



Highlights:

[Assessing System Security for PSAPs](#)

[Web-Based Training for EMS Medical Directors](#)

[Labs: Maintain a "Warm Base" for Pandemics](#)

[Hazards of Alternative Fuel Fires](#)

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The U.S. Fire Administration maintains the **Emergency Management and Response – Information Sharing and Analysis Center (EMR-ISAC)**.

For information regarding the EMR-ISAC visit www.usfa.dhs.gov/emr-isac or contact the EMR-ISAC office at: (301) 447-1325 and/or emr-isac@fema.dhs.gov.

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Assessing System Security for PSAPs

Urgent Communications magazine has a series of articles on system security and vulnerability assessment for the most common types of networks and computer systems used by dispatching and call centers. Security is more of an issue as 9-1-1 and dispatching systems become more networked and therefore vulnerable to cyber attacks.

[The first article](#) talks about the elaborate programs used in dispatching and the three main types of systems PSAPs utilize: networks, automated systems (e.g., CAD, mapping), and radio/wireless communications. All are becoming more interconnected, dependent on one another, and therefore more vulnerable as a whole.

The ways viruses or malware can be introduced into systems include obvious methods of attack like hacking into systems or jamming signals, but also by [devices attached to USB ports](#) or introduction of viruses via email. [The second article discusses](#) the consequences of such attacks can bring systems down or make critical or personal information public.

The authors strongly suggest performing an assessment of the system's unique vulnerabilities to help develop a security plan. Documenting the finished assessment and using it to implement a prioritized security structure should be supplemented with mandatory and regular training of all employees and a reevaluation of the plan annually.

(Source: [Urgent Communications Magazine](#))

Web-Based Training for EMS Medical Directors

The U.S. Fire Administration (USFA) and the [International Association of Fire Chiefs](#) (IAFC) have developed a [web-based training program for EMS Medical Directors](#). Hosted on the IAFC website, the training provides assistance and support for experienced and new medical directors.

Training is based on the recently published [Handbook for EMS Medical Directors](#). The program includes an "Introduction" covering the general role of a medical director and required qualifications. Other chapters in the training program include "The EMS Agency and Its Stakeholders," "Becoming a Medical Director," "Agency Oversight," "Agency Dynamics," and "Moving Forward as a Medical Director."

The InfoGram is distributed weekly to provide members of the Emergency Services Sector with information concerning the protection of their critical infrastructures.

The press release says the training supports EMS medical directors in their role of “providing medical oversight and direction, training, protocol development, and resource deployment advice.” The program is part of a series of partnerships with the Department of Homeland Security’s [Office of Health Affairs](#).

(Source: [U.S. Fire Administration](#))

Labs: Maintain a “Warm Base” for Pandemics

Decisions made throughout the different stages of a possible or existing pandemic are often based on the outcome of thousands of laboratory tests. Laboratory capabilities during a crisis must be expected to respond quickly to keep up with the demand of increasing numbers of tests. The ability of labs to meet the demand depends on maintaining a “warm base.”

A “warm base” includes keeping a staff of trained laboratory technicians, availability of up-to-date equipment, and the ability to do diagnostic analysis able to identify different viruses, sometimes previously unknown strains. Keeping these three criteria in mind enables labs to make rapid adjustments during fluid conditions.

The Centers for Disease Control and Prevention (CDC) and the Association of Public Health Laboratories (APHL) are working to guarantee the “warm base” already developed is maintained through participation in training, communication, and proper funding.

A [Domestic Preparedness Journal podcast](#) offers a 15-minute interview involving the Influenza Division of the CDC and the Wisconsin State Laboratory of Hygiene. The interviewees discuss how the program helped with H1N1 response in 2009, and how it differed from the response to the Anthrax letters in 2001.

(Source: [DomesticPreparedness.com](#))

Hazards of Alternative Fuel Fires

The use of alternative fuels is growing as the price of gasoline and diesel go up. Alternative fuels are uncommon and not all fire departments have had to deal with them yet. [FireRescue1.com](#) highlights the session at FRI detailing alternative fuels:

- Hydrogen – burns with an invisible flame (though it is visible at night when using a thermal imaging camera) and is 14 times lighter than air. Currently it is being used to fuel forklifts and backup generators for cell towers, though hydrogen-powered vehicles are being tested for mass production.
- Ethanol – can be diluted substantially and still have enough vapor to catch fire. Burns with a light blue flame and without perceptible smoke. Currently being mixed with gasoline in varying amounts, making placarding difficult.
- Biodiesel – made by converting used cooking oil to fuel, so colors vary depending on what type of oil was used. It has a low flashpoint and is light enough to float on water. The growing market of homemade biodiesel makes it something to plan for in residential fire response.

The [International Association of Fire Chiefs](#) and the [Hazmat Fusion Center](#) have developed [online training programs](#) for first responders on all three fuels, and is developing a fourth program on methanol.

(Source: [FireRescue1.com](#))

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