

## Protecting ESS from biological events

Bice/Stephens

*A biological attack on an unprepared nation is likely to disrupt the nation's security, hospitals, public health services, critical infrastructure and the emergency services sector (ESS). The Graham-Talent commission stated "it is more likely than not that a weapon of mass destruction [most likely a biological weapon] will be used in a terrorist attack somewhere in the world by the end of 2013."*

The nation must prepare now in order to ensure that we build resilient communities before a significant attack. Resilient communities must have resilient emergency services. Emergency services personnel provide security, care for the sick and injured, extinguish fires, haul trash, provide water and ensure all the basic services in a community. Emergency services are the front lines for the preservation of human life and infrastructure, workers and their families who provide services within this group must be protected in order to provide critical services during times of an intentional or naturally occurring event.

Emergency services personnel are going to be among the first exposed in an event, and need the earliest possible access to countermeasures. The time is ripe to provide emergency services personnel caches of pre-positioned personal and institutional medical countermeasures. The existing processes developed since 2004 to distribute medkits to postal workers can be extended to exceptional good purpose in the protection of our fire, police, emergency medical, ambulance, public works, law enforcement and critical infrastructure personnel, i.e. the emergency service sector.

In an age of asymmetrical threats, where the "battlefield" extends far from foreign fields into all communities we must take advantage of our strengths, in this case our innovations in medical protection and stockpiling. The Graham-Talent commission described in detail our lack of preparedness to ensure the continuity of government and civil society in the event of a biological attack. Innovation and new methods will be needed.

The Strategic National Stockpile, the Biological Advanced Development and Research Authority and the Metropolitan Medical Reserve System are all mature systems capable in combination of devising a new level of protection for the nation, through protecting the emergency services sector. Insert sentence about Chempack. Insert sentence about the strategic necessity of having materiel at the disposal of **local** incident command staff.

Current methods of distributing countermeasures have yet to prove capable of meeting all national goals. New supplementary approaches are required, among them a program to ensure the protection of the emergency services sector, to ensure the continuity of civil society.

*A more fundamental review is warranted* if as a nation we want a medical countermeasure system that will protect us through the potential threats of the 21st century. The alphabet stew of programs (CRI, MMRS, BARDA) were conceived separately and remain largely separate. The current review provides the emergency services sector and the Federal agencies an opportunity to improve our national protection. It must have a perspective larger than the federal government and be developed from end user's perspective.

A medical countermeasure program that does not protect the emergency services sector first is, at a minimum insufficient and arguably negligent. The very people charged with ensuring the continuity of all systems must be central in the conception of how the program is run and be a central part of the answer to why the program exists.

The current national investment in stockpiling of more than \$1B per year can be significantly enhanced by making an internal adjustment by redistributing essential protective countermeasures to community caches.