

Civil Emergency Planning

Plans civils d'urgence

Project on

Minimum Standards and Non-Binding Guidelines for First Responders Regarding Planning, Training, Procedure and Equipment for Chemical, Biological, Radiological and Nuclear (CBRN) Incidents

GUIDELINES FOR FIRST RESPONSE TO A CBRN INCIDENT



NATO Civil Emergency Planning Civil Protection Committee

CIVIL EMERGENCY Planning

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Foreword

The consequences of Chemical, Biological, Radiological and Nuclear (CBRN) emergencies may stretch national capabilities to their maximum extent. Responsibility for first response remains with individual nations. It is essential that nations build on their resources to respond and mitigate the consequences of an emergency situation to lives, property and the environment. Due to the nature of CBRN incidents, particularly their trans-national effects, co-operation between Euro-Atlantic Partnership Council (EAPC) nations is necessary. The development and adoption of Non-Binding Guidelines and Minimum Standards facilitates and improves national responses and mutual assistance.

The initiative to develop Non-Binding Guidelines and Minimum Standards for First Responders regarding planning, training, procedures and equipment for CBRN incidents, stems from the EAPC Seminar on responses to terrorism which was held in Warsaw in February 2002. It was subsequently included in the Civil Emergency Planning related section of the Weapons of Mass Destruction (WMD) Initiative Stocktaking Report adopted at the Reykjavik Ministerial in May 2002.

The purpose of the initiative is to provide general guidelines that EAPC nations may draw upon on a voluntary basis in order to enhance their preparedness to protect their civilian populations against Chemical, Biological, and Radiological and Nuclear (CBRN) risks. Such guidelines seek to improve understanding and interoperability between nations, thereby contributing to greater efficiency in the use and delivery of national and international assistance, ultimately enhancing interoperability.

The project fills a void at national and international level for consequence management (CM) planning, training, procedures and functional equipment for first responders. National legal responsibilities may be divided in substantially different ways; there can be no universal solution for CBRNrelated civil emergency planning. Likewise, the mandates of first responders involved in emergency response may be formulated in substantially different ways from one nation to another. These guidelines are therefore generic in nature. They serve to establish a lowest common denominator through best practice and shared lessons learned.



Introduction

The aim of the response quidelines is to establish procedural guidelines for midlevel strategic/tactical planners responsible for CBRN preparedness and response. The response quidelines provide generic advice and guidance on procedures, capabilities and equipment required to implement an effective response. They are designed to improve multi-agency interoperatbility in first response to a CBRN incident and provide guidance on when regional, national or international assistance may be required. The guidelines have been prepared to help planners in EAPC nations determine their own level of capability through self-assessment. They serve as a checklist. Implementation of the quidelines is entirely optional.

Rather than aiming for standardisation, the response guidelines focus on developing a common understanding of the actions

required during the initial response phase (20mins).

In order for a response to be fully integrated it is vitally important that deliberate and effective pre-planning takes place between members of all responding agencies at local, regional, national and, where appropriate, international level.

The development of regular training designed to test agreed roles, responsibilities, capabilities and protocols is also an essential component of the pre-planning process and will provide opportunities for all agencies to develop further their combined response to a CBRN emergency.

The response guidelines are presented as a matrix divided into four sections. They are generic in nature and relate to procedures, capabilities and equipment¹ required to implement an effective response.



¹ Equipment in this project refers to its functional aspects as opposed to recommending specific items.

1. Information gathering, assessment and dissemination

Recognising that a CBRN has, or may occur is critical. Information may be received and disseminated via a number of routes, including intelligence agencies, the public, emergency service control rooms, pre-determined risk information contained in operational response plans, labelling of hazardous substances and transportation containers, first responder observations of signs and symptoms (victims, animals, plants, the surrounding environment).

2. Scene management

The scene should be isolated to mitigate consequences. Effective scene management ("Hot-zone" management) is required to control access to and from the incident scene, control movement of contaminated victims, provide safe working methods for responders and contain the release of any substances.

3. Saving and protecting lives

Saving lives is the top priority of all responding agencies. Contamination of victims/casualties must be considered as part of the initial assessment and effective methods for rescue, decontamination and medical treatment must be provided. The provision of timely warnings and/or evacuation of the public where appropriate, may also contribute to saving lives by reducing the risk of exposure.

4. Additional/specialist support.

Following the immediate operational response, specialist advice should be sought to assist with consequence management. This may include hazard identification or confirmation and establishing levels of contamination, medical support, transport and treatment of casualties and supplementing emergency service resources. Where necessary, regional, national and international resources can also be used to maintain or provide a sufficient level of emergency provision and response. Specialist advice and resources may also be required as part of the recovery management phase, including the provision of long term health monitoring, psychological support, building and environmental decontamination. re-establishing public confidence and supporting a return to normality.

For clarity, the term "First Responders" refers to individuals and teams that are involved in activities which address the immediate and short-term effects of a CBRN emergency. This includes on-scene personnel from the police, fire brigades and health services acting to minimise the consequences of a CBRN-emergency. It also includes personnel in hospitals, crisis management institutions and those involved in detection, verification and warning.

1. INFORMATION GATHERING: Gather, assess and disseminate all available information

Gather, assess and disser	ninate all available informat	ion
Procedure	Capability	Equipment
Call centres and mobilising centres		
 ecognise that a CBRN incident has or may occur Gather, assess and disseminate all available information to first responders Establish an overview of the affected area Provide and obtain regular updates to and from first responders 	 CBRN awareness training for call takers Method of gathering information (public, intelligence etc) Method of sharing information between responding agencies Pre-determined level of response to (suspected/ confirmed) CBRN incidents 	 Questionnaire Information technology Direct telephone lines Radios Geographical information (maps) Response plans for specific risks
 First Responders Approach and arrival at scene Approach scene with caution and upwind Carry out scene assessment Establish Incident Command (each responding agency) Recognise signs and indicators of CBRN incidents Determine whether CBRN or hazardous material incident Estimate number of casualties/ victims 	 CBRN awareness training for responders Weather information Knowledge and understanding of risk assessment Knowledge and understanding of response to improvised explosive devices Knowledge and understanding of roles, responsibilities and capabilities of each responding agency 	 Personal Protective Equipment (PPE) Chemical, Biological and Radiological Detection, Identification and Monitoring Equipment (for personnel, boundary monitoring and analysis) Pocket and/or emergency response guides Inter-operable communications equipment (eg. handheld
 Estimate resource requirements Consider specialist advice/ resource requirements 	 Effective inter-agency coordination on-site Common command system 	radios) • Main scheme radios • Geographical information

and structure

 Geographical information (maps)

Procedure

- Provide situation report to emergency control rooms etc and request assistance if necessary
- Carry out risk assessment
- Undertake hazard identification
- Do not approach or touch suspect objects/packages— do not operate radios, mobile phones or other electronic devices within vicinity (safe distance +/-400m)
- Consider secondary devices/ targets
- Establish and agree multiagency response plan
- Identify safe areas for additional first responder vehicles
- Search for secondary devices
- Critical infrastructure considerations

Capability

- Multi-agency communication channels
- Knowledge of geographical area
- Search capability
- Analysis capability
- Knowledge of facilities and critical infrastructure
- Protection of unaffected critical infrastructure and key sites (local, regional, national targets)

Equipment

 Response plans for specific risks





2. SCENE MANAGEMENT:

Isolate scene to mitigate consequences

Procedure	Capability	Equipment
 Initial: Consider wind direction Establish multi-agency command point in safe area (cold zone) Establish inner and outer cordon (hot/warm/cold zone) 	 Common command system and structure Knowledge and understanding of hot/warm/cold zone 	 Pocket and/or emergency response guide Detection, Identification and Monitoring Equipment (for personnel, boundary monitoring and analysis) Personal Protective Equipment (respiratory protection, chemical protection suits) Cordon tape and signage
Containment: • Contain contaminant material/ liquid • Establish quarantine(holding) area for contaminated victims/ casualties (where necessary) • Establish decontamination and triage areas • Cordon off contaminated areas	 Knowledge and understanding of signs, symptoms and effects of substances (chemical, biologicial and radiological) Knowledge and understanding of Hazmat management Knowledge and understanding of decontamination (emergency, mass, clinical) 	 Pocket and/or emergency response guide Cordon tape, signage, barriers Detection, Identification and Monitoring Equipment (for personnel, boundary monitoring and analysis) Personal Protective Equipmen (respiratory protection,
	Knowledge and understanding of medical triage	 chemical protection, chemical protection suits) Decontamination equipment (emergency, mass, clinical) Shelter for victims/casualties form adverse weather

Procedure

Additional considerations:

- Identify and establish multiagency marshalling area for additional resources
- · Establish traffic cordon
- Preserve scene and maintain evidence to the extent possible (criminal investigation)
- Carry out co-ordinated
 evidence collection

Capability

- Identify sites/locations to accommodate large numbers of multi-agency vehicles and resources
- Use pre-determined sites/ locations where possible.
- Use available/suitable space with solid foundation
- Knowledge and understanding of scene preservation for criminal investigation (evidence, forensics)
- Effective exhibit handling

Equipment

- Cordon tape, signage and barriers
- Recording equipment (Video/ still cameras)
- Evidence bags
- Detection, Identification and Monitoring Equipment (for personnel, boundary monitoring and analysis)



3. SAVING AND PROTECTING LIVES: Saving lives, giving warnings or managing evacuation

Procedure	Capability	Equipment
 Procedure Determine immediate actions and priorities Evacuate inner cordon (to quarantine area) Restrict inner cordon access (protected first responders only) Provide safe working methods for rescuers Carry out necessary rescues Implement decontamination as appropriate (emergency, mass, clinical) Consider decontamination of personal property Implement medical triage and treatment Implement responder/rescuer decontamination Consider requirements and provide transport for victims/ casualties 	 Weather information Knowledge and understanding of decontamination (emergency, mass, clinical) Knowledge and understanding of medical triage Sufficient numbers of trained personnel to provide rescue, decontamination, medical support and operational scene management Safe working methods for hot zone personnel (recording entry and duration of exposure) Transportation of contaminated victims/casualties Methods for communicating timely advice/warnings to the public Emergency evacuation plans Effective links with utility 	Equipment Personal Protective Equipment (respiratory protection, chemical protection suits) Recording system for hot zone personnel Decontamination equipment (emergency, mass, clinical) Personal property bags (for belongings of decontaminated victims) Post decontamination clothing for victims Detection, Identification and Monitoring Equipment (for personnel, boundary monitoring and analysis) Medical treatment (trauma, prophylactics etc) Transport (ambulance, bus etc) Cordon tape, signage and barriers
decontaminationConsider requirements and provide transport for victims/	timely advice/warnings to the public • Emergency evacuation plans	prophylactics etc) • Transport (ambulance, bus etc) • Cordon tape, signage and

4. ADDITIONAL/SPECIALIST SUPPORT:

• Consider emergency provision requirements for immediate

Alert specialists, notify app	propriate authorities, integrate s	pecialist advice and resources
Procedure	Capability	Equipment
Notification:		
 Notify appropriate authorities at local, regional and national level (governmental and responder agencies) Notify specialists (chemical, biological, radiological/nuclear, medical) Consider international support and conventions (IAEA, WHO, OPCW) Provide situation reports to all notifications 	 Pre-agreed responsibilities for notification Scientific support (chemical, biological, radiological/nuclear, medical) Local, regional, national response plans Methods to request regional, national and international support Bilateral agreements (cross border assistance) Methods to transport specialists to required location 	 List of notifications (specialists etc) for mobilising centres Information technology Direct telephone lines Geographical information (maps) Response plans for specific risks Transport of specialists
 Assessment: Prepare impact assessment (en-route/on site) Establish effect on population Establish effect on critical infrastructure Establish effect on environment Carry out incident specific and environmental sampling Hazard prediction Dispersion modelling Radiation monitoring 	 Prediction (dispersion modelling) Plan for short, medium and long term actions and effects Analyse samples Knowledge of critical infrastructure locations Pre-established agreement to augment resources (private industry, public service, international aid/support) 	 Detection, Identification and Monitoring Equipment (for personnel, boundary monitoring and analysis) Geographical information (maps) Response plans for specific risks Critical infrastructure site locations Hazard Prediction tools Meteorological equipment

4. ADDITIONAL/SPECIALIST SUPPORT: (continued) Alert specialists, notify appropriate authorities, integrate specialist advice and resources

Procedure	Capability	Equipment
and wider area • Assess resource requirements (short, medium and long term)		
Integration of support:		
 Specialist advice and/or additional resources to be incorporated into incident plan 	 Common command system and structure Welfare and accommodation for responders 	• Provision of food and drink, administration facilities, sleeping accommodation for responders and supporting resources
Substance identification:		
Substance confirmation	Additional analysis capability	 Designated laboratories
Victim/casualty support:		
 Provide information to hospitals Provide clinical countermeasures Provide information to General Practitioners 	 First aid and treatment centres Post incident clinical counter measures Post incident medical care Sufficient numbers of trained personnel to provide (short 	 Pre-identify potential accommodation Prophylactics etc Information technology Dedicated telephone numbers/ lines
 Provide health surveillance (short-medium term) Provide emergency accommodation Establish casualty bureau 	– medium term) medical support, casualty bureau staff	 Provision of food and drink, sleeping accommodation and administration facilities for victims
Information to public:		
 Implement communication plan Provide timely warnings or advice to public Provide regular updates Provide health advice to public 	 Pre-agreed communication plan Pre-agreed communication channels/method Pre-agreed advice (what to do, where to go, what to expect etc) 	 Prepared literature Website SMS-message Use of media (television, radio)

Procedure

Site decontamination/ restoration and remediation:

- Decontaminate responder vehicles/equipment
- · Decontaminate hospitals
- Recover and decontaminate contaminated bodies
- Decontaminate/restore
 affected buildings
- Decontaminate and remediate
 impact on environment
- · Dispose of medical waste
- Dispose of site waste/rubble

Post incident and long term considerations:

- Provide multi-agency
 debriefings for all responders
- Provide psychological counselling for victims and responders
- Provide long term health monitoring (victims and responders)

Capability

- Environmental impact assessment
- Declared environmental/ infrastructure decontamination capability
- Legal powers of enforcement regarding building and environmental decontamination
- Effective staged implementation plan
- Mass fatality plan
- Body identification
- Waste/rubble removal
- · Critical incident debriefing
- Psychological counselling (responders, victims, affected population)
- Large scale health monitoring
- · Liaison with family
- Long term accommodation
- · Financial assistance for victims

Equipment

- Detection, Identification and Monitoring Equipment
- Specialist equipment and personnel to decontaminate large sites
- Mortuaries for contaminated bodies
- Personnel and equipment to remove contaminated waste/ rubble

- Network of counsellors
- Health monitoring facilities
- Temporary/permanent accommodation
- Fund raising facilities



Notes

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