The InfoGram
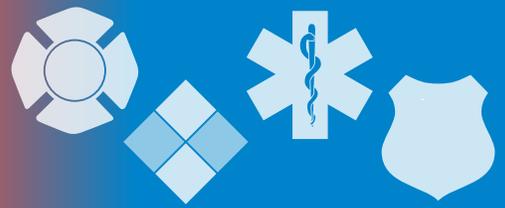
Watchtower app tracks first responders' vital signs, location

The Department of Homeland Security's Science and Technology Directorate (S&T) released a new app that tracks the locations and vitals of first responders using GPS and Bluetooth in smartphones. Watchtower is free to all public safety users.

The Watchtower app could be a game changing addition to accountability tools. Communicating your location to command via radio is both clumsy and difficult, as your location can be regularly changing. In some circumstances you never know if what you are reporting is accurate or understood.

In addition to tracking location, Watchtower monitors heart rate and oxygen levels, potentially identifying life-threatening circumstances requiring evacuation.

Interested agencies can obtain the Watchtower app through the Github site. It is available for both iOS and Android.

(Source: S&T)

Faulty drug field test concerning for officer safety, evidence collection

Last week, a sergeant with the Harris County Sheriff's Office in Texas was hospitalized after reportedly coming into contact with a paper flyer. Flyers were on almost a dozen departmental vehicles and a field test kit showed traces of fentanyl present on the flyer. The officer was treated and released.

However, more extensive lab testing found no traces of fentanyl on any of the flyers. It is unknown why the officer became ill. The investigation is ongoing, but this case raises several concerning questions about the reliability of field test kits.

Some agencies have stopped field testing samples that potentially contained fentanyl in order to reduce the risk of officer exposure. However, many jurisdictions continue field testing. For those agencies, faulty test results may endanger officers, and false test results could also affect evidence collection and criminal cases.

Departments are urged to review their field testing policies and equipment, and should discuss all the potential repercussions of false testing results.

Fentanyl exposure can be deadly, as it is 100 times more potent than morphine. Fire, EMS and law enforcement officers should know the symptoms of fentanyl exposure (PDF, 113 KB), which include trouble breathing, extreme fatigue, dizziness, fainting, pinpoint pupils and respiratory arrest. Naloxone can be used as an antidote, but because fentanyl is so potent, multiple doses may be necessary.

(Source: Houston Chronicle)

IMAAC coordinating federal response to HazMat, CBRNE incidents

The Interagency Modeling and Atmospheric Assessment Center (IMAAC), a consortium of seven federal agencies, develops the federal government's consensus plume model and hazard prediction analysis for nearly any type of chemical, biological, radiological, nuclear and explosive (CBRNE) release, including weapons of mass destruction, toxic industrial chemicals/materials, soot and other products.

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.

Established in 2004 by the White House Domestic Resilience Group, the IMAAC is available 24/7 and is free-of-charge to assist state, local, tribal and territorial officials with models, scientific interpretation and decision support assistance on large-scale incidents (i.e., complex chemistry, complex weather, significant population or environmental exposures, or multiple operational periods). With 30-days advance notice, IMAAC can also provide models and scientific support for plans, training and exercises.

If your governmental jurisdiction is faced with an emergency involving a CBRNE atmospheric release with potential for immediate public health impacts, call the 24/7 IMAAC Technical Operations Hub at (703) 767-2003. For more information, including informational contact points, please see the Federal Emergency Management Agency's (FEMA) IMAAC website or e-mail IMAAC at IMAACInquiries@fema.dhs.gov.

The program is managed by FEMA within the CBRN Office of the Office of Response and Recovery. Participating agencies working collaboratively to develop appropriate hazard prediction products based on scenarios (for exercises and training), or incidents (during real-world events) include FEMA, Department of Energy, National Oceanic and Atmospheric Administration, Environmental Protection Agency, Department of Defense, Nuclear Regulatory Commission, and Department of Health and Human Services.

(Source: IMAAC)

Webinar: Combating Human Trafficking - The Role of Fire and EMS

EMS and fire personnel may see and treat victims of human trafficking or may visit locations where victims are being housed. These visits provide opportunities to identify indicators of potential human trafficking situations, enabling fire and EMS personnel to notify appropriate authorities for further investigation.

Human trafficking is a crime and a human rights violation. Exploited victims are often forced or coerced into labor or sexual abuse situations. Learning common signs and indicators of human trafficking is important to identifying and reporting possible cases.

The U.S. Fire Administration (USFA) and the International Association of Fire Chiefs are hosting a webinar on Thursday, July 12, 2018 starting at 2 p.m. Eastern. "Combating Human Trafficking: The Role of Fire and EMS" will feature experts from the Department of Homeland Security and USFA.

After this webinar, you will be able to define human trafficking, identify trafficking indicators in patients and know how to report trafficking to authorities.

This information is distributed on behalf of the USFA's National Fire Programs Division's Prevention and Information Branch.

(Source: USFA)

DHS and the FBI encourage recipients of this document to report information concerning suspicious or criminal activity to the local FBI office and also the State or Major Urban Area Fusion Center.

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