



## Emergency Management and Response Information Sharing and Analysis Center (EMR-ISAC)

**INFOGRAM 46-08**

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***NOTE:** This INFOGRAM will be distributed weekly to provide members of the Emergency Services Sector with information concerning the protection of their critical infrastructures. For further information, contact the Emergency Management and Response- Information Sharing and Analysis Center (EMR-ISAC) at (301) 447-1325 or by e-mail at [emr-isac@dhs.gov](mailto:emr-isac@dhs.gov).*

### Recession Effects on Emergency Services

It is common knowledge that numerous Emergency Services Sector (ESS) departments and agencies have experienced shrinking budgets resulting from the economic downturn. However, the current recession has prompted even more direct challenges for first responders. For example, spiraling foreclosures have triggered a significant increase in abandoned properties, which have always been dangerous environments for emergency personnel.

The Emergency Management and Response—Information Sharing and Analysis Center (EMR-ISAC) learned from National Fire Protection Association (NFPA) reports that the adverse effects of the recession have become problematic for the operations and safety of ESS organizations for the following reasons in addition to other causes:

- More homeless people have surreptitiously occupied vacant structures.
- The structural integrity of empty buildings has often been compromised by squatters.
- Abandoned houses have increasingly been the source of criminal activities including arson.
- Destitute individuals have moved in with family or friends causing perilous overcrowding conditions.
- More basements and attics have been occupied and heated with unsafe appliances.

A 19 November FireRescue1 article discussed a strategy that can be implemented to mitigate the foreclosure problem. The article suggested ESS departments should partner with lending institutions as well as housing and community organizations to develop methods to prevent home foreclosures and the abandonment of homes. "It's about working with organizations, letting them know the concerns of the fire department and how foreclosures and vacant homes generally may affect fire and arson rates," said the NFPA director of high-risk outreach programs.

Additionally, the chief of the Columbus Fire Department in Ohio recommended categorizing buildings certified as abandoned and vacant, and arranging for them to be tagged with appropriate signage. "This action should help to eliminate the risk of injury to responders unless they have reason to believe a rescue is necessary."

The complete FireRescue1 article can be seen at the following link:

<http://www.firerescue1.com/Firefighter-Training/articles/439214-Foreclosures-challenge>.

### Relevance of Mumbai Attacks for First Responders

The recent terrorist attacks in India have deep and wide reverberations. This is understandable, considering the detailed planning, scope, sophistication, tactics, and multiple targets of the 26-28 November events. "Although the strike on Mumbai does not signal an immediate threat to the United States, the nation must be ready for the possibility of a terror plot in the wake of the attack in India," noted homeland security analyst James Carafano of The Heritage Foundation.

According to a non-sensitive briefing prepared by the Washington Regional Threat and Analysis Center, the terrorists' actions have particular relevance for this nation's first responders. The perpetrators stole at least one emergency vehicle to expedite their attacks. Additionally, it appears that the gunmen attempted to time their assaults to "hit hospitals at the same time the 1<sup>st</sup> wave of casualties was arriving...."

When examining several analytical reports, the Emergency Management and Response—Information Sharing and Analysis Center (EMR-ISAC) confirmed that the Mumbai attackers utilized a "layered delivery" technique to execute their criminal mission. This method involves an initial explosion, followed by secondary or tertiary attacks, which consist of additional blasts or small-arms fire. The purpose of this tactic is to inflict damage on the primary target and also on the first responders arriving to mitigate the emergency.

To obtain in-depth information regarding recommended protective measures, the EMR-ISAC encourages a subscription to TRIPwire (Technical Resources for Incident Prevention). When subscribed, proceed to the article: "Analysis of Mumbai Combined Arms Operation and Recommended Protective Measures" (For Official Use Only). TRIPwire can be contacted at 1-866-987-9473 or at [help@tripwire-dhs.gov](mailto:help@tripwire-dhs.gov).

## Voice Radio Communications Guide

Unique communications systems requirements to consider when Emergency Services Sector (ESS) departments and agencies plan, implement, and manage radio systems are outlined in the new "Voice Radio Communications Guide for the Fire Service," a product of a U.S. Fire Administration (USFA) project conducted with the assistance of the International Association of Fire Fighters (IAFF).

"The need for an understanding of today's modern communications concepts and technology for firefighter and citizen life safety and operational effectiveness remains as valid, if not more so today, than it did when this USFA document was first produced in 1996," said U.S. Fire Administrator Greg Cade. (1996 manual: <http://www.usfa.dhs.gov/downloads/pdf/publications/fa-160.pdf>). (1.2 MB, 241 pages)

The new manual provides updated information on communications technology and discusses critical homeland security issues and concepts, such as SAFECOM, that did not exist when the original manual was first published. It also provides the emergency services audience with a minimum level of familiarity with basic communications issues such as hardware, policy and procedures, and human interface. Specific topics include basic radio communications technology; radios and radio systems; portable radio selection and use; trunked radio systems; system design and implementation; interoperability; and radio spectrum licensing.

Communication/cyber systems, along with personnel and equipment assets, comprise the key components of ESS critical infrastructures. The Emergency Management and Response—Information Sharing and Analysis Center (EMR-ISAC) acknowledges, as the manual recommends, that ESS departments and agencies "be involved early on in the process of developing a new radio communication system in their jurisdictions to make sure that the funding, staffing, training, testing, trouble-shooting, and implementation meet the standards and requirements for fire fighters to respond safely and effectively."

Available online only, the manual can be downloaded at [http://www.usfa.dhs.gov/downloads/pdf/publications/voice\\_radio\\_communications\\_guide\\_for\\_the\\_fire\\_service.pdf](http://www.usfa.dhs.gov/downloads/pdf/publications/voice_radio_communications_guide_for_the_fire_service.pdf). (3.8 MB, 77 pages)

## ESS Protection through Vaccination

The National Fire Protection Association's (NFPA) report last month, "Firefighter Injuries for 2007," estimated that Emergency Services Sector (ESS) personnel experienced an estimated 13,450 exposures to infectious diseases. Last month the American College of Physicians (ACP) and the Infectious Diseases Society of America (IDSA) released a joint statement on the importance of adult vaccination against an "increasing number of vaccine-preventable diseases."

According to the Centers for Disease Control and Prevention (CDC), 95 percent of vaccine-preventable diseases occur in adults and more than 46,000 adults die of vaccine-preventable diseases or their complications. The chairman of the IDSA's Immunization Work Group explained, "Every year, hundreds of thousands of adults get sick, miss work, and are hospitalized. Many adults die because of vaccine-preventable diseases or their complications. Costs associated with treatment run in the billions." In addition to emergency responders' exposures to infectious diseases, more than 18 percent of 2007 line-of-duty injuries included wounds, cuts, bleeding, and bruises, making the tetanus-diphtheria-pertussis (DPT) vaccination a priority for ESS personnel.

The Emergency Management and Response—Information Sharing and Analysis Center (EMR-ISAC) offers the following personnel protection recommendations based on the ACP/IDSA joint statement:

- Ensure that primary and subspecialty physicians conduct immunization reviews of adult patients to educate them about the benefits of vaccination and assess whether patients' vaccination status is current.
- Consult with physicians about recommended adult vaccinations: influenza, tetanus-diphtheria-pertussis, hepatitis A, hepatitis B, measles-mumps-rubella, chickenpox (varicella), meningococcal, human papillomavirus, and shingles (zoster). Specific recommendations vary depending on age and other factors.
- Verify that physicians who administer vaccines appropriately document them in medical records, and document vaccinations in other settings.

To access the CDC's extensive information about vaccinations, including recommendations and guidelines, visit <http://www.cdc.gov/vaccines/recs/default.htm>.

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## **REPORTING NOTICE**

The National Infrastructure Coordinating Center (NICC) within the Department of Homeland Security (DHS) Office of Infrastructure Protection is the central point for notifications regarding infrastructure threats, disruptions, intrusions, and suspicious activities. Emergency Services Sector personnel are requested to report any incidents or attacks involving their infrastructures using at least the first and second points of contact seen below:

- 1) NICC - Voice: 202-282-9201, Fax: 703-487-3570, E-Mail: [nicc@dhs.gov](mailto:nicc@dhs.gov)
- 2) Your local FBI office - Web: <http://www.fbi.gov/contact/fo/fo.htm>
- 3) EMR-ISAC - Voice: 301-447-1325, E-Mail: [emr-isac@dhs.gov](mailto:emr-isac@dhs.gov), fax: 301-447- 1034, Web: [www.usfa.dhs.gov/subjects/emr-isac](http://www.usfa.dhs.gov/subjects/emr-isac), Mail: J-247, 16825 South Seton Avenue, Emmitsburg, MD 21727