

Bravo Zulu Heroes on the Hudson



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Publisher's Message

By Martin (Marty) Masiuk



Bravo Zulu! – the naval signal that means “well done” – certainly summarizes the activities on the Hudson River on January 25, which serve as this month’s cover story. Adam McLaughlin, our State Homeland News writer, was among the many ready to respond. When discussing particulars about writing an article about the event, he offered that there “just was not that much to write about” – which is exactly what makes his article so important.

The greater New York Metropolitan area was ready. Since the 2001 terrorist attacks – followed by uncountable hours of planning, exercising, and the “exchanging of business cards” – the region’s preparedness capabilities had improved dramatically. When the moment of truth arrived, the prepared prevailed. Many moving parts came together to form a seamless whole, and were fully ready to handle the unforeseen. Fortunately, the unforeseen did *not* happen. A highly experienced captain and his heroic crew performed brilliantly. Even after Flight 1549’s spectacular landing many things could have gone wrong – but they did not. Within minutes, those ashore who would be involved in the response-and-recovery operations did what they had been trained to do. McLaughlin’s Special Report on the event is a very good read for our audience.

Complementing his article is a webinar presentation on Incident Management Teams (IMTs) moderated by William MacKay (Fire Chief, City of Niagara Falls, N.Y.) and featuring Mike Lombardo (Commissioner/Fire Chief of Buffalo, N.Y.), John McGrath, Fire Chief, City of Raleigh, N.C.), and Glen Rudner (Hazardous Materials Officer for the Commonwealth of Virginia) – all of whom share their own personal experiences on the need for and use of IMTs. The presentation is available: (a) free, with registration; and/or (b) on demand at http://www.domesticpreparedness.com/Briefing_Room/.

Among the several other particularly timely articles included in this month’s printable issue are: (a) a comprehensive report by William MacKay on the genesis, development, and now widespread deployment of IMTs to cities and states throughout the country; (b) a behind-the-scenes look, by Rodrigo Moscoso, at the high-tech communications and other systems and equipment – as well as the all-important “human glue” factor – that contributed so much, and so well, to the success and safety of the 20 January inauguration of President Barack Obama; and (c) Corey Ranslem’s analysis of the growing problem posed by an increase in piracy throughout the world’s oceans, particularly in the waters off the eastern coast of Africa.

In addition: Diana Hopkins discusses new opportunities for the private sector to propose preparedness standards; Joseph Cahill looks at the mounting cost problems affecting most if not all U.S. hospitals; Ted Tully reports on the need for and difficulties related to “surge” planning; and the versatile Adam McLaughlin serves as anchorman with four short reports on recent preparedness news items from the great states of California, Illinois, Tennessee, and Texas.

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About the Cover: Rescue workers from Coast Guard vessels and privately owned workboats and other small craft swarm to the rescue of the passengers aboard US Airways Flight 1549 (tail section visible at lower right) after the aircraft’s emergency crash into the Hudson River on 15 January. For more about the crash landing and the heroic rescue effort that followed see Adam McLaughlin’s Special Report beginning on page 5 of this issue of DPJ. (Photo by Mario Tama/Getty Images)

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Special Report

Worst-Case Preparedness & a Real-Life Miracle

By Adam McLaughlin, Emergency Management



Since the terrorist attacks of 11 September 2001, the United States has allocated an unprecedented amount of time, money, and personnel as well as material resources to strengthen the nation's domestic-preparedness capabilities. While adhering to the guidelines spelled out in HSPD 8 (*Homeland Security Presidential Directive 8: National Preparedness*) the U.S. federal, state, and local governments – working in close cooperation with private-sector agencies and organizations – have focused particular attention on integrating their individual and collective resources to: (a) reduce risks and lower vulnerabilities throughout the country; (b) be much better prepared to prevent and/or cope with mass-casualty disasters, natural or manmade, in the future; and (c) provide much better protection for American citizens, and the nation's critical infrastructure, than was available, or even possible, at the time of the 9/11 attacks.

To carry out this ambitious mandate, the then newly created U.S. Department of Homeland Security initiated an all-hazards and capabilities-based approach several years ago to the management of risk – any type of risk, occurring at any time, anywhere in the country. This approach can be defined in layman's terms as planning, in a period of sometimes chaotic uncertainty, to provide capabilities suitable to deal successfully with a wide range of threats and hazards while working within an economic framework that necessitates both prioritization and choice. In summary, HSPD 8 presents political jurisdictions, at

every level of government, with three thought-provoking questions: “How prepared do we need to be?” “How prepared are we now?” “And how do we prioritize efforts to close the gap?”

The preparedness theme has been especially important to the state, local, and private-sector agencies within the New York and New Jersey metropolitan area – which suffered the largest number of casualties as well as the greatest economic damage from the 9/11 attacks. Within this hub of international economic and commercial activity, the NY/NJ agencies have enhanced their individual and collective emergency and disaster-preparedness capabilities by focusing on such critical factors as interagency planning, coordination, and training. Although many visible improvements, in planning as well as in capabilities, have been made over the past seven-plus years, the single most important question – “Are We Ready?” – continues to loom in the institutional mindsets of all New York/New Jersey agencies and jurisdictions with homeland-security responsibilities. They did not realize, of course, when and under what circumstances their plans would be put to the test.

Shortly after 3:30 p.m. on 15 January 2009, the emergency-response agencies of the two-state region were once again presented with an unsought opportunity to test their capabilities and answer that very question. Less than ten minutes earlier – i.e., at about 3:24 p.m. – US Airways Flight 1549 had departed LaGuardia International Airport in Queens for Charlotte, N.C.; there were 150 passengers and a five-

person crew aboard. Shortly after departure, the pilot, Captain Chesley B. “Sully” Sullenberger III, reported what he believed to be a bird strike and declared an emergency. After realizing that an emergency landing at Teterboro Airport in northern New Jersey was not possible, he crash-landed the aircraft in the icy Hudson River.

An Unexpected Disaster, But an Immediate Response

The 911 calls started immediately, initiating both a Manhattan-based response – led by the New York Fire Department (FDNY) and the New York Police Department (NYPD) – and a New Jersey response led by Hudson County and the City of Weehawken. Clearly, the emergency already had been mitigated to some extent by Sullenberger’s superior flying skills and many years of experience. The first emergency responders on the scene – the private-sector ferry crews who had personally witnessed the crash landing and were rushing to the stricken aircraft as fast as possible – also were key players in what turned out to be an unbelievably successful rescue operation. Nevertheless, the emergency-response actions that took place on both sides of the Hudson exemplified just how far interagency coordination has come in the region since 2001.

Since its inception just after the 2001 attacks, New Jersey’s Emergency Medical Service Task Force (EMS TF) has focused particular attention on pre-planning – another way of describing the preparations for disasters that may never happen. The EMS response in New Jersey was initiated by Weehawken EMS, a combination paid/volunteer service that typically staffs one basic life support (BLS) ambulance per shift. Shortly after

the crash, a unified command post was established at the Port Imperial Ferry Terminal, and the EMS branch director immediately sent a request to the EMS coordinator at Hudson County’s Office of Emergency Management to provide additional EMS assets.

Within just a few minutes after that request had been sent, six National Incident Management System (NIMS) Type IV ambulance strike teams, each of which had been assigned five BLS ambulances, and four Type I ambulance task forces (each consisting

[**Click to view
US Airways 1549
Slideshow**](#)

of five BLS ambulances and one advanced life support ambulance) were being assembled and dispatched from counties in northern and central New Jersey. In addition, the New Jersey Department of Health and Senior Services (a major presence on the EMS TF) responded by providing three mass-care response units (each capable of treating 100 patients), a special operations vehicle for logistical support, and two staging-area management trailers to assist with check-in and demobilization.

The Hudson County Waterfront Strike Team also responded, by providing three mass-casualty trailers, each one capable of treating 25 patients. Finally, the New Jersey State Police Aviation Bureau established an EMS helibase at Morristown Airport to support three medical evacuation helicopters that had been requested. In less than two hours, more than 200 emergency medical technicians and paramedics

had responded and were in position to help the Weehawken EMS in any and every way possible.

The exceptionally well coordinated effort of these agencies in the early minutes of what later came to be known as “the Miracle on the Hudson” resulted in the successful rescue and speedy transfer of 58 passengers (more than one third of those embarked on the aircraft), who were evacuated to healthcare facilities ashore on the New Jersey side of the Hudson River. Most of these patients were suffering minor injuries and for that reason were transported (as fast as was safely possible) to five New Jersey hospitals – where doctors, nurses, and other emergency-room staff were already waiting to treat them. Meanwhile, three mass-casualty contingency plans developed by the NJ EMS TF – the New Jersey Task Force Deployment Strategy, the New Jersey Statewide EMS Staging Area Management Plan, and the Port Security EMS Annex – were implemented during the incident to provide a coordinated and, as it turned out, extremely successful response.

Meanwhile, on the Other Side of the River ...

During this same time frame, senior New York City officials at a unified command post were coordinating similar response tasks across the river on a pier adjacent to 44th Street along the city’s West Side Highway. After the 2001 terrorist attacks, the NYC public-safety agencies recognized the need to integrate their regional preparedness and response organizations, especially during complex multi-agency and multi-jurisdictional incidents. A major milestone in that effort occurred in 2005, when the Citywide Incident Management System (CIMS)

was published as the city's basic incident-management doctrine. CIMS is the NYC counterpart of the federal government's NIMS policy statement, and designates varying degrees of authority to the city agencies performing and supporting emergency-response efforts.

Under the CIMS framework, New York City's emergency-response agencies still implement the basic principles set forth in the Incident Command System, but have developed procedures to better address New York City's own specific incident-management requirements. For example, CIMS classifies city-agency roles at incidents as follows:

- Primary Agency: Agencies with Incident Command responsibilities;
- Coordinating Agency: The Office of Emergency Management is the city's Coordinating Agency; and
- Supporting Agency: Agencies that support incident operations by providing a broad spectrum of resources of all types.

The CIMS guidelines also identify what are called Core Competencies – i.e., the functional areas of human expertise expected to be required at an incident. Core Competencies relate specifically to tactical operations managed by the Incident Command's Operations Section. In addition, a Primary Agency Matrix is listed in CIMS that assigns authority to specific agencies to direct and perform tactical operations. In the case of Flight 1549, CIMS not only designated FDNY and NYPD as the Primary Agencies, but also, as a backup precaution, identified three *potential* Primary Agencies: the U.S. Coast Guard; the Port Authority of New York and New Jersey; and

the National Transportation Safety Board. As it turned out, all three agencies had assigned representatives to the NYC Unified Command post shortly after the crash landing.

New York City's response agencies are nationally known for their ability to quickly mobilize massive amounts of resources throughout the city, so it was not surprising that, within minutes after Flight 1549 went into the water, FDNY and NYPD had boats, divers, emergency services, and medical assets on the scene. However, they were not alone; many other agencies were sending help as well. The Coast Guard, for example, launched its own multi-asset response, consisting of small rescue boats, an 87-foot cutter, and three helicopters. In the words of Captain Robert O'Brien, Commander, Coast Guard Sector New York, "The Coast Guard – along with state, local, and federal agencies – worked together in a harsh climate to rescue all of the passengers as quickly and safely as possible."

Unlike the worst-case ending that is the final chapter of most aircraft crash reports, the story of Flight 1549 is a tale of dauntless courage – on the part of all members of the crew, and many of the passengers, as well as the emergency responders on the ground and/or aboard ships, yachts, sailing vessels, barges, and other working craft on the Hudson River itself. Sullenberger deserves and has received the most credit, of course, not only for his incredible skill and calm demeanor during the emergency landing, but also for his ability to keep his aircraft both intact and in an upright position – and, by doing so, saving the lives of every passenger on board, and all members of the 1549 crew as well.

Nonetheless, Sullenberger's personal heroics do not in any way, as

Sullenberger himself has pointed out many, many times – most recently in testimony earlier this week before the House Transportation and Infrastructure Committee's aviation subcommittee – diminish the above-and-beyond performance of the other members of his crew. And the collective performance of the entire 1549 crew does not and should not disguise the fact that the responding agencies, including the private-sector assets of the New York and New Jersey Metropolitan Region, were correctly postured and well prepared to respond to a worst-case situation – which, fortunately, never developed.

For many of those responders, the events of 11 September 2001 were and still *are* vivid, and provide everyday reminders not only of what did happen on that fateful day but also of other disasters, natural or manmade, that *could* happen – at any time and in any place within their jurisdiction.

In short, the attacks of 11 September 2001 proved how poorly prepared New York State, New York City, and the United States as a whole were at that time. Today, although preparedness is a never-ending process, there is no doubt that the NY/NJ region has made impressive progress over the past several years to improve its overall preparedness capabilities, especially in the areas of incident management and inter-agency coordination.

Adam McLaughlin is with the Port Authority of NY & NJ, and is the Preparedness Manager of Training and Exercises, Operations & Emergency Management, where he develops and implements agency-wide emergency response and recovery plans, business continuity plans, and training and exercise programs. He designs and facilitates emergency response drills/exercises for agency responders, state and federal partners, and senior Port Authority executives.

Surge Prerequisites: Plans, Practices, Preparations

By Theodore (Ted) Tully, Health Systems



In today's healthcare environment a hospital's emergency department is the institution's front door – and, in most cases, its safety valve for patient care, especially if the rest of the hospital is full. It also is where most patients are first evaluated. But in recent years it has more and more become, in addition, where many patients are held (and/or boarded) until the department can find bed space for them elsewhere in the hospital. Largely for that reason, the emergency departments of many hospitals have become the first area of expansion if the hospital is already overcrowded.

Institutions that have committed to accepting and caring for trauma, burn, or pediatric patients also experience overcrowding, of course, but when they are full they usually can expand in a pre-planned and very specialized way. Patients arriving almost simultaneously at a trauma center from a six-car freeway accident obviously pose a difficult challenge for even a large trauma center, but that challenge becomes much more difficult if the patients are young children and/or also are suffering from burns.

Most U.S. hospitals and other healthcare facilities struggle each and every day to provide the best and most appropriate care to their patients. Which brings up a relevant question: How should a hospital already struggling to meet its everyday challenges prepare for a major disaster that not only puts additional strain on the hospital's resources but may also generate more casualties than any one healthcare worker is likely to see

during the course of his or her professional career? Sick or injured patients numbering in the dozens – or even hundreds – may seem such a daunting task that no amount of planning is really adequate and, for that reason alone, may well result in patient care carried out in only a half-hearted way.

Mass-casualty incidents such as train accidents, terrorist bombings, or major fires can and should be studied to see the numbers and types of casualties they have caused in the past

In Planning, The Past Is Prologue

A review of how past events were handled can help hospitals and other healthcare facilities in their planning for a truly nightmare scenario. The cumulative numbers from previous events may well extend past the planning numbers, of course, but would arguably be the best starting point. Mass-casualty incidents such as train accidents, terrorist bombings, or major fires can and should be studied to see the numbers and types of casualties they have caused in the past. Long-term public-health issues in general also can and should be reviewed to see how best to acquire and position the resources needed to react to

future mass-casualty events in which those issues are likely to play a significant role.

Before even starting the planning process, a culture of preparedness must be developed within the hospital, and should be demonstrably encouraged from the top down. Lacking such a foundation, the hospital's staff will give preparedness planning only a casual focus, and only when absolutely necessary – e.g., for an annual disaster drill. The planning also must be related to matters that are already day-to-day occurrences in the hospital, or the training for a major event will be simply a paper exercise that will be impossible to duplicate during major emergencies when it is really needed.

If hospitals can improve the day-to-day care circumstances that affect their emergency departments they will be much better prepared when an emergency assumes the large-scale dimensions of a major disaster. Partly for that reason, the planning process also should focus particular attention on such important issues as the designation of alternate care sites, the identification and storage of equipment and supplies that might have to be replenished, the development of the specialized healthcare skills – triage capabilities, for example – that might be particularly needed during major emergencies, and the acquisition of a reliable communications system that could be used for the alerting and activation of additional staff when needed.

Hospitals also should fully and honestly determine what already

works in meeting their current day-to-day challenges, and from that database develop the processes and procedures needed to rapidly expand their healthcare capabilities to cope with the much greater large-scale disasters that may happen only once or twice every hundred years. With such preparations already in place, more lives can be saved and the overall outcome will be that much better.

Surge Situations – Challenges & Opportunities

One of the most overused terms in hospital preparedness today may be just one loaded word – “Surge” – that can be used to encompass any (or all) of several situations, and/or problems and/or opportunities, that almost all hospitals and their emergency departments experience every day, every month, and every year. The same term has been used to encompass everything from an out-of-the-normal census caused by one or more contributing factors, or an unplanned event that has multiple patients presenting themselves almost simultaneously to the same medical facility.

Most of the nation’s medical institutions deal with day-to-day surges in much the same way – through adherence to administrative processes such as early discharges and reliance on such uncomplicated “household chores” as expanding a hospital’s usable space (by opening areas previously not used for patient care, for example, and even using hallways when necessary). Another possible solution is to cut back on the administrative and scheduling problems related to the canceling of elective procedures (an unpopular option that every hospital tries to avoid, because the electives help

pay the bills that keep the hospital itself financially viable as a whole). Maintaining an appropriate staff-to-patient ratio is one of the most important factors needed to improve and increase surge capabilities of any type. Simply making a patient relatively comfortable on a gurney in a hallway is not a solution. The patient must also be supported by a true healthcare environment, or it is no better for him or her than the ambulance would be in which the patient was probably transported.

The size and capabilities of the staff that takes care of the patient are probably the most important factors involved in any discussion of surge – and in most hospital plans probably the most difficult to supply. Physicians, nurses, and healthcare support staff are all needed to provide appropriate patient care on a continuing basis. When the optimum ratios of staff to patients fall below the levels prescribed, especially for long periods of time, healthcare quality suffers. The ability of hospitals to increase their staffing on short or no notice therefore becomes the single most important component of any surge plan.

Patient Privacy And Other Livability Issues

The next issue to be considered is the availability of an appropriate amount of space – “appropriate” in the sense that it should be conducive to acceptable patient care, and should have adequate lighting, be maintained at the proper temperature, and provide privacy for the individual patient. Temporary tradeoffs can be made if and when necessary, but if the

space is not quickly improved – by portable lighting, for example, or the installation of privacy screens – the quality of care will eventually suffer.

Certain “livability” issues related to water, bathrooms, waste disposal, and food are sometimes not dealt with until after the space is occupied by patients. But many of these issues can be resolved in advance if a better choice of spaces is made ahead of time, rather than dealing with unanticipated problems after the fact.

Another important issue that a hospital will have to deal with in a surge situation is the acquisition and storage of supplies – pharmaceuticals, for example, and blood products, as well as the equipment needed for oxygen care, x-rays, and various testing modalities. Again, if these and/or similar items are in short supply patient care will inevitably suffer.

A Need to Heed The Previous Lessons Learned

Hospitals must closely consider the possible need to expand the day-to-day surge capabilities of their emergency departments and study how to do it both effectively and economically. Hospital administrators will have to react to surge situations in a prepared and practiced way. The spaces identified for expansion in surge situations must be made available expeditiously, the extra equipment required must be deployed immediately, and – most important of all, certainly – the additional staff needed must quickly be obtained when key patient ratios are expanded past acceptable levels.

If these and other requirements are met, the surge culture desired will evolve into an institutional reality – but only if a hospital’s leadership makes the control of such incidents its goal. The same leadership must view occurrences of a hospital’s over-census as it would an emergency and control it through use of HICS (Hospital Incident Command System) principles similar to those that will be mandatory if and when the hospital is confronted with a larger disaster. By standing up the system for less-than-major incidents, the hospital not only will be better able to control all aspects of a future surge situation but also will reinforce its overall HICS capabilities on a permanent basis.

Hospitals should ensure that adequate communications systems are available throughout its designated surge areas; the pre-staging of equipment caches also is needed, and the large-scale notification of staff should be practiced through upgraded communications equipment – including automatic dialers that could be used to find those willing to come in to work on short or no notice. Triage skills, which are very different in a large-scale multi-casualty incident than in everyday emergency-department triage situations, must be practiced on a weekly or monthly basis for the hospital staff to be proficient in this area when a large number of lives are at stake.

These surge events should be handled in ways similar to those used if and when the hospital will have to surge during larger disaster events and in that context can be

viewed as an outgrowth of a well established system. The hospital staff should practice various aspects of the surge plan several times a year – preferably in small and discrete segments of the overall surge plan. Annual disaster drills would then become, in reality, full-dress scenarios for putting all of

Temporary tradeoffs can be made if and when necessary, but if the space is not quickly improved – by portable lighting, for example, or the installation of privacy screens – the quality of care will eventually suffer

the shorter and less complicated drills together and evaluating how the entire surge plan works. Both during and after this larger exercise, individual drill areas – e.g., communications systems, triage capabilities, staff knowledge, and equipment needs – must be studied and graded. Specific *weaknesses* also must be identified, after which a correction plan can be developed and, eventually, the plan retested to see if the corrections required have worked.

Hospitals also should reach out to local EMS (emergency medical services) agencies and

organizations and involve them in the plans and exercises as well. The ability of EMS agencies and organizations to communicate with local hospitals, and to help in the secondary transport of patients to other facilities in the same general area, could be critical for any large-scale surge plan to be fully successful.

In that context, it is worth noting that one of the few positive aspects of the London train bombings in July 2005 was that hundreds of patients were triaged at the scene and then quickly and safely transported to nearby hospitals. The ability to do this was a direct result of the London EMS community’s proficiency in coping with multiple-casualty triage situations. The EMS staff became proficient, though, only because its leadership made providers practice triage every week – so much so that the responders involved referred to the training day as “Triage Tuesday.” Thanks to the frequent practicing of the triage skills they needed, they were able to properly, and swiftly, perform the appropriate triage when their patients required it. U.S. hospitals can learn a valuable lesson from the U.K.’s experience and become much more ready than they currently are to cope with the major disasters that may occur in the future.

Theodore Tully has been director of Trauma and Emergency Services at the Westchester Medical Center (WMC) in Westchester County, N.Y., since 1994. Prior to assuming that post he served as a police paramedic/detective and as the Westchester County EMS (emergency medical services) coordinator. He also helped create and administer the WMC Regional Resource Center, which is responsible for coordinating the emergency plans of 32 hospitals in the greater Westchester County area.



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Mergers, Volunteerism, and Cost Considerations

By Joseph Cahill, EMS



The nation's current economic problems are hurting not only most private-sector businesses but also most state, federal, and local government agencies as well. Faced with the need to cut services and/or reduce costs in other ways, emergency medical services (EMS) providers and other first-responder organizations are seeking to lower what might be called the "unit cost" of the services they provide, specifically including ambulance services, but without cutting essentials.

There are several ways to do this, including the following: (a) replace the municipal agency with a private for-profit ambulance company; (b) use more volunteers; and/or (c) merge EMS into another agency. Any or all of these three principal options would appeal to at least some citizens, and to their elected leaders – but all have some hidden pitfalls as well.

Advocates of merging two municipal agencies often argue that the proposed merger would decrease costs by eliminating so-called "duplicate support functions." To achieve acceptable cost savings, however, a realistic merger plan might focus on cutting redundant staff during the changeover period through retirement incentives and other strategies. Without such planning the end result would probably be either lower savings than anticipated or morale problems within the ranks – the latter could create a particularly difficult situation when layoffs are enacted primarily to reach savings goals, with little or no consideration given to the "invisible" costs resulting from lower morale.

A more important consideration, though, is that the same work still has to get done. If five mechanics are needed to service the EMS ambulance fleet, five will still be needed to service the same number of ambulances if EMS is put under the fire department's jurisdiction.

Campaigns targeted at improving the public's awareness of situations warranting an emergency ambulance may play a key role in introducing policies & practices affecting the volume of future calls

Another point to remember in planning a merger is that the pay and benefits of employees in the same pay grade and/or holding similar titles must be equalized to the maximum extent possible. During New York City's merger of its police agencies a few years ago, the city's *housing* police officers and *transit* police officers all became New York City police officers. For several decades prior to the merger, though, each group had been negotiating its contracts separately, and there were significant disparities in benefits when the merger was first implemented. If such disparities are not resolved in the original merger plan, the differences that remain can more

than offset the cost savings expected from a merger.

A Prudent Look

At the Largest Component

Volunteers are not only a valuable resource per se but they also affect unit costs directly by reducing payroll – the largest component of most of the costs of most agencies, public or private. However, starting a new volunteer agency – "from scratch," so to speak – is no small undertaking. The first hard question that should be asked is: "What happens if they [the decision making officials] disband the existing agency and the volunteer agency fails?" A more prudent approach would be to take steps early to ensure that whatever volunteer agency is counted on to replace an existing agency is able to survive on its own. In some situations this might mean that the previously existing agency and volunteer agency must work side by side for a while. This approach would take longer, and would negate the possibility of large immediate savings, but could eliminate a number of very large future problems as well.

Volunteers have been successfully used throughout the country, of course, both on a day-to-day basis and when a community is planning for a mass gathering of some type – the national convention of a political party, for example, or a major sports event such as the Super Bowl or the World Series. In such situations, relying on volunteerism to supplement an agency that in the past used exclusively paid employees could cause major problems not only with the existing staff but also with organized labor in general.

The principal arguments in favor of privatization are that: (a) the jurisdiction can negotiate a new contract every few years or so; and (b) the jurisdiction gets out of the EMS business. Conversely, the principal argument *against* privatization is that it gets the jurisdiction out of the EMS business. Which also means, unfortunately, that the jurisdiction no longer has a built-in EMS command structure to provide real time oversight but usually must rely, instead, on a private-sector contractor to oversee the quality of the jurisdiction's own work.

Campaigns targeted at improving the public's awareness of situations warranting an emergency ambulance (and what to do about the situations that do not require an ambulance) may play a key role in introducing policies and practices affecting the volume of future calls. The jurisdiction as a whole may enact initiatives, for example, to decrease the number of EMS calls by enforcing speed limits more vigorously, or by keeping people out of dangerous areas. (Other policies, such as campaigns against smoking, or preventing AIDS, usually come under the jurisdiction of Public Health and may or may not affect the policies and/or resources of the community's EMS agencies.)

The Sometimes High Cost of Free Services

Another way of cutting costs is to eliminate, or at least scale down, services that have traditionally been provided at no or only minimal cost. Some public agencies or other healthcare providers now provide free or low-cost transportation – e.g., return trips from the hospital or to and from diagnostic or dialysis centers. Other agencies provide “free” services related to mass

gatherings such as concerts, sporting events, or parades; charging for those services in the future may provide a new revenue source – but may also anger citizens who have become accustomed to services that previously were provided at no charge to them individually.

Much of the concern about privatization or the merging of agencies is about degrading the quality of care. This topic is often hotly debated, but is almost impossible to prove ahead of time – when most “go” or “no-go” decisions are made. A more important consideration, though, is that *performance* – i.e., the quality of care – is largely a matter of the specific indicators selected.

Many agencies that are or have been proposed as merger candidates do not have patient outcome data available because they have not previously provided patient care per se. For that reason, many advocates of mergers often use response time as the *only* indicator that should be factored into a decision, ignoring other indicators that also should be taken into consideration.

While response time is a significant factor, there are many other factors within the EMS equation that are frequently ignored. One example is the ALS-to-ALS percentage – i.e., the percentage of calls that

require an Advanced Life Support or Paramedic unit vs. the percentage that actually receive an ALS unit.

Many of the theoretical models now being used by decision-makers have at least some merit – but they also are burdened with a healthy weight of problematic issues. The bottom line is simply what most citizens (and most decision makers) already know – but frequently ignore: Namely, that *nothing* is free. All services cost *something* – time, materials, the number and specialized skills of the personnel provided, disruptions to everyday routine, etc. – and the services that are both *effective* and *timely* almost always cost more than those that are less effective and/or less timely.

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. He also served for five years as the citywide advanced life support (ALS) coordinator for the FDNY - Bureau of EMS, and prior to that was the department's Division 6 ALS coordinator, covering the South Bronx and Harlem. Much in demand as a speaker – he has addressed venues as diverse as the national EMS Today conferences and local volunteer EMS agencies – Cahill also served on the faculty of the Westchester County Community College's Paramedic Program and has been a frequent guest lecturer for the U.S. Secret Service, the FDNY EMS Academy, and Montifore Hospital.

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Incident Management Teams: A Blueprint for Success

By William MacKay, Fire/Hazmat



Some time ago the nation's firefighting community recognized the need for an efficient and effective method of managing wildland incidents that involve thousands of response personnel and cover hundreds of square miles. The result was a concept of a team, rather than a single incident commander (IC), that by working together would manage an incident and collectively carry out the management functions of the positions associated with Command as well as General Staff. In practice, although the Incident Management Team (IMT) still would have a single IC, the other team members – who would provide specialized assistance in operations, planning, logistics, and finance/administration – would develop key components of an Incident Action Plan (IAP), which ultimately would have to be approved by the IC.

A typical Incident Management Team consists of a group of individuals who are qualified to provide the incident-management assistance needed to complement and support an ICS (Incident Command System) type of organization in coping with incidents and events that have the potential to exceed day-to-day capabilities. Although the concept of the IMT may have its genesis in the firefighting arena, recent events have proved that the same concept can be applied to other traditional response assets as well as to private entities within the community directly affected.

It has been generally recognized throughout the United States that most IMTs fall into five categories, as follows:

- Type V – City and township level – i.e., locally qualified;
- Type IV – County or special district level – county or regionally qualified;
- Type III – State or metropolitan-area level – state qualified;
- Type II – National and state level – federally or state qualified (but with lower staffing and/or less experience than Type I IMTs); and
- Type I – National and state level – federally or state qualified (also, usually the best equipped, and almost always possessing the most experience).

In the event of a disaster in which an Emergency Management Assistance Compact (EMAC) between two political jurisdictions is implemented, it is important that, when an area requests assistance in the form of an IMT: (a) the request specifies the appropriate type of resource needed; and (b) the jurisdiction responding to the request provides the type requested. (During some recent disasters the IMTs provided were *not* the type requested, and the result was extensive delays and the inefficient use of valuable resources.)

A Firm Commitment, Plus Resources & Capabilities

The type of IMT that a specific community decides to develop depends on a number of factors – the most critical of which is that there must be a firm commitment of the various agencies, governmental entities, and allied partners responsible for providing the most

critical resources needed: staff hours, fiscal support, and training. Among the other important but somewhat less critical factors that influence the type of IMT formed are: (a) the local resources available that organizations are willing to commit; (b) the overall emergency-management needs of the agency and/or region involved; and (c) the individual and collective capabilities of the members assigned to meet the necessary initial training requirement.

The qualification processes for Type I or Type II teams are fairly well defined. Currently, the “Authority Having Jurisdiction” determines the duties of Type III, IV, and V teams. Most if not quite all IMT duties are now based on local needs and capabilities, but it is expected that those duties will be more clearly defined sometime in the near future under a new “Resource Typing” initiative being reviewed within the federal government's National Incident Management System (NIMS).

Many states throughout the country have recognized the value that an IMT brings to large-scale incidents as well as to planned events, and many jurisdictions at all levels of government are beginning to break down traditional barriers and to form IMTs made up of representatives of a broad spectrum of government agencies as well as an increasing number of private-sector organizations. The inclusion of non-traditional emergency-response personnel can greatly enhance the operational capabilities of an IMT. It is generally recognized that many individuals who – although they are

not firefighters, law-enforcement personnel, or EMS (Emergency Medical Services) technicians – can provide complementary talents and capabilities that improve a community’s (or an IMT’s) ability to respond to a potential mass-casualty crisis or similar event. The framework on which an IMT is developed, therefore, can in many cases be enhanced by the addition of carefully selected individuals, organizations, or agencies that routinely “work” within various disciplines. For example, the finance director of a small town or major city may be the person best qualified to serve as an IMT’s finance/administration section chief, and the same community’s public works director may be ideally fitted to serve as chief of the logistics section.

Gourmet Coffee Not Necessarily Essential

When recruiting/selecting individuals to make up the IMT, it is important that those selected have a thorough understanding of the environment in which they may be called to work. In most if not quite all emergency situations, IMT members will be working 12-hour shifts, living in a communal setting, having minimal communications (at best) to their homes and families, and probably lacking many of the so-called “creature comforts” that they are used to. In one recent case a prospective IMT member who was being deployed to assist at a regional disaster was concerned about the availability – more accurately, the *non-availability* – of his or her morning “gourmet” coffee. That person and others suffering from similarly unrealistic expectations may be more useful serving in support roles in their home jurisdictions. As in so many other aspects of

modern life, the most effective IMTs are those possessing strength in numbers – which is another way of saying that the ideal IMT must be established with enough depth at each position that the team as a whole is not dependent on the continued availability of only a few selected members. It is generally recommended, in fact, that at a minimum the team should be at least three deep at each position requiring special qualifications and capabilities. Moreover, *all* members of the team should attend and participate in initial training, which exposes them not only to the conceptual and operational realities of the IMT itself but also acquaints them with the position-specific training required for the position(s) to which they may be assigned.

Training should be ongoing and on a regular basis. Opportunities to utilize the IMT exist in every community and should not be overlooked. These may include planning for the county fair, a visit from a VIP, or advance planning for a weather-related event.

Reasonable Expectations Yes; Logistics Burden No

The all-hazard IMT must be capable of being self-sufficient for a period of 48–72 hours. The last thing that a community requesting assistance needs is additional personnel who are available to assist but are given little or nothing to do and become a logistic burden. The IMT should be equipped with food, water, communications, and all of the other essentials needed not only to develop and implement an IAP but also to cope with the incident/event and/or otherwise help the host community.

Governors, mayors, city managers, and other decision makers who are developing an internal Type III – V team must address these

concerns as well. The locally designated emergency operations center (EOC) – be it a fire station or a more formally dedicated area – should be equipped to meet all of the reasonably expected needs of the IMT and not have to rely on the use of local utilities. The availability of emergency power, back-up communications, and cached supplies is among the numerous issues that should be addressed as early as possible in the planning process.

To summarize: The days in which an incident commander would attempt to manage a large-scale event without assistance are in the past. The IMT is a proven concept that allows for the response to be not only more effective and efficient than ever before but also – and of greater importance – safer as well. The IMT allows an incident to be addressed in a systematic way that, if used properly, greatly enhances a community’s response to and recovery from significant events. Traditional responders (law-enforcement personnel, firefighters, and EMS technicians, in particular) are recognizing the fact that many individuals within their community possess talents that can be used by the IMT, and it is becoming more frequent that these individuals are being incorporated into the IMT framework, thus making it even more effective.

William (Bill) MacKay, a 30-year veteran of the fire service, is fire chief for the City of Niagara Falls, N.Y., and prior to taking that post was battalion chief of special operations for the Fairfax County (Va.) Fire and Rescue Department. An author of the curriculum used at the National Fire Academy to prepare firefighters to cope with both domestic and international incidents involving terrorism, he also serves as an instructor for the U.S. Department of Homeland Security and is a former member of the National Capital Region’s Incident Management Team.

New Focus on Private-Sector Preparedness Standards

By Diana Hopkins, Standards



The nation's private-sector businesses – a generic term that includes not only manufacturers, distributors, retailers, and other companies but also non-profits, building owners, and universities – that have long been seeking Department of Homeland Security (DHS) certification of their preparedness standards should welcome a recently announced opportunity that will permit them to submit their own standards for DHS adoption – and/or find out what preparedness standards already have been adopted that they can use.

A related opportunity also has been announced that will permit those same businesses to submit their comments to, and work as partners with, the Federal Emergency Management Agency (FEMA) and other DHS agencies on a proposed federal program that will, among other things: (a) establish private-sector preparedness standards; (b) publicize detailed information to and through the private sector about the standards that have been adopted and that might affect their own interests; and (c) certify the conformity of private-sector businesses and other entities to the preparedness standards adopted.

The bottom line is that the nation's private-sector entities will for the first time have an effective mechanism in place to certify that they are in compliance with the DHS-adopted private-sector preparedness standards – which are vitally important for a number of legal, insurance, and credit-rating purposes.

Delays, Disasters, And Other Difficulties

As the department's principal coordinator of prevention, mitigation, response, and recovery from all domestic disasters, the Federal Emergency Management Agency (FEMA) has been well aware for some time that partnering with the private sector is essential to its own ability to carry out its important homeland-security missions. Most of the nation's physical infrastructure and other material resources are owned and operated not by the government, but by the private sector, and are so essential to the nation's economic well-being that their ruin would significantly disrupt the functioning of not only the nation's businesses but also the U.S. government itself (most if not all state and local governments as well).

Even so, to this day private-sector entities still do not have the standards required to measure their individual and collective preparedness to meet the numerous hazards of modern life – which means – in an age of terrorism, potential disease pandemics, and frequently violent acts of nature – that most of the country's infrastructure and other physical resources are more at risk now than ever before in the nation's history.

The need for formal codification of private-sector standards is not new. The 9/11 Commission's final report, issued in 2005, stated emphatically that the U.S. private sector had not been prepared to cope with the aftermath of the 9/11 terrorist attacks in 2001, and that it was not much better prepared even three years later. The Commission members included in their report a recommendation that the legislative and executive branches

of government establish a common set of criteria/standards governing, promoting, and encouraging private-sector preparedness – particularly related to disaster and emergency management, and to business-continuity programs that would enhance and upgrade the nation's overall resilience to disasters.

Congress responded to that recommendation in 2007 by authorizing establishment of a DHS Private Sector Preparedness Program, and gave the department several additional tools to facilitate its interface with the private sector. Among the most important of those tools are: the SAFETY Act (Supporting Anti-Terrorism by Fostering Effective Technologies Act of 2002), which provides liability protections to sellers and purchasers of qualified anti-terrorism products; the PCII (Protected Critical Infrastructure Information) program, which protects the confidentiality of sensitive private-sector information; and the C-TPAT (Customs-Trade Partnership Against Terrorism) program, which provides a streamlined certification process to private-sector entities involved in the international supply chain.

A Belated Notice With a Very Short Fuse

Very late last year (on 24 December 2008), FEMA/DHS published a Federal Register notice requesting recommendations from the private sector and the public at large on a plan that had been drafted for establishment of a Voluntary Private Sector Accreditation and Certification Preparedness Program (PS-Prep). The department also announced that two public meetings would be scheduled at which private-

sector stakeholders could discuss their concerns and recommendations with the federal government's own PS-Prep principals.

The FEMA/DHS plan, as described in the notice, also would establish: (1) a public-private partnership to develop (and eventually adopt) a common set of criteria/standards needed to build and upgrade private-sector preparedness; and (2) an accreditation/certification program designed to ensure compliance and conformity with the DHS-approved standards.

Seeking certification would be completely voluntary – but would be encouraged by DHS after the standards had been adopted and were made available to the private sector. The expectation was, and is, that private-sector entities – including consensus standards-development organizations and others – would develop and submit standards that DHS could adopt and include in the PS-Prep program. The original Federal Register notice gave a January 2009 deadline for comments, and the first of the two public forums planned was held last month.

The specific time and place for FEMA's second stakeholder forum has not yet been announced, but it was expected to be scheduled for sometime in late February, probably in the greater Washington, D.C., area. Meanwhile, the agency is still encouraging all interested parties to continue to submit their own recommendations on the private-sector preparedness standards that should be considered for adoption, and/or to provide comments on the already proposed PS-Prep program, especially regarding the types of standards that DHS should adopt initially and over time. Comments can be submitted to FEMA-POLICY@dhs.gov, referring to

Docket ID FEMA-2008-0017 (such comments will be made public).

The December Federal Register notice outlined a FEMA/DHS plan of Adoption, Accreditation, and Certification of private-sector preparedness standards, and listed the following steps that will be essential parts of the process:

- Consider, select, and adopt a wide variety of preparedness standards;
- Encourage creation of those standards;
- Make the preparedness standards adopted by DHS more widely available;
- Develop a method for third parties to be accredited by the ANSI-ASQ National Accreditation Board (ANAB) to certify private-sector compliance/conformity with the standards adopted; and
- Encourage private-sector entities to use such certification.

In cases where certification is not affordable, DHS said it is considering allowing small businesses to self-declare their conformity with the DHS-adopted preparedness standards through use of a self-assessment tool (still to be developed); FEMA/DHS is also soliciting stakeholder comments on the proposed self-assessment tool. The agency already has received comments suggesting that certifications show a business's *degree* of conformity, thereby indicating that incremental steps toward total conformity might be accepted later. This is another topic on which additional comments have been solicited by FEMA/DHS.

Recommendation Process Remains Open to All

DHS is not limiting its review-and-adoption process to the standards developed and/or recommended

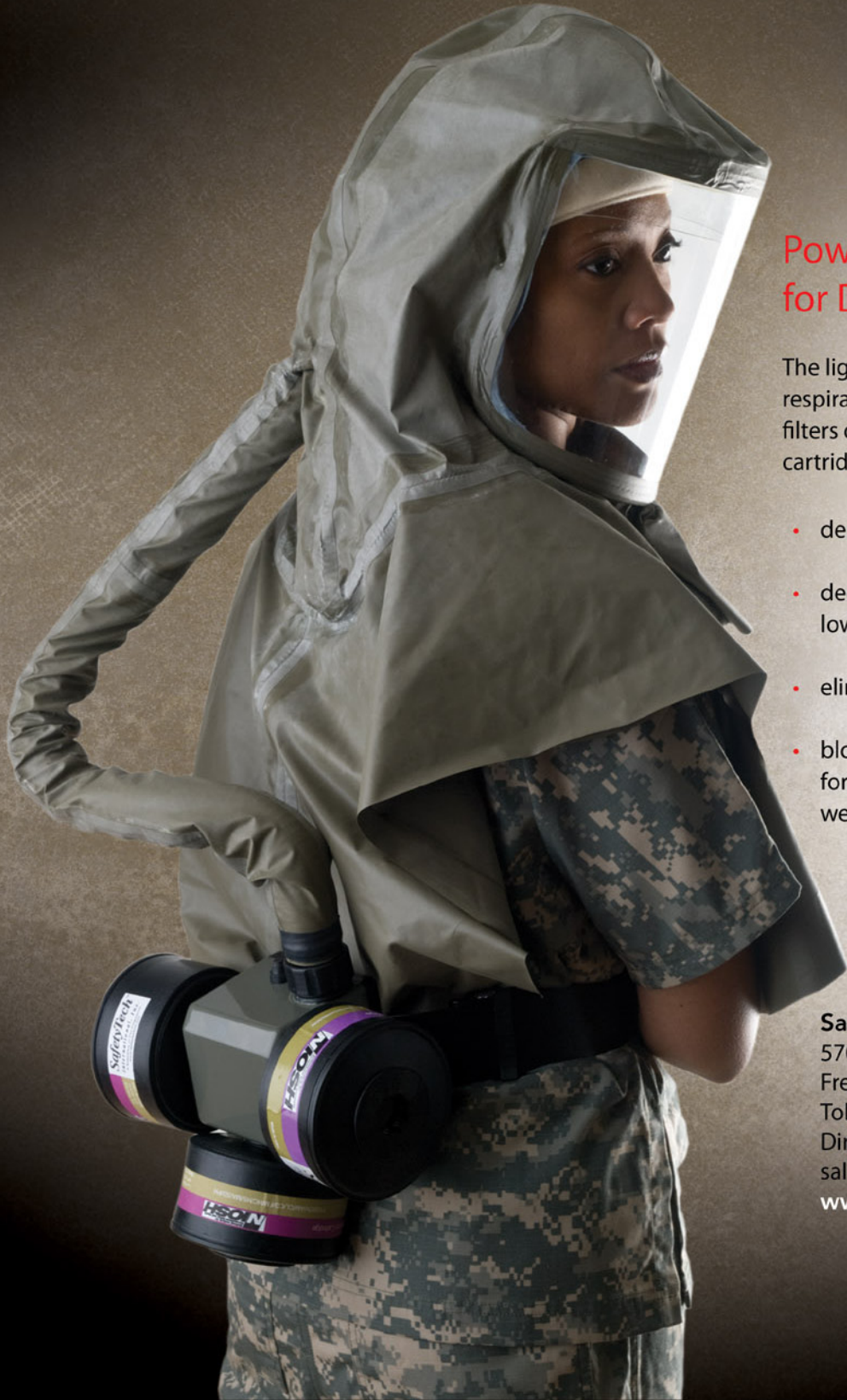
by standards development organizations, officials said, but will also be open to reviewing and adopting appropriate private-sector preparedness standards developed and submitted by industry groups, non-profit organizations, and other entities. In that context, it is important to note that the PS-Prep Program's needs will mirror the standards needs identified by DHS – in other words, there is no guarantee that *all* of the standards submitted for consideration will be adopted.

The Federal Register's December announcement listed nine major subject areas, eight minor subject areas, and important sub-elements of all of these areas for businesses to consider when submitting their own private-sector preparedness standards for review.

DHS said it plans to monitor the effectiveness of the program on an ongoing basis, review the accreditation and certification programs annually to ensure their effectiveness, and also routinely review the operations and management of accredited third-party certification bodies.

For additional information about PS-Prep, contact: Donald Grant, Incident Management Systems Director, National Preparedness Directorate, FEMA, 500 C Street N.W., Washington, D.C. 20472; or phone 202-646-8243; or email Donald.Grant@dhs.gov.

Diana Hopkins is the creator of the consulting firm "Solutions for Standards" (www.solutionsforstandards.com). She is a 12-year veteran of AOAC INTERNATIONAL and former senior director of AOAC Standards Development. Most of her work since the 2001 terrorist attacks has focused on standards development in the fields of homeland security and national defense. In addition to being an advocate of ethics and quality in standards development, Hopkins is also a certified first responder and a recognized expert in technical administration, governance, and process development. ▼



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Situational Awareness the Key

Deterring Pirate Attacks Against Merchant Ships

By Corey D. Ranslem, Coast Guard



Pirates have been sailing the seas of the world from time immemorial. What some historians call the “golden age” of piracy started in the 16th century and continued into the 18th century. Perhaps the most successful and best known of the pirate crews during that period were the Barbary Corsairs, bands of pirates who plied their trade along the Northern Coast of Africa. The Corsairs pioneered many of the tactics used by modern-day pirates. They boarded ships, stole cargo, slaughtered some crew members and held others hostage, and demanded that the Western countries pay them to provide “protection.”

Most merchant crews of that era lacked even line-of-sight communications and often did not realize their ships were under attack until it was too late. And, of course, they did not have any of the advanced technology – specifically including detection systems and devices – that would give them what today is called situational awareness. Most European countries paid protection money to the pirates so that their ships could safely move through the trading ports of the Mediterranean.

The then-fledgling U.S. government did not have the money to pay the pirates, so – after several politically embarrassing incidents – President Thomas Jefferson sent a U.S. Marine detachment to the North Coast of Africa to protect American merchant ships from pirate attacks.

It was not an easy or, at first, totally successful assignment, but the Marines eventually defeated the pirates in many ports along the southern littoral of the Mediterranean, ensuring safe passage for American and European traders.

**Pirates
have defiantly
increased the use
of violence against
merchant ships and
private yachts.
They hijack ships,
and demand
millions of dollars in
ransom payments**

A Change in Tactics, An Increase in Numbers

Modern-day pirates usually board ships searching for money or marketable cargo. Sometimes they have been easily frightened off by alert crew members. However, their tactics have changed dramatically during the past year. Pirates from lawless areas worldwide have defiantly increased the use of force and violence against merchant ships and private yachts. They hijack ships, holding the ships and crews hostage and demanding millions of dollars in ransom payments.

A number of merchant crew members have been injured or killed during these attacks – which occur worldwide, but have been concentrated mostly off the eastern coast of Africa. It is estimated that close to \$150 million in ransom money was paid in 2008 to pirates who were operating primarily in the Gulf of Aden. The International Maritime Bureau (IMB) reported that there were 293 pirate attacks against ships worldwide in 2008, compared with 263 attacks in 2007. There were 49 ship hijackings in 2008, a 200 percent increase over 2007 – again, according to the IMB – with 898 crew members taken hostage.

Most of the hijackings reported worldwide in the past several years were concentrated in the Gulf of Aden. However, many maritime-security experts, including at least some senior IMB officials, believe that the number of attacks and incidents reported represents only about one-fifth to one-third of the actual attacks that took place worldwide. Yacht crews and the owners of small cruising vessels also have reported an increase in attacks and violence against their vessels off the coasts of Central and South America; many of those attacks were not reported to the IMB.

There are very few groups of mariners who are immune to pirate attacks. Pirates can strike virtually anywhere, at any time, and against almost any target (except for armed naval vessels). In recent months

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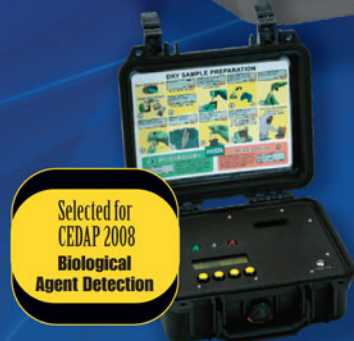
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various bands of pirates have been targeting large commercial vessels – e.g., container ships, bulk cargo carriers, oil and chemical tankers, and cruise ships – as well as the mega-yachts. Most pirate attacks against ships underway take place during daylight hours, but attacks against ships anchored or moored usually take place during the night. Significantly, most of the attacks that were reported had at least one thing in common: The crews of the ships being attacked did not realize they were under attack until the attack was in progress.

Unlike the crews of merchant ships in the times of the Barbary Corsairs, those who man today's merchant ships have a variety of technologies and systems available to help improve their situational awareness. With early-warning equipment and vigilant crews, most attacks could be prevented. There are numerous types of electronic systems – long-range cameras, for example, as well as surface-search radars and access-control systems – available to diminish the pirate threat.

Vigilance, Training, And Modern Equipment

Crew vigilance and training also are essential to halting or at least diminishing the number of additional pirate attacks in the future. Unfortunately, most merchant crews are not properly trained on threat recognition, and also do not know how to cope with pirate attacks and boardings. Moreover, many vessels do not have emergency plans in place to deal with attempted attacks and boardings. However, first-hand accounts of recent pirate attacks (and attempted attacks) show that trained and prepared crews that

are equipped with early-warning systems have usually been able to prevent attacks and hijackings. (The IMB does not keep statistics on how, precisely, various attacks were prevented; that information is available only by reading individual attack reports and by interviewing crew members).

Not incidentally, many if not all maritime-security experts believe the piracy attacks are not a problem that should be assigned to naval forces but, rather, a *law-enforcement*

Most merchant crews are not properly trained on threat recognition and do not know how to cope with pirate attacks and boardings

problem that requires action by law-enforcement agencies. In fact, most of the world's navies have no "rules of engagement" covering piracy incidents and typically release pirates after they have been captured. Only recently, in fact, has the United States itself signed an agreement (with an unnamed country in the Gulf area) to prosecute pirates. After that agreement is ready to be fully implemented, it is expected that the U.S. Navy will change its rules of engagement and permit its ships to pursue and arrest pirates in the Gulf of Aden.

Some shipping industry experts nonetheless believe that the

continued attacks on merchant vessels will soon have an adverse worldwide economic impact because of increased insurance costs, the increased operational costs incurring by avoiding certain areas, and higher security costs in general. Meanwhile, because of the major increase in pirate attacks that has occurred in recent year, more than 20 countries already have stationed armed naval vessels in the Gulf of Aden, and have achieved some minor successes in reducing piracy in that area.

However, the naval vessels on the scene report to no central command and/or coordination center. The crews of the Navy ships speak different languages, of course, so a coordinated response is difficult to achieve, which means that most merchant ships and their crews may still have to defend themselves from future attacks. Statistics developed from accounts of previous attacks show, fortunately, that the combination of situational awareness, improved technology, and well trained crew members will help merchant vessels worldwide cope much more successfully in the future with the threat posed by international piracy.

Corey D. Ranslem, chief executive officer of Secure Waters LLC – a maritime-security and consulting firm heavily involved in maritime training, maritime security, and a broad spectrum of other programs in the maritime field -- is the former regional manager of Federal Government Operations for Smiths Detection. He has received numerous awards and citations from the U.S. Coast Guard and other agencies and organizations active in the field of maritime security. He holds a Bachelor's Degree in Communication and Political Science from the University of Northern Iowa, an MBA in International Business from Georgetown University, and has almost 15 years of experience in maritime law enforcement and security.

"Wetware" and Other Technologies Supported Obama Inauguration

By Rodrigo (Roddy) Moscoso, Law Enforcement



Prior to each U.S. Presidential Inauguration, the United States Secret Service and its legion of supporting local, state, and federal first-responder and emergency-management agencies up the ante in the technology used both to ensure the safety of the new president and to coordinate the sometimes overlapping activities of the responding agencies. During the 20 January inauguration of President Barack Obama, scores of participating organizations – ranging from local transit agencies to the American Red Cross – were connected to one another through interoperable computer, radio, and geospatially aware technologies that provided coordinators with unprecedented situational awareness of the National Mall and surrounding areas within several miles of the U.S. capitol, the White House, and the inaugural parade route.

In addition, a number of emergency managers – collocated in several large centers across the region – used various big-screen technological tools displaying everything from live camera feeds to traffic sensors as well as high-detail time-lapse satellite imagery and "street view" pictography. But despite the successful creation, deployment, and wide availability of these new tools, the real story of the 2009 presidential inaugural was the "human glue" that integrated an unprecedented mass of information across various data sources into meaningful operational data.

Key personnel were able to effectively discern, distill, and disseminate a huge volume of

information regarding the status of a score of inaugural events and activities both large and small and, through the use of myriad technologies, to share that human-value-added information across a broad spectrum of professional disciplines and political

jurisdictions. In many cases, the technology of choice was a landline or mobile telephone – not necessarily the latest high-tech solution, perhaps, but more than adequate for the specific tasks involved.

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In fact, some interoperability tools went underutilized. In the National Capital Region surrounding Washington, D.C., for example, an emergency cache of interoperable Land Mobile Radios had been purchased (at considerable expense) to support jurisdictions in communications and information during large regional impacting events. Prior to and during the inauguration, a number of radios from this cache were provided to, but not used by, many agencies – much to the chagrin of some of the cache operators (who noted their disappointment during a post-inauguration “hot wash” session).

Other feedback provided during post-inauguration discussions included comments from several jurisdictions that expressed frustration with the “lack” of information being shared. Those complaints, though, were about a problem not of technology but, rather, of role clarity and the setting of appropriate expectations, prior to the event itself, regarding “what” should be communicated, “by whom,” and “when.”

To be sure, the Washington, D.C., area was fortunate that no serious incidents took place during the events leading up to and following the inauguration. The weather was cold, but not cold enough to result in large-scale health issues. Traffic was well managed, and public transportation provided unprecedented levels of service with minimal interruption. Overall, there were very few incidents that arguably might have necessitated cross-regional coordination.

But a larger question remains: Could the communications and other tools used, both high- and low-tech (and including some systems

highly classified), have been used more effectively? For those who expected to receive more information than they ultimately did, the answer is “yes.” In this case, though, a more important lesson that could be learned from the inauguration might be that more time should be spent detailing roles and responsibilities and less time installing the latest technological

systems. Human “wetware,” it seems, remains the best technology the nation has available to achieve effective coordination.

Rodrigo (Roddy) Moscoso currently serves as Communications Manager for the Capital Wireless Information Net (CapWIN) Program at the University of Maryland. Formerly with IBM Business Consulting Services, he has over 15 years of experience supporting large-scale IT implementation projects.

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Tennessee, Illinois, California, and Texas

By Adam McLaughlin, State Homeland News



Tennessee Initiates Training Program for Young Responders

Emergency response professionals from Shelby County and several neighboring counties participated in late January in the Tennessee Fire Service and Codes Enforcement Academy's "Teen CERT" Train-the-Trainer course sponsored by the Tennessee Office of Homeland Security.

Teen CERT, the shorthand name for Teen Community Emergency Response Team, is a disaster-response program created especially for teenagers and is taught in a high-school setting instead of a classroom. The purpose of the program is to educate teenagers about disaster preparedness and to train them in such basic response skills as the identification of potential hazards (including acts of terrorism), fire suppression and safety, light search-and-rescue tasks, disaster psychology, team organization, and disaster medical first aid and triage.

The Teen CERT training is designed to give young people the confidence needed to effectively help – at the scene of a local disaster, in their schools or neighborhoods, and/or in their homes – until professional responders arrive on the scene. The Teen CERT participants also are encouraged to take a proactive role in emergency preparedness in their home communities.

The three principal goals of Teen CERT are: (1) to provide students with a knowledge base of the

effects of natural and man-made disasters and their emotional, social, and economic impact; (2) to build decision-making and problem-solving skills as well as the strategies needed to help students make informed decisions related to readiness, response, and recovery operations; and (3) to carry out periodic reality-driven drills and exercises designed to provide students with hands-on disaster preparedness and emergency-response training.

The Teen CERT training is designed to give young people the confidence needed to effectively help at the scene of a local disaster until professional responders arrive

The late January Teen CERT Train-the-Trainer course was conducted (in Belt Buckle, Tenn.) for emergency-response personnel who are already certified as adult CERT instructors. The 20-hour program covered the same curriculum as an adult CERT course, except that its method of teaching was geared toward adolescent learners. Current plans call for Teen CERT to be offered in Shelby County schools in the near future and to be integrated into the schools' own response planning.

The initial CERT training program was developed by the

Los Angeles Fire Department in 1985 to train civilians to safely help themselves and those around them in the aftermath of a major disaster. The Federal Emergency Management Agency (FEMA) later adapted the curriculum created by the LAFD, and in the past two decades thousands of citizens have been CERT-trained in cities, states, and counties throughout the United States.

Illinois Harper College Rolls Out Public Address System

In late January, crews of technicians began installing on Harper College's campus (in Palatine Village just outside of Chicago) an outdoors public address system, the latest step in the college's long-term emergency-preparedness efforts. The public-address speakers will allow officials to provide further instructions to evacuees in times of emergency. Current plans call for speakers to be installed near key exits and entryways on campus buildings. The outdoor speakers are the latest upgrade to Harper's fire alarm system, which already can communicate with people inside campus buildings via interior speakers.

"We will now be able to provide critical updates to those outside on campus, in the crucial moments of an unfolding emergency," said judicial officer Jason Ferguson, who coordinates Harper's emergency management efforts. "The outdoor public-address system, something many colleges do not yet have, is another key step toward making

Harper the safest possible place to work and learn.”

Several major emergencies on college campuses in recent years – including the Virginia Tech killings and a tragic shooting incident at Northern Illinois University nearly one year ago – have prompted colleges and universities throughout the nation, including Harper, to be more proactive in their disaster planning.

The Harper administration also has started inviting students, parents, faculty, and staff – as well as members of the local community – to sign up for emergency text alerts on their cell phones. The alerts, which will be sent to all cell phones registered to receive them, will provide succinct safety instructions that should be followed in future times of emergency.

California **Port of Long Beach Unbrates New \$21M Security Facility**

The Port of Long Beach gave an airborne salute last week – in the form of a police helicopter flyby – to the opening of a new high-tech security facility designed to protect the nation’s second-largest seaport against terrorist attacks.

The \$21 million, 25,000-square-foot facility will serve as the Long Beach/Los Angeles area’s port security division headquarters and coordinate communications between and among some 40 or so local, state, and federal agencies involved in maintaining and providing security for the LB/LA harbor complex.”We have one of the most innovative security operations of any seaport in the United States,” James Hankla, president of the Long Beach Board

of Harbor Commissioners, told an audience of about 300 at the opening ceremonies. Among the attendees were Los Angeles County Sheriff Lee Baca, FBI and Coast Guard officials, and representatives from a number of police departments in the greater Long Beach/Los Angeles area.

The new facility uses some 400 video cameras that port officials said could see “every square foot” of the harbor area on both land and sea. On a clear day, the military-grade video cameras can detect ships seven miles offshore, the officials said. Some cameras are equipped with night-vision technology. “If you wave at us from land or sea, we will be able to wave back,” Hankla said.

Among the more impressive security features at the new facility are facial-recognition systems that can be used to help port authorities

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locate and identify any “persons of interest” they think might be within the port area. Another advanced-technology feature is a system that controls freeway signs and gives security personnel the ability to warn drivers to stay out of the area in the event of a major incident. Strategically placed motion-detection sensors can be used to tell police officers to check out a disturbance in any part of the port.

The port also uses a fleet of remotely operated submersible video cameras that provide underwater surveillance. Each camera is about the size of a shoebox and weighs eight pounds. The underwater camera systems are made by VideoRay, based in Phoenixville, Pa. The port also has a full-time staff of seven divers (soon to be 12), who will handle underwater inspections and small-scale salvage operations.

A radio-frequency identification, or RFID, tagging system also is being introduced to help track cargo more closely than was previously possible. All trucks entering the Port of Long Beach from 18 February on will be required to carry RFID tags, which will allow port authorities to know who – i.e., what company – owns the truck and what cargo it is supposed to be carrying.

An estimated 125 or so employees will work at the new three-story command center, which also operates a helipad. The facility will coordinate activities among the Coast Guard, the Department of Homeland Security’s Customs and Border Protection agency, the Long Beach Police Department, and the Port Harbor Control office.

Texas **Wilson County Develops Animal- Agriculture Disaster Plan**

Wilson County is the first in the state to implement an Animal-Agriculture Disaster Response Plan on a county level, according to LeAnn Hosek, the county’s emergency-management agency coordinator.

The Animal Issue Committee Plan – a detailed and extremely comprehensive 200-plus-page document – spells out, among other things, the steps that should be taken by local authorities in the event of a natural, accidental, or man-made disaster affecting agriculture and/or agricultural products in the area. Even though the response plan focuses primarily on agricultural issues, Hosek said that animal diseases, including the sheltering of animals, are given a higher priority than crop disasters are.

The plan was made possible by funding from a 2006 Department of Homeland Security grant provided to the county. The grant allowed the county to hire a consultant to develop an emergency-response plan to deal with disasters affecting agriculture in general, farms, farm products, and farm animals. The loss of livestock because of a major disaster such as Hurricane Ike in the Houston area last year provides a prime worst-case example of the types of scenario in which the plan would be used.

Because Wilson County itself does not border on the Gulf of Mexico and is therefore somewhat less affected by floods and hurricanes than coastal counties are, the plan places significant emphasis on such disasters as a tornado

touching ground, the maiming or killing of livestock in a dairy or on a feedlot, and/or the outbreak of a deadly disease harmful to humans and/or animals.

The plan also provides detailed information on, among other matters intended to protect the health of the general public, the proper disposal of animal carcasses – which, it is emphasized, must be handled in a manner appropriate to the cause of death. In the event of having to dispose of a large number of cattle, for example, it is emphasized that the rules and regulations issued by the Texas Commission on Environmental Quality must be met. The animal carcasses just mentioned might be burned, for example – but if the carcasses are buried rather than burned, the potentially adverse effect on water tables in the area must be taken into consideration.

Personnel assigned to the San Antonio (Brooks City-Base) office of AECOM Environment, a leading consultant company in environmental health and safety services, researched and wrote the plan following a series of meetings, including a review by members of the Texas Animal Health Commission.

Adam McLaughlin is with the Port Authority of NY & NJ, and is the Preparedness Manager of Training and Exercises, Operations & Emergency Management, where he develops and implements agency-wide emergency response and recovery plans, business continuity plans, and training and exercise programs. He designs and facilitates emergency response drills/exercises for agency responders, state and federal partners, and senior Port Authority executives. Adam is a Veteran and former US Army Military Intelligence & Security Officer, having served with the 10th Mountain Division in Afghanistan during Operation Enduring Freedom and Operation Anaconda.



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