Weapons of Mass Destruction

Chemical — Vx Scenario
Acknowledgement

This exercise was developed by the Emergency Management Institute (EMI) in partnership with the Exercise Division of the Preparedness, Training and Exercises Directorate (PT&E).
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Overview of the Course

Introduction

The President of the United States has, through the issuance of Presidential Decision Directive 39 (PDD-39), assigned to the Federal Emergency Management Agency (FEMA) lead federal agency responsibility for consequence management of terrorism. As such, it is FEMA’s responsibility to ensure that State and local response plans, procedures, policies, and capabilities are adequate and tested. The President’s highest priority is to assist State and local government’s efforts to develop effective capabilities for reducing and managing the consequences of terrorist use of weapons of mass destruction (WMD).

As part of its strategy to execute its mission, FEMA’s Emergency Management Institute (EMI) has developed a series of courses, consisting of three sessions, which simulate the types of challenges faced by local communities following a WMD terrorist incident. The sessions are designed to help you analyze, discuss and identify your jurisdiction’s needs. This course involves a chemical terrorism incident.

Purpose

The primary purpose of this course is to improve the ability of local governments to prepare for, manage, and respond to mass casualty terrorism incidents involving the use of WMD – for this course, chemical terrorism.

Rationale

Protecting the citizens in a jurisdiction is the primary responsibility of local government officials. The ability to fulfill this responsibility depends on the skills and abilities of local governments to apply their emergency management concept of operations in a timely and proficient manner when a WMD incident occurs.
Objectives

At the conclusion of this course, participants should be able to do the following:

- Exercise greater leadership in preparing for and managing response to WMD mass casualty terrorism incidents through a better understanding of their jurisdiction’s response capabilities.

- Analyze the appropriateness of plans, policies, procedures, and other preparedness elements currently in place to respond to and recover from a mass casualty terrorist incident.

- Determine the adequacy of the level of training of jurisdictional disaster and emergency management staff.

- Determine the adequacy of the jurisdiction’s resources (e.g., personnel, material, and personal protective and other equipment) for response to and recovery from a mass casualty incident.

- Identify the coordination requirements among local, State, and federal governments for response to WMD terrorist incidents.

Prerequisites for the Course

The course is designed with the following assumptions about participation:

1. The city or county conducting the course has an emergency operations plan (EOP) and standard operation procedures (SOPs).

2. The participants know and understand their roles and responsibilities, as defined by their EOP, are trained in their areas of expertise, and know their jurisdiction.
Target Audience

The following is a list of recommended participants, but it is not all-inclusive.

<table>
<thead>
<tr>
<th>Recommended Audience for the Course</th>
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<tbody>
<tr>
<td><strong>Core Recommended Audience</strong></td>
</tr>
<tr>
<td>• Chief Elected/Appointed Official</td>
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<tr>
<td>• Fire Chief</td>
</tr>
<tr>
<td>• Sheriff, Police Chief</td>
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<tr>
<td>• Director, Emergency Services</td>
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<tr>
<td>• Director, Public Works</td>
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<td>• Director, Public Health and Safety</td>
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<tr>
<td>• Public Information Officer</td>
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<tr>
<td>• Chief Financial Officer</td>
</tr>
<tr>
<td>• Legal Counsel</td>
</tr>
<tr>
<td>• Chief Medical Examiner/Coroner</td>
</tr>
<tr>
<td>• Communications Director</td>
</tr>
<tr>
<td><strong>Other Potential Participants</strong></td>
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<tr>
<td>• Transportation Authority (Port Authority, Airport Authority, and/or Area Transportation Authority, etc.)*</td>
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<tr>
<td>• Evacuation Coordinator*</td>
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<tr>
<td>• Mass Care Coordinator*</td>
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<tr>
<td>• Resource Manager</td>
</tr>
<tr>
<td>• Chief, Animal Care and Control Agency</td>
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<tr>
<td>• Warning Coordinator</td>
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<tr>
<td>• Coordinator of Volunteer Organizations</td>
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<tr>
<td>• Director, Emergency Medical Service (EMS)</td>
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<tr>
<td>• Director, Hazardous Materials Team (HMT)*</td>
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<tr>
<td>• State and/or federal Representatives, as appropriate*</td>
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<tr>
<td>• Area Military Representatives*</td>
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<tr>
<td>• National Guard Representative</td>
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<td>• Department of Energy (DOE)</td>
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<tr>
<td>Representative</td>
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<tr>
<td>• Federal Bureau of Investigations (FBI) Representative*</td>
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<td>• Public Health Service Representative</td>
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<td>• Centers for Disease Control (CDC)</td>
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<td>Representative</td>
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<tr>
<td>• Environmental Protection Agency (EPA) Representative</td>
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<tr>
<td>• U.S. Coast Guard (USCG) Representative</td>
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<tr>
<td>• Representatives of neighboring jurisdictions</td>
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</table>

* The target audience with an asterisk must be invited (if they are available).
Categories of Participants

The course has three categories of participants:

- **Instructor(s)** – the person or persons responsible for organizing the course, providing information to the participants before, during, and after the course, and conducting the actual course. The instructor should be skilled in facilitating meetings and have a general understanding of response requirements for WMD incidents. A skilled instructor who is knowledgeable of both the jurisdiction and WMD terrorism related issues would be ideally suited.

  The instructor must have the full support of the jurisdiction’s chief administrative officer and be authorized to ask assistance from staff members in preparing for the course.

- **Participants** – those carrying out the prescribed course tasks. The participants should include 10 to 15 local government senior staff members. Members of local political bodies and citizen organizations may also be invited to participate at the discretion of the jurisdiction.

- **Observers** – persons invited to learn from the course by watching or provide additional resources or advice. Allowing non-participants to observe the course is an effective way to spread the benefit; however, it is optional. The instructor and the participating jurisdiction would make the decision. Observers could be other staff members from participating departments, staff members from non-participating departments, elected or appointed local officials, and jurisdictional representatives. Staff members from other nearby jurisdictions might also be invited. By including observers, a jurisdiction would be increasing the impact of the course as a learning tool.
Overview of the Course

Experience demonstrates that preparing in advance improves performance when disaster strikes. This course provides you with an opportunity to identify the issues involved and problems you will face in responding to a WMD incident, specifically chemical terrorism, so that you can take actions now to be better prepared should a real event occur.

This course simplifies, orders, and rationalizes events during a period of time characterized by incredible confusion and complexity, pressure to do everything at once, and intense emotions. However, each session does cover key elements that are likely to be encountered in responding to a WMD event. The incident is presented in three time-sequenced sessions to allow you to focus on immediate, mid- and long-term response and management issues.

The course scenarios are not designed to reflect your jurisdiction’s political context, though you should consider how major political issues influence your actions and decisions. This course does not cover the technical details of responding to a terrorist incident involving chemicals. Economic and fiscal matters are only tangentially included, although they have a significant impact on the jurisdiction’s ability to recover. A detailed discussion of FEMA disaster assistance programs and requirements are not incorporated into the course, mainly because it would take too long to adequately explain them. However, a list of resource materials that you can obtain for additional information is provided.

The course consists of the introduction and three sessions that are to be completed in sequence, as illustrated below.
Length and Schedule for the Course

This course is designed for completion over a three-day period, one-half day for each session, though it offers flexibility to jurisdictions. The following is a suggested content outline.

<table>
<thead>
<tr>
<th>Content Outline</th>
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<tbody>
<tr>
<td><strong>Day One (four to six hours)</strong></td>
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</table>

### Introduction
Welcome and Introductions
Review of Administrative Details
Course Purpose and Objectives
  - Purpose
  - Objectives
  - Role of Participants
  - Expected Outcomes
Growing Risks and Threats of WMD Terrorism-Related Incidents
  - Definition of WMD Terrorism-Related Incidents
  - Characteristics of WMD Terrorism-Related Incidents
  - Risk and Threats of Exposure to WMD Terrorism-Related Incidents

Individual Needs Assessment

### Session I: Notification, Activation and Assessment of the WMD Incident
Purpose of the Session
Objectives of the Session
  - Instructions
  - Scenario Background Information
Scenario
Facilitated Discussion
Debrief
Action-Planning Session
Wrap Up
<table>
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<tr>
<th>Day Two (four to six hours)</th>
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<tr>
<td><strong>Session II: Response to the WMD Incident (VX)</strong></td>
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<tr>
<td>Purpose of the Session</td>
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<td>Objectives of the Session</td>
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<tr>
<td>• Instructions</td>
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<td>• Scenario Background Information</td>
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<tr>
<td>Scenario</td>
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<tr>
<td>Facilitated Discussion</td>
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<tr>
<td>Debrief</td>
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<td>Action-Planning Session</td>
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<td>Wrap Up</td>
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<th>Day Three (four to six hours)</th>
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<tr>
<td><strong>Session III: Recovery from Chemical Terrorism Incident</strong></td>
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<td>Purpose of the Session</td>
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<tr>
<td>Objectives of the Session</td>
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<tr>
<td>• Instructions</td>
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<tr>
<td>• Scenario Background Information</td>
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<tr>
<td>Scenario</td>
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<tr>
<td>Facilitated Discussion</td>
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<tr>
<td>Debrief</td>
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<tr>
<td>Wrap Up</td>
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**Course Action-Planning Session**

**Summary and Conclusion**
One-Day Plan

Jurisdictions have the option of conducting this course in a single day lasting between eight and ten hours. This option sacrifices much of the detailed validation and/or assessment of current plans and procedures and is not recommended. If this option is selected, the following is a suggested content outline for the course and includes a working level.

<table>
<thead>
<tr>
<th>Content Outline</th>
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<tr>
<td><strong>Single Day (eight to 10 hours)</strong></td>
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**Introduction**

- Welcome and Introductions
- Review of Administrative Details
- Course Purpose and Objectives
  - Purpose
  - Objectives
  - Roles of Participants
  - Expected Outcomes
- Growing Risks and Threats of WMD Terrorism-Related Incidents
  - Definition of WMD Terrorism-Related Incidents
  - Characteristics of WMD Terrorism-Related Incidents
  - Risk and Threats of Exposure to WMD Terrorism-Related Incidents
- Individual Needs Assessment

**Session I:**
**Notification, Activation and Assessment of the WMD Incident**

- Introduction
- Scenario
- Facilitated Discussion
- Transition and Wrap Up
# Overview

## Session II: Response to the WMD Incident (VX)
- Introduction
- Scenario
- Facilitated Discussion
- Transition and Wrap Up

## Session III: Recovery from Chemical Terrorism Incident
- Introduction
- Scenario
- Facilitated Discussion
- Wrap Up of Scenario Discussions

### Action-Planning Session

### Summary and Conclusion
Section 2 – Conducting the Course

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Conducting the Course

Guidelines for Facilitating the Course

Instructor’s Role

The key to an effective delivery is the instructor. The primary role of the instructor is as a facilitator, not as the fountain of all wisdom and the source of all knowledge. The goal is group discussion and participation.

Knowledge

To be effective, an instructor should be prepared with the following:

• An understanding of the course subject matter and the community

• A thorough understanding of emergency management and WMD issues

• Experience in developing, conducting, and participating in similar courses

Presentation Skills

Instruction is often identified with stand-up lectures. However, in this course the skills are learned through facilitation, rather than presentation. For this reason, “presentation skills,” take on a greater dimension. These skills can include any of the facilitator skills.

Set the Stage

• Establish a relaxed atmosphere

• State purpose and objectives

• Explain ground rules

• Present the narrative
Leading a Discussion

A discussion format is effective when class members have experience in emergency management. Draw from the participants and be prepared to add examples and explanations from your experience. You will discover that many of the participants will have a wealth of experience, which is a learning source for other participants. Discussions will also reveal knowledge and experience gaps.

The success of a discussion can be measured by how closely two criteria are met:

• Participants’ understanding of the concepts, and
• Active participation

Following these general guidelines will increase the success of the discussion:

• Ask open-ended questions
• Push past simplistic solutions and encourage thinking “out of the box.”
• Record issues/comments
• Add examples and discussions from your own experience
• Model good listening and response skills

Using Questions Skillfully

A good discussion often grows out of good questioning techniques. The following are some tips:

• Spread your questions around the group
• To ensure that everybody thinks about a question, first direct your question to the whole group and then wait a minute before directing it to an individual.
• Ask challenging or stimulating questions
• Ask open-ended questions
Training Methods

This course is performance-based. The emphasis is less on telling and more on assisting participants to do. The assumption is that participants come with knowledge and experience from which they can draw. To make this course as practical as possible, relate the concepts to participant experiences and problems. Your role as an instructor is to help them apply their experience and knowledge.

Creativity and flexibility are key words in this course. The course requires adaptation to individual needs.

The following is a partial list of requirements to ensure the success of the course:

• Remember to mail the participant checklist to the participants three weeks prior to the class.
• Circulate the class roster and have the participants sign-in.
• To be successful, this course requires a minimum of two instructors.
• The lead instructor must be well versed with emergency management issues and know the jurisdiction and its issues well.
• The secondary instructor must be knowledgeable and well versed in WMD issues.

Responsibilities

Lead Instructor

Must have a deep understanding of the course content and must assume primary responsibility for:

• Modifying the course to meet the unique needs of the jurisdiction
• Serving as the lead facilitator
• Managing and organizing the course
• Maintaining an appropriate pace
Secondary Instructor

The secondary instructor serves as an additional trainer with a firm knowledge of WMD terrorism. The responsibilities include:

- Facilitation
- Facility arrangement
- Arranging for special course needs: audio visual equipment and materials, flip charts, newsprint, markers
- Dealing with special needs of participants

Guidelines for Delivery of the Course

1. For participants, select high-level staff persons from 10 to 15 departments to form a small working group in which each participant can interact freely with all others. Invite additional staff members to observe. Refer to the table of suggested participants for guidance (in Section 1).

2. The success of the course depends on total concentration of all participants throughout the course. If possible, arrange to conduct the course away from the normal work place to reduce chances for interruption.

3. Find a room that will display computer-generated presentations, if you are using Powerpoint slides. The room should be equipped with an overhead projector and screen if you are using overheads.

4. The room should contain a large table that will accommodate 10 to 15 individuals and the resource materials such as the map. The walls should allow for taping of flipcharts or pushpins.

5. Let participants know that they must be on time for the course and that they should not have any interruptions due to phone calls or urgent meetings. (Responses to actual disasters or emergencies will, of course, take precedence over course activities.)
Guidelines for Conducting the Sessions

The following are general guidelines for conducting each session during the course; specific guidance is provided in the instructor’s introduction to each session.

- The sessions are in rough chronological order, but in reality, many activities would be occurring simultaneously.

- Each scenario is a realistic depiction of a WMD chemical incident and is designed to accurately stress local response capabilities for the purpose of determining the strengths and weaknesses in the jurisdiction’s preparedness program.

- The participants examine a single scenario in three distinct sessions, each examining a different phase of the scenario.

- The instructor introduces each session by highlighting the details.

- Following the introduction by the instructor, each participant reviews the sessions from the point of view of his/her role and responsibilities in the preparation for, management of, and response to the WMD incident.

- Following the review of the information presented in each session, the participants participate in a facilitated discussion to explore the strengths and weaknesses of their plans, procedures, policies, training, and resources.

- All the tasks can be accomplished using the local emergency operations plan, emergency action checklists, and knowledge of local policies and procedures, as indicated.

- At the conclusion of each session, the instructor will debrief participants. The instructor will ask participants to evaluate their jurisdiction’s emergency procedures and list positive and negative points. From this list, participants will have materials to enhance their emergency operations plans and action plans.
Course Materials

To conduct the course, you will need to assemble some readily available supplies and standard local documents. Use the following checklists to prepare course materials.

Instructor Workplan

An important aspect of facilitating this course is taking the time to ensure that you are adequately prepared for each phase of the course: before, during, and after. The instructor checklists include specific timelines for completion of tasks. It is strongly recommended that you adhere to these guidelines. You will find instructor checklists at the end of this section.

Participant Checklists

The Participant Checklists should be sent to participants prior to the course. They are included following the instructor workplan. A Participant Roster is included so that you may record attendance.
### Course Material Requirements

**Exercise:** Use the following checklist in preparing for the course.

<table>
<thead>
<tr>
<th>Training Facilities</th>
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<tbody>
<tr>
<td>- A meeting room large enough to accommodate participants</td>
</tr>
<tr>
<td>- A table large enough to comfortably seat the invited participants</td>
</tr>
<tr>
<td>- Tables for supplies</td>
</tr>
<tr>
<td>- Extra seating for guests or observers</td>
</tr>
<tr>
<td>- Refreshment table (optional)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Materials and Supplies</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Instructor Guide and Student Manual developed</td>
</tr>
<tr>
<td>- Copies of all participants’ materials, one per person – except where noted. Have a few extras of all materials just in case visitors or participants are added to the course at the last minute. (Refer to the Training Materials Checklist)</td>
</tr>
<tr>
<td>- Copies of all the overheads to be used in the program, arranged in order of use</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Equipment and Supplies</th>
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<tbody>
<tr>
<td>- Overhead projector</td>
</tr>
<tr>
<td>- Computer and screen display equipment (if using Powerpoint slides)</td>
</tr>
<tr>
<td>- Projection Screen</td>
</tr>
<tr>
<td>- Two flipcharts, easels and paper</td>
</tr>
<tr>
<td>- Felt-tipped markers</td>
</tr>
<tr>
<td>- Several rolls of masking tape</td>
</tr>
<tr>
<td>- Name tents</td>
</tr>
<tr>
<td>- Pens, pencils, and writing pads for participants</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Documents</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Jurisdiction’s Emergency Operations Plan</td>
</tr>
<tr>
<td>- Standard Operating Procedures</td>
</tr>
<tr>
<td>- Zoning maps</td>
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<tr>
<td>- Base Maps*</td>
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</tbody>
</table>

*One or more copies of a base map of the jurisdiction are essential. The map should be the largest scale (most detailed) available that can fit in the room that is to be used for the course. It should show major properties, highways and streets, major facilities, and if available, parcel boundaries. If the jurisdiction is geographically large, a table-top-sized map probably will not show individual parcels. You may want to include pocket-sized maps of the transit system for each participant’s use.
Instructor Workplan

Before (six weeks)

Design Phase

Note: Customize the course as appropriate. For example, if there is no transit system in the jurisdiction, adjust the scenario accordingly.

Week One – __________
- Review objectives of course.
- Identify and coordinate with local jurisdiction and State points of contact to establish liaison.
- Determine composition of scenario development and conduct teams and assign responsibilities.
- Identify special local issues for discussion, if any exist. (Example: if responders from different agencies or departments do not have compatible communication systems, include the topic in the facilitated discussion.)
- Determine format and method of assessment to be used; e.g., report, presentation, etc.
- Develop detailed milestones for completion; i.e., enter dates on this workplan.

Development Phase

Week Two – __________
- Review instructor materials and research scenario specific information.
- Coordinate with local jurisdiction and/or State points of contact to receive copies of local plans, maps, procedures, etc.
- Coordinate with local point of contact to finalize the date, time, and location of WMD course.
- Confirm target audience (participants) for course and issue invitations/notifications.

Week Three – __________
- Review local information and materials, such as EOP, SOPs, maps, etc. (If there are glaring omissions in the EOP or SOPs, be prepared to include the topics in the facilitated discussion.)
- Develop list of site/location specific information necessary to complete the scenario.
- Draft agenda for course.
- Begin content development/scenario revision.
  - Look for items that appear in italicized brackets [ ] within the scenario – these items should be changed so as to be site-specific.
- Coordinate with State training officer to develop a graphic depiction of the scenario if possible.
- Send a letter specifying prerequisites for the course, the agenda and draft, and Participants’ Checklist: Before the Course (included at end of this section).
## Instructor Workplan

### Before (six weeks)

**Week Four – __________**
- [ ] Complete and review first draft of scenario.
- [ ] Review scenario based on team components/participants.
- [ ] Determine what additional facilitation aids will be required and begin development of materials.

**Week Five – __________**
- [ ] Finalize scenario.
- [ ] Review participant and instructor materials.
- [ ] Confirm number of participants and arrange for duplication/production of participant materials – sufficient numbers of binders are needed to provide one per participant.
- [ ] Request biographic summaries on each participant.

**Week Six – __________**
- [ ] Final review and approval of scenario, participant and instructor materials and other materials.
- [ ] Dry run for conduct.
- [ ] Assemble scenario packages for participants and instructors. Binders should include the following:
  - Binder cover page
  - Inside cover page
  - Agenda
  - Introduction
  - Objectives
  - Ground rules and tips for participants
  - Personal needs matrix
  - Session background and scenarios (these should be sealed – cover page, scenario info – plus any graphics as deemed appropriate and obtained from State or local points of contact, and questions).
  - Action-Planning Questions
  - Action-Planning Matrices
- [ ] Review biographic summary of each participant.
Conducting the Course

Instructor Workplan

During (one week)

Conduct Phase
Week Seven – __________

Days of Conduct

- Conduct the course.
- Evaluate performance and assess training value.
- Conduct action-planning sessions and “hotwash” debriefing sessions with participants and instructors.
- Distribute and collect participant evaluation form.

Week Seven – __________

Day after Conduct

- Debrief among instructors and evaluators.
- Assess design, development, conduct, and evaluation process.
## Instructor Workplan

### After (three weeks)

### Evaluation Phase

**Week Eight – __________**
- Review participant comments
- Develop outline and begin drafting evaluation for report or presentation purposes.
- Formulate recommendations for modifications to policy, program, plan or procedures.
- Incorporate results of action planning session into course report.
- Complete draft of report/presentation.

**Week Nine – __________**
- Review evaluation report/presentation among instructors, evaluators, and state and local points of contact.

**Week Ten – __________**
- Incorporate comments as appropriate and revise final version.
- Present findings to appropriate managers and personnel.
Participants’ Checklist

Instructions: Please use the following checklist and mark each item as you complete the task.

Before

☐ Locate and review a copy of your jurisdiction’s Emergency Operations Plan (EOP).

☐ Be knowledgeable about the following Annexes (or their equivalent) in the EOP: Direction and Control, Activation and Notification, Public Warning and Public Information, Communications, Evacuations, Sheltering, Incident Command System (if used in your jurisdiction), Resource Management, Health and Medical, and Intergovernmental and Intragovernmental Liaisons.

☐ Locate and review a copy of your jurisdiction’s Standard Operating Procedures (SOP) for emergencies, and policies and procedures related specifically to emergencies.

☐ Locate and review a copy of your roles and responsibilities during an emergency.

☐ If possible, bring a copy of relevant SOPs, and if available, the EOP to the course.

☐ Determine if your jurisdiction has a WMD or Terrorism Annex (if you do, bring it to the course).

During

☐ Participate fully in the course activities.

☐ Use this time to plan how you will work with your jurisdiction to improve your capability to respond effectively to a WMD incident.

☐ Respect your peers’ opinions.

☐ Listen with an open mind.

☐ Don’t monopolize the conversations.

After

☐ Use Action-Planning guides, worksheets, and checklists to initiate planning actions when you’re back on the job.

☐ Assess your progress in meeting your projected tasks and actions in three and six month intervals.

☐ Review your EOP and SOPs at least annually to ensure their currency.

☐ Complete any evaluation or after-action reports that are required by your jurisdiction.
## Participant Roster

Instructor(s):
Date:
Time:
Location:

<table>
<thead>
<tr>
<th>Participant Name</th>
<th>Department/Jurisdiction/Position</th>
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<tbody>
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<td>15.</td>
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</table>

OTHER ATTENDEES:
Emergency Action and EOP Assessment Checklists

Use the following checklist as a tool during the review of the local EOP.

The blank rows are provided to allow additional analysis and highlight any special innovations contained in the local EOP.

This checklist will provide you a basis for learning about the EOP, SOPs and other documents.

Provide a copy of this checklist (without your notes) to the participants during the final Action Planning Phase.
## Emergency Action and EOP Assessment Checklist: The Early Stage

<table>
<thead>
<tr>
<th>Description/Function</th>
<th>Adequate</th>
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<tbody>
<tr>
<td><strong>Direction and Control</strong></td>
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<tr>
<td>Describes the command structure, specifying who will be in charge during emergency response operations.</td>
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<tr>
<td>Specifies the authorities and limitations of key personnel.</td>
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<tr>
<td>Identifies roles and responsibilities for key personnel during the initial stages of the WMD threat.</td>
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<tr>
<td>Includes provisions for coordinating and communicating among all jurisdictions and agencies.</td>
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<tr>
<td><strong>Hazard Assessment</strong></td>
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<tr>
<td>Contains a hazard vulnerability assessment that looks into WMD incidents, including impact, risk areas, evacuation routes, response efforts, etc.</td>
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<tr>
<td>Considers special needs for such an event, such as personal protective equipment and need for rapid response.</td>
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<tr>
<td>References procedures for detection, monitoring, and sampling of WMD agents or materials.</td>
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<tr>
<td><strong>Notification and Activation</strong></td>
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<tr>
<td>Includes a formalized procedure for notifying key personnel through a current alert list, notification table, or cascade notification system.</td>
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<tr>
<td>Specifies procedures for notification of key personnel of the threat.</td>
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<tr>
<td>Includes current telephone numbers for key personnel.</td>
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</table>
## Emergency Action and EOP Assessment Checklist: The Early Stage

<table>
<thead>
<tr>
<th>Description/Function</th>
<th>Adequate</th>
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<tbody>
<tr>
<td>Identifies special requirements or recommended notifications to State and or federal officials when dealing with a WMD incident.</td>
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<tr>
<td>Specifies procedures for activation of the EOC.</td>
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</table>

### Communication Systems (External and Internal)

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<thead>
<tr>
<th>Description/Function</th>
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<tbody>
<tr>
<td>Specifies requirements for a backup system and monitors its implementation.</td>
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<tr>
<td>Clearly defined reporting procedures and mechanisms for communicating across all agencies and for inter/intra jurisdictional communication.</td>
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</table>

### Warning and Emergency Public Notification

<table>
<thead>
<tr>
<th>Description/Function</th>
<th>Adequate</th>
<th>Inadequate</th>
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<tbody>
<tr>
<td>Includes written procedures for keeping key personnel’s family members apprised of the situation and the status of their immediate family.</td>
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<tr>
<td>Policy that states how information will be communicated to the public – when it has to be relayed immediately.</td>
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</tr>
<tr>
<td>Describes sources for disseminating public information (Emergency Alert System (EAS), television stations, radio stations, cable outlets, newspapers, etc.). Source listing includes telephone numbers.</td>
<td></td>
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<tr>
<td>Describes back-up sources for disseminating information (vehicle-mounted public address systems, door-to-door, etc.).</td>
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<tr>
<td>Describes resources for disseminating information to those with language barriers or disabilities (sight, hearing, etc.).</td>
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<tr>
<td>Supplementation of the EAS (as appropriate).</td>
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</table>
### Emergency Action and EOP Assessment Checklist: The Early Stage

<table>
<thead>
<tr>
<th>Description/Function</th>
<th>Adequate</th>
<th>Inadequate</th>
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<tbody>
<tr>
<td>Includes instructions on who should activate the emergency public information organization, notification procedures, and where personnel should report.</td>
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<tr>
<td>Provides roles and responsibilities of the emergency management team and specifies the actions that should be taken.</td>
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<tr>
<td>Has prewritten messages for the public in dealing with an unknown chemical hazard.</td>
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<table>
<thead>
<tr>
<th>Authorities</th>
<th>Adequate</th>
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</thead>
<tbody>
<tr>
<td>Indicates who has authority to open the EOC, declare an emergency, etc.</td>
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<tr>
<td>Includes lines of succession in case an individual is out of town or dies.</td>
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</table>

<table>
<thead>
<tr>
<th>Immediate Actions</th>
<th>Adequate</th>
<th>Inadequate</th>
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</thead>
<tbody>
<tr>
<td>Includes evacuation and/or sheltering procedures and procedure for determining the appropriate protective action.</td>
<td></td>
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</tr>
<tr>
<td>References procedures for first response medical response, e.g., self-aid, buddy-aid, and initial treatment in a contaminated environment.</td>
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<tr>
<td>Includes protective action implementation procedures for special populations and facilities.</td>
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</tbody>
</table>
# Emergency Action and EOP Assessment Checklist: Response

<table>
<thead>
<tr>
<th>Description/Function</th>
<th>Adequate</th>
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</thead>
<tbody>
<tr>
<td><strong>Communication Systems</strong></td>
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</tr>
<tr>
<td>Specifies methods for communicating between the EOC, field forces, control centers of emergency operations, radio/TV stations, hospitals, ambulance dispatch centers, adjacent jurisdictions and military installations, State EOC, etc.</td>
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<tr>
<td>Has plans for augmentation of local capability by higher levels of government.</td>
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<tr>
<td>Clearly specifies requirements for a backup telecommunications system.</td>
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<tr>
<td>Identifies support groups for providing communications (Amateur Radio Emergency System (ARES), citizens band groups, taxi and transit companies, etc.).</td>
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<tr>
<td>Identifies the type of equipment required for backup support and resources for obtaining it.</td>
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<tr>
<td><strong>Resource Management</strong></td>
<td></td>
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<tr>
<td>Describes the roles and responsibilities of those involved with resource management.</td>
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<tr>
<td><strong>Personnel and Equipment Resources</strong></td>
<td></td>
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<tr>
<td>Includes provisions for obtaining special protective gear and special medical supplies such as antidotes.</td>
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<tr>
<td>Includes procedures for requesting assistance (be specific) and prioritizing needs.</td>
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</tbody>
</table>
### Emergency Action and EOP Assessment Checklist: Response

<table>
<thead>
<tr>
<th>Description/Function</th>
<th>Adequate</th>
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<tbody>
<tr>
<td><strong>Public Affairs</strong></td>
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<tr>
<td>Provides guidance on how the jurisdiction should deal with media convergence.</td>
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<tr>
<td>Provides guidance on obtaining credentials for media representatives and for coordinating with law enforcement regarding access to the scene.</td>
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<tr>
<td>Includes a resource listing of sources that can provide accurate and timely information on a chemical and the required protective actions.</td>
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<tr>
<td>Provides guidance on how the core emergency management team staff will be augmented to handle a surge in the public’s and media’s demands for information.</td>
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</table>

**Authorities**

<table>
<thead>
<tr>
<th>Description/Function</th>
<th>Adequate</th>
<th>Inadequate</th>
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</thead>
<tbody>
<tr>
<td>Specifies appropriate authorities as applicable to particular functions.</td>
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<tr>
<td>Authorities specify types of emergency powers available and who has authority to enact them.</td>
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</tbody>
</table>

**Actions**

<table>
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<tr>
<th>Description/Function</th>
<th>Adequate</th>
<th>Inadequate</th>
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<tbody>
<tr>
<td>Includes rescue operation procedures.</td>
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<tr>
<td>References medical facility plans or jurisdictional disaster health plan which addresses adequacy of facility and personnel, handling contaminated persons, a casualty-tracking system, handling contaminated human remains.</td>
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<tr>
<td>Includes procedures for continuing WMD hazard assessment.</td>
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<tr>
<td>Description/Function</td>
<td>Adequate</td>
<td>Inadequate</td>
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<tr>
<td>Includes procedures for traffic and access control.</td>
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<tr>
<td>Includes procedures for management of field response, including emergency worker exposure control, emergency worker decontamination, security and accountability, and supply/re-supply of WMD-unique materials.</td>
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</tbody>
</table>
### Emergency Action and EOP Assessment Checklist: Recovery Phase

<table>
<thead>
<tr>
<th>Description/Function</th>
<th>Adequate</th>
<th>Inadequate</th>
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<tbody>
<tr>
<td><strong>Public Affairs</strong></td>
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<tr>
<td>Includes provisions for keeping families notified about the status of their loved ones.</td>
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<tr>
<td>Specifies provisions for setting up a joint information center.</td>
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<tr>
<td><strong>Security and Control Issues</strong></td>
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<tr>
<td>Includes procedures for general security and property protection issues – use of National Guard, looters and gangs, etc.</td>
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<tr>
<td><strong>Personnel and Equipment Resources</strong></td>
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</tr>
<tr>
<td>Includes a resource listing (database, SOP, or attachment to SOP) that identifies resources for personnel, communications equipment, vehicles, decontamination materials, potable water.</td>
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<tr>
<td>Specifies procedures for financial (record keeping) and legal accountability.</td>
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<tr>
<td>Includes procedures for distributing resources (goods and services).</td>
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<tr>
<td>Includes rules and regulations regarding emergency procurement procedures.</td>
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<tr>
<td>Provides directions for support facilities such as staging areas, warehouse and distribution centers, and mobilization centers.</td>
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<tr>
<td>Applicable annexes specify procedures for obtaining augmentation personnel, including evidence of credential requirements, where needed.</td>
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<tr>
<td>Includes provisions for 24-hour operations.</td>
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<tr>
<td>Description/Function</td>
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</tr>
<tr>
<td>Includes procedures for requesting mutual aid teams from neighboring jurisdictions,</td>
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<tr>
<td>from State sources, such as the State Guard, and from Federal sources, such as the</td>
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<tr>
<td>military, Centers for Disease Control, and the National Disaster Medical System.</td>
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<tr>
<td>Requests assistance according to the EOP and uses proper protocol.</td>
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<tr>
<td><strong>Other Resources</strong></td>
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<tr>
<td>Includes specifications about how to manage volunteers and addresses liability issues</td>
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<tr>
<td>concerning their use.</td>
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<tr>
<td>Includes provisions for what to do with donations and how to manage them.</td>
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<tr>
<td><strong>Agreements</strong></td>
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<tr>
<td>Includes mutual aid agreements and/or intergovernmental agreements for the following:</td>
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<tr>
<td>mortuary services, medical response teams, resources.</td>
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<tr>
<td><strong>Authorities</strong></td>
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<tr>
<td>Includes a reference to the Stafford Act and the authorities it conveys, including</td>
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<tr>
<td>reporting structures and management of operations.</td>
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<tr>
<td>Authorities provide for access to, use of, and reimbursement for private sector</td>
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<tr>
<td>resources in an emergency, and for emergency procurement procedures.</td>
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<tr>
<td>Description/Function</td>
<td>Adequate</td>
<td>Inadequate</td>
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<tr>
<td><strong>Re-entry</strong></td>
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<tr>
<td>Includes procedures for certifying an area safe for evacuees to return to their homes or businesses.</td>
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<tr>
<td><strong>Restoration</strong></td>
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<tr>
<td>Includes guidance on developing a recovery/restoration plan to restore economic, political, and jurisdictional viability to areas impacted by WMD effects.</td>
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</table>
Section 3 – Introduction to the Course

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Introduction to the Course

Purpose

The course introduction provides you with a sense of the structure of the course, what you will gain from participation, and your role in the course. This section also provides background information pertaining to WMD terrorism events.

Objectives

During this section, you will accomplish the following objectives:

1. Meet your fellow participants.
2. Become acquainted with the purpose and objectives of the course.
3. Learn expected outcomes from course participation.
4. Learn your role as a course participant.
5. Review course material requirements.
6. Learn the definition, characteristics, and risks, threats and exposure of WMD terrorism-related incidents.
Content Outline

The following is the recommended content outline, but you are encouraged to adapt it to suit your needs.

### Introduction to the Course

<table>
<thead>
<tr>
<th>Welcome and Introduction</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review of Administrative Details</td>
</tr>
<tr>
<td>Icebreaker</td>
</tr>
<tr>
<td>Background</td>
</tr>
<tr>
<td>Overview of the Course</td>
</tr>
<tr>
<td>A. Purpose</td>
</tr>
<tr>
<td>B. Objectives</td>
</tr>
<tr>
<td>C. Expected Outcomes</td>
</tr>
<tr>
<td>D. Role of Participants</td>
</tr>
<tr>
<td>E. Course Materials</td>
</tr>
<tr>
<td>F. Growing Risks and Threats of WMD Terrorism-Related Incidents</td>
</tr>
<tr>
<td>Individual Needs Assessment</td>
</tr>
</tbody>
</table>

### Welcome and Introduction

Welcome the participants. Give the title of the course, its length, information on breaks. Briefly introduce yourself.

### Review of Administrative Details

Announce pertinent administrative details such as the location of restrooms, how to get messages, etc. Emphasize that phone calls are discouraged.

### Icebreaker

It is assumed that participants are acquainted with each other. In order for you to become acquainted with the participants, have them introduce themselves. Name tents should be used to assist the facilitation process.
Background

The President of the United States has, through the issuance of Presidential Decision Directive (PDD-39), assigned to the Federal Emergency Management Agency (FEMA) lead federal agency responsibility for consequence management of terrorism. As such, it is FEMA’s responsibility to ensure that the State and local response plans, procedures, policies, and capabilities are adequate and tested. The President’s highest priority is to assist State and local governments to develop effective capabilities for reducing and managing the consequences of terrorist use of weapons of mass destruction (WMD).

As part of its strategy to execute its mission, FEMA’s Emergency Management Institute (EMI) has developed a course consisting of three sessions, each of which simulate the types of challenges faced by local communities following a WMD terrorist incident. The sessions are designed to help you analyze, discuss and identify your community’s needs. This course involves a terrorist chemical incident.

Main Points:

• Through PDD-39, the President has assigned FEMA lead federal agency responsibility for consequence management of terrorism.

• FEMA must ensure that the State and local response plans, procedures, policies, and capabilities are adequate and tested.

• Priority is placed on assisting State and local governments in developing effective capabilities for reducing and managing the consequences of the terrorist use of weapons of mass destruction.

• EMI has developed three sessions designed to help analyze, discuss, and identify community needs.
Overview of the Course

• This course provides an opportunity to identify the issues involved and problems you will face in responding to a WMD incident, specifically chemical terrorism, so that you can take actions now to be better prepared should a real event occur.

• This course simplifies, orders, and rationalizes events during a period of time characterized by confusion and complexity, pressure to do everything at once, and intense emotions.

• Each session covers key elements that are likely to be encountered in responding to a WMD event. The incident is presented in three time-sequenced sessions to allow you to focus on immediate, mid- and long-term response and management issues.

• There are several areas that this course does not address because its scope does not include these issues. These include:
  – Course scenarios are not designed to reflect your community’s political context, though you should consider how political issues influence your actions and decisions.
  – The course does not cover the technical details of responding to a terrorist incident involving a chemical weapon.
  – Economic and fiscal matters are only tangentially included, although they have a significant impact on the jurisdiction’s ability to recover.
  – A detailed discussion of FEMA disaster assistance programs and requirements are not incorporated into the course.

• The course consists of the introduction and three sessions that are to be completed in sequence, as illustrated below.

![Diagram of Session Flow]

Session I
Activation

Session II
Response

Session III
Recovery
A. Purpose

Show visual as you explain the purpose of this course.

The primary purpose of this course is to improve the ability of local governments to prepare for, manage, and respond to mass casualty terrorism incidents involving the use of WMD – for this course, chemical terrorism.

B. Objectives

Show visuals as you review the objectives of the course.

At the conclusion of this course, participants should be able to do the following:

- Exercise greater leadership in preparing for and managing response to WMD mass casualty terrorism incidents through a better understanding of their jurisdiction’s response capabilities.
- Analyze the appropriateness of plans, policies, procedures, and other preparedness elements currently in place to respond to and recover from a mass casualty terrorist incident.
- Determine the adequacy of the level of training of jurisdictional emergency management staff.
- Determine the adequacy of the community’s resources (e.g., personnel, material, and personal protective equipment) for response and recovery from a mass casualty incident.
- Identify the coordination requirements among local, State, and federal governments for response to WMD terrorist incidents.
C. Expected Outcomes

Show visual as you discuss the expected outcomes of the course.

At the end of this course you should have the following information to take back to your office and agency to begin the planning required for a successful response effort:

- Action plans that identify specific tasks, problems, and issues that need attention;
- Strengths and weaknesses of your existing EOP, SOPs, and policies;
- A checklist that identifies the areas of your EOP that require updating or more information; and
- List resource requirements and shortfalls.

This course is not a success unless you go back to your office and follow-through. These tools are designed to put you on the right track.

D. Role of Participants

Show visual as you review the role of the participants.

You have the following role in these activities.

- Participate fully.
- Assume your normal responsibilities and duties that you perform in an emergency.
- Be open-minded and flexible.
- Be proactive in your actions.
- Suspend judgment.
E. Course Materials

The student manual contains:
- instructions
- scenario information
- checklists
- references
- glossary

The student manual is your primary source of information. It is designed as a workbook to use during the course. It includes all the instructions, scenario information, worksheets, references, and glossary. You are encouraged to follow along and take notes.

F. Growing Risks and Threats of WMD Terrorism-Related Incidents

Definition of WMD Terrorism-Related Incidents

Definition of WMD Terrorism-Related Incidents:

Weapons of Mass Destruction (WMD) Terrorism as defined by Presidential Decision Directive 39 (PDD-39) is the use of nuclear weapons or biological, chemical, and radiological agents and/or materials by terrorists.

Characteristics of WMD Terrorism-Related Incidents

Characteristics of WMD Terrorism-Related Incidents:

May be no advance warning
Agent often unknown
A crime scene
Rapid response time required
Designed to maim, destroy, and kill

A terrorist attack can take many forms, depending on the technological means available to the public, the nature of the
political issue motivating the attack, and the points of weakness of the terrorist’s target. Bombings are the most frequently used method of attack.

Terrorism-related incidents are designed to maim, destroy, and kill with the hope of getting extensive media coverage and instilling fear and panic in the public. These incidents often occur without warning and the agent of destruction is often unknown. This poses problems for first responders in dealing with the incident. Terrorist-related incidents become crime scenes and pose a new problem — that of preserving and collecting evidence. These incidents require rapid response time and can result in similar events occurring shortly after the first event.

**Risks, Threats, and Exposure of WMD Terrorism-Related Incidents**

Show visuals as you discuss the risks, threats, and exposure of WMD incidents.

**Risks and Threats:**

- Very short timeframe for lifesaving treatment
- Public may panic – causing confusion and chaos
- Mass casualties likely
- Could require unavailable antidote or treatment
- Local first responders unlikely to be trained
- Chemical agents can kill quickly

WMD incidents pose numerous threats and risks for the public, law enforcement officials, first responders, and all others affected by the incident. Because there are many unknowns involved in these events, most local emergency management systems are not equipped to handle them. In the case of chemical weapons, first responders may not recognize the agent or know its effects. Thus, they may not be adequately protected and may become victims themselves.

Some chemical agents can spread quickly through the air, ventilation systems, and vapors, thus potentially affecting a large number of individuals. With most chemical weapons, there is a need for decontamination, which often drains resources. In other
situations, an antidote or other treatment may be needed in a short timeframe (minutes), resulting in more fatalities if it is not available or in insufficient quantity.

These are just some of the risks and threats posed from WMD. Each WMD will cause different effects. This course should help you to begin thinking about the implications of such an event for your agency and jurisdiction.

**Individual Needs Assessment**

As you begin the course, provide participants with the following worksheet (one copy for each session – if conducted over a three day period). Participants may use the sheet to record issues to be resolved or actions to be taken following this course. The worksheet is most helpful to provide needed details when the final action-planning phase begins.

Encourage participants to remove this sheet from their binders and use throughout the course as a note-taking device.

Transition to the first session: Activation and Assessment of the WMD Incident (Unknown Chemical).
## Individual Needs Assessment

Instructions: Use this worksheet to record issues to be resolved or actions to be taken following this course.

<table>
<thead>
<tr>
<th>Clarification Points</th>
<th>Planning/Procedure Needs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Training Needs</th>
<th>Resource Needs</th>
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</tbody>
</table>
Section 4 – Session I

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Session I – Day One

Notification, Activation and Assessment of the WMD Incident (Unidentified Agent)

Purpose

The first session of this course provides an opportunity to focus on immediate concerns following the report of an unknown chemical WMD incident. It deals with the issues you will face during the discovery, activation, notification, and assessment phases. It addresses the jurisdiction’s emergency management team and their role in managing the response activities at the incident site.

Objectives

Upon completion of this session, you will be able to:

1. Determine the adequacies of authorities in dealing with the incident, including whether there are specifications for lines of succession.

2. Assess the overall validity of the jurisdiction’s Emergency Operations Plan (EOP), Standard Operating Procedures (SOPs), and other documents for dealing with the incident.

3. Assess direction and control procedures.

4. Assess communication systems.

5. Assess notification and activation procedures.

6. Assess warning and emergency public information procedures.

7. Assess procedures for hazard assessment.
8. Determine the jurisdiction’s capabilities for an effective response.

9. Improve coordination among jurisdictional emergency management elements.

10. Determine resource and response requirements.

11. Determine staffing requirements.

12. Other objectives (as developed by the jurisdiction).

Content Outline

The following is the recommended content outline, but you are encouraged to adapt it to suit your needs.

**Notification, Activation and Assessment of the WMD Incident**

- Introduction
- Scenario
- Facilitated Discussion
- Debrief
- Action-Planning Session
- Wrap Up
Scenario Background Information

Purpose

The scenario presents a realistic account of a WMD terrorist incident. It gives participants an opportunity to compare their response plans with the requirements of an actual incident.

Refer to Instructor’s Background Information for information to help put the incident into perspective. Do not disclose this information to the participants – yet.

Show visuals as you highlight the key points of this scenario. The following information is generic information about the scenario. You are encouraged to add additional visuals or text to support any background information that you want to include. Use this information to set the scene, before you instruct participants to break seal on their scenarios.

At lunchtime, you’re faced with a calamitous situation. You’ve been notified that there were several explosions at the airport. There are casualties in several airport terminals. Responders suspect a nerve agent threat and HAZMAT teams are called in. The media picks up the story and panic spreads. With a situation like this, you’ve got a lot of issues to attend to. Do you know where to start and what to do?

Scene I – The WMD Event Occurs

• Explosions at the airport
• Casualties in several terminals
• Responders on the scene suspect a nerve agent
• HAZMAT teams called
• The media reports the story and panic spreads

Be sure to remove the following scenario and replace it with the one customized during the development phase of this course.
Presentation

1. Ask participants to open their scenarios and begin reading. Allow them 15 – 20 minutes to read the scenario and review/complete their questions. Questions should be answered individually.

2. Walk around the room and observe participant progress in order to determine the priority of issues to discuss.

3. Check with participants to see how many need more time prior to initiating the discussion.
Participant Background

This chemical WMD terrorism scenario portrays an incident that your jurisdiction can use to evaluate coordination and response capabilities. You may also identify shortfalls in personnel or other resources that can be supplemented by State or federal sources. While this scenario portrays a single terrorism event, credible information indicates a probability for multiple events within a given area or other geographic locations. The scenario is intended to portray only the hypothetical technical features of a chemical terrorism incident and does not represent an actual event.

Both standard and military times are used in the scenario; use the following chart to aid in converting times.

<table>
<thead>
<tr>
<th>24-hour Clock</th>
<th>Standard Clock</th>
<th>24-hour Clock</th>
<th>Standard Clock</th>
</tr>
</thead>
<tbody>
<tr>
<td>0001</td>
<td>12:01 a.m.</td>
<td>1201</td>
<td>12:01 p.m.</td>
</tr>
<tr>
<td>0100</td>
<td>1 a.m.</td>
<td>1300</td>
<td>1 p.m.</td>
</tr>
<tr>
<td>0200</td>
<td>2 a.m.</td>
<td>1400</td>
<td>2 p.m.</td>
</tr>
<tr>
<td>0300</td>
<td>3 a.m.</td>
<td>1500</td>
<td>3 p.m.</td>
</tr>
<tr>
<td>0400</td>
<td>4 a.m.</td>
<td>1600</td>
<td>4 p.m.</td>
</tr>
<tr>
<td>0500</td>
<td>5 a.m.</td>
<td>1700</td>
<td>5 p.m.</td>
</tr>
<tr>
<td>0600</td>
<td>6 a.m.</td>
<td>1800</td>
<td>6 p.m.</td>
</tr>
<tr>
<td>0700</td>
<td>7 a.m.</td>
<td>1900</td>
<td>7 p.m.</td>
</tr>
<tr>
<td>0800</td>
<td>8 a.m.</td>
<td>2000</td>
<td>8 p.m.</td>
</tr>
<tr>
<td>0900</td>
<td>9 a.m.</td>
<td>2100</td>
<td>9 p.m.</td>
</tr>
<tr>
<td>1000</td>
<td>10 a.m.</td>
<td>2200</td>
<td>10 p.m.</td>
</tr>
<tr>
<td>1100</td>
<td>11 a.m.</td>
<td>2300</td>
<td>11 p.m.</td>
</tr>
<tr>
<td>1200</td>
<td>12 p.m.</td>
<td>2400</td>
<td>midnight</td>
</tr>
</tbody>
</table>
Instructor’s Background Information on the Incident – Scene I

This chemical WMD terrorism scenario portrays an incident which local response groups and agencies can use to evaluate their coordination and response capabilities. They may also identify shortfalls in personnel or other resources that can be supplemented by State or federal sources. While this scenario portrays a single terrorism event, credible information indicates a probability for multiple events within a given area or other geographic locations. The scenario is intended to portray only the hypothetical technical features of a chemical terrorism incident and does not represent an actual event.

The local airport is the site of this incident. The [Appropriate Name Airport Authority] is located [relative proximity of the airport to the city center – be sure to include information on any transportation connections, e.g., subway tunnels, between the airport and the center of the city].

In this scenario, a terrorist group placed four explosive devices in the baggage claim areas of separate terminals at a major metropolitan airport. [If the local airport does not have baggage claim areas in separate terminals, adjust the scenario appropriately.] The explosive devices, unbeknownst to first responders, are filled with VX (O-Ethyl S- (2-Diispropylmainoethyl) Methylphosphonothiolate – a persistent chemical nerve agent) which is dispersed by the explosions, contaminating the airport structure and most of the people in the baggage claim areas.

Victims of the explosion include passengers, their friends and families, and airline and airport personnel. Responders to the scene do not immediately recognize the symptoms of nerve agent exposure and become contaminated while assisting victims of the blast. Responders suspect the presence of a nerve agent when they notice people, not present at the time of the blast, collapsing and dying. Estimates are that several hundred people are dead and dying, including contaminated responders. Responders are challenged to:

- Determine the agent used in the attack,
- Initiate appropriate decontamination procedures for victims,
- Provide appropriate prophylaxis to additional responders arriving on scene,
- Prevent the spread of the agent from contaminated persons, who spontaneously evacuated from affected terminals, to others, and
- Arrange for fast medical treatment for victims.

The effects of a VX release of this form (droplets and liquid – a “splash”) are instantaneous on contact. They include blurred vision, breathing difficulty, gastrointestinal distress, skeletal muscle paralysis, seizures, and loss of consciousness.*

In this scenario, it should be apparent that a nerve agent is involved. However, responders cannot identify the type of agent released. Because VX is a persistent agent, decontamination aspects must be fully examined. The medics responding have OSHA training and should recognize some of the symptoms. If not, the sequence of events and the massive number of casualties should indicate that a “splash” release occurred.
Instructor’s Background Information on the Incident – Scene I

At some point, it should be obvious that the casualties require decontamination before allowing treatment by unprotected medical personnel or before allowing casualties to depart the area. Furthermore, casual exposure to the nerve agent increases the number of casualties. In the case of VX (a persistent agent) this WILL BE a major issue; and must be taken seriously. Persons exposed to very small amounts of the nerve agent show limited symptoms, and can be successfully treated if the symptoms are noted in time and the proper antidotes (esp. atropine) are available. One should expect, however, countless individuals exhibiting symptoms based on stress and hysteria, rather than actual exposure.

It should be easy to determine that this is a terrorist-related incident. As such, the FBI must be notified. The instructor should explore how this notification will take place. This also raises many “command and control” issues that will be explored in further detail during session II.

* Information on the symptoms, signs, and diagnosis; etiology and epidemiology; and the treatment of nerve agents was gathered from a variety of sources. For additional technical background on VX and other nerve agents the following references are suggested:


– Handbook on the Medical Aspects of NBC Defensive Operations FM8-9 web site at [http://www.nbc-med.org/amedp6/PART_I/about.htm](http://www.nbc-med.org/amedp6/PART_I/about.htm), Department of the Army, Washington, D.C., 1 February, 1996; and

Scene I: The WMD Event Occurs

[Location of incident scenario – city, State], [date of exercise/incident scenario – day of week, date]. The weather forecast predicts [insert scenario weather forecast within the normal range for the date of the exercise – include temperature range, amount of cloud cover, wind speed and direction]. At noon it is [temperature within forecasted range].

At 12:01 p.m. (1201), the [Appropriate Name Airport Authority] airport security dispatch center is overwhelmed with radio and telephone reports of explosions and casualties in several different terminals of the airport. Manual fire alarms are sounded and at least one automatic sprinkler system is activated. Air traffic control is notified and they decide to suspend landing and takeoff operations. Hundreds of airport patrons flee into the street outside the baggage claim areas. [If the airport does not have multiple baggage claim areas in multiple terminals, modify the scenario to read: “Hundreds of airport patrons flee into the street outside the central baggage claim area.”]

Airport security reports dead and injured passengers, patrons and airline personnel at terminals one, four, and five. There are no reports of damage from terminals two and three at this time, or from other airport buildings. [If the airport has fewer than five terminals with baggage claim areas, modify the scenario to read; “Airport security reports dead and injured passengers, patrons and airline personnel at the central baggage claim area. There are no reports of damage from other airport remote terminals or other buildings.”] Initial estimates radioed into the dispatch center indicate that several hundred people within the immediate vicinity of the explosions may be dead or wounded – some were impacted directly by the blast while others near the baggage claim area were knocked down and injured by flying debris. At least one of the explosions caused the partial collapse of the ceiling structure, interfering with the electrical and lighting system, darkening the site and adding to the confusion.

The airport security dispatch center immediately dispatches its available fire and security resources and calls the [local jurisdiction] Emergency Operations Center (EOC) requesting massive fire and medical support, along with bomb squad and investigation support. Officers at the scene attempt an orderly evacuation of the main terminal areas, but panic quickly sets in. Aircraft on the ground with passengers are told to hold in place.

Uninjured and mildly injured patrons and airport workers (security, baggage handlers, and ticket agents) attempt to assist in rescuing others from the area. Scores of dead and injured persons are scattered throughout the baggage claim area. People not visibly hurt by the blast crowd onto the street where police attempt to keep the crowds away from rescue activities.

By 12:05 p.m. (1205), initial fire, police and medical responders arrive on scene. [If the response time is greater than five minutes, adjust this and subsequent times accordingly.] The fire chief establishes [himself/herself] as the Incident Commander (IC) and the airport police mobile command center functions as an incident command center. [If the airport does not have a mobile command center, review the local plan and if the designated EOC for the airport is not in the area affected by the incident, designate that area as the command center.] The fire department sets up a field command post outside (each of) the affected terminal(s). The paramedics focus their initial attention on the casualties severely wounded by the blast, but begin to note symptoms inconsistent with ordinary shock, such as convulsions and muscle tremors. Also, several of the deceased do not seem to have severe injuries.
Scene I: The WMD Event Occurs

Some of the individuals from the baggage claim area who managed to escape the blast with no apparent injuries complain of blurred vision, pain in the eye area, tightness in the chest, dizziness, and disorientation and are screened for pressure-related trauma. Others just outside the blast area exhibit a number of symptoms such as sweating, salivation, increased bronchial secretions, myosis, vomiting, and disorientation. A few people not in the area at the time of the explosions have collapsed with convulsions and tremors. Several people in the crowd demonstrating these seemingly minor symptoms have left the area by taxi to seek assistance from area medical facilities.

The airport control tower is now diverting flights to other airports. Due to heightened security awareness prevalent in today’s air traffic controllers, planes on the ground are recalled for thorough security checks.

By 12:15 p.m. (1215), paramedics suspect that some type of nerve agent is causing these symptoms. Their fears are heightened because security officers not present at the explosion, but who reported to the scene immediately afterward, begin to display similar symptoms, which are consistent with some type of nerve agent. The Incident Commander decides to pull out all security personnel and responders, leaving some casualties in place until properly protected responders arrive to assist. HAZMAT units are called in to survey the area. The crowds note the pullback.

Panic spreads to the non-affected terminals as news of the situation and the response operation become apparent. Security guards attempt to evacuate these terminals because it is not known if other devices have been planted.

By 12:25 p.m. (1225), the first bomb squad and HAZMAT units arrive on scene. Response personnel in fully encapsulated HAZMAT suits enter to survey the situation, as well as attend to and remove the remaining casualties. Paramedics treating casualties that had been evacuated earlier also begin to report similar symptoms as those observed earlier. Many of the casualties that were ambulatory when first responders arrived have now collapsed; several have died.

By this time the local news media pick up the story. TV and radio stations broadcast advisories while reporters and camera crews are dispatched to the airport. At least one airport patron calls a news station and gives a live interview from the scene. Traffic and news helicopters divert to the scene. Air traffic control declares a no-fly area over the entire airport. News helicopters reporting from overhead the terminal area violate that restriction. [Name of local news channel] provides live coverage from its helicopter, showing thousands of people evacuated into the airport streets and tarmac areas, as well as the throngs of response vehicles.

[Name of local news channel] ’s reports feed directly to the national news media as well as other local channels. Media report a “poison gas” at this time, based on one interpretation of the symptoms and deaths observed.

Environmental monitoring by fully encapsulated responders from the [appropriate local agency] HAZMAT team is unable to identify any contaminant using standard environmental equipment. Suspecting a military-type nerve agent, they send out to [a nearby local National Guard or Reserve unit] for appropriate nerve agent detection equipment. Airport operations shut down until a determination can be made as to which airport facilities are contaminated.
Scene I: The WMD Event Occurs

The State EOC in [location of State EOC] is activated due to the news reports on the incident. A call is made to the National Response Center (NRC) to report an unknown toxic chemical release. Assuming that this is a mass casualty terrorism incident, the [local jurisdiction] Police Department notifies and provides the initial information to the FBI. Federal agents are en route to the scene. The national media pre-empt normal programming to provide reports from the scene, and most federal agencies pick up news of the situation from media reports and telephone calls.
Facilitated Discussion

Purpose

This guided group discussion is designed to help participants understand the types of issues they will encounter and the conflicts across agencies and jurisdictions that can occur in coordinating, communicating, and responding to such an incident. It also gives participants an opportunity to assess their jurisdiction’s ability to respond to such an incident.

Presentation

1. Guide a group discussion by asking the numbered questions on the following pages. These questions are not all-inclusive – use them to develop additional questions. Develop additional questions as necessary. Some additional questions are included should there be a need to stimulate further discussion.

2. As key issues and gaps are discussed, capture the group consensus on flip chart #1. As a chart is filled, either tack or tape it to the wall.

3. If the group becomes overly engrossed in a particular issue or begins to address issues strongly associated with the later scenes, use the “parking lot” technique. (Record the point on flip chart #2 and place it in an area designated for the later scenes or in an area for discussion during the final action-planning session.)

4. Don’t forget that good facilitators speak much less than the participants – this is an assessment activity, not a formal instructional class.

5. Encourage students to “think outside the box.”

Provide participants with a copy of the questions that does not include the answers to questions, additional questions, or the final note to the facilitator.

Be sure to touch on the following areas: Direction and Control; Notification and Activation; Communications; Warning and Emergency Public Information; Hazard Assessment; and Management of Field Response.
QUESTIONS – Scene I

Instructions: These questions serve to focus your thoughts on the issues associated with this portion of the scenario. Please review each question and answer as appropriate.

1. How will you learn of this WMD incident? What internal and external notifications should you make? Are you satisfied that the current notification process is timely and adequate?

- Each jurisdiction and agency should have notification procedures outlined in their emergency operations plan (EOP). The EOP review completed by the facilitator during the development portion of this activity should provide adequate detail to support facilitated discussion. The following provides general guidance:
  - In many jurisdictions, the 911 dispatcher serves as the hub of the notification system and provides agency and/or individual notification.
  - In most jurisdictions, the Police and Fire Departments have excellent internal notification systems; however, other agencies participating may not. Check this during the EOP review. During the discussion explore if or how the Police and Fire Departments could assist other agencies.
  - Walk participants through each step of the notification/activation process. Let them estimate their estimated time of arrival (ETA) and where they will be reporting. Do they anticipate any traffic, transportation, or communication delays that could significantly delay response?

Additional Questions:

Does your jurisdiction have a policy that prevents full activation of the emergency management system when it is not needed?

- The screening process should be defined in local EOPs and often relies on the local Office of Emergency Management or the Emergency Operations Center (EOC) (if staffed 24-hours-a-day) to serve as the decision-maker.

Who handles State and federal notifications?

- The responsibility for State and federal notifications should be clearly defined in the local plan. For an incident of this magnitude, the NRC should be notified.

If this WMD incident occurred, how long will it take for responders to arrive on the scene? How long will it be before an incident command (or other management) structure was established?
Session I

- Each agency present should provide estimates, try to reach a consensus on the overall response time.
- Explore with the participants when or what staffing level constitutes a management structure that is operational.

2. Do you and your agency have a clearly defined role during the response to and management of such a WMD incident? Does your EOP address such an incident?

- The EOP concept of operations should define the role of each agency within the jurisdiction. Each agency or activity within a jurisdiction should have its own plan, preferably in the form of an annex (or other attachment) to the local EOP. Each agency represented should discuss their role in general terms. Capture each role briefly; pay close attention to overlaps and apparent needless duplications.

3. What kind of training have your jurisdiction’s responders received on WMD terrorism? What kind of training have you received?

- The kind and amount of training that responders and participants receive on WMD terrorism varies nationwide.

- Revisit the group’s training needs during each action-planning session.

**Additional Questions:**

Is qualified staff within your agency certified in accordance with the Occupational Safety and Health Administration (OSHA)? What types of additional training do you believe will be necessary and practicable to permit a safe and adequate response to a nerve agent incident?

- Allow each agency to discuss their training procedures.
- Determine whether the agencies feel the need to have someone on their staff who is trained for a nerve agent incident.

4. How will identification of the presence of hazardous materials occur? How will confirmation of the type of chemical hazard occur?

- The EOP review should provide details on how the hazardous materials (HAZMAT) team identifies “unknown agents” because it is unlikely the local team could readily identify VX. There should be supporting laboratories in the area that have been pre-identified and have agreed to support jurisdictional emergency response operations. Additional information is provided:
– M-1 Chemical Agent Detector Paper can identify the presence of nerve agents. M-1 Chemical Paper is commonly used by military units; however, most fire departments and HAZMAT units are not equipped with this technology and must be cautious when using it. Query the group to see if they know how to obtain the materials.

– The hazardous materials team (HMT) should carry mine safety association (MSA) detector tubes or similar systems that will capture a sample of the air, but will NOT make a positive identification of the presence of a nerve agent. Because VX virtually lacks vapors, teams may not be successful in obtaining a sample. The HMT would need to take a liquid sample for confirmation of identification.

Additional Questions:

Will responders and/or HAZMAT units recognize the symptoms associated with nerve agents? Will responders conduct air testing before responding?

• The answers to these questions should be indicated through the EOP review and the discussion associated with question 3. Here, issues such as response, citizen protection and rescue vs. self-preservation and maintenance of response capability should be addressed (i.e., responders should not be used as detectors or allowed to become victims).

5. What protective equipment will responders take to an incident scene based on the information available initially? Will this equipment be sufficient for response to this chemical terrorist incident?

• A review of the EOP, completed during the development phase of this activity, should provide an indication of the types of equipment available in this jurisdiction. Following is a general guideline:

– Most HAZMAT teams have the ability to respond to a maximum of two different emergency sites simultaneously. Beyond that, responders will be equipped only with standard emergency response gear, which does NOT constitute adequate protective equipment.
Additional Questions:

Will your jurisdiction’s responders know how to protect themselves in this incident?

- Each agency should describe what trained personnel are available to respond to a chemical release. Response personnel should possess expertise in general HAZMAT and radiological incidents.

- The qualifications of response personnel will likely be in standard HAZMAT response. Most plans address HAZMAT more within the context of transportation of these materials than intentional releases.

6. What information, equipment and actions are required by your jurisdiction to conduct the initial assessment of the incident? How do you anticipate information to be distributed among responders?

- Include the following items in your discussion:
  - A method to determine the identity of the agent,
  - A method to determine the extent or area of contamination,
  - A method to determine the decontamination requirements, and
  - Others as reflected in the reference material provided at the end of this manual and developed during the review of the EOP.

7. What immediate protective action decisions should the jurisdiction make? How will they be implemented?

- Protective action decision making is a critical issue and the participants should be allowed sufficient time to discuss the ramifications of their decision. The whole issue of evacuation vs. sheltering should be explored. The EOP should provide a framework for making such decisions. In the case of VX, since it poses no vapor hazard, sheltering away from the immediate site of the incident is an appropriate response. The immediate area and adjacent buildings should, however, be evacuated.

- Allow participants to discuss the issues of decontamination and triage strategies.
Session I

**Additional Questions:**

Should the surrounding area be evacuated in this case or will sheltering be an appropriate response?

- See above (answer to question 7).

Should the jurisdiction be concerned about the possibility of additional attacks?

- This is always a possibility and the group should discuss what changes they will have to make to manage additional incidents of either a WMD terrorist event or more common emergencies (i.e., fire, auto accident, etc.).

What medical facilities are victims/patients being sent to? What types of information should the Emergency Medical Services (EMS) units be relaying to the hospitals in the area to prepare them to receive potentially contaminated patients? Should any areas be quarantined?

- These questions focus on the initial medical response. Allow the participants to discuss this topic, if they bring it up. If not initiated by the participants, these issues will be fully examined during the discussion associated with scene II.

8. **How will the incident site be secured to assure the “crime scene” is protected and no contaminated personnel or equipment leave the area? What access and egress control procedures should be implemented?**

- The EOP should provide details on contamination control procedures and crime scene protection as part of its WMD annex if it exists. The EOP review should also provide an indication of how the jurisdiction will manage these issues.

- Allow the group to discuss their security procedures and how these relate to their overall response strategy.

- Access and egress control procedures should be included in the HAZMAT portion of the local plan. Determine the group’s understanding of the importance of this issue.
9. Is the current number of trained, qualified personnel within your jurisdiction sufficient to respond to this incident? If not, where will you seek support to bridge these deficiencies?
   
   • A review of the EOP should provide an indication of the number of trained and qualified personnel.
   
   • Mutual support agreements with other local and State governments should be discussed at this point.
   
   • The National Strike Force and the Army Technical Escort Unit (TEU) are among the federal agencies with subject-matter expertise in this area.

10. Is the amount of specialized equipment in your jurisdiction sufficient to respond to this incident? Do you have options to obtain this equipment immediately if needed for an emergency response? What additional resources will you request at this point?
   
   • A review of the EOP should be an excellent indicator as to the adequacy of local specialized equipment.
   
   • It is likely that resources will not be sufficient. An important part of this discussion is encouraging the participants to initiate the self-assessment process. They should determine how the jurisdiction could respond to such an incident using local assets and mutual support rather than relying on federal resources.
   
   • The list of equipment that should be requested is long: proper sensing or detection equipment, Level A suits certified for nerve agent environments, proper decontamination equipment, gas-tight storage containers for contaminated items, etc.

11. What does your jurisdiction’s EOP rely on for expedited transport arrangements (e.g., commercial aviation, city/county/State supplied transport) for out-of-area support resources?
   
   • The details on emergency transportation of required emergency equipment and personnel should be provided in the local EOP.

12. Will the city or county EOC be adequate for coordinating the response to this incident? Will a separate command center that is physically close to the incident site be required? What resources are available for outfitting this command center?
• This information should be extracted from the EOP. It is assumed that an Incident Command System (ICS) will be used.

Additional Questions

How long will it take to have an EOC activated and fully operational? What are the capabilities of the center? Are these capabilities adequate to respond to an incident of the magnitude presented here?

• In this scenario, the command post should be at the local EOC, so the answer will depend on how long it will take to activate the EOC and staff it appropriately and if the local EOC is in the affected area. If so, the use of an alternate site should be discussed.

• The capabilities of the local EOC and alternate EOC should be apparent from the plan review.

Note: These are not all-encompassing questions – this is a starting point. There are other issues that may arise that you must be capable of dealing with. If topics are brought up that are more closely associated with the following two scenes, then use the “parking lot” to table that discussion until the appropriate time.
Debrief

Purpose

This activity is designed to review the key concepts covered during the early stages of the WMD incident to help participants begin associating the concepts with specific needs. This activity serves as the debriefing for the session – prior to beginning the action-planning phase.

Presentation

1. Refer participants to the Review and Action Log in their participant guide.

2. Review the issues and gaps on the charts posted in the room. After reviewing, allow participants time to brainstorm to determine if additional issues should be included. Conduct a round-robin style discussion. Provide participants the opportunity to briefly discuss key issues.

3. Point out selected key issues that participants have mentioned.

4. After concluding the debriefing, tell participants to turn to the action-planning section.

Use the log on the following pages as a facilitation tool during the brainstorming portion of the debriefing. Capture comments from each department, agency, or activity represented.
## Key Issues

<table>
<thead>
<tr>
<th>Notification is the trigger for this incident – the report of the incident by some source.</th>
</tr>
</thead>
<tbody>
<tr>
<td>The initial response time for such incidents could be very short – minutes – not hours.</td>
</tr>
<tr>
<td>Emphasis is on isolating the site, protecting it, and controlling it (i.e., sizing up the situation).</td>
</tr>
<tr>
<td>Responders must use extreme caution when dealing with an incident that involves chemical agents. What injured/killed the victims can do the same to the responders. In addition, contaminated patients can contaminate the entire room. Specially trained and equipped HAZMAT teams should be called in to provide expertise and equipment.</td>
</tr>
<tr>
<td>Mass casualties and loss of life due to hazardous materials are common consequences associated with chemical incidents. Additionally, the type of chemical is often not known, making the treatment of victims and selection of protective suits difficult.</td>
</tr>
<tr>
<td>A critical consideration for all emergency responders when dealing with a chemical attack is recognizing that the proximity of a potential target is not the only threat. The chemical agents must be produced, packaged, and delivered to the intended place of use, broadening the area of potential contamination.</td>
</tr>
<tr>
<td>The effective management of a criminal incident requires the coordination, participation, and support of agencies that have functional responsibilities (e.g., firefighters, police, emergency medical services (EMS), jurisdictional responsibilities (e.g. local, State, and federal governments), or both.</td>
</tr>
<tr>
<td>Managing a criminal incident response may be conducted in two general ways: Single command may be applied when there is no</td>
</tr>
</tbody>
</table>

---

**Review and Action Log**

| How It Affects Me or My Agency: What Do I Need to Know or Do? | |
overlap of jurisdictional boundaries or when a Single Incident Commander is indicated in the EOP or local jurisdiction.

*Unified command* may be used when the incident is within one jurisdiction but two or more agencies share management responsibility.

The concept of unified command is shared responsibility among the major stakeholders for overall incident management as a result of the multifunctional or multijurisdictional incident.

Sites of non-natural incidents must be treated as scenes to be investigated.

Non-law enforcement responders should not touch anything that is not necessary to touch to save a life. They should take the minimum amount of actions necessary to perform their responsibilities.

Non-law enforcement responders can help to identify potential witnesses and perpetrators and serve as eyewitnesses through detailed observations, written records, and when possible, photographs.

The minimum number of people necessary to complete the task should be sent to the incident site.

Special equipment, supplies, and personnel may be required to handle this incident.

There must be designated individuals in charge – with clearly defined roles and responsibilities.

First responders should bring the proper equipment and personal protective equipment required for the incident in accordance with SOPs in the EOP. This may include: helmets, gloves, respirators, masks, etc.

Coordination and control are important components of managing the incident.
Action Planning

Purpose

The action-planning phase provides participants an opportunity to begin the planning process to ensure that their jurisdiction is prepared to respond to a chemical WMD incident.

Presentation

1. Use the questions on the following page to stimulate participants’ completion of their action-planning guides.

2. Use the Action and Review Log brainstorming of key issues (by category) as the basis for developing priorities.

3. Sort through the priorities and identify responsibilities for resolving them. Use flip chart #2 to develop a list of the top priorities among the issues and gaps listed. Sort the priorities by program/planning needs, training needs, and resource needs.

4. After the list of issues is sorted, encourage the group to assign responsibility for completing the action.

5. Encourage the responsible manager to set a time goal for completing the actions.

Use the Action-Planning Guide grid to capture the group consensus on needed actions. This list will be especially helpful during the final Action-Planning Session.

The Action-Planning Sessions are not conducted with Scenes I and II when the one-day schedule is used for this course.

Make copies of the Action-Planning Guide as necessary.
Session I

Action-Planning Questions

1. List the policies and procedures included in the EOP, SOPs, and checklists that you think should be further reviewed, supplemented, or developed. Which are the priorities?

2. What response capabilities are needed or should be implemented to ensure an effective response?

3. What resources and other tools are needed to ensure an effective response?

4. Identify the action steps you think should be taken to prevent, prepare for, respond to and recover effectively from the variety of possible crises that may confront the emergency response team.

5. What types of training do the community’s managers need to more effectively manage situations of this type? What training should community first responders receive?

6. Describe the personal action steps you plan to take to improve your level of readiness.
<table>
<thead>
<tr>
<th>Planning</th>
<th>Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Issue</td>
<td>Action</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Personal Action Steps</th>
<th>Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Issue</td>
<td>Action</td>
</tr>
</tbody>
</table>
Wrap Up

Purpose
The wrap up should conclude the day-one session and prepare for Session II.

Presentation
1. Thank participants for their active participation.
2. Highlight the accomplishments of the day.
3. Ensure participants know when and where the next session will be conducted.

Immediately following the departure of the participants, gather all written material to keep as references for course report.

- Ensure issues from “parking lot” are ready for discussion during the appropriate session.
- Debrief recorder/assistant instructor and record or review their observations and comments.
Section 5 - Session II

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Session II – Day Two
Response to the WMD Incident

Purpose

This session of the course focuses on the period after you have defined the hazard (VX) and prior to the arrival of State and federal augmentation. It is designed to help raise your awareness of emergency management activities associated with the defined hazard, i.e., VX. It focuses on topics primarily related to operational management, community protection, and resources.

Objectives

During this session, you will accomplish the following objectives:

1. Identify issues and concerns that must be addressed during the response phase.

2. Identify problems and issues you are dealing with in this situation.

3. Identify the primary personnel that will be involved in handling this situation.

4. Establish your role during this time period.
Content Outline

The following is the recommended content outline, but you are encouraged to adapt it to suit your needs.

### Response to the WMD Incident (VX)

- Introduction
- Scenario
- Facilitated Discussion
- Debrief
- Action-Planning Session
- Wrap Up
Scenario Background Information

Purpose

The scenario presents a realistic account of a WMD terrorist incident. It gives participants an opportunity to compare their response plans with the requirements of an actual incident.

Refer to Instructor’s Background Information for information to help put the incident into perspective. Do not disclose this information to the participants – yet.

Show visuals as you highlight the key points of this scenario. The following information is generic information about the scenario. You are encouraged to add additional visuals or text to support any background information that you want to include. Use this information to set the scene, before you instruct participants to break seal on their scenarios.

The chemical agent has tentatively been identified as VX, and the FBI has become involved because the incident has now become a criminal incident and a crime scene. Thousands of travelers are stranded and the airport remains closed. The number of dead and wounded is estimated at 600. Available supplies and decontamination are pressing issues. What are you going to do? Are you prepared to do it? Do you know what to do? These are just some of the issues that will probably concern you.

Scene II – Chaos in the City

- Crime scene – FBI involvement
- Issues of decontamination
- Hundreds of casualties
- Transportation systems are severely impacted
- Unified command system likely

Be sure to remove the following scenario and replace it with the one customized during the development phase of this course.
Presentation

1. Ask participants to open their scenarios and begin reading. Allow them 15 – 20 minutes to read the scenario and review/complete their questions. Questions should be answered individually.

2. Walk around the room and observe participant progress in order to determine the priority of issues to discuss.

3. Check with participants to see how many need more time prior to initiating the discussion.
Participant Background

This chemical WMD terrorism scenario portrays an incident that your jurisdiction can use to evaluate coordination and response capabilities. You may also identify shortfalls in personnel or other resources that can be supplemented by State or federal sources. While this scenario portrays a single terrorism event, credible information indicates a probability for multiple events within a given area or other geographic locations. The scenario is intended to portray only the hypothetical technical features of a chemical terrorism incident and does not represent an actual event.

Both standard and military times are used in the scenario; use the following chart to aid in converting times.

<table>
<thead>
<tr>
<th>24-hour Clock</th>
<th>Standard Clock</th>
<th>24-hour Clock</th>
<th>Standard Clock</th>
</tr>
</thead>
<tbody>
<tr>
<td>0001</td>
<td>12:01 a.m.</td>
<td>1201</td>
<td>12:01 p.m.</td>
</tr>
<tr>
<td>0100</td>
<td>1 a.m.</td>
<td>1300</td>
<td>1 p.m.</td>
</tr>
<tr>
<td>0200</td>
<td>2 a.m.</td>
<td>1400</td>
<td>2 p.m.</td>
</tr>
<tr>
<td>0300</td>
<td>3 a.m.</td>
<td>1500</td>
<td>3 p.m.</td>
</tr>
<tr>
<td>0400</td>
<td>4 a.m.</td>
<td>1600</td>
<td>4 p.m.</td>
</tr>
<tr>
<td>0500</td>
<td>5 a.m.</td>
<td>1700</td>
<td>5 p.m.</td>
</tr>
<tr>
<td>0600</td>
<td>6 a.m.</td>
<td>1800</td>
<td>6 p.m.</td>
</tr>
<tr>
<td>0700</td>
<td>7 a.m.</td>
<td>1900</td>
<td>7 p.m.</td>
</tr>
<tr>
<td>0800</td>
<td>8 a.m.</td>
<td>2000</td>
<td>8 p.m.</td>
</tr>
<tr>
<td>0900</td>
<td>9 a.m.</td>
<td>2100</td>
<td>9 p.m.</td>
</tr>
<tr>
<td>1000</td>
<td>10 a.m.</td>
<td>2200</td>
<td>10 p.m.</td>
</tr>
<tr>
<td>1100</td>
<td>11 a.m.</td>
<td>2300</td>
<td>11 p.m.</td>
</tr>
<tr>
<td>1200</td>
<td>12 p.m.</td>
<td>2400</td>
<td>midnight</td>
</tr>
</tbody>
</table>

This page is not included with Scenes II and III when this course is conducted using the one-day schedule.
The FBI attempts to establish control of the situation for Crisis Management (C\textsuperscript{R}M), i.e., criminal investigation. At the same time, the scope of the situation makes it clear there is also a federal role for Consequence Management (C\textsuperscript{o}M). The Federal Emergency Management Agency (FEMA) is the designated federal agency to manage the C\textsuperscript{o}M aspect of the incident. The students are probably not well versed in the difference between the federal definitions of C\textsuperscript{R}M and C\textsuperscript{o}M.

The presence of a nerve agent is established. VX is the prime suspect, although it is not confirmed by laboratory analysis. The persistency of VX means that much of the response and recovery effort will focus on limiting the spread of contamination and decontaminating personnel, equipment, and facilities. VX has the consistency of motor oil, and if not chemically neutralized, lasts for weeks.

Hundreds, if not thousands, are stranded at the airport. If evacuation is ordered, the highways probably experience tremendous gridlock. Because of the number of casualties, hospitals run out of medications. Generally, a state of havoc persists. Consider the difficulties associated with decontaminating all of these individuals and the consequences of failing to do so.

The large number of casualties in this scenario quickly exhausts the limited supply of medicines such as atropine. The triage referenced in the scenario is a practice where the emphasis is on saving as many as possible – which means the worst-off individuals likely to die are lower in treatment priority than individuals who can be saved.

During this session participants should recognize that federal assistance, whether wanted or not, is on the way. The local response capabilities are overwhelmed. The challenge is integrating the local response with federal and State interests. The criminal investigation, coordinated by the FBI, has the potential to conflict with the humanitarian aspects of the response.

There are a host of federal agencies potentially involved. They include the Environmental Protection Agency (EPA), Department of Health and Human Services (HHS), Department of Transportation (DOT), and most importantly, the Department of Defense (DoD), because the Army has the greatest expertise in dealing with chemical agent treatment and decontamination. Sorting out the agencies is a real challenge in an actual situation. A very important non-federal agency is the American Red Cross (ARC), offering invaluable assistance in dealing with family notification and reunification issues, as well as assisting stranded travelers.

The resources most likely required from the State are National Guard resources, for transportation, security, and for chemical warfare expertise/resources.

* Information on the symptoms, signs, and diagnosis; etiology and epidemiology; and the treatment of nerve agents was gathered from a variety of sources. For additional technical background on VX and other nerve agents the following references are suggested:
Instructor’s Background Information on the Incident – Scene II


– *Handbook on the Medical Aspects of NBC Defensive Operations FM8-9* web site at [http://www.nbc-med.org/amedp6/PART_I/about.htm](http://www.nbc-med.org/amedp6/PART_I/about.htm), Department of the Army, Washington, D.C., 1 February, 1996; and

Scene II: Chaos in the City

It is still [date of exercise/incident scenario – day of week, date] in [location of incident scenario – city, State]. The weather remains [repeat previous forecast]. The temperature is currently [scenario forecasted mid-day temperature in ° Fahrenheit] with an expected high of [scenario forecasted high temperature in ° Fahrenheit].

At 2 p.m. (1400), the [location or other appropriate complete name] Airport remains completely shut down until further notice.

The FBI takes control of the operation, designating it as a terrorist-related incident. The FBI attempts to establish a Unified Command Center in one of the vacant but non-contaminated terminals. A Joint Information Center (JIC) is established to provide information to the media and the public.

The airport remains closed. Incoming flights divert to other airports in the area. Planes on the ground move to the non-affected terminals for offloading and evacuation. The incident impacts air traffic nationwide, as the closure and grounding of many aircraft disrupt flight scheduling and passenger plans everywhere.

At the affected terminals [or terminal, if airport design has baggage claim in only one area], the entire ground floor level and the areas providing access to that level are secured as designated hot zones, accessible to responders in Level A protective equipment only. A large surrounding area is designated as a precautionary zone, with Level B protective equipment required. Injured and contaminated personnel are quarantined within the precautionary zone. A triage system is implemented to prioritize treatment.

Airport patrons and employees in non-impacted terminals are isolated to protect them from contamination. Patrons and personnel at the impacted terminal(s) evacuate to the upper level street outside the terminal(s), and across to the parking garages where a bridge exists. [This description will need to be modified to reflect the design of the local jurisdiction airport in this scenario.] The city responds with a massive turnout of police and medical personnel, and obtains additional assistance from [appropriate name] County and the cities in the area capable of providing mutual support.

The casualty information grows. The number of dead or injured is conservatively estimated at 600 for the airport. National Guard test kits indicate VX, a nerve agent, is the toxic chemical involved in the attacks. VX is a persistent agent, with the consistency of motor oil and is absorbed through skin contact. Contaminated clothing and equipment may transfer the agent to others who contact the contaminated surfaces later. Atropine is used with some success on a few casualties, but there are not enough supplies immediately available to treat the hundreds of people exposed. Many of the casualties include responders who were not present in the terminal at the time of the explosions, but were contaminated from treating or handling casualties.

The contamination spreads – at least one hospital, despite strict precautions and protection for its staff, reports that several staff members who treated the first wave of casualties from the airport show nerve agent symptoms. (Some of the blast victims commandeered taxis or private vehicles to take them to nearby urgent care centers.) These medical centers now isolate or turn away these patients out of concern for spreading the suspected nerve agent to other patients and
Scene II: Chaos in the City

The Environmental Protection Agency (EPA) has been directed to provide a Federal On-Scene Coordinator (FOSC). The EPA activates its Regional Response Team (RRT).

The Director of FEMA will provide an initial situation report (SitRep) to the White House within the hour.

In anticipation of a Stafford Act declaration, the National Coordinating Center (NCC) Incident Response Team (IRT) is activated. Emergency Support Functions 6 (Mass Care) and 10 (Hazardous Materials) are alerted. The Director of Health Human Services (HHS) establishes emergency medical telephone consultation with local and State health officials, on-call technical experts, the Department of Defense (DoD), EPA, the Department of Veterans Affairs (VA) and FEMA. VA activates its Emergency Pharmaceutical Support Plan (EPSP) to locate available supplies of nerve agent toxin antidotes. The American Red Cross (ARC) mobilizes to care for stranded travelers and operates a Disaster Welfare Information System (DWIS) to assist in casualty notifications and family reunification.

The FOSC requests additional Level-A strike teams from across the country. The Agency for Toxic Substance and Disease Registry (ATSDR) and the Centers for Disease Control (CDC) Mass Care Unit research the case based on available information. The Department of Defense (DoD) proactively sends a Technical Escort Unit (TEU) that is specially trained to respond to chemical agent accidents and incidents. The TEU also has Explosives Ordinance Disposal (EOD) capabilities.

Local EPA Technical Assistance Team (TAT) contractors arrive on scene. The EPA Regional Mobile Command Post has been dispatched and should arrive by 6 p.m. (1800). The FEMA Regional Director, in coordination with the National Director, alerts all agency State liaisons to be ready to deploy to the [affected State’s name] State EOC in [location of State EOC] to coordinate initial response requirements in support of the State. Mutual aid agreements are activated.

The rush of agencies descending on the scene causes great confusion in command, control, and reporting. Confusion also exists in prioritizing response actions vs. investigatory actions, leaving many responders upset. The area telephone system is overloaded, leading to concerns that the system may fail. Calls to the affected areas are not going through.
Facilitated Discussion

Purpose

This guided group discussion is designed to help participants understand the types of issues they will encounter and the conflicts across agencies and jurisdictions that can occur in coordinating, communicating, and responding to such an incident. It also gives participants an opportunity to assess their jurisdiction’s ability to respond to such an incident.

Presentation

1. Guide a group discussion by asking the numbered questions on the following pages. These questions are not all-inclusive – use them to develop additional questions. Develop additional questions as necessary. Some additional questions are included should there be a need to stimulate further discussion.

2. As key issues and gaps are discussed, capture the group consensus on flip chart #1. As a chart is filled, either tack or tape it to the wall.

3. If the group becomes overly engrossed in a particular issue or begins to address issues strongly associated with the later scenes, use the “parking lot” technique. (Record the point on flip chart #2 and place it in an area designated for the later scenes or in an area for discussion during the final action-planning session.)

4. Don’t forget that good facilitators speak much less than the participants – this is an assessment activity, not a formal instructional class.

5. Encourage students to “think outside the box.”

Instructor Note

Provide participants with a copy of the questions that does not include the answers to questions, additional questions, or the final note to the facilitator.

Be sure to touch on the following areas: Direction and Control; Communications; Health and Medical Resources; Resource Management; Public Affairs; Field Response; Decontamination; Search and Rescue; Incident Site Control; and Secondary Hazards.
QUESTIONS – Scene II

Instructions: These questions serve to focus your thoughts on the issues associated with this portion of the scenario. Please review each question and answer as appropriate.

1. What are your priorities at this point?
   - Priorities and strategy will vary by department, agency, or activity. They may include:
     - Treating the victims
     - Limiting contamination
     - Bringing the perpetrators to justice
     - Preventing additional terrorist attacks
     - Returning the transportation system to normal operations
     - Allowing evacuated citizens to return to their homes
   - Give each department, agency, or activity present a chance to present their answer. Obtain a group consensus on what their jurisdiction’s priorities will be.

2. What will your jurisdiction’s overall strategy be for managing the consequences of this incident? What tactics are available to carry out this strategy?
   - The EOP should provide the framework for developing the strategy for response management.
   - Encourage the participants to establish priorities for implementing the tactical elements of their strategy.
3. Who is in charge of the incident site? How will your agency’s actions be coordinated with the actions of other agencies? What conflicts could arise from the need to simultaneously conduct extensive criminal investigatory and response functions? What conflicts may be anticipated between the overlapping federal/State/local jurisdictions?

- Explore the federal definitions of crisis (C emergency management) and consequence (C consequence management). At the federal level, the FBI has authority over the incident site and is responsible for crisis management. FEMA has federal authority for consequence management, but must conform to the direction of the FBI to protect as much of the “crime scene” as possible while providing the needed rescue and relief to protect citizens. It is anticipated that most jurisdictions will follow this delineation of responsibilities.

- Determine who is in charge of the local response for both consequence and crisis management.

- Determine the command or management structure to be used by the jurisdiction. The incident command system (ICS) has been adapted by many jurisdictions as their command structure during response operations. Explore the specifics of the local system during this discussion. A review of the EOP should have provided details on the structure of the command structure.

- Conflicts will likely be related to the jurisdiction’s attempt to balance protecting evidence and protecting people. Overlapping conflicts can occur as State and federal responders arrive on-scene and the transition to a unified, joint, or coordinated command or management structure begins.

4. What emergency operations need to be implemented to respond to the current needs of citizens and responders?

- Contamination control and decontamination operations are two of the perceived primary needs. Because VX is a persistent agent, decontamination and contamination control are major concerns during this phase of operations. During the recovery phase (scene III) revisit decontamination and certification for safe entry.

**Additional Questions:**

How will responder’s requests for additional equipment be prioritized? Does your jurisdiction have a system in place that allows the management team to anticipate the needs of responders?

- Prioritization of requests should be addressed in the EOP. In most incidents, the priority should go to life saving activities.
5. Will your jurisdiction’s response personnel have the necessary technical information to implement appropriate protective actions?

- The EOP review and the discussion during the last scene about the kinds of training responders had received should provide the background to support this discussion.

- Allow the participants to address the local procedures for implementing the tactical actions they discussed as part of questions one and two of this scene.

6. How will you address the need for extensive personal decontamination at the site prior to sending casualties to a hospital for further treatment?

- This question presents a good opportunity to address persistency vs. non-persistency of agents as a determinant of the type of response operations that should be conducted. As previously stated, VX is a persistent and requires decontamination at this point in the scenario.

- VX contamination should be removed (or decontaminated) as soon as possible. Standard clothing provides some protection, though the longer VS is allowed to remain on clothing or on skin the greater the level of exposure and risk of fatality.

- The group should address the management of public perception and fear during this discussion.

7. What community health planning has been completed? Have privately owned hospitals, home-care agencies, long-term care facilities, and clinics been incorporated into the EOP and included in the planning process? Has your community conducted joint exercises for this type, or any type of mass casualty situation?

- The EOP review should indicate the preparedness of the community health program to address mass casualty situations and the involvement of all local health care assets in the planning process.

- Most jurisdictions should have been involved in joint mass casualty exercises because these are an accreditation requirement for most health care organizations, especially hospitals.
Additional Questions:

What on-scene medical operations might be necessary?

- This issue should be addressed in the community health plan as it exists. The priorities at the scene should be gross triage, transportation, and limited life-saving efforts.

Will triage stations be established? Where will these be established?

- The discussion of triage should focus on managing the flow of casualties through the community health system. The community health plan should address this issue.

What types of communications should be conducted between responders and the hospitals prior to the arrival of exposed victims? How will exposed patients be processed at point of collection and point of delivery?

- Communication protocols for providing critical information should be provided within the communications section of the EOP.

- Triage protocols at both collection and delivery points should also be part of the plan. Basic requirements dictate triage be performed at both locations. This may be a good point to address the differences between standard emergency room triage and mass casualty triage.

What medical resource shortfalls do you anticipate? What specific assistance do you need from the State and federal government? How will these resources be integrated into the response operations?

- Adequate amounts of nerve agent antidotes and sufficient numbers of medical personnel resources are the most obvious shortfalls.

- State and federal plans provide for mobilizing these types of resources in disaster situations. It is important for the group to realize that there may be a significant time delay before those resources are available.

What type of epidemiological surveillance program does your community have in-place? How well defined are the linkages between the community health program and plan and your consequence management infrastructure?

- Epidemiological surveillance is important in determining the number of citizens that were exposed to the nerve agent. Community health planning should account for locating personnel within the incident area that may be asymptomatic at this point.

- The EOP should define the linkage between the community health program and the emergency operations management structure and a representative of the community health agency or EMS should be on the management team.
8. How will vital out-of-area resources be transported in a timely manner to the scene where they are needed?

- Transportation and acquisition of emergency supplies and equipment should be addressed in the EOP.

- Allow the participants to discuss whether transportation sources other than DoD and DOT have been considered in their plans.

- Determine whether the participants’ expectations of federal assistance are realistic. There may be a several hour delay before federal assistance arrives. The local managers need to understand that their actions during the first six to eight hours of the response, when federal assistance is en route will determine the success of the response.

9. How will immediate needs for food, water, sanitation, and shelter be provided for potentially thousands of displaced travelers and workers?

- The sheltering portion of the local emergency operations plan should address meeting these needs. The American Red Cross (ARC) is chartered by Congress and has a Memorandum of Understanding (MOU) with FEMA. ARC generally provides human needs assistance (food, shelter, and clothing) during major disasters. Most communities have identified shelters and evacuation routes in their plans.

- Determine if the group feels it can accommodate these needs with locally available resources, or if outside assistance from State and/or federal assets will be needed.

10. What immediate public relations and media concerns must be anticipated? How will these concerns be addressed? Who will serve as your jurisdiction’s spokesperson in this incident?

- The Joint Information Center (JIC) should be established following the arrival of State and federal assets and serves as the source of public information after that point. The plan should identify who will serve as local spokesperson prior to the establishment of the JIC.

- Most EOPs assign the management of public affairs issues to the management team located in the EOC. Determine participants’ familiarity with public affairs procedures. Anticipating that public panic and extreme fear are likely to exist, the group should discuss how to diffuse the issue without denigrating the seriousness of the situation. Determine if the participants understand the importance of a multimedia approach and the development of themes.

- In the early stages of a response, public safety messages must be disseminated quickly.
**Additional Questions**

Does the communications system meet the multilingual needs of the area?

- *The EOP review should identify multilingual needs and procedures for the community.*

11. **What are the internal and external communications requirements for this response? Who is responsible for ensuring that the necessary systems are available? What problems may be anticipated?**

- *The EOP should address internal and external communications requirements and assign responsibility for maintaining a viable system. Communications support equipment is normally located in or adjacent to the EOC.*

- *Internal communications issues focus on the ability of jurisdictions to communicate with responders from different agencies (e.g., fire departments talking to police). Determine what system is in place to facilitate such coordination or if coordination must be accomplished face-to-face, through dispatchers, or the EOC.*

- *External communications issues should focus on the procedures for providing essential information to State and federal responders and managers who are en route to the incident site.*

- *Solutions relying on public hard lines or cellular telephone systems should be discouraged in light of the numerous demands that will be made on those systems, unless the plan review revealed that a priority override system for emergency communications is in place with local phone service providers.*

Note: These are not all-encompassing questions – this is a starting point. There are other issues that may arise that you must be capable of dealing with. If topics are brought up that are more closely associated with the following scene, then use the “parking lot” to table that discussion until the appropriate time.
Debrief

Purpose

This activity is designed to review the key concepts covered during the assessment of the response stage of the WMD incident to help participants begin associating the concepts with specific needs. This activity serves as the debriefing for the session – prior to beginning the action-planning phase.

Presentation

1. Refer participants to the Review and Action Log in their participant guide.

2. Review the issues and gaps on the charts posted in the room. After reviewing, allow participants time to brainstorm to determine if additional issues should be included. Conduct a round-robin style discussion. Provide participants the opportunity to briefly discuss key issues.

3. Point out selected key issues that participants have mentioned.

4. After concluding the debriefing, tell participants to turn to the action-planning section.

Use the log on the following pages as a facilitation tool during the brainstorming portion of the debriefing. Capture comments from each department, agency, or activity represented.
<table>
<thead>
<tr>
<th>Key Issues</th>
<th>How It Affects Me or My Agency: What Do I Need to Know or Do?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Responders will be faced with a potentially huge number of dead, dying, and injured victims.</td>
<td></td>
</tr>
<tr>
<td>Speaking with a unified voice and having everyone express the same message to the public is crucial during a criminal incident.</td>
<td></td>
</tr>
<tr>
<td>You will need to coordinate with the State for deployment of State personnel and resources.</td>
<td></td>
</tr>
<tr>
<td>Need a centralized voice and location to control rumors.</td>
<td></td>
</tr>
<tr>
<td>Isolation of the incident site and decontamination must be considered.</td>
<td></td>
</tr>
</tbody>
</table>
Action Planning

Purpose

The action-planning phase provides participants an opportunity to begin the planning process to ensure that their jurisdiction is prepared to respond to a chemical WMD incident.

Presentation

1. Use the questions on the following page to stimulate participants’ completion of their action-planning guides.

2. Use the Action and Review Log brainstorming of key issues (by category) as the basis for developing priorities.

3. Sort through the priorities and identify responsibilities for resolving them. Use flip chart #2 to develop a list of the top priorities among the issues and gaps listed. Sort the priorities by program/planning needs, training needs, and resource needs.

4. After the list of issues is sorted, encourage the group to assign responsibility for completing the action.

5. Encourage the responsible manager to set a time goal for completing the actions.

Instructor Note

Use the Action-Planning Guide grid to capture the group consensus on needed actions. This list will be especially helpful during the final Action-Planning Session.

The Action-Planning Sessions are not conducted with Scenes I and II when the one-day schedule is used for this course.

Make copies of the Action-Planning Guide as necessary.
Action-Planning Questions

1. List the policies and procedures included in the EOP, SOPs, and checklists that you think should be further reviewed, supplemented, or developed. Which are the priorities?

2. What response capabilities are needed or should be implemented to ensure an effective response?

3. What resources and other tools are needed to ensure an effective response?

4. Identify the action steps you think should be taken to prevent, prepare for, respond to and recover effectively from the variety of possible crises that may confront the emergency response team.

5. What types of training do the community’s managers need to more effectively manage situations of this type? What training should community first responders receive?

6. Describe the personal action steps you plan to take to improve your level of readiness.
<table>
<thead>
<tr>
<th>Planning</th>
<th>Resources</th>
</tr>
</thead>
<tbody>
<tr>
<td>Issue</td>
<td>Action</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Personal Action Steps</th>
<th>Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Issue</td>
<td>Action</td>
</tr>
</tbody>
</table>
Wrap Up

Purpose
The wrap up should conclude the day-two session and prepare for Session III.

Presentation
1. Thank participants for their active participation.
2. Highlight the accomplishments of the day.
3. Ensure participants know when and where the next session will be conducted.

Immediately following the departure of the participants, gather all written material to keep as references for course report.

- Ensure issues from “parking lot” are ready for discussion during the appropriate session.
- Debrief recorder/assistant instructor and record or review their observations and comments.
# Section 6 - Session III

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<td>6-16</td>
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<tr>
<td>Wrap Up</td>
<td>6-17</td>
</tr>
</tbody>
</table>
Session III – Day Three

Recovery from Chemical Terrorism Incident

Purpose

This session is designed to help raise your awareness of emergency management activities associated with the maturing situation. It focuses on concerns that you will be faced with during the recovery phase of the incident which includes the period of continued operations, augmentation and mutual aid, recovery planning, and the preparation for integrating State and federal responders.

Objectives

Upon completion of this session, you will be able to:

1. Assess direction and control procedures
2. Assess communication systems
3. Assess notification system, including notification of families
4. Assess procedures for addressing public affairs issues, including the importance of public information in terrorist events
5. Assess ability to conduct extended operations
6. Assess current time requirements for coordinating augmentation of resources from State and federal agencies (i.e., human and material)
7. Identify specific types of federal assistance for which you need to ask
8. Identify the adequacy of authorities for dealing with the event
Content Outline

The following is the recommended content outline, but you are encouraged to adapt it to suit your needs.

<table>
<thead>
<tr>
<th>Recovery from Chemical Terrorism Incident</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
</tr>
<tr>
<td>Scenario</td>
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<td>Debrief</td>
</tr>
<tr>
<td>Action-Planning Session</td>
</tr>
<tr>
<td>Wrap Up</td>
</tr>
</tbody>
</table>
Scenario Background Information

**Purpose**

The scenario presents a realistic account of a WMD terrorist incident. It gives participants an opportunity to compare their response plans with the requirements of an actual incident.

Show visuals as you highlight the key points of this scenario. The following information is generic information about the scenario. You are encouraged to add additional visuals or text to support any background information that you want to include. Use this information to set the scene, before you instruct participants to break seal on their scenarios.

This scene centers on the waning aspects of the immediate threat – new issues arise such as coordination efforts with federal agencies and need for assistance to support recovery efforts.

**Scene III – The Immediate Threat Wanes**

- Temporary morgue set up in cold storage facility
- Decontamination of victims a major issue
- Increase in patients exhibiting psychosomatic symptoms
- Airport clean-up will take weeks or months
- National media attention, public horrified
- Disaster declaration
- Planning for decontamination, remediation, and recovery

Be sure to remove the following scenario and replace it with the one customized during the development phase of this course.
Presentation

1. Ask participants to open their scenarios and begin reading. Allow them 15 – 20 minutes to read the scenario and review/complete their questions. Questions should be answered individually.

2. Walk around the room and observe participant progress in order to determine the priority of issues to discuss.

3. Check with participants to see how many need more time prior to initiating the discussion.
Participant Background

This chemical WMD terrorism scenario portrays an incident that your jurisdiction can use to evaluate coordination and response capabilities. You may also identify shortfalls in personnel or other resources that can be supplemented by State or federal sources. While this scenario portrays a single terrorism event, credible information indicates a probability for multiple events within a given area or other geographic locations. The scenario is intended to portray only the hypothetical technical features of a chemical terrorism incident and does not represent an actual event.

Both standard and military times are used in the scenario; use the following chart to aid in converting times.

<table>
<thead>
<tr>
<th>24-hour Clock</th>
<th>Standard Clock</th>
<th>24-hour Clock</th>
<th>Standard Clock</th>
</tr>
</thead>
<tbody>
<tr>
<td>0001</td>
<td>12:01 a.m.</td>
<td>1201</td>
<td>12:01 p.m.</td>
</tr>
<tr>
<td>0100</td>
<td>1 a.m.</td>
<td>1300</td>
<td>1 p.m.</td>
</tr>
<tr>
<td>0200</td>
<td>2 a.m.</td>
<td>1400</td>
<td>2 p.m.</td>
</tr>
<tr>
<td>0300</td>
<td>3 a.m.</td>
<td>1500</td>
<td>3 p.m.</td>
</tr>
<tr>
<td>0400</td>
<td>4 a.m.</td>
<td>1600</td>
<td>4 p.m.</td>
</tr>
<tr>
<td>0500</td>
<td>5 a.m.</td>
<td>1700</td>
<td>5 p.m.</td>
</tr>
<tr>
<td>0600</td>
<td>6 a.m.</td>
<td>1800</td>
<td>6 p.m.</td>
</tr>
<tr>
<td>0700</td>
<td>7 a.m.</td>
<td>1900</td>
<td>7 p.m.</td>
</tr>
<tr>
<td>0800</td>
<td>8 a.m.</td>
<td>2000</td>
<td>8 p.m.</td>
</tr>
<tr>
<td>0900</td>
<td>9 a.m.</td>
<td>2100</td>
<td>9 p.m.</td>
</tr>
<tr>
<td>1000</td>
<td>10 a.m.</td>
<td>2200</td>
<td>10 p.m.</td>
</tr>
<tr>
<td>1100</td>
<td>11 a.m.</td>
<td>2300</td>
<td>11 p.m.</td>
</tr>
<tr>
<td>1200</td>
<td>12 p.m.</td>
<td>2400</td>
<td>midnight</td>
</tr>
</tbody>
</table>

This page is not included with Scenes II and III when this course is conducted using the one-day schedule.
It is now eight hours after the initial explosions. At this point, the FBI has effectively established control of the situation for CRM purposes. The casualty figures are horrendous – 600 dead, 200 more with severe symptoms. The only good news is that it is unlikely there will be many additional casualties, since contact with contaminated areas and exposed persons has been controlled. At this point, adequate amounts of atropine have been rushed to the scene and to treatment centers.

The response has required all of the city’s emergency response forces and most of those available from the neighboring counties and other nearby cities. The stress and trauma of dealing with death on such a large scale is impacting many of the responders at the scene. Crew relief schedules have not been worked out at this time. Decontamination is expected to last at least a few weeks and no decision has been made yet about airport operations.

The expenditure of police and security forces is leading to problems in other areas of the city. Isolated looting has been reported. In addition, the overload on the city’s telephone system has made it nearly impossible to make calls to 911 or any other local number.

* Information on the symptoms, signs, and diagnosis; etiology and epidemiology; and the treatment of nerve agents was gathered from a variety of sources. For additional technical background on VX and other nerve agents the following references are suggested:


– *Handbook on the Medical Aspects of NBC Defensive Operations FM8-9* web site at [http://www.nbc-med.org/amedp6/PART_I/about.htm](http://www.nbc-med.org/amedp6/PART_I/about.htm), Department of the Army, Washington, D.C., 1 February, 1996; and

Session III

Scene III : The Immediate Threat Wanes

It is still [date of exercise/incident scenario – day of week, date] in [location of incident scenario – city, State]. The sun sets at [appropriate time]. The weather remains [calm and cloudy]. The temperature is currently [forecasted end of day temperature in ° Fahrenheit]. It is 8 p.m. (2000) [Because the time is now evening, adjust background description to reflect past tense if the sun has already set.]

The President issued a formal disaster declaration two hours ago and assigned lead responsibility to the U.S. EPA. The U.S. EPA Federal On-Scene Coordinator (FOSC) activates the Regional Response Team (RRT). The FOSC also requested all available Level A entry teams from across the nation be mobilized to the site of the incident. The initial wave of federal responders from outside the immediate area arrives.

Approximately 600 people are reported dead and another 200 suffer severe symptoms. Local hospitals exhaust their supplies of atropine and other antidotes. People continue to die, although the number of new victims, resulting from contact with contamination, appears to drop. Most patients now arriving at outside clinics have psychosomatic symptoms, attributable to hysteria. A temporary morgue is established in a local cold storage warehouse at the airport [if a cold storage warehouse does not exist, check the local plan to determine where a temporary morgue would be established], because decontamination is required prior to releasing the bodies. The isolation and decontamination efforts appear effective. Storage of the deceased and their possessions, as well as the extensive personal possessions abandoned at the airport, is a challenge because everything must be decontaminated before released. Responders inventory the items to establish property accountability.

Laboratory analysis confirms the identification of the nerve agent VX, a persistent, oily toxic chemical that presents primarily a contact hazard. The indicated decontamination treatment involves washing all contaminated areas and equipment, including the terminal area(s) with massive amounts of water, detergent, and bleach. The decontamination crews work in Level A protective suits, significantly slowing the operation. According to initial estimates, complete decontamination may take weeks or even months.

Airport passenger facilities remain closed. Airport control towers were not contaminated, and all personnel and equipment are screened before entry. Several planes take off without passengers on board, in order to serve other routes. While large portions of the airport are believed uncontaminated, access routes to those areas are closed by response operations. Nearly half of the thousands of airport patrons have been removed by bus to a nearby evacuation area, after decontamination at the scene. Many report vague/inconsistent symptoms, not directly attributable to any known exposures.

The public’s reaction to the situation is one of incredible horror. Media pictures showing rows of dead bodies surrounded by encapsulated responders are likened to a science-fiction horror movie. The public anxiety about going to any densely populated area or transportation hub spreads nationwide. Emergency security measures are enacted at airports nationwide, because it is not known if other areas are targeted. Travel reservations are canceled everywhere.

The President appears on national television, appealing to the public to remain calm. He confirms the attack is a deliberate terrorist action and vows that the perpetrators will be punished – foreign or domestic. He praises the outpouring of aid offered from cities around the
Scene III : The Immediate Threat Wanes

country. Extensive coverage and interviews of victims and distraught family members follow the President’s appearance.

Of continuing concern is the number of taxis and other vehicles believed to have departed the airport area shortly after the incident, without decontamination. Several widely scattered deaths and afflictions are believed to be attributable to nerve agent carried out by persons, vehicles, and equipment from the airport area. VX remains persistent and toxic for several weeks, allowing the hazard of contamination to continue.

Military and cargo aircraft not using the passenger terminals are permitted to land and take off from the airport. The Pacific Strike Team from the U.S. Coast Guard (USCG) Base in Novato, CA, arrives with a 10-person Level A-equipped team to assist response officials. The DoD TEU and a large quantity of antidote medicines also arrive.

The FOSC and Unified Command has had great difficulty obtaining qualified HAZMAT Level A entry teams. Several commercial companies report that their employees refuse to work at the site, out of fear that entry suits will not protect them. At this point in time, the Fire Department HAZMAT Team and Army and National Strike Force personnel are the only teams that may be relied upon for entry duties.
Facilitated Discussion

Purpose
This guided group discussion is designed to help participants understand the types of issues they will encounter and the conflicts across agencies and jurisdictions that can occur in coordinating, communicating, and responding to such an incident. It also gives participants an opportunity to assess their jurisdiction’s ability to respond to such an incident.

Presentation

1. Guide a group discussion by asking the numbered questions on the following pages. These questions are not all-inclusive – use them to develop additional questions. Develop additional questions as necessary. Some additional questions are included should there be a need to stimulate further discussion.

2. As key issues and gaps are discussed, capture the group consensus on flip chart #1. As a chart is filled, either tack or tape it to the wall.

3. If the group becomes overly engrossed in a particular issue or begins to address issues strongly associated with the previous scenes, use the “parking lot” technique. (Record the point on flip chart #2 and place it in an area designated for discussion during the final action-planning session.)

4. Don’t forget that good facilitators speak much less than the participants – this is an assessment activity, not a formal instructional class.

5. Encourage students to “think outside the box.”

Instructor Note
Provide participants with a copy of the questions that does not include the answers to questions, additional questions, or the final note to the facilitator.

Be sure to touch on the following areas: Direction and Control; Communications; Public Affairs; Extended Operations; Transition Operations; and other topics such as Community and Business Recovery.
# QUESTIONS – Scene III

**Instructions:** These questions serve to focus your thoughts on the issues associated with this portion of the scenario. Please review each question and answer as appropriate.

### 1. What are your priorities and response concerns at this point? Do you need to revise your agency’s strategy? What tactics are available to carry out this new strategy?

- Using the results of action-planning sessions one and two, ask participants to develop a list of anticipated needs and concerns, as well as anticipated resource shortfalls.

- At this point, participants should be concerned with integrating the State and federal response as a Disaster Field Office (DFO) is established and certain management responsibilities are shared.

- Among the priorities that should also be considered:
  - Re-entry, restoration, and recovery, particularly in light of the federal government’s assumption of many of the continuing response and mitigation management responsibilities; and
  - Continuing medical surveillance and general community health response.

**Additional Questions**

What response concerns are based on resource shortfalls? How will you meet (or fill) these critical needs?

- Resource shortfalls will include personnel, equipment and supplies. The review of the EOP should indicate what types of resources are available through immediate assets or mutual support at the start of the incident. At this point, most of the local assets will be exhausted or committed.

- Participants should list anticipated sources of resources by category. Expect some to point to State and federal sources.

### 2. How will you conduct extended response operations? Are local personnel and equipment resources adequate for the extended operations required?

- The EOP should account for round-the-clock operations. Many jurisdictions plan to send a portion of the EOC staff home after the initial incident assessment reveals the
3. **Based on the information presented, what staffing levels do you foresee your agency contributing to the response effort over the next 24 hours? What problems do you anticipate?**

   - Discuss the staffing pattern for the management team. The length of shifts, number of personnel, etc. should be detailed in the EOP, but should be reviewed at this time. Review the staffing plan and ensure the staff is optimally utilized during active periods.

4. **What are your procedures for integrating State and federal resources into your management organization?**

   - The EOP should outline the procedures for State and federal integration.

   - State and federal assistance is supplementary to the local response and as the Disaster Field Office (DFO) is established the Federal Coordinating Officer (FCO) and State Coordinating Officer (SCO) will coordinate activities of the State and local governments, ARC, the Salvation Army, and other relief and disaster assistance organizations.

**Additional Questions**

How will your agency coordinate its action with other agencies (federal, State and local) and public interest groups?

- The FCO is the primary federal coordinating authority for consequence management; the FBI handles crisis management.

With the arrival of State and federal assistance and the formation of a Joint Information Center (JIC), how will media inquiries be handled? Who in your jurisdiction is responsible for authoring media releases?

- Media releases must be coordinated with the FBI, FEMA, and State and local authorities once the JIC has been established.

- The EOP should provide a detailed communications/public relations plan.
5. How do you anticipate disposing of large amounts of contaminated waste generated during the response and decontamination phases? How will these materials be safely transported? By whom? To what locations?

- The emergency operations plan should account for disposal of hazardous waste.
- VX is a persistent agent and in itself presents a continuing HAZMAT challenge, the decontaminants (bleach, caustics, etc.) used during decontamination operations present a continuing HAZMAT problem as well.

6. When will the response phase be over? When will the recovery (cleanup/remediation) phase be over?

- The EOP should provide guidance on concurrent activity response and recovery.
- The recovery phase will continue until the recovery plan has been fully implemented and completed (remember, putting things back the way they were is not always the answer).

7. What continuing assessments should be enacted when the cleanup phase is complete? Who will make these determinations?

- Long-range health issues should be of some concern; though in the case of VS, these will most likely be psychosomatic cases. Care must be taken to ensure future reports of exposure are fully investigated. VX can last for several months and if decontamination was not adequately completed, subsequent exposure is possible.

8. What are the environmental concerns related to this incident?

- VX, due to its persistency, can present an environmental hazard that must be addressed. Even in small quantities it can effect the health of most creatures – birds, reptiles, amphibians, and mammals. As such, the complete removal or neutralization of VX is important. The emergency management team should address issues related to the use of hazardous materials during the clean up during this portion of the discussion.
- HAZMATs used during the response will continue to present hazards until neutralized.

**Additional Questions**

What steps will be taken by your agency to ensure adequate sanitation measures throughout the affected area?

- The local HAZMAT plan should identify sanitation procedures.
What local requirements exist for re-entry to an evacuated area due to a HAZMAT incident?

- The HAZMAT annex to the EOP should outline re-entry procedures.
- Following the use of chemical agents, the local emergency management team should consider the need for “safe certification.” That is, having a “third party” lab verify the area as free from contamination.

9. Within your jurisdiction, what psychological traumas may be anticipated? How will your agency deal with these traumas?

- Many agencies have teams already designated to assist in such cases. In most instances, the teams will not have the capacity to handle the expected cases in an incident of this magnitude.
- Discuss the availability of crisis counseling. Also, refer participants to Section 416 of the Stafford Act.

Additional Questions

How will your agency participate in death notification of civilians and your colleagues? Are personnel in your agency adequately trained in the process of death notification?

- Death notification is always a difficult issue. The EOP should provide guidance to managers. However, at a minimum someone in the supervisory chain should be involved with the actual notification.

10. What will you propose as a course of action to meet the resource shortfalls identified in this scenario?

- Let the group propose a course and record what they say. The jurisdiction can later address the adequacy or feasibility of the response. As instructors, we are not providing information on the solution to these needs.

11. Are your jurisdiction’s current plans, policies and procedures adequate for response to this phase of the incident? What steps will be necessary to upgrade these plans to an adequate level?

- This question serves to wrap-up the day’s discussions as well as the overall three-day session. The responses should serve as the basis for the summary to be presented at the conclusion of this activity.
Note: These are not all-encompassing questions – this is a starting point. There are other issues that may arise that you must be capable of dealing with.
Debrief

Purpose

This activity is designed to review the key concepts covered during the assessment of the recovery phase of the WMD incident to help participants begin associating the concepts with specific needs. This activity serves as the debriefing for the session – prior to beginning the action-planning phase.

Presentation

1. Refer participants to the Review and Action Log in their participant guide.

2. Review the issues and gaps on the charts posted in the room. After reviewing, allow participants time to brainstorm to determine if additional issues should be included. Conduct a round-robin style discussion. Provide participants the opportunity to briefly discuss key issues.

3. Point out selected key issues that participants have mentioned.

4. After concluding the debriefing, tell participants to turn to the action-planning section.

Instructor Note

Use the log on the following pages as a facilitation tool during the brainstorming portion of the debriefing. Capture comments from each department, agency, or activity represented.
### Review and Action Log

<table>
<thead>
<tr>
<th>Key Issues</th>
<th>How It Affects Me or My Agency: What Do I Need to Know or Do</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chemical terrorism causes little physical damage to property, therefore recovery will focus on decontamination of the facility and monitoring to ensure the facility is safe for public use. Analysis of the attack for the purpose of improving response capability is essential. After-action reports are good sources of information.</td>
<td></td>
</tr>
<tr>
<td>You must become familiar with your State’s roles and responsibilities in a WMD incident.</td>
<td></td>
</tr>
<tr>
<td>The FBI is designated as lead agency for crisis management response to terrorist incidents by Presidential Directive. This Directive and other statutes give the FBI the lead role in law enforcement response throughout the investigation.</td>
<td></td>
</tr>
<tr>
<td>WMD incidents can easily grow into long-duration events due to the complexities that are faced. The planning process is a critical element in preparing to deal with WMD incidents.</td>
<td></td>
</tr>
<tr>
<td>Federal disaster assistance is made available through the Robert T. Stafford Disaster Relief and Emergency Act. Through this Act, aid is generally available on a 75/25 Federal-State/local match.</td>
<td></td>
</tr>
<tr>
<td>Traditional disaster assistance programs can supplement a long-term recovery program, but do not replace the local government’s responsibility.</td>
<td></td>
</tr>
<tr>
<td>Deploying resources will be just one of your problems; another problem will be dealing with the overabundance of people who offer their services.</td>
<td></td>
</tr>
<tr>
<td>You may encounter a situation of “no movement” because of too much help. Be aware that these issues exist, and plan accordingly.</td>
<td></td>
</tr>
</tbody>
</table>
Wrap Up

Purpose
The wrap up should conclude day-three session and prepare for final action-planning phase.

Presentation
1. Thank participants for their active participation.
2. Highlight the accomplishments of the day.
3. Transition to Final Action-Planning Session.
Section 7 - Course Action-Planning Session

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Presentation .............................................................................................................. 7-2
Course Action-Planning Session

Purpose

This session is designed to provide participants with an opportunity to review the action planning steps developed during the action planning sessions and establish an overall program enhancement plan.

Presentation

1. Use the 30 previously identified actions as the basis for this discussion and prioritization.

2. Develop in advance and provide as both student handouts and wall charts the twenty priority actions developed during the first two sessions.

3. Using facilitated discussion, review the 30 actions identified during the previous discussion sessions. Attempt to develop a group consensus using the “majority rules” method and create a list ranking these needed actions. (Note: In most jurisdictions the Chief Executive or elected official has veto/approval authority and opinions must consider this.)

4. Unlike the previous action planning sessions, do not attempt to sort the issues by program, training, or resources.

5. After the list has been ranked, review the assigned responsibilities with the group. If any one agency has an inequitable share of the actions, confirm with the group that that division of labor is appropriate.

This list of actions and responsible parties forms the foundation of the activity report.

Use a round-robin discussion to ensure each member of the group participates in the prioritization.
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Section 8 – Summary and Conclusion

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Summary and Conclusion

Purpose

This session provides participants with the opportunity to review the course. This session also gives participants the opportunity to provide comments on the course.

Presentation

1. Provide concluding remarks on course/workshop. Provide highlights of lessons learned throughout the course.

2. Review objectives and outcomes of the course.

3. Stress the importance of implementing the action plan developed during the last lesson.

4. Provide time for the participants to complete the course evaluation tool found in the student manual.

5. Graduation – distribute certificates of completion/training.

Because class members will be ready to leave and return to their offices or home, keep the concluding lesson brief.

If participants seem willing to provide detailed comments, allow time. Don’t put on any pressure, however.

Congratulate the participants on their performance and thank them for their efforts.

Immediately following the departure of the participants, gather all written material to keep as references for course report.

- Debrief recorder/assistant instructor and record or review their observations and comments.
Section 9 – References

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Background Information on WMD Incidents

What is Terrorism?
For the purposes of this course, terrorism is the use of force or violence against persons or property in violation of the criminal laws of the United States for purposes of intimidation, coercion, or ransom.

What is Weapons of Mass Destruction Terrorism?
Weapons of Mass Destruction (WMD) Terrorism as defined by Presidential Decision Directive 39 (PDD-39) is the use of nuclear weapons or biological, chemical, and radiological agents and/or materials by terrorists.

Facts on Terrorism

- On February 29, 1993, a bombing in the parking garage of the World Trade Center in New York City resulted in the deaths of five people and injuries to thousands. The bomb left a crater 200 by 100 feet wide and five stories deep. The World Trade Center is the second largest building in the world and houses 100,000 workers and visitors each day.
- In the Centennial Olympic Park-Olympic Games Bombing in Atlanta, Georgia, in 1996, there were two deaths and 110 injuries.
- The Department of Defense (DoD) estimates that as many as 26 nations may possess chemical agents and/or weapons and an additional 12 may be seeking to develop them.
- In recent years, the largest number of terrorist strikes have occurred in the Western United States and Puerto Rico. Attacks in Puerto Rico accounted for about 60 percent of all terrorist incidents that occurred on United States territory between 1983 and 1991.
- The Central Intelligence Agency (CIA) reports that at least 10 countries are believed to possess or be conducting research on biological-agent weapons.
- In the United States, most terrorist incidents have involved small extremist groups who use terrorism to achieve a designated objective. Local, State, and Federal law enforcement officials monitor suspected terrorist groups and try to prevent or protect against a suspected attack.
- A terrorist attack can take several forms, depending on the technological means available to the terrorist, the nature of the political issue motivating the attack, and the points of weakness of the terrorist’s target. Bombings are the most frequently used terrorist method in the United States. Other possibilities include an attack at transportation facilities, an attack against utilities or their public services or an incident involving chemical or biological events.
**Background Information on WMD Incidents**

**Facts on Chemical Weapons**

- Chemical agents are compounds that, through their chemical properties, cause lethal or damaging effects on people.
- Today, in addition to industrial chemicals, the most common chemical agents are those chemicals expressly selected and produced because of their ability to cause injury or incapacitation.
- Chemical warfare agents are generally classified into one of two broad categories: intended use and based on their physiological effects.
- The first category groups chemical agents based on their intended use, and includes:
  - *Lethal agents*: Designed to kill or severely injure.
  - *Incapacitating agents*: Designed to disable the victim for at least several hours.
  - *Harassing agents*: Designed to force people to retreat and can result in serious medical complications.
- The second category groups chemical warfare agents based upon their physiological effects:
  - *Nerve agents* (e.g., Sarin: absorbed through the skin or inhaled; in sufficient quantities may cause instant death)
  - *Blister agents* (e.g., Mustard gas: results in death if exposure is significant; slight exposure causes severe burns and may result in secondary infections)
  - *Choking agents* (e.g. Phosgene: damages tissues of the respiratory system and eyes if unprotected; heavy concentrations lead to serious medical conditions, secondary infections and even death).
- The lethality of the chemical warfare agents is dependent on the concentration of the agent and on the method of induction into the body.
Risks, Threats, and Characteristics of WMD-Terrorism Related Incidents

- Most local emergency management systems need enhanced capabilities to manage the threat or use of WMD. Issues which may not be commonly encountered include:
  - Identification of agent
  - Most appropriate means of protection (antidote)
  - Decontamination (victims, incident site, and environment)
  - Treatment modalities (initial and definitive)
  - Diverse collateral requirements (public safety, mental health, etc.)
  - Appropriate disposition of the deceased
- There may be no advance warning of the dissemination of the chemical weapon and the first indication may be when people start to collapse.
- Chemical agents move within the air. Ventilation systems in buildings or transportation facilities may help to speed up the dissemination of the chemical by carrying the agent far from the initial source.
- Chemical agents pose an immediate threat to life. Antidotes are available, but must be used within minutes of exposure. In many cases, further extensive medical emergency treatment is required, especially resuscitation.
- Chemicals, once disseminated, require decontamination, tying up resources and increasing media attention.
- A terrorist use of Weapons of Mass Destruction (WMD) is unique since it results in an unfamiliar hazardous material and mass casualty incident that is a Federal crime scene with other law enforcement interests.
- The public will panic because of the unknown situation or because of the terror associated with chemical agents.
- Local first responders are unlikely to be trained in responding to chemical WMD and will not always have the appropriate protective equipment. Because of lack of knowledge and awareness in treating such events, first responders may become victims themselves.
- The number of potential casualties and the extent of the areas involved can very quickly overwhelm the capabilities of any response organization.
- Rapid response time is required – you’re talking about minutes and hours – not days.
Responding to a WMD Incident: Things You Should Know

- There is an increased concern about how to deal with the threats posed by weapons of mass destruction. A WMD incident challenges the confidence of emergency response personnel and the capacity of the health care system.

- Most local emergency management systems require an enhanced capability to manage a WMD threat. They require a capability for agent identification, personal protection, decontamination, and effective initial and definitive treatment modalities.

- Health systems for response to WMD require the following: agent identification, safe extraction and antidote administration; victim decontamination, triage and primary care; emergency medical transportation; local and regional definitive medical care; forward movement of victims for further care; appropriate disposition of the deceased; and decontamination of the incident site.

- Close cooperation with other emergency response groups, agencies, and individuals is essential; that is at the Federal level, interdepartmental, interagency; then a federal/State/local government cooperative effort; and then a public/private effort.

- Responding to criminal incidents involves many tasks and can become very complex. No one response agency can handle the breadth and depth of tasks that must be done.

- Teamwork and an appreciation for the roles of other responders are crucial to effective working relationships.

- Good working relationships will help increase the probability of successful safe operations for:
  - rescue and treatment of victims;
  - gathering of physical evidence;
  - restoration of uninterrupted utilities;
  - prosecution of perpetrator(s); and
  - continued relationships for the future.

- You must consider the political context in your community. Elected officials will experience anger and frustration from the public’s feeling of helplessness.

- You must also plan for the unexpected. Key staff people may be out of town or unable to handle the pressure, or adverse weather may delay help.

- The public is likely to panic due to their unfamiliarity with the event. It is important to have accurate health-related information available. You don’t want to risk the public’s perception that you don’t know what you are talking about. Remember the Midwest flood, “Cannot even tell us how long to boil water, how can we trust them on vaccination?”.

- Rapid response is required to save lives. During chemical incidents, we aren’t focused on the first 24 hours, things become more immediate – like the first 30 to 90 minutes.

- Remember, first responders are likely to have limited response with chemical agents.
Key Factors to Consider When Developing a WMD Terrorism Annex to the EOP

The following are some key factors that you should consider when developing your WMD Terrorism Annex.

**Nature of the Hazard**

Describe the chemical agents of primary concern, including information on chemical and physical properties of these agents that have a direct bearing on emergency planning and response – i.e., the agent’s volatility; behavior in fires, and persistence in the environment; makeup, symptoms and characteristics; and the short-term and long-term effects.

**Risk Area**

Emergency response plans must reflect the fact that a chemical release will affect different areas in different ways and at different times. Areas near the point of release are likely to experience relatively high concentrations of agent very quickly, while areas farther away are likely to experience lower agent concentrations after a period of time. The plans should provide for the most rapid and effective protective actions possible. For locations farther away, but still possible within the risk zone of contamination by the hazard, plan for public protective actions, including the possibility of having time to evacuate the public in an orderly fashion. Also, plan for the possibility of sheltering populations who can not be evacuated in time. Consider consequence management plans for those not in the immediate area of the contaminant.
Response Actions – Things to Think About

Direction and Control

Who’s In Charge? How will your agency’s actions be coordinated with the actions of other agencies? What conflicts may be anticipated due to the need to simultaneously conduct extensive criminal investigatory and response functions? What conflicts may be anticipated between the overlapping federal, State, city, and local jurisdictions? What written policies provide guidance on these issues?

What will be the effect of a WMD incident on your integrated command structure? How will it change?

What support will you receive from other agencies?

Do you know who has coordination responsibilities for this effort? Where are these duties specified?

Emergency Operations (Evacuation and Sheltering)

What policies do you have in place regarding evacuation, specifically the following: (emergency powers, safe routes, assist the special populations (elderly, handicapped, special needs), security for evacuated properties?

What areas will you evacuate? How long do you think it will take?

Where will you send these evacuated people? What routes will you designate?

Who can order an evacuation?

Who will manage the traffic and designate traffic routes to prevent traffic congestion?

What plans and procedures do you have in place for temporary shelters? Do you know who is responsible for coordinating shelter arrangements? Do you have sufficient shelters pre-arranged for use?

Do you have areas designated for shelters?

Public’s Needs

Do you have arrangements in place to meet the public’s immediate needs for food and water?

The Medical Response Effort

The public will think they have been exposed – and may overload hospitals. In Japan, there were a reported 5,500 casualties (12 deaths, 17 critical patients, 37 severe, and 984 moderate, with another 4,000 casualties who seemingly had nothing wrong with them, but who reported to medical facilities).

How are you going to handle the influx of people who have not been exposed – but think they have?

You are going to have to deal with these people quickly – in order to find and deal with the people who have been exposed.

What about drug treatments? Will they only be available for use in a medical facility? Will you have access to the required antidotes? How will you get the vaccine quickly?

Resource Requirements (Equipment, Supplies)

- Respirators
- Chemical protective clothing and suits
- Gloves
- Boots
- Goggles
Response Actions – Things to Think About

- Face shields
- Hard hats
- Hoods
- Safety glasses
- Must be trained to use equipment and must be maintained
- All personal protective equipment (PPE) must be approved

Will you have adequate supplies for decontamination efforts?

What resource shortfalls do you anticipate? What specific assistance will you need from the State government?

Decontamination

Who will alert you if internal protective actions are required?

How will you be notified of contaminated or exposed patients?

What is the level of field decontamination that patients will receive?

What arrangements will you need to make for extensive decontamination at the scene?

How will you monitor the scene to control the spread of the contaminant? Do you have written procedures to address this?
How Prepared Are You and Your Agency to Deal with Recovery Issues?

Things to Think About

Resource Requirements (Equipment, Supplies, Personnel)
Do you have procedures in place to specify how extended operations should be conducted?
Do you have alternates to meet resource requirements when you experience a shortfall? Do you have these arrangements in writing?
What plans will you consult regarding ongoing staffing requirements?

Clean-up, Debris Disposal and Decontamination
Who is responsible for the disposal of contaminated clothing, articles, and dead bodies?
How will these materials be safely transported? Does your EOP/SOP specify waste disposal locations and identify who will do it?
Do you know if your locality and State has promulgated regulations regarding hazardous waste disposal?
Do you have mechanisms in place to quickly remove the contaminant so that businesses can reopen quickly?

Economic Recovery
Do you have plans in place to retain businesses during the recovery phase?

Mental and Physical Health
How will your agency deal with psychological traumas? Does your agency have arrangements or agreements with agencies to perform critical stress incident counseling? Do you know how to obtain federal assistance for this service?
Do you know what type of medical surveillance, if any, will be required?
U.S. POLICY ON COUNTERTERRORISM

1. General. Terrorism is both a threat to our national security as well as a criminal act. The Administration has stated that it is the policy of the United States to use all appropriate means to deter, defeat and respond to all terrorist attacks on our territory and resources, both people and facilities, wherever they occur. In support of these efforts, the United States will:

   • Employ efforts to deter, preempt, apprehend and prosecute terrorists.
   • Work closely with other governments to carry out our counterterrorism policy and combat terrorist threats against them.
   • Identify sponsors of terrorists, isolate them, and ensure they pay for their actions.
   • Make no concessions to terrorists.

2. Measures to Combat Terrorism. To ensure that the United States is prepared to combat terrorism in all its forms, a number of measures have been directed. These include reducing vulnerabilities to terrorism, deterring and responding to terrorist acts, and having capabilities to prevent and manage the consequences of terrorist use of nuclear, biological, and chemical (NBC) weapons, including those of mass destruction.

   a. Reduce Vulnerabilities. In order to reduce our vulnerabilities to terrorism, both at home and abroad, all department/agency heads have been directed to ensure that their personnel and facilities are fully protected against terrorism. Specific efforts that will be conducted to ensure our security against terrorist acts include the following:

      • Review the vulnerability of government facilities and critical national infrastructure.
      • Expand the program of counterterrorism.
      • Reduce vulnerabilities affecting civilian personnel/facilities abroad and military personnel/facilities.
      • Reduce vulnerabilities affecting U.S. airports, aircraft/passengers and shipping, and provide appropriate security measures for other modes of transportation.
      • Exclude/deport persons who pose a terrorist threat. Prevent unlawful traffic in firearms and explosives, and protect the President and other officials against terrorist attack.
      • Reduce U.S. vulnerabilities to international terrorism through intelligence collection/analysis, counterintelligence and covert action.

   b. Deter. To deter terrorism, it is necessary to provide a clear public position that our policies will not be affected by terrorist acts and we will vigorously deal with terrorist/sponsors to reduce terrorist capabilities and support. In this regard, we must make it clear that we will not allow terrorism to succeed and that the pursuit arrest and prosecution of terrorists is of the highest priority. Our goals include the disruption of terrorist-sponsored activity including termination-of financial support, arrest and punishment of terrorists as criminals, application of U.S laws and new legislation to prevent terrorist groups from operating in the United States, and
application of extraterritorial statutes to counter acts of terrorism and apprehend terrorists outside of the United States. Return of terrorists overseas, who are wanted for violation of U.S. law, is of the highest priority and a central issue in bilateral relations with any State that harbors or assists them.

c. **Respond.** To respond to terrorism, we must have a rapid and decisive capability to protect Americans, defeat or arrest terrorists, respond against terrorist sponsors, and provide relief to the victims of terrorists. The goal during the immediate response phase of an incident is to terminate terrorist attacks so that the terrorists do not accomplish their objectives or maintain their freedom, while seeking to minimize damage and loss of life and provide emergency assistance. After an incident has occurred, a rapidly deployable interagency Emergency Support Team (EST) will provide required capabilities on scene: a Foreign Emergency Support Team (FEST) for foreign incidents and a Domestic Emergency Support Team (DEST) for domestic incidents. DEST membership will be limited to those agencies required to respond to the specific incident. Both teams will include elements for specific types of incidents such as nuclear, biological or chemical threats.

The Director, FEMA, will ensure that the Federal Response Plan is adequate for consequence management activities in response to terrorist attacks against large U.S. populations, including those where weapons of mass destruction are involved. FEMA will also ensure that State response plans and capabilities are adequate and tested. FEMA, supported by all Federal Response Plan signatories, will assume the Lead Agency role for consequence management in Washington, D.C. and on scene. If large-scale casualties and infrastructure damage occur, the President may appoint a Personal Representative for Consequence management as the on scene Federal authority during recovery. A roster of senior and former government officials willing to perform these functions will be created and the rostered individuals will be provided training and information necessary to allow them to be called upon on short notice.

Agencies will bear the costs of their participation in terrorist incidents and counterterrorist operations, unless otherwise directed.

d. **NBC Consequence Management.** The development of effective capabilities for preventing and managing the consequences of terrorist use of nuclear, biological or chemical (NBC) materials or weapons is of the highest priority. Terrorist acquisition of weapons of mass destruction is not acceptable and there is no higher priority than preventing the acquisition of such materials/weapons or removing this capability from terrorist groups. FEMA will review the Federal Response plan on an urgent basis, in coordination with supporting agencies, to determine its adequacy in responding to an NBC-related terrorist incident; identify and remedy any shortfalls in stockpiles, capabilities or g; and report on the status of these efforts in 180 days.
§ 5183. Crisis counseling assistance and training

The President is authorized to provide professional counseling services, including financial assistance to State or local agencies or private mental health organizations to provide such services or training of disaster workers, to victims of major disasters in order to relieve mental health problems caused or aggravated by such major disaster or its aftermath.
# ACRONYMS

<table>
<thead>
<tr>
<th>ACOM</th>
<th>Atlantic Command</th>
</tr>
</thead>
<tbody>
<tr>
<td>AEM</td>
<td>Area Emergency Manager</td>
</tr>
<tr>
<td>AID</td>
<td>Agency for International Development</td>
</tr>
<tr>
<td>AMC</td>
<td>Army Materiel Command</td>
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<tr>
<td>AMS</td>
<td>Atmospheric Monitoring System</td>
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<tr>
<td>ARAC</td>
<td>Atmospheric Release Advisory Capability</td>
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<tr>
<td>ATSDR</td>
<td>Agency for Toxic Substance and Disease Registry (PHS)</td>
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<tr>
<td>BSI</td>
<td>Base Support Installation</td>
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<tr>
<td>CAT</td>
<td>Crisis Action Team (DOMS)</td>
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<tr>
<td>CBRDT</td>
<td>Chemical/Biological Rapid Deployment Team</td>
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<tr>
<td>CDC</td>
<td>Center for Disease Control</td>
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<tr>
<td>CDRG</td>
<td>Catastrophic Disaster Response Group</td>
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<tr>
<td>CERCLA</td>
<td>Comprehensive Environmental Response Compensation and Liability Act</td>
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<tr>
<td>C\textsuperscript{O}M</td>
<td>Consequence Management</td>
</tr>
<tr>
<td>C\textsuperscript{R}M</td>
<td>Crisis Management</td>
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<tr>
<td>CRTF</td>
<td>Commander, Response Task Force</td>
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<tr>
<td>DALO</td>
<td>Disaster Area Liaison Officer</td>
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<tr>
<td>DEST</td>
<td>Domestic Emergency Support Team</td>
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<tr>
<td>DFO</td>
<td>Disaster Field Office</td>
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<tr>
<td>DMAT</td>
<td>Disaster Medical Assistance Team</td>
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<tr>
<td>DMORT</td>
<td>Disaster Mortuary Team</td>
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<tr>
<td>DOE</td>
<td>Department of Energy</td>
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<tr>
<td>DOJ</td>
<td>Department of Justice</td>
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<tr>
<td>EAS</td>
<td>Emergency Alert System</td>
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<tr>
<td>ECC</td>
<td>Emergency Command Center</td>
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<tr>
<td>EICC</td>
<td>Emergency Information and Coordination Center</td>
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<tr>
<td>EMP</td>
<td>electromagnetic pulse</td>
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<tr>
<td>EMS</td>
<td>Emergency Medical Service</td>
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<tr>
<td>EOC</td>
<td>Emergency Operations Center</td>
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<tr>
<td>EOD</td>
<td>Explosives Ordnance Detachment</td>
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<tr>
<td>EOT</td>
<td>Emergency Operations Team</td>
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<tr>
<td>EPA</td>
<td>Environmental Protection Agency</td>
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<tr>
<td>EPSP</td>
<td>Emergency Pharmaceutical Support Plan</td>
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<tr>
<td>ERAMS</td>
<td>Environmental Radiation Ambient Monitoring System</td>
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<tr>
<td>ERT</td>
<td>Emergency Response Team</td>
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<tr>
<td>ERT-A</td>
<td>Emergency Response Team-Advance Element</td>
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<tr>
<td>ERT-N</td>
<td>National Emergency Response Team</td>
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<tr>
<td>ESF</td>
<td>Emergency Support Function</td>
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<tr>
<td>EST</td>
<td>Emergency Support Team</td>
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</tbody>
</table>
ETA Estimated Time of Arrival
FAST Federal Agency Support Team
FCO Federal Coordinating Officer
FECC Federal Emergency Communications Coordinator
FEMA Federal Emergency Management Agency
FOSC Federal On-Scene Coordinator
FRERP Federal Radiological Emergency Response Plan
FRMAC Federal Radiological Monitoring and Assessment Center
FRP Federal Response Plan

grams
GIS Geographic Information System

HA Hazards Assessment
HAZMAT Hazardous Materials
HHS Department of Health and Human Services
HIT Hazardous Incident Team
HMT Hazardous Materials Team

IC Incident Commander
ICS/UC Incident Command System/Unified Command
IND Improvised Nuclear Device
IMA Individual Mobilization Augmenter
IRR Initial Response Resources
IRT Incident Response Team

JCSE Joint Communications Support Element
JIC Joint Information Center
JNACC Joint Nuclear Accident Coordination Center
JOC Joint Operations Center

kilometer
kiloton

LFA Lead Federal Agency
LSC Life Support Center

MACC Multi-Agency Coordination Center
MATTs Mobile Air Transportable Telecommunications System
MERRT Medical Emergency Radiological Response Team
MERS Mobile Emergency Response Support
MHC Mobile Health Clinics
MKT Mobile Kitchen Trailer
MOB Center Mobilization Center
MOU Memorandum of Understanding
References

MSA Mine Safety Association
MSU Management Support Unit

NAOC National Airborne Operations Center
NASA National Aeronautical and Space Administration
NBC Nuclear, Biological, or Chemical
NCC National Coordination Center
NCP National Contingency Plan
NCR National Capital Region
NDMS National Disaster Medical System
NECC National Emergency Coordination Center
NICT National Incident Coordination Team
NIFC National Interagency Fire Center
NMDS National Disaster Medical System
NOK next of kin
NRC Nuclear Regulatory Commission
NRC National Response Center
NRS National Response System
NRT National Response Team
NSC National Security Council

OEMP Office of Emergency Planning
OEP Office of Emergency Preparedness
OSC On-Scene Coordinator
OES Office of Emergency Services

PHS Public Health Service
PPE Personal Protective Equipment
PSN Public Switched Network
psi pounds per square inch
Pu Plutonium

RAP Radiological Assistance Program
RDD Radiological Dispersion Device
REAC/TS Radiological Emergency Assistance Center/Training Site
RECC Regional Emergency Communications Center
REM Roentgen Equivalent Man
REOC Regional Emergency Operations Center
RFA Request for Assistance
RICT Regional Incident Coordination Team
ROC Regional Operations Center
RPM Radiological Program Managers
RRC Regional Response Center
RRT Regional Response Team
RTF Regional Task Force
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>SCO</td>
<td>State Coordinating Officer</td>
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<tr>
<td>SIOC</td>
<td>Strategic Information and Operations Center</td>
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<tr>
<td>SITREP</td>
<td>Situation Report</td>
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<tr>
<td>TERMM</td>
<td>Transportable Emergency Response Monitoring Module</td>
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<tr>
<td>TEU</td>
<td>Technical Escort Unit</td>
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<tr>
<td>TSP</td>
<td>Telecommunications Service Priority</td>
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<tr>
<td>U</td>
<td>Uranium</td>
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<tr>
<td>US&amp;R</td>
<td>Urban Search and Rescue</td>
</tr>
<tr>
<td>USCG</td>
<td>United States Coast Guard</td>
</tr>
<tr>
<td>uCi/m²</td>
<td>microcuries per square meter</td>
</tr>
<tr>
<td>VA</td>
<td>Department of Veterans Affairs</td>
</tr>
<tr>
<td>VANTS</td>
<td>VA National Telecommunications System</td>
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</tbody>
</table>
DEFINITIONS

Access – Close physical proximity to a chemical agent, container or munitions, under circumstances that could provide an opportunity to acquire, release, tamper with, damage, or come in direct contact with the chemical agent.

Aerosol – A liquid or solid comprised of finely divided particles suspended in a gaseous medium. Examples of common aerosols are mist, fog, and smoke. Aerosols are not always visible.

Chemical Agent – A chemical compound used in military operations to kill, seriously injure or incapacitate persons through its chemical properties. Excluded are dilute solutions, riot control agents, chemical defoliants and herbicides, smoke, flame and incendiaries and industrial chemicals.

Chemical Event – A chemical event is either a Level I, Level II, or Level III emergency. (See definitions below.)

Chemical Event Response and Assistance (CERA) – Those actions taken to save life, preserve health and safety, secure chemical surety material, protect property, and help maintain public confidence in the ability of the Army to respond to a chemical event.

Chemical Event Site – The geographical location of the chemical event.

Cholinesterase – An enzyme which neutralizes the muscle stimulant acetylcholine, thereby allowing muscle tissue to relax.

Concentration – The amount of a chemical agent present in a given volume of air. Usually expressed in milligrams per cubic meter (mg/m3). Concentration is not the amount of vapor actually inhaled or absorbed by the individual.

Consequence Management (COM) – Involves measures to alleviate the damage, loss, hardship, or suffering caused by emergencies. It includes measures to restore essential government services, protect public health and safety, and provide emergency relief to affected governments, businesses, and individuals.

Contamination – The deposit and/or absorption of chemical agents on and by structures, personnel, or objects.

Crisis Management (CSM) – Involves measures to resolve the hostile situation, investigate, and prepare a criminal case for prosecution under Federal law.
Decontamination – The process of decreasing the amount of chemical agent on any person, object, or area by absorbing, destroying, ventilating, or removing chemical agents.

The various levels of decontamination are:

a. "X" – Used when the level of decon is unknown or the item is contaminated to the extent that vapor concentrations from the bagged item exceed the Surgeon General's limits or the Time Weighted Average (TWA).

b. "XXX" – 3x items have been surface decontaminated by locally approved procedures, bagged or contained, and appropriate tests or monitoring have verified that vapor concentrations equal or are less than the Surgeon General's limits.

c. "XXXXX" – Items that are 5x are clean and may be released from governmental control without precautions or restrictions. An approved method of achieving 5x level is subjecting items for a designated time at a sufficient temperature to completely destroy the agent.

d. "Clean-Conditional" – When situations are such that post-mortem investigations require testing at locations outside the installation, the item will be disassembled and exposed to moderately high temperatures long enough to decompose the agent to compounds of lesser toxicity. After the exposure to high temperatures, vapor concentration must not exceed the Surgeon General's limits for time weighted averages.

Dosage – The vapor concentration of an agent to which a man or animal is subjected, multiplied by the length of exposure. Vapor dosage is expressed as CT: That is, the product of C (concentration of agent in mg/m3) multiplied by T (time of exposure in minutes).

EXAMPLE: 200mg/m3 for 5 minutes would produce the same effects as 100mg/m3 for 10 minutes. Also, a liquid dosage is expressed as D in mg/kg of body weight, or mg/Man (70kg standard man).

Marshaling Area: An area used to store resources when the capability to provide transportation directly from the point of origin to the Mobilization Center into the affected area is restricted (e.g., locations like St. Thomas, Oahu, and Kauai).

Nerve Agent – A lethal agent which is absorbed into the body by breathing, by ingestion, or through the skin, and affects the relationship between nerve endings and muscle tissue causing injury or death.

Persistence – An expression of duration of effectiveness of a chemical agent.

Staging Area – The facility at the local jurisdictional level near the disaster site where personnel and equipment are assembled for immediate deployment to an operational site within the disaster area (local or State control AKA final staging area).
RESOURCES

For Chemical or Biological Response:

U.S. Army Technical Escort Unit
Chemical Biological Defense Command
Aberdeen Proving Ground, MD 21020
Phone: (410) 671-4383 during business hours (EST)
(410) 671-2773 after business hours, weekends, holidays

Note: The Technical Escort Unit (TEU) will provide a technical assessment to determine if the threat is credible. Requests for deployment of the Technical Escort Unit must be made by the FBI through the Director of Military Operations (DOMS).

For Chemical or Biological Equipment Training:

U.S. Army Chemical School
Contingency Support Detachment (Chemical Defense Training Facility)
Fort McClellan, AL
Phone: (205) 848-4615

Chemical Biological Counterterrorism Course

For Chemical Agent Medical Management information and training:

U.S. Army Medical Research Institute of Chemical Defense
Aberdeen Proving Ground, MD 21010

For Chemical Agent Material Safety Data Sheets

U.S. Army Edgewood Research, Development and Engineering Center

Centers for Disease Control Contact:
Emergency Response Coordination Group
4770 Buford Highway
Atlanta, GA 30341-3724
Phone: (770) 488-7100 – 24-hour phone line
Fax: (770) 488-7107