

CHAPTER 17

TERRORISM

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CHAPTER 17

TERRORISM INCIDENT

INTRODUCTION

A nuclear, biological, or chemical Weapon of Mass Destruction (WMD) type terrorist incident is inherently a hazardous substance incident. As such it should be responded to under the National Response System (NRS). As applicable, consult Chapter 16 (Hazardous Substances/Materials) and Chapter 19 (Multi-Casualty Branch) of this Incident Management Handbook (IMH) regarding establishment and use of the Incident Command System when a terrorist incident precipitates a hazardous materials release and/or mass casualty.

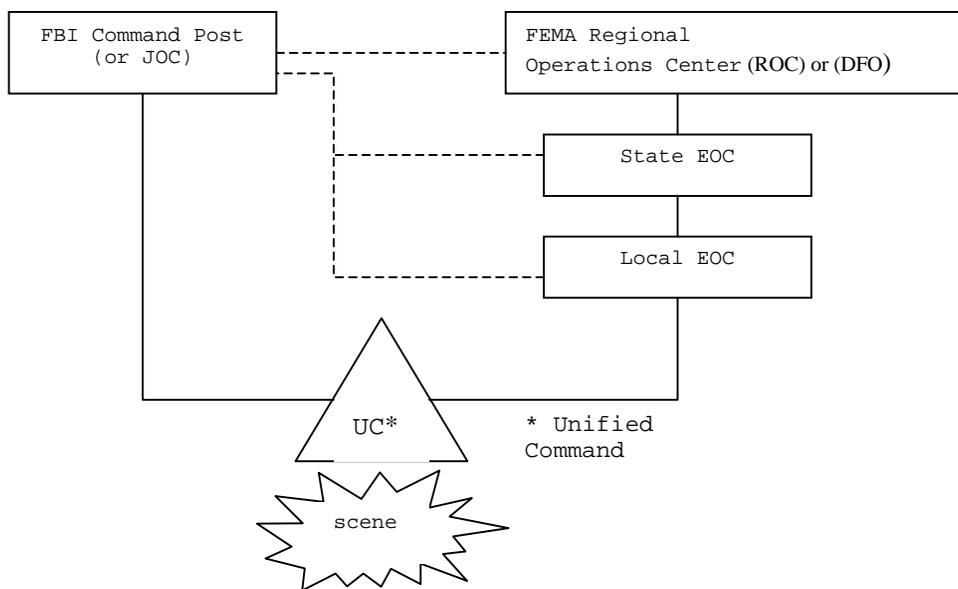
The UC responding to an incident where terrorism is involved have to be acutely aware of the unique nature of the Federal Government's response mechanism for these type of incidents. The UC may find themselves working for the Federal Bureau of Investigation (FBI) and/or the FEMA. The FBI is the Lead Federal Agency responsible for "Crisis Management" and FEMA is the Lead Federal Agency responsible for "Consequence Management".

“Crisis Management” refers to measures to identify, acquire, and plan the use of resources needed to anticipate, prevent, and/or resolve a threat of terrorism. Crisis Management is predominately a law enforcement response. “Consequence Management” refers to measures to protect public health and safety, restore essential government services, and provide emergency relief to governments, businesses, and individuals affected by the consequence of terrorism. Consequence Management is usually a multifunction response coordinated by FEMA, at the Federal level, in conjunction with and support of the State and local government’s emergency response and recovery efforts.

It is FEMA’s policy to use the Federal Response Plan (FRP) structures to coordinate all Federal assistance to State and local governments for consequence management activities. Consult the FRP’s Terrorism Incident Annex dated April 1999 for further guidance.

If an incident occurs without warning that produces major consequence and appears to be caused by an act of terrorism, then FEMA and the FBI will initiate consequence management and crisis management actions concurrently. If the President directs FEMA to implement a Federal consequence management response, then FEMA will support the FBI as required and will lead a concurrent Federal consequence management response.

For the UC the reporting relationships during a WMD terrorist incident would look like the following:



Although the FBI may utilize a management organization different from NIIMS ICS, the Coast Guard Incident Commander may well carry out their response operations using the standard ICS organization. However, Coast Guard Incident Commanders should be prepared to work in a management system other than ICS and adjust their organization accordingly.

RESPONDING TO A WEAPONS OF MASS DESTRUCTION (WMD) INCIDENT

A nuclear, biological, or chemical WMD type terrorist incident is inherently a hazardous substance incident. As such it should be responded to under the NRS. As applicable, consult Chapter 16 (Hazardous Substances/Materials), Chapter 17 (Terrorism Incident) and Chapter 19 (Multi-Casualty Branch) of the Incident Management Handbook (IMH) regarding establishment and use of the Incident Command System when a terrorist incident precipitates a hazardous materials release and/or mass casualty.

With the exception of the U.S. Coast Guard National Strike Force (NSF), upon notification of WMD event, USCG policy is to stay clear of the contaminated area and to provide command, control and support only. NSF Strike Teams are the only units within the Coast Guard who are trained and have a mission to respond to chemical incidents for either Coast Guard or Environmental Protection Agency Federal On-Scene Coordinators. For personnel responding to WMD events, certain guidelines should be followed:

- Be aware of possible secondary devices, including explosive, radiological, chemical and biological. Be cognizant of surroundings, especially of containers, or packages that appear misplaced. A tactic terrorists use involves setting off a device designed to draw in first responders, then setting off a secondary device to maximize casualties.
- Ask qualified authorities, typically the FBI, if the area has been cleared of secondary devices.
- If the contaminant is determined to be biological, exercise extreme caution and avoid contact.
- Immediately initiate personal decontamination procedures if member feels she/he have been contaminated.
- Be aware of victims. Some victims become agitated and fearful. They may attempt to leave the hot zone and/or physically contact rescue personnel. Wear protection (i.e., gloves, etc.). Victims must be contained if risk of further contamination is to be prevented.
- Attempt to talk to victims. Inform them that help is on the way and try to keep them calm. Explain the procedures for decontamination (decon); what personnel will perform the decon, where will the decon take place, when will the

decon begin, and how will the decon proceed (i.e. mothers with children, etc.).

- Have all able victims move to a safe centralized location within the hot zone, away from the actual mishap site to reduce chances of further contamination.
- Again, be aware that in a WMD incident terrorists generally have a singular purpose and that is to cause fear, death and destruction. A defensive stance should always be maintained for a WMD incident.

TERRORISM INCIDENT SPECIFIC ICS POSITIONS AND TASK DESCRIPTIONS

Only those ICS positions and tasks specific and unique to Terrorist Incident missions will be described in this section. Persons assigned the common positions consistent with the NIIMS organization should refer to Chapters Six through Eleven of this Manual for their position/task descriptions and checklists.

INCIDENT COMMANDER - Tasks specific to a Terrorist Incident are to:

- a. Review Incident Commander responsibilities (Page 7-1).
 - Assesses the need for additional resources and assist in obtaining their help. Some of these resources are listed Section 3 of this chapter.
- b. Ensure that the following have been established:
 - HAZMAT Group – which is responsible for deploying a reconnaissance team, produce sampling/identification, assisting with victim rescue, setting up decontamination for responders and developing a plan of action for containment and control of hazardous agents.
 - Medical Group – which is responsible for initiating victim rescue, patient decontamination, and emergency medical care for NBC victims.
 - Hospital Coordination – which establishes communication links with area hospitals, provides them with situation reports, and information on agent identification, and determines pharmacology needs.
 - Medical Information & Research – which begins

to research agent characteristics based upon victim signs and symptoms, victims' descriptions of agent, sample characteristics, and other information as it becomes available. Establishes communication with Poison Control Centers (ATSDR and CDC).

- Law Enforcement Group – which coordinates law enforcement agencies to establish incident security, establishes evidence collection and control, and obtains intelligence information.
- c. Work to identify and address strategic and tactical issues.
- d. Work with city and county mental health resources to assure that Critical Incident Stress Management services are provided to victims, their families, first responders, and the general public.
- e. Coordinate with the County Medical Examiner/Coroner to establish appropriate forensic and mortuary services for deceased victims.
- f. Assist the Safety Officer in establishing a site safety plan; implementing an accountability system; and establishing hot, warm, and cold zones if not already established.

INFORMATION OFFICER - Tasks specific to a terrorist incident are:

- a. Review Information Officer Responsibilities Page 7-3).

DURING THE EVENT

- a. Establish safe media conference areas distant from the Incident Command Post.
- b. Determine what information is appropriate to release to avoid panic.
- c. Promote optimum community response.
- d. Develop information releases that support

response activities:

- Medical treatment sites that the victims can report to
- Transportation avenues and other areas that are closed off
- Immediate first aid measures that can be taken
- Location of shelter facilities where evacuated personnel have been moved to

AFTER THE EVENT

- a. Release non-sensitive information.
- b. Provide basic information regarding the event:
 - Where, what, why, how
 - Units responding
 - Number of casualties
- c. Examples of types of information that should not be released.
 - Names of fatalities
 - Specific type/name of agent involved (until after incident is terminated)
 - Dispersal method(s) used
 - Specific law enforcement activities
 - Condition of victims

EVENT SITE BRANCH DIRECTOR - Tasks specific to terrorist incidents are:

- a. Review Branch Director Responsibilities (Page 8-2).
- b. Coordinate for site control around the vicinity where the event occurred.
- c. Determine hazards presented by the event(monitoring/detection).
- d. Establish a safe refuge and a casualty collection area.
- e. Establish an emergency decontamination

- capability.
- f. Coordinate with Medical Unit for medical treatment and transport capability, including requesting county transit buses.
- g. Coordinate with Safety Officer for a site safety and control plan.
- h. Determine containment and control procedures to be used.
- i. Coordinate with other agencies (investigative/evident gathering)

COMMUNITY IMPACT BRANCH DIRECTOR - Tasks specific to terrorist incidents are:

- a. Review Branch Director Responsibilities (Page 8-2).
- b. Coordinate for perimeter security and traffic control.
- c. Determine hazards presented to the community through detection/monitoring.
- d. Determine best protective actions to use:
 - Rescue
 - Shelter-in-place (SIP)
 - Evacuation
 - Red Cross
 - Establish shelters and notify American Red Cross
- e. Establish emergency decontamination capability for off site personnel and public.
- f. Establish a medical treatment and transport capability for off-site personnel and the public.
- g. Coordinate with Safety Officer for site safety and control plan.
- h. Coordinate with Information Officer to develop emergency broadcast messages to alert and update the community.
- i. Determine re-entry procedures to be used

- j. Coordination with other agencies and notify the County Health Officer

HAZARDOUS SUBSTANCE/MATERIALS GROUP -

Tasks specific to terrorist incidents are:

- a. Review the Division/Group Responsibilities (Page 8-3).
- b. Review the Hazardous Substance/Materials Group tasks in Chapter 16 of this document.
- c. Ensure the implementation of defensive mitigation practices when indicated.
- d. Ensure that information regarding the agent(s) and patient symptoms are passed to the Medical Group.
- e. Ensure patients are properly decontaminated.

MEDICAL GROUP - Tasks specific to terrorist incidents are:

- a. Review Common Responsibilities (Page 2-1).
- b. Review the Medical Group tasks in Chapter 19 of this document.
- c. Direct medical care delivery to response personnel and incident victims.

HOSPITAL COORDINATION UNIT - The Medical Group usually performs these responsibilities and duties, but this unique unit is established to assist at terrorist incident responses. Their tasks are:

- a. Review Unit Leader Responsibilities (Page 2-2).
- b. Serve as liaison for local medical facilities receiving patients.
- c. Ensure vital incident management information is communicated to each receiving hospital.
- d. Provide the medical communities with the

- needed patient care information for the agent(s) involved, in cooperation with the Technical Specialist-Medical Information & Research.
- e. Implement a system of patient tracking in concert with the on-scene EMS personnel and facilities receiving patients.
 - f. When requested, serve as clinical consultants to the medical staff at each medical facility-receiving patients by providing advice on patient care, personnel safety, or facility protection, in cooperation with the Technical Specialist-Medical Information & Research.

TECHNICAL SPECIALIST-MEDICAL INFORMATION & RESEARCH - The Medical Group performs these responsibilities in collaboration with National Response Center (NRC), an emergency communication infrastructure designed to assist Coast Guard responses to incidents.

- a. Identify needed research materials that will assure optimum access to the most current, complete, and accurate information available on nuclear, biological, or chemical (NBC) agents.
- b. Perform the research needed to identify the agent(s) involved, physical characteristics, appropriate PPE, and information about possible signs and symptoms to be observed, treatments to be initiated, antidotes to be utilized, and possible long-term effects. This activity will be completed by assimilating information from the following sources:
 - Technical Specialist-Reference & Resources in the Hazardous Substance Group

- FBI HAZMAT Response Unit
 - Regional Poison Control Center
 - CHEMTREC
 - Department of Defense (DoD) (SBCCOM, CDRT, CBIRF)
 - Center for Disease Control and Prevention (CDC)(ATSDR)
 - Department of Energy/Radiation Emergency Assistance Center/Training Site
 - DOE/REACTS Consultants
- c. Communicate vital mitigation and clinical management information to the Medical Group including:
- Needed patient care information for the agent(s) involved
 - Antidote needs of each facility and assist them in obtaining the needed items from the regional cache, government agencies, or vendors. Serve as clinical consultants to the medical staff at each facility receiving patients, by providing advice on patient care, personnel safety, or facility protection.

LAW ENFORCEMENT GROUP - Tasks specific to terrorist incidents are:

- a. Review Division/Group Supervisor Responsibilities (Page 8-3).
- b. Review Law Enforcement Group Tasks in Chapter Fourteen of this Manual.
- c. Obtain pertinent law enforcement information in order to coordinate the operational response from the following:
 - FBI field office
 - Local law enforcement agencies

- State law enforcement/traffic agencies
 - Local fire and rescue agencies, including HAZMAT teams
 - Local Emergency Operations Centers.
 - Pertinent NBC information discussed at intelligence sharing forums.
 - Current national and international events involving terrorist group activities.
 - intelligence from all sources.
- d. Advise the IC of law enforcement related issues and latest intelligence information.
 - e. Be familiar with local law enforcement resources available (Bomb Squads, etc.).
 - f. Assist in obtaining needed resources from law enforcement operations.
 - g. Assure incident security issues are identified and addressed.
 - h. Verify the incident. Determine if a terrorist act has occurred.
 - i. Respond to the scene with sufficient personnel to address the incident.
 - j. Initiate appropriate callback of additional personnel as needed.
 - k. Establish a law enforcement command post (if possible co-located with the fire department or within the Command Post).
 - l. Establish inner and outer perimeters, based on the nature of the incident.
 - m. Provide security for the Command Post.
 - n. Verify the identification of the responding personnel.
 - o. Coordinate incident site evacuation.
 - p. Coordinate evacuation of surrounding areas as needed.
 - q. Coordinate traffic flow, especially ingress and egress of emergency/rescue

- r. Provide evidence identification, collection and control, including:
 - Establish control and protection of the crime scene
 - Coordinate the collection/preservation of evidence with the FBI.
 - Mapping/photographing of all evidence locations.
 - Collection of non-contaminated evidence.
 - Coordination of collection, chain of custody, and safe storage of contaminated evidence with the Hazardous Substance/HAZMAT Group.
 - Provide secure storage for collected evidence.
- s. Affect the arrest and transportation of the perpetrators when possible.

TECHNICAL SPECIALIST- MEDICAL (Planning Section)

The Medical Group usually performs these responsibilities and duties, but this unique position is established to assist at terrorist incident responses. This position (preferably filled by a physician) is responsible for:

- a. Review Common Responsibilities (Page 2-1).
- b. Review Medical Group tasks in Chapter 19 of this manual.
- c. Serve as medical advisor to the Incident Commander and Operations Section Chief.
- d. Develop and implement the medical action plan in conjunction with the Medical and Hazardous Substance/HAZMAT Groups.
- e. Assure effective liaison with local EMS agencies and medical facilities.
- f. Perform additional tasks and duties as

assigned during an incident.

MENTAL HEALTH COORDINATION - First responders will receive Critical Incident Stress Management services through departmental resources. Victims, their families, and the general community will receive Critical Incident Stress Management services through established sources, including the Airport Chaplains, American Red Cross Disaster Mental Health Services and County Mental Health Services.

CORONER COORDINATION - The City/County Medical Examiner/Coroner staff, according to the Mass Casualty Incident Plan, will process deceased victims once the FBI has released the scene. The City/County Examiner/Coroner will assist the law enforcement branch with collecting evidence from deceased victims upon request. Federal mortuary resources are also available, if requested.

TERRORISM INCIDENT TECHNICAL TEAMS

TECHNICAL TEAMS IN SUPPORT OF WMD INCIDENTS

Resources for a WMD incident response are similar to that of a chemical incident response. The ICS/UCS system should be followed and the State and local responders who normally respond to a chemical incident will also respond to a WMD incident. However, the FBI should be notified during a WMD event, and due to the extreme nature of a WMD incident, DOD resources may also be needed.

The FBI is the lead agency during the crisis management phase of WMD incident. If upon arriving on scene and USCG personnel suspect the incident to be WMD related, the FBI and NRC should be contacted through proper channels.

During the Consequence Management phase FEMA is the lead agency, there may be a need for DOD support. Any request for DOD support should be made through the Joint Task Force-Civil Service (JTF-CS). JTF-CS is located in Suffolk, VA and coordinates all military assistance to civilian agencies. Resources that may be requested through JTF-CS include the following technical teams:

CHEMICAL BIOLOGICAL INCIDENT RESPONSE

FORCE (CBIRF) - CBIRF is an U.S. Marine Corps response unit located at Camp Lejune, NC. It provides a highly trained rapid response force capable of providing consequence management (threat identification, casualty extraction, personnel decontamination and medical

triage/treatment/stabilization) for terrorist initiated attacks in order to mitigate the effects of multiple/mass casualty incidents. It also maintains an information “reach back” capability that allows quick access to a cadre of WMD matter and response experts for consulting purposes.

U.S ARMY TECHNICAL ESCORT UNIT (TEU) - TEU provides a worldwide, quick response capability to conduct field sampling, identification and verification; monitoring, recovery, decontamination, escort and mitigation of hazards associated with WMD materials. The operational component of TEU is the Chemical-Biological Response Team (CBRT). CBRTs are available from Aberdeen Proving Ground, MD, Dugway Proving Ground, UT, and Pine Bluff Arsenal, AR.

ARMY MATERIAL COMMAND TREATY LABORATORY, SOLDIER BIOLOGICAL CHEMICAL COMMAND (SBCCOM) - Use of resources outside of the Coast Guard shall be Coordinated through the NRC. The NRC is a centralizing focal point for communications with agencies like SBCCOM. The Army Material Command Treaty Laboratory provides an on-site analytical laboratory capability. The laboratory is capable of analyzing chemical surety materials, and foreign chemical warfare agents. The laboratory also maintains an analytical spectra database that provides the capability for analyzing other hazardous industrial chemicals. The laboratory is comprised of a series of transportable modules which contain analytical instruments such as flame photometric/mass selective detectors, fume hood, and all supporting equipment such as electrical generators for short term power

APRIL, 2001

requirements. The laboratory is located at Aberdeen Proving Ground, MD.

WEAPONS OF MASS DESTRUCTION CIVIL SUPPORT TEAMS (WMD CST) - WMD CST is an Army National Guard WMD response unit. The mission of the WMD CST is to rapidly deploy to an incident to assess a suspected nuclear, biological, chemical or radiological incident in support of a local incident commander. When responding to a domestic support request, the WMD CST will remain under military control unless federalized. When federalized, JTF-CS may assume operation control of WMD CSTs.