
Protecting the Nation's Responders

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Because we live in a dangerous world...

Abstract

Since September 11, 2001, the taxpayers of the United States have invested billions of dollars to prepare and equip first responders for terrorist events. As the frontline, both in the preventing and responding to terrorist events, first responders; police, fire fighters, paramedics, dispatchers and hospital personnel should have and use all the best tools and practices available. But do they? The authors suggest that the system currently in use lacks a mechanism for identifying incidents which have a high propensity for being a terrorist event and therefore render the dispatch and response procedures for our first responders dangerously less effective. It is recommended that the six "terrorism indicators" presented be used as the centerpiece for future terrorism response planning.

Problem statement

Homeland Security Grant Program dollars have been used to enhance terrorism prevention, preparedness, recovery, and mitigation measures. We suggest that when it comes to response, in the call taking, dispatch and response continuum, little has changed to provide our first responders with the best information and support available. Critical information that should be considered early in the response is not routinely taken into account and in most systems is not provided to responders.

Consequences

Continued use of routine dispatch and response protocol is like announcing to the enemy the tactics we intend to use to defend ourselves. In today's threat environment we need to approach each incident in a more suspicious manner until proven otherwise. The soldier on a mission comes to mind: proceed with extreme caution, expect aggression, and bring more resources than you think you might need. Not following these principles places our responders in jeopardy, minimizes our effectiveness when dealing with the victims, and creates more opportunities for our enemies to use our own predictable practices against us.

Background

According to the Department of Homeland Security, over three billion dollars have been spent on funding preparedness grants over the past two years alone. America's first responders have received unprecedented training, equipment and supplies to prepare them for a response to a terrorist event. During that time, there have been numerous terrorist attacks and planned attacks, some on U. S. soil, with a significant potential impact, in terms of deaths and injuries. Will the next terrorist attack be aimed at our first responders, and if it is, will they be ready?

Corrective measures

Throughout the Nation, most response organizations have adopted the Incident Command System, procured personal protective equipment and other first responder protection including antidotes and advanced nuclear, biological, and chemical detection and identification equipment. Response guides and medical protocols have been created or updated to include response and treatment protocols focusing first and foremost on scene and responder safety.

What has not been universally accepted and implemented is a process to determine, at the receipt of a 9-1-1 call, whether the incident should be categorized as a possible terrorist incident until proven otherwise.

In medicine, two general maxims are, 1) any male over 18 years of age with chest pain is considered to be having a heart attack until proven otherwise, and 2) all females above the age of 13 with abdominal pain, are considered to have an ectopic pregnancy until proven otherwise. In the following commentary, we will discuss why these maxims are relevant to our first responder and will propose a terrorism response plan implementing "terrorism incident until proven otherwise" guidelines.

Proposal

We present a list of six Terrorism Indicators which we believe should be incorporated in the development or revision of dispatch and response protocols. These indicators are present in many terrorist attacks but their association may not be recognized until responders are committed; and likely in a vulnerable position.

The primary indicators should trigger communications operator and first responder suspicions that the event may be something more than what it appears on first blush.

The six primary indicators are:

1. Non-trauma mass casualties incidents
2. Involvement of explosives and/or incendiaries

3. Warning signs: On-scene (e.g., evidence of tampering with air distribution systems, dispersal devices, known threats, etc.) Other known threats to include a) voiced threats, b) intelligence notices (e.g., fusion center information) and c) heightened threat levels.
4. High profile, controversial, or symbolic locations (e.g., abortion clinics, Government buildings, religious institutions, media outlets, ports, sports venues, etc.)
5. High profile, controversial, or symbolic person (e.g., political leader, high ranking government official, community activist, etc.)
6. Significant dates (e.g., the Waco storming, Oklahoma City bombing, WTC attacks, etc.)

We recommend that any request for service be viewed in light of the six indicators and additional actions be taken at the time of dispatch and while units are responding. On the dispatch side, we recommend a code be provided to responders making it clear that the call meets at least one of the indicators and responders should consider the incident to be a terrorist event until proven otherwise.

At dispatch, we recommend at least the inclusion, but preferably the dispatch, of additional units or experts who may provide valuable insight into the event. For example, on a mass casualty incident, without trauma or a known etiology, inclusion of an expert in the rapid determination of a possible chemical release and subsequent treatment may be warranted. In many communities, a hazardous material unit or hazardous materials specialist fits the bill, but oftentimes they are not included on the initial dispatch unless requested. Each community can determine the right units or experts for each indicator. What we want to see is the right units respond on the initial dispatch to provide the greatest level of safety and efficiency.

On the response side, first responder safety is paramount. We have analyzed numerous response scenarios based on actual events and the repetitive failure we see is the lack of awareness of secondary explosive devices, hostile aggressors, and the potential for radiation dispersal. (Note: Although most communities have purchased portable radiation detection devices, many if not most, have not developed deployment protocols for use by first responders.)

We believe that all units responding to any call meeting at least one of the terrorism indicators should deploy a radiation detection device while responding. If any radiation above background is detected they should, at a minimum, establish a warm zone and operate accordingly.

Recommendations

What we have presented above are two components of a comprehensive terrorism response plan. At a minimum, each community should;

1. review their current call-taking process,
2. develop terrorism indicators augmenting the ones provided,
3. identify units and experts to provide support on qualifying responses,
4. develop protocols for when and how to use the many tools and equipment available, and
5. develop a field operations guide to remind first responders of actions they should take while responding or on scene. Examples of this are: 1) establishment of the hot, warm and cold zones, 2) use of the incident command structure, and 3) emergency contact information for specialized resources.

Summary

For many years we divided the terrorism programs into crisis management and consequence management. Money was allocated to finding and stopping terrorist before they had well-developed plans and the equipment and supplies to attack Americans. Other programs focused more on how to deal with imminent and actual attacks.

As law enforcement became better funded and trained, programs to infiltrate and eradicate terrorists groups became more effective. As abundant funding for training and exercises became readily available to first responders we developed and provided hands-on training on how to deal with bomb disposal, chemical treatment, incident command establishment and scene security, and evidence collection and preservation.

Today, across terrorism deterrence and response programs, we have better equipment, leading-edge technology, robust training, and improved communications. What we do not have is a plan to provide additional tools to our first responders which, when implemented, will provide them with a higher level of personal security. We live in a dangerous world and our first responders, along with the general public, are most often the ones who suffer the consequences of terrorist attacks.

Our recommendations will go a long way in providing our first responders with the additional protection they need and deserve.

About the presenters...

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