

14 WMD/Hazardous Materials Response and Decontamination

WMD/Hazardous Materials Response and Decontamination

Capability Definition

The capability to assess the incident, including: test and identify all likely hazardous substances on-site; provide protective clothing and equipment to responders; conduct rescue operations to remove affected victims from the hazardous environment; conduct geographical survey searches of suspected sources or contamination spreads and establish isolation perimeters; contain and fully decontaminate the incident site, victims, responders and equipment; manage site restoration operations, including collection of all hazardous substances; and implement standard evidence collection procedures.

Capability Outcome

Rapidly identify, contain, and mitigate a hazardous materials (HAZMAT) release; rescue, decontaminate and treat victims exposed to the hazard; limit and restore the affected area; and effectively protect responders and at-risk populations.

Capability Discussion Points

When discussing and analyzing the NCR's homeland security preparedness capabilities, stakeholder participants should consider the following:

- The status of HAZMAT plans and procedures in the NCR.
- Response times for: dispatch to first HAZMAT capable unit's arrival on scene; dispatch to full initial alarm assignment of HAZMAT capable teams; and, time to detect HAZMAT type and source.
- The ways in which the NCR has reduced its time in containing and controlling solids, liquids, vapors, and gases. If times have not been decreased, consider why and what future plans are in place to address, maintain, and/or improve HAZMAT response times.
- The status of the purchase and/or distribution of protective clothing and equipment. The determination of which first responders should receive WMD/HAZMAT equipment and training.
- The status of training and exercising WMD/HAZMAT response personnel.
- Plans in place to communicate information and conditions to appropriate authorities –including hospitals and other medical care facilities.
- The regional response plan/mutual aid agreements that have been established. If none have been established, explore plans to enter into these agreements.

NCR Discussion Results on WMD/Hazardous Materials Response and Decontamination

Resource	S/W	Comments
People	S	<ul style="list-style-type: none"> We have well trained staff that can handle and decontamination. response. (5) There are multiple levels of trained personnel for living casualties.
	W	<ul style="list-style-type: none"> Need better coordination between field decontamination and hospital responders as well as better management of contaminated points. (3) There is not enough staff to cover all shifts during a disaster. (3) Need more Regional coordination of training, response, and equipment purchase. Personnel shortfalls lead to weakness in ability to meet response targets Need more NGO's and volunteer staff to conduct mass care response within WND incidents. The current decision making model does not allow for quick, cross-jurisdictional decisions during hazmat incidents. Need to train non-emergency staff of decontamination. Need more decontamination. staff for human remains. Can not act quickly: 1) rapid assessment teams do not meet the 15 minute window of response and 2) we are unable to deploy the Type II IMT team in less than two hours. Need to invest more in staff for mass care activities. Specifically we need more behavioral health, and public information specialists while responding to and recovering from WMD incidents. Outside of law enforcement few L.E.O. are properly trained in hazmat response. There is a limited cadre of healthcare staff trained in decontamination. Do not have adequate police personnel in NCR based on the required mission. Need more coordination between federal and state governments.
Equipment	S	<ul style="list-style-type: none"> Many hospitals have response trailers with decontamination equipment Many hospitals funded for intelligence and decontamination equipment and PPE Equipment available in house for response-refrigerators Good to excellent equipment in the NCR Each jurisdiction has HazMat response capabilities Have structured level B PPE and A Robust regional communications Interoperable communication surge capacity Through HRSA have purchased basic equipment Fire and EMS has coordinated well on the regional level (not necessarily with the feds though)
	W	<ul style="list-style-type: none"> Need Additional PPE Equipment (8) Note enough decontamination equipment for sustained response (4) Need additional storage space (3) Need regional standards for equipment (3) Mass care equipment and supplies (2) Not enough detection equipment for sustained response (2) Chemical antidote equipment Unequal capabilities amongst healthcare facilities Upgrades in equipment lacking NCR needs better inventory and coordination of its equipment Lack communication equipment between HazMat to mass care Lack of towels blankets and clothes to receive and handle people coming from decontamination Public notification and warning system Not enough radiological detection capability Inability to quickly determine release Need long term breathing apparatus

Resource	S/W	Comments
		<ul style="list-style-type: none"> Initial response complement unable to detect hazard (HazMat, CBRNE) Ability to decontamination large numbers in cold weather Sustaining current response capability Ability to quickly triage during a mass casualty event Mechanism to determine equipment priorities and interoperability Bomb squads lack appropriate equipment to address explosive aspect WMD response and multiple WMD incident especially when combined with required times to contain, mitigate events and/or limit affected area. Availability of equipment for mortuary surge Not enough Mask I kits or treatment Shelf life of many supplies and equipment –need for replacement/maintenance Region has not fully identified the equipment and resources needed. NCR emergency responders lack equipment to effectively respond to incidents in the metro system Need more capacity and specialized equipment and coordinating resources Need more focus on inventory and resources that are not used everyday
Training	S	<ul style="list-style-type: none"> Medical training available in house and at conferences and institutes Mechanism to deliver programs
	W	<ul style="list-style-type: none"> Regional standardized training (8) Training need for water and wastewater personnel Training across RESFs to address decontamination expectations Only minimal training of personnel Not training with agencies Training between ESF-10 and ESF-6/8 for post decontamination Training for public on how detect hazmat situation Insufficient training and awareness for first responders Ability to maintain IMT More training for handing off remains to mortuary responder Financial assistance for training Constant change of hospital staff Training how to secure mass care facilities Training for the public Training for hospital staff on victims that self present Uniformed metro system training Need exercises show the gaps and deficiencies and the best to improve → we need more More focus on recovery training Need trained microbiologists
Exercises/Evaluation	S	<ul style="list-style-type: none"> DC Medical Examiner conducts in-house exercises. Some NCR exercises in CBRNE have been done.
	W	<ul style="list-style-type: none"> Need more exercises that incorporate detection, decontamination, post-decontamination handoff, and mass care response. (8) Need multiple ESF integration and coordination. (5) Individual disciplines need to practice their responses and skill with equipment to reinforce lessons learned in training. (2) Need to include Medical Examiner in exercises. (2) No continuous regional exercise or evaluation process for the NCR (lack of consistency). (2) Lack of funding for appropriate evaluation of routine training exercises. Need to test emergency responders and mass transit employees' capability to respond to an incident involving the metro system. Few staff have experience with PPE. Need cross-jurisdictional exercises involving fire and hospitals. Do not know what support will be needed from public works.
Plans, Policies and	S	<ul style="list-style-type: none"> Have existing efforts in place to handle the mass casualty gap

Resource	S/W	Comments
Procedures	W	<ul style="list-style-type: none"> While first responders have SOPs in place to indicate who's in charge, recovery procedures do not identify/define what is clean or who is in charge/lack of on the ground recovery plan/for NCR/WMD and HazMat operations plans/regional consistency particularly in dealing with jurisdictional issue. (7) Must plan for dealing with contaminated water treatment systems and disposal of decontamination material and contaminated infrastructure./Integrated, standardized decontamination plans for recovery personnel at hospitals and in the field (7) Lack of coordination with fire, rescue, state, and federal agencies/ MOUs between EMS and healthcare facilities/Medical Examiner/MMATA (6) Protection response for general public/what to do in case of HazMat incident Lack of protection in place/evacuation criteria in place Incorporation of appropriate professional organizational planning Plans to minimize panic/hysteria following CBRN incident and relative to reoccupancy/recovery operations planning Death and WMD is a reality – dealing with this result needs to be part of planning for a response Law enforcement need to establish mutual aid similar to Fire Enhance timely communication with mass care leaders/law enforcement/EMS hospitals No regional standard for detection capability

NCR Concept Papers and Initiative Plans

<p>CONCEPT PAPER</p> <p><i>Preliminary Document – Presented for Review and Discussion</i></p>		<p>January 26, 2006</p>	
		<p>Lawrence Schultz Deputy Fire Chief DCFEMS</p>	
		<p>2531 Sherman Ave NW Washington DC 20001 202-673-3358 lawrence.schultz@dc.gov</p>	
<p>Project Title:</p>	<p>Mass Decontamination Program</p>	<p>Estimated Grant Amount</p>	<p>\$2,008,200.00</p>
<p>NCR Strategic Goal Alignment:</p>	<p><u>Goal 4 Response and Recovery -</u> 4.1.1 – Modify Plans Based on Gap Analysis 4.1.2 – Integrate Plans Across Jurisdictions 4.1.3 – Long Term Decontamination Standards 4.3.1 – Close Gaps Identified in Gap Analysis 4.3.2 – Equipment Interoperability 4.4.1 – Model and Exercise 15 DHS Scenarios 4.4.2 – Align Resources With Identified Needs</p>	<p>Allowability</p>	<p>The planning funds requested in this grant application are allowable per FY 2006 page 22 Homeland Security Grant Guidance, December 2005. The training and exercise costs are allowable under page D-2 of the guidance. All equipment is allowable under the AEL8.1. 8.2 and 8.3.</p>
<p>Estimated Timeline</p>	<p>This program has been mapped out for the next five years. This portion of the program will initiate when awarded and</p>	<p>Dependencies and Cost Factors:</p>	<p>The cost factors are based on current labor rates, historical</p>

	conclude within 18 months. All deliverable equipment can be completed in 9 months.		contracting costs and projected equipment costs.
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Problem Statement/Project Description:

Problem Statement: Regional capability to perform mass decontamination of contaminated persons is insufficient to meet the projected scenarios as defined in the 15 Planning scenarios. The overarching problems are related to the technology limitations in producing warm water for decontamination operations, in maintaining and adequate supply of modesty clothing for persons being decontaminated and in the regional coordination of decontamination efforts between first responders and the expectations our hospital partners.

Project Description: This program capitalizes on the decontamination assets already held by our regional partners and provides a template for growth to the capabilities needed to provide the mass decontamination capabilities required of the region. The program represents a blend of the best existing practices and technologies available to meet the needs. The program also leverages existing projects and working groups to meet the overarching goal of increasing the regional mass decontamination capability.

This program will result in a regional decontamination protocol for first responders and a coordination of efforts with the NCR hospitals. This partnership will ultimately preserve the safety and integrity of our hospitals so that they can continue with their primary mission of treatment. These protocols and partnerships will be tested through a series of exercises. The exercises will meet the G & T guidance and the lessons learned from these exercises will provide the opportunity for evaluation and confirmation of our program.

The program will also provide the region the opportunity to push our needs to problem solving and technology development groups on a national level in order to improve our ability to provide mass decontamination in the future.

Preliminary Project Plan (Tasks, Resources, Deliverables, Collaborating Partners, etc.)

Task(s)	Owner(s) or Collaborating Partners	Deliverable(s)	Target Date(s) or Level of Effort	
Purchase 21 Tent Decontamination Systems	COG Fire Logistics	21 Decontamination System	12 months	
Purchase 25,000 Individual Redress Kits	COG Fire Logistics	25,000 Redress Kits	12 months	
Survey NCR Hospitals to determine decontamination expectations and needs as they relate to the fire service	UASI NIMS Coordinator	Define Hospital Expectations	6 months	
Training – UASI WMD Operations Training Program	UASI WMD Operations Program	Provide 33 Sessions of WMD Training	24 months	
Planning – Develop deployment policies and procedures, evaluate the logistical needs to implement the policy	COG Hazardous Materials Committee	Regional Decontamination Policy	9 months	
Research and Development –Coordinate product development capabilities as they relate to the NCR.	Program Manager	Define Scope of Warm Water Production Problem	18 months	
Exercise – Field Mass Decontamination Exercises	COG HM Committee Contractor	Delivery of 1 regional and 2 local decon exercises per jurisdiction	18 months	
Exercise – Hospital Based Mass Decontamination	COG HM Committee Contractor	Delivery of jurisdictional decon exercise with hospitals	24 months	
Project Performance Measures			Baseline Value	Target Value
Equipment in place to perform Mass Decontamination of targeted capability of 4,100 patients per hour. This baseline starts at 1,900 patients per hour.			46%	100%
Equipment Deployed to Assure that a 2,000 per hour capacity is available			30%	100%

throughout the region in 1 hour from notification		
2 local decontamination exercises take place in each jurisdiction per year	undetermined	50%
1 local decontamination exercises with hospital take place in each jurisdiction per year	undetermined	75%
1 regional mass decontamination exercise per year	0%	100%
Establishment of Regional Decontamination Protocols and Procedures (Yes or No)	0%	Yes

INITIATIVE PLAN

Mass Decontamination Program

- 1. Provide the Name of this Initiative. Describe how this Initiative will address the priority needs and strengths identified through the program and capability evaluation, and prioritization analysis.**

This program will provide a coordinated regional expansion of existing mass decontamination capabilities by using the best available practices and equipment and by leveraging existing programs and working groups to ensure a unified effort. This program seeks to obtain the best value for the dollar while meeting the regional needs. Specifically this program will double the regional mass decontamination capacity and provide the opportunity for evaluation of the program. This evaluation will allow the examination of policy and practices to determine the best method for delivery of this capability. This program will also ensure that our regional capability is coordinated. It will be through this coordination that we close the decontamination gaps identified on the target capability list. This coordination of effort is similar to previous initiatives by the Fire Chiefs to close similar gaps. One of these programs, the WMD Operations Training program will be the delivery vehicle for decontamination training for the NCR first responders.

- 2. Regional Construct: Briefly describe the geographical context of this Initiative.**

This initiative will support operations in the National Capitol Region. The National Capital Region was created pursuant to the National Capital Planning Act of 1952 (Title 40, U.S.C., Sec. 71). The Act defined the NCR as the District of Columbia; Montgomery and Prince George's Counties of Maryland; Arlington, Fairfax, Loudon, and Prince William Counties of Virginia; and all cities now or here after existing in Maryland or Virginia within the geographic area bounded by the outer boundaries of the combined area of said counties. Today, the NCR includes the District of Columbia and eleven local jurisdictions in the State of Maryland and the Commonwealth of Virginia.

- 3. Resources, Processes, and Tools: Identify the resources, processes and tools that already exist, and those that will need to be leveraged, created, or acquired for this Initiative. Briefly consider how these resources, processes and tools may be attained.**

The regional capability to provide mass decontamination is approximately half of what it needs to be in order to satisfy the strategic goals in the above identified plans. This program will leverage existing regional programs (UASI WMD Operations Training Program, COG Fire Logistics, COG HazMat Committee, and the UASI NIMS Coordinator) to ensure that this program stays on track and produces the best possible policies. This program is planned out over the next 5 years and provides the

opportunity for evaluation and modification through the exercise schedule. The equipment and practices involved in this project are the same or similar to existing programs; this will allow seamless integration into the existing capability.

4. Governance Structure: Describe the high-level governance structure (e.g., management plan, stakeholder involvement) required for successful implementation of this Initiative.

The regional Fire Chief's have identified mass decontamination as specific weakness in their capability. They have already committed significant monetary resources to addressing this problem on the local level. This program will unite their efforts to make their initial investment more effective. The Fire Chief's have pledged to support this project through the existing regional programs (UASI WMD Operations Training Program, COG Fire Logistics, COG HazMat Committee, and the UASI NIMS Coordinator). This commitment of resources by the Fire Chief's allows the program to concentrate on policy issues and maintain a supervisory role only in the processes of equipment procurement and delivery of training.

5. Program Management: Explain how the Initiative relates to the overall State homeland security program, and/how it helps incorporate the three Overarching National Priorities.

As this relates to national and regional priorities the following specifics apply. 7 National Priorities: Of the three overarching National Priorities: Implementing of the National Incident Management System and National Response Plan, and Expanded Regional Collaboration are affected by Mass Decontamination. Effective Mass Decontamination is a necessary part of satisfying these priorities. Mass Decontamination is one of the main components of one of the remaining four National Priorities: Strengthen CBRNE Detection, Response and Decontamination Capabilities. This is spelled out in the Target Capability List. NCR Strategic Plan –Goal 4 Response and Recovery - 4.1.1 – Modify Plans Based on Gap Analysis, 4.1.2 – Integrate Plans Across Jurisdictions, 4.1.3 – Long Term Decontamination Standards, 4.3.1 – Close Gaps Identified in Gap Analysis, 4.3.2 – Equipment Interoperability, 4.4.1 – Model and Exercise 15 DHS Scenarios, and 4.4.2 – Align Resources With Identified Needs.

<h1 style="margin: 0;">CONCEPT PAPER</h1> <p style="margin: 10px 0;"><i>Preliminary Document – Presented for Review and Discussion</i></p>	<p>January 23, 2006</p> <p>James Daugherty, Battalion Chief, Arlington County Fire Department 2100 Clarendon Blvd., Ste. 600, Arlington, VA 22201 (703) 228-5729 jdaugh@arlingtonva.us</p> <p>Denton Rourke Major, Prince George’s County Fire Department 10509 Croon Rd. Upper Marlboro, MD 20772 DJRourke@co.pg.md.us</p>
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Project Title:	RESF 4 – Metro Subway Security Strategic Initiative	Estimated Grant Amount	\$ 5,324,860.00
NCR Strategic Goal Alignment:	<i>Goal 1: Objectives 1, 2, 3, 4 and 6; Goal 3: Objectives 1 and 3; Goal 4: Objectives 1, 2 and 3</i>	Allowability	<i>The London cart, Rail access vehicle and the training program will require ODP approval.</i>
Estimated Timeline	<i>A three to five year time span with equipment and training to be prioritized in beginning of the grant period and ending with the large exercise</i>	Dependencies and Cost Factors:	<i>Same as above</i>

Problem Statement/Project Description: The COG Fire Chiefs Committee (RESF 4) created the COG Subway Tunnel Working Group to identify gaps in Fire’s response to an incident in the WMATA Metro System. This working group was comprised of all the specialty disciplines within the Fire Service. This UASI request is the initial appeal is for a multi year plan to enhance the region’s Fire Service’s abilities to respond effectively to an incident involving the WMATA rail system. This initiative address’s specific NCR weaknesses identified in the national priorities and severs to increase the priority capabilities of a WMD/Hazardous Materials Response and Decontamination, Law Enforcement, Investigation and Operations, CBRNE, Detection and Citizen Protection. The procurement of equipment items in this initiative would greatly expedite the mitigation tunnel rail incidents by creating efficiencies in the control and restoration effort. Thus responders would be able to implement hazardous materials detection, mitigation and decontamination techniques ensuring CBRNE and hazardous materials capabilities are realized. These items would subsequently reduce the impact of an attack by assisting workers in a quicker restoration of the infrastructure. New longer duration breathing apparatus for firefighters is critical in increasing responder effectiveness and safety detecting and controlling a hazardous materials chemical attack in the subway tunnels.

Emergency Tunnel Evacuation Carts (ETEC) (Type I) – The Passenger Rail Safety Sub-Committee (PRSSC) recommends augmenting current inventory of one additional Type I ETEC Cart in underground stations and tunnel portals were insufficient number now exist. Also we want to add to the inventory of Type I ETEC cart in Metro surface stations that located adjacent to a freight railroad tracks. This request is for 10 carts with a total of \$90,000.

London Carts (Type II) - 2 motorized carts per NCR county, 2 for WMATA and 2 carts for DC. They will be stored in transport units of the jurisdiction’s choice with equipment, personnel, etc. Purchase includes 2 spare batteries for each cart. One battery can support 35 total miles of transport. The Type II design will be similar to the ETEC Carts now in use. The Type II London Type will be a “wagon-like” design and be motorized. In the modification of the design, the second level would be removed. The Type II ETEC will have a load carrying capacity of 2000 lbs. The cart would be designed to allow rescuers to quickly facilitate evacuation in this fashion. The advantage to this type of ETEC Cart design is that it enables rescuers to transport more non-ambulatory victims. Cost will include specifications established with vendor for NCR region. Cost estimated at \$20,000 each or for 18 units with a total cost of \$360,000. ODP approval required.

Rapid Response Rail Access Vehicle - These vehicles would be dispatched to the incident, arrive at the entry point, positioned on the rails and transport rescuers to the incident location. At the same time, the vehicle could push and pull

other carts loaded with additional rescue equipment, and return to the safe environment with victims. These vehicles could additionally be used for incidents on railroad right-of-ways that have no or minimal access. . The cost includes the purchase of three rail modified Kawasaki Mule Diesel 4X4 drive vehicles at \$34,000 each and \$25,000 for each trailer, trailer modifications and maintenance agreements. The estimated cost is \$175,000 ODP approval required.

Metro rail Training Program - The COG Fire Chiefs Passenger Rail Safety Subcommittee and WMATA's Safety office will work with a training/educational contractor to develop a multi year UASI request to produce and deliver a comprehensive Metro training program. The training programs would be state of the art with CD and DVD delivery platforms to facilitate delivery in the jurisdictional work sites as well as in training academy and WMATA facilities. This program would provide training materials for approximately 9200 career and volunteer firefighters and 15000 police officers, delivered in the jurisdictions by the jurisdictions personnel along with WMATA instructors and support.

The costs of \$500,000 will include a contractor to develop the training program under the direction of the COG Fire Chiefs through the Passenger Rail Safety Subcommittee. ODP approval required. This comprehensive program would include the following levels of training:

- Initial Metro training for recruit firefighters and Metro awareness training for jurisdictional police services
- Ongoing refresher training for emergency responders.
- Company Officer training for responding to a Metro incident combined with a revised "Joint Supervisors" course
- Command Officer training for managing and command /control of a Metro incident
- A revised "Train the Trainer" program so that jurisdictions can deliver these programs internally

Multi-Disciplinary Operational Readiness Exercises - The National Capitol Region needs to conduct multiple large scale rail exercises to test the proficiency of the regional disaster plans. An exercise that would fit the bill would involve placing actual rail equipment in positions off the rails. The number of participating volunteers would exceed the number of responders. This event would necessitate the on-scene response of the medical community as well as federal assets. Leading up to this large scale exercise would be several table-top exercises and planning sessions. So that all jurisdictions could participate, adequate funding for back-fill and overtime need to be allocated. These exercises involve several sections. Training on rail operations procedures as well as hands-on training would be provided to firefighters and law enforcement within the region. The basic scenario would be a passenger train/WMATA railcar accident involving or caused by a WMD event. Several tabletop exercises would be conducted. They would be designed as follows:

1. The first table top would focus on access of incident scene and rail equipment through triage, treatment and removal of patients to final care by hospital staff.
2. The second table top would focus on law enforcement actions, from securing the scene through preserving evidence and crowd control.
3. The third table top would include federal assets and public health with local efforts working together
4. The fourth table top would combine all of the above.

The probable costs will be \$2,750,000. This cost would include fund for two contractors to produce, facilitate and coordinate 4 table top exercises, 1 full scale exercise and after action reports for 19 jurisdictions. Additional costs would be participating railroads to locate, modify, and transport older rail equipment to the exercise site and place them in positions other than on the rails procurement of materials and supplies for the production of the exercise. etc); compensation to railroads to conduct hands-on training; backfill for fire department instructors and drill coordinators; backfill for drill evaluators. Additional funds will be needed to fund overtime and backfill positions.

Tunnel Emergency Equipment Cache - Purchase of safety and rescue equipment that would be stored in the Metro System Station Fire Equipment Cabinets. By storing this equipment at the stations, rescuers can enter the station wearing their personal protective equipment, arrive at the platform, retrieve the cached equipment and go to work. The plan is to cache this equipment in the 52 underground Metro System Stations.

One SKED for each front line apparatus (Engine, Truck and Squad) – 1154 apparatus' is a total of \$577,000, Four SKED Rescue Stretchers per 52 underground stations for a total of 208 @ \$500 ea, \$104,000, 50, eight hour Light sticks per 52 underground stations – 2600 sticks @\$1.60 = \$4160. Five patient self-care kits per 52 underground stations @\$100 = \$26,000. (Will treat 250 walking wounded.) Total cost is estimated at \$687,760

BG4 Self Contained Breathing Apparatus – There are 50 BG4 SCBA that were purchased by WMATA for the NCR; additionally there are 18 BG4 SCBA which are used by the airport authority located at Dulles Airport. Should an event occur in the Subway tunnels the BG4 SCBA could prove to be invaluable for protecting the NCR Emergency responders. To be certified to use the BG4 SCBA requires 8 hours of training 2 times annually at a cost of \$100 per individual.

The Level II technicians who are trained to both use and maintain BG4 SCBA requires 16 hours of training at the initial cost of \$550 per individual. A class totaling 8 personnel can be presented for a total of \$1,800 per class.

To be able to change the BG4 SCBA out on the scene would require 20 additional O2 cylinders at \$800 per cylinder. Further, a freezer large enough to accommodate 40 ice packs will be required to make 40 entries. One ice chest freezer for maintaining the ice packs which keeps the breathing air cool while in use. The following reflects the total operating costs for the BG-4 Program which includes 20 BG-4's, and Training of 200 Level 1 Operators and 30 Level 2 Technicians would be \$762,100.

Preliminary Project Plan (Tasks, Resources, Deliverables, Collaborating Partners, etc.)			
Task(s)	Owner(s) or Collaborating Partners	Deliverable(s)	Target Date(s) or Level of Effort
Procure Equipment	NRC Entities & WMATA	Carts, BA4's & Equip. etc.	1 year after DHS approval
Project Performance Measures		Baseline Value	Target Value
Procure equipment, training program development; and perform an exercise in a year by year plan to be undertaken sequentially by operational priority.		To be determine	To be determined

INITIATIVE PLAN

Metro Subway Security Strategic Plan

- 1. Provide the Name of this Initiative. Describe how this Initiative will address the priority needs and strengths identified through the program and capability evaluation, and prioritization analysis.**

Metro Subway Security Strategic Plan. This initiative will provide comprehensive cross-ESF training to current and future responders, a multi-disciplinary operational readiness exercise program, equipment, and personal protective equipment to address specific weaknesses identified in the WMD/Hazardous Materials Response and Decontamination, Critical Infrastructure, Law Enforcement Investigation and Operations, Interoperable Communications, CBRNE Detection, and Citizen Protection: Evacuation and/or In Place Protection components of the national priorities and capabilities.:

- 2. Regional Construct: Briefly describe the geographical context of this Initiative.**

The National Capital Region was created pursuant to the National Capital Planning Act of 1952 (Title 40, U.S.C., Sec. 71). The Act defined the NCR as the District of Columbia; Montgomery and Prince George's Counties of Maryland; Arlington, Fairfax, Loudon, and Prince William Counties of Virginia; and all cities now or here after existing in Maryland or Virginia within the geographic area bounded by the outer boundaries of the combined area of said counties. Today, the NCR includes the District of Columbia and eleven local jurisdictions in the State of Maryland and the Commonwealth of Virginia.

- 3. Resources, Processes, and Tools: Identify the resources, processes and tools that already exist, and those that will need to be leveraged, created, or acquired for this Initiative. Briefly consider how these resources, processes and tools may be attained.**

ETEC Carts: Type I cart is already available, Type II Cart (Euro Version) already in use in London with demonstrated success under real-time conditions. Type II Cart (US Version) must be designed under US specifications, manufacturer identified and a purchase order developed.

Rapid Response Rail Access Vehicle: Prototype has been developed. Would require design under NCR specifications, a manufacturer identified and a purchase order developed.

Metrorail Training Program: Subject matter experts exist both in the NCR Fire Services and WMATA. Requires a training development contractor to develop the comprehensive program under subject matter direction/guidance and will require ODP approval. This program will require future funding to continue delivery to new cross-ESF responders.

Multi-Disciplinary Operational Readiness Exercises: Subject matter experts exist both in the NCR Fire Services and WMATA. Requires an operational exercise contractor to develop the comprehensive exercise program under subject matter direction/guidance.

Tunnel Emergency Equipment Cache: This equipment is readily available on existing markets and will require purchase, distribution, and training.

BG4 Self Contained Breathing Apparatus: BA is an existing asset. Training requires disposables that are readily available from the manufacturer.

4. Governance Structure: Describe the high-level governance structure (e.g., management plan, stakeholder involvement) required for successful implementation of this Initiative.

This initiative will be overseen by its primary stakeholders ESF 4 (COG Fire Chiefs COMMITTEE) with collaboration from other ESF's (Police, Public Health, Transportation) and WMATA. The stakeholders will work thru the existing COG/NCR guidance and oversight process and the existing NCR ESF structure under the State Administrative Agent.

5. Program Management: Explain how this Initiative relates to the overall State homeland security program, and/or how it helps incorporate the three Overarching National Priorities.

This initiative supports and incorporates the three Overarching National Priorities by using strong regional collaboration amongst the NCR political jurisdictions as well as multiple Emergency Support Functions and other critical partners (WMATA); supports and incorporates the implementation of NIMS and the NRP thru comprehensive training and exercises involving all affected NCR jurisdictions, ESF's and WMATA; supports and incorporates the implementation of the National Infrastructure Protection Plan by utilizing a comprehensive plan enhancing the security of and mitigating the risks to the WMATA Subway System.

<h1 style="text-align: center;">CONCEPT PAPER</h1> <p><i>Preliminary Document – Presented for Review and Discussion</i></p>		January 17, 2006	
		Daryl L. Louder, Deputy Chief Fairfax County Fire and Rescue Department	
		4100 Chain Bridge Road Fairfax, VA 22030 703-246-2823 daryl.louder@fairfaxcounty.gov	
Project Title:	National Capital Region – Type III Incident Management Team	Estimated Grant Amount	\$875,550
NCR Strategic Goal Alignment:	#1 - Planning and Decision Making #3 – Prevention and Mitigation #4 – Response and Recovery	Allowability	ICS training is approved by the Office of Grants and Training
Estimated Timeline	October 2006 – September 2007	Dependencies and Cost Factors:	<i>[Attach via separate sheet if necessary]</i>
<p>Problem Statement/Project Description:</p> <p>Homeland Security Presidential Directive # 5 (HSPD-5) directs local, state, and federal agencies to adopt and utilize the National Incident Management System (NIMS) to “prepare for, respond to, and recover from domestic incidents regardless of cause, size, or complexity.”</p> <p>The incident management team (IMT) concept is a national model and is utilized extensively for command and control of large-scale/complex incidents. Effective command/control/coordination is applicable and necessary for virtually all of the target capabilities to be implemented and successful. Incident management of WMD/hazardous materials and explosive response operations, intelligence/information sharing, citizen protection, mass care, resource logistics and distribution, planning, critical infrastructure protection, etc. are all responsibilities of or functions of an incident management team.</p> <p>A trained and certified incident management team is the pinnacle of the incident command system. The regional (Type III) incident management team for the National Capital Region (NCR) provides a cadre of highly trained, qualified, and experienced incident command officers and staff to support and complement the existing jurisdictional command staff during significant and long-term incidents. Activation of the NCR-IMT is applicable for any type of chemical, biological, radiological, nuclear, or explosive (CBRNE) terrorist attack The NCR-IMT functions under the premise of an “all-hazards” and unified command approach. As an added value, the NCR-IMT provides command and control at natural and/or man-made disasters such as severe weather events (hurricane, floods, tornados, etc.), hazardous materials releases, civil unrest, public health emergencies (managing medical surge needs, and mass prophylaxis distribution), etc. Hurricane Katrina/Rita demonstrated that IMTs are not only utilized for incident management, but also for EOC management, and management of mass care, (i.e. food/water/ice distribution, shelter management, etc.) Additionally, each team member receives a substantial amount of specialized training that can be utilized for day-to-day operations in their local jurisdictions.</p> <p>No single public safety agency or jurisdiction has the ability to staff a full command and general staff structure and subordinate positions within an incident command system. Additionally, it is anticipated that this incident command system (ICS) structure must be sustained for long-term/multi-operational period incidents. The affected agency or jurisdiction is also expected to maintain adequate command staff for continuity of government/service for the unaffected portions of the community.</p> <p>The NCR-IMT is a multi-disciplinary team that will eventually be comprised of 75 members from fire, emergency medical services (EMS), law enforcement, and public health from the participating National Capital Region (NCR) jurisdictions. Each team member has been trained and certified in a minimum of two command and general staff or support positions in order to provide depth and flexibility for the team.</p>			

Preliminary Project Plan (Tasks, Resources, Deliverables, Collaborating Partners, etc.)				
Task(s)	Owner(s) or Collaborating Partners	Deliverable(s)	Target Date(s) or Level of Effort	
1. Conduct 3-ICS-400 classes	IMT Steering Committee	All members will be ICS-400 certified.		
2. Conduct team continuing education on a quarterly basis	IMT Steering Committee	Maintain the KSA's of team members.		
3. Conduct position specific training for the Planning Section	IMT Steering Committee	Members rostered in the Planning section will receive in-depth/specific training		
4. Conduct position specific training for the Logistics Section	IMT Steering Committee	Members rostered in the Logistics section will receive in-depth/specific training		
5. Sponsor educational "shadowing" opportunities for team members.	IMT Steering Committee	Members monitor Type I/II IMTs on large/complex incidents to gain experience.		
6. Conduct team simulation training at the Nat'l Fire Acad.	IMT Steering Committee	Exercise the team through simulations to gain experience and maintain KSA's.		
7. Provide compensation for backfills and overtime	IMT Steering Committee	Compensate jurisdictions so members can participate in the IMT training.		
Project Performance Measures			Baseline Value	Target Value
1. Completion of quarterly continuing education sessions				
2. Completion of ICS-400 courses				
3. Completion of Planning Section position specific training course				
4. Completion of Logistics Section position specific training course				
5. Members participation in shadowing opportunities				
6. Completion of NFA incident simulation training				

INITIATIVE PLAN

National Capital Region Type III Incident Management Team - Training

- 1. Provide the Name of this Initiative. Describe how this Initiative will address the priority needs and strengths identified through the program and capability evaluation, and prioritization analysis.**

The incident management team (IMT) concept is a national model and is utilized extensively for command and control of large-scale/complex incidents. Effective command/control/coordination is applicable and necessary for all of the target capabilities to be implemented and successful. A trained and certified incident management team is the pinnacle of the incident command system. The regional (Type III) incident management team for the National Capital Region (NCR) provides a cadre of highly trained, qualified, and experienced incident command officers and staff to support and complement the existing jurisdictional command staff during significant and long-term incidents. Activation of the NCR-IMT is applicable for any type of chemical, biological, radiological, nuclear, or explosive (CBRNE) terrorist attack. The NCR-IMT functions under the premise of an “all-hazards” and unified command approach. As an added value, the NCR-IMT provides command and control at natural and/or man-made disasters such as severe weather events (hurricane, floods, tornados, etc.), hazardous materials releases, civil unrest, public health emergencies, etc. Hurricane Katrina/Rita demonstrated that IMTs are not only utilized for incident management, but also for EOC management, and management of mass care, (i.e. food/water/ice distribution, shelter management, etc.) Additionally, each team member receives a substantial amount of specialized training that can be utilized for day-to-day operations in their local jurisdictions. The NCR-IMT is a standing regional asset that can be activated for significant incidents on a continuous basis. The IMT will continue to require continuing education, participation in simulations/exercises, shadowing opportunities, NIMS compliant training, and funding for backfills/overtime for the foreseeable future. Additionally, the team will need to conduct certification and position specific training in the future for new members due to attrition.

- 2. Regional Construct: Briefly describe the geographical context of this Initiative.**

The NCR-IMT is a regional endeavor that encompasses representatives from the District of Columbia, Maryland, and Virginia that are members of the Metropolitan Washington Council of Governments. This is also a multi-disciplinary initiative that includes fire and rescue, law enforcement, and public health agencies.

- 3. Resources, Processes, and Tools: Identify the resources, processes and tools that already exist, and those that will need to be leveraged, created, or acquired for this Initiative. Briefly consider how these resources, processes and tools may be attained.**

The NCR-IMT is a standing National Capital Region and COG asset. Currently there are 45 members with an additional certification class scheduled for spring 2006. This will add an additional 30 members to the team. Continuing training, specialized position specific training, shadowing/mentoring opportunities, and simulation exercises are necessary in order to maintain and enhance the capabilities and competency of the team.

4. Governance Structure: Describe the high-level governance structure (e.g., management plan, stakeholder involvement) required for successful implementation of this Initiative.

The COG Fire Chiefs Committee is the sponsoring organization for the NCR-IMT initiative. This is a multi-jurisdictional/multi-agency effort that includes participation by law enforcement, public health agencies, and emergency management officials.

5. Program Management: Explain how this Initiative relates to the overall State homeland security program, and/or how it helps incorporate the three Overarching National Priorities.

The NCR-IMT initiative is closely aligned with and complements all three of the National Priorities.

Implement National Incident Management System and National Response Plan:

The incident management team subscribes to, strictly adheres to, and utilizes the concepts and principles outlined in National Incident Management System (NIMS) and the National Response Plan (NRP.)

Expand Regional Collaboration:

The NCR-IMT is a regional endeavor that encompasses representatives from the District of Columbia, Maryland, and Virginia that are members of the Metropolitan Washington Council of Governments. This is also a multi-disciplinary initiative that includes fire and rescue, law enforcement, and public health agencies.

Implement the Interim National Infrastructure Protection Plan:

Effective management of an emergency incident will focus on protecting critical infrastructure and minimizing the adverse impact of an incident. The NCR-IMT is a multi-discipline entity that will integrate the incident objectives/strategy/tactics necessary to protect infrastructure in a coordinated manner.

<h1>CONCEPT PAPER</h1> <p><i>Preliminary Document – Presented for Review and Discussion</i></p>		January 20, 2006	
		Daryl Louder, Deputy Chief Fairfax County Fire and Rescue Department	
		4100 Chain Bridge Road Fairfax, VA 22030 703-246-2823 daryl.louder@fairfaxcounty. gov	
Project Title:	National Capital Region – Type III Incident Management Team (Equipment)	Estimated Grant Amount	\$800,031
NCR Strategic Goal Alignment:	#3 – Prevention and Mitigation #4 – Response and Recovery	Allowability	Requested equipment is on the ODP approved equipment list.
Estimated Timeline	October 2006 – September 2007	Dependencies and Cost Factors:	<i>[Attach via separate sheet if necessary]</i>
<p>Problem Statement/Project Description:</p> <p>The incident management team (IMT) concept is a national model and is utilized extensively for command and control of large-scale/complex incidents. Effective command/control/coordination is applicable and necessary for virtually all of the target capabilities to be implemented and successful. Incident management of WMD/hazardous materials and explosive response operations, intelligence/information sharing, citizen protection, mass care, resource logistics and distribution, planning, critical infrastructure protection, etc. are all responsibilities of or functions of an incident management team.</p> <p>A trained, certified, and properly equipped incident management team is the pinnacle of the incident command system. The regional (Type III) incident management team for the National Capital Region (NCR) provides a cadre of highly trained, qualified, and experienced incident command officers and staff to support and complement the existing jurisdictional command staff during significant and long-term incidents. Activation of the NCR-IMT is applicable for any type of chemical, biological, radiological, nuclear, or explosive (CBRNE) terrorist attack. The NCR-IMT functions under the premise of an “all-hazards” and unified command approach. As an added value, the NCR-IMT provides command and control at natural and/or man-made disasters such as severe weather events (hurricane, floods, tornados, etc.), hazardous materials releases, civil unrest, public health emergencies (managing medical surge needs, and mass prophylaxis distribution), etc. Hurricane Katrina/Rita demonstrated that IMTs are not only utilized for incident management, but also for EOC management, and management of mass care, (i.e. food/water/ice distribution, shelter management, etc.) Additionally, each team member receives a substantial amount of specialized training that can be utilized for day-to-day operations in their local jurisdictions.</p> <p>The NCR-IMT is currently dependent on multiple regional mobile command units as a platform for operations. The NCR-IMT must develop a “stand-alone” equipment cache that allows the IMT to function in the field for extended operational periods. This capability will ensure that the necessary facilities are available when the IMT is activated. Additionally, a cache for the IMT will help to minimize the dependency and impact on the region’s mobile field command units and allow some of them to return to service for other emergency incidents.</p> <p>During the 2005 hurricane season, the NCR-IMT or components of the team were deployed to Mississippi, Florida, and Louisiana. Two large mobile command units had to be deployed to the Gulf region to support this endeavor. Although deployment out of the region was not the original intent of the IMT initiative, it does demonstrate that preparedness, response capability, and flexibility are necessary to respond to, and mitigate these large-scale/complex incidents.</p> <p>The requested equipment will provide the capability to establish one very large incident command post facility, or operate a limited capability in two theaters. The equipment is divided into the following major categories:</p> <ul style="list-style-type: none"> • Facilities (tents, generators, heaters, etc.) - \$190,332 • Communications (satellite phone, radios) - \$153,600 			

<ul style="list-style-type: none"> IT (computers, copiers, projectors, etc.) - \$134,731 Office Equipment - \$28,080 Safety Equipment - \$24,858 Transportation - \$124,290 <p>Total - \$800,031</p>				
Preliminary Project Plan (Tasks, Resources, Deliverables, Collaborating Partners, etc.)				
Task(s)	Owner(s) or Collaborating Partners	Deliverable(s)	Target Date(s) or Level of Effort	
1. Provide adequate facilities for all major ICS sections and units	IMT Steering Committee	Deploy a "stand alone" platform for major incident operations.		
2. Provide communications equipment for the command post and staff	IMT Steering Committee	Deploy a "stand alone" platform for major incident operations.		
3. Provide information technology equipment for the command post and all major ICS sections	IMT Steering Committee	Deploy a "stand alone" platform for major incident operations.		
4. Provide transportation for the IMT equipment cache to the incident site(s)	IMT Steering Committee	Deploy a "stand alone" platform for major incident operations.		
5. Provide safety equipment necessary for the IMT staff and command facilities.	IMT Steering Committee	Deploy a "stand alone" platform for major incident operations.		
Project Performance Measures			Baseline Value	Target Value
1. Purchase a full IMT equipment cache and configure it for deployment in the region.				

INITIATIVE PLAN

National Capital Region Type III Incident Management Team – Incident Command Post Equipment

- 1. Provide the Name of this Initiative. Describe how this Initiative will address the priority needs and strengths identified through the program and capability evaluation, and prioritization analysis.**

The incident management team (IMT) concept is a national model and is utilized extensively for command and control of large-scale/complex incidents. Effective command/control is applicable and necessary for all of the target capabilities to be implemented and successful.

A trained, certified, and equipped incident management team is the pinnacle of the incident command system. The regional (Type III) incident management team for the National Capital Region (NCR) provides a cadre of highly trained, qualified, and experienced incident command officers and staff to support and complement the existing jurisdictional command staff during significant and long-term incidents. Activation of the NCR-IMT is applicable for any type of chemical, biological, radiological, nuclear, or explosive (CBRNE) terrorist attack. The NCR-IMT functions under the premise of an “all-hazards” and unified command approach. As an added value, the NCR-IMT provides command and control at natural and/or man-made disasters such as severe weather events (hurricane, floods, tornados, etc.), hazardous materials releases, civil unrest, public health emergencies, etc. Hurricane Katrina/Rita demonstrated that IMTs are not only utilized for incident management, but also for EOC management, and management of mass care, (i.e. food/water/ice distribution, shelter management, etc.) Additionally, each team member receives a substantial amount of specialized training that can be utilized for day-to-day operations in their local jurisdictions.

The NCR-IMT is currently dependent on multiple regional mobile command units as a platform for operations. The NCR-IMT must develop a “stand-alone” equipment cache that allows the IMT to function in the field for extended operational periods. This capability will ensure that the necessary facilities are available when the IMT is activated. Additionally, a cache for the IMT will help to minimize the dependency and impact on the region’s mobile field command units and allow some of them to return to service for other emergency incidents.

During the 2005 hurricane season, the NCR-IMT or components of the team were deployed to Mississippi, Florida, and Louisiana. Two large mobile command units had to be deployed to the Gulf region to support this endeavor. Although deployment out of the region was not the original intent of the IMT initiative, it does demonstrate that preparedness, response capability, and flexibility are necessary to respond to, and mitigate these large-scale/complex incidents. The requested equipment will provide the capability to establish one very large incident command post facility, or operate a limited capability in two theaters.

The NCR-IMT is a standing regional asset that can be activated for significant incidents on a continuous basis. The IMT will require continuing support for command post facilities, updated information technology and communications equipment, expendable items, software upgrades, routine maintenance and replacement of worn/damaged equipment for the foreseeable future.

2. Regional Construct: Briefly describe the geographical context of this Initiative.

The NCR-IMT is a regional endeavor that encompasses representatives from the District of Columbia, Maryland, and Virginia that are members of the Metropolitan Washington Council of Governments and the National Capital Region. This is also a multi-disciplinary initiative that includes fire and rescue, law enforcement, and public health agencies. The equipment cache is deployable to any location in the Metropolitan Washington region or as requested for mutual aid.

3. Resources, Processes, and Tools: Identify the resources, processes and tools that already exist, and those that will need to be leveraged, created, or acquired for this Initiative. Briefly consider how these resources, processes and tools may be attained.

The NCR-IMT is a standing NCR/COG asset. However, NCR-IMT is currently dependent on multiple regional mobile command units as a platform for operations. The NCR-IMT must develop a “stand-

alone” equipment cache that allows the IMT to function in the field for extended operational periods. This capability will ensure that the necessary facilities are available when the IMT is activated.

4. Governance Structure: Describe the high-level governance structure (e.g., management plan, stakeholder involvement) required for successful implementation of this Initiative.

The COG Fire Chiefs Committee is the sponsoring organization for the NCR-IMT initiative. This is a multi-jurisdictional/multi-agency effort that includes participation by law enforcement, public health agencies, and emergency management officials.

5. Program Management: Explain how this Initiative relates to the overall State homeland security program, and/or how it helps incorporate the three Overarching National Priorities.

Implement National Incident Management System and National Response Plan:

The incident management team subscribes to, strictly adheres to, and utilizes the concepts and principles outlined in National Incident Management System (NIMS) and the National Response Plan (NRP.)

Expand Regional Collaboration:

The NCR-IMT is a regional endeavor that encompasses representatives from the District of Columbia, Maryland, and Virginia. This is also a multi-disciplinary initiative that includes fire and rescue, law enforcement, and public health agencies. As such joint command post facilities will be utilized by all of the disciplines and agencies.

Implement the Interim National Infrastructure Protection Plan:

Effective management of an emergency incident will focus on protecting critical infrastructure and minimizing the adverse impact of an incident. The NCR-IMT is a multi-discipline entity that will integrate the incident objectives/strategy/tactics necessary to protect infrastructure in a coordinated manner.

<h1 style="text-align: center;">CONCEPT PAPER</h1> <p><i>Preliminary Document – Presented for Review and Discussion</i></p>		January 20, 2006	
		John Donnelly Lieutenant DCFEMS	
		Special Operations Division 2531 Sherman Ave NW Washington DC 20001 202-673-3358 john.donnelly@dc.gov	
Project Title:	WMD Operations (Offensive) Training	Estimated Grant Amount	\$1,901,820.00
NCR Strategic Goal Alignment:	Strategic Goal 1: Objectives 1.1, 4.2, 6.1 and 6.3 Strategic Goal 3: Objectives 1.1, 1.2 and 2.1 Strategic Goal 4: Objectives 1.3, 2.2, 4.3 and 4.4	Allowability	The funds requested in this grant application are allowable per FY 2006 Homeland Security Grant Guidance, December 2005. Specifically, this training involves emergency preparedness and response training at G & T sponsored training for emergency response personnel. The reference is page D-2 of the guidance.
Estimated Timeline	November 2006 through August 2007	Dependencies and Cost Factors:	The costs identified are historically defined and represent \$66,000 in non personnel services and \$1,835,820 personnel services cost. These personnel services cost are allowable contractual overtime and backfill costs associated with sending responders to attend training.
<p>Problem Statement/Project Description:</p> <p>Problem Statement: There are approximately 10,000 Fire and EMS based first responders in the NCR. The NCR Strategic Goals define specific expectations of these first responders. The MWCOC Fire Chiefs, representing the NCR, determined that these first responders lack the requisite training and are therefore unprepared to meet these expectations as they relate to preparedness for, recognition of, response to, and recovery to from WMD incident. Related problems were discovered in this process. The first problem identified is that the UASI programs have been supplying a large quantity of equipment to these first responders. This equipment has been integrated into response plans, but will have more benefit if all personnel are trained in its use. A second problem identified is that during a large incident members of different jurisdictions must be able to work together, a lack of regional training opportunities contributes to this problem.</p> <p>Program Description: In order to meet the expectations of the NCR Strategic Goals the Fire Chiefs determined that a</p>			

program to train all 10,000 responders by providing an in-depth look at domestic terrorism; an advanced level of chemical toxicology associated with industrial and military chemical warfare agents; biological toxicology associated with biological agents; and radiological toxicology associated with nuclear and radiological materials. The course examines the role of ordnance/explosive materials and devices that can be used in a terrorist attack, as well the presence of secondary devices targeted at the emergency responder. The hands-on training of Personal Protective Equipment (PPE Levels A/B and C/D), mass casualty triage, decontamination and advanced survey and monitoring equipment, take the course from defensive operational tasks to offensive operations as defined by OSHA.

This program will utilize the same PPE purchased through the UASI program in order to familiarize NCR first responders in the use and capabilities of this equipment. Additionally, the COG Fire Chiefs directed that each training session offered must include responders from around the region and that the training would be conducted at sites in all three political jurisdictions to promote regional responder cooperation, interoperability and familiarity.

The Fire Chiefs researched and identified an ODP certified and delivered program that satisfied the needs listed above. This program is the Technical Emergency Response Training (TERT), a 24 hour program delivered off site by the Center for Domestic Preparedness.

Through an award of a FY2005 UASI Grant the Fire Chiefs have begun delivery of this program to 650 first responders. This grant application seeks to continue and increase the scope of that program to 1200 responders and to continue this program until all 10000 responders have been trained.

Preliminary Project Plan (Tasks, Resources, Deliverables, Collaborating Partners, etc.)

Task(s)	Owner(s) or Collaborating Partners	Deliverable(s)	Target Date(s) or Level of Effort	
See attached project file.				
Project Performance Measures			Baseline Value	Target Value
Percentage of Fire and EMS Responders Receiving WMD Offensive Level Training (assumption of 10,000 first responders)			6%	18%

INITIATIVE PLAN

WMD Operations (Offensive) Training

- 1. Provide the Name of this Initiative. Describe how this Initiative will address the priority needs and strengths identified through the program and capability evaluation, and prioritization analysis.**

WMD Operations (Offensive) Training – This initiative will provide a training program to train all 10,000 responders by providing an in-depth look at domestic terrorism; an advanced level of chemical toxicology associated with industrial and military chemical warfare agents; biological toxicology associated with biological agents; and radiological toxicology associated with nuclear and radiological materials. The course examines the role of ordnance/explosive materials and devices that can be used in a terrorist attack, as well the presence of secondary devices targeted at the emergency responder. The hands-on training of Personal Protective Equipment (PPE Levels A/B and C/D), mass casualty triage, decontamination and advanced survey and monitoring equipment, take the course from defensive operational tasks to offensive operations as defined by OSHA. This program will utilize the same PPE purchased through the UASI program in order to familiarize NCR first responders in the use and capabilities of this equipment. Additionally, the COG Fire Chiefs directed that each training session offered must include responders from around the region and that the training would be conducted at sites in all three political jurisdictions to promote regional responder cooperation,

interoperability and familiarity. This program elements listed above are identified as weakness during the CBRNE Detection and WMD/HazMat Response and Decontamination TCL Review sessions.

2. Regional Construct: Briefly describe the geographical context of this Initiative.

This initiative will support operations in the National Capitol Region. The National Capital Region was created pursuant to the National Capital Planning Act of 1952 (Title 40, U.S.C., Sec. 71). The Act defined the NCR as the District of Columbia; Montgomery and Prince George's Counties of Maryland; Arlington, Fairfax, Loudon, and Prince William Counties of Virginia; and all cities now or here after existing in Maryland or Virginia within the geographic area bounded by the outer boundaries of the combined area of said counties. Today, the NCR includes the District of Columbia and eleven local jurisdictions in the State of Maryland and the Commonwealth of Virginia.

3. Resources, Processes, and Tools: Identify the resources, processes and tools that already exist, and those that will need to be leveraged, created, or acquired for this Initiative. Briefly consider how these resources, processes and tools may be attained.

There are 10,000 first responders in the NCR. This is our chief strength. Unfortunately, these responders are essentially untrained for WMD Incident Response. This initiative seeks to turn this liability into an asset by taking other strengths and using it to train these responders. The other strengths are WMD response equipment, as has been purchased through the UASI and SHSGP program and the existence of the ODP –Technical Emergency Response Training. The training program will be delivered over the course of five years to all 10,000 responders; this training will teach these responders to properly utilize the UASI and SHSGP WMD response equipment to advance these 10,000 responders into a coordinated WMD response force that can properly identify, respond to, mitigate and clean up from a WMD Incident.

4. Governance Structure: Describe the high-level governance structure (e.g., management plan, stakeholder involvement) required for successful implementation of this Initiative.

This plan has the support and active direction from the COG Fire Chiefs. As this program is already in place through the award of FY2005 UASI Grant, the same governance structure that has made it successful will continue in that manner. The COG Fire Chief's represent each of the NCR jurisdictions and have committed to provide the space and logistical resources to hold the program and to ensure that each of their members is enrolled in the program. Continuing the success of this program will only require the extension and renewal of the activities and relationships currently functioning between the NCR jurisdictions.

5. Program Management: Explain how this Initiative relates to the overall State homeland security program, and/or how it helps incorporate the three Overarching National Priorities.

This initiative supports the Three Overarching National Priorities in three different ways. To ***Expand Regional Collaboration***, this initiative will provide a standardization of emergency response policies and procedures for the regions first responders. The second layer to this collaboration will foster the development of relationships between first responders to support the regions response. To ***Implement the National Incident Management System and National Response Plan***, this initiative provides introductory training in NIMS which will standardize the processes used to implement the NRP and provide the opportunity to exercise and practice these policies. To support the ***Implementation of the National Infrastructure Protection Plan***, the initiative will provide methods and support to a regional

response to WMD attack and minimizing its damage, thus promoting shorter recovery periods for components of the national infrastructure through coordinated and seamless processes to support and perform decontamination. The NCR, Homeland Security Plan is supported by this initiative in the following manner. **Strategic Goal #3, An enduring capability to protect the NCR by preventing or mitigating “all-hazards” threats or events;** is by developing and sustaining common, multi-disciplinary standards for planning, equipping, training, operating, and (cross-jurisdictional) exercising to maximize the ability to provide identification, response, mitigation and decontamination abilities across the NCR. **Strategic Goal #4, A sustained capacity to respond to and recover from “all-hazards” threats or events across the NCR.** This requirement will be met by providing coordination between the local jurisdictions involved in WMD response. This initiative will allow the NCR to be prepared for situations that require large multi-jurisdictional, multi-agency; responses by ensuring similar training and knowledge throughout the NCR and providing large numbers of trained and knowledgeable first responders.

<p>CONCEPT PAPER</p> <p><i>Preliminary Document – Presented for Review and Discussion</i></p>		1/20/2006	
		Victor Stagnaro, Major, Chair EMS Subcommittee, MWCOG Prince George’s County Fire/EMS Department	
		6820 Webster Street Landover Hills, MD 20784 Ph: (301) 583-1860 Email: vstagnaro@co.pg.md.us	
Project Title:	Emergency Incident Rehabilitation Units	Estimated Grant Amount	\$700,000
NCR Strategic Goal Alignment:	Goal #4 Response and Recovery – Objective 3 Resource Sharing	Allowability	Yes, per DHS G&T authorized equipment list under #9 Medical Supplies, #12 CBRNE Incident Response Vehicles, #19 CBRNE Logistical Support Equipment
Estimated Timeline	24 months after award	Dependencies and Cost Factors:	Finding suitable locations for placing Rehab units
<p>Problem Statement/Project Description:</p> <p>HSPD-8 establishes policies to strengthen the preparedness of the United States to prevent and respond to threatened or actual domestic terrorist attacks, major disasters, and other emergencies by requiring a National Preparedness Goal; establishing mechanisms for improved delivery of federal preparedness assistance to state and local governments; and outlining actions to strengthen preparedness capabilities of federal, state, and local entities.</p> <p>An often-overlooked component of a Department’s preparedness plan is the rehabilitation of the first responders on a major incident. The National Capital Region (NCR) has experienced firsthand train crashes, airline crashes, METRO crashes, bus and other significant transportation collisions, workplace violence, terrorism, the attack on the Pentagon. In addition, the Washington Metropolitan Area frequently hosts mass gatherings and special events, from concerts to charity walks throughout the NCR, each drawing thousands of participants.</p> <p>Each jurisdiction in the NCR has independently developed a rehabilitation procedure, which ranges from providing a water</p>			

cooler with cups to dispatching a ladies auxiliary unit to respond to the scene with food and drinks. Personnel are our most valuable resource and need to be properly cared for on emergency incidents. As with every other issue involving mutual aid, interoperability is paramount. Standardized units, standard inventory, and standard capability are vital to success.

The Emergency Incident Rehabilitation Units addresses the following national preparedness capabilities of the Target Capabilities List:

Critical Infrastructure Protection, Critical Resource Logistics and Distribution, WMD/Hazmat and Decontamination, Medical Surge, and Mass Care (Sheltering, Feeding, and Related Services)

As well as the NCR Goal #4 of Response and Recovery with regards to resource sharing and interoperability.

Purchase Nine (9) – Emergency Incident Rehabilitation Units. These will be deployed as follows: Maryland – 3; Northern Virginia – 5; Washington D.C. – 1. The units will be equipped with the necessary equipment to establish a rehabilitation area at a large scale incident. Equipment will include but not be limited to, tents, tarps, chairs, cooling fans, water coolers, BLS first aid supplies/equipment, liters, portable lights, and portable generators.

Preliminary Project Plan (Tasks, Resources, Deliverables, Collaborating Partners, etc.)

Task(s)	Owner(s) or Collaborating Partners	Deliverable(s)	Target Date(s) or Level of Effort
1. Develop list of equipment/supplies to carry on Rehab unit	MWCOG EMS Subcommittee members	List of equipment/supplies to carry on Rehab unit	2 months after grant award
2. Design specifications for Rehab vehicle	Major Victor Stagnaro & Lieutenant Roland Berg	Specifications for Rehab vehicle	4 months after grant award
3. Determine locations of Rehab units	MWCOG EMS Subcommittee members	Location of Rehab units	5 months after grant award
4. Create RFQs for equipment/supplies for Rehab unit	Major Victor Stagnaro & Lieutenant Roland Berg	RFQs for equipment/supplies for Rehab units	6 months after grant award
5. Create RFQs for Rehab vehicle	Major Victor Stagnaro & Lieutenant Roland Berg	RFQs for Rehab vehicle	6 months after grant award
6. Distribute RFQs to vendors	Major Victor Stagnaro & Lieutenant Roland Berg		7 months after grant award
7. Receive RFQs from vendors and evaluate	Major Victor Stagnaro & Lieutenant Roland Berg		9 months after grant award
8. Award contracts to vendors	Major Victor Stagnaro & Lieutenant Roland Berg		12 months after grant award
9. Receive vehicles from vendors and distribute to jurisdictions	Major Victor Stagnaro & Lieutenant Roland Berg		18 months after grant award
10. Receive equipment/supplies from vendors and distribute to jurisdictions	Major Victor Stagnaro & Lieutenant Roland Berg		18 months after grant award
11. Place Rehab units into service	MWCOG EMS Subcommittee members		22 months after grant award
12. Complete final report to MWCOG and awarding agency	Major Victor Stagnaro & Lieutenant Roland Berg	Final Report	24 months after grant

Project Performance Measures	Baseline Value	Target Value
1. Developing standardized equipment list for Rehab unit		
2. Designing specifications for Rehab unit		
3. Awarding contracts for Rehab unit and equipment/supplies		
4. Receiving delivery of Rehab units and equipment/supplies		
5. Placing Rehab units into service		

INITIATIVE PLAN

Emergency Incident Rehabilitation Units

- 1. Provide the Name of this Initiative. Describe how this Initiative will address the priority needs and strengths identified through the program and capability evaluation, and prioritization analysis.**

Initiative name: Emergency Incident Rehabilitation Units

An often-overlooked component of a Department's preparedness plans is the rehabilitation of the first responders that respond on a major incident or CBRNE event. The National Capital Region (NCR) has experienced firsthand train crashes, airline crashes, METRO crashes, bus and other significant transportation collisions, workplace violence, terrorism, the attack on the Pentagon. In addition, the Washington Metropolitan Area frequently hosts mass gatherings and special events, from concerts to charity walks, each drawing thousands of participants.

Each jurisdiction in the NCR has independently developed a rehabilitation procedure, which ranges from providing a water cooler with cups to dispatching a ladies auxiliary unit to respond to the scene with food and drinks. Personnel are our most valuable resource and need to be properly cared for on emergency incidents. As with every other issue involving mutual aid, interoperability is paramount. Standardized units, standard inventory, and standard capability are vital to success. This initiative will provide for a regionalized approach to conducting rehab on the scene of an emergency incident. The initiative addresses the following capabilities identified in the Target Capabilities List:

- **Critical Infrastructure Protection**
- **Critical Resource Logistics and Distribution**
- **WMD/Hazmat and Decontamination**
- **Medical Surge**
- **Mass Care (Sheltering, Feeding and Related Services)**

- 2. Regional Construct: Briefly describe the geographical context of this Initiative.**

The National Capital Region was created pursuant to the National Capital Planning Act of 1952 (Title 40, U.S.C., Sec. 71). The Act defined the NCR as the District of Columbia; Montgomery and Prince George's Counties of Maryland; Arlington, Fairfax, Loudon, and Prince William Counties of Virginia; and all cities now or here after existing in Maryland or Virginia within the geographic area bounded by the outer boundaries of the combined area of said counties. Today, the NCR includes the

District of Columbia and eleven local jurisdictions in the State of Maryland and the Commonwealth of Virginia. This initiative encompasses the entire NCR.

3. Resources, Processes, and Tools: Identify the resources, processes and tools that already exist, and those that will need to be leveraged, created, or acquired for this Initiative. Briefly consider how these resources, processes and tools may be attained.

No standardized vehicle or equipment exists in the NCR.

Development of a standardized emergency incident rehabilitation unit would need to be created with a standard set of equipment and supplies.

4. Governance Structure: Describe the high-level governance structure (e.g., management plan, stakeholder involvement) required for successful implementation of this Initiative.

This initiative will be overseen by its primary stakeholders ESF-4 (COG Fire Chiefs Committee) with collaboration of the COG EMS Subcommittee. The stakeholders will work thru the existing COG/NCR guidance and oversight process and the existing NCR ESF structure under the State Administrative Agent. The stakeholders agree that emergency incident rehabilitation units are needed and their support ensures that all the units will be standardized and able to respond throughout the NCR.

5. Program Management: Explain how this Initiative relates to the overall State homeland security program, and/or how it helps incorporate the three Overarching National Priorities.

This initiative supports and incorporates the Overarching National Priorities by using strong regional collaboration amongst the NCR political jurisdictions; supports and incorporates the implementation of NIMS and the NRP thru the ability to use interoperable equipment.

The initiative addresses the NCR's Goal #4 Response and Recovery Objective 3: Resource Sharing of standardized equipment to allow for interoperability, by utilizing a developed standard for Emergency Incident Rehabilitation Units.

The Emergency Incident Rehabilitation Units will help to ensure that the NCR will be able to provide rehabilitation of first responders on a major incident. Whether from natural disasters, WMD/Biological, or Mass Care/Sheltering incidents the initiative will ensure that the NCR can provide a regional approach to responding to incidents by having a standardized plan for handling rehabilitation of providers.

3-5 Year Plan:

- Continue to make enhancements and upgrades to program to take advantage of changes in standards and technology.
- Ongoing coordination with other jurisdictions to maintain interoperability and share resources during large scale incidents.
- Maintain a state of readiness and sustain program through a regional collaborative approach.

Scoring Sheet

WMD/Hazardous Materials Response and Decontamination

Scoring Criteria: All candidate Concept Papers are to be scored on the basis of compliance with the following 5 criteria. Each criteria is to be scored from 1 to 10 points, with 1 being lowest compliance and 10 being the highest.

Criteria #1: How well does this Concept Paper/Initiative Plan address identified strengths and weaknesses of the 14 Priority Target Capabilities?

Criteria #2: How well does this Concept Paper/Initiative Plan address identified strengths and weaknesses of the 3 Overarching National Priorities?

Criteria #3: How appropriate is the funding requested with the deliverables proposed by the Concept Paper?

Criteria #4: How beneficial will this concept paper be in addressing regional needs?

Criteria #5: How important is it to implement this Concept Paper/Initiative Plan in FY 06?

Concept Paper		Mass Decontamination Program									
Related Target Capabilities:											
Score:	Criteria #1 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #2 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #3 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #4 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #5 (1-10)	1	2	3	4	5	6	7	8	9	10
	Total: (5-50)										

Concept Paper		RESF 4 – Metro Subway Security Strategic Initiative									
Related Target Capabilities:		CBRNE Detection, Law Enforcement Investigation and Operations, Explosive Device Response Operations									
Score:	Criteria #1 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #2 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #3 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #4 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #5 (1-10)	1	2	3	4	5	6	7	8	9	10
	Total: (5-50)										

Concept Paper		National Capital Region – Type III Incident Management Team									
Related Target Capabilities:											
Score:	Criteria #1 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #2 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #3 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #4 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #5 (1-10)	1	2	3	4	5	6	7	8	9	10
	Total: (5-50)										

Concept Paper		National Capital Region – Type III Incident Management Team (Equipment)									
Related Target Capabilities:											
Score:	Criteria #1 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #2 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #3 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #4 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #5 (1-10)	1	2	3	4	5	6	7	8	9	10
	Total: (5-50)										
Concept Paper		WMD Operations (Offensive) Training									
Related Target Capabilities:		CBRNE Detection, Law Enforcement Investigation and Operations, Explosive Device Response Operations									
Score:	Criteria #1 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #2 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #3 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #4 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #5 (1-10)	1	2	3	4	5	6	7	8	9	10
	Total: (5-50)										
Concept Paper		Emergency Incident Rehabilitation Units									
Related Target Capabilities:		Critical Resource Logistics and Distribution									
Score:	Criteria #1 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #2 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #3 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #4 (1-10)	1	2	3	4	5	6	7	8	9	10
	Criteria #5 (1-10)	1	2	3	4	5	6	7	8	9	10
	Total: (5-50)										