

Capitol Region Council of Governments



Situational Manual



Operation THREAT²

(Toxic Health Rapid Emergency
Activation to Terrorism)

Tabletop Exercise

April 13, 2011

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Homeland Security Exercise and Evaluation Program



PREFACE

The Operation THREAT² (Toxic Health Rapid Emergency Activation to Terrorism) Tabletop Exercise (TTX) is one component in a series of exercises sponsored by the Capitol Region Council of Governments (CROG). This Situation Manual (SITMAN) was produced with input, advice, and assistance from the Weapons of Mass Destruction (WMD) TTX Exercise Planning Team. The U.S. Department of Homeland Security (DHS) Homeland Security Exercise and Evaluation Program (HSEEP) formed the basis for the methodology utilized by the Exercise Planning Team to develop this TTX.

The SITMAN provides exercise participants all the information necessary to fulfill their roles in the exercise. The SITMAN is tangible evidence of CROG's and Capitol Region Emergency Planning Committee's commitment to ensure public safety through collaborative partnerships that will prepare its members to respond to any emergency.

The Operation THREAT² TTX is an unclassified exercise. Control of exercise information is imposed to address public sensitivities regarding the nature of the exercise, rather than needs to restrict knowledge of the exercise's content. While some exercise materials are intended for exclusive use by select participants, all exercise participants may view this SITMAN.

Exercise participants should use appropriate guidelines to ensure proper control of information within their areas of expertise and protect exercise materials in accordance with directives from their home agency/department and CROG. Public release of exercise materials to third parties is at the discretion of the CROG.



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Exercise Director:

Carmine J Centrella
Public Safety & Homeland Security Regional Planner
Capitol Region Council of Governments
Capitol Region Emergency Planning Committee
241 Main Street
Hartford, CT 06106
860.522.2217 - ext 225 (office)
860.982.9326 (cell)
860.724.1274 (fax)
ccentrella@preparednessplanners.com

Exercise Consultant:

Jeremy Kaufman
Exercise Manager
Tetra Tech, Inc.
415 Oak Street
Kansas City, MO 64106
816.412.1765 (office)
913.638.3678 (cell)
816.410.1748 (fax)
jeremy.kaufman@tetrattech.com

Eric Deselich
Deputy Exercise Manager
Tetra Tech, Inc.
415 Oak Street
Kansas City, MO 64106
816.412.1750 (office)
816.665.9088 (cell)
816.410.1748 (fax)
eric.deselich@tetrattech.com



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INTRODUCTION

Background

The Capitol Region Council of Governments (CRCOG) recognizes the ongoing public threat posed by terrorist organizations and natural disasters. Continuous preparedness efforts are required among partner jurisdictions in Connecticut Department of Emergency Management and Homeland Security (DEMHS) Region 3 to enhance the region's collective response and recovery capabilities. The Capitol Region Emergency Planning Committee (CREPC) has adopted a capability-based planning cycle that fosters continuous improvements. Using regional coordination and collaboration across all levels of government, the Region has successfully integrated many emergency preparedness activities. In doing so, a robust exercise program has been developed to enhance the entire Region's capacity to protect the public from, and mitigate the consequences of, any emergency. Following the successful completion of the Autumn/Political Storm Exercise Series, CREPC is embarking on a new series of exercises based on weapons of mass destruction (WMD) scenarios.

This exercise provides CREPC stakeholders an opportunity to test the Region's Emergency Support Function (RESF)-8 capabilities (e.g., epidemiological surveillance, communications, forward movement of patients, and mass prophylaxis) and linked capabilities. The exercise is designed to stress community resource levels and local emergency operations plans. The exercise also serves as a forum to expand and/or revise existing emergency operations plans. In addition to follow-up workshops, functional (FE) and tabletop (TTX) exercises are planned for June and October 2011, respectively—which will complete the WMD series of exercises.

Purpose

The purpose of the Operation THREAT² (Toxic Health Rapid Emergency Activation to Terrorism) TTX is to provide participants an opportunity to evaluate current response concepts, plans, and capabilities for response to a large-scale biological incident that was deliberately initiated. The CREPC and its emergency management partners will assess functions related to RESF-8—including command and control coordination, critical decision-making, notification procedures, and integration of state and federal assets necessary to save lives and protect public health and safety. Exercise evaluation will be conducted in accordance with the Regional Emergency Support Plan (RESP), North Central Coordinated Medical Emergency Direction (C-MED) Mass Casualty Incident (MCI) Communication Procedures, State of Connecticut Consequence Management Plan for Deliberately Caused Incidents Involving Chemical Agents (CMP), Connecticut's The Forward Movement of Patients (FMOP) plan, State of Connecticut Mass Decontamination Mobilization Plan (Decon Plan), Capitol Region Metropolitan Medical Response System Plan (MMRS) - Responding To the Release of a Biological Agent (CR-MMRSP), and State of Connecticut Public Health Emergency Response Plan (CT PHERP). Local jurisdiction will also respond according to their local emergency operations plan.

Scope

Exercise players will follow the RESP, MCI, CMP, CR-MMRSP, FMOP, Decon, and CT PHERP plans, as well as their own department-specific policies, plans, and procedures, while discussing their likely response to scenario events. The TTX format does not require actual activation or deployment of resources. The primary objective of the exercise is to identify issues involving an ESF-8-centric regional response to a biological agent attack. Following the Homeland Security Exercise Evaluation Program (HSEEP) building block approach, this TTX and follow-on exercises will provide a cycle of increasingly



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complex response actions that build upon lessons learned from previous exercises. Each exercise plays an integral role in the Region's comprehensive exercise program.

Target Capabilities

National Planning Scenarios and establishment of National Preparedness Priorities have steered homeland security preparedness toward a capability-based planning approach. A capability-based planning process acknowledges that major incidents and disasters cannot be forecast with any degree of certainty. Therefore, capability-based planning takes an all-hazards approach to preparedness by building capabilities that can be applied to a wide variety of incidents. States and urban areas assess their homeland security efforts by comparing their current capabilities against recommended levels provided in the Target Capabilities List (TCL) and critical tasks of the Universal Task List (UTL). This approach identifies gaps and focuses efforts on improving capabilities in a prioritized manner across multiple jurisdictions. These priority capabilities are articulated in the Region's homeland security strategy and Multi-Year Training and Exercise Plan, of which this exercise is a component.

Capabilities listed here have been selected by the Exercise Planning Team from the priority capabilities identified in the CREPC's pending Multi-Year Training and Exercise Plan. These capabilities provide the foundation for development of the exercise's overall design objectives and the exercise scenario. The purpose of this exercise is to validate performance of these capabilities and their associated critical tasks. The following target capabilities have been selected for this exercise:

- Emergency Triage and Pre-Hospital Treatment
- Medical Surge
- Mass Prophylaxis
- Epidemiological Surveillance and Investigation
- WMD/Hazardous Material Response and Decontamination

Exercise Design Objectives

Exercise design objectives focus on improving effectiveness of: (1) regional command and control functions, (2) response plans, and (3) resource integration during region-wide operations. The following exercise design objectives were developed by the Exercise Planning Team:

- **Plans.** CREPC stakeholders will respond according to roles and responsibilities outlined in the following plans:
 - ✓ State of Connecticut Consequence Management Plan for Deliberately Caused Incidents Involving Chemical Agents
 - ✓ Region 3 Mass Casualty Incident
 - ✓ State of Connecticut Mass Decontamination Mobilization Plan
 - ✓ State of Connecticut Forward Movement of Patients
 - ✓ Capitol Region Metropolitan Medical Response System Plan, Response to a Release of a Biological Agent
 - ✓ Public Health Emergency Response Plan
 - ✓ Regional Emergency Support Plan
 - ✓ Local emergency response plans/procedures



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- **Notification.** CREPC stakeholders will alert, activate, and mobilize personnel, facilities, resources, and systems required to support a large-scale response to a WMD incident affecting Region 3 jurisdictions in accordance with plans, policies, and procedures.
- **Incident Command System.** Incident managers will organize local, state, regional, and federal response partners and key stakeholders to effectively communicate and coordinate among public health and emergency management disciplines through established emergency response protocols—including use of state, regional, and local emergency operations centers (EOC) in accordance with plans, policies, and procedures.
- **Public Health.** RESF-8 stakeholders and support RESFs will implement appropriate epidemiological and mass prophylaxis procedures to neutralize a developing WMD/biological incident.

Participants

- **Players.** Players respond to the situation presented, based on expert knowledge of response procedures, current plans and procedures, and insights derived from training.
- **Observers.** Observers support the group in developing responses to the situation during the discussion; however, they are not participants in the moderated discussion period.
- **Facilitators.** Facilitators provide situation updates and moderate discussions. They also provide additional information or resolve questions as required. Key Exercise Planning Team members also may assist with facilitation as subject matter experts (SME) during the TTX.
- **Evaluators.** Evaluators are members from participating departments and agencies who are not participating in the exercise. Evaluators have been chosen based on their expertise in the functional areas they review during the exercise. Evaluators have a passive role in the exercise and only note the actions of players. They do not interfere with the flow or events of the exercise.

Exercise Structure

This TTX will be a multi-media, facilitated exercise using a modular approach. Players will be organized and encouraged to participate in facilitated discussions associated with the following two modules:

- **Module 1: Roles, Responsibilities, and Resources:** The first module examines regional response actions and resource coordination needs regarding operations during a bioterrorism incident. Participants will determine the applicable elements of existing operational plans and how the plans support response efforts. Any changes to response operations made during Module One will be noted by the Command and General Staffs and implemented in Module Two.
- **Module 2: Response Operations:** The second module focuses on local, state, federal and private stakeholders' operational elements. The module will focus on RESF-8-specific resources and operational challenges. Exercise players will be provided with an evolving scenario in an effort to evaluate the regional equipment, staff, infrastructure, and plans available for public health and medical operations for WMD investigation and mitigation activities.

At a minimum, the modules will engage preparedness and planning information directly related to the following:

- Equipment, staff, and infrastructure needed for effective and sustainable operations



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- Existing plans/processes and potential modifications necessitated by response to a bioterrorism incident.

Each module will begin with a multi-media update that summarizes key events occurring within that time period. After the presentation, participants will review the situation and begin functional group discussions of appropriate response issues. For the Operation THREAT² TTX, the functional groups will be as follows:

- Command and General Staff/RESF-5 (Emergency Management)
 - Local emergency management directors (located in close proximity to RESF-5)
- RESF-8 (Public Health and Medical)
 - ✓ Hospitals
 - ✓ C-MED/Emergency Medical Services
 - ✓ Medical Reserve Corps/Metropolitan Medical Response System
 - ✓ Public Health
 - ✓ Mental Health
- Non-RESF 5 and 8 participants
- Private Sector Representatives.

After functional group discussions, participants will engage in a facilitated caucus discussion in which a spokesperson from each group will present a synopsis of the group's actions based on the scenario. Participation from all organizations is strongly encouraged; however, the group spokespersons will present consensus findings.

Exercise Guidelines

- This TTX will be held in an open, low-stress, no-fault environment. Varying viewpoints, even disagreements, are expected.
- Respond on the basis of your knowledge of current plans and capabilities.
- Decisions are not precedent setting and may not reflect your organization's final position on a given issue. This exercise is an opportunity to discuss and present multiple options and possible solutions.
- Issue identification is not as valuable as suggestions and recommended actions that could improve response and preparedness efforts. Problem-solving efforts should be the focus.

Exercise Location

- The Operation THREAT² TTX will be held at the Sheraton East Hartford at 100 East River Drive in East Hartford, Connecticut.

Assumptions and Artificialities

In any exercise, assumptions and artificialities may be necessary to complete play in the time allotted. During this exercise, the following apply:

- The scenario is plausible; and events occur as presented.



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- The scenario is designed to test preparedness and response coordination at the sub-state level; therefore, state and federal exercise participants will not drive decision-making processes.
 - Exercise participants use protocols and procedures outlined in the RESP, MCI, CMP, and FMOP plans, as well as relevant plans and procedures used by their respective agencies/departments.
 - There is no hidden agenda, and there are no trick questions.
 - All players receive information at the same time.
 - Make decisions based on the circumstances presented.



MODULE 1: ROLES, RESPONSIBILITIES, AND RESOURCES

People and events in this scenario are fictional, and any resemblance to real persons or events is entirely coincidental. Module 1 does not include a detailed scenario per se but describes the circumstances and initial response actions surrounding a developing incident. The following information is provided by the Exercise Design Team for this exercise:

April 11, 2011: 0900 Hours

An anonymous call was received by the Hartford Courant at 0815 from an individual. The caller stated that “attacks” had been made on colleges in the state by adulterating food products provided through a private food distributor used by the schools. The man claimed a “biological agent” was added to foods likely consumed the prior Thursday and Friday. The caller also claimed a “second attack is happening now” that would “bring the schools to their knees” for the unfair treatment he received.

Although evidence regarding the “attack” is still being collected, hospitals and health care providers in Region 2 (New Haven) and Region 3 (Hartford) have reported a sudden rash of severe gastrointestinal (GI) illness that began last night. Preliminary reports from the Connecticut Department of Public Health (CDPH) indicate that 300 patients are experiencing nausea, vomiting, and fever progressing to severe abdominal pain, hematemesis (vomiting of blood), and diarrhea that is bloody in some cases. Several medical facilities have sent cultures to the State laboratory after their own laboratory recognized an unusual organism growth. No laboratory results are available for any patients at this time.

Notice of the call was disseminated to the law enforcement community by the Connecticut Intelligence Center (CTIC). The RESF-5 Duty Officer in consultation with the RESF-8 chair ordered a partial establishment of the Regional Coordination Center (RCC) at Manchester (notional as represented by today’s venue). You have been summoned through the Regional Integrated Coordination System (RICS) to develop a response strategy. This includes local efforts to develop planning documents, assemble epidemiology teams, conduct surveillance, and assemble preliminary data.

Key Issues

- Most—but not all victims—have eaten at a college cafeterias in/near Hartford or New Haven.
- Epidemiologists have not conducted surveillance activities to this point.
- Preliminary field testing of suspected foods indicate the presence of a protein-containing contaminate; and no chemical or radiological materials were detected.
- Environmental field samples and patient cultures (blood and stool) have been provided to the State Lab.
- The response thus far has been local; State resources are just beginning to mobilize.
- News media is covering the story of unexplained illnesses as probable “food poisoning” but the Hartford Courant and other news outlets have not reported on the terrorist threat.

Questions

Based on the information provided, participate in group discussions at your table concerning the key issues raised in Module 1. Identify any additional requirements, critical issues, decisions, and/or questions that should be addressed at this time regarding direction, control, and resource allocation. The



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following questions are suggested as discussion topics that you may wish to address. These questions are not intended as a definitive list of concerns, nor is there a requirement to address every question.

Discussion Set 1: Incident Management

Focus Discussion – 10 minutes, Group Discussion – 20 minutes

Questions removed until the TTX.

Discussion Set 2: Mass Prophylaxis

Focus Discussion – 10 minutes, Group Discussion – 20 minutes

Questions removed until the TTX.

Discussion Set 3: Medical Surge

Focus Discussion – 10 minutes, Group Discussion – 20 minutes

Questions removed until the TTX.



MODULE 2: RESPONSE OPERATIONS

April 12, 2011: 1600 Hours

Scenario removed until the TTX.

April 13, 2011: 1045 Hours

Scenario removed until the TTX.

Questions

Based on the information provided, participate in a group discussion at your table concerning the key issues raised in Module 2. Identify any additional requirements, critical issues, decisions, and/or questions that should be addressed at this time regarding direction, command and control, and resource allocation. The following questions are provided as discussion topics that you may wish to address. These questions are not intended as a definitive list of concerns, nor is there a requirement to address every question.

Discussion Set 4: Incident Management

Focus Discussion – 10 minutes, Group Discussion – 20 minutes

Questions removed until the TTX.

Discussion Set 5: Mass Prophylaxis

Focus Discussion – 10 minutes, Group Discussion – 20 minutes

Questions removed until the TTX.

Discussion Set 6: Medical Surge

Focus Discussion – 10 minutes, Group Discussion – 20 minutes

Questions removed until the TTX.



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APPENDIX A: ACRONYM LIST

Term	Definition
CDC	U.S. Centers for Disease Control and Prevention
CDPH	Connecticut Department of Public Health
C-MED	Coordinated Medical Emergency Direction
CMP	Consequence Management Plan for Deliberately Caused Incidents Involving Chemical Agents
CRCOG	Capitol Region Council of Governments
CREPC	Capitol Region Emergency Planning Committee
CR-MACU	Capitol Region Mobile Ambulatory Care Unit
CR-MRC	Capitol Region Medical Reserve Corps
CT PHERP	State of Connecticut Public Health Emergency Response Plan
CTIC	Connecticut Intelligence Center
DEMHS	Connecticut Department of Emergency Management and Homeland Security
DHS	U.S. Department of Homeland Security
EMS	Emergency Medical Services
EOC	Emergency Operations Center
FE	Functional Exercises
FMOP	Forward Movement of Patients
FOUO	For Official Use Only
GI	Gastrointestinal
HSEEP	Homeland Security Exercise and Evaluation Program
IC	Incident Commander
JIC	Joint Information Center
JIS	Joint Information System
MCI	Mass Casualty Incident
POD	Point of Distribution
RCC	Regional Coordination Center
RESF	Regional Emergency Support Function
RESP	Regional Emergency Support Plan
RICS	Regional Integrated Coordination System
SITMAN	Situation Manual
SME	Subject matter expert
SNS	Strategic National Stockpile
SOG	Standard Operating Guidelines
TCL	Target Capabilities List
THREAT ²	Toxic Health Rapid Emergency Activation to Terrorism
TTX	Tabletop exercise
UC	Unified Command
UTL	Universal Task List
WMD	Weapons of Mass Destruction