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

The InfoGram



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Fusion centers can help improve campus safety

College, university and school officials may find <u>collaborating</u> with their state and <u>local fusion center a good way to improve campus security and safety</u>.

State and regional fusion centers bring together representatives from state, local, tribal, territorial (SLTT) government agencies and the private sector to gather, analyze, and share threat information. Fusion centers work with each other and federal agencies to share threat information potentially affecting the entire nation.

Fusion centers work with local stakeholders including schools, utilities, businesses and industrial sites to share threat and vulnerability information. Some offer training and some offer a Fusion Liaison Officer (FLO) program to ensure key stakeholders can identify suspicious activity and know how to report it.

Though originally created after 9/11 to be focused on counterterrorism, most fusion centers now have an all-hazards approach. Each of the <u>79 fusion centers</u> across the country is unique in the way it is staffed and managed by its state and regional governments.

In addition, campus security and administrators interested in minimizing their risk can often request assistance with a threat or vulnerability assessment through a fusion center. This process will ultimately help identify the best places to focus money and resources to create a more resilient campus and community.

All critical stakeholders to include fire and EMS, emergency management, 9-1-1, private businesses, non-profits, and public health/healthcare facilities should consider contacting their local fusion center to establish a working relationship and see what you have to offer each other.

(Source: DHS)

Use the "Pan Flu Scramble" to test patient surge plans

The "Pan Flu Scramble Exercise" from the Centers for Disease Control and Prevention (CDC) is a free tabletop exercise stakeholders can use to test patient surge capacity.

Communities and healthcare providers can use the Scramble to test their pandemic and surge plans and capabilities. The Scramble addresses Capabilities 1, 6 and 10 in both the <u>Hospital Preparedness Program</u> and the <u>Public Health Emergency Preparedness</u>.

The exercise assumes an influenza pandemic scenario where the number of patients requiring medical care exceeds the community's capabilities. The entire exercise portfolio is available on the CDC's website along with an accompanying video.

This is an excellent opportunity to work with all community parties to test existing plans and identify and address potential gaps.

(Source: CDC)

Reminder: Active Shooter/Hostile Event Response NFPA Standard

A mass violence incident in your jurisdiction is going to have a multi-agency response whether or not you have trained for it. Historically there has been a very distinct

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

separation of duties between fire/EMS, law enforcement and other fields. This must change if we are to effectively meet the challenge active shooters pose. NFPA 3000 provides a good mechanism to begin this shift.

While much has been accomplished in the nearly 20 years since Columbine, renewed questions about response to the recent active shooter events has <u>increased pressure</u> <u>for jurisdictions to be prepared for violent events</u>. And it can't be a one-and-done plan – the next shooter will learn from all previous events and adjust his attack plan accordingly. First responders must do the same.

The National Fire Protection Association (NFPA) fast-tracked the development of "NFPA 3000: Standard for an Active Shooter/Hostile Event Response (ASHER) Program" this year because of the severity and number of active shooter events. NFPA 3000 is not a tactical plan. It outlines the knowledge all stakeholders should have but it leaves the detailed procedures up to each jurisdiction. It focuses on:

- Cross-discipline training, such as training law enforcement in first aid and triage and allowing EMS into the warm zone.
- Unified command and integrated response.
- Planned recovery and whole community involvement.

The technical committee for NFPA 3000 represented all first responder disciplines, hospitals, emergency management, private security and businesses, and several federal agencies. It was the largest technical committee in the history of NFPA.

See <u>NFPA'S YouTube channel</u> for interviews with committee members who've had personal experiences responding to active shooter incidents.

(Source: NFPA)

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For information specifically affecting the private sector critical infrastructure contact the National Infrastructure Coordinating Center by phone at 202-282-9201, or by email at nicc@dhs.gov.

Ethical considerations in disaster resource allocation

The most recent PrepTalk from the Federal Emergency Management Agency (FEMA) covers important but uncomfortable topic of resource allocation during major disasters. Specifically, the presenter describes the <u>difficult decisions facing facilities and people during Hurricanes Katrina and Harvey</u>, choices people were forced to make during evacuation and their repercussions.

The talk highlights important ways the systems currently in place can be enhanced and improved to better meet the medical needs of the public during disasters. These include dispatching, EMS services, 9-1-1 call taking, medicine availability, use of social media and the need for improved cross-discipline relationships.

This PrepTalk has something in it for all fields related to disaster response, and addressing the difficult issues raised will ultimately improve response as a whole. FEMA lists a variety of resources related to the topics covered. See FEMA's PrepTalk page for a <u>list of all available videos</u>.

(Source: FEMA)

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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