MINNESOTA DEPARTMENT OF PUBLIC SAFETY

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ision of Homeland Security and Emergency Management

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State Fire Marshal/ Pipeline Safety

State Patrol

Traffic Safety

October 31, 2003

The Honorable Leo Foley, Chair
The Honorable Dave Kleis
Senate Crime Prevention Committee

The Honorable Jane Ranum, Chair
The Honorable David Knutson
The Honorable Thomas Neuville
Senate State Government Budget Division

The Honorable Steve Smith, Chair
The Honorable Mary Murphy
House Judiciary Finance and Policy Committee

Dear Members:

The Homeland Security Advisory Council is pleased to present the *Statewide Terrorism Preparedness Implementation Plan* for your review.

To improve Minnesota's ability to mitigate and appropriately manage a terrorist event, it is important that the state have an aggressive anti-terrorism response and prevention plan, built on the cooperation of all levels of government. This report reviews the state's current level of preparedness and makes recommendations on a variety of ways to strengthen these efforts.

The material in the report incorporates ideas from several sources and expands many of the ideas contained in the 2001 Implementation Plan for Bomb Disposal and Domestic Terrorism Response Services. Input was also solicited from a variety of stakeholders, including first responders, government leaders, private businesses and various members of the public.

In the event of a terrorist attack, the state will respond vigorously to protect all of the state's resources – people and property. This report outlines the best way to prepare Minnesota to respond as effectively and efficiently as possible.

Sincerely,

Richard W. Stanek
Commissioner
Department of Public Safety
Co-Chair

Dianne M. Mandernach
Commissioner
Department of Health
Co-Chair

Cc: Charlie Weaver
Jeff Davidman

Statewide Terrorism Preparedness Implementation Plan

31 October 2003

Prepared for
The State of Minnesota
Homeland Security Advisory Council
By
Department of Public Safety
Division of Homeland Security and Emergency Management

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Executive Summary

An attack by a terrorist using a weapon of mass destruction is an assault on the entire infrastructure of the state. The economic consequences of such an attack are grave. Responding units and emergency management systems could easily be stretched to the breaking point. Additionally, initial management of the incident may be chaotic with local responders bearing the brunt of the struggle to gain control and stabilize the situation.

To improve Minnesota's ability to mitigate and appropriately manage a terrorist event, it is important that the state have an aggressive anti-terrorism response and prevention plan, built on the cooperation of all levels of government. This report reviews the state's current level of preparedness and makes recommendations on a variety of ways to strengthen these efforts.

The material in the report incorporates ideas from several sources and expands many of the ideas contained in the 2001 Implementation Plan for Bomb Disposal and Domestic Terrorism Response Services. Input was also solicited from a variety of stakeholders, including first responders, government leaders, private businesses and various members of the public.

The report is divided into twenty issue areas, which approach the terrorism challenge from a local, state and federal perspective. Each area includes background information, the agencies involved, and the roles they play, recommendations on policy and procedure improvements, as well as resource recommendations.

In the event of a terrorist attack, the state will respond vigorously to protect all of the state's resources – people and property. This report outlines the best way to prepare Minnesota to respond as effectively and efficiently as possible.

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Introduction

In 1998, the state of Minnesota began formal efforts to develop a comprehensive terrorism preparedness program. The Division of Public Safety led this effort by developing a terrorism awareness training program to encourage planning in local communities.

The legislature formally recognized these efforts in 1999, directing the Commissioner of Public Safety and the Division of Emergency Management to develop an implementation plan to make bomb disposal and domestic terrorism response services available to requesting local governments and agencies on a statewide basis. This implementation plan was submitted to the state legislature on January 15, 2001.

After the events of September 11, 2001, the legislative and executive branches of the state of Minnesota augmented efforts to protect the citizens of Minnesota. An Executive Order, signed by Governor Jesse Ventura, appointed the Commissioner of Public Safety, Charlie Weaver, director of Minnesota's Office of Homeland Security.

On June 18, 2003, Commissioner of Public Safety, Rich Stanek, announced the merger of the Office of Homeland Security and the Division of Emergency Management. The new division took on the name Division of Homeland Security and Emergency Management.

In only a few months the Division of Homeland Security and Emergency Management (HSEM) has created several terrorist initiatives to better prepare citizens, law enforcement and local governments. These initiatives include an alert notification system, forming critical infrastructure protection partnerships, and public education.

The Homeland Security and Emergency Management Alert Notification System is used to disseminate critical information and intelligence to local law enforcement, critical infrastructures and government agencies. The Alert Notification System incorporates a secured website and e-mail notification. Currently, there are nearly 1,000 registered users statewide.

By working with federal, state and local partners, HSEM is establishing notification and operational plans for the top 100 critical infrastructures in the state. Plans include continuation of partnerships between public and private infrastructures to operationally harden and protect critical assets. HSEM created better communication with neighboring states through associations with organizations such as the Agricultural Security and Critical Infrastructure Interdependency.

The Division of Homeland Security and Emergency Management representatives have made hundreds of public appearances in an effort to educate the public about homeland security. Officials continue to seek out opportunities to address citizens and gather feedback concerning homeland security initiatives.

In addition, the state legislature created the Homeland Security Advisory Council, to advise the administration and legislature about issues related to homeland security, as well as anti-terrorism preparedness and response activities. The group also reviews funding criteria issued by state agencies related to anti-terrorism efforts. The Council is co-chaired by the Commissioners of the Department of Public Safety and the Department of Health. Consisting of 27 members, the Homeland Security Advisory Council represents a cross-section of state agencies, first responders, health organizations and local associations.

The Minnesota Anti-Terrorism Act also requires the Homeland Security Advisory Council to submit an updated, Statewide Terrorism Preparedness Implementation Plan by November 1st of each year to the state legislature. Each annual update will provide information pertinent to terrorism preparedness and summarize the

distribution of all funds reviewed by the council for the preceding year. Funding recommendations will also be a key part of the plan.

Information contained in the Terrorism Preparedness Implementation Plan is compiled by the Statewide Terrorism Preparedness Implementation Plan Committee, a sub-committee of the Homeland Security Advisory Council. Additional input is also received from the departments of Public Safety, Health, Military Affairs, Agriculture, Pollution Control, Transportation and Natural Resources.

The plan includes twenty key areas related to terrorism. The sub-committee identified these issue areas as the top concerns of first responders. Each area divides the responsibilities by local, state and federal government agencies. Because the report is mandated by the state legislature and is compiled by a state agency, the issue area recommendations focus on suggested improvements that could be implemented by state agencies. The potential fiscal impact and detailed resources needed to fill these gaps are also included. Any financial recommendations contained in this report have not been approved by the Governor's Office or the Department of Finance.

It is important to note that these response issues and gaps represent areas of concern, not a complete absence of capability. Although resource allocation is a recurring theme in the recommendation portions, a need for greater coordination and standardized procedures is also reiterated. Requests for additional staffing, specialized equipment and specific training are joined with appeals for a unified approach to terrorism response.

It is also important to note that government resources alone will be inadequate to respond to all needs, necessitating the inclusion of the private sector in developing response plans. Private companies and trade associations should continue to be involved as active partners in all preparedness efforts.

As part of the annual update, a separate section outlines the present expenditure and status of all funding from state and federal sources allocated for terrorism response during the previous year.

During the 2002 session, the state legislature appropriated $13,000,000 for terrorism preparedness. These funds, in the form of grants, are primarily for equipment and training for first responders. This funding will be available until June 30, 2004. The federal government also provided substantial terrorism-related funding to the Department of Public Safety and the Department of Health (specific financial information on all funding will be presented as a separate section of this report). An additional attachment at the end of the report is an issue brief on federal funding for homeland security which was prepared by Federal Funds Information for States.

The primary considerations for strengthening Minnesota's terrorism response capability are contained in this report. These recommendations will add value to the state's terrorism response strategy and to public safety overall.

1. Statewide Full Scale Exercise Plan for the Activation and Deployment of the Strategic National Stockpile

Situation:

The activation and deployment of the Strategic National Stockpile (SNS) 12-hour Push Package and Vendor Managed Inventories (VMI) in the event of a bio-terrorism or mass casualty event statewide will entail an extremely complicated and coordinated response of multiple public and private organizations statewide. This program is newly created within the last few years and is currently managed by the Minnesota Department of Health with critical support from the Division of Homeland Security and Emergency Management (HSEM) and is developed to assure successful distribution of pharmaceuticals and medical supplies in response to a terrorist event involving biological or chemical agents. This program has never been exercised in Minnesota. A full-scale exercise of this program would entail substantial resources and coordination from the Federal, state and local level. The Minnesota Department of Health is targeting a full-scale exercise of this program in the fall of 2004.

Local	*Roles:* • Local public health, hospitals and public safety agencies will play a lead role in planning, establishing and managing mass clinic and treatment operations in response to a terrorist event involving biological agents. Testing of these systems should be included in a statewide full-scale exercise. *Issues/Gaps:* • Local public health and public safety officials and staff should be supported in planning, establishing and managing mass clinic operations.
State	*Roles:* • The Minnesota Department of Health (MDH) will play the lead role in requesting the SNS from the U.S. Office of Homeland Security / Centers for Disease Control and Prevention, activating state distribution plans to the local hospital and public health sites. • The planning and development of a full scale SNS exercise will require the leadership of the MN Department of Homeland Security and Emergency Management with partnership of the Federal government, and other public and private entities to prepare for the threat of terrorist acts and public health crisis. *Issues/Gaps:* • The Minnesota Department of Health will require funding support and technical assistance to plan and execute a full scale SNS exercise in 2004.
Federal	*Roles:* • The U.S. Department of Homeland Security, Office for Domestic Preparedness (DHS-ODP) and the Department of Health and Human Services, Centers for Disease Control and Prevention (CDC) will provide technical assistance in the development and execution of the Minnesota Strategic National Stockpile full scale exercise. *Issues/Gaps:* • MDH requires assistance from the Minnesota HSEM for exercise development and access to available federal grant money to support this effort.

Annual Achievements:

- The MDH has received funding from Centers for Disease Control and Prevention (CDC) to hire staff and develop a distribution plan for the SNS 12-hour Push Package (formerly known as the NPS 12-hour Push Package).

Recommendations:

- The Minnesota HSEM should assist the MDH SNS with ODP funding and technical assistance to support the statewide full-scale exercise.

Financial Impact:

- Approximately $500,000 in exercise targeted monies is needed.
- Technical Assistance support of HSEM staff equivalent to a .5 FTE.

2. Mass Vaccination and Prophylaxis Dispensing Sites	
Situation: The operation of mass dispensing sites for the administration of vaccination or distribution of prophylaxis antibiotics is primarily the responsibility of regional and local public health agencies with support of local public safety agencies. State resources will assist in planning, training, and coordination of the SNS, MMRS, or local assets. Mass dispensing site operations are resource intensive and may require sustained support for an indefinite period of time. Resources include professional and nonprofessional personnel, non-SNS supplies, and logistical support. The operations will likely be conducted in an environment of fear, panic and potential loss of public confidence. Communication planning will be developed and coordinated at all levels, state, regional, and local.	
Local	*Roles:* • The operation of mass dispensing sites for the administration of vaccination or distribution of prophylaxis antibiotics is primarily the responsibility of local public health agencies with support of local public safety agencies. They are responsible for: o site selection o design o staffing, o receipt of the assets o tracking of SNS supplies o public communication o dealing with special populations. *Issues/Gaps:* • Mass dispensing site operations are resource intensive and may require sustained support for an indefinite period of time. These operations may exceed the capacities of local public health and public safety agencies.
State	*Roles:* • MDH will be responsible for supporting regional and local public health and other health agencies with resources necessary to conduct a mass vaccination or prophylaxis dispensing site. These resources may include planning guidance, training and exercise support, communication support and possibly personnel or assistance in procurement of personnel. • Minnesota National Guard MNG will be responsible for providing medical support in a terrorist event involving biological agents. • Minnesota Department of Transportation (MNDOT) will be responsible for coordinating any transportation issues. • HSEM will be responsible for supporting local public safety agencies in a terrorist event involving biological agents. *Issues/Gaps:* • Statewide procedures exist in a draft format that may be used by local public health agencies in planning and developing mass dispensing site plans. • The state's medical response team capabilities need to be enhanced to provide assistance to local public health agencies when requested. • Security and logistical support procedures exist in a draft format for local public health and public safety agencies that need assistance. • MNG lacks the adequate state resources to provide medical response team capabilities to assist local public health agencies.
Federal	*Roles:* • Various federal agencies will play support and advice roles in the management of mass vaccination or prophylaxis dispensing sites. SNS will provide the assets, planning guidance and advisory assistance on developing state, regional and local plans, and training for state and local participants, and actual physical guidance in the event of deployment of the SNS (TARU). *Issues/Gaps:* • The Department of Health and Human Services and the Centers for Disease Control and Prevention

	need to be providing training and exercise support for conducting mass vaccination and prophylaxis dispensing sites.

Annual Achievements:

- Planning for the Mass Vaccination and Prophylaxis Dispensing sites has been proceeding over the past year.

Recommendations:

- MDH should finalize procedures that may be used by local public health agencies in planning and developing mass dispensing site plans. MDH should develop training and exercise support "packages" that can be requested by local public health agencies that need assistance.
- MNG should develop additional medical response team capabilities that can be requested by local public health agencies that need assistance.
- HSEM should develop procedures for providing security and logistical support to local public health and public safety agencies that need assistance.
- MNDOT should develop procedures to coordinate any possible transportation issues to assist local public health agencies.

Financial Impact:

- No anticipated state costs at this time.

3. Food Safety	
Situation: Federal assessments indicate there is a high probability that agriculture and the food supply will be subject to a terrorist attack. Governmental agencies, food and agricultural industries are not prepared to prevent or respond to such an event. A terrorist attack on food, farm or agricultural industries has a high potential to cause illness, fear, panic and loss of public confidence in the food supply resulting in severe economic losses. In such an event, the Minnesota Department of Agriculture (MDA) and the Minnesota Department of Health (MDH), along with other state and local agencies need to communicate and respond decisively to limit the extent of the damage and protect the public's health.	
Local	*Roles:* • Municipal and county environmental health staff have food inspection responsibilities including assisting with the management of food recalls, outbreak investigations, embargoes and the destruction and condemnation of contaminated foods. • Depending on the scope of the incident, municipal and county emergency response personnel will coordinate the response to agricultural-related emergencies. *Issues/Gaps:* • Municipal and county food safety and emergency management agencies need to ensure that any roles beyond those associated with current food borne outbreak protocols include provision for dealing with events related to terrorism.
State	*Roles:* • MDA and MDH have regulatory responsibilities to ensure a safe and wholesome food supply including the investigation of food-borne illness outbreaks, tracing of contaminated food products recalls, embargoes, condemnations and laboratory analyses. *Issues/Gaps:* • Planning: MDA and MDH do not have a comprehensive emergency response plan. Consequently, uniform standard operating procedures between local, state and federal food and agriculture regulatory agencies have not been developed. MDA has not conducted a comprehensive vulnerability risk assessment of Minnesota's agricultural commodities and lacks adequate resources to do accomplish this task. • Training and Exercising: Upon the development of a comprehensive emergency plan, training and exercises will be needed for state and local personnel. In addition, training regarding the safety of inspection staff during a terrorist (including biological, chemical and/or radiological) event is needed. Funding or staff to conduct training sessions for the retail food industry focusing on food security is lacking. • Response: MDA does not have sufficient laboratory surge capacity to meet increased investigation, sampling and laboratory analysis demands during a terrorist event or other emergency. MDA lacks the capability to develop laboratory methods for analyzing new agents. • Investigation: MDA lacks the capacity to interpret the impact of toxicological and microbiological agents on the food. • MDA and PCA have not planned for proper disposal or treatment of contaminated food or commodities. • Information Technology: The MDA's information system lacks a component that provides coordinated regulation, inspection, licensing and laboratory test results in a single application. MDA does not have the information technology capacity to provide secure emergency response information to industry and governmental entities. MDA lacks the ability to gather geographical information on facilities and other agricultural locations. This capacity is a critical resource as it provides the ability to locate agricultural and food-related entities. There is no shared central database for the approximate 20,000 retail food facilities licensed by MDH and local agencies. Therefore, there is no uniform method for contacting operators in the event of an emergency or for regular updates.
Federal	*Roles:* • United States Department of Agriculture (USDA) and the Federal Drug Administration (FDA) will play a role in managing recalls, investigations, embargoes and destruction and condemnation of foods. The USDA will also play a role in responding to threats to animal health.

	Issues/Gaps: • Comprehensive federal guidance regarding food security measures, risk assessments, and training protocols do not exist.

Annual Achievements:

- MDH has redirected general fund and federal monies to respond to requests for educational presentations regarding food security prevention. These presentations have been made to local governmental agencies, health care food service managers, and other the food industry representatives. In addition, MDH staff has consulted and advised local public health directors regarding the state and the local roles in emergency response situations.

Recommendations:

- Roles and responsibilities of the local, state and federal food and agriculture regulatory agencies need to be defined.
- A comprehensive risk assessment of agricultural commodities and retail food facilities in Minnesota is needed.
- A multi-agency approach to food security needs to be developed. MDA and MDH need to develop a coordinated and comprehensive all hazards response plan including standard operating procedures.
- Training materials should be developed and plans exercised.
- An evaluation process needs to be developed which would test systems and agencies working together including communication, and implementation of policy and procedures following a response to an incident. The process would include an assessment of the concept/plans for communication and coordination of an interagency approach along with industry's involvement.
- Increase MDA's laboratory capacity and analytical capabilities
- Personnel should be hired to perform the following functions; planning, training, consultation and technical assistance, product sampling, product trace-backs and interpretation of laboratory and epidemiological data.
- Develop a single licensing and inspection application specifically designed to support the daily activities of the MDA and MDH's regulatory and inspection staff
- Provide staff for Geographical Information Systems (GIS) data collection and maintenance.
- Create and maintain a central database for retail food facilities in Minnesota.

Financial Impact:

- Staff and support for MDA All Hazard Planning Approx $360,00/year
- Secure computer system with enhanced capabilities including a central repository for MDH and MDA licensed facilities: approx $ 2 million initial and $600,000/year ongoing.
- Staff training and equipment for epidemiological capacity: Approx $270,000/year
- Provide training, consultation and technical assistance for MDH staff and local agencies. Approx. $350,000/year.
- Staff and equipment for increased laboratory capacity and analytical capabilities: Approx $900,000/year for
    - five microbiologists
    - one medical laboratory technician
    - one environmental analyst
    - one chemist
    - one office administrative specialist

4. Debris Management

Situation:

Procedures or guidelines for disinfecting, decontaminating or disposal of debris, or for managing massive amounts of building debris are not quickly available at the time of a disaster. Existing statutes and rules often require lengthy public and permit review times. Therefore the Minnesota Pollution Control Agency needs emergency authority to waive certain statutes and rules related to debris management.

Local	*Roles:* • Local public works and utilities departments will play a lead role in the management of massive piles of building debris or contaminated public areas that might result from a terror incident. *Issues/Gaps:* • Local public works and utility officials do not have sufficient training of potential debris issues or in organizing massive building debris management projects.
State	*Roles:* • MDH, the National Guard Civil Support Team (CST), and State Hazardous Material (HazMat) Teams will play lead roles in assessing the radiological, biological, or chemical agent hazards of debris. • MDH and MPCA will play roles in planning for debris decontamination, disinfection or disposal. • MPCA will play a lead role in the management of debris. • DPS will provide investigative assistance to federal and local agencies in the collection of evidence and investigation of a terrorist act. The primary agency responsible for this assistance is the Bureau of Criminal Apprehension (BCA). *Issues/Gaps:* • There is no provision in statute for a waiver or suspension of certain debris management in the event of an act of terror, peacetime emergency or other disaster. • No procedures or training exist for decontamination, disinfection or disposal of biologically, chemically or radiologically contaminated debris, structures, land or other areas. • There are no procedures in place for MPCA to contract with local governments to carry out procedures for disinfection, decontamination or disposal. • No training exist for management of massive amounts of building debris, with local public works and utilities personnel as a primary audience. • Procedures or guidelines for decontaminating debris, or for managing massive amounts of debris are not currently available and will not be readily available at the time of a disaster.
Federal	*Roles:* • Various federal agencies will play support and advisory roles in assessment of debris hazards and in planning for debris management. A planned federal Environmental Protection Agency (EPA) National Decontamination Team may become a primary resource for terror debris management. *Issues/Gaps:* • Federal agencies should distribute guidance and training on debris and building disinfection, decontamination and management.

Annual Achievements:

- During 2003, a team of six staff from various disciplines drafted MPCA's Standard Operating Procedures for Natural Disasters or Terrorism Incidents (SOP) for use by MPCA Emergency Responders to assist governmental units with managing resulting debris and residual contamination. This SOP is part of MPCA's Environmental Emergency Contingency Plan. The document focuses on natural disasters such as tornados and floods with additional information on bomb, chemical, biological or radiological events as needed. The SOP provides guidance on tasks to be completed during the response and identifies tasks the MPCA could fulfill, if requested. Further, this document provides guidance on conducting assessments of the residual debris and environmental contamination, identifies information to share with the public along with examples, and details factors to consider when establishing haul routes, transfer facilities and disposal facilities. All landfill locations are identified, applicable fact sheets and resources identified, and MPCA policies and authorities described.
- All MPCA Emergency Responders have completed an awareness level of terrorism training

Recommendations:

- The MDH, with EPA assistance should develop procedures for disinfecting or decontaminating biological or

radiologically contaminated debris, structures, land and other areas.

- MPCA should prepare for hiring contractors to carry out MDH procedures for disinfection and decontamination.
- MPCA should exercise procedures for responding to massive piles of building debris including removal, sorting, transporting and disposal.
- MCPA Commissioner should be authorized to waive certain statutes and rules related to debris management, in certain conditions.

Financial Impact:

- 1 FTE for MPCA disaster debris management and preparedness specialist – Approx. $80,000 per year.
- WMD disaster communication and safety equipment and WMD debris management training and exercises for public works officials – Approx. $65,000 one-time.

5. Bomb Disposal Response

Situation:

Bomb disposal is a very dangerous responsibility requiring well-trained and uniquely-equipped personnel. Four bomb disposal squads are contracted by the state; they are located in Minneapolis, Crow Wing County, St. Paul and Bloomington. The state reimburses squads for each response they perform away from their home jurisdiction.

Local	*Roles:* • Bomb squads provide service for their home jurisdictions and deploy statewide as necessary. In addition to explosives, each squad is trained to mitigate WMD events involving, nuclear, biological, chemical, or incendiary devices. *Issues/Gaps:* • Bomb squads require dedicated annual funding for equipment maintenance and training.
State	*Roles:* • Bomb squads notify the State Duty Officer at the Division of Homeland Security and Emergency Management (HSEM) when deployed out of their jurisdiction. • Each squad receives annual state funding as reimbursement for work performed outside of their jurisdiction. • The state is responsible for administrative support for each bomb squad. • During FY 2002 scheduled training and provided funding for training and equipment. *Issues/Gaps:* • The number of bomb disposal responses is steadily increasing. Funding for these responses must be commensurate with rising demand.
Federal	*Roles:* • In FY 2003 The Office of Domestic Preparedness provided significant funding in the form of grants for equipment, training, and, exercises. • The Federal Bureau of Investigation (FBI) offers training and equipment to each squad. • The Army's 788th Ordnance Company (Explosive Ordnance Disposal) provides bomb disposal assistance, including level "A" support to a six state region. They deploy out of Fort McCoy, Wisconsin. • The Bureau of Alcohol, Tobacco, Firearms and Explosives (ATF) provides investigative, research, and technical support to State and local bomb squads in support of fire and explosion investigations. • Upon request, ATF Explosive Enforcement Officers may conduct diagnostic and render safe procedures in support of local bomb squads (response time is within 24-hours of notification). • ATF provides explosives detection canines to support State and local agencies. In Minnesota ATF trained canine teams are located at the Hennepin County Sheriffs Department, the Minneapolis Police Department, and the ATF office in St. Paul. Additional teams are available within 24-hours. • ATF offers training to State and local bomb squads and post-blast investigators. • The ATF Arson and Explosives National Repository Branch provides law enforcement and fire department investigators with access to incident data and trend information regarding arson and the criminal misuse of explosives. The National Repository contains information from the FBI's Bomb Data Center and ATF's Arson and Explosives Incident System. *Issues/Gaps:* • None noted.

Annual Accomplishments:

- The state passed $1,400,000 of FY 2003 ODP one time grant funding to the bomb squads for purchasing vehicles, equipment, training and exercises.

Recommendations:

- The state should establish sufficient annual funding to cover the bomb squads operations.
- The state should partner with the three metro area bomb squads and purchase a training and disposal facility.

Financial Impact:

- Maintain four bomb squads - Approx. $206,000 per year
- Facilities – Approx. $1.5 million one-time

6. Local Government Incident Management/Reserve Teams

Situation:
An extended and/or multi-site WMD occurrence will quickly exhaust professional emergency management assets. A large and underutilized pool of talent is available in almost every community in the state. Skilled incident managers, whether retired, amateur or unemployed are available to volunteer in time of crisis. A standardized method for assessing skills, validating credentials and rapid call up is needed to ensure that this resource is not overlooked.

Local	*Roles:* • County Emergency Managers should develop a call-up system (for volunteers) similar to the Federal Emergency Management Agency (FEMA) approach. *Issues/Gaps:* • There is a lack of standardized qualifications for prospective volunteer incident managers.
State	*Roles:* • HSEM acts as the coordination point for all volunteer functions related to response. • MNG would provide additional resources and reserve teams. *Issues/Gaps:* • Emergency Management Reserve Teams have not been utilized. • HSEM lacks the resources and staffing necessary to take on this role.
Federal	*Roles:* • FEMA provides guidance to local and state emergency managers for developing and administering an ongoing program that is compatible with existing local, state and federal services. *Issues/Gaps:* • FEMA has not been able to provide a joint, volunteer emergency management program with states and locals.

Annual Achievements:
- 12 communities representing 20% of Minnesota's population have an active CERT program.
- 43 CERT trainers have been certified within the state.
- 7 new communities will begin the CERT program in 2004

Recommendations:
- HSEM should develop a MIMS technical response overhead team to assist local jurisdictions.
- HSEM should add volunteer incident managers to the statewide Citizen Corps resource list.
- HSEM Response Section, in partnership with local emergency management professionals, should determine volunteer requirements and establish guidelines for each reserve position.
- HSEM Volunteer Coordinator, using the Citizen Corps as the vehicle and the Medical Reserve Corps (MRC) as a model, should develop a comprehensive plan for recruiting skilled incident management volunteers.
- Three local partners should be selected to launch pilot programs. HSEM should then observe progress, encourage creativity, analyze results and standardize the best elements of all three programs.
- HSEM should provide ongoing training to volunteers through local, state, and federal agencies.

Financial Impact:
- Reimbursement for workers compensation and liability insurance for volunteers working out of jurisdiction is approx. $20,000 per year.

7. Hazardous Material Response Team	
Situation: The state contracts 11 Hazardous Material Response Teams located strategically around the state. There are ten Chemical Assessment Teams (CAT) and one combination Chemical Assessment/Emergency Response Team. Hazardous Material Response Teams provide services for their home jurisdiction and deployed statewide as necessary. The State Duty Officer through HSEM requests/deploys the teams.	
Local	*Roles:* • Teams provide specialized hazardous material discharge response to their home jurisdiction and to the state as a whole. *Issues/Gaps:* • Hazardous Material Response Teams need annual funding for equipment maintenance and training. • Each team requires reimbursement for work performed out of their jurisdiction, workers compensation and liability insurance.
State	*Roles:* • The state provides team deployment through the State Duty Officer. • The state also provides response reimbursement and administrative support for each team. • MNDOT also has Hazardous Material Specialists that can be utilized, particularly on Minnesota roads. *Issues/Gaps:* • None to report.
Federal	*Roles:* • The Office of Domestic Preparedness provides grants through the state that can be used for Hazardous Material Response Teams training and equipment requirements. *Issues/Gaps:* • None noted.
Annual Achievements: • A new Chemical Assessment Team located in the City of Marshall will be trained and operational by May 2004. • Eight (8) of the CATs will receive newly designed vehicles in 2005. • All CATs have received upgraded detection equipment.	
Recommendations: • Hazardous Materials Teams should be included in the statewide communication package	
Financial Impact: • Maintain ten Chemical Assessment Teams and one combination Chemical Assessment/Emergency Response Team throughout the state – Approx. $620,000 per year.	

8. Collapsed Structure Rescue Capability	
Situation: At this time Minnetonka, Burnsville, Edina, and Minneapolis have limited collapsed structure rescue capability; however, none can adequately respond to a major collapse. The state is passing FY 2003 Office of Domestic Preparedness funds to locals to form four specialized collapsed structure rescue teams. Minneapolis will establish one heavy team and three medium teams will be developed in other communities. The Federal Emergency Management Agency (FEMA) contracts Urban Search And Rescue Teams (US&R) that are exceptionally well trained in this area but take up to 48 hours to arrive at the scene.	
Local	*Roles:* • The current teams provide emergency services for their home jurisdictions, and some have agreed to deploy regionally as needed. *Issues/Gaps:* • No formalized mutual aid agreements or standardized training exists for collapsed structure rescue. • Training and equipment requirements for the new teams will mandate a long lead-time before the teams are ready to deploy.
State	*Roles:* • The State Duty Officer is aware of some of the specialized resources required, and can facilitate the use of these resources. *Issues/Gaps:* • At this time the state has no dedicated assets to respond to a collapsed structure or other technical rescue event. No funding is in place to reimburse or assist local communities.
Federal	*Roles:* • There are 28 FEMA-contracted US&R Teams. The closest teams to Minnesota are located in Indiana, Nebraska and Missouri. These teams are fully federally funded and can respond when requested by the Governor. *Issues/Gaps:* • US&R Teams are highly mobile, but there can be up to a 48-hour delay between the request for a US&R Team and their integration into the rescue effort.
Annual Achievements: • $3,100,000.00 of FY 2003 ODP funding has been dedicated to collapsed structure rescue. • An ad hoc committee consisting of subject matter experts representing several jurisdictions is developing training and equipment requirements in conjunction with operational strategies.	
Recommendations: • HSEM must continue to play a pivotal role in the development of the new collapsed structure rescue teams. • HSEM should assist in the development of mutual aid agreements for collapsed structure rescue teams.	
Financial Impact: • 4 statewide search and rescue teams, 1 heavy and 3 medium teams, will cost $900,000 per year to maintain.	

9. Weapons of Mass Destruction (WMD) Coordination

Situation:
The Homeland Security Advisory Council (HSAC) provides advice to the state on matters related to domestic preparedness. At the state level, eight departments have been initially identified as central to WMD issues. Those departments are the Department of Public Safety, Department of Health, Department of Agriculture, Pollution Control Agency, Department of Military Affairs, Department of Transportation, Department of Natural Resources and Emergency Medical Services Regulatory Board. To complement the guidance of HSAC, the Department of Public Safety's Homeland Security Director shall establish and coordinate a committee of subject matter experts from each of the above listed departments to organize and manage prevention and response plans formulated by this group.

Local	*Roles:* • City and County leadership provide input to the state on how to coordinate leadership and resources during a WMD event. *Issues/Gaps:* • Homeland Security procedures are not always disseminated at the local level. • Coordination with the private sector is necessary as local governments do not necessarily have all the needed resources to respond.
State	*Roles:* • The state provides leadership and practical solutions to problems generated by WMD threats and offers training exercises and actual WMD event exercises. *Issues/Gaps:* • State agencies lack the resources and staffing to provide an effective, coordinated effort to address WMD threats. • Coordination with the private sector is necessary as local governments do not necessarily have all the needed resources to respond.
Federal	*Roles:* • Various federal agencies provide leadership, expertise and funding to solve problems generated by WMD threats. The federal government offers training exercises and responds to actual WMD events. *Issues/Gaps:* • None noted.

Annual Achievements:
- The EPRC workgroup formed consisting of eight state agencies, meeting regularly to plan and prepare for WMD events in Minnesota.
- Many exercises have been coordinated throughout the state of Minnesota.

Recommendations:
- Each state agency should have a contingency plan that addresses emergencies, including WMD incidents.
- WMD Workgroups in each of the above departments should be established and one coordinator should be assigned from each agency to develop a statewide plan to respond to WMD events.
- HSEM Response Section should assist with planning meetings with WMD Workgroup Coordinators.
- HSEM Response Section should facilitate WMD exercises with coordinators and local emergency managers.
- HSEM Response Section should compile a resource list of private sector companies and associations for contact following a WMD event.

Financial Impact:
- One FTE for each state agency – Approx. $680,000 per year.

10. State Laboratory Support Authority	
Situation: Terrorist events can involve biological, chemical, and/or radiological agents that threaten public health. The Minnesota Department of Health (MDH) is the lead state agency in public health emergency preparedness and response. The MDH Public Health Laboratory has the assigned authority for establishing adequate and secure laboratory facilities, reagents, and equipment to rapidly detect and measure biological, chemical, and radiological agents in clinical specimens and environmental samples. These laboratory measurements will help guide public health management of a terrorism event by identifying the agents used and determining which individuals have had their health compromised through chemical exposure or infection.	
Local	*Roles:* • Clinical microbiology laboratories are the first line of defense in a biological event. In Minnesota, these laboratories have been formed into a voluntary network called the Minnesota Laboratory System (MLS). As such, they serve as the sentinel component of the nationwide Laboratory Response Network (LRN). These sentinel MLS-LRN facilities, which are primarily hospital-based microbiology laboratories, are responsible for ruling out and referring potential agents of bioterrorism to the MDH Public Health Laboratory. • The MN State Rule 4605.7040 Disease Reporting rule mandates that diseases caused by the agents of bioterrorism are to be reported to MDH. An amendment to this rule has been proposed which will require clinical laboratories to submit suspect and confirmed bacterial isolates of bioterrorism agents to MDH Public Health Laboratory. • Local public health and local public safety agencies are responsible for proper packaging and delivery of suspicious clinical specimens or environmental samples to the MDH Public Health Laboratory for analysis. *Issues/Gaps:* • Sentinel laboratories in the MLS-LRN have limited capacity and declining capability due to resource limitations, notably a decline in an adequately trained workforce. • Competency in the collection and safe transport of suspicious terrorist samples requires the development and dissemination of uniform protocols and training materials. • Amending the MN Reporting Rule 4605.7040 to require isolate submission is crucial for appropriate state laboratory responses.
State	*Roles:* • The MDH Public Health Laboratory is the singular LRN reference laboratory for the State of Minnesota with responsibility to confirm identity of agents of bioterrorism. This singular role is designed to ensure that only standardized, validated, and accurate methods are used to identify such agents. • The MDH Public Health Laboratory is developing capability and capacity to conduct rapid diagnostic and reference testing to identify chemical agents likely to be used in a terrorist attack. • MDH Public Health Laboratory works in collaboration with Minnesota Department of Agriculture (MDA) laboratory regarding the detection of biological, chemical, or radiological agents in the food supply. • MDH is adopting standardized laboratory procedures and information exchange mechanisms that are being developed nationwide by federal agencies. *Issues/Gaps:* • MDH needs to clearly inform local and state agencies that the MDH Public Health Laboratory is the primary laboratory supporting the state's response to terrorist incidents. • With respect to chemical threat agents, coordination of roles between the state, local and commercial laboratories should be improved
Federal	*Roles:* • Regarding clinical specimens related to bioterrorism, CDC serves as the LRN reference laboratory for the MDH Public Health Laboratory. CDC coordinates surge capacity in the event that Minnesota would be overwhelmed with the testing of terrorism specimens.

	• Regarding environmental samples, EPA is beginning to serve as a national referral entity. • CDC is the responsible agency to provide regulation and guidance for the Federal Registry 42 CFR 73 – Select Biological Agents and Toxin. • Federal agencies such as CDC (for clinical specimens), EPA (for environmental samples), and FRMAC (for radioactive samples) are in the midst of developing methods and transferring technology to each state's primary public health laboratory. • With respect to environmental samples, EPA is beginning to serve as a national referral entity. It is unclear how DOD, DOE, DOJ, FDA, and USDA also serve in this capacity. *Issues/Gaps:* • CDC through the LRN has a powerful model system in place to respond to terrorism events involving infectious agents and clinical specimens. • Federal agencies are beginning to build analogous models for chemical and radiological agents. Establishing dialogue with federal agencies (other than CDC) and gaining access to technology for analyzing chemical threat agents is a current gap. • Federal agencies such as CDC (for clinical specimens), EPA (for environmental samples), and FRMAC (for radioactive samples) are developing methods but are slow to transfer analytical technology for chemical agents of terrorism to the state public health laboratories. • The CDC is not able to release the names of entities within each state that are registered for the Select Biological Agent and Toxin rule.
Annual Achievements: • In 2003, over 150 local clinical microbiology laboratories were part of the Minnesota Laboratory System (MLS) and 75% of the 125 that are MLS-LRN sentinel laboratories participated in training provided by the MDH Public Health Laboratory for the use of Level A rule-out protocols for bioterrorism agents. • In 2003, the MDH Public Health Laboratory demonstrated proficiency in identifying biological agents that could be used in terrorism. It also demonstrated proficiency with a limited suite of possible chemical terrorist agents. • During this period, the MDH Public Health Laboratory successfully fulfilled its responsibilities as Minnesota's primary LRN laboratory through interactions with federal and local laboratories.	
Recommendations: • Particularly with respect to chemical warfare agents, the roles of local, state, and federal agencies need to be defined and implemented. • The MDH Public Health Laboratory needs to articulate an all-hazards, integrated response plan that safely, quickly, and accurately identifies suspicious terrorist agents. • Working with federal agencies, the MDH Public Health Laboratory needs to increase its proficiency and capacity to characterize chemical warfare agents and their metabolites. It must also sustain its competency to characterize biological and radiological agents.	
Financial Impact: • The financial impact of implementing defined roles for local, state, and federal agencies for suspicious chemical agents is unknown. • The cost for developing, documenting, and updating plans for terrorism preparedness in the MDH Public Health Laboratory is approximately $100,000 in the first year and $30,000 in subsequent years. • Assuming that a robust infrastructure exists for routine public health laboratory functions, the added cost for sustaining proficiency and capability to rapidly detect and measure biological, chemical, and radiological agents of terrorism is approximately $1.2 million annually. • The financial impact on the MDH Public Health Laboratory of a true biological, chemical or radiological terrorism event is unknown.	

11. Weapons of Mass Destruction (WMD) Response Agreements	
Situation: Contracts for bomb squads, response teams (CAT, ERT) and future specialty teams such as Collapsed Structure Rescue Team need to be managed at the state level.	
Local	*Roles:* • Local teams provide out of jurisdiction support when requested and advise state of operational requirements and administration needs. *Issues/Gaps:* • No funding for local coordinators is available.
State	*Roles:* • The state provides administrative support for contracts. *Issues/Gaps:* • ODP now provides two-year funding for coordinator's position.
Federal	*Roles:* • ODP provides funding for state coordinator's position *Issues/Gaps:* • Locals do not receive ODP funding for coordinator's position.
Annual Achievements: • State Coordinator's position is now funded using ODP grants.	
Recommendations: • HSEM should explore funding sources for local coordinator positions.	
Financial Impact: • Funding amount for local coordinator position will vary by county.	

12. State Emergency Operations Center	
Situation: The State Emergency Operations Center (SEOC) is the statewide coordination center for all emergencies. Located within the Division of Homeland Security and Emergency Management in St. Paul, the SEOC is not a suitable command post for a WMD event. The present SEOC is non-defendable with high vulnerability; therefore it is not a resource that could facilitate continuance of government contingencies.	
Local	*Roles:* • Locals should work with HSEM to establish and identify alternate SEOC location sites. *Issues/Gaps:* • None
State	*Roles:* • HSEM provides a coordinated center for all agencies/stakeholders in the case of an emergency. *Issues/Gaps:* • The current SEOC is vulnerable due to location and complicated by needed security measures. • The current SEOC is a leased facility creating challenges and factors not found in a state owned facility.
Federal	*Roles:* • The Federal Emergency Management Agency (FEMA) has requirements for secure communications and provides guidance for SEOC operation of secure communications equipment. *Issues/Gaps:* • None
Annual Achievements: • August 2003 State Duty Officers participated in a successful SEOC relocation exercise. • Two alternate locations have been established for SEOC activation. • The Governor's conference room has been outfitted with secure communication equipment.	
Recommendations: • A state allocation should be made to relocate SEOC. • HSEM should obtain specifications for a hardened SEOC capable of limiting avenues of approach, withstanding direct attacks and maintaining self-sufficiency for a predetermined period of time. • HSEM should partner with local emergency managers and consider locations for additional alternate SEOC locations throughout the state.	
Financial Impact: • Pending approved projects.	

13. State Disaster Response Assistance/Extra Ordinary Reimbursement	
Situation: It is uncertain if the state would receive funding from FEMA for disasters caused by terrorist attacks. During the initial stages of a catastrophic terrorist incident, funding from the state and federal levels may be limited and match funding will possibly be needed.	
Local	*Roles:* • Locals document expenses incurred by local jurisdictions due to damages caused by a WMD event. *Issues/Gaps:* • No administrative policies, procedures or forms exist for processing claims associated with damage caused by a WMD event.
State	*Roles:* • The state administers financial aid to stricken areas of the state. *Issues/Gaps:* • No state funding is appropriated to pay damage claims resulting from a WMD event.
Federal	*Roles:* • Various federal agencies provide financial aid to the state for pass through to affected jurisdictions. *Issues/Gaps:* • It is unclear which federal agency will handle any disaster relief and what the process will be to obtain the funding.
Annual Achievements:	
Recommendations: • The legislature should appropriate funding to a Disaster Response Assistance Fund to help cover the initial costs of a catastrophic event. • The Homeland Security Advisory Council should develop a matrix for accessing these funds.	
Financial Impact: • Disaster Assistance Fund – Approx. $5 million in reserve for initial costs of a catastrophic event. • Other funding may be needed but would require special session action on a case-by-case basis.	

14. Weapons of Mass Destruction Equipment Maintenance and Supplies Funding

Situation:

Ongoing funding for equipment maintenance and restocking of supplies is needed to protect the investment the state has made in readiness. The state matching equipment grants will provide much of the funding but local and state agencies must budget for a 25% match. In the event of terrorist incident, well-maintained equipment and fresh supplies will be needed to conduct all phases of the response. In addition to in-use equipment, supplemental equipment and supplies will be broken out of stockpiles located in various state-controlled caches. Funding must be allocated to ensure that equipment and supplies, both in-use and stockpiled, be maintained in a high state of readiness.

Local	*Roles:* • Equipment is selected and purchased based on each jurisdiction's perception of WMD threat. Locals should have maintenance plans for WMD response equipment and inventory procedures for WMD supplies. *Issues/Gaps:* • Local jurisdictions are required to provide a 25% match, which causes hardship for some jurisdictions. • Federal grants have no provisions for equipment maintenance costs or related supplies.
State	*Roles:* • The state provides WMD equipment grants that may be used to maintain equipment and purchase related supplies. *Issues/Gaps:* • Federal grants have no provisions for equipment maintenance costs or related supplies.
Federal	*Roles:* • The Department of Justice provides grants for WMD equipment purchases. *Issues/Gaps:* • Federal grants have no provision for equipment maintenance costs or related supplies.

Annual Achievements:

- $407,800 has been allocated from the 2003 ODP equipment money to start a state stockpile of WMD response equipment.

Recommendations:

- HSEM and the Emergency Preparedness and Response Committee (EPRC) should coordinate the development of a cache system for storing equipment.
- HSEM should establish a state-maintained cache of equipment to support locals, state bomb squads, state Hazardous Material Teams and state responders in the case of an event that depleted all their resources.
- Caches must be in secure locations and staffed sufficiently to maintain inventory, replace dated materials, maintain instrument calibration, and maintain charges on all batteries.

Financial Impact:

- Unknown at this time.

15. Weapons of Mass Destruction Statewide Communication Package

Situation:

Effective communication is essential to the success of the state on a day-to-day basis. In the event of a terrorist attack, communication will determine, to what degree, the state response succeeds. Coordinating communication systems and dissemination of emergency alerts and messages on a statewide basis is a huge undertaking in terms of money, planning and equipment. Such an undertaking must include law enforcement, emergency services and health care facilities and other state agencies. The Department of Public Safety's Director of Homeland Security is responsible for disseminating emergency messages from federal agencies and alerting county and local agencies of potential threats.

Local	*Roles:* • Locals should alert the local population of imminent threats and recommended actions to be taken by citizens. • Locals should coordinate efforts across disciplines (police, fire, transportation, and health) to effectively respond to an incident. • Locals should coordinate with state and federal agencies to effectively respond to an incident. *Issues/Gaps:* • Coordinated communications between local agencies, between local and state agencies, and between local and federal agencies does not exist to facilitate the needed logistical response.
State	*Roles:* • Coordination and communications between local and state agencies will take place through the State Emergency Operations Center and on statewide mutual aid channels managed by the Minnesota State Patrol such as the Minnesota Statewide Emergency Frequency (MNSEF), point to point and satellite phones. *Issues/Gaps:* • Coordinated communications between state agencies, between state and federal agencies and between state and local agencies does not exist to facilitate the needed logistical response. • Teams with specialized expertise (hazardous materials, bomb squads, collapsed structures etc.) that are deployed to assist local authorities and respond over wide geographic areas (regionally or statewide) are limited in their ability to coordinate due to lack of communication capabilities. No system exists that offers statewide multi-jurisdictional interoperability.
Federal	*Roles:* • Various federal agencies provide leadership, expertise and funding to solve communications problems such as lack of interoperability at the federal, state and local level. *Issues/Gaps:* • There is not enough frequency spectrum dedicated to public safety that meets the demands for future wide-area shared systems and advanced technologies that improve information sharing. • Much of the federal resources allocated are not specifically earmarked for communications equipment investments and may be diverted to other first responder equipment needs. Funding is also identified as a 25/75 percent split between state and local authorities which makes coordinated investment less likely.

Annual Achievements:

- HSEM Communications and Warning Section has developed and instituted a communications and warning assessment gap study program for local jurisdictions. This includes, capability assessments, risk assessments and needs assessment that provides problem resolution for connectivity and interoperability situations.

Recommendations:

- The Department of Public Safety should establish a communication council, assisted by a technical support team to coordinate and institute a statewide communications policy, plan and procedures, including initial communication with the public.
- The council should pursue federal, state and local funding options to deploy statewide shared radio infrastructure.

Financial Impact:

- State shared public safety radio system backbone – Approx. $189 million one-time.

16. Cyber Security – Infrastructure Protection

Situation:

Cyberspace is essential to homeland security at both a state and national level. The security and reliability of our computing environment supports the economy, critical infrastructures, and national defense.

Since every critical infrastructure area runs on, and uses computerized systems and networks, the importance of the security of these systems cannot be underestimated or ignored any longer. To enable a coordinated strategy and incident response system in time of crisis, these systems must be hardened and protected to be secure and reliable.

To date, the reliability and security of our computer and network systems within the state of Minnesota have gone largely unaddressed by emergency plans. Accordingly, these systems must be upgraded and secured in order to enable the level of coordination and cooperation needed in the State of Minnesota. Through the departments of Administration and Public Safety, we must

- upgrade core network and security infrastructures
- provide redundancy to ensure operation in times of crisis
- maintain central communication of information for Homeland Security
- provide and coordinate a framework for secure operations
- increase skill level of personnel through training
- frequently assess vulnerabilities and mitigate these risks
- follow and promote secure guidelines

The only way to support the increasing demands placed on our computing and controls environment and ensure secure, reliable and available systems for response is to invest in the infrastructure which supports these operations, and the people who run these systems.

Local	*Roles:* • Follow best practices recommendations for secure infrastructure operation • Periodically assess network security and operational continuity *Issues/Gaps:* • Financing
State	*Roles:* • Maintain a central, secure, reliable network infrastructure • Coordinate security policy protection profiles and designs • Distribute cyber security grants to high-risk organizations and guidelines for others *Issues/Gaps:* • Financing • Staffing levels • Coordinated vision and execution
Federal	*Roles:* • Provide direction • Central communication to state Homeland Security Offices and threats • Provide funding *Issues/Gaps:* • Direction – currently forming • Financing state efforts

Annual Achievements:

Recommendations:

The Department of Public Safety should work closely with other state departments, including the Departments of Administration and Health to coordinate and institute a statewide infrastructure protection plan. A plan should be

pursued in 4 phases, to be carried out in coordination with the Department of Administration's Inter-technologies Group:

Phase 1: Organization - form the State Office of Computer Homeland Security. Create a cross-functional focal point team.

Phase 2: Critical Infrastructure Security Program Design – across the critical computer infrastructure, understand the security related risks facing these organizations and design the appropriate security program to mitigate and manage the risks.

Phase 3: Critical Infrastructure Security Program Implementation – involves implementation of the design and plan developed in design phase. Significant savings through shared resources and projects across disparate organizations identified as critical infrastructure.

Phase 4: Critical Infrastructure Security Program Maintenance & Management – focus will be to maintain the level of security across the critical infrastructure that was built and enhanced in the implementation phase. Involve risk mitigation plans, continued coordination, education, and direction.

Financial Impact:

- $90 million for the upgrade to a secure, reliable network for the state Homeland Security office over which critical infrastructure applications will interoperate.
- $75 million for grants to other critical infrastructure owners and projects

17. Minnesota's Hospital Response During a Weapons of Mass Destruction Event

Situation:

While the Minnesota health care system is generally well prepared to respond to routine emergencies stemming from natural disasters and minor epidemics, it lacks the plans and infrastructure that is needed respond to the new challenges posed by terrorist acts. The Emergency and Acute Care System (EACS) in Minnesota has limited capacity as hospitals and clinics have adjusted to declining reimbursement and staffing shortages. More than 3,000 hospital beds and 35 hospitals have been eliminated over the past 20 years. Although the total number of licensed beds within the state is 16,511, only about 7,000 beds are staffed and the majority of these are occupied every day. Therefore, for a maximally effective response to occur, emergency response systems at the local, regional, and State levels must integrate hospitals, outpatient clinics, emergency medical services, public health, and other health assets into appropriate jurisdictional emergency operation plans.

Local	*Roles:* • Local and regional hospitals will utilize an IMS (e.g., HEICS, MIMS, NIMS) to manage a mass casualty incident (MCI). • Local and regional hospitals will develop plans to increase hospital bed capacity through discharges, bed reconfiguration, alternate space use, and use of atypical locations for advanced level care including cardiac monitoring and mechanical ventilation. • Local and regional hospitals will increase isolation capacity. At a minimum, each hospital will have at least one isolation room. • Local and regional hospitals will ensure adequate PPE to protect 250 or more health care personnel per 1,000,000 population in urban areas and 125 or more health care personnel per 1,000,000 population in rural areas during a WMD event. • Local and regional hospitals will ensure that adequate portable or fixed decontamination systems exist for managing 500 adult and pediatric patients and health care workers per 1,000,000population. • Local and regional hospitals will establish a secure and redundant communications system that ensures connectivity during a terrorist incident between health care facilities and state/local health departments. • Local and regional hospitals will develop mutual aid plans for upgrading and deploying EMS units in jurisdictions not normally covered to provide coverage for at least 500 adult and pediatric patients per 1,000,000 per day. • Regions will test regional hospital surge capacity through tabletop or functional exercises. Regions will also work with the MDH to coordinate the resources necessary for these exercises. *Issues/Gaps:* • All of the above are in the initial stages of planning and implementation. • An incident management plan that integrates medical health, public health and emergency management in a tiered response must be operationalized and tested. • DOJ funding for equipment and training is not available to hospitals.
State	*Roles:* • MDH will coordinate the development of a web-based resource tracking system that integrates with the current EMS system to allow hospital capacity tracking and facility resource communication. • MDH will coordinate the development of a response system that allows the immediate deployment of 250 hospital care workers (HCW)/1,000,000 population in rural areas and 125 HCW/1,000,000 population in rural areas. • MDH will coordinate the development of a system that allows the credentialing and supervision of clinicians not working in facilities responding to a terrorist incident. • MDH will coordinate the development of local or regional systems whereby pharmacies participating in the local or regional health care response plan have surge capacity to provide pertinent pharmaceuticals in response to bio-terrorism or other public health emergencies. • MDH will coordinate the development of the distribution plan for the Strategic National Stockpile. • MDH will facilitate the establishment of a system that provides for a graded range of acute psychosocial interventions and longer term mental health services to 5,000 adult and pediatric clients and health care workers per 1,000,000 population exposed to a WMD event.

	• MDH will facilitate the development of a statewide trauma care system to provide trauma care to at least 50 severely injured adult and pediatric patients per 1,000,000 per day. • MDH will work with local and regional hospitals to assure connectivity, increase capacity, and enhance syndromic surveillance capacity of hospitals, clinics, EMS systems and poison control centers on a 24-hour-a-day, 7-day-a-week basis. • MDH will facilitate the development of education and training programs for hospital, outpatient and pre-hospital health care professionals responding to a terrorist incident. • MDH will facilitate the development of a plan for the regional and statewide coordination of patient care during an MCI, including resource reallocation. *Issues/Gaps:* • All of the above are in the initial states of planning and implementation.
Federal	*Roles:* • Federal government will deliver the Strategic National Stockpile. • Federal government will continue to authorize funding to build the capacity of the health care system to implement surge capacity plans for adult and pediatric victims of terrorism or other public health emergency *Issues/Gaps:* • Current funding to achieve the above surge capacity plan is insufficient.
Annual Achievements: • Minnesota hospitals have received funding for one year for the Hospital Bioterrorism Preparedness Program. With these funds, hospitals have begun regional planning, purchased PPE and enhanced communication capacity. • The MDH has hired staff to coordinate Minnesota's Hospital Bioterrorism Preparedness Program.	
Recommendations: • MDH will facilitate regional planning to establish a system that allows the triage, treatment and disposition of 500 adult and pediatric patients per 1,000,000 with acute illness or trauma requiring hospitalization from a geological, chemical radiological or explosive terrorist incident.	
Financial Impact: • Total costs are unknown at this time. HRSA funding ($2.1 million in FY 2002 and $8.5 million in FY 2003) will be utilized to build capacity; however, this funding is insufficient and will need to be augmented to achieve the desired outcome.	

18. State Laboratory Capacity and Coordination

Situation: Since acts of terrorism do not respect geopolitical boundaries, the statewide emergency response plan for public health requires capacity and coordination across county/municipal public health agencies and among local healthcare organizations. Public health emergency response plans need to be coordinated on a statewide basis to avoid duplication of effort, fill gaps, and maximize the leverage of limited resources available to the relevant public and private entities. The Minnesota Department of Health (MDH) Public Health Laboratory is responsible for statewide coordination of all laboratory activities related to public health emergencies.

Terrorism events will occur at the local level. The capacity to respond must be assured at local, state and federal levels. Because of notable variations in financing, organization, and governance of local, state, and federal agencies – and in public and private agencies - a single approach is not appropriate for achieving concurrence. Coordination and capacity must be assured at all levels through commitment to a shared vision for laboratory activities.

Local	*Roles* • Clinical microbiology laboratories are the first line of defense in a biological event. In Minnesota, these laboratories have been formed into a voluntary network called the Minnesota Laboratory System (MLS). As such, they serve as the sentinel component of the nationwide Laboratory Response Network (LRN). These sentinel MLS-LRN facilities, which are primarily hospital-based microbiology laboratories, are responsible for ruling out and referring potential agents of bioterrorism to the MDH Public Health Laboratory. • Local public safety personnel and local healthcare personnel will respond to the terrorist incident as required to protect people, property, and the environment. • Local agencies will communicate findings to MDH and be responsible for proper packaging and transport of suspicious samples to the MDH Public Health Laboratory. *Issues/Gaps* • Sentinel Laboratories in the MLS-LRN have limited capacity and declining capability due to resource limitations, notably a decline in an adequately trained workforce. • Local agencies need to enhance their coordination of respective roles in terrorist incidents and other public health emergencies. • Local agencies and MDH need to improve communications to enhance their recognition of complementary strengths in protecting public health.
State	*Roles* • In a chemical or radiological event, the MDH Public Health Laboratory will analyze suspicious terrorist samples and provide technical assistance to local agencies for assessing exposure to infectious or toxic agents, for medical management, for follow-up, for decontamination, and for site remediation. • In a biological event, the MDH Public Health Laboratory will analyze suspicious terrorist samples, communicate results to the MDH epidemiology staff and local Incident Commander (if appropriate), and will provide any necessary technical assistance to all state agencies. • As a member of the LRN, the MDH Public Health Laboratory will ensure adequate and secure laboratory facilities, reagents, and equipment to rapidly detect and correctly identify biological agents likely to be used in a terrorist event. • MDH Public Health Laboratory will be responsible for training the MLS-LRN sentinel laboratories in the Level A protocols for ruling out bioterrorism agents. • The MDH Public Health Laboratory will be responsible for providing assistance in sample collection for an unknown threat sample. • The MDH Public Health Laboratory will communicate its findings to federal agencies, such as CDC (for clinical specimens), EPA (for environmental samples), and FRMAC (for radioactive samples). *Issues/Gaps* • The MDH Public Health Laboratory will need to continue to build relationships with local emergency medical personnel and local law enforcement agencies to coordinate laboratory support for Weapons of Mass Destruction (WMD) response activities. • The MDH Public Health Laboratory will need to continue to build and sustain its relationships with

	federal agencies so that complementary and synergistic roles can be implemented in terrorism response. • MDH presently has inadequate capacity when dealing with chemical agents, but is rapidly building capability, capacity, and proficiency as the state's reference laboratory for testing chemical terrorist agents.
Federal	*Roles* • CDC is the chief federal agency that is responsible for public health emergencies that involve human exposure to biological, chemical, or radiological agents. CDC will support local and state agencies in public health management, particularly by assessing the medical effects of terrorist agents and providing advice on how to protect the population's health. • Other federal agencies are responsible for terrorism events that involve the intentional release of biological, chemical, or radiological agents that effect air, water, or soil. *Issues/Gaps* • MDH will need to continue to cooperate with CDC in refining complementary roles for state and federal agencies in the public health laboratory response to terrorism. • MDH will need to seek an analogous involvement with other federal agencies in addressing public health threats in environmental matrices. • Federal agencies such as CDC, EPA, and FRMAC are beginning to develop and transfer technology for analysis of chemical radiological threats to each state's primary public health laboratory. • Only limited types of chemical standard needed for the analysis of chemical terrorism agents and their metabolites are being released from federal agencies to state public health laboratories.
Annual Achievements: • In 2003, over 150 local clinical microbiology laboratories were part of the Minnesota Laboratory System (MLS) and 75% of the 125 that are MLS-LRN sentinel laboratories participated in training for the Level A rule-out protocols for bio-terrorism agents provided by the MDH Public Health Laboratory. • In 2003, the MDH Public Health Laboratory demonstrated proficiency in identifying suspicious biological agents that would be used in terrorism. It also demonstrated proficiency with a limited suite of possible chemical terrorist agents • During this period, the MDH Public Health Laboratory successfully fulfilled its responsibilities as the state primary lab in the Laboratory Response Network (LRN) through its interactions with federal and local laboratories. • In 2003, many local agencies participated in terrorism preparedness exercises that simulated public health emergencies. • In 2003, the MDH Public Health Laboratory participated in terrorism preparedness exercises hosted by various local, state, and federal agencies that specifically tested the laboratory's readiness and capability to detect and identify, chemical, and radiological threat agents.	
Recommendations: • Local public health agencies and local public safety agencies should build upon their efforts to coordinate a coherent terrorism response. • The MDH Public Health Laboratory should enhance its interactions with hospitals and other health care entities, public safety and emergency management agencies, and other organizations that support the state's readiness for terrorist incidents and other public health emergencies. • Private clinical/hospital based laboratories should be encouraged to provide adequately trained laboratorians, particularly in the area of clinical microbiology. In addition, the State of Minnesota should support any efforts to increase the workforce of well trained clinical laboratory personnel.	
Financial Impact: • The financial impact for enhanced coordination at the local level is unknown at this time. • The cost for maintaining effective coordination by the MDH Public Health Laboratory with supporting agencies in terrorist events that are public health threats is approximately $150,000 in the first year and $50,000 in subsequent years.	

19. Animal Disease

Situation:
The deliberate introduction of a highly contagious foreign animal disease, such as foot-and-mouth disease (FMD) would have a devastating effect on Minnesota's economy, our livestock industry, and potentially the health of the citizens of Minnesota if the disease was zoonotic. The Board of Animal Health (BAH) is the lead state agency for animal disease control and eradication. In order to develop a comprehensive animal health emergency management system for Minnesota, much work remains to be done and resources need to be allocated.

Local	*Roles:* • Municipal and county emergency response personnel will play an integral role in supporting a response to agriculture related emergencies. *Issues/Gaps:* • There is a need to recruit, train, and sustain a specific agricultural contact in each county to facilitate responding to animal emergencies. • There is need to expand general awareness training on animal disease emergencies to all counties and to include county responders in field exercises. • There is a need to train livestock producers in good biosecurity practices, foreign animal disease awareness and reporting.
State	*Roles:* • BAH is lead state agency for animal health emergencies. • BAH will partner with other state agencies to prepare for emergencies that affect Minnesota livestock. o MDA will be responsible for humane euthanasia and for the cleaning and disinfecting of contaminated premises. o Minnesota Veterinary Diagnostic Laboratory (MVDL) will assist with diagnostics and laboratory analysis. o Minnesota Pollution Control Agency (MPCA) will oversee carcass disposal, and may be assigned to handle carcass disposal for a catastrophic outbreak. o Minnesota Department of Natural Resources (DNR) will assess the impact on wildlife. o Minnesota Department of Health will assess the zoonotic health risks of the disease outbreak o Homeland Security and Emergency Management (HSEM) will assist by coordinating federal, state and local law enforcement resources to protect the safety of the public relating to agricultural emergencies. *Issues/Gaps:* • BAH needs additional resources to adequately develop an animal health emergency management system for a widespread animal health emergency such as FMD. • MVDL does not have sufficient laboratory capacity to meet increased investigation, sampling and laboratory analysis demands during an animal health emergency without severely impacting other critical disease control programs. • Partner agencies (MDA, MPCA, and DNR) do not have capacity to plan, develop and exercise their roles in an animal health emergency. • A key element in order to respond to a highly contagious foreign animal disease is locating and quarantining all premises which house potentially exposed livestock in a timely manner. BAH currently has a system in place that can map agricultural premises. Additional resources and equipment are needed to expand this system to include all livestock in Minnesota. • Additional personnel need to be trained as Foreign Animal Disease Diagnosticians and in emergency response preparedness. • Test exercises need to conducted to prepare for animal health emergencies • State Animal Response Teams needs to be created and trained to respond to animal health events. • BAH needs to expand its education and communication resources to adequately prepare for and respond to an animal disease outbreak. • An Animal Emergency Advisory Council, consisting of veterinarians, professional and industry groups, regulatory agencies, food processors, livestock markets, and other stakeholders needs to be created to

	assist with effective emergency planning and to help with educating agricultural groups about emergency response.
Federal	*Roles:* • United States Department of Agriculture, Animal Plant and Health Inspection Service (USDA, APHIS) are the lead federal agency for responding to threats to animal health. Resource materials have been developed and are available to states to act as a template for state animal emergency planning. In the event of a large scale animal health disaster, APHIS would be the lead federal agency for such a response. *Issues/Gaps:* • In the current Federal Response Plan the animal disease area of concern is not currently addressed. • There is no consistent funding stream to support a system for this area of concern on the state and local level.

Annual Achievements:

- An emergency response plan for FMD has been written and updated by BAH.
- PCA developed a carcass disposal plan which is a major component of an animal emergency response plan.
- HSEM, together with BAH, has conducted two table-top and two field exercises.
- BAH, HSEM, and MDA are participating in the multi-state partnership for security in agriculture.
- BAH has entered into a memorandum of understanding with MDA in order to coordinate efforts to develop an All Hazards Response Plan, including the development of an Agricultural Emergency Management Team.

Recommendations:

- A more comprehensive animal health emergency management system needs to be developed and subscribed to by all agencies
  - BAH needs additional staff and equipment to support this system.
  - BAH must train managers and field staff in Incident Command Structure (ICS) and in the use of the Minnesota Incident Management System to respond to a foreign animal disease.
  - In order to meet increased investigation, sampling and laboratory analysis demands during a terrorist event or other animal emergency, the MVDL needs to increase personnel and to maintain and expand its infrastructure. Electron microscopy, molecular diagnostics, and information systems are essential components for responding to disease emergencies and for detecting emerging diseases.
  - BAH must expand its information technology capabilities to map all livestock premises in Minnesota.
  - Minnesota needs additional veterinarians initially trained, and periodically updated, as foreign animal disease diagnosticians.

Financial Impact:

- $400,000 to train a management team, county animal emergency contacts, and emergency responders.
- $320,000 for BAH staff to manage and sustain the Minnesota Animal Health Emergency Management system.
- $100,000 for BAH personnel and equipment to map all livestock premises and concentration points in Minnesota.
- $275,000 for additional MVDL personnel, training, and infrastructure support.
- $220,000 for MDA equipment, training, and staff to euthanize animals and clean and disinfect premises.

20. Development, Enhancement, and Support of the Information Technology Infrastructure

Situation:

Email and the internet are the first line communication methods between the CDC, the Minnesota Department of Health and the 91 local public health agencies in Minnesota. Email and the internet are used everyday for routine messages and as the backbone for the Health Alert Network, transmitting urgent time sensitive messages. All levels of health threats such as West Nile virus, environmental health threats, and bio-terrorism alerts are communicated via the Health Alert Network from CDC or MDH to local public health agencies. Local public health has developed county networks through which health alerts are distributed to hospitals, clinics and others. Health threat information needed by responders is complex, frequently voluminous and discipline specific. For instance, laboratories need very different information than that needed by physicians. A stable and robust information technology infrastructure in Minnesota supports the Health Alert Network and the password protected Website, the MDH Workspace. It also supports Strategic National Stockpile communication, including pharmaceutical and other asset distribution logistics and health emergency communications management. Infrastructure requirements include:

- Surge capacity in staff, bandwidth and backup systems
- 24/7/365 availability
- Back up power
- Satellite access to Internet

High speed and continuous Internet access for all local public health, Tribal Health authorities and other health threat responders.

Local	*Roles* • Acquire and maintain hardware, software and Internet access. • Train staff to use preparedness and response system including Health Alert Network and Strategic national Stockpile communication system. • Build, maintain and administer local Health Alert Networks. • Provide IT support to maintain the local network either through staff or contract. *Issues/Gaps* • Lack of trained IT support staff in some parts of the state. • Cost of Internet access. • Funding this critical communication system through year by year grant funding places it in a vulnerable position regarding sustainability.

State	*Roles*
	• Purchase or develop software systems for statewide programs, e.g. Health Alert Network and Strategic National Stockpile.
	• Provide training and technical assistance regarding use of these systems.
	• Develop and disseminate policies regarding use of these systems.
	• Collaborate with other state agencies on communications systems.
	• During a health threat:
	  • CDC's point of contact in the state
	  • Transmit alerts, resources and recommendations
	  • Develop and maintain IT tools for responding to and managing the health threat.
	Issues/Gaps
	• Interoperability and collaboration with other state agency communication systems.
	• Reliability and cost of the T1 Internet connections to county governments.

Federal	*Roles* • The Centers for Disease Control and Prevention and Prevention will maintain a nationwide Health Alert Network that communications to state health departments. • CDC will disseminate reports and recommendations regarding health threat prevention and control. • CDC will collaborate with other federal agencies to develop consistent recommendations regarding information technology infrastructure and specifications. *Issues/Gaps*

	• Delays in announced software delivery result in state level development in order to move forward with preparedness work.
Annual Achievements:	
Recommendations: • Continuous, high-speed Internet access available to responders is our first lien of defense against bio-terrorism or other health threats. Barriers to this access can include the cost, difficult geography and policy. • All local public health, tribal health authorities and hospitals will upgrade to industry standard hardware; acquire and maintain an Internet connection of at least 256 kbps, acquire technical support sufficient to maintain systems and will train clinical and line staff to use the electronic communication systems.	
Financial Impact: • Access to ¼ T1 line can cost a rural public health agency $1,000/month, a significant financial barrier. CDC and HRSA grant funds are not sufficient to meet and sustain these critical systems.	

21. Drinking Water Safety

Situation: Public water systems are potential sites of attack. Public water systems vary greatly in size and resources, with about 900 small- and medium-sized systems spread over Minnesota. Only two systems are considered large (more than 100,000 population). It is sometimes assumed that dilution of an agent makes an attack on public water systems impractical, but this isn't necessarily correct. Nor will conventional water treatment remove all agents. A more likely avenue of attack against a public water system is physical destruction of facilities.

Local

Roles

- Public water systems personnel conduct vulnerability assessments of systems.
- Public water systems eliminate or reduce vulnerabilities at systems.
- Local government adopts emergency response plans, and adopts a health annex to the plan.
- In the event of possible intentional contamination or other acts that disrupt the system, alert MDH and law enforcement and determine whether the threat is credible.
- If the threat is credible, notify the state duty officer and the local emergency manager. Take measures to prevent contaminated water from reaching the public. Notify the local fire department if the water supply is to be shut down. Arrange an alternate water supply, as needed. Notify the public about the situation and any precautions to be taken (such as a boil water advisory).

Issues/Gaps

- Small public water systems are not required to conduct vulnerability assessments.
- Small and medium public water systems may lack resources to correct vulnerabilities.

State

Roles

- MDH provides training about vulnerability assessments to staff of public water systems.
- MDH should review vulnerability assessments, but cannot at present due to data privacy considerations.
- In the event of intentional contamination, MDH consults with the interagency Threat Assessment Group (made up of EH Director's office, Drinking Water Protection Section, MDH Lab, Infection Disease Epidemiology Section, National Guard and the Pollution Control Agency) to provide technical advice on containment/treatment/disposal of contaminated water and facilities. MDH may ask the National Guard's 55th Civil Support Team to collect water samples. (See Laboratory Capacity and Coordination.)
- The Threat Assessment Group declares the incident over after corrective actions have been completed, the drinking water is determined to be safe, and the public water system is back in service. A criminal investigation may continue after the incident is declared over.

Issues/Gaps

- Lack of funding for correction of vulnerabilities.
- Lack of resources to conduct exercises of preparedness plans, particularly for the recovery phase.

Federal

Roles

- Require public water systems to conduct vulnerability assessments. Provide guidance and funding for assessments.

Issues/Gaps

- Lack of funding.
- Small public water systems (<3300 population) are not required to conduct vulnerability assessments.
- Identify agents that would be most effective in attacking a public water system. Identify agents that would be so ineffective that an overt threat is either a hoax or a harmless attack.

Annual Achievements:

- Training in conducting vulnerability assessments has been provided by MDH staff to staff of local public water systems at eight schools for water operators in 2003.

Recommendations:

- Require all public water systems to conduct vulnerability assessments.
- Provide funding for elimination or reduction of vulnerabilities.
- Provide guidance and funding for state and local exercises.

• Encourage local public health personnel, public water system personnel, and local emergency management personnel to become familiar with each others' roles in emergency response.
Financial Impact: • Funds received from EPA allow the MDH to provide assistance to communities to perform vulnerability assessments and to upgrade emergency plans (as required by Federal law); however, funding is not available to assist communities with upgrading physical security infrastructures or to address other deficiencies identified in vulnerability assessments.

22. Transportation Security – Infrastructure Protection

Situation:
The Transportation Network/System is essential to homeland security at both a state and national level. The security and reliability of highways, railroads, mass transit, aviation and waterways supports the economy, other critical infrastructures, and national defense.

Since every critical infrastructure area utilizes the transportation system to operate and maintain its systems and networks, the importance of the security of the transportation systems cannot be underestimated. To enable timely and effective incident response, mitigation and recovery in time of crisis, the transportation system must be hardened and protected to be secure and reliable.

To date, the vulnerability and security of our transportation network within the state of Minnesota has not been adequately addressed by emergency plans. Accordingly, these systems must be evaluated and secured in order to enable the level of mobility needed in the State of Minnesota in times of crisis. Through the departments of Transportation and Public Safety, we must:

- Develop and implement security organization, policies and procedures
- Provide interoperability command and control systems to ensure operation in times of crisis
- Expand interoperable and reliable communications capabilities
- Assess infrastructure for criticality/vulnerability and implement appropriate protective measures
- Increase skill level of personnel through training and outreach
- Provide dedicated equipment for rapid response and detection

The only way to ensure the transportation network is secure, reliable and available is to invest in the infrastructure, and support systems and the people who run these systems.

Local	*Roles:* • Construct, operate and maintain their respective roadway systems. Some also own and operate general aviation facilities and/or transit systems. • Follow best practices recommendations for secure infrastructure operation • Periodically assess network security and operational continuity *Issues/Gaps:* • Financing • Plans and Procedures
State	*Roles:* • Construct, operate and maintain a secure, reliable Interstate, US and Minnesota highway infrastructure • Coordinate with various transportation modes regarding best practices and agency emergency procedures • Construct and maintain the State public safety radio system backbone. *Issues/Gaps:* • Financing and Staffing • Plans and Procedures • Equipment and Training
Federal	*Roles:* • Provide direction to various transportation modes • Coordination with transportation modes regarding security issues • Provide funding *Issues/Gaps:* • Direction – currently forming • Financing state efforts

Annual Achievements:
The Minnesota Department of Transportation (Mn/DOT) has evaluated bridges, tunnels and facilities under its

jurisdiction for criticality and vulnerability and is working with the Department of Military Affairs and the Federal Highway Administration on protection plans and measures. The Mn/DOT Offices of Transit and Aeronautics are coordinating with transit providers and general aviation airports statewide regarding security.

Recommendations:

The Department of Public Safety and Military Affairs should work closely with Mn/DOT to coordinate and institute a statewide infrastructure protection plan. A plan should be pursued in 3 phases:

Phase 1: Organization, Training, and Response/Detection Equipment - Pursue a scoping study to evaluate Mn/DOT Organizational/Procedural, Training, Equipment and Infrastructure Protection needs and guide procedural development. Purchase communications, detection and traffic control equipment. Implement security awareness training for all staff.

Phase 2: Critical Infrastructure Hardening, Command and Control Interoperability and Training – Pursue implementation of interoperability for the Metro Regional Traffic Management Center (RTMC) and the St. Cloud Transportation Operations and Communications Center (TOCC). Implement lower cost bridge and tunnel protection strategies. Conduct response awareness training specific to critical infrastructure.

Phase 3: Critical Infrastructure Hardening, – Pursue higher cost bridge and tunnel protective measures and Mn/DOT facility security measures to ensure the security and availability of Mn/DOT response equipment and personnel.

Financial Impact:

Total Cost $16.489 Million:

- Phase 1, $2.824 Million: $1.2Million for scoping study and plan development, $1.47 Million for dedicated traffic control devices, $35K for general awareness training, $100K for satellite communications, and $19K for detection equipment.
- Phase 2, $1.665 Million: $1 Million for lower cost bridge and tunnel protection, $600K for RTMC/St. Cloud TOCC interoperability, $65K for response awareness training.
- Phase 3, $12M Plus: $12 Million for Mn/DOT facility security and unknown cost of bridge and tunnel protective measures.

Conclusion

This report outlines nineteen issue areas that are the top concerns of the state's first responders. The report also includes recommendations to eliminate or reduce the concern. Addressing these concerns will achieve a higher level of homeland security in Minnesota.

Despite the preparedness gaps outlined in this report, the state's ability to respond to terrorist attacks is evolving rapidly. Grants from the Office of Domestic Preparedness (ODP) are providing significant money to first responders for selected items of equipment and weapons of mass destruction related training. State grants are being used for equipment maintenance and training. However, the lack of dedicated recurring state funding for critical staffing, specialized equipment, and reimbursement for services and equipment maintenance is limiting the state's ability to shape a long-term weapons of mass destruction response plan.

The resource needs are a challenge. Every effort must be made to maximize existing resources to meet the challenge. In addition to financial resources, this report speaks to the continued need for coordination, communication and cooperation among jurisdictions and agencies. The funding requests in this report are coupled with an appeal for good, old-fashioned "working together" to make Minnesota safer.

In addition, the state must promote a holistic approach to accomplishing tasks, stockpiling caches and teaching. Commonality is the single most important element of weapons of mass destruction response. Commonality in strategy, procedures, equipment, supplies and training will streamline the response effort. Coordination, interoperability, and sustainability all benefit when using a common base. Stamina and ingenuity are principal parts of any difficult challenge but they do not replace a uniform approach to equipment, supplies and training.

The identified gaps in statewide preparedness are serious and must be closed if Minnesota is to contribute in a meaningful way to national defense. In the meantime, the state is organized, basically equipped and developing significant resources to bring a WMD event to a suitable end.

Glossary

BAH	Minnesota Board of Animal Health
BCA	Bureau of Criminal Apprehension
CAT	Chemical Assistance Teams
CERTS	Community Emergency Response Teams
CDC	Centers for Disease Control and Prevention
CST	National Guard Civil Support Team
DNR	Department of Natural Resources
DOT	Minnesota Department of Transportation
EACS	Emergency and Acute Care System
EMS	Emergency Medical System
EPA	Environmental Protection Agency
EPRC	Emergency Preparedness and Response Committee
ERT	Emergency Response Team
FADD	Foreign Animal Disease Diagnosticians
FBI	Federal Bureau of Investigation
FDA	Federal Drug Administration
FEMA	Federal Emergency Management Agency
GIS	Geographical Information Systems
HazMat	Hazardous Material
HEICS	Hospital Emergency Incident Command System
HRSA	Health Resources and Services Administration
HSAC	Homeland Security Advisory Council
HSEM	(MN) Homeland Security and Emergency Management
ICS	Incident Command Structure
IT	Information Technology
LRN	Laboratory Regional Network
MCI	Mass Casualty Incident
MDA	Minnesota Department of Agriculture
MDH	Minnesota Department of Health
MEOP	Minnesota Emergency Operations Plan
MIMS	Minnesota Incident Management Agency
MNDOT	Minnesota Department of Transportation
MNG	Minnesota National Guard
MNSEF	Minnesota Statewide Emergency Frequency
MPCA	Minnesota Pollution Control Agency
MRC	Medical Reserve Corps
MSRB	Minnesota Services Regulatory Board
NIMS	National Incident Management System
ODP	Office of Domestic Preparedness
PPE	Personal Protective Equipment
SEOC	State Emergency Operations Center
SOP	Standard Operating Procedures
SNS	Strategic National Stockpile
US&R	Urban Search and Rescue Teams
USDA	United States Department of Agriculture
VMI	Vendor Managed Inventories
WMD	Weapons of Mass Destruction

The Homeland Security Advisory Council (HSAC)

Background:

The Homeland Security Advisory Council (HSAC), made up of a cross-section of state agencies, first responder groups, health organizations and local associations, was created in the Anti-Terrorism Act to review anti-terrorism policies and procedures and recommend changes to the Department of Public Safety and to provide coordination and accountability for all anti-terrorism funding.

State Statue:

H.F. No. 2515, 5th Engrossment, Subd. 6 By November 1st of each year, the council must submit an updated statewide terrorism preparedness implementation plan to the legislature. As part of the annual update, the council must summarize and report on the distribution of all funds reviewed by the council for the preceding year and may make recommendation for new funding.

Council Participants:

Agency/Organization	Contact:
Dept. of Public Safety	Commissioner Rich Stanek
Dept. of Health	Commissioner Dianne Mandernach
Dept. of Transportation	Betsy Parker
Dept of Agriculture	
Pollution Control Agency	Gordon Wegwart
Dept. of Military Affairs	Lt. Col Gary Sigfrinius
Dept. Of Natural Resources	Laurie Martinson
Assoc. of MN Counties	Curt Yoakum
Assoc. of MN Townships	David Fricke
League of MN Cities	Roger Peterson
PS Radio System Policy Group	
MN Sheriff's Assoc.	Larry Podany
MN Chiefs of Police Assoc.	Dan Scott
MN Police & Peace Officers Assoc.	Bill Gillespie
MN Fire Chiefs Assoc.	Rocco Forte
MN Professional Fire Fighters Assoc.	Mike Stockstead
Assoc. of MN Emergency Managers	Jim Flanders
MN Hospital & Healthcare Partnership	Laurel Anderson
Local Public Health Assoc.	Jane Norbin
MN Medical Assoc.	David Larson
Federal Emergency Management	James Duncan
Federal Emergency Management	Gary Stokes
U.S. Attorney's Office	Mike Ward
MN Ambulance Assoc.	Martin VanBuren
MN Emergency Medical Services Reg. Bd.	Mary Hedges
MN Nurses Assoc.	Mary Jo George
Indian Affairs Council	
Homeland Security and Emergency Management	Al Bataglia

Contributors to this Report:

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Dept. of Health	Aggie Leitheiser
Dept. of Health	Robert Einweck
Dept. of Public Safety	Tim Leslie
Dept. of Public Safety	Bob Bennett
Minneapolis Fire Department	Capt. Kristi Rollwagen
Dept of Public Safety	Dana Gotz
North Memorial Medical Center	Bob Hansen
EMS Regulatory Board	JoAnn Champagne
Hennepin Co. Emergency Prep	Judy Rue
MN Trucking Association	John Hausladen
State Fire Marshal	Bob Dahm
MNDOT	Mike Sobolewski
Homeland Security Emergency Management	Jeff Luther
Homeland Security Emergency Management	Ed Leier
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Homeland Security Emergency Management	Marita Nelson
Homeland Security Emergency Management	Kari Goelz
Homeland Security Emergency Management	Ben Kosel

Previous Available Funding:

Public Safety

FY2003 - $13 million in state funds for equipment and training grants
FY2002 - $5.6 million in federal funds for equipment grants
FY2000 - $2.6 million in federal funds for equipment grants
FY1999 - $949,000 in federal funds for equipment grants and preparation of a statewide assessment
FY1997/2001 - $512,000 in federal funds for hazardous material grants

Health

FY2003 - $15.9 million in federal funds for public health readiness
FY2003 - $2.1 million in federal funds for hospital preparedness for bio-terrorism and other public health emergencies
FY2001 - $1.7 million in state funds for laboratory services, epidemiology and surveillance capacity and electronic communications

Agriculture

FY2003 - $150,000 in federal funds for plant pest surveys

Military Affairs

FY2002 - $3.3 million in federal funds for airport security
FY2002 - $2.3 million in federal funds for the following:
- Homeland Security $931,700
- Force Protection $15,900
- Weapons of Mass Destruction $752,000
- Military Support $25,000
- Physical Security $447,500
- Intrusion Detection System $130,000

FY2001 - $1.5 million in federal funds for the following:
- Weapons of Mass Destruction $898,300
- Military Support $27,600
- Physical Security $473,100
- Intrusion Detection System $127,000

MN Department of Health
Terrorism Preparedness Funding

Grant Subject Area:
1. Public Health Bio-terrorism and Other Health Emergency Preparedness
2. Hospital Bio-terrorism Preparedness
3. Drinking Water Security

Source of Funds:
1. U.S. Department of Health and Human Services (Centers for Disease Control and Prevention)
2. U.S Department of Health and Human Services (Health Resources and Services Administration)
3. U.S. Environmental Protection Agency

Total Dollars Available:
1. $15.9 million
2. $8.5 million
3. $619,400

Date of Grant Awards:
1. September 1, 2003 – August 31, 2004
2. September 1, 2003 – August 31, 2004
3. September 1, 2003 – August 31, 2004

Summary of Projects:
1. The Minnesota Department of Health will use approximately $9.1 million to address the required seven focus areas to meet the grant duties from the Centers for Disease Control and Prevention. Those areas include:

   a. Preparedness Planning and Readiness Assessment
   b. Surveillance and Epidemiology Capacity
   c. Laboratory Capacity-Biologic Agents
   d. Laboratory Capacity – Chemical Agents
   e. Health Alert Network/ Communications and Information Technology
   f. Communicating Health Risks and Health Information
   g. Education and Training

$6.9 million was distributed to local public health departments to assess and enhance their capacity to respond to bio-terrorism, infectious diseases and other threats to public health. Additionally, $220,000 in grants will be given to Minnesota's 11 American Indian Tribal Governments. These grants will ensure that tribal governments have some resources to participate in the development and implementation of preparedness and response activities in their areas.

2. A total of $6.8 million will be distributed to hospital regions. Hospitals have been grouped geographically into eight regions. Each hospital has identified a Regional Hospital Resource Center to provide fiscal and leadership services to the regions.

3. The Environmental Protection Agency Counter Terrorism Technical Assistance and Training Grant will be used to: provide training to staff and public water systems on how to conduct vulnerability assessment, design and evaluate table top exercises, coordinate Drinking Water Protection counter terrorism activities with other MDH and state emergency management efforts.

Criteria Used:
1. Funding to local public health agencies was based on a per capita distribution formula with a minimum of $20,000 to each county. Grants of $20,000 are being developed with each of the 11 tribal governments on a non-competitive formula basis.

2. For the Hospital Bio-terrorism Preparedness Program, Each region will receive a base award of $500,000 with the remaining funds being distributed by population. Funding to regions ranges from $500,000 to $1.4 million.

Evaluation Procedures:

1. Each community health board must report to the state quarterly on their preparedness for bio-terrorism and other public health threats and emergencies in the following areas:

- Leadership fro the coordination and management of public health planning.
- Completion and analysis of an integrated assessment of local public health.
- Assurance the development and exercise of comprehensive plans that support local.
- Participation in regional and local planning efforts to effectively manage the CDC Strategic National Stockpile (SNS) should it be deployed to its jurisdiction.
- Leadership or participation in the response to any event.
- Promotion of provider compliance of infectious disease reporting.
- Maintenance of a network that supports exchange of key information, rapid dissemination of public health alerts, secure electronic data exchange, and protection of data.
- Development of a plan that describes roles and responsibilities regarding the provision of information to the media, the public and special populations during an event.
- Assurance of a basic level of knowledge in key staff.

2. Each hospital region must complete the following activities by the end of the funding cycle.

- Development of a regional surge capacity plan a mass casualty incident which includes the following components: incident management; hospital bed capacity; isolation capacity: expansion of statewide airborne infection disease isolation capacity; health care personnel; pharmaceutical caches; personal protection and decontamination; mental health; trauma and burn care capacity; communications and information capacity.
- Development of a mutual aid plan for upgrading and deploying EMS units in jurisdictions they do not normally cover.
- Assurance of hospital laboratory program upgrades, connectivity, and data standards to provide rapid and effective hospital laboratory services.
- Expansion of rural and urban surveillance systems at the hospital, outpatient and pre-hospital levels.
- Education and training programs for adult and pediatric hospitals, outpatient and pre-hospital health care professionals.
- Bio-terrorism disaster exercises that cover a large-scale epidemic scenario.

3. The Program must provide an update on the status of implementation of the work plan for this grant every 6 months.

MN Department of Military Affairs
Terrorism Preparedness Funding

Grant Subject Area:
1. Anti-Terrorism
2. Weapons of Mass Destruction
3. Military Support
4. Security

Source of Funds:
Department of Defense (National Guard Bureau)

Total Dollars Available:
1. $254,400.00
2. $705,000.00
3. $ 49,000.00
4. $850,000.00

Date of Grant Awards:
1. October 1, 2003
2. October 1, 2003
3. October 1, 2003
4. October 1. 2003

Summary of Projects:
1. Funds are used to support the Homeland Security Team (Critical Infrastructure Assessment) to provide the equipment and personnel needed for the entire year.

2. Funds were used for the 55th Civil Support Team to provide the equipment and personnel needed for the entire fiscal year.

3. Funds were used to provide the equipment necessary for Military Support to Civilian Authorities.

4. Funds were used to operate the Camp Ripley Security Force, including personnel and equipment, for the entire fiscal year.

Criteria Used:
1. As determined by the National Guard Bureau
2. As determined by the National Guard Bureau
3. As determined by the National Guard Bureau
4. As determined by the National Guard Bureau

Evaluation Procedures:
1. Determined by the National Guard Bureau
2. Determined by the National Guard Bureau
3. Determined by the National Guard Bureau
4. Evaluations of this temporary duty were completed upon conclusion of duty. Day to day corrective actions were done as needed.

Minnesota Department of Public Safety
Terrorism Preparedness Funding

Grant Subject Area:
1. Equipment and Training Funds
2. Equipment Funds
3. Local All-Hazards Emergency Operations Planning, Citizen Corps Councils and Emergency Response Teams
4. Terrorism Consequence Management Preparedness Grant
5. FY2003 Part I Equipment/Exercise/Training/Planning
6. FY2003 Part II Equipment/Infrastructure

Source of Funds:
1. Minnesota Session Laws – 2002, Chapter 401
2. U.S. Department of Justice, FY2002 Domestic Preparedness Grant
3. Federal Emergency Management Agency FY2002 Supplemental Appropriation
4. Federal Emergency Management Agency
5. U.S. Department of Justice, FY2003 Domestic Preparedness Grant Part I
6. U.S. Department of Justice, FY2003 Domestic Preparedness Grant Part II

Total Dollars Available:
1. $13 million
2. $5.6 million
3. $1.6 million
4. $287,439
5. $10 million
6. $24 million

Date of Grant Awards:
1. July 1, 2002 – June 30, 2004
2. October 1, 2002 – September 30, 2004
3. Grant funding will be made available approximately January 2, 2003
4. October 1, 2001 – September 30, 2002
5. January 31st, 2003 – July 31st, 2003
6. Grant funding was made available approximately August 1st, 2003.

Summary of Projects:
1. State Funds:

All counties and cities of the first class are eligible for a portion of $9.9 million in dedicated grant funding:
- $3.4 million for equipment
- $6.5 million for training

An additional $1.1 million is available statewide for special project grants:
- $375,000 for equipment
- $727,000 for training

The following amounts were specific appropriations:
- $250,000 for Bomb Disposal Squads
- $240,000 for Hazardous Material Emergency Response Teams (ERTs)
- $105,000 for Hazardous Material Chemical Assessment Teams (CATs)
- $600,000 for Capitol Security
- $5,000 for 800 MHz Executive Team
- $150,000 for DNA collection at the Bureau of Criminal Apprehension
- $400,000 for Emergency Medical Services Regulatory Board
- $177,000 for additional training personnel in Department of Public Safety, Division of Emergency Management
- $55,000 for Hazardous Material Training for ERTs and CATs

2. Federal Office of Domestic Preparedness Funds:
- $3.2 million for equipment grants to Minnesota counties and cities of the first class
- $1 million for equipment grants to state agencies
- $1 million for decontamination trailers to be issued to 15 mutual aid fire regions
- $250,000 for exercise program
- $150,000 for grant administration

3. Federal Emergency Management Agency Funds:
   - $1.3 million for planning grants to Minnesota counties and cities of the first class to update Emergency Operations Plans
   - $53,467 to assist Minnesota communities with the development of new Citizen Corps Councils
   - $227,232 for Citizen Corps Community Emergency Response Team programs in local jurisdictions

4. This grant was appropriated to the Division of Homeland Security and Emergency Management, Department of Public Safety for strategic planning relating to domestic terrorism including providing guidance and response protocols to local units of government.

5. For 2003, there is one Federal Equipment/Exercise Grant. This grant provides:
   - $4,231,800 for local governments to purchase equipment
   - $792, 935 for local government to conduct CBRNE exercises.

   There are now 12 categories of eligible equipment, and for the first time Sustainment Costs (repair and replacement cost, equipment warranties and maintenance contracts) are eligible. There is $530,000 dedicated for training of state agencies and local responders, and $707,000 in planning and administration funds for the development of the Homeland Security Office and Grants Administration.

6. The 2003 Part II Supplemental Grant allocated funding for First Responder Preparedness.
   - $7.5 million in local sub grants were dedicated to 800 MHz with the distribution based on each of the seven metro counties, MTC, MAC, and the cities of Minneapolis and St. Paul.
   - $6 million in sub grants was dedicated to 800 MHz based on regional needs outside of the seven county metro area.
   - $1.4 million in local sub grants was dedicated for the regional bomb squad's equipment, vehicle, small robots, blast guard, fiber optic viewer, 800 MHz radios, in-suit communications, wireless viewer, and one total containment trailer.
   - $3.1 million was dedicated for the regional hazmat team equipment; including seven Chemical Assessment Team (CAT) vehicles, chlorine A and B kits, gas cylinder salvage vessels, and IR detectors.
   - A $500,000 local sub grant went to the City of Minneapolis for level II collapsed structure rescue equipment.
   - $160,000 local sub grant went to the north central (International Falls) hazmat response team development.

State Equipment Distribution of $2.5 million allocated as follows:
   - $407,800 for state equipment stockpile to support sustainment of local response. Level A suits, PAPR's with extra filter cartridges and battery packs.
   - $1.4 million was dedicated for CrimNet. Officials are involved in developing regional and national information sharing initiatives, including work with the national justice and intelligence data model with the Department of Justice and Global, and the FBI Steering Committee for Law Enforcement Information Sharing and Uniform Crime Report (UCR) enhancement. It is our intent to make this information available to all law enforcement officials on a real-time basis.
   - $1.9 million dedicated for development of to up to four statewide regional level III collapsed structure rescue teams. This will include various types of equipment and vehicles purchased by the state and allocated to local governments. Equipment details to follow.
   - $696,930 (3%) for state administration of grants program and development of the Office of Homeland Security.

Criteria Used:

1. Grant amounts for equipment are based on population, number of 302 facilities and net tax capacity of the jurisdiction. Grants for training and special project grants are based on merit.

2. Grant amounts for equipment are based on population, number of 302 facilities and net tax capacity of the jurisdiction.

3. Grant amounts for planning are based on population, number of 302 facilities and net tax capacity of the jurisdiction.

Evaluation Procedures:

For both state and federal funds, equipment purchased must be selected from the Department of Justice authorized equipment purchase list.

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Training and equipment acquired using grant funding must enhance the jurisdiction's ability to respond to an incident involving weapons of mass destruction.

For the planning grants, local governments will be required to submit an application that must be approved which includes all required terrorism and non-terrorism related planning items and a continuity of operations and continuity of government plan.

Citizen Corps Councils and Community Emergency Response Team Program grants will be evaluated by a subcommittee of the MN Citizen Corps Council, with final approval by the full MN Citizen Corps Council

Minnesota Department of Public Safety
Homeland Security Emergency Management
Homeland Security Funding 1999 - 2003

		STATE LEVEL		LOCAL LEVEL		TOTAL
Grant Year	Total Award	Subgrants to State Agencies	Direct Purchases for State Use	Subgrants to Local Units of Government	Direct Purchases for Local Units of Government	
FY 1999 Equipment	**$ 805,950.00**	$ 112,940.00	$ 25,908.00	$ 667,102.00	$ -	$ 805,950.00
FY 1999 Planning	**$ 143,050.00**		$ 143,050.00			$ 143,050.00
FY 2000/01 Equipment	**$ 2,569,000.00**	$ 278,498.00	$ 233,353.00	$ 1,816,185.00	$ 240,964.00	$ 2,569,000.00
FY 2002 Equipment	**$ 5,231,000.00**	$ 801,200.00	$ 245,000.00	$ 3,169,800.00	$ 1,015,000.00	$ 5,231,000.00
FY 2002 Exercise	**$ 250,000.00**		$ 96,415.00	$ 153,585.00		$ 250,000.00
FY 2002 Admin	**$ 150,000.00**		$ 150,000.00			$ 150,000.00
FY2003 Part I Equipment	**$ 7,071,000.00**	$ 1,414,200.00		$ 5,406,800.00	$ 250,000.00	$ 7,071,000.00
FY2003 Part I Exercise	**$ 1,768,000.00**		$ 555,065.00	$ 1,212,935.00		$ 1,768,000.00
FY2003 Part I Training	**$ 530,000.00**		$ 380,000.00	$ 150,000.00		$ 530,000.00
FY2003 Part I Planning	**$ 707,000.00**		$ 707,000.00			$ 707,000.00
FY2003 Part II Equipment	**$23,131,000.00**	$ 1,432,270.00	$ 1,101,730.00	$ 18,697,000.00	$ 1,900,000.00	$ 23,131,000.00
FY2003 Part II Infrastructure	**$ 714,070.00**	$ 434,491.00	$ 30,851.00	$ 248,728.00		$ 714,070.00
TOTALS	**$43,070,070.00**	**$ 4,473,599.00**	**$ 3,668,372.00**	**$ 31,522,135.00**	**$ 3,405,964.00**	**$ 43,070,070.00**

State Use	**$ 8,141,971.00**
Passed Thru to LUGs	**$34,928,099.00**
Total Received	**$43,070,070.00**

Direct Purchases for Local Units of Government include bomb response trailer for Crow Wing County, 15 decontamination trailers for fire mutual aid districts, and equipment for collapse rescue team development

Health and Medical Preparedness Funding in Minnesota 2000-2003
Minnesota Department of Health

Grant	Grant Recipient	Grant Year	Total Award	Amt. Of Award to Recipients outside MDH
Centers for Disease Control and Prevention (CDC)	MN Dept. of Health (MDH)	2000	$48,022,675	$443,000 to local public health agencies
Centers for Disease Control and Prevention (CDC)	MN Dept. of Health (MDH)	2001	$1,197,725	$443,000 to local public health agencies
Centers for Disease Control and Prevention (CDC)	MN Dept. of Health (MDH)	2002	$18,534,985	$5,091,907 to local public health agencies $908,860 to local public health agencies for smallpox vaccination $165,000 to Tribal Governments $30,000 to Poison Control Center $120,000 to University of Minnesota
Health Resources Services Administration (HRSA)	MN Dept. of Health (MDH)	2002	$2,155,835	$1,594,668 to Hospitals $130,000 to MN Hospital Association
US Environmental Protection Agency (EPA)	MN Dept. of Health (MDH)	2002	$662,000	
Centers for Disease Control and Prevention (CDC)	MN Dept. of Health (MDH)	2003	$15,207,539	$6,930,142 to local public health agencies $220,000 to Tribal Governments $150,000 to MN Dept. of Agriculture $50,000 to University of Minnesota $25,000 to Poison Control Center
Centers for Disease Control and Prevention (CDC)	MN Dept. of Health (MDH)	2003	$1,720,080	$573,360 to local public health agencies for Smallpox Response Planning $573,360 to Hospitals for Smallpox Response Planning
Health Resources Services Administration	MN Dept. of Health (MDH)	2003	$8,542,511	$5,792,880 to Hospitals; minimum of 5% set aside for EMS $60,000 to MN Hospital Association $60,000 to EMS Regulatory Board $250,000 to Poison Control Center $300,000 to projects with Statewide impact

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The State of Minnesota
Homeland Security Advisory Council
By
Department of Public Safety
Division of Homeland Security and Emergency Management

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