

MEETING THE NEEDS OF AMERICA'S CRUCIAL FIRST RESPONDERS

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The September 11 attacks on the World Trade Center and the Pentagon and the subsequent Anthrax attacks against Members of Congress and the media prove that terrorists are both capable of using weapons of mass destruction (WMD) and willing to do so. In this environment, improving the ability of America's first responders to mitigate the consequences of a WMD terrorist attack is vital to increasing the nation's overall level of domestic preparedness.

Fire, Emergency Medical Service (EMS), and police departments will nearly always arrive at the scene of a terrorist attack before federal or state agents. They also will play a dominant role in managing the crisis and its consequences. As a case in point, on September 11, members of the Arlington County, Virginia, fire department were the first to respond to the attack on the Pentagon, and they managed the response until the fire was extinguished and they had been able to determine that the area was safe to enter. In the case of an attack using chemical, biological, radiological, or nuclear (CBRN) weapons, the public-health sector could be the first to detect the attack and would play a critical role in consequence management.

Regrettably, federal support for the first-responder community has lacked a comprehensive and cohesive strategy since the first large-scale pro-

gram of financial and training assistance was authorized by Congress in 1996. Instead, federal programs to support this vital sector have developed in fits and starts and have frequently been influenced more by budgetary politics and turf wars than by a vision of accomplishing their goal. As a result, too few of America's first responders are prepared for a CBRN incident. Making matters worse, coordination among the numerous federal agencies involved has been dangerously deficient.

President George W. Bush and the Office of Homeland Security, however, have recognized the vital role that first responders and public-health entities play in securing the American homeland and have devoted significant attention to improving their readiness. The President's requested budget for fiscal year (FY) 2003 includes \$3.5 billion to

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assist first responders, an increase that is greater than 10 times the amount spent in previous budgets.¹ Additionally, the President's budget request entails the consolidation of Department of Justice (DOJ) and Federal Emergency Management Agency (FEMA) first-responder support programs under FEMA.

This down payment and realignment will help improve preparedness among the nation's first responders, but it cannot correct all of the deficiencies in first-responder training. To increase WMD preparedness in the first-responder community for the long term, the federal government should:

- **Make** training and assistance programs more accessible and more realistic;
- **Incorporate** all these programs within a single national assistance plan; and
- **Utilize** the National Guard, whose many highly trained individuals are well-positioned to take on a significant role in helping to train America's first responders.²

A HISTORY OF DISORGANIZATION

Throughout the 1990s, a number of steps were taken in response to incidents of large-scale terrorism committed during the first half of the decade,³ resulting in legislation and entities that were sometimes duplicative or overlapping.

In 1996, Congress passed the Defense Against Weapons of Mass Destruction Act, also known as the Nunn–Lugar–Domenici amendment, as part of the National Defense Authorization Act of FY97.⁴ The Act authorized funding for the Department of Defense (DOD) to initiate a federal program to increase the preparedness of America's first responders to counter WMD terrorist attacks. The Domestic Preparedness Program (DPP) that emerged as a result of this amendment included

provisions for grants and direct training for first responders in America's 120 largest cities.

In 1996, Congress also passed the Antiterrorism and Effective Death Penalty Act,⁵ authorizing the Attorney General to provide training and equipment to fire and emergency services departments to combat terrorism. In 1998, Attorney General Janet Reno created the Office for State and Local Domestic Preparedness as part of the Office of Justice Programs to manage the DOJ's increasing responsibility in this area.

In other words, in 1996, Congress effectively assigned two federal agencies nearly the same mission.

In August 1998, Attorney General Reno met with representatives of the first-responder community in a stakeholders conference to discuss federal assistance programs. In response, the Attorney General created the National Domestic Preparedness Office (NDPO) as a hub for an interagency coordination effort.

The participants in the conference recommended that federal WMD assistance be coordinated by a single office. In this capacity, the NDPO does not actually engage in training or funding; it is designed to coordinate federal programs and to make the first-responder community aware of the programs the federal government offers. However, a lack of coordination and insufficient awareness among the entities of the first-responder community continues to plague federal assistance efforts.

Complicating matters further, in 1995, President Bill Clinton assigned FEMA as the lead federal agency for consequence management in the event of a terrorist attack, but Congress gave FEMA only a consultative role in both DOD and DOJ programs. In its presidentially designated role as the nation's primary response agency, FEMA has also instituted

1. The White House, Office of the Press Secretary, "Supporting First Responders Strengthening Homeland Security," January 24, 2002, at <http://www.whitehouse.gov/news/releases/2002/01/20020124-2.html>.
2. For a complete analysis with recommendations on how the National Guard should contribute to first responder training, see Jack Spencer and Larry M. Wortzel, "The Role of the National Guard in Homeland Security," Heritage Foundation *Background* No. 1532, April 8, 2002.
3. Primarily, the 1993 World Trade Center bombing, the 1995 Oklahoma City bombing, and the Sarin gas attack on the Tokyo subway by the Aum Shinrikyo cult.
4. Public Law 104–21.
5. Public Law 104–132.

a WMD-related grant program and launched a number of educational initiatives through its National Emergency Training Center, which includes the National Fire Academy and Emergency Management Institute.

Additionally, various other federal agencies have become involved in first-responder training for WMD attacks. The Department of Defense, while surrendering the Domestic Preparedness Program, continues to offer a number of programs to support first responders. The Army's Soldier and Biological Chemical Command (SBCOM) continues to host annual field exercises, and the Army Medical Research Institute for Chemical Defense offers chemical weapons-related training programs for health-care providers. The Department of Energy, Department of Health and Human Services, Department of Transportation, Environmental Protection Agency, and other agencies also play secondary roles in providing support for first responders.

Because the DOD exhibited little interest in assuming responsibility for training first responders in 1996, Congress included language in the Nunn-Lugar-Domenici amendment that allowed the office to be moved to another agency after two years. In April 2000, President Clinton transferred responsibility for the Domestic Preparedness Program to the Attorney General. This decision was based on budgetary politics rather than any comprehensive strategy, as FEMA was concerned that congressional appropriators would not allocate sufficient funding for the agency to manage the program successfully.⁶

Attorney General Reno merged the DPP with the Office for State and Local Domestic Preparedness, which by that time was supporting first responders in a manner similar to that of the DOD program mandated under the Nunn-Lugar-Domenici

amendment. The program has since been renamed the Office of Domestic Preparedness. In his budget request for FY 2003, President George Bush has asked Congress to move the program to FEMA.

TOO FEW FIRST RESPONDERS RECEIVE ADEQUATE TRAINING

The piecemeal manner in which the federal government's assistance program for first responders was created and expanded across agencies and departments has created a number of problems and shortcomings in the effort to improve the nation's overall preparedness. According to Richard Falkenrath, Senior Director of Policy and Plans at the Office of Homeland Security, "The specifics of the program have been determined not by any guiding strategic concept but by discrete, uncoordinated legislative and appropriations and administrative initiatives."⁷

As a result, according to Bruce Baughman, Director of FEMA's Office of National Preparedness (ONP), "Even the best prepared states and localities do not possess adequate resources to respond to the full range of terrorist threats."⁸ In fact, over the past five years, numerous reports have identified problems with the federal effort to train first responders and have called for a reform of the numerous federal assistance programs created to support first responders.

In its third annual report to Congress, the Advisory Panel to Assess Domestic Response Capabilities for Terrorism Involving Weapons of Mass Destruction (Gilmore Commission), highlighted a number of problems. In its survey of state and local first responders, the commission found that the majority of first responders who participated in federal training programs found them to be beneficial but also noted that the programs were unable to train or equip enough personnel.⁹

6. Richard A. Falkenrath, "The Problems of Preparedness: Challenges Facing the U.S. Domestic Preparedness Program." BCSIA Discussion Paper 2000-28, ESDP Discussion Paper ESDP-2000-05, John F. Kennedy School of Government, Harvard University, December 2000, p. 4.

7. *Ibid.*

8. Bruce Baughman, testimony before the Subcommittee on Military Procurement, Committee on Armed Services, U.S. Senate, March 5, 2002.

9. Advisory Panel to Assess Domestic Response Capabilities for Terrorism Involving Weapons of Mass Destruction (Gilmore Commission), *Third Annual Report to the President and Congress of the Advisory Panel to Assess Domestic Response Capabilities for Terrorism Involving Weapons of Mass Destruction*, December 2001, p. 15.

In fact, from 1996 to 1999, the federal government was able to provide WMD response training to only 134,000 of the nation's 9 million first responders.¹⁰ Furthermore, only 2 percent of these 134,000 responders received hands-on training with live chemical agents.¹¹ If this deficiency in training continues, far too few of America's first responders will be adequately prepared for the possibility of a terrorist attack utilizing CBRN weapons.

The specific problems that have hampered America's current first-responder training strategy include the following:

- **Inadequate information regarding available training programs.** Despite the creation of the NDPO more than three years ago, the Gilmore Commission found that one of the primary barriers to first responders' participation in federal training programs was their lack of knowledge about what was offered.¹² The Office of Domestic Preparedness guide to federal weapons-of-mass-destruction training programs identifies 24 facilities throughout the country at which federal agencies train first responders for CBRN events.

Although they provide valuable training, however, these centers are not strategically located, and their programs are not coordinated. The majority of the centers are located on the East Coast, and very few agencies hold classes at common facilities. Furthermore, only one of these facilities—the Center for Domestic Preparedness (CDP) in Anniston, Alabama, which is run by the ODP—offers hands-on training with biological and chemical agents.

- **Expensive and inconvenient programs.** The Gilmore Commission found that, even when first responders are aware of existing programs,

their participation was frequently limited by high costs and the time commitment required. Most classes are conducted during weekday working hours despite the fact that most first responders are volunteers with full-time day jobs. The second Gilmore Commission report pointed out this failing and, citing the value of distance-learning techniques, recommended that training programs be restructured to allow participation by more volunteer responders.

In fact, a number of on-line, video, CD, and other types of training that do not require the first responder to leave home have been implemented; but while these programs are useful and should be continued, they do not provide the same degree of expertise and experience that specialized, hands-on training provides. To receive this kind of training, first responders must travel to one of a handful of facilities throughout the country.

- **Lack of coordination of national programs.** For years, the U.S. General Accounting Office (GAO) has been critical of the lack of coordination among federal WMD training programs. The GAO has pointed out that the Department of Defense and Department of Justice in some cases target the same cities while other cities are ignored. It also has cited duplicative programs as a problem; for example, one DOJ course had the same content as the National Fire Academy's.¹³ The GAO observed that this overlap led to confusion among the state and local first responders whom the various programs were designed to assist.¹⁴

Additionally, overlapping programs use critical time and taxpayers' money inefficiently. Because most programs last only a few days and many

10. See Dr. Joseph J. Collins, *Training America's Emergency Responders: A Report on the Department of Justice's Center for Domestic Preparedness and The U.S. Public Health Service's Noble Training Center, Fort McClellan, Anniston, Alabama*, Center for Strategic and International Studies, July 2000, at <http://www.csis.org/homeland/reports/FirstResponders.html>.

11. *Ibid.*

12. *Third Annual Report to the President and Congress of the Advisory Panel to Assess Domestic Response Capabilities for Terrorism Involving Weapons of Mass Destruction*, p. 15.

13. U.S. General Accounting Office, *Combatting Terrorism: Need to Eliminate Duplicate Federal Weapons of Mass Destruction Training*, No. GAO/NSIAD-00-64, March 2000, p. 16.

14. *Ibid.*, p. 19.

first responders make personal sacrifices to receive training, care should be taken to ensure that sessions do not repeat what these public servants already know.

A 1999 congressionally mandated study by the Department of Justice¹⁵ came to many of the same conclusions as the GAO report. The study noted that a lack of coordination in federal assistance programs reduced the programs' effectiveness and increased redundancy. It also called for establishing a central source that first responders could contact regarding federal assistance for WMD preparedness.

UTILIZING THE NATIONAL GUARD

The National Guard has a critical role to play in training America's first responders. By law and tradition, the Guard connects local communities to the federal government. Units are located in every American community, and they have the capabilities, legal authority, and structure to respond to attacks on the homeland.

The Army National Guard maintains over 3,000 armories throughout the nation, and the Air National Guard has 140 units throughout the United States and its territories. The close relationship between the National Guard and their locales should be leveraged to ensure that local Guard units are prepared to respond to attacks and also to help to train other first responders in their communities.

Currently, the National Guard maintains approximately 30 22-man, mobile Civil Support Teams (WMD-CST), which are trained and equipped to respond to a chemical, biological, radiological, or nuclear (CBRN) event. These units could provide valuable training to state and local first responders. The Guard also could help state and local authorities understand how to maintain equipment and sustain operations in a CBRN environment and could assist them in planning for medical treatment after an attack (combat triage).

The National Guard's contribution to the first-responder training effort should be coordinated through FEMA. This will ensure that National Guard assets and skills are used in the most efficient way possible. Without comprehensive coordination, the Guard's contribution could simply add to the confusion that already exists. It will be important that, as America's first-response capabilities expand, all programs are centrally coordinated to avoid duplication and expensive inefficiencies.

TRAINING AMERICA'S FIRST RESPONDERS

The Department of Justice currently operates the nation's premier chemical, biological, radiological, and explosive response training facility, the Center for Domestic Preparedness at Fort McClellan in Anniston, Alabama. The CDP, a former Army base and former site of the U.S. Army Chemical School, was closed as a military facility in 1999 as part of the 1995 Base Realignment and Closing (BRAC) process. At that time, its CBRN training facilities were transferred to the ODP. All of the center's programs are designed not only to educate attendees, but also to instruct them on how to teach other first responders as part of the ODP's train-the-trainer program.

The CDP is now the only facility in the nation where first responders can train with and gain first-hand knowledge of chemical agents (specifically, Sarin [GB] and VX nerve agents). However, at peak capacity, it can train only approximately 10,000 responders per year. In 2000, the center was training approximately 2,500 per year and had over 5,000 first responders on its waiting list.

While every person trained at the CDP has the capacity to train additional personnel, the responders who receive a "second-generation" education will not have had the advantage of hands-on training with chemical agents. Clearly, one facility is insufficient to meet the needs of the nation's more than 9 million emergency responders and 4 million health care providers.

15. U.S. Department of Justice, *Responding to Incidents of Domestic Terrorism: Assessing the Needs of State and Local Jurisdictions*, Phase I Report, June 2, 1999.

FEMA and the Law Enforcement Community

Before the September 11 attacks, the level of funding available for terrorist prevention and response was inadequate. In addition to providing an infusion of dollars to rectify this situation, the federal government is reorganizing to prevent and respond to terrorist attacks more effectively.

The President's First Responder Initiative includes transferring the Office of Domestic Preparedness, including its grant-making responsibilities, from the Department of Justice to the Federal Emergency Management Administration. While this plan is sound, however, it has generated legitimate concerns among the law enforcement community, which has multiple roles in homeland security, including first response, prevention, and investigation.

FEMA is the appropriate federal institution to provide support (both monetary and technical) for law enforcement's responder functions. In the event of a disaster, traditional first responders—such as EMS, HAZMAT (hazardous materials), and fire departments—and police will be working shoulder-to-shoulder to mitigate the consequences of an attack. As a result, law enforcement must be included in FEMA's domestic preparedness programs if those programs are to be effective.

Law enforcement agencies should receive both funding and training as part of a comprehensive program to support a locality's responder community. To ensure that police receive sufficient support through this program, the DOJ should detail at least one staff member to the Office of National Preparedness (which was created recently to manage the President's first-responder initiative) to review grant and training proposals to ensure that local law enforcement agencies receive adequate support for their first-responder responsibilities.

However, because its mission is focused on consequence management, FEMA is *not* the appropriate agency to support law enforcement's prevention and investigative responsibilities, which are vital homeland security functions of all police departments. The Department of Justice should establish a program to support the law enforcement community's anti-terrorism responsibilities in these areas. This program would not be considered part of the President's first-responder initiative.

Following the Anniston Model

The Anniston, Alabama, facility provides a model of effective interagency cooperation and an example of an efficient public-private partnership. In addition to the CDP, Fort McClellan's 100-bed hospital has been transformed into the Noble Training Center. The Noble Center, which is operated by the United States Public Health Service (USPHS), a part of the U.S. Department of Health and Human Services, is the nation's only functioning hospital dedicated to training public health providers and emergency medical technicians (EMT) for WMD incidents.

The USPHS has worked with the CDP to develop a program in which EMTs and hospital workers can train in the most realistic scenarios currently possible through the use of the base's practice village (complete with multi-story buildings) and the Noble Center. The training village and Noble Center allow participants to practice responding to all stages of an attack, from the EMTs' arrival at the scene to attending victims in their hospital beds.

In addition, Auburn University, in cooperation with the Department of Justice, has established the Auburn Research Initiative (ARI) at Fort McClellan to develop technologies and techniques to detect biological agents. In the three years since its creation, the ARI has worked closely with the CDP to develop training and equipment standards for CBRN response.

The Bush Administration should expand the nation's training capacity by creating a national system of CBRN training facilities based on the Fort McClellan model. This system should incorporate a network of interagency facilities under the general administration of the Federal Emergency Management Administration, each with capacities similar to those of the Fort McClellan center. Each center should:

- **Build on existing infrastructure whenever possible.** The U.S. government should transfer some of the DOD's excess military base infrastructure to FEMA. The Department of Defense currently maintains approximately 25 percent excess base infrastructure. While the Bush Administration has supported closing down bases that were unnecessary or were not cost-efficient, Congress has hindered the process.

By converting some of these bases to training facilities, the DOD can save money as it is freed from maintenance responsibilities for infrastructure that it does not need, and the government can save taxpayer dollars by taking advantage of existing infrastructure as it builds a system of critically needed training facilities. This option of an alternative use for the bases and attendant employment opportunities will also make some Members of Congress more willing to support the base closures that the Administration deems necessary.

- **Serve two FEMA regions.** The United States is divided into 10 FEMA regions. If each new first-responder training facility in the national system served two of these regions, four new facilities would be required, in addition to the Fort McClellan training center, which would serve Region 4 and an adjacent region. The sites chosen should be geographically central to the area they serve. They should also possess a sufficient existing, well-maintained infrastructure. While no new site would have the biological and chemical capability of Fort McClellan, each should have a functioning hospital, adequate housing, and sufficiently modern classrooms. In addition to military bases, a portion of the Department of Energy's Nevada Test Site (NTS) should be considered as a potential regional center. The NTS is already a member of ODP's National Domestic Preparedness Consortium and provides first-responder training for radiological and nuclear incidents at its Hazardous Materials Spill Center. Building on this existing program could offer significant cost savings and accelerate the operation of a second facility. Once the five national training facilities are fully operational, FEMA, in coordination with the OHS and participating agencies, should conduct a study to determine whether and where additional facilities might be needed.
- **Help eliminate redundant programs.** As federal agencies transfer their operations to these new centers, the Office of Homeland Security

should work with FEMA and other agencies to identify and eliminate redundant programs. The FEMA official managing each facility and an interagency staff should also be responsible for coordinating off-site instruction throughout the two areas served by their center. Classroom training, roving instruction, and distance learning programs make WMD education accessible to a broader range of first responders and should be continued, but they should complement, not compete with, the training provided through the new regional centers.

- **Be funded through FEMA-controlled grant money.** Grant money for the training of first responders to WMD incidents should be consolidated within FEMA as a hub of support for this project. FEMA is already responsible for coordinating state and local response plans with those of the federal government. The creation of additional interagency WMD training facilities under the direction of FEMA will give it a central role in developing the federal government's training assistance program.

Further, federal assistance to help local first responders pay for training and equipment should be tied to federal standards.¹⁶ If the responsibility for awarding first-response grants continues to be dispersed among numerous federal agencies, it will be difficult to ensure that they are all in accord with a common set of standards.

President Bush has already recommended that the largest of these grants—those managed by the ODP—be transferred to FEMA as part of his 2003 budget request. This effort should be supported, and all remaining federal financial assistance for WMD response training should fall under FEMA's authority.

PROBLEMS SOLVED

The creation of a national network of regional training centers will help address the primary criticisms of the current regime. Specific areas of concern include the federal government's inadequate training capacity, inaccessible first-responder train-

16. *Defending the American Homeland: A Report of The Heritage Foundation Homeland Security Task Force, Chaired by L. Paul Bremer III and Edwin Meese III* (Washington, D.C.: The Heritage Foundation, January 2002), 42–43.

ing facilities, and inefficient training programs. Developing this system will provide the following solutions.

SOLUTION #1: Increase the capacity of the federal government to train America's first responders. Most important, the national system of training centers will significantly increase the federal government's capacity to train first responders. Although, even at full capacity, the five regional centers would not be able to provide hands-on training for all of America's 9 million first responders, they will facilitate the development of a substantial corps of trainers with experience in handling deadly agents.

This training network will also provide the federal government with the infrastructure to ensure that state and local responder training is sufficient to meet long-term preparedness goals. This is critical given that, as in any other industry, turnover is inevitable within the first-responder community.

SOLUTION #2: Increase access to training facilities. Regionalizing first-responder training will make facilities more accessible to the first-responder community. Establishing training facilities that are closer to the first responder and scheduling as many sessions as possible on the weekend will make training less of a burden to the responder.

In addition, a combination of on-site training at the centers, local training, distance-learning techniques, and roving and local federal trainers will help the federal government to ensure that the nation's first responders have nearly standardized capabilities.

SOLUTION #3: Increase efficiency. A system of regionalized, interagency training centers that

provide the first-responder community with a "one-stop shop" training center will help eliminate duplicative training courses, minimize administration costs, and decrease the amount of time needed for trainees to reach appropriate skill levels.

These regional centers will also serve as a hub for information about additional training opportunities in the region, thereby addressing the long-standing problem of first responders' lack of knowledge about available training programs. The regional centers will help local first-responder units to develop the most appropriate training strategy to meet their unique needs.

CONCLUSION

The United States remains vulnerable to terrorism. The September 11 attacks demonstrated all too horribly that there are people who wish to do grave harm to America and that they are fully capable of doing so.

Much has been done recently to prevent further attacks, and more certainly must be done in that regard. However, the American people and their government must recognize that no one can guarantee that the United States will not fall victim to future attacks. Good policy can only decrease the likelihood that future attacks will occur.

Because potential terrorist attacks may include weapons of mass destruction, it is imperative that the United States improve the capabilities of its first responders to mitigate the consequences of such an attack. Doing so will require building on and expanding the federal government's current training facilities. Failing to do so could result in thousands of deaths that could have been prevented.

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