FORECAST

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Editor’s Notes

By James D. Hessman, Editor in Chief

It’s about time! Those three little words aptly describe this month’s print-
able issue. *Time* – as measured by the past (the New Madrid, Missouri,
earthquakes in 1811 and the 2005 London subway bombings), the present
(DHS Secretary Janet Napolitano’s comments this month at Minnesota’s
Mall of America), and the future (next year’s 23-25 February Public-Health
Summit in Atlanta, and the May 2011 national-level emergency-prepared-
ness training exercise in Nashville).

The issue’s principal focus, though, is on the near-term future – as envisioned in special
“Forecast” articles by five leading industry executives, all of them career professionals:
James Fulton, ESI founder and board member; Gary Dunn, vice president, sales and
marketing, Avon Protection Systems; Brad Stobb, regional support manager, DHS Sys-
tems; Rodney Hudson, founder/owner of QuickSilver Analytics; and Mitch Saruwatari,
vice president, quality and compliance, Live Process. Each of these highly respected
leaders was asked (by *DPJ* Publisher Marty Masiuk) to provide his personal views of
likely developments that readers can expect to see just over the horizon or perhaps in
the more distant future.

The Forecast articles were edited only for style, not content, and therefore represent the
unvarnished opinions of hands-on senior executives. Fulton predicts that the next-generation
“intelligent” emergency operations centers will be more futuristic in appearance, perhaps, but
also much more functional than current EOCs. Dunn focuses on respiratory protection for
first responders, and suggests that major improvements in that field are coming, particularly
in the new protective masks now entering the inventory. Stobb pays special attention to the
new Homeland Response Forces being strategically positioned throughout the country, and
sees similar advances at the state and local levels of government.

Hudson’s approach is more immediate, particularly in the field of mass-casualty
incidents. The on-scene sampling equipment now used is not as accurate as it should
be, and the result is additional lives lost that might otherwise be saved; better on-scene
equipment, he points out, will translate directly into fewer casualties and lower opera-
tional costs. Saruwatari rounds out the Forecast articles with a timely gridiron analogy
focused, appropriately, on teamwork, training and conditioning, and a well considered
game plan that even Joe Namath would approve.

Four more authors follow the same past/present/future trail in their own insightful essays.
Sophia Paros analyzes the newest “lessons learned” reports on the London bombings. Joseph
Cahill discusses leadership principles and practices (a forever timely subject) in emergency
medical services, both on-scene and on the way to a mass-casualty incident. Jack Hermann
provides an advance look at the vitally important 2011 Public Health Summit.

Adam McLaughlin rounds out the issue with timely insider reports on major
preparedness events in: Illinois, where the state’s emergency management agency has
developed an innovative program to educate students from grade school through both
high-school and college on the fundamentals of homeland security; Massachusetts,
where Boston U scientists report significant breakthroughs in the detection of viral
pathogens; Minnesota, which enlisted Mall of America shoppers in the DHS “See
Something, Say Something” public-awareness campaign; and Tennessee, where the
2011 national-level exercise will focus, appropriately, on the bicentennial of the 1811
New Madrid earthquakes.

**About the Cover:** An unknown galaxy of distant stars – many, many light years away – provides a midnight
backdrop for an elegantly dressed 21st-century business man as he seeks (in vain, perhaps?) to look a brief
few seconds into the future to see what fortunes, or misfortunes, may be lying in wait just around the next
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Leadership at the Scene Of a Mass-Casualty Incident

By Joseph Cahill, EMS

There are many “how to” books and manuals about how Emergency Medical Services (EMS) command structures should function during a mass-casualty incident (MCI), but relatively few policy guidelines related to day-to-day operations are available. There should be, though, because developing an effective EMS supervision program is much more than merely issuing orders to the staff. Supervision must meet a number of important goals.

The first and most obvious task of the EMS supervisor, as with any other organization and/or business, is the general supervision of the EMS staff both initially and during operational situations. General supervision necessarily includes paying proper attention to such mundane details as ensuring that: (a) staff show up for work on time, and fully prepared to carry out their individual and team responsibilities; (b) equipment is properly signed out; and (c) overtime is authorized if and when necessary to fill vacancies. The important thing to remember here is that all tasks related to keeping units “rolling out” and carrying out their responsibilities are central to the work of the EMS supervisor. For that reason, each properly organized EMS system has at least one leader, designated by name, fulfilling that goal.

The second goal of the EMS supervisor should be troubleshooting. EMS productivity is usually calculated, logically enough, by the number of responses the system can handle and the speed at which the specific EMS unit can respond. However, incoming requests often have to compete for resources. If an EMS unit is immediately available, the emergency call does not have to wait for a unit to be dispatched. If there are several units available, the likelihood increases that a particular unit is closest to the incident scene. Swift troubleshooting translates directly into faster response times and, in many situations, more lives saved.

Time, Technology, and a Clear Chain of Command

The quality and operational effectiveness of the response team of any EMS unit are determined by many factors – several of them, unfortunately, outside the control of the EMS system. The time needed for medical care, for example, varies for each case. However, there may be technological solutions to eliminate or at least reduce certain problems to manageable size. The use of Global Positioning Satellite (GPS) tracking – to cite but one recent technological advance – can significantly decrease travel time to the incident scene. And it will, but only if the dispatcher uses the information available to him or her to locate and dispatch the EMS unit closest to the incident scene.

Some situations tie up EMS crews indefinitely, though, and hold the EMS resource in place. Among the most frequent scenarios involved are an overwhelmed emergency room with no stretcher available for another patient, a sick prisoner with no police officer available to escort him or her to the hospital, or a patient who will neither refuse care nor consent to transportation.
In these and most other situations where EMS resources are stalled, the role of the supervisor varies. However, regardless of the situation, the focus must still be on expediting release of the unit – but without jeopardizing the patient’s wellbeing. Supervisors can and, in such situations, should focus their efforts on resolving the problem. Unlike the other crew members, supervisors usually do not have to focus primarily and/or exclusively on the care and monitoring of the patient.

In addition, the EMS system itself may in certain specific situations empower the supervisor to “break the rules” – if and when necessary, of course. This is where the organizational rank and position of supervisors enables them to resolve most if not quite all operational issues without having to navigate the chain of command; they can simply speak to one another “boss to boss,” as it were.

The “Added Value” Provided by Medical Training

With a little troubleshooting, some delays can be minimized or ameliorated in other ways. In the case of the hospital without a stretcher, there may be stretchers available in other areas or departments of the same hospital – in those circumstances, a quick call to the hospital administrator may be all it takes to authorize a hospital staff member to get the stretcher.

Similarly, when a sick prisoner is not critically ill – and seems unlikely to become so – the EMS supervisor may: (a) authorize a crew to leave the police station and go back into service; and (b) at or about the same time, direct the police to call back when an escorting officer becomes available. (In at least some situations, though, the supervisor may also decide to remain at the police station to monitor the patient’s condition.)

Medical training for EMS supervisors is also important. If the supervisor is called on to take medical action, he or she must be medically trained. Also, medical training experience creates credibility and respect with the staff. Without proper training, the supervisor cannot perform the task of medically monitoring the patient at the police station, cannot pitch in and help either at the scene of an incident or when a vacancy must be filled on short or no notice, and cannot reasonably be allowed to participate in medical decisions.

The bottom line is that having proper EMS supervision available at the scene of an incident – particularly a mass-casualty incident – is an extremely valuable “bonus asset” in itself. EMS supervisors are by definition the best and most qualified to coordinate and organize the operations on the scene – and, if they have received the medical training required, they also represent an extra pair of hands if and when needed.

Joseph Cahill, a medicolegal investigator for the Massachusetts Office of the Chief Medical Examiner, previously served as exercise and training coordinator for the Massachusetts Department of Public Health, and prior to that was an emergency planner in the Westchester County (N.Y.) Office of Emergency Management.

Medical Countermeasures For Large-Scale Biological Attacks Survey

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Lessons Learned: Mass Casualties and Communication Gaps

By Sophia Paros, Viewpoint

Emergency communications is key to incident management – and critical both during and following mass-casualty incidents (MCIs). On 7 July 2005, four suicide bombers detonated bombs between 8:50 a.m. and 9:47 a.m. on three underground commuter trains and a street bus in central London. Those bombings broke down the below-ground communications infrastructure, making it impossible to communicate with passengers trapped underground and extremely difficult to communicate with incident command agencies, and hospitals, in close proximity to the mass casualty incident.

The first bomb was detonated at 8:50 a.m. on the eastbound Circle Line train traveling from Liverpool Street to Aldgate station. One minute later, the second bomb exploded on a westbound Circle Line train leaving Edgware Road station for Paddington station. At approximately 8:53 a.m., the third bomb detonated, on a southbound Piccadilly Line train traveling between the King’s Cross and Russell Square stations. The fourth bomb exploded at 9:47 a.m. on the top deck of a double-decker bus at Tavistock Square. The four attacks caused 52 deaths and an estimated 700 injuries.

London’s primary emergency response organizations began responding to the incident by evacuating and rescuing victims at the four bombing sites. However, there were a number of passengers trapped inside the underground tunnels who could not be reached immediately because the explosions had so severely damaged the trains' communications systems. Many passengers were totally unaware of what actually had happened and did not know if emergency responders were aware of the situation and/or if they were on their way to help. Smoke coming from the bombed compartments created additional fears among the surviving passengers.

Many passengers were totally unaware of what actually had happened and did not know if emergency responders were aware of the situation and/or if they were on their way to help; smoke coming from the bombed compartments created additional fears among the surviving passengers.

The overall confusion and panic was exacerbated considerably by the fact that the train drivers could not immediately communicate with the passengers or issue evacuation instructions.

Follow-Up Actions & Recommendations

According to a well researched follow-up report (Emergency Communications: Improving Communications with Train Passengers Trapped Underground following a Mass Casualty Incident – a Lesson Learned available only on Lessons Learned Information Sharing [LLIS.gov]), the London Assembly investigated the bombings and later recommended that Transport for London (TfL) – the principal transport service agency managing London’s entire transport network – update its train communications systems to help station staff and emergency responders provide critical information to train passengers much more quickly following a mass casualty incident. In any emergency incident, of course, communications should be initiated as soon as possible to alleviate confusion among victims and emergency responders. In mass-casualty incidents, hospitals in the vicinity also should be quickly alerted so that they will be ready to respond and receive incoming patients as soon as possible.

Incident Management: Alerting Hospitals in Close Proximity to a Mass Casualty Incident – another Lesson Learned exclusive to LLIS.gov – further elaborates on the London Assembly’s recommendations that all hospitals in close proximity to a mass casualty incident be notified about the incident much more quickly, even those hospitals that have not been specifically designated as “receiving hospitals.” Following the London bombings, the National Health Service (NHS), the United Kingdom’s largest public healthcare provider, quickly alerted all designated receiving hospitals...
in London to increase their readiness, but did not formally notify specialist and non-acute care hospitals relatively close to the incident sites – apparently because those hospitals were not on the official list of receiving hospitals.

Unfortunately, many specialty hospitals located in close proximity to each of the casualty sites – e.g., the Great Ormond Street Hospital (GOSH), a specialty children’s hospital – did not know about the train bombings until paramedics arrived at the hospital asking for equipment and other assistance. Nonetheless, even though the GOSH staff had not been fully aware of what had happened, they were able to quickly set up a field hospital and to help emergency responders rescue and treat a number of injured victims. Staff members later commented that they would have benefited from NHS guidance on how to respond to the incident had they been notified at the same time as the staffs on the original list of receiving hospitals. The London Assembly’s report recommends that London’s emergency plans be amended to provide early notification to all hospitals in the vicinity of a major incident, even those hospitals not designated as possessing major accident and emergency departments.

Mass casualty incidents, whether caused by terrorist attacks or natural disasters, usually happen very quickly, and communications infrastructure is critical in maintaining the discipline and order mandatory for incident-command and emergency-response situations. Taking to heart the lessons learned from the July 2005 bombings and applying them to local and state operations plans will and should help mitigate miscommunication problems in future incidents and eliminate other communication gaps that may already exist.

For additional information on these Lessons Learned and on mass casualty incidents, log into LLIS.gov at www.llis.dhs.gov.

Sophia Paros is an outreach analyst for Lessons Learned Information Sharing (LLIS.gov), the U.S. Department of Homeland Security/Federal Emergency Management Agency’s national online network of lessons learned, best-practices, and innovative ideas for the nation’s homeland-security and emergency-response communities. She received a dual bachelor’s degree in Computer Information Systems and Business from the College of Notre Dame of Maryland and is currently working on an M.S. in Information Security from The George Washington University.

Intelligent EOC Design: Today & Tomorrow
By James (Jim) Fulton, Founder and Board Member, ESi

In 1966, Gene Roddenberry introduced the world to Captain James T. Kirk and the Federation Starship U.S.S. Enterprise. Imagine standing on the bridge of the Enterprise with futuristic communication devices, computerized control panels, and real-time video chats with other life forms. From the bridge, Capt. Kirk could monitor and assist with any disaster that endangered the Enterprise or any other non-hostile ships and planets.

Much like the bridge of the Enterprise, the command room of an emergency operations center (EOC) is where major decision makers meet. The chairs and workstations are configured for efficiency, and all are within clear view of a large information display screen. This layout is critical for maximum productivity. The basic design criteria for an effective EOC include flexibility, sustainability, security, survivability, and interoperability.

The Physical Layout of an EOC
When designing an EOC, every little detail makes a difference. Arranged properly, the correct furnishings will facilitate maneuverability and communication within the EOC. A sufficient number of phones, computers, and other systems enable responders to handle a large influx of calls and requests during a disaster situation. Carpeted floors and angled glass viewing walls can reduce noise levels. The right building in the right place can not only withstand the elements but also remain operational both during and after a disaster.

On the other hand, improper design or inadequate information or process flows will hinder the proper functioning of an EOC. The use of carefully integrated electrical systems – e.g., computers, networks, audio, video, displays, and digital clocks – increases productivity and ensures that everyone is “on the same page.” The centralized display system – i.e., video walls, rear and/or front projection, as well as individual monitors/televisions/flat panels – in the command room provides a known location where all of this information can be viewed and monitored.
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These same displays provide EOC staff with the most current audio, video, and data available from inside as well as outside the facility. When a decision is made on the type of display screen, more expensive does not necessarily mean better. The most cost-effective option, experience has shown, is a front projection system using an existing wall that has been smoothed and painted – and where the images can be sized and moved as needed. But another detail to keep in mind is that, because of possible interference with the display, fluorescent lighting should not be used in command rooms equipped with projection display systems.

The critical information displayed on the screen is watched closely by the EOC decision makers, who use it to make life-saving decisions. Primarily for that reason, the facility and information transfer both must be adequately secured. To ensure the safety of the staff and the security of data, access to the facility itself should be restricted to authorized personnel only. Surveillance equipment also should be installed. A media briefing center or public-safety “answering point” outside the secure area can be provided for EOC managers, however, to provide the media, and the public, with status updates and warnings before, during, and after any significant event.

In addition to the many interior details mentioned above, there are also certain exterior details that need attention. One example: EOC facilities should be constructed with survivable shelter capabilities in mind. Power, backup power, and air filtration systems are other factors that need to be considered. The power supply should be able to handle the heating and air conditioning systems, lights, computers, phones, and other electronics systems and equipment both continuously and simultaneously throughout an event. Protection from carbon dioxide and other chemical infiltration also is needed, and can be provided by a full air-exchange or an over-pressure system.

Building materials and the selection of locations are also important factors involved in ensuring resiliency both during and after a flood, tornado, hurricane, earthquake, or other major event or incident. For example, an EOC located in a floodplain may have to be raised, or moved to higher ground, whereas one located in a tornado-prone area may have to be underground.

**The Virtual EOC**

Although it is still not possible for “Scotty” to “beam us up,” the computer age has opened the door for “beaming” information around the world. Before computers and cell phones became commonplace, EOC staff used landline telephones and portable radios as the primary means of sending and receiving critical information. As technology advanced, Crisis Information Management Software (CIMS) entered the game. Using CIMS systems, EOCs can now communicate and share information instantaneously with local and government officials.

CIMS streamlined the integration, organization, and tracking of essential data. Having instant access to critical asset links reduces response times, and improved public information sharing capabilities help maintain rapport with the public.

However, there are some pitfalls to avoid when choosing a CIMS solution – some of which fail because they are not user-friendly and/or require extensive training. Other CIMS systems have limited features or availability, and some are not “customizable” or scalable. These and other problems often create information bottlenecks and cause delays in response time. To avoid these problems, a system that offers a self-validating information flow eliminates
the bottlenecks while at the same time providing instant availability and unlimited sharing.

**EOCs of the Future**

As technology and communication equipment continue to change and improve, it is important for EOC managers to reevaluate both the design and technological capabilities of their facilities. Documenting an activation process, establishing procedures for each position, and performing regular drills and exercises are among the most effective ways to smooth the process. Some EOCs are equipped with the appropriate technology, but still report that various “things” are “just not working together very well.” Ensuring that information is moving efficiently between first responders and decision makers translates directly into more saved lives and/or fewer injuries.

Although there are certain general guidelines that should be followed in designing an EOC, it is important to evaluate each one based on the specific location’s individual needs. Less than two weeks ago – more specifically, on 30 November 2010 – President Obama declared December as “Critical Infrastructure Protection (CIP) Month.” EOCs play a key role in CIP because their information-sharing capacity and response capabilities contribute significantly to the resiliency of local utilities and businesses. However, in order to do so, EOCs must be capable of remaining operational throughout a disaster.

In September 2005, an EOC located near Lake Charles, Louisiana, suffered no damage to the structure itself or to its EOC systems. It remained continuously activated even though the eye of Hurricane Rita passed over it. However, not all EOCs are equally prepared for disasters. This month is a very good time, therefore, for EOC managers to reevaluate their own EOCs to see if their design and technologies are fully ready for disasters in 2011 and thereafter.


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After a 21-year Air Force career concluding with management of the Strategic Air Command’s “Underground” Command Center near Omaha, Nebraska, G. James (Jim) Fulton became emergency operations manager at the Savannah River Site. In that post he developed a national reputation for cost-effective, cutting-edge initiatives in emergency design. Since co-founding ESi, he has specialized in EOC systems integration and facility design, and also developed the company’s marketing strategy. He currently heads the company’s Business Development division and can often be found leading the ESi team at conference and convention venues throughout the United States.

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A Breath of Fresh Air

The Best Respiratory Protection at the Most Reasonable Cost

By Gary Dunn, Vice President, Sales & Marketing, AVON Protection Systems Inc.

The economic recovery process has been slow, and as 2011 quickly approaches government agencies are going to be looking very closely at budgets to see where spending can be cut. With such tight budgets, it will be more important than ever before for federal, state, and local agencies to make the most of their 2011 expenditures.

The inevitable juggling act will begin very early in the new year and each sector will be fighting for its fair share of the pie. One important operational area in the field of homeland security that should not be overlooked is respiratory protection. The tenth anniversary of the 9/11 terrorist attacks is approaching and, as the war on terror continues, U.S. warfighters and first responders are facing new challenges and threats. Much of the respiratory protection equipment in use today was procured shortly after 9/11, and should be under consideration for renewal, or replacement, early in the coming year.

Respiratory protection is vital in helping ensure that emergency response teams, police officers, fire and rescue personnel, and other first responders are properly protected while responding to incidents. Without the proper respiratory protection, first-responder teams will not be able to do their jobs.

Following are some tips to consider for best leveraging a budget to ensure that a team has the necessary respiratory protection equipment available to stay safe and properly protected while on the job.

Assess the Needs: The first step in assessing where and how to allocate a budget is to identify the potential “pain points” and areas of need. A careful checking of existing respiratory protection equipment is a good way to start. Many agencies are still using technologies that are more than 10 years old, which means that those units may no longer provide adequate protection against modern chemical, biological, radiological, and nuclear (CBRN) and/or other toxic industrial materials.

In addition, many improvements in the comfort and functionality of protection units have been made in the past few years. Law-enforcement officers and other first responders, and emergency management teams, will greatly benefit from innovations that reduce the stress of wearing PPE (personal protection equipment) gear by providing greater flexibility, a wider field of vision, and less breathing resistance.

It is particularly important that the face pieces of protective masks provide a tight seal, and fit comfortably, during an extended period of time. Panoramic visors that are highly flexible as well as both scratch- and impact-resistant provide users with the best possible field of view in a critical situation to ensure they can make proper decisions under stress and react quickly. Additionally, masks with pre-adjusted straps allow for fast donning.

The masks themselves, though, are not a “one-size-fits-all” solution. Multiple sizes are manufactured to ensure that the masks will fit a variety of facial shapes and sizes for maximum comfort and protection. After assessing the existing equipment, therefore, and developing a clear
understanding of the needs, the next step is to find the best equipment available to meet those needs.

**Look for Dual-Purpose Equipment:** As budgets become even more constrained than they now are, first responders should look for dual-purpose equipment that will help leverage their spending. When purchasing equipment, agencies should ensure that the equipment items purchased have dual-use capability across all markets. This is an excellent way to stretch dollars and provide first responders with equipment that offers the range of flexibility needed to meet a broad range of scenarios and requirements.

Tactical mask systems are available for different modes of respiratory protection such as an air-purifying respirator (APR), a self-contained breathing apparatus (SCBA), and a powered air purifying respirator (PAPR). Finding a mask that combines these modes of protection would provide protection across several professional disciplines – including but not limited to first responders (hazmat and CBRN), law enforcement, decontamination teams, specialist entry teams, chemical-spill cleanup units, bomb squads, and federal special response teams. Dual-purpose equipment such as the items described above can be used for several purposes and by many professionals, helping all agencies and organizations to get the “biggest bang for the buck.”

**Take a Modular Approach:** Purchasing one fully integrated, head-to-toe protective unit helps to reduce the potential of leaks and breaks, which can happen when putting various pieces of protective equipment together. In addition, the modular approach provides procurement officers with the ability to add on to one system year after year, without having to invest in a completely new unit. Currently, there are protective ensembles available that easily integrate with hydration units, communication devices, and eye protection. For complete protection, there are fully integrated protective suits, including respiratory systems such as masks, PAPRs, and SCBA with bomb suits, gloves, and boots.

Another benefit provided by the use of modular equipment is the possibility for improved interoperability between different groups. If multiple agencies need to coordinate efforts to respond to an incident, use of a common modular protection system could allow for the sharing of equipment and resources.

**Look for Grant Funding:** It is not mandatory for personal-protection manufacturers to receive National Institute for Occupational Safety and Health (NIOSH) or National Fire Protection Association (NFPA) approval for respiratory protection equipment. However, there are two benefits to purchasing products with NIOSH and/or NFPA certification. The first is that products certified by these organizations have been thoroughly tested and approved to provide the maximum protection possible from CBRN agents and particulate hazards – including but not necessarily limited to dust, mist, fumes, bacteria, and both viral and riot agents.

The second benefit, because it is now more important than ever before to stretch dollars and maximize purchases in order to provide professionals with the best equipment, is that it makes good sense from a budgetary point of view. Departments and facilities can apply for Department of Homeland Security grant funding when they are planning to purchase products that have received full certification and have a NIOSH or NFPA approval tag number.

Respiratory protection may be only a small piece of the overall preparedness puzzle, but it is a vital one that allows first responders, law enforcement officers, government agencies, and other emergency response personnel to perform at the highest levels when it matters most. Budgets will be tight in the coming year, but making the most out of respiratory protection spending is critical for ensuring that the right equipment is included in the equation.

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**Gary Dunn is Vice President of Sales and Marketing for Avon Protection Systems Inc.** ([www.avon-protection.com](http://www.avon-protection.com)). Avon Protection Systems is a leading designer and manufacturer of personal respiratory protection products, and offers the most comprehensive suite of solutions for a wide range of CBRN applications.
As the United States approaches the end of the first decade of the 21st century, few would argue with the statement that homeland security has become a higher priority for Americans than ever before in the nation’s history. During the past year alone, events such as the attempted Times Square and Yemen-to-Chicago bombings – coupled with the accidental BP oil spill that is still affecting the Gulf Coast – have demonstrated that officials at all levels of government must be prepared to respond to a wide range of dangers threatening the U.S. homeland.

At the forefront of the increased homeland-security efforts has been a growing synchronization between civilian agencies and U.S. military forces, particularly members of the National Guard, which has created and implemented several new programs in recent years to help state authorities cope with widespread emergencies. Prominent among the new or upgraded Guard units are its Chemical, Biological, Radiological/Nuclear, and Explosive (CBRNE)-Enhanced Response Force Packages (CERFPs) and its Weapons of Mass Destruction Civil Support Teams (WMD CSTs).

The Department of Defense is now once again setting the stage for expanded homeland security operations through creation of Homeland Response Forces (HRFs), which were previewed in the 2010 Quadrennial Defense Review Report. The HRFs, which are expected to be established in each of the country’s ten Federal Emergency Management Agency (FEMA) regions beginning next year, will significantly change the way National Guard units assist emergency responders by bringing a broad range of new capabilities to the scene of a mass-casualty incident or other major disaster.

Why Expand Homeland Security Now?
The 9/11 terrorist attacks and other events of the past decade have forever erased the mindset that the United States – previously protected by two oceans and its vast size – is immune to homeland attacks. That realization has also made it clear that, in the event of a widespread natural or manmade disaster, close and continuing coordination between civilian agencies and U.S. military forces is critical.

Although most often expected to play only a supporting role in disaster response, the U.S. military has taken several significant steps to expand its homeland-defense capabilities in recent years. In 2002, a major new Department of Defense command – the U.S. Northern Command, or US-NORTHCOM – was established both to provide command and control capabilities for homeland defense forces and to coordinate the military support provided to civilian agencies.

Similarly, the National Guard has initiated several programs designed to assist in homeland security operations – establishment of the CERFPs mentioned above, for example, which provide immediate assistance in search and extraction, medical triage, and decontamination operations; and creation of the WMD CSTs, which assist in the identification and handling of potentially dangerous materials. Congress has helped significantly by amending Title 32 of the U.S. Code to ensure that these forces and other assets can easily and quickly be called upon to provide assistance – usually through either the U.S. Department of Homeland Security or at the request of a state governor.

Pitfalls, Confusion, And a Promising Solution
Although efforts made by the federal government in general, and the U.S. military in particular, have helped to improve homeland-response capabilities in recent years, several real-life disasters have proved that there are still too many pitfalls and problems in coordinating communications and operations between military and civilian authorities. In 2005, for example – during Hurricanes Rita, Wilma, and, most notably, Katrina – Americans, and the rest of the world, saw firsthand how confusion over command and control authority can hinder response efforts. (Many decision-making officials also fear that the current response times of most National Guard “force packages” would not suffice in the event of either a surprise attack against the U.S. homeland or several natural disasters hitting various regions of the United States simultaneously or almost so.)

Building on the lessons learned from previous attempts at creating an effective and fully capable response force, the
Department of Defense proposed establishment of the HRFs as part of the larger restructuring of homeland defense efforts called for in the 2010 Quadrennial Defense Review. Each of the HRFs – which are designed to increase the National Guard’s operational flexibility and life-saving capabilities – will provide command and control capabilities for multiple CERFPs, WMD CSTs, and other National Guard assets to ensure both a faster and more effective response during and/or in the aftermath of a major disaster. In an effort to help reduce and mitigate confusion during a disaster, each HRF will also focus on planning, training, and exercising at the regional level between the various military forces and agencies usually called in to work together in the response and recovery operations following any disaster.

The new HRFs, which will be able to be called into an incident under U.S. Code Title 10, will be expected to have a 6-hour to 12-hour response posture similar to that expected of the current CERFPs. The units will usually be taken to the disaster scene via ground transportation – but can be transported by air if necessary. Additionally, and arguably most important, the HRFs will provide not only command and control, but also medical, search and extraction, decontamination, and security capabilities at the incident scene.

**A Seismic Change In Future Operations**

Establishment of the HRFs will not alter the way homeland incidents are managed in the United States. Local authorities currently manage about 85 percent of all emergencies that occur in the United States; only 11 percent are responded to – at the state level – by the National Guard, and an even smaller fraction (4 percent) require responses by active-duty military personnel at the federal level.

That distribution of response assignments is not expected to change. Americans can expect, however, that the HRFs – which will first be introduced in two states, Ohio and Washington, sometime in 2011 – will significantly change the way the National Guard offers support to local authorities during homeland response operations. The current CERFPs are usually assigned to a single state or highly populated area. Each HRF, in contrast, will still be controlled by governors at the state level – but equipped to lend support across an entire region encompassing more than one state. That change will help to ensure that the nation’s military forces are readily available to assist in response efforts anywhere within the United States – even in more isolated, less densely populated areas of the country.

The HRFs will also provide a faster response capability. That capability in itself may not seem overly significant – particularly given the fact that most National Guard assets already have a respectable response time. However, when combined with the medical, search and extraction, and decontamination capabilities of the HRFs, it means that future responders can expect more and better life-saving capabilities to be available at the incident scene much earlier than was ever before possible.

Given all that Americans have had to endure so far this century – from acts of terrorism to natural catastrophes to manmade environmental disasters – it seems likely that their new and/or expanded capabilities will help the HRFs bring the nation a giant step closer to the level of homeland response readiness the country will need to overcome the numerous and diverse threats it will undoubtedly be facing for years and perhaps decades to come.

**The Department of Defense is setting the stage for expanded homeland security operations through creation of Homeland Response Forces (HRFs), previewed in the 2010 Quadrennial Defense Review Report, that are expected to be established in each of the country’s ten Federal Emergency Management Agency regions beginning next year**

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*Brad Stobb served a 20-year career with the U.S. Army; his most recent assignment was as a member of the 82nd Airborne Division on a deployment to Afghanistan. He is now a regional support manager for DHS Systems LLC, whose Deployable Rapid Assembly Shelter (DRASH) system has been trusted by military and civilian agencies alike.*
A Mandatory Need for Gold Standard Sampling

By Rodney Hudson, Founder/Owner, QuickSilver Analytics Inc.

Since the 11 September 2001 attacks, the United States has spent huge sums of money in preparation for responding to a possible WMD (weapon of mass destruction) attack. A significant portion of the funds allocated has been intended for the detection and identification of the WMD agent(s) that may be used by terrorist organizations. Among many advances in detection and identification that have resulted are quicker response times for handheld detectors, increased sensitivity, and improved interconnectivity via wireless networks.

The protective clothing worn by responders also has improved significantly, and has resulted in increased “stay” times, more comfortable and longer “wearability,” and better protective masks. The United States has also extensively developed and conducted numerous training exercises for the nation’s first responders and has stood up a National Guard Civil Support Team in every State.

However, the standard practice used for environmental sampling remains largely unchanged. Here it should be remembered that, when first responders are required to don a so-called “Level A” suit and directed to enter a hot zone to take environmental WMD samples, they are risking their own lives for the sake of others. For that reason alone, it is imperative that the results achieved are worth the significant risks involved.

Gold-Standard Results Require Gold-Standard Samples

To conduct what might be considered “gold standard” analyses, the samples themselves must be gold standard as well. Unfortunately, first responders are too often given sampling equipment that has either not been tested properly for interferences, not packaged to avoid cross-contamination, not acceptable to the intended analyzing laboratory, and/or not capable of being defended in court. In short, the best sampling tools should be provided for responders – tools that not only will deliver accurate and reproducible results but also withstand scrutiny in court.

The last aspect of this multifaceted sampling challenge – the component encompassing standardized sampling procedures – has not yet been fully or adequately addressed. However, the American Society of Testing Materials (ASTM) has published a National Standard for the Sampling of Suspicious Powders from Non-Porous Surfaces (E2458-10). That standard was negotiated with all stakeholders in 2006 (and revised in 2010), but is still not widely used despite the fact that, according to the Federal Bureau of Investigation’s WMD Directorate, over 30,000 “white powder incidents” have been reported since 2001.

Another indicator of nonconformity involves the way in which laboratory WMD analyses are handled. Without having control over the quality of the samples received, laboratory staff must “make do” with what they are given. That approach obviously leads to a greater chance for sampling errors.

Suspicious Procedures And Misleading Conclusions

Because the field screening techniques now used are not always dependable, first responders currently take environmental samples of all suspicious substances found at white-powder incidents and send them to a Gold Standard Lab. However, the first responders themselves continue to use inadequate sampling tools – with no interference testing or cross-contamination avoidance – and to follow local sampling techniques. Samples should be reliable enough to stand up in court – but that requirement cannot be guaranteed under current circumstances and using the sampling tools and techniques now available.

Any sampling process is only as good as its weakest link. In the overall sampling and analysis process, an accurate sample is needed to guarantee a reasonably reliable analysis. To meet the ASTM National Standard previously mentioned, therefore, the sampling equipment now being used needs to be re-evaluated and, if necessary, replaced with more reliable tools.

It is generally recognized that the budgets for first responders are necessarily limited, and likely to remain so for the foreseeable future, but the cost of providing higher-quality sampling tools and improved standardized procedures is relatively small: (a) when considered as a percentage of the overall cost of an effective WMD response; and (b) when compared to the much higher cost of an inaccurate, misleading, and/or legally indefensible analysis.

Rodney Hudson is a retired Army veteran with 21 years of service and the founder/owner of QuickSilver Analytics (QS) Inc. QS is an ISO 9001-2008 registered, Service Disabled Veteran Owned Small Business that has provided forensic quality CBRNE sampling kits to the First Responder community since January 2000. QuickSilver (QS) has been providing WMD sampling kits and tools of forensic quality during that same time frame, and currently manufactures the only sampling kit fully compatible with the ASTM Standard E2458-06 for the sampling of suspicious powders from non-porous surfaces.

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Looking back, it seems that 2010 should make those working in healthcare emergency preparedness very proud. The hard-working professionals in that field recovered well from the tremendous demands placed on them by the H1N1 pandemic in 2009 – while they also were managing an excess of other emergency situations with both effectiveness and grace. The positive impacts seen from emergency managers’ efforts as they responded to the earthquake in Haiti, dealt with flooding and other serious natural events, and managed not only “active shooter” and other violent in-hospital incidents have raised the stakes and added to the proud heritage of the dedicated and tireless professionals working in healthcare, emergency medical services (EMS), and public health.

Looking forward to 2011, many of those same professionals will manage events similar to those seen in the past, but there also will be a few completely new and unique situations that will challenge the industry in unforeseen ways. For example, at this time last year, who would have guessed that oil would pump into the Gulf of Mexico for three months or that 33 miners in Chile would spend 69 days underground before being successfully rescued?

Sports such as college football provide helpful analogies for the value of selfless teamwork. It is no surprise that the best teams are usually the ones that have prepared a clear and well-practiced game plan. The same holds true for emergency management and the professionals who practice the craft, like well-trained athletes. To make 2011 a winning year, a game plan should be formulated and followed.

Game Changer: Social Media in Charge
Although truly major changes in, or additions to, the Joint Commission Emergency Management Standards in 2011 are not expected, it is predicted that there will be myriad new demands on emergency managers. One of those demands will be to develop a viable social media strategy.

Private industry will necessarily be the forerunner in improving the coordination and valuable use of social media in conveying key messages. Emergency managers should watch this evolution closely, and carefully consider how to apply and validate the lessons learned during actual disasters or emergencies. (The Harvard Business Review recently published a very insightful article [see footnote 1 below] about using a central coordination point for ensuring effective use.)

Teamwork: It Takes a Village
The H1N1 pandemic illustrated to many the importance of long-term partnerships. In support of this concept, in April 2010, Time Magazine [see footnote 2] reported on five lessons learned. Briefly summarized, those lessons were as follows:

1. The H1N1 global flu pandemic was more serious than the death toll suggested.
2. The pandemic you prepare for may not be the one you get.
3. Prevention means surveillance.
4. Vaccine manufacturing is outmoded – but vaccines are not a panacea.
5. It all boils down to communication and trust.

In almost every conversation in emergency-management circles, the single most common comment about H1N1 has been that “We were lucky.” Louis Pasteur once said that “Chance favors only the prepared mind.” More recently, Edna Mode (of The Incredibles) remarked that “Luck favors the prepared.” The consensus is clear, though: The emergency managers who endured “Pandemic Flu Planning Fatigue” in the past really benefited significantly from the plans and training exercises – which almost without exception were well written, implemented, and practiced.

One of the most beneficial aspects of those earlier efforts was the forced coordination with other community response agencies. Actually, in all of the federal grant programs in this area, community relationship building and collaboration continues to be one of the best outcomes provided by the funding – and serves as a critical tool for preparedness and response. Collaboration can enhance surveillance, better prepare communities for almost any hazard, and reinforce timely communications by building trusted relationships. Similarly, to continue the college football analogy, there is not a winning team in this year’s bowl games that does not recognize the value of excellent teamwork, communication, and coordination.
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In community planning meetings, emergency managers should follow Gundy’s example and review “the right things” that will make their own preparedness efforts more successful – and then practice those things to develop a winning strategy for planning, then achieving, their 2011 planning objectives and priorities. Time and time again, local and regional exercises, in a variety of different scenarios, have proved that the greatest success is achieved through exercises that: (a) Use effective and collaborative communication and messaging; (b) Are designed to elicit a multidisciplinary response by using well-established relationships with agencies and individuals; and (c) Have established clear objectives in advance that are both succinct and measurable (with tangible metrics).

It is recognized that the preceding suggestions are, for the most part, familiar ideas that seem to re-emerge fairly regularly. However, in 2011, all emergency managers should very carefully consider, yet again, how to integrate new technologies, relationships, experiences, and skills in their plans for resetting the preparedness bar. The great Joe Namath expressed it very well when he said, “Football is an honest game. It’s true to life. It’s a game about sharing. Football is a team game. So is life.” The same is true for emergency preparedness.

For additional information:
2. On the Time Magazine article, click on “http://www.time.com/time/health/article/0,8599,1985009-1,00.html”

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FEMA Official to Give Opening Keynote Address at The 2011 Public Health Preparedness Summit
By Jack Herrmann, MSEd, NCC, LMHC Chair, 2011 Summit Planning Committee; Senior Advisor, Public Health Preparedness, National Association of County and City Health Officials

Public health professionals from across the country will convene in Atlanta, Georgia, on 23-25 February 2011 for the annual Public Health Preparedness Summit. The 2011 Summit will focus on the National Health Security Strategy (NHSS), an initiative – released in early 2010 by the U.S. Department of Health and Human Services (HHS) – that provides a framework for a broad range of stakeholders to build and sustain the capabilities that will enable the United States to achieve national health security. The two primary goals of the NHSS are to build community resilience and to both strengthen and sustain the nation’s health and emergency response systems. The Summit will offer a variety of plenary, town hall, interactive, and sharing sessions devoted to addressing the primary objectives of the NHSS and related policy issues.

This year’s opening keynote address will be given by Richard Serino, Deputy Administrator of the Federal Emergency Management Agency (FEMA), who has over 35 years experience in emergency management and emergency medical services. Serino plans to discuss FEMA’s role in building the nation’s resilience to prepare for, respond to, and recover from disasters and other public health emergencies. As the nation’s primary response leader, it is critical that FEMA partner with other federal agencies – and with other private- and public-sector organizations and agencies – to identify response gaps and ensure that the necessary capabilities are in place to respond to events that have the potential to adversely affect the nation’s critical infrastructure.

Throughout the coming year, public health preparedness leaders, and members of Congress, will focus considerable attention on the reauthorization of the Pandemic and All-Hazards Preparedness Act (PAHPA), which was first passed by Congress in 2006. PAHPA was, and is, a critical legislative milestone for the preparedness field; it established the first Office of the Assistant Secretary for Preparedness and Response (ASPR) and provided the funding needed to build much of the public health preparedness infrastructure, especially in the area of medical countermeasures research and development.

A prestigious panel of federal public health leaders also will share their perspectives during the 2011 Summit on the future of the Pandemic and All-Hazards Preparedness Act through the reauthorization process. The panelists now scheduled include Rear Admiral Nicole Lurie, Assistant Secretary for Preparedness and Response; Dr. Alexander Garza, Assistant Secretary and Chief Medical Officer of the DHS (Department of Homeland Security) Office of Health Affairs; Dr. Robert Kadlec, former Special Assistant to the President for Homeland Security; Dr. Ali S. Kahn, Director, Office of Public Health Preparedness and Response of the Centers for Disease Control and Prevention; and Brian Kamoie, Senior Director for Preparedness Policy, of the White House National Security Staff.

The final day of the conference will feature closing remarks by Dr. Thomas Frieden, Director of the Centers for Disease Control and Prevention, who plans to address the CDC’s role in measuring state and local preparedness through a newly reformed Public Health Emergency Preparedness (PHEP) grant program. The PHEP program will focus on the strengthening of 15 capabilities in such critical areas as surge management, incident management, countermeasures and mitigation, biosurveillance, information management, and community resilience.

For additional information on the 2011 Public Health Preparedness Summit visit www.phprep.org

Jack Herrmann is the senior advisor for public health preparedness for the National Association of County and City Health Officials (NACCHO). In that role, he oversees the organization’s preparedness portfolio, which is aimed at strengthening the preparedness and response capabilities of local health departments. He also serves as the organization’s chief public health preparedness liaison to local, state, and federal partner agencies, and chairs the annual Public Health Preparedness Summit. He also has extensive experience in disaster management and response and has participated in numerous disaster relief operations with the American Red Cross. Herrmann holds a bachelor’s degree in Sociology from St. John Fisher College, and a master’s degree from the University of Rochester (N.Y.).
Massachusetts, Illinois, Tennessee, and Minnesota

By Adam McLaughlin, State Homeland News

Massachusetts
BU Scientists Develop Biological Pathogen Detection Sensor

Scientists at Boston University have developed a new biological sensor that could be used to rapidly detect a wide range of viral pathogens – including the lethal Ebola and Marburg viruses – the institution announced late last month.

As with other viruses that produce symptoms not necessarily indicative of a viral infection, Marburg and Ebola outbreaks can be very challenging to diagnose – a problem that could be further complicated by the current reliance on diagnostic systems that not only need substantial supporting infrastructure but also, in many if not all situations, require a lengthy period for preparation of a biological sample. The new biodetector, however, is capable of sensing active viruses with “little to no” sample preparation, according to a Boston University press release.

“Our platform can be easily adapted for point-of-care diagnostics to detect a broad range of viral pathogens in resource-limited clinical settings at the far corners of the world, in defense and homeland-security applications as well as in civilian settings such as airports,” said Hatice Altug, leader of the research team, in comments included in the release. “By enabling ultraportable and fast detection, our technology can directly impact the course of our reaction against bioterrorism threats and dramatically improve our capability to confine viral outbreaks.”

The BU scientists received university funding as well as financing from the U.S. Army Research Laboratory. Through joint research with the Army Medical Research Institute of Infectious Diseases, they were able to confirm the biodetector’s ability to sense, in a typical laboratory environment, the presence both of hemorrhagic-fever virus surrogates and of such pox viruses as smallpox or monkeypox.

Ebola and Marburg viruses, which cause hemorrhagic fever in humans, are classified as high-risk agents that could be used in a biological weapons attack. Smallpox also has been identified as a potential bioterror agent.

The new biosensor is the first to detect intact viruses by exploiting plasmonic nanohole arrays (PNAs), or arrays of apertures with diameters of about 250 to 350 nanometers “on metallic films that transmit light more strongly at certain wavelengths,” according to the BU press release.

“When a live virus in a sample solution, such as blood or serum, binds to the sensor surface, the effective refractive index in the close vicinity of the sensor changes,” the release continues, “causing a detectable shift in the resonance frequency of the light transmitted through the nanoholes. The magnitude of that shift reveals the presence and the concentration of the virus in the solution.”

University officials said that the research scientists are now developing a miniature version of the detector that is intended for field use, and are planning to test the sensor through the carefully controlled use of Marburg and Ebola samples.

Illinois
IEMA Develops Preparedness Video Game

The Illinois Emergency Management Agency (IEMA) is using a number of ways to spread the “disaster-preparedness message” to teenagers and younger children living in communities throughout the state. An activity book uses a storyline that teaches young children about safety rules in general, and supplements it with such mind-challenging activities as mazes and crossword puzzles. High schoolers can participate in the Ready Illinois High
School Challenge, which encourages them to write scripts for 30-second public-service announcements that the state plans to produce. And the college challenge seeks to engage young adults by having them produce a public-service announcement to be included in IEMA’s “TV campaign for preparedness.”

A parallel program, to reach Illinois’ middle schoolers, was missing, though – until 15 November, when IEMA released a video game that seeks to provide an entertaining way for teenagers and younger children to learn more about safety. “We knew that we needed to do something that would be fun, but they [the teenagers] are too old for coloring books and activity books at that age,” said Patti Thompson, communications manager for IEMA. “So it just seemed like the video-game route was something new to do, a new direction to go.”

The Day the Earth Shook video game uses an earthquake scenario: (a) to demonstrate the need for a disaster supply kit; and (b) to identify the safest locations to find refuge in a house, school, or other building during an earthquake. The agency used an earthquake scenario in the game for two principal reasons, Thompson said: First, Illinois is known to be at risk for an earthquake because there are two seismic zones in the southern part of the state – one of them the New Madrid Seismic Zone, the site of four major earthquakes that shook the area in 1811-12 and were felt hundreds of miles away. Second, other emergencies – a major fire, for example – can quickly and easily happen during an earthquake, so incorporating other emergencies into “the earthquake game” was an effective way to provide additional information in one and the same scenario.

Work on the game started about a year ago and, to develop it, IEMA partnered with the Electronic Visualization Lab at the University of Illinois at Chicago; the National Center for Supercomputing Applications; and the Center for Public Safety and Justice. IEMA told the partners not only what aspects of preparedness to include in the game, but also what the agency most wanted to emphasize. The project cost (about $286,000) was funded through grants from the U.S. Department of Homeland Security, according to a statement from the agency.

The video game was initially demonstrated to the state’s county emergency managers at IEMA’s annual conference.
in September. Although the game was not ready to “go live” at that time, the emergency managers participating in the conference were able to play the game and familiarize themselves with it so they would be ready to encourage the young people in their communities – and many others, of course – to play it.

Fifth-graders at Benton Grade School participated in the unveiling of the game and, according to Thompson, provided very helpful positive feedback. “Some of them were already asking when the next version is going to come out,” she said.

Additional information about “The Day the Earth Shook” video game is available at “http://www.ready.illinois.gov/”

Tennessee Hosts Workshop in Preparation for 2011’s National Level Exercise

Although the next National Level Exercise (NLE) is still six months away (May 2011), participants at all levels of government have already started to prepare for what promises to be a major homeland-preparedness event.

And getting ready for the drill is no small task in itself – next year’s NLE is already being hailed as one of the largest emergency exercises in the nation’s history, and will be the first to turn the spotlight on an historic natural disaster.

In preparation for NLE 2011, a Resource Allocation Workshop – in Nashville, Tennessee, from 30 November to 3 December – brought together the eight participating states: Alabama, Arkansas, Illinois, Indiana, Kentucky, Mississippi, Missouri, and Tennessee. Also in Nashville were representatives from: the federal government’s emergency-support transportation, energy, and mass-care agencies; local and regional partners; private-sector leaders (primarily from the retail and critical-infrastructure fields); and a number of volunteer organizations.

The Central United States Earthquake Consortium (CUSEC) sponsored the workshop. National Guard Brigadier General John W. Heltzel, chairman of the CUSEC board of directors, said the workshop’s primary goal was to increase the level of understanding about state plans and determine what the emergency-support agencies could provide. “We wanted to change the process so we could change the outcome,” he said.

Among the principal activities carried out during the workshop were the following: (a) Each state briefed its emergency response plan, developed – as called for in the NLE scenario – to cope with an earthquake threat; (b) Two and a half days were spent in a “round robin format” in which each state met with each ESF (emergency support function) partner to discuss what those partners could provide to help the states; and (c) A “back briefing” was included during which the ESF representatives discussed their concepts of execution and what they believe to be the main issues that need additional study and/or discussion.

“I think everybody left with a better understanding of how the roles and responsibilities fit together,” Heltzel said, “and I believe that people are better prepared now to execute that plan than ever before.”

NLE 2011 will exercise the response to a catastrophic earthquake on the southwestern segment of the New Madrid Seismic Zone, which is located in the Southern and Midwestern regions of the United States. What makes this scenario particularly timely is that it will occur during the bicentennial year of the historic New Madrid earthquakes – which started on 16 December 1811 with a magnitude 7.7 quake. Six more earthquakes followed shortly thereafter that ranged from magnitude 6.0 to 7.7 as well as, according to the U.S. Geological Survey, an estimated 200 or so moderate to large aftershocks.

“In the past, National Level Exercises have always had a little bit of lack of realism simply because we … picked some kind of man-made event,” said Heltzel, who also serves as director of the Kentucky Division of Emergency Management. “Well,
Minneapolis Implement “... See Something, Say Something” Campaign at Mall of America

In early December, U.S. Department of Homeland Security (DHS) Secretary Janet Napolitano, speaking on behalf of DHS and its partnership with the state of Minnesota and Mall of America officials, applauded the expansion of the DHS national “If You See Something, Say Something” public awareness campaign throughout Minnesota – which included a major effort from the Mall of America as well as other public venues across the state.

“Homeland security begins with hometown security, and every citizen plays an important role in ensuring America’s safety,” Napolitano said. “The ‘If You See Something, Say Something’ campaign will provide the citizens of Minnesota and the many shoppers and visitors to Mall of America with the tools to identify and report … to the proper law-enforcement authorities … [any] indicators of terrorism, crime, and other threats” that might be detected.

The “If You See Something, Say Something” campaign – originally implemented by New York City’s Metropolitan Transportation Authority and funded, in part, by a $13 million allocation from the DHS Transit Security Grant Program – is a simple and effective program designed to engage the public and key frontline employees to identify and report – to the proper transportation and law-enforcement authorities – any overt indicators of terrorism, crime, and/or other threats.

The expansion of the campaign to the Mall of America – one of the nation’s largest and best known shopping centers, situated in Bloomington, Minnesota, not far from the “Twin Cities” (Minneapolis and St. Paul) – will distribute both print and video advertisements throughout the mall’s shopping and amusement park areas to help the thousands of daily tourists and shoppers identify potential threats and suspicious situations. “If You See Something, Say Something” materials were unveiled at the Mall of America by DHS Protective Security Advisor Glenn Sanders, Mall of America Security Director Major Douglas Reynolds, Hennepin County Sheriff Richard Stanek, and Minnesota Public Safety Commissioner Michael Campion.

“We are excited to partner with Mall of America and the Department of Homeland Security on their ‘If You See Something, Say Something’ campaign,” said Campion. “We value our private partners and the work they do. Their efforts will go a long way to enhancing our statewide ‘If You See Something, Say Something’ campaign.”

The state-wide expansion of the campaign will begin in Minneapolis and St. Paul and will leverage Minnesota’s participation in the Nationwide Suspicious Activity Reporting (SAR) Initiative – an administration effort to train state and local law-enforcement personnel to recognize behaviors and indicators related to specific terrorist threats and related crime.

Since last summer, DHS has worked with its state, local, and private-sector partners, as well as the Department of Justice, to expand both the “See Something, Say Something” campaign and the Nationwide SAR Initiative to communities throughout the country. Among the more prominent successes achieved are the recent state-wide expansion of the campaign throughout New Jersey and the formation of new partnerships with such entities and organizations as the American Hotel & Lodging Association (AH&LA), Amtrak, the Washington Metropolitan Area Transit Authority (WMATA), the general aviation industry, and six state and local fusion centers throughout the Southeastern United States.

Adam McLaughlin currently serves as the Manager of Emergency Readiness, Office of Emergency Management, for the Port Authority of New York and New Jersey. His responsibilities include both the development and coordination of Port Authority interagency all-hazards plans and the design and development of emergency preparedness exercises. A Certified Emergency Manager (CEM), he is a former U.S. Army officer – and a veteran of the war in Afghanistan – and a member of the Faculty of Senior Fellows for the Long Island University’s Homeland Security Management Institute.
This year’s theme, “The National Health Security Strategy: Building a Resilient Nation” comes from the release of the NHSS and the companion Biennial Implementation Plan (BIP), together presenting significant public health preparedness initiatives that have implications at all levels of government and the private sector. The Summit will provide an opportunity for attendees to better understand the goals and objectives of these two plans and provide feedback to national leaders to further inform the future development of these initiatives. For more information on the NHSS and BIP please visit www.phe.gov.

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To learn more about the 2011 Public Health Preparedness Summit, visit www.phprep.org.