Office of
Emergency Management

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Emergency Management

EMERGENCY OPERATIONS PLAN

TERRORIST INCIDENT RESPONSE

ANNEX V

SEPTEMBER 2014

APPROVAL & IMPLEMENTATION

Annex V

Terrorist Incident Response

Signature
Sheriff

9-5-2014
Date

Signature

09-05-14
Date

EMERGENCY MANAGEMENT COORDINATOR

9/5/14
Date

RECORD OF CHANGES

Change #	Date of Change	Description	Changed By

ANNEX V

TERRORIST INCIDENT RESPONSE

I. AUTHORITY

A. Federal

1. Public Law 104-201, Defense Against Weapons of Mass Destruction Act.
2. Terrorism Annex to *the Federal Response Plan.*
3. National Response Framework - Nuclear/Radiological Incident Annex, NUC-3
4. *Homeland Security Presidential Directive. HSPD-5, Management of Domestic Incidents*
5. *Homeland Security Presidential Directive. HSPD-7, Critical Infrastructure, Prioritization, and Protection*
6. *Homeland Security Presidential Directive. HSPD-8, National Preparedness*

B. State

C. Local

See Basic Plan, Section I.

II. PURPOSE

The purpose of this annex is to:

1. Outline operational concepts and tasks and to assign responsibilities for preparing for and responding to terrorist incidents that may occur.

2. Describe state and federal assistance that may be available to assist in the response to a terrorist incident.

III. EXPLANATION OF TERMS

A. Acronyms

AACOG	Alamo Area Council of Governments
CBRNE	Chemical, Biological, Radiological, Nuclear, Explosives
County/City	Gillespie County / City of Fredericksburg
DPS	Department of Public Safety
EOC	Emergency Operations or Operating Center
EMS	Emergency Medical Service
FBI	Federal Bureau of Investigation
ICP	Incident Command Post
ICS	Incident Command System
JIC	Joint Information Center

JOC	Joint Operations Center
NIMS	National Incident Management System
NRF	National Response Framework
TDEM	Texas Division of Emergency Management
TFC	Texas Fusion Center
UC	Unified Command
WMD	Weapons of Mass Destruction

B. Definitions

1. Anti-terrorism Activities. Use of defensive methods, including intelligence collection, investigation, passive protection of facilities, implementation of physical and personnel security programs, and emergency planning, to combat terrorism.

2. Counter-terrorism Activities. Use of offensive measure to combat terrorism, such as use of law enforcement and military resources to neutralize terrorist operations.

3. Consequence Management. The requirements of crisis management and consequence management have been combined. They combine the law enforcement function of identification and prevention of terrorist activities with the emergency management function of protection of public health and safety and emergency relief from the consequences of acts of terrorism.

4. Hazmat. Hazardous materials.

5. National Incident Management System (NIMS). The NIMS provides a consistent nationwide approach for Federal, State, territorial, tribal, and local governments to work effectively and efficiently together to prepare for, prevent, respond to, and recover from domestic incidents, regardless of cause, size, or complexity.

6. National Response Framework (NRF). An all-discipline, all-hazards guidance document that established a single, comprehensive framework for the management of domestic incidents. It provides the structure and mechanisms for the coordination of Federal support to State and local and tribal incident managers and for exercising direct Federal authorities and responsibilities.

7. Technical Operations. Actions to identify, assess, dismantle, transfer, or dispose of WMD or decontaminate persons and property exposed to the effects of WMD.

8. Terrorist Incident. A violent act, or an act dangerous to human life, in violation of the criminal laws of the United States or of any state, to intimidate or coerce a government, the civilian population, or any segment thereof, in furtherance of political and social objectives.

9. Weapons of Mass Destruction. WMD include: (1) explosive, incendiary, or poison gas bombs, grenades, rockets, or mines; (2) poison gas; (3) any weapon involving a disease organism; or (4) any weapon that is designed to release radiation or radioactivity at a level dangerous to human life.

IV. SITUATION & ASSUMPTIONS

A. Situation

1. County/City is vulnerable to terrorist incidents. A significant terrorist attack is considered unlikely. However, the consequences of a major terrorist incident could be catastrophic; hence, mitigating against, preparing for, and responding to such incidents and recovering from them is an important function of government.

2. Terrorism is both a law enforcement and emergency management problem.

   a. Virtually all terrorist acts involve violation of laws. Hence, law enforcement agencies gather and analyze intelligence on terrorists and may develop estimates of their intentions. Access to this criminal intelligence information is necessarily limited, but significant threats must be communicated by law enforcement agencies to those local officials who can implement protective measures and alert emergency responders. Coordination between law enforcement and emergency management personnel is vital to ensure that appropriate readiness actions are taken, while still protecting law enforcement sources and methods.

   b. In a terrorist incident, the incident area may be simultaneously a crime scene, a hazmat site, and a disaster area that may cross the boundaries of several jurisdictions. There are often competing needs in the aftermath of a terrorist act -- law enforcement agencies want to protect the crime scene in order to gather evidence, while emergency responders may need to bring in extensive equipment and personnel to conduct search and rescue operations. It is essential that the incident command team establishes operating areas and formulates a plan of action that considers the needs of both groups.

3. Since terrorist acts may be violations of local, state, and federal law, the response to a significant local terrorism threat or actual incident may include state and federal response agencies.

4. Local resources for combating terrorist attacks are somewhat limited. In the event of a significant terrorist threat or incident, it is anticipated that AACOG, state and federal resources will be requested in order to supplement local capabilities.

5. The presence of chemical, biological, radiological, nuclear, or explosive (CBRNE) agents may not be detected immediately. In the case of chemical, biological, or nuclear materials they may not be discovered until some time after casualties occur. There may be a delay in identifying the agent present and in determining the appropriate protective measures. Such agents may quickly dissipate or be persistent.

6. In the case of an attack with a biological agent, the initial dissemination of the agent may occur outside the local area or even in other countries, but still produce victims in the local area.

B. Assumptions

1. Terrorist attacks may be directed at government facilities, public and private institutions, business or industry, transportation, and individuals or groups. Such acts may involve: arson; shootings; bombings, including use of weapons of mass destruction (nuclear, chemical, or biological agents); kidnapping or hostage-taking; sabotage; and other activities.

2. Terrorist attacks may or may not be preceded by a warning or a threat, and may at first appear to be an ordinary hazardous materials incident. Attacks may occur at multiple locations and may be accompanied by fire, explosion, or other acts of sabotage.

3. A device may be set off to attract emergency responders, then a second device set off for the purpose of injuring emergency responders.

4. Effective response to the use of WMD may require:

   a. Specialized equipment to detect and identify chemical or biological agents.
   b. A mass decontamination capability.
   c. The means to treat mass casualties, including conducting triage and using specialized pharmaceuticals that have a narrow window of effect.
   d. The capability to deal with mass fatalities.

5. Injuries from a terrorist attack may be both physical and psychological.

6. Recovery from a terrorist attack can be complicated by the presence of persistent agents, additional threats, extensive physical damages, and mass casualties.

7. In most cases, significant state and federal terrorist incident response support cannot be provided within the first few hours of an incident. Considerable state and federal terrorism response resources are available, but it may take 6 to 12 hours to activate and deploy such resources on a large-scale.

V. CONCEPT OF OPERATIONS

A. General

1. Our terrorism structure for emergency response operations is pursuant to NIMS, which employs two levels of incident management structures.

   a. The Incident Command System (ICS) includes a core set of concepts, principles, and terminology applicable to single or multiple incidents regardless of their scope.

   b. Multi-agency Coordination Systems integrate a combination of facilities, equipment, personnel, procedures, and communications into a common framework, which allows for the coordination and support of incident management.

2. During a terrorist event a Multi-agency Coordination System may be advisable. Central to this system is the Emergency Operations Center (EOC), which is the nucleus of all coordination of information and resources. The Incident Commander will manage and direct the on-scene response from the ICP. The EOC will mobilize and deploy resources for use by Incident Commander, coordinate external resources and technical support, research problems, provide information to senior managers, disseminate emergency public information, and perform other tasks to support on-scene operations.

B. Preparedness

1. The lead local agency for deterring, preventing, and responding to a threat of terrorist attack is the Fredericksburg Police Department or the Gillespie County Sheriff's Office.

   a. Pre-incident preparedness and response activities include efforts to define the threat, identify terrorists, and prevent terrorist acts. Post incident consequence management activities include efforts to resolve the terrorist incident, conduct an investigation, collect evidence, and apprehend those responsible. Law enforcement agencies have the lead in terrorism criminal investigations and intelligence collection activities.

      1) The Fredericksburg Police Department or the Gillespie County Sheriff's Office have the lead local role in terrorism incident response and will coordinate their efforts with state and federal law enforcement agencies as appropriate.

      2) The Department of Public Safety (DPS) is the lead state agency for terrorism incident response. DPS will coordinate the state law enforcement response to a potential terrorist incident and the use of state resources.

      3) The Federal Bureau of Investigation (FBI) is the lead federal agency for criminal investigations of terrorist acts or terrorist threats and intelligence collection activities within the United States.

   b. When a credible threat of terrorist attack exists, we will activate our EOC or, if security necessitates, activate a specialized facility to coordinate law enforcement, investigative, and intelligence activities for the threats or incidents that may occur.

   c. Investigative and intelligence activities are managed by the FBI from an FBI command post or Joint Operations Center (JOC). The JOC coordinates assets between Federal agencies, DPS, and local law enforcement agencies.

2. Response and Recovery

   a. Response and recovery activities undertaken to deal with effects of a terrorist incident are conducted in essentially the same manner as the response and recovery operations for other emergencies or disasters. Post-incident crisis management activities, such as investigation, evidence gathering, and pursuit of suspects, may continue during consequence management. The agency with primary jurisdictional authority over the incident designates the individual at the scene responsible for establishing command.

1) The Fredericksburg Volunteer Fire Department shall normally have the lead local role in terrorism response and recovery operations for most types of terrorist incidents, but the County/City Fire Marshal may be assigned the lead local role in terrorism response and recovery operations for incidents involving biological agents.

2) The Texas Division of Emergency Management (TDEM) is the lead state agency for terrorism response and recovery operations. Disaster Districts, the State Operations Center (SOC), and the Emergency Management Council will coordinate state resource support for local terrorism response and recovery operations.

3) FEMA is the lead federal agency for response and recovery operations and shall coordinate federal resource support for such operations.

b. The agencies responsible for terrorism response and recovery operations shall coordinate their efforts with law enforcement authorities conducting crisis management operations

C. Implementation of the Incident Command System (ICS)

1. If there is a local incident site, an incident command post (ICP) will be established to manage emergency operations at that incident site. The ranking official from the agency with primary responsibility for the incident will assume the position of Incident Commander. The Incident Commander will direct and control responding resources and designate emergency operating areas. Typical operating area boundaries established for a terrorist incident may include:

a. The **Crime Scene Boundary** defines the crime scene. The crime scene may include the area referred to in technical operations as the "red zone" or "working point". Access to the crime scene may be restricted by state, federal, or local law enforcement personnel. Response activities within the crime scene may require special care in order to protect evidence.

b. The **Hazmat Boundary** defines the hazmat site, which is referred to in hazmat operations as the "hot zone" and may be termed the "isolation area" or "exclusion zone" by other responders, and may include the hazmat upwind "warm zone" utilized for contamination control and rescue staging. Depending on the spread of contaminants, the hazmat site may include some or the entire crime scene. Entry into the hazmat boundary is normally restricted to response personnel equipped with personal protective equipment and using decontamination procedures.

c. The **Incident Boundary** includes the crime scene, the hazmat area, the "cool zone" or "support zone" used for incident support operations such a resource staging and casualty collection, and areas where protective actions, such as shelter-in-place or evacuation, may be recommended or mandatory measures, such as quarantine, imposed. Access to this area is normally controlled; if a quarantine is implemented, egress may also be restricted.

2. ICS-EOC Interface. The Incident Commander and the EOC shall agree upon on a division of responsibilities. The Incident Commander will normally manage field operations at the incident site and in adjacent areas. The EOC will normally mobilize and provide local resources, disseminate emergency public information, organize and implement large-scale evacuation, coordinate care for casualties, coordinate shelter and mass care for evacuees, arrange mortuary support, and, if local resources are insufficient or inappropriate, request assistance from other jurisdictions or the State.

3. Implementation of Unified Command (UC). As state and federal responders arrive to conduct and support field operations, use of ICS for management of the ICP and response operations will transition to UC.

4. With the arrival of state and federal responders, the FBI may call for the establishment of a Joint Operations Center (JOC) for overall coordination and management of response operations.

5. If there is no local incident site, which may be the case in incidents involving biological agents, consequence management activities will be directed and controlled from the local EOC. An Incident Commander may be designated. The EOC may transition to a JOC using UC with the arrival of state and federal responders.

D. Coordination of Incident Consequence Management Activities

1. Law enforcement agencies involved in consequence management shall keep those agencies and/or departments responsible for response and recovery efforts informed of decisions made that may have implications on the placement of resources for response and recovery should it be necessary. Because of the sensitivity of law enforcement sources and methods and certain crisis management activities, it may be necessary to restrict dissemination of some information to selected emergency management and public health officials who have a need to know. Those individuals may have to carry out some preparedness activities surreptitiously.

2. Until such time as law enforcement and emergency management personnel agree that crisis management activities have been concluded, law enforcement personnel shall participate in incident command or EOC operations to advise those carrying out consequence management operations with respect to protection of the crime scene, evidence collection, and investigative results that may have bearing on emergency operations. DPS and the FBI will normally provide personnel to participate in a unified command operation to coordinate state and federal law enforcement assistance.

3. A Joint Information Center, staffed by local, state, and federal public affairs personnel, may be established as part of the unified command organization to collect, process, and disseminate information to the public.

E. Protective Actions

1. Responders. Emergency personnel responding to a terrorist incident must be protected from the various hazards that a terrorist incident can produce. These include: blast effects, penetrating and fragmenting weapons, fire, asphyxiation, hazardous chemicals, toxic substances, radioactive materials, and disease-causing material. See the discussion of threat weapons and their effects in Appendix 2. Though the type of

protection required varies depending on the hazard, there are three basic principles of protection that apply to all hazards: time, distance, and shielding.

a. Time. Emergency workers should spend the shortest time possible in the hazard area or exposed to the hazard. Use techniques such as rapid entries to execute reconnaissance or rescue and rotate personnel in the hazard area.

b. Distance. Maximize the distance between hazards and emergency responders and the public. For chemical, radiological, and explosive hazards, recommended isolation and protective action distances are included in the *Emergency Response Guidebook* (ERG).

c. Shielding. Use appropriate shielding to address specific hazards. Shielding can include vehicles, buildings, protective clothing, and personnel protective equipment.

2. The Public. Protective actions for the public must be selected and implemented based on the hazards present and appropriate instructions and information provided to the public through usual means of warning and public information. Protective actions for the public may include:

a. Evacuation.

b. Shelter-in-place.

c. Access control to deny entry into contaminated areas.

d. Restrictions on the use of contaminated foodstuffs, normally imposed by the Texas Department of State Health Services (DSHS).

e. Restrictions on the use of contaminated agricultural products before processing will normally be imposed by the Texas Department of Agriculture. These are products destined for food use after processing.

f. Restrictions on the use of contaminated public water supplies, normally imposed by the Texas Commission on Environmental Quality (TCEQ).

g. For incidents involving biological agents, protective actions taken to prevent the spread of disease may include:

1) Isolation of diseased victims within medical facilities.
2) Quarantines to restrict movement of people and livestock in specific geographic areas.
3) Closure of schools and businesses.
4) Restrictions on mass gatherings, such as sporting events.

Such measures are normally recommended and imposed by public health authorities.

F. Requesting External Assistance

1. Requests for state assistance will be made by the County Judge/Mayor to the Disaster District Committee (DDC) Chairperson in San Antonio. If a request for assistance cannot be satisfied with resources available in the District, it will be forwarded to the State Operations Center (SOC) for action. If state resources cannot satisfy the request, the State will request assistance from the federal government or other states.

2. Depending on the severity of the incident, the County Judge/Mayor may issue a local disaster declaration and request assistance from the Governor. The Governor may declare a State of Disaster for the local area and request the President issue an emergency or disaster declaration for the local area. The National Response Framework (NRF) describes the functions of the responding federal agencies for various response and recovery functions. The Nuclear/Radiological Incident Annex of the NRF addresses the federal response for incidents involving radiological materials.

G. Coordination of Local Medical Response to Biological Weapons Incidents

As the medical response to an incident involving biological agents must include the local medical community as a group, the local and state health departments and federal health agencies directing the response should undertake to coordinate the efforts of local medical providers to ensure that a consistent approach to health issues is taken. Hence, concise information on the threat, recommendations on what should be done to combat it, and instructions on handling victims must be provided to all hospitals, clinics, nursing homes, home health care agencies, individual physicians, pharmacies, school nursing staffs, and other medical providers. The local health department or state public health region field office, that are normally most familiar with community health providers, will typically take the lead in coordinating the local medical response. They may request assistance from local professional organizations in providing information to all members of the local medical community.

H. Activities by Phases of Emergency Management

1. Mitigation

   Carry out anti-terrorist activities, including:

   a. Identify potential terrorist targets and determine their vulnerability. For targets which may produce hazardous effects if attacked, determine the population and special facilities at risk.

   b. Conduct investigations and criminal intelligence operations to develop information on the composition, capabilities, and intentions of potential terrorist groups.

   c. Develop and implement security programs for public facilities that are potential targets. Recommend such programs to private property owners.

   d. Implement passive facility protection programs to reduce the vulnerability of new and existing government-owned facilities believed to be potential targets. Recommend such programs to private property owners.

e. Encourage all local medical facilities to participate in mass casualty exercises and stock specialized pharmaceuticals, such as chemical agent antidotes.

f. Encourage the reporting of suspicious activity to local law enforcement or the Texas Fusion Center (TFC). The TFC is under the command of the Criminal Intelligence Service (CIS), Criminal Law Enforcement Division of DPS. DPS is the primary State agency responsible for collecting, analyzing, and disseminating criminal intelligence information related to possible terrorist activity. The TFC operates 24-hours a day to receive and respond to reports from the public, local, state, and federal law enforcement agencies. The TFC is staffed by CIS commissioned officers and analysts from the CIS and federal agencies. When warranted, the TFC disseminates actionable intelligence and investigative leads to local law enforcement.

2. Preparedness

a. Conduct or arrange terrorism awareness training and periodic refresher training for law enforcement, fire service, and EMS personnel and for emergency management staff. Conduct training for other agencies such as public works, utilities, and hospitals.

b. Develop emergency communications procedures that take into account the communications monitoring capabilities of some terrorist groups.

c. Maintain terrorist profile information on groups suspected of being active in the local area.

d. Establish appropriate mutual aid agreements.

e. Conduct drills and exercise to test plans, procedures, and training.

f. Conduct awareness programs for businesses that handle inventories of potential weapon making materials and chemicals and ask for their cooperation in reporting suspicious activities.

g. If potential terrorist groups appear to be expanding their activities, consider appropriate increased readiness actions.

3. Response

See the Terrorist Incident Response Checklist in Appendix 1.

4. Recovery

a. Decontaminate incident sites and other affected areas. State and/or federal agencies may oversee this effort, which may be conducted by contractors.

b. Identify and restrict access to all structurally unsafe buildings.

c. Remediate and cleanup any hazardous materials that have or might enter local water, sewer, or storm drainage systems.

d. Provide traffic control for the return of evacuees.

e. Assist in arranging temporary housing for evacuees who cannot return to their homes.

f. Develop and implement appropriate access controls for contaminated areas that cannot be decontaminated and returned to normal use in the near term.

g. Investigate cause of incident and prosecute those believed to be responsible.

h. Maintain records of use of personnel, equipment, and supplies used in response and recovery for possible recovery from the responsible party or reimbursement by the State or federal government.

i. Conduct critical incident stress management activities.

j. Debrief response personnel, prepare incident report, and update plans and procedures on the basis of lessons learned.

k. Restore normal services.

VI. ORGANIZATION & ASSIGNMENT OF RESPONSIBILITIES

A. Organization

1. County/City normal emergency organization, which is described in section VI.A of the basic plan, will carry out the response to and recovery from terrorist incidents.

2. As terrorist acts often violate state and federal law and regulations, state and federal law enforcement agencies and other agencies having regulatory responsibilities may respond to such incidents. In order to effectively coordinate our efforts with state and federal agencies, we may transition from our normal incident command operation to a unified command organization when the situation warrants.

B. Assignment of Responsibilities

1. The County Judge/Mayor will:

   a. Provide policy guidance with response to anti-terrorism and counter-terrorism programs.

   b. Provide general direction for response and recovery operations in the aftermath of a terrorism incident.

2. Emergency Management Coordinator will:

   a. Coordinate regularly with the Fredericksburg Police Department and the Gillespie County Sheriff's office along with other law enforcement agencies with respect to the

terrorist threat and determine appropriate readiness actions during periods of increased threat.

b. In conjunction with other local officials, make an assessment of the local terrorist threat, identify high-risk targets, determine the vulnerabilities of such targets and the potential impact upon the population, and recommend appropriate mitigation and preparedness activities.

c. In coordination with other local officials, recommend appropriate training for emergency responders, emergency management personnel, and other local officials.

d. Coordinate periodic drills and exercises to test plans, procedures, and training.

e. Develop and conduct terrorism awareness programs for the public and for businesses dealing in weapons or materials that may be used by terrorists to produce weapons.

f. Will Coordinate with Communications Board to establish common communication procedures.

g. Promote a business inventory monitoring system.

3. The Incident Commander will:

a. Establish an incident command post (ICP) and control and direct emergency response resources at the incident scene from that ICP to resolve the incident.

b. Determine and implement initial protective actions for emergency responders and the public in the vicinity of the incident site.

c. Provide an initial incident assessment, request additional resource if needed, and provide periodic updates to the EOC.

d. Request a liaison officer from each participating agency be present at the ICP.

e. Establish a specific division of responsibilities between the incident command operation and the EOC.

f. Transition the incident command operation to a unified command operation when significant external resources arrive.

4. The Fredericksburg Police Department and the Gillespie County Sheriff's Office will:

a. Conduct anti-terrorist operations and maintain terrorist profile information. Advise the emergency management staff, DPS, and the FBI of significant terrorist threats.

b. Recommend passive protection and security programs for high-risk government facilities and make recommendations for such programs to the owners/operators of private facilities.

c. Conduct terrorism response training programs for the law enforcement personnel and support public education and awareness activities.

d. Provide law enforcement representatives for the Incident Command Post and the EOC.

e. Secure the scene, reroute traffic, and implement crowd control measures if necessary.

f. Make notifications of terrorist incidents to DPS, the FBI, and other law enforcement agencies.

g. Brief emergency response personnel on crime scene protection.

h. Coordinate the deployment and operation of counter-terrorist response elements.

i. Conduct reconnaissance in vicinity of the incident site to identify threats from delayed action and secondary weapons.

j. Organize and conduct evacuation of the public and of special facilities if required.

k. In coordination with state and federal authorities, investigate incident; identify and apprehend suspects.

5. Fredericksburg Volunteer Fire Department will:

a. Coordinate all fire and rescue operations during terrorist incidents.

b. Dispatch and deploy fire personnel and equipment during an emergency.

c. Control fires if necessary.

d. Conduct search and rescue operations as needed.

e. Provide support for evacuation operations if requested.

f. Set up decontamination area for emergency responders and victims, if needed.

g. Carry out initial decontamination of victims, if required. Procedures must be available for emergency decontamination of large numbers of people.

h. Identify apparently unsafe structures; restrict access to such structure pending further evaluation by the Public Works/Engineering staff.

i. Identify requirements for debris clearance to expedite fire response and search and rescue.

j. Activate fire and rescue mutual aid as needed.

6. Fredericksburg / Gillespie County EMS will:

   a. Respond to medical emergency calls.

   b. If mass casualties have occurred, establish triage.

   c. Provide emergency medical care to the injured.

   d. Transport patients in a timely manner to appropriate medical facilities.

   e. Request medical mutual aid if necessary.

   f. Assign a liaison at the ICP and/or EOC, if needed.

7. Director of Public Works, County Commissioners/Roads & Bridges will:

   a. Assign liaison personnel to the EOC and Incident Command Post.

   b. Clear and/or remove debris as directed.

   c. Support search and rescue operations.

   d. Provide emergency power and lighting at the incident site upon request.

   e. Provide emergency power supplies at other facilities upon request.

   f. Provide barricades and temporary fencing as requested.

   g. Carry out emergency repairs to streets and bridges as necessary to support emergency operations and restore essential traffic.

   h. Conduct preliminary assessment of damage to structures and streets, and utilities.

   i. Provide other public works and engineering support for emergency operations as necessary.

   j. Request mutual aid assistance, if necessary.

8. Director of Public Works will:

   a. Carry out emergency repairs to water and wastewater systems as necessary to support emergency operations and restore essential public services.

   b. In coordination with local and state public heath agencies, ensure the safety of water and wastewater systems. Initiate water conservation procedures, if required.

   c. Conduct preliminary assessment of damage to water, wastewater and drainage systems, and utilities.

   d. Identify to the EOC requirements for emergency drinking water supplies from outside sources if needed.

9. All Other Departments and Agencies

   a. Provide personnel, equipment, and supply support for emergency operations upon request.

   b. Provide trained personnel to staff the EOC.

   c. Provide technical assistance to the Incident Commander and the EOC upon request.

   d. Participate in terrorism awareness training, drills, and exercises.

VII. DIRECTION & CONTROL

A. The County Judge/Mayor shall, pursuant to NIMS, provide general guidance for emergency operations, including the response to terrorist incidents. During periods of heightened terrorist threat or after an incident has occurred, the local EOC will be activated.

B. The Police Chief/EMC/County Sheriff will provide overall direction of the terrorist incident response activities of our departments and agencies. During terrorist incidents, they will normally carry out those responsibilities from the EOC.

C. The Incident Commander, assisted by a staff sufficient for the tasks to be performed, will manage the emergency response at the incident site from an ICP. If terrorist attacks affect multiple widely separated facilities, separate incident command operations may be set up.

D. If County/City resources are insufficient or inappropriate to deal with an emergency situation, we may request assistance from other jurisdictions pursuant to mutual aid agreements or from organized volunteer groups. Mutual aid personnel and volunteers will normally work under the immediate control of their own supervisors. All response agencies are expected to conform to the general guidance provided by our senior decision-makers and carry out mission assignments directed by the Incident Commander or the EOC.

E. In a large-scale terrorist incident, significant help will be needed from other local governments, state agencies, and the federal government. As these external resources arrive, it is anticipated that a transition will be made from the normal incident command system to a unified command operation. In a unified command arrangement, leaders of all participating response forces agree on general objectives, priorities, and strategies for resolving the emergency situation.

VIII. READINESS LEVELS

A. Readiness Level IV – Normal Conditions

See the mitigation and preparedness activities in paragraphs V.H.1) and V.H.2) above.

B. Readiness Level III - Increased Readiness

1. When local law enforcement personnel determine or are advised by DPS or the FBI that there is a credible threat of near-term local terrorist action, law enforcement personnel shall alert the County Judge/Mayor, EMC, and other appropriate local officials. Those individuals shall review the potential emergency situation, plans, and procedures, and determine and implement appropriate readiness actions. These may include:

   a. expanding criminal intelligence operations
   b. reviewing personnel and equipment status and taking actions to enhance resource availability
   c. reviewing inventory of critical consumable supplies, filling shortages, and increasing stocks if needed
   d. increasing security at and surveillance of public facilities that are potential targets
   e. recommending to the owners or operators of privately-owned facilities that they take similar steps
   f. briefing local public health and hospital managers on the potential threat
   g. placing selected emergency response elements on higher state of readiness

2. Consistent with the need for security to protect intelligence sources and depending on the situation, disseminate non-sensitive threat awareness information to the public.

C. Readiness Level II – High Readiness

1. Further increase security at and surveillance of potential targets.

2. Further increase readiness of emergency response forces and advise public health and medical facilities to do likewise.

3. Consider partial activation of the EOC to monitor situation and maintain data on resource status.

4. Depending on the specific situation and the need for security to protect intelligence sources, disseminate non-sensitive information and, if needed, instructions to the public.

D. Readiness Level I – Maximum Readiness

1. Implement most rigorous security measures.

2. Bring response forces to maximum readiness.

3. Activate the EOC to monitor the situation and maintain data on resource status.

4. Disseminate non-sensitive information and, if needed, instructions to the public.

5. Determine and implement precautionary protective measures for the public in selected areas or for specific facilities where appropriate.

IX. ADMINISTRATION & SUPPORT

A. Reports & Records

1. Situation Report. During emergency operations for terrorist incidents, a daily situation report should be prepared and distributed to the local Disaster District, the Texas Division of Emergency Management, and the local FBI office. See Annex N, Direction and Control, for the format of and instructions for this report.

2. Records Relating to Emergency Operations

   a. Activity Logs. The Incident Command Post and the EOC shall maintain accurate logs recording key response activities and the commitment of resources.

   b. Cost Records for Terrorist Incident Response. For terrorist incidents, all departments and agencies participating in the emergency response shall maintain detailed records of labor costs, equipment usage, and supplies expended. These records may be used to recover allowable response and recovery costs from the federal government in the event a federal emergency or disaster declaration is issued by the President.

B. Preservation of Records

As terrorists often target government facilities, government records are at risk during terrorist incidents. To the extent possible, legal, property, and tax records should be protected. The principal causes of damage to records are fire and water. If government records are damaged during the incident response, the EOC should be promptly advised so that timely professional assistance can be sought to preserve and restore them.

C. Post-Incident Review

The County Judge/Mayor or the EMC are responsible for organizing and conducting a critique following the conclusion of a significant terrorist incident in accordance with the guidance contained in section IX.E of the Basic Plan.

X. ANNEX DEVELOPMENT & MAINTENANCE

A. Development. The Sheriff/Police Chief is responsible for developing and maintaining this annex.

B. Maintenance. This annex will be reviewed annually and updated in accordance with the schedule outlined in section X of the Basic Plan.

XI. REFERENCES

FEMA, Guide for All-Hazard Emergency Operations Planning (CPG-101).

US Department of Transportation/Transport Canada, *Emergency Response Guidebook.*

Jane's Information Group, *Jane's Chem-Bio Handbook.*

APPENDICES:

1 ..... Terrorist Incident Response Checklist
2 ..... Terrorist Weapons, Effects, & Emergency Response Needs
3 ..... Specialized Response Resources

TERRORIST INCIDENT RESPONSE CHECKLIST

The response actions below are most appropriate for an incident involving conventional weapons, nuclear devices, or chemical agents where there is a specific incident location.

✓	Action Item	Assigned
	INITIAL RESPONSE:	
	1. Deploy response forces.	
	2. Activate incident command post at the incident site to direct emergency operations.	
	3. If incident appears to be terrorism-related, ensure law enforcement personnel are advised and respond to the incident site.	
	4. Isolate the area and deny entry. Reroute traffic as needed.	
	5. Determine and report: ▪ Observed indicators of use of chemical/biological weapons ▪ Wind direction and weather conditions at scene ▪ Plume direction, if any ▪ Approximate number of apparent victims ▪ Orientation of victims ▪ Types of victim injuries and symptoms observed ▪ Observations or statements of witnesses	
	6. If possible, determine type of weapon used using appropriate detection equipment, response guides, damage characteristics, and casualty symptoms.	
	7. Establish scene control zones (hot, warm, and cold) and determine safe access routes & location of staging area. Establish initial operating boundaries for crime scene and incident area.	
	8. Implement crowd control measures, if necessary.	
	9. Determine & implement requirements for protective clothing and equipment for emergency responders.	
	10. Establish communications among all response groups.	
	11. Protect against secondary attack.	
	12. Activate the EOC to site support emergency operations.	
	13. Determine requirements for specialized response support.	
	14. Make notification to state and federal law enforcement and emergency management agencies.	
	15. Obtain external technical assistance to determine potential follow-on effects.	
	16. Request/deploy hazardous materials response team, if appropriate.	
	17. Request/deploy bomb squad or ATF support, if appropriate.	
	18. Identify areas that may be at risk from delayed weapon effects. ▪ Determine & implement protective measures for public in those areas ▪ Determine & implement protective measures for special facilities at risk	
	19. Extinguish fires and identify potential hazards such as ruptured gas lines, downed power lines and residual hazardous materials.	
	20. Make notifications to adjacent jurisdictions that may be affected.	
	21. If the effects of the incident could adversely affect water or wastewater systems, advise system operators to implement protective measures.	

✓	Action Item	Assigned
	MEDICAL MANAGEMENT:	
	22. Advise EMS and hospitals of possibility of mass casualties/contaminated victims.	
	23. Establish site for patient triage.	
	24. Establish site for gross decontamination (if appropriate) and a casualty collection area for decontaminated victims located away from the site of primary emergency operation, but accessible by transport vehicles.	
	25. Conduct initial triage and provide basic medical aid to victims in warm zone if protective equipment is not required.	
	Conduct gross decontamination of victims showing signs of contamination. Separate victims that show no signs of contamination for evaluation.	
	26. Conduct follow-on triage & treatment of victims in cold zone.	
	27. Transport victims to medical facilities for further treatment.	
	28. Request state and/or federal medical assistance, if needed.	
	FATALITY MANAGEMENT:	
	30. Alert [Medical Examiner, Justices of the Peace] and funeral directors of any potential mass fatality situation and arrange for temporary holding facilities for bodies, if necessary. Highlight need to preserve evidence.	
	31. Coordinate with [Justices of Peace/Medical Examiner] to determine autopsy requirements for victims.	
	32. Transport deceased to morgue, mortuary, or temporary holding facilities.	
	OTHER RESPONSE ACTIONS:	
	33. Request additional response resources, if needed. • Activate mutual aid agreements • Request state or federal assistance, as needed	
	34. Designate staging areas for incoming resources from other jurisdictions, state and federal agencies, and volunteer groups separate from operational staging area.	
	35. If evacuation has been recommended: ▪ Activate shelter/mass care facilities to house evacuees ▪ Provide transportation for evacuees without vehicles ▪ Provide security for shelters	
	36. If evacuation of special facilities (schools, nursing homes, hospitals, correctional facilities) has been recommended: ▪ Assist facilities in arranging suitable transportation and carrying out evacuation ▪ Assist facilities in arranging suitable temporary reception facilities	
	37. Provide information and instructions to the public. ▪ Activate emergency public information operation. ▪ Identify facilities for use by media	
	38. Identify, collect, and control evidence and conduct investigations.	
	39. Pursue and arrest suspects.	
	40. Provide security in evacuated areas, if feasible.	
	41. Establish and operate access control points for contaminated areas	
	42. For incidents involving biological agents, consider measures to restrict person-to-person transmission of disease such as quarantine, closure of schools and/or businesses, and restrictions on mass gatherings.	

✓	Action Item	Assigned
	43. Alert human resources agencies to provide disaster mental health services and human services support to victims.	
	44. Determine how pets, livestock, and other animals left in evacuated or contaminated areas will be handled.	
	45. Decontaminate essential facilities and equipment, if feasible.	
	46. Request technical assistance in assessing environmental effects.	

USEFUL POINTS OF CONTACT

Organization	Provides	Contact No.
CHEMTREC	Technical assistance for hazardous materials incidents.	800-424-9300 (24 hours)
CHEM-TEL	Technical assistance for hazardous materials incidents.	800-255-3924 (24 hours)
National Response Center Chem-Bio Hotline	Reporting center for suspected terrorist activity as well as technical assistance regarding chemical & biological agents for state and local emergency responders.	800-424-8802 (24 hours)
Department of State Health Services, Radiation Program	Technical assistance for emergency responders for incidents involving radiological materials.	512-458-7460 (24 hours)
Texas Fusion Center	The central facility for collecting, analyzing, and disseminating intelligence information related to terrorist activities for the state.	512-424-7981 866-786-5972 512-424-7418 fax
Fredericksburg DPS Office	State law enforcement assistance.	830-997-7585
San Antonio FBI Office	Federal law enforcement assistance.	210-225-6741
San Antonio ATF Office	Federal expertise in explosive devices.	210-805-2727
Lackland Air Force Base Bomb Squad	Explosive ordnance disposal assistance.	210-671-2018

TERRORIST WEAPONS, EFFECTS, & EMERGENCY RESPONSE NEEDS

1. Conventional Weapons, Explosives & Incendiary Devices

A. Weapon Types

1) Conventional Weapons & Explosives. Conventional weapons include guns, rocket-propelled grenades, and similar weapons. Explosives include military and commercial explosives, such as RDX, Tritonol, dynamite, and ammonium nitrate – fuel oil (ANFO). The casualty potential of conventional explosive devices may be increased by packing metallic materials such as bolts or nails around the explosive to generate lethal fragments that can inflict casualties at considerable distances.

2) Incendiary Devices. Incendiary devices are designed to ignite fires. They may use liquids, such as gasoline or kerosene, or gases, such as propane, as their fuel. Incendiary devices have been a favorite weapon of terrorists due to the ready availability of materials needed to build such devices.

3) Combination Device. Conventional explosive and incendiary materials may be used in combination to produce blast damage and fires.

B. Weapons Effects

1) Conventional Explosives

a) Significant blast damage to structures, including building and wall collapse, and blast casualties
b) Fragmentation casualties from bomb fragments, debris, and broken glass
c) Fires are possible

2) Incendiary Devices

a) Fires
b) Secondary explosions are possible
c) Burn casualties

3) Combination Devices

a) Significant blast damage to structures, including building and wall collapse, and blast casualties
b) Fires
c) Fragmentation casualties from bomb fragments, debris, and broken glass

C. Indications of Use

1) Conventional Explosives

a) Prior warning or threat
b) Presence of triggering devices, such as blasting caps or timers
c) Explosive residue at scene or results from detection instruments
d) Indications of deliberately introduced fragmentation materials

2) Incendiary Devices

a) Prior warning or threat
b) Multiple fire locations
c) Signs of accelerants or results from detection instruments
d) Presence of propane/butane cylinders in other than typical locations
e) Presence of containers for flammable liquids

D. Emergency Response Guidance

If hazardous materials are encountered in the response to an attack with conventional explosives or incendiary devices, consult the US Department of Transportation *Emergency Response Guidebook* (ERG).

E. Response Needs

1) Personal protective equipment for emergency responders
2) Medical evacuation and treatment for mass casualties
3) Search and rescue teams for collapsed structures
4) Firefighting
5) Hazmat response team
6) Mortuary support for mass fatalities
7) Evacuation assistance
8) Access control for incident site
9) Shelter and mass care for evacuees
10) Investigative resources

2. Nuclear Devices & Materials

A. Weapons Types

1) Radiation Dispersal Device. Radioactive materials in powder form are packed around conventional explosives. When the explosive device detonates, it disperses the radioactive material over a wide area. Such devices do not require weapons grade radioactive materials; they may be constructed from materials obtained from medical or industrial equipment in common use.

2) Improvised Nuclear Device (nuclear bomb). Use of this type of device is considered unlikely. It would be extremely difficult for terrorists to build or acquire such a device because a substantial quantity of weapons-grade fissionable materials, extensive equipment, and technical expertise would be needed. It would be extremely difficult to obtain the weapons grade fissionable material required to construct such a device.

3) Nuclear Weapon. It is considered very unlikely that terrorists would use military nuclear weapons because such weapons are normally secured, strictly controlled, and frequently incorporate safety features to prohibit unauthorized use.

B. Weapons Effects

All of the weapons listed could spread radioactive materials if detonated, which could pose immediate danger to life at high levels and long-term adverse health effects at lower levels. In addition, each of these weapons can produce both immediate radiological effects and residual radioactive contamination.

1) Radiological Dispersal Device

a) Some blast damage to structures
b) Some blast casualties
c) Some fragmentation damage to structures and casualties among people
d) Localized radiological contamination
e) Fires are possible

2) Improvised Nuclear Device or Nuclear Weapon

a) Extensive blast damage to structures, including building and wall collapse
b) Significant blast casualties
c) Significant fragmentation casualties from debris, broken glass, and other materials
d) Extensive radiological contamination
e) Extensive fire effect.

C. Indications of Use

1) Prior warning or threat.
2) Reports of stolen radiological sources or nuclear materials.
3) Use of these weapons may produce damage and casualties similar to that produced by a conventional high explosive bomb. Radiological detection equipment will be needed to confirm the presence of radioactive materials.

D. Emergency Response Guidance

1) Radiation Dispersal Device – ERG Guide 163
2) Improvised Nuclear Device or Nuclear Weapon – ERG Guide 165

E. Response Needs

1) Personal protective equipment for emergency responders
2) Mass personnel decontamination
3) Medical evacuation and treatment for mass casualtie.
4) Urban search and rescue teams for collapsed structures
5) Firefighting
6) Radiological monitoring and assessment teams
7) Mortuary support for mass fatalities
8) Evacuation assistance
9) Access control for incident site and contaminated areas
10) Shelter and mass care for evacuees

3. Chemical Weapons

A. Weapon Types. Letters in parenthesis are military designators for these agents.

1) Nerve Agents. Nerve agents are some of the most toxic chemicals in the world; they are designed to cause death within minutes of exposure. Lethal doses may be obtained by inhaling the agent in aerosol or vapor form or having the agent deposited on the skin in liquid form. Examples include Sarin (GB), Soman (GD), and V agent (VX).

2) Blister agents. Blister agents cause blisters, skin irritation, damage to the eyes, respiratory damage, and gastrointestinal effects. Their effect on exposed tissue is somewhat similar to that of a corrosive chemical like lye or a strong acid. Examples include Mustard (H) and Lewisite (L).

3) Blood Agents. Blood agents disrupt the blood's ability to carry oxygen and cause rapid respiratory arrest and death. Examples include potassium cyanide and hydrogen cyanide (AC).

4) Choking Agents. Choking agents cause eye and airway irritation, chest tightness, and damage to the lungs. These agents include industrial chemicals such as chlorine (CL) and phosgene (CG).

5) Hallucinogens, Vomiting Agents, and Irritants. These materials cause temporary symptoms such as hallucinations, vomiting, and burning and pain on exposed mucous membranes and skin, eye pain and tearing, and respiratory discomfort. The effects of these agents are typically short lived; they are generally designed to incapacitate people and typically do not pose a threat to life.

B. Other Emergency Response Considerations.

1) Agent Form

Some nerve and blister agents are normally in liquid form. When used as weapons, most chemical agents are delivered in aerosol form to maximize the area covered, although some may be delivered as a liquid. An aerosol is defined as a suspension or dispersion of small particles (solid or liquids) in a gaseous medium. Dissemination methods range from spray bottles and backpack pesticide sprayers to sophisticated large-scale aerosol generators or spray systems.

2) Persistency

Chemical agents may be either persistent or non-persistent. Non-persistent agents evaporate relatively quickly. Persistent agents remain for longer periods of time. Hazards from both vapor and liquid may exist for hours, days, or in exceptional cases, weeks, or months after dissemination of the agent.

C. Weapons Effects

The primary effects of chemical agents are to incapacitate and kill people.

1) Minute doses of nerve agents cause pinpointing of the pupils (miosis), runny nose, and mild difficulty breathing. Larger doses cause nausea, vomiting, uncontrolled movement, loss of consciousness, breathing stoppage, paralysis, and death in a matter of minutes. G-agents are non-persistent, while V agents are persistent.

2) Blister agents cause eye irritation and reddening of the skin in low doses. Larger doses produce eye and skin blisters, airway damage, and lung damage, causing respiratory failure. Some blister agents, such as mustards, are persistent in soil, while other blister agents are considered non-persistent.

3) Blood agents inhibit the transfer of oxygen in the body and produce intense irritation of the eyes, nose, and throat, breathing tightness, convulsions, and respiratory arrest, causing death. Blood agents are considered non-persistent.

4) Choking agents produce eye and airway irritation and lung damage, which may lead to death. Choking agents are generally non-persistent.

5) Vomiting agents and Irritants have relatively short-term incapacitating effects. These symptoms seldom persist more than a few minutes after exposure and the agents are considered non-persistent.

D. Indications of Use

1) Prior warning or threat
2) Explosions that disperse mists, gases, or oily film
3) Presence of spray devices or pesticide/chemical containers
4) Unexplained mass casualties without obvious trauma
5) Casualties exhibit nausea, breathing difficulty, and/or convulsions
6) Odors of bleach, new mown grass, bitter almonds, or other unexplained odors
7) Dead birds, fish, or other animals and lack of insects at the incident site and areas downwind
8) Alarms by chemical detection systems

E. Emergency Response Guidance

1) Nerve Agents. Use ERG Guide 153. Antidotes to nerve agents, including atropine and 2-PAM Chloride, must be given shortly after exposure to be effective.
2) Blister Agents. Use ERG Guide 153.
3) Blood Agents
   a) If the agent is positively identified as Cyanogen chloride, use ERG Guide 125.
   b) If the agent is positively identified as Hydrogen cyanide, use ERG Guide 117.
   c) If you suspect a blood agent has been used, but have not positively identified it, use ERG Guide 123.

4) Choking Agents
   a) If the agent is positively identified as Chlorine, use ERG Guide 124.
   b) If the agent is positively identified as Phosgene, use ERG Guide 125.
   c) If you suspect a choking agent has been used, but have not positively identified it, use ERG Guide 123.
5) Irritants
   a) For tear gas or pepper spray, use ERG Guide 159.
   b) For mace, use ERG Guide 153.

F. Response Needs

1) Personal protective equipment for emergency responders
2) Mass decontamination capability
3) Medical evacuation and treatment for mass casualties
4) Hazmat response teams
5) Mortuary support for mass fatalities
6) Evacuation assistance
7) Access control for incident site and contaminated areas
8) Shelter and mass care for evacuees

4. Biological Weapons

A. Weapon Types. Biological agents are intended to disable or kill people by infecting them with diseases or introducing toxic substances into their bodies. Such agents are generally classified in three groups:

1) Bacteria and Rickettsia. Bacteria and rickettsia are single celled organisms which cause a variety of diseases in animals, plants and humans. Bacteria are capable of reproducing outside of living cells, while rickettsia require a living host. Both may produce extremely potent toxins inside the human body. Among the bacteria and rickettsia that have been or could be used as weapons are:

   a) Anthrax
   b) Plague
   c) Tularemia or Rabbit Fever
   d) Q fever

2) Viruses. Viruses are much smaller than bacteria and can only reproduce inside living cells. Among the viruses that could be used as weapons are:

   a) Smallpox
   b) Venezuelan Equine Encephalitis (VEE)
   c) Viral Hemorrhagic Fever (VHF)

3) Toxins. Toxins are potent poisons produced by a variety of living organisms including bacteria, plants, and animals. Biological toxins are some of the most toxic substances known. Among the toxins that have been or could be used as weapons are:

   a) Botulinum toxins
   b) Staphylococcal enterotoxins
   c) Ricin
   d) Mycotoxins

B. Other Emergency Response Considerations

1) Means of Dissemination

   a) Inhalation of agent in aerosol form. An inhalation hazard may be created by spraying a biological agent. Many biological agents, such as viruses, may also be readily transmitted from an affected person to others in aerosol form by coughing and sneezing. This can result in the rapid spread of disease-causing agents.
   b) Ingestion in food, water, or other products that have been contaminated with agents.
   c) Skin contact or injection. Some agents may be transmitted by simple contact with the skin or by injection.

2) Unique Aspects of A Biological Agent Attack

   a) As there are few detection systems for biological agents available, an attack with biological agents may not be discovered until public health authorities or medical facilities observe people becoming sick with unusual illnesses. Casualties may occur hours, days, or weeks after exposure. Medical investigators will normally undertake to determine the source and cause of such illnesses and how it is spread.
   b) In the aftermath of an attack with biological agents, public health agencies will normally take the lead in determining actions that must be taken to protect the public, although state and local governments may implement those actions.
   c) There may be no local crime scene or incident site; the initial dissemination of the agent may have occurred in another city or another country and affected travelers may bring disease into the local area.
   d) As people affected by some biological agents, such as viruses, are capable of spreading disease to others, the emergency response to a biological attack may have to include medical isolation of affected patients and quarantines or other restrictions on movement of people or animals. It may also be necessary to restrict opportunities for person-to-person transmission by closing schools and businesses or curtailing mass gatherings such as sporting events.

C. Weapon Effects

Biological agents are used to both incapacitate and to kill. Some agents make people seriously ill, but rarely kill those affected; these may create a public health emergency. Others, such as anthrax and many toxins, kill those affected and may create both a public health emergency and a mass fatality situation.

D. Indications of Use

1) If there is a local incident site, the following may be indicators of the use of biological weapons:

   a) Advance warning or threat
   b) Unusual dead or dying animals
   c) Unusual casualties – pattern inconsistent with natural disease or disease that does not typically occur in the local area
   d) Aerosol containers or spray devices found in other than typical locations of use
   e) Presence of laboratory glassware or specialized containers
   f) Biohazard labels on containers
   g) Evidence of tampering with foodstuffs and water distribution systems
   h) Indications of tampering with heating/air conditioning systems

2) For many biological agent attacks, medical assessment of affected people, autopsy results, and follow-on medical investigation will be required to confirm the use of biological agents.

E. Emergency Response Needs

1) Personal protective equipment for emergency responders
2) Chemical, biological, and radiological detection equipment
3) Decontamination capability
4) Specialized pharmaceuticals
5) Medical evacuation and treatment for mass casualties
6) Public health prevention programs
7) Mortuary support for mass fatalities
8) Access control for incident site, if one exists
9) Personnel support for quarantine operations
10) Public health investigative resources

SPECIALIZED RESPONSE RESOURCES

During the response to a terrorist incident, the local resources used for most emergency situations will be used. Because of the potentially great damage, contamination, casualties, and fatalities that may be generated by large-scale terrorist incidents, specialized response resources may be needed from the state and federal government to supplement those available locally. Some of those resources are outlined below. Requests for state or federal resources should be channeled to the local DDC Chairperson.

RESOURCE NEED	SOURCE	RESOURCES
Assessment & Technical Assistance	State: Other: Federal:	TXARNG/6th WMD/Civil Support Team CHEMTREC (800-424-9300) Chemical/Biological Hotline (800-424-8802) Other WMD/Civil Support Teams Military Resources
Hazmat Response Support	State: Federal:	Texas Commission on Environmental Quality National Response Center Regional Response Teams
Medical Care & Public Health Support	Federal:	Disaster Medical Assistance Teams (DMATs) Military medical units Military hospital support
Radiological Monitoring & Assessment	State: Other: Federal:	Department of State Health Services, Radiation Program Assistance is available from other states pursuant to an interstate compact US Dept. of Energy Radiation Assistance Program US Dept. of Energy Federal Radiological Monitoring & Assessment Center US Environmental Protection Agency Radiological Emergency Response Teams Military resources
Urban Search & Rescue	State: Federal:	Texas Search & Rescue Task Force 1 Other National Urban Search & Rescue System Task Forces
Security, Traffic Control, & Access Control	State: Federal:	Dept. of Public Safety Parks & Wildlife Dept. Texas Forest Service National Guard Military resources
Victim Identification & Mortuary Services	Federal:	FBI Disaster Mortuary Teams (DMORTs)