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The U.S. Fire Administration maintains the **Emergency Management and Response – Information Sharing and Analysis Center (EMR-ISAC)**.

For information regarding the EMR-ISAC visit www.usfa.dhs.gov/emr-isac or contact the EMR-ISAC office at: (301) 447-1325 and/or emr-isac@fema.dhs.gov.

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ISIL Shows Interest in Radiological Attacks

One of the big discoveries in the aftermath and investigations of the Brussels and Paris terrorist attacks is that [the Islamic State of Iraq and the Levant \(ISIL\) is interested in building radiological or dirty bombs](#), and may be in the process of planning such an attack. Video footage found following the November attacks in Paris show [surveillance of a nuclear official at his home](#) in Belgium. This coupled with other evidence implies that ISIL is attempting to acquire radiological materials.

According to the [Nuclear Regulatory Commission](#), a dirty bomb or radiological dispersal device (RDD) “combines conventional explosives, such as dynamite, with radioactive material” and can affect a few blocks at most. RDDs are very different from a nuclear bomb, which is millions of times more powerful and can spread destruction and fallout hundreds of miles. The explosive in an RDD would likely do more damage than the radioactive material. However, depending on the location, timing, and size of the device, an RDD event may trigger panic responses from people and radioactive material could bring millions of dollars’ worth of clean-up costs.

There is a variety of guidance available for responding agencies. The U.S. Department of Health and Human Services [Radiation Emergency Medical Management](#) site covers exposure guidelines for emergency workers, decontamination, PPE, treatment and countermeasures to various isotopes, and responder willingness to serve. The [National Institutes of Health](#) page on RDDs provides first responders a variety of training tools and other resources.

The Virginia Department of Emergency Management posted a study that may help other emergency management departments and planning officials with evacuation and sheltering decisions. “[Population Behaviors in Dirty Bomb Attack Scenarios](#)” details the findings of a study in the National Capital Region that determined most people would follow official instructions.

(Source: [NRC](#))

Protecting Firefighters From Hearing Loss

[Hearing loss in Americans is increasing at a dramatic rate](#), the numbers doubling from 2000 to 2015. One in five adults has some level of measurable hearing loss. Noise exposure is a primary cause and risk factor of hearing loss, so it is no surprise that [firefighters have a higher incident rate of hearing loss than the rest of the population](#), and in many cases it is preventable.

The InfoGram is distributed weekly to provide members of the Emergency Services Sector with information concerning the protection of their critical infrastructures.

Repeated exposure to noise from sirens, power tools, even engines running in the bay will affect your hearing, as will other activities in your personal life, such as lawn mowing or going to loud concerts. It is the repeated exposure that is the key. Someone may only lose a couple decibels of hearing a year, but over a 10-20 year career, you've lost 40-50 percent of your hearing.

While the [National Institute for Occupational Safety and Health](#) (NIOSH) has a list of resources specifically geared toward firefighters, education on the problem only goes so far. Departments that don't have "hearing conservation" policies in place should enact one, departments that have already addressed the issue should work on enforcement, and firefighters must take it upon themselves to safeguard their hearing both on duty and off.

NIOSH offers a list of [hearing loss prevention resources](#) including the Hearing Conservation Program Checklist, covering policy, monitoring, training, and equipment safety officers should be asking about their department and its work environment.

(Source: [NIOSH](#))

“Safety in the Sanctuary” for Houses of Worship

Newberry County, South Carolina, houses of worship approached the sheriff's office for assistance in creating safety plans after the 2015 Charleston church shooting. They responded by developing a training program, “Safety in the Sanctuary,” and [sessions filled up faster than they could be offered](#).

While the program does cover violent incidents, the Chief Deputy says it covers much more including medical emergencies, hazmat incidents, and hazardous weather. The main push is to impart practical information to enable them to develop their own plan, not hand out ready-made plans, and to encourage and strengthen relationships with fire, police, and EMS departments in their community.

The training is [gaining national attention](#), and plans are in the works to make it available as an online training. For now, those interested in finding out more about “Safety in the Sanctuary” should contact the [Newberry County Sheriff's Office](#).

(Source: [TechBeat](#))

National Health Security Preparedness Index

Overall, the nation scored 6.7 out of 10 this year on the [National Health Security Preparedness Index](#), a study by the Robert Wood Johnson Foundation that tracks over 100 key measures to determine how well the nation and individual states can handle widespread health emergencies.

The national score has climbed marginally in the past two years as some states work to improve their capabilities. Overall, “Incident and Information Management” scored highest at 8.4 while “Healthcare Delivery” scored lowest with 5.1. Compliant drinking water and laboratory testing capabilities of drinking water both went down, while the ability to mitigate biologic, chemical or nuclear incidents went up.

Each state's data is available and provides a breakdown of the measures and the state's scores as well as where data is lacking. This information may help identify areas for improvement unique to each state and provides a defensible and persuasive data source to use when discussing policy changes and budget with state officials

(Source: [NHSPI](#))

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