communication between the coxswain and boat gunner.

2) Condition of Individuals:

a. Cognitive Factors.

i. Inattention. (Causal) The coxswain of CG 25501 did not check the position of his crew and announce the high-speed maneuver to starboard prior to commencing it. He had a false sense of security because of his familiarity and past experiences with the boat gunner, the perceived absence of threat, and boredom with the routine nature of WSF escorts.

ii. Distraction. (Contributory)

(a) The boat gunner was distracted by the large crowd of passengers on the weather deck of the WSF.

(b) The coxswain of CG 25501 may have been distracted by thoughts of an ailing family member with whom he had spent the previous day visiting on emergency leave.

b. Psycho-Behavioral Factors.

i. Overconfidence. (Causal) The coxswain of CG 25501 was overconfident in the boat gunner's ability to hold on to the gun and stay in the boat, with no restraint system, while performing high-speed maneuvers.

- ii. Complacency. (Causal) The crew of CG 25501 was complacent regarding their operational tasking in a low-threat environment and the risks associated with high-speed maneuvers.
- iii. Misplaced Motivation. (Contributory) The coxswain of CG 25501 operated in a manner that indicated he was conducting a demonstration for the WSF passengers rather than a vigilant escort in accordance with the Response Boat Tactics, Techniques, and Procedures Manual.
- iv. Overaggressive. (Causal) The Master of WSF TILLICUM indicated that the two MSST Anchorage boats escorting his vessel maneuvered in the most aggressive manner he had seen since the agreement reached with Station Seattle and MSST Seattle approximately eighteen months prior regarding screening vessel positioning and communications. One witness riding the WSF three days before the mishap, stated she observed a Coast Guard boat operating in a very aggressive manner conducting high-speed maneuvers almost five feet from the WSF. This witness stated that she had observed WSF escort operations since they started over five years ago. All of the coxswains interviewed from MSST Anchorage believed that it was their duty to conduct high-speed maneuvers in order to present an aggressive varied patrol pattern and to be an effective deterrent.
- v. Response Set. (Contributory) The boat gunner was accustomed to the ride and feel of the boat while in the gunner position. He felt comfortable on the bow in any sea state or during any maneuver. It was the coxswain of CG 25501's normal response set to not check on the boat gunner. The coxswain knew that the boat gunner was comfortable in his position, and therefore was not concerned about his ability to hold on during a high speed turn.

III. SUPERVISION: Methods, decisions or policies of the supervisory chain of command which directly affect practices, conditions, or actions of individuals and result in human error or an unsafe condition. The following supervisory factors were identified:

1) Inadequate Supervision:

- a. Leadership / Supervision / Oversight Inadequate. (Contributory) MSST Anchorage's deployed detachment did not have the boat forces knowledge, skills, and abilities to provide adequate oversight or supervision. The lack of boat forces knowledge, skills, and abilities in these leadership positions precluded intervention.
  - i. Patrol Commander: The tactical oversight and patrol coordination was placed at the coxswain level for the afternoon section's patrol. The



coxswain of CG 25493 was designated as the Patrol Commander (PATCOM). However, placing the PATCOM responsibility with the coxswain did not provide sufficient oversight since the coxswain cannot maintain adequate tactical situational awareness while safely navigating or maneuvering the boat. The ability of a coxswain of equal rank and qualifications to oversee another, as a Patrol Commander, is also questionable.

- ii. Waterside Security Section Chief (WSSC): The WSSC did not fully execute the duties and responsibilities of his position by providing adequate tactical oversight, patrol coordination, and affirmative direction on tactical maneuvering to his coxswains. The WSSC position carries great responsibility when deployed—similar to that of an Officer-in-Charge of a Station. However, there is no formal training or PQS to be a WSSC. By not being qualified on the Defender Class Boat as Tactical Boat Crewman and/or Tactical Coxswain, the WSSC lacked the knowledge, skills and ability to correct the way the coxswains and crew operated the boats and provide opportunities for “growing” a junior Deployable Team Leader (DTL).
- iii. Deployable Team Leader (DTL): The DTL did not fully execute the duties and responsibilities of the DTL position by providing adequate tactical oversight, patrol coordination, and affirmative direction on tactical maneuvering to the coxswains for their 25 March 2007 PWCS mission. The Special Missions Training and Qualification Manual required the unit to generate a DTL qualification process. However, there was no Commandant Instruction which mandated what that local qualification should encompass. The DTL had been certified for only six days prior to the mishap and had less than six months of active duty service. This was also the DTL’s first deployment. Given the DTL’s brief tenure in the Coast Guard coupled with no Commandant DTL training process in place and the DTL only having completed 80 percent of the unit-generated PQS before becoming certified, there was no possible way the DTL could have fully appreciated the responsibility of the position or intervened when necessary. The DTL believed the role of a DTL was administrative in nature and did not understand the operational requirements of the position. By not being qualified as Tactical Boat Crewman and/or Coxswain on the Defender Class Boat, the DTL lacked the credibility to correct the way the coxswains and crew operated the boats.
- iv. Operations Officer: The MSST Program Manual states that the Operations Officer shall provide operational and administrative control of unit boat crews. Additionally, the Operations Officer shall also direct professional development of all department personnel, coordinate unit deployments, and

ensure weapons qualifications and procedures are followed. The Operations Officer at MSST Anchorage was not as involved in the areas of professional development and operational control of boat crews as required by the MSST Program Manual. The guidance and influence of the MSST Anchorage Operations Officer was noticeably absent during interviews with members involved in the mishap.

- v. Executive Officer: The MSST Program Manual is silent on the role of the MSST Executive Officer. The guidance and influence of the MSST Anchorage Executive Officer was noticeably absent during interviews with members involved in the mishap.
- vi. Commanding Officer: The Commanding Officer of MSST Anchorage allowed an unqualified WSSC to execute his duties and failed to hold him accountable for not achieving Tactical Boat Crewman and Tactical Boat Coxswain qualifications. In the same detachment, on the same deployment, the Commanding Officer verbally designated an officer with virtually no experience to serve in the critical leadership role of DTL. Both the WSSC and DTL lacked the boat forces knowledge, skill and abilities that would give them the ability and credibility to correct unsound and unsafe boat operations. Additionally, the Commanding Officer elected to reassign the most experienced boat operator at MSST Anchorage, the Warrant Officer (Boatswain Specialty – BOSN), from Assistant Operations Officer (AOPS), his billeted position, to Planning Officer, where he had little daily exposure to the unit's boat operations. The AOPS position was left vacant.
- vii. Pacific Area: Pacific Area failed to appreciate the significance and impact of the training discrepancies in MSST Anchorage's Ready for Operations reports as indicators of poor leadership/supervision/oversight at MSST Anchorage. Additionally, the capsizing of a Defender Class Boat and repeated homeport and deployed detachment incidents over the previous year further highlighted leadership, supervisory, and oversight deficiencies at MSST Anchorage.
- b. Local Training Issues / Programs. (Contributory) Coast Guard tactical coxswain training teaches tactics, techniques, and procedures for conducting PWCS mission activities, which include how to counter a force encountered in low-, multiple-, and high-threat scenarios. MSST Anchorage employed high-threat tactics for all operations and did not distinguish between the boat tactics required in the high-threat environment in the presence of a TOI versus the low-threat environment in the absence of a TOI.
- c. Supervision – Policy. (Causal) At the time of the mishap, there was no unit requirement for the boat gunner to be secured to the boat during operations. In



the absence of Commandant or Pacific Area policy regarding the use or authorized type of a boat gunner restraint system during operations, the unit was left to establish its own policy. Pacific Area's MSST Response Boat Tactics Training Guidelines established the only organizational boat gunner restraint policy in existence, but it only applied to training. MSST Anchorage complied with Pacific Area guidelines and established a boat gunner restraint requirement during training in the unit instruction. The Commanding Officer had been wrestling with the boat gunner restraint issue for several years, since the Command Navigation Standards flip-flopped three times regarding requiring a boat gunner restraint. The first Command Navigation Standards were published on 10 August 2004 and the following policy was set forth: "Belts for gunners and helmets for the entire boat crew shall always be available and the coxswain may direct their use if at anytime the conditions (such as heavy weather), training (high-speed tactical training), or mission (high-threat scenario) warrant the donning of this safety gear." The second version of the Command Navigation Standards published on 05 May 2006 stated, "Belts for gunners and helmets for the entire boat crew shall always be available and the coxswain shall direct their use while engaged in any type of security operation or during high-speed tactical training scenarios." In the third version of the Command Navigation Standards published on 31 January 2007, just before the deployment for Operation ICE FREE, the standard was relaxed such that boat gunner restraints were only required during dedicated evolutions while practicing high-speed tactics at speeds greater than 3500 RPM, but below 5000 RPM. The Command Navigation Standards also stated, "No personnel, under any circumstance, are allowed outside the cabin if RPMs exceed 5000 while training. With all personnel inside the cabin, RPMs are limited to 5500." Complicating the boat gunner restraint issue was the lack of specificity by MSST Anchorage and Pacific Area regarding which belt or harness was to be used.

- 2) Planned Inappropriate Operations: Risk Assessment – Formal. (Contributory)  
The crews of CG 25501 and CG 25493 conducted pre-mission risk assessments (GAR scoring system), but the extraordinarily low scores (15 for both boats) did not trigger a supervisory concern for their validity nor did they prompt further discussion by boat crews. All categories were given very low scores, especially "Environment," which was given a score of 1 even though the water temperature on 25 March 2007 was 46° F. Additionally, the GAR category, "Fitness," was given a score of 2 even though it was the last day of the deployment and the crews may have been strongly influenced by "get-home-itis."
- 3) Failure to Correct Known Problem: Operations Management. (Contributory)  
MSST Anchorage was aware of the dangers associated with frequent use of high-speed maneuvers, but believed they were appropriate for the PWCS mission, and encouraged aggressive behavior.



- a. The Commanding Officer was aware of the ejection danger during tactical maneuvers, but he did not require the use of a gunner restraint during operations. He thought the heavy weather/surf belt, because of its two tether design and lack of a quick-release mechanism, restricted the gunner's range of motion, could cause back or knee injury, or could cause drowning in the event of a capsizing. Given his concerns about the belts, the Commanding Officer failed to take steps to mitigate the risks associated with high-speed maneuvering such as restricting the use of high-speed maneuvers during routine operations in the absence of a TOI.
- b. Pacific Area failed to identify a specific gunner restraint belt for boat gunners to use and failed to require the belt's use during operations. The only guidance regarding the use of gunner restraint belts was provided in their MSST Response Boat Tactics Training Guidelines. In this instruction, a belt was required during all training evolutions, but there was no mention of a belt during operations.
- c. Pacific Area was aware of various MSST Anchorage deficiencies, as described in their Ready for Operations (RFO) reports, but failed to take corrective steps. In MSST Anchorage's May 2006 RFO report, there were several training and maintenance discrepancies that Pacific Area remarked showed a lack of attention to detail, including: 1) no list of Personnel Qualification Standards (PQS) qualifiers by subject matter; 2) no Training Management Tool (TMT) data entry or supervisor's approval of qualifications or currency maintenance tasks; 3) missing qualification letters, currency maintenance tasks and PQS completion documentation; 4) unclear designation of permanent Training Officer and Training Petty Officers; 5) missing items from boarding kits; 6) no Preventative Maintenance System log for gas detector calibration, toxic gas monitor, and ion scan; 7) no annual inventories of Rescue and Survival Systems (RSS) equipment; 8) no weekly inspections of pyrotechnics; and 9) no retro-reflective tape on any of the inspected boat crew helmets. Two and a half months after the mishap in June 2007, Pacific Area conducted another RFO visit with MSST Anchorage and there were fewer training discrepancies, but several more non-training discrepancies. However, the tactical boat operations discrepancies were the most telling of how MSST Anchorage's boat crews generally performed in applying boat tactics. These discrepancies included: 1) inconsistent and ineffective radio communications; 2) lack of familiarity with the steps for responding to a non-compliant vessel; 3) lack of situational awareness with regard to zone integrity; 4) slow intercept techniques, lacking proper position to meet the TOI; 5) lack of a strong officer presence, and 6) screen boat did not maintain the proper position between TOI and High Value Asset (HVA).



- d. Pacific Area took no action in response to indicators that MSST Anchorage was failing to adequately assess the risk of assigned missions. After the 2006 Coast Guard-wide Safety Stand-down, MSST Anchorage reported itself "in the green" (indicating low risk) for all nine categories of Operational Risk Management (ORM) (Supervision, Planning, Crew Selection, Crew Fitness, Environment, Event/Evolution Complexity, Training, Equipment/Platform, and PPE) and all fourteen categories of Crew Endurance Management (CEM). No other MSST unit was completely "in the green" for both CEM and ORM categories.
- 4) Supervisory Violations: Supervision – Discipline Enforcement (Supervisory Act of Omission). (Causal) MSST Anchorage failed to enforce Pacific Area's MSST Response Boat Tactics Training Guidelines which prohibited "...impromptu high-speed maneuvers, turns, or other demonstrations of the vessel's capability during routine operations or training." The high-speed maneuvers conducted by CG 25501 were unwarranted for the low-threat environment at the time of the mishap. Additionally, MSST Anchorage did not comply with COMDT COGARD Washington DC 162138Z Dec 05, because the Commanding Officer did not "review with crewmembers the difference between mission required tactical maneuvers and making unwarranted dramatic maneuvers at excess speed."

IV. ORGANIZATIONAL: Communications, actions, omissions or policies of upper-level management directly or indirectly affect supervisory practices, conditions or actions of the operator(s) and result in system failure, human error or an unsafe condition.

- 1) Resource/Acquisition Management: Personnel Resources. (Contributory) MSST Anchorage lacked complementary Boat Forces competencies to provide adequate oversight and intervention at the unit. Neither the MSST Anchorage command cadre (CO, XO or Operations Officer), nor the three assigned DTLs had any prior boat forces assignments. The only three personnel with any boat forces experience within the MSST Anchorage's leadership were the BOSN and the two WSSC's. The BOSN had the most boat forces experience with four prior tours at stations for a total of 12 years of prior boat forces experience (not counting the two years assigned to MSST Anchorage). Three of those tours were just prior to being assigned to MSST Anchorage. However, the BOSN had been reassigned from AOPS, the BOSN's billeted position, to Planning Officer, where there was little daily exposure to the unit's boat operations. Detachment 1 WSSC's previous assignments included a 110' patrol boat, District Auxiliary Branch, Marine Safety Office, and a Group, but no station assignments in a nine year career. Finally, the WSSC for Detachment 2 (the WSSC deployed at the time of the mishap) had mostly served on board cutters with his most recent boat forces assignment from 1992-1995. This lack of boat forces experience throughout MSST Anchorage's

leadership was also prevalent in both the OPCON (Pacific Area) and the TACON (Sector Seattle).

2) Organizational Climate:

a. Unit / Organizational Values / Culture. (Contributory)

i. The Commanding Officer did not incorporate the Pacific Area boat tactics safety policy into the unit's operational doctrine. MSST Anchorage boat crews believed their mission was to be as aggressive as possible at all times and this included: hardening the target; exhibiting officer presence; and being random and unpredictable. All of these concepts contributed to their belief that high-speed maneuvers should be used frequently to demonstrate the boats and the crews' capabilities.

ii. The MSST program was advertised as a highly trained tactical enforcement resource, but members received no follow-on training or standardization visits for their tactical operations. In the case of MSST Anchorage, prior to the mishap, the most aggressive coxswains were the most experienced and also those most distant from their original (and only formal) training at SMTC. The lack of standardization visits enabled a unit sub-culture to breed without correction.

b. Perceptions of Equipment. (Contributory) The Commanding Officer of MSST Anchorage had no confidence in the heavy weather/surf belt. He thought this belt, because of its two tether design and lack of a quick-release mechanism, restricted the gunner's range of motion, could cause back or knee injury, or could cause drowning in the event of a capsizing.

3) Organizational Processes:

a. Program and Policy Risk Assessment. (Contributory) The Coast Guard mandated the manning of the mounted automatic weapons without fully assessing the risk, and fielding the appropriate gunner ensemble.

b. Procedural Guidance / Publications. (Contributory)

i. The Commanding Officer of MSST Anchorage was intent on conducting high-threat tactics during low-threat operations as a means of deterrence. The unit taught the inclusion of high-speed maneuvers during escorts as a measure to enhance deterrence. However, nowhere in the Response Boat Tactics, Techniques, and Procedures Manual does it authorize random driving patterns as a means of deterrence; the Manual verbally and graphically describes how the boats shall be positioned to maintain a two-



boat moving security zone. Pacific Area's MSST Response Boat Tactics Training Guidelines prohibited high-speed maneuvers during "routine operations." COMDT COGARD Washington DC 162138Z Dec 05 directed Commanding Officers to "review with crewmembers the difference between mission required tactical maneuvers and making unwarranted dramatic maneuvers at excess speed." It was the Commanding Officer's normal procedure to pass all safety messages to the BOSN, even though the BOSN was the Planning Officer, who would discuss the message with coxswains.

- ii. Pacific Area's MSST Response Boat Tactics Training Guidelines did not provide a specific type of boat gunner restraint to use. Additionally, there was no guidance for the use of boat gunner restraints while engaged in operations. Pacific Area provided brief, but clear, operational guidance in the main body of the training instruction by stating "Although Coast Guard MSST boat crews are highly trained; they must not conduct impromptu high-speed maneuvers, turns, or other demonstrations of the vessel's capabilities during routine operations or training." The enclosure to this training instruction provided detailed guidance on training only. Although boat gunner safety was a concern at Pacific Area, there was no coordination with Atlantic Area or Commandant to address concerns with gunner restraint belts. The Commanding Officer of MSST Anchorage complied with Pacific Area's instruction and stated in the Command Navigation Standards that, "During dedicated evolutions while practicing high-speed tactics (i.e. J-turns), speed shall be limited to 5000 RPM's with personnel outside the cabin. If RPM's exceed 3500 but are below 5000, all personnel on deck must be strapped in to the pad-eyes for the lifting points and/or the brackets for the gun mounts." However, the Commanding Officer of MSST Anchorage did not require personnel outside the cabin to be strapped in during normal operations, which for MSST Anchorage included frequent use of high-speed maneuvers to demonstrate officer presence and serve as a deterrent.

c. Organizational Training Issues / Programs. (Contributory)

- i. Coast Guard tactical coxswain training teaches tactics, techniques, and procedures while conducting PWCS mission activities, which include how to counter a force encountered in low-, multiple-, and high-threat scenarios. While this training provides procedures to counter a threat, Coast Guard policy and guidance during the timeframe of the mishap did not adequately provide coxswains with the ability to effectively assess all available information so the coxswain may determine the appropriate risk of a given tactic compared to the desired outcome. Additionally, tactical training addressed the mechanics of boat handling for coxswains and weapons deployment for tactical boat crewmembers, but did not adequately integrate

individual performance, coxswain and boat gunner, into a force package. The coxswain and boat gunner of CG 25501 performed individual actions which aided this mishap; they were not integrated as team.

- ii. There was no overarching Professional Qualification Standard (PQS) program for MSST's. In fact, chapter 5.A (PQS Requirements) of the Special Missions Training and Qualification Manual states that MSST's shall use unit-generated Job Qualification Requirements. The only available formalized training for boat tactics was at Special Missions Training Center. An Initial Stand-up Training (IST) Course was available to newly established MSSTs and MSST Anchorage completed this course in January/February 2005. This training included the following courses: Tactical Coxswain, Tactical Boat Crewmember, and MSST Command Planning.
- d. Doctrine. (Contributory) Most MSST doctrine was still in development. In the absence of doctrine governing operations and training, the focus on a high-threat environment created an overwhelmingly aggressive, "always tactical" attitude among the MSST boat crews.

4. ADDITIONAL FINDINGS / LESSONS LEARNED. The chain of command failed to enforce Coast Guard policy and provide appropriate guidance, training and mission knowledge development in support of PWCS operations. The Commanding Officer had a flawed understanding of mission context and how he should apply his training to a given threat environment. Despite numerous indicators, Pacific Area failed to recognize the Commanding Officer's flawed understanding of mission context, as highlighted by the capsizing of CG 25501, where inappropriate use of high-speed maneuvers resulted in a complete capsizing 18 months prior to this mishap. Sector Seattle, who exercised TACON over MSST Anchorage's detachment, failed to provide explicit guidance on the application of tactical maneuvering, including high-speed maneuvering, and the employment of forces in the execution of the assigned PWCS mission tasking.

#### 5. CORRECTIVE ACTIONS.

A. Completed Actions: The following actions were accomplished by the Office of Boat Forces (CG-731), Office of Counterterrorism and Defense Operations (CG-532), and the Deployable Operations Group (DOG) through a reprioritization of existing resources:

1. Office of Boat Forces (CG-731). Required Boat Forces Command Cadre course for all members who were in receipt of orders to or filling their first assignment as Commanding Officer, Officer in Charge, Executive Officer, Executive Petty Officer, and Engineering Petty Officer of a Station, Aids to Navigation Team, or Maritime Safety and Security Team.



Subj: CHIEF OF STAFF'S FINAL DECISION LETTER ON THE MARITIME SAFETY AND SECURITY TEAM ANCHORAGE (91111) CLASS "A" MISHAP; EJECTION FROM CG 25501 IN SEATTLE, WASHINGTON ON 25 MARCH 2007

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2. Office of Boat Forces (CG-731). Deployed the Boat Gunner Restraint System (tether and harness). Required all boat crew manning mounted automatic weapons on the Defender Class, SPC-LE, and TPSB to be tethered.
3. Office of Boat Forces (CG-731). Deployed ballistic helmet and ballistic goggles. Required the ballistic helmet and ballistic goggles to be worn by the boat gunner(s) when manning the mounted automatic weapon.
4. Office of Boat Forces (CG-731). Deploying Boat Crew Communications System (BCCS) to all Level I Coast Guard stations. Boat gunners and coxswains are required to use the deployed BCCS when manning the mounted automatic weapon(s).
5. Office of Boat Forces (CG-731). Established Tactical Boat Crew Member competency, qualification tasks, and currency requirements. Tactical Boat Crew Member competency includes boat gunner skill and knowledge requirements.
6. Deployable Operations Group (DOG). Developed a readiness and standardization program, to include Ready for Operations and Readiness and Standardization Teams, for tactical operations at Deployable Operations Group (DOG) Deployable Specialized Forces (DSF's).
7. Office of Boat Forces (CG-731), Office of Counterterrorism and Defense Operations (CG-532), and Deployable Operations Group (DOG). Developed policy on the employment of tactical maneuvering, including high-speed maneuvering. Additionally, developed and included a "continuum of tactics" that provides a range of responses from officer presence through deadly force. Addressed implications and mitigation of risk and appropriate response to the threat environment. Addressed application and limits for training as well as appropriate tactics for normal operations (operations in the absence of articulated threats).
8. Office of Counterterrorism and Defense Operations (CG-532) and Deployable Operations Group (DOG). Developing doctrine for the certification, integration, acceptance, and employment of deployable forces by commands exercising tactical control.
9. Office of Counterterrorism and Defense Operations (CG-532) and Deployable Operations Group (DOG). Created and promulgated a standard comprehensive Deployable Team Leader (DTL) PQS. Currently all DTLs must complete this PQS and be certified by their command prior to deploying in this capacity. Formal boards are required. Tactical Action Officers (TAO) are required to complete the pre-DOG establishment Patrol Commander Syllabus. Waterside Section Chiefs follow TAO and DTL PQS.

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10. Office of Boat Forces (CG-731) and Deployable Operations Group (DOG). Developed the guidelines for higher level tactics for both operations and unit-level training. Guidelines are taught at the Tactical Coxswain and Boat Crew Member courses and are available to Boat Force Unit Commanding Officers and Officers-in-Charge.
11. Office of Boat Forces (CG-731), Deployable Operations Group (DOG), and Office of Counterterrorism and Defense Operations (CG-532). Reviewed PWCS requirements to identify gaps in policy, doctrine, capabilities, training, and tactics, techniques, and procedures. Promulgated updates in Coast Guard official messages and appropriate Coast Guard manuals.
12. Office of Boat Forces (CG-731), Deployable Operations Group (DOG), Office of Counterterrorism and Defense Operations (CG-532), and Assistant Commandant for Human Resources (CGPC). Reviewed organizational structures for units operating boats and provided oversight of boat operations to ensure boat forces knowledge, skills, and abilities exist in key leadership positions, i.e. STAN Program and opened Command Cadre course up to all units that operate boats.
13. Office of Safety and Environmental Health (CG-113). Review of Operational Risk Management procedures is ongoing.

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Dist: COMDT (CG-00, CG-09, CG-092, CG-094, CG-ACO, CG-1, CG-4, CG-5, CG-7, CG-8, CG-11, CG-13, CG-53, CG-113, CG-132, CG-45, CG-532, CG-731)  
All Area and District Commanders  
Deployable Operations Group  
Maritime Security Response Team  
All Maritime Safety and Security Teams  
All Port Security Units  
TRACEN Yorktown  
Special Missions Training Center (SMTC)  
MLCPAC (kse)  
MLCLANT (kse)  
USCG Sector Seattle, WA  
CGD Seventeen (dre)  
CGD Thirteen (dre)