

# The InfoGram



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## Preparing your community for dangers before and after a disaster

Hurricane season runs into November, meaning we have another couple months that could see potentially damaging storms beyond the impending new threat of Hurricane Irma. Emergency services agencies in impacted areas are encouraged to conduct outreach in their communities early to ensure residents understand the dangers and the steps they can take to reduce the threat to life and property loss.

[Texas will be rebuilding](#) from Hurricane Harvey for some time and as residents return to their neighborhoods and begin cleaning up, they will encounter dangers far different from the winds and rain of the storm. Mold, raw sewage, carbon monoxide, spoiled food, electrical and chemical hazards make up some of the second-string threats people will need to manage.

First responders can recommend several resources to help homeowners after a catastrophic disaster, including “Homeowner’s and Renter’s Guide to Mold Cleanup After Disasters.” Other guides on asbestos cleanup, lead hazards and radon are also available through the [Department of Housing and Urban Development](#). The [Centers for Disease Control and Prevention](#) hosts another site listing precautions for homeowners recovering from floods, hurricanes, tornadoes, wildfires and more.

This information should be provided well before a disaster; if the damage is severe enough, our reliance on technology will turn into a liability and accessibility to such information will be an issue.

This information applies to survivors of disasters other than tropical storms, too. People who have suffered a house fire and the water damage that comes with it, seasonal floods from spring storms, tornadoes, and other disasters may need to manage similar hazards.

(Source: [HUD](#))

## Violence against EMS workers

Recent research shows an estimated 2,600 EMS workers were hospitalized in 2014 due to injuries sustained from work-related violence, the highest number since the National Institute of Occupational Safety and Health (NIOSH) started keeping track in 2008.

Unfortunately, there is a lack of training in most departments on how first responders can prevent or should handle a violent attack. When training personnel on hazards they may face on a medical call, departments should include a section of training on scene safety, situational awareness, self-defense and use of force.

The Firefighters Support Foundation video training “[Self-Defense for Firefighters and EMTs](#)” is available for free through FireEngineering.com. The program has a 90-minute video and 70 PowerPoint slides that can be used for group training or individual review.

Another course available through NIOSH was developed for nurses but targets all healthcare workers, [teaching communication and teamwork skills to prevent violence](#), a skill that can be used in EMS settings just as effectively. This is also a

## Highlights

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Violence against EMS workers

Project Responder 5 updates capability needs to meet modern threats

Webinar: fire suppression during an active shooter incident



U.S. Fire Administration

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

free course.

The [U.S. Fire Administration discusses the repercussions of this research](#), including how important proper collection methods are when reporting violence against EMS workers. It is crucial that violence against all first responders is properly reported. There are also passive prevention methods that are effective overseas that are easy to introduce.

(Source: [U.S. Fire Administration](#))

## Project Responder 5 updates capability needs to meet modern threats

The fifth iteration of the Project Responder series is now available from the Department of Homeland Security (DHS). [Project Responder 5](#) identifies and updates the capability needs of first responders since the last edition in 2014, helping DHS invest in the programs, funding, grants and technology to help first responders do their jobs and go home to their families safely.

Risks and threats to first responders continue to evolve and change and the status quo of planning is not addressing them. Of the 37 identified needs, this review prioritized eight; most of them were related to technology, information gathering and sharing, and electronic communications, such as geolocation of responders; and capturing and managing raw digital information.

Fire, EMS, law enforcement, 9-1-1 and emergency management leadership are encouraged to share this document with their state and local governments, as it will provide them with more insight into the changing landscape faced by first responders and, as a result, their changing needs.

(Source: [DHS](#))

## Webinar: fire suppression during an active shooter incident

Responders to complex attacks and violent incidents are increasingly seeing fire used as a weapon. Though these are thankfully rare events, fire departments should be aware of the constraints of operating within such an event and train for an integrated response, similar to the way emergency medical care has been incorporated into plans.

The International Public Safety Association (IPSA) is hosting "[Fire Suppression During an Active Shooter or Violent Incident](#)" to discuss these situations. Attendees will learn:

- How to establish a training program addressing the integration of fire response.
- The different strategies of operating within the warm zone and hot zone.
- Similarities between medical and fire response at violent incidents.
- How these skills can be used at similar events.

This webinar is scheduled for Thursday, September 14, 2017 from 1-2 p.m. Eastern. [Those interested must register](#). Please see IPSA site for more details.

(Source: [IPSA](#))

The U.S. Fire Administration maintains the Emergency Management and Response – Information Sharing and Analysis Center (EMR-ISAC). For information regarding the EMR-ISAC visit [www.usfa.dhs.gov/emr-isac](http://www.usfa.dhs.gov/emr-isac) or contact the EMR-ISAC office at: (301) 447-1325 and/or [emr-isac@fema.dhs.gov](mailto:emr-isac@fema.dhs.gov).

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