

Resolution introduced by Supervisors Wood, Girard, Taylor, Frasier, Brock, Seeber and Simpson

APPROVING THE WARREN COUNTY BIOTERRORISM PLAN

WHEREAS, the Director of Office of Emergency Services has submitted the Warren County Bioterrorism Plan for Warren County, attached hereto as Schedule "A", to the Warren County Board of Supervisors for approval, now, therefore, be it

RESOLVED, that the Office of Emergency Services Warren County Bioterrorism Plan as presented to the Warren County Board of Supervisors, be, and hereby is, accepted, approved and shall be kept on file in the office of the Clerk of the Board. Warren County

Bioterrorism Annex

ESF# 8.5



THIS DISASTER MANUAL REPRESENTS GENERAL GUIDELINES, WHICH CAN BE MODIFIED BY EMERGENCY PERSONEL AS APPROPRIATE. THIS PLAN DOES NOT CREATE ANY RIGHT OR DUTY THAT IS ENFORCEABLE IN A COURT OF LAW.

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Administrative

I. Purpose

This Annex of the Warren County Comprehensive Emergency Management Plan (CEMP) is for dealing with bioterrorism events. This is not a standalone document. Other annexes from the CEMP will be referenced as needed. This Annex will give recommendations for all aspects of the incident cycle in regards to a bioterrorism incident.

II. Scope

The unstable society in which we live in propels the development of this Annex. Even though bioterrorism is not a new concept, the means and range of easily attainable items is constantly growing. Communities are growing, making larger concentrations of potential victims. This Annex centers upon the local responders and their roles and responsibilities. It is understood that in the event of a terrorism event the Federal Bureau of Investigation would take control of the situation once they arrived.

III. Planning Annex Team

Title

Entity

Director/Fire Coordinator	Office of Emergency Services
Emergency Services Coordinator	Office of Emergency Services
Sheriff	Sheriff's Office
Chief of Police	City of Glens Falls
Public Health Director	Public Health
Immunization Coordinator	Public Health
Communicable Disease Coordinator	Public Health
Bioterrorism Coordinator	Public Health
Director of Emergency Preparedness	Glens Falls Hospital
State Veterinarian	NYS Ag & Markets
HAZMAT Coordinator	Office of Emergency Services
EMS Coordinator	Office of Emergency Services

Supporting Team for additional specific services

911 Coordinator County Administrator GIS Coordinator Funeral Director Sherriff's Office Communications PIO Planning DEMORT Commissioner Regional Response Manager Director of Community Services Administrative Services Director Chairman, BOS Special Agent/WMD Coordinator Chief Operating Officer Social Services American Red Cross Mental Health Hudson Headwaters Health Network Elected Official Federal Bureau of Investigation WWA ARC

IV. Authority

- New York State Executive Law Article 2-B This authorizes the Chief Executive Official the right to proclaim a local state of emergency and any emergency orders as necessary, during a potentially life threatening event.
- New York State Public Health Law 2100 This authorizes local boards of health and health officers the right to control infectious diseases by means including isolation and quarantine.
- Presidential Decision Directive 39 This establishes the FBI as the lead agency in terrorism incidents; responsible for crisis management. It also establishes FEMA as the lead for consequence management.

V. Assumptions

All incidents begin and end locally. Initially it may not be apparent that the situation is a terrorism event. Warren County Public Health would notify Warren County Sheriff's Office of the potential of a terrorism threat. Once it is apparent as terrorist event law enforcement and Public Health would work together under Unified Command.

There is a possibility that State and Federal assistance could take hours or even days before arriving, depending upon the magnitude of the event and how wide spread it is. The response capabilities of Warren County may be overwhelmed quickly. Mutual aid may or may not be readily available depending on the size of the event.

The County EOC will be opened. As the situation progresses the State EOC might open.

VI. CDC Bioterrorism Agents by Category

Category A

Definition

The U.S. public health system and primary healthcare providers must be prepared to address various biological agents, including pathogens that are rarely seen in the United States. High-priority agents include organisms that pose a risk to national security because they:

- can be easily disseminated or transmitted from person to person;
- result in high mortality rates and have the potential for major public health impact;
- might cause public panic and social disruption; and
- require special action for public health preparedness.

Agents/Diseases

- Anthrax (*Bacillus anthracis*)
- Botulism (*Clostridium botulinum* toxin)
- Plague (*Yersinia pestis*)
- Smallpox (variola major)
- Tularemia (*Francisella tularensis*)
- Viral hemorrhagic fevers (filoviruses [e.g., Ebola, Marburg] and arenaviruses [e.g., Lassa, Machupo])

Category B

Definition

Second highest priority agents include those that:

- are moderately easy to disseminate;
- result in moderate morbidity rates and low mortality rates; and
- require specific enhancements of CDC's diagnostic capacity and enhanced disease surveillance.

Agents/Diseases

- Brucellosis (Brucella species)
- Epsilon toxin of *Clostridium perfringens*
- Food safety threats (e.g., *Salmonella* species, *Escherichia coli* O157:H7, *Shigella*)
- Glanders (Burkholderia mallei)
- Melioidosis (Burkholderia pseudomallei)
- Psittacosis (*Chlamydia psittaci*)
- Q fever (*Coxiella burnetii*)
- Ricin toxin from *Ricinus communis* (castor beans)
- Staphylococcal enterotoxin B
- Typhus fever (*Rickettsia prowazekii*)
- Viral encephalitis (alphaviruses [e.g., Venezuelan equine encephalitis, eastern equine encephalitis, western equine encephalitis])
- Water safety threats (e.g., *Vibrio cholerae*, *Cryptosporidium parvum*)

Category C

Definition

Third highest priority agents include emerging pathogens that could be engineered for mass dissemination in the future because of

- availability;
- ease of production and dissemination; and
- potential for high morbidity and mortality rates and major health impact.

Agents

• Emerging infectious diseases such as Nipah virus, hantavirus, SARS and a pandemic influenza.

Retrieved from: <u>http://www.bt.cdc.gov/agent/agentlist-category.asp</u>

VII. Plan Maintenance and Updating

This Annex will be updated annually by the Bioterrorism Coordinator and the Emergency Services Coordinator with the assistance of the Planning Team. The Annex will incorporate new information comes from the federal or state, or solutions to gaps that are realized.

Mitigation/Preparedness

I. Hazard Analysis

The table below shows the findings from the Warren County hazard analysis conducted on May 14, 2012.

Hazard	Rating
FLOOD	356
HAZMAT (IN TRANSIT)	338
DAM FAILURE	337
ICE STORM	320
WILDFIRE	296
ICE JAM	274
UTILITY FAILURE	274
INFESTATION	268
FIRE	262
WINTER STORM (SEVERE)	258
HAZMAT (FIXED SITE)	248
EARTHQUAKE	241
TORNADO	236
OIL SPILL	234
EXPLOSION	233
SEVERE STORM	232
TERRORISM	232
TRANS ACCIDENT	232
WATER SUPPLY CONTAMINATION	230
EPIDEMIC	230 226
HURRICANE LANDSLIDE	223 210
STRUCTURAL COLLAPSE	210 194
	-
RADIOLOGICAL (IN TRANSIT)	180
DROUGHT	164

HAZNY is an automated interactive spreadsheet that asks specific questions on potential hazards in a community and records and evaluates the responses to these questions. *HAZNY* also includes historical and expert data on selected hazards. *HAZNY* is designed specifically for groups, rather than individual use. Warren County assembled a group consisting of local and State officials to consider and discuss the questions and issues raised by the *HAZNY* program. Representatives from NYS Office of Emergency Management facilitated the meeting and recorded the results. *HAZNY* rated each hazard based on the Group's assessment and assigned a numerical value. These values are categorized as follows:

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321 to 400 HIGH HAZARD
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241 to 320 MODERATELY HIGH HAZARD
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161 to 240 MODERATELY LOW HAZARD
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44 to 160 LOW HAZARD
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Derived from: Warren County Final HAZNY 2012
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Some of the above hazards would not be applicable to this Annex. Some could potentially be related in a cascading event. The hazards listed above that are the most likely to be involved with a bioterrorism event are: HAZMAT (In Transit), HAZMAT (Fixed Location), Explosion, Terrorism, and Water Supply Contamination. Some cascading events that need to be considered are: Utility Failure, Transportation Accident, Epidemic and Structural Collapse.

Other than a HAZMAT (In Transit) event, the rest are not as likely to occur or will not have as drastic of consequences. Anything is possible. The terrorists that were involved with the events on September 11, 2001, most likely drove through Warren County en route to New York City.

II. Risk Assessment

Using the guidelines from the National Infrastructure Protection Plan (NIPP), Warren County has critical infrastructure in fourteen of the sixteen categories. These categories are as follows:

- Banking and Finance banks and credit unions
- Chemical industries, warehouses and transportation
- Commercial Facilities hotels, retail centers, theme parks, stadiums, office and apartment buildings
- Communications Verizon, Frontier, Time Warner Cable, cellular sites, municipal equipment
- Dams high hazard, moderate hazard, beaver dams and FERC
- Defense Industrial Base Army National Guard
- Education Facilities schools, SUNY Adirondack, BOCES, day care providers
- Emergency Services fire, EMS, LEO, 911
- Energy National Grid (electric and natural gas)
- Food & Agriculture grocery stores, farms (animal & plant)
- Healthcare & Public Health Glens Falls Hospital, health centers, laboratories, doctor's offices
- National Monuments and Icons Adirondack Park, Fort William Henry, Hyde Museum
- Transportation Systems C&P Railway, SNC Railway, GFL Airport, I-87, Greater Glens Falls Transit
- Water water treatment facilities and holding ponds and sewer pumping stations

The south-eastern tip of Warren County holds the majority of the high risk infrastructure as outlined above. This is the same geographic area that is densely populated.

Warren County has a huge tourist draw, with many large events. These events could entice a terrorist to practice their harmful activities or worse yet plan a full-scale attack on the area.

III. Mitigation

The FEMA-Approved Warren County Hazard Mitigation Plan addresses all of the hazards from the HAZNY. The Plan breaks down mitigation measures into six categories:

1. Public education

- 2. Code enforcement
- 3. Further investigation of specific mitigation measures
- 4. Infrastructure maintenance
- 5. Infrastructure improvements
- 6. Building/Residential relocation.

Public Education

Warren County Office of Emergency Services (OES) uses the County website for information sharing with the public. OES also utilizes Twitter and Facebook accounts to inform the general public for proactive measures and response messages. Brochures from FEMA, Department of Homeland Security and other sources are distributed via the town halls, city hall, village hall and the municipal center. As new information becomes available, it is distributed in the most efficient way.

The media is used for informational pieces and for reporting on County exercises. During an event the media is used to distribute information to the public.

Code Enforcement

Code enforcement within New York State does not handle mitigation measures for bioterrorism events at this time. Code enforcement is centered on the safety of the homeowners during fires and other natural disasters.

Further Investigation of Specific Mitigation Measures

Continuity of Operations Plans (COOP) is a must for all government and businesses. Within the County each department should have a plan for continuing operations and together with additional information it would form the Warren County Continuity COOP. Regardless of what happens in a jurisdiction the government needs serve the community. Businesses should have a COOP to assist them and the community with recovery. It is important that businesses reopen as soon as possible for the good of the community as well as the productivity of the business.

Other mitigation measures may surface from lessons learned of other jurisdictions or exercises.

Infrastructure Maintenance

A planned maintenance plan should be developed for all critical infrastructures on the NIPP list. Items that should be included are changing filters regularly, calibrating surveillance equipment, charging battery operated equipment, testing seldom used equipment and software.

Infrastructure Improvements

A cost-ratio analysis should be done to ensure the benefits of spending funds on one item versus another. Some possibilities could include but are not limited to: acquiring a magnetometer, a density radar machine, a bio detection device, security cameras, ID system, and well-trained guards.

Building/Residential Relocation

This mitigation measure is routinely used in flood mitigation. It could be used to separate critical infrastructure from residents or other non-critical infrastructure.

IV. Preparedness

Administrative

Though not necessarily part of any formal plan, important contact information should be updated at least annually. These lists could include: telephone, cellular, fax, home numbers, mailing address, email addresses (work and home), contact names, radio frequencies and identifiers.

Workplace IDs should be updated as needed. Ensure that everyone who needs an ID has one, including volunteers.

Flowcharts or telephone trees should be updated regularly (at least annually). Ensure that all parties know how they work.

Plans

Plans (both hazard specific and reactive) need to be developed and revised annually. Plans (with lead agency) that may be utilized in conjunction with this annex include, but are not limited to:

Pandemic Flu	Public Health
Quarantine and Isolation	Public Health
Public Health Emergency Response & Preparedness Plan	Public Health
Strategic National Stockpile Plan	Public Health
Medical Counter Measures Plan	Public Health
Mass Fatality	Emergency Services
County Animal Response Team	Emergency Services
Hazardous Materials Response	Emergency Services
White Powder Protocol	Emergency Services
EMS Mutual Aid Plan	Emergency Services
Fire Mutual Aid Plan	Emergency Services
Mental Health Disaster Response Plan	Community Services

<u>Training</u>

All departments that make up the Planning Team need to be familiar with this plan as well as the annexes mentioned above and how their individual department will function.

The local fire departments, EMS squads and HAZMAT Team should continue with their HAZMAT and DECON training. The Fire Coordinator will provide HAZMAT and DECON training.

Public Health puts on annual SNS training for their staff and other departments, namely WCSO and DPW.

WCSO provides regular training in the realm of terrorism.

Exercises

Drills and exercises are an essential part of finding gaps in the planning process or in equipment that is needed. The HAZMAT Coordinator develops a full-scale HAZMAT exercise at least once every three years. The HAZMAT Coordinator will reach out to law enforcement and the private sector as well as other first responders as the scenario dictates.

V. Gap Analysis

Through regular training and exercising, gaps will be noted on the After Action Report/Improvement Plan and rectified if possible. Due to limited staff and monetary resources not all corrective measures will be met.

The New York State Fire Mobilization and Mutual Aid Plan will assist with HAZMAT response personnel. New York State Department of Health (DOH) can mobilize additional EMS responders. Warren County Sheriff's Office can request additional law enforcement through the New York State Police and the FBI. These sources may be unavailable if the scope of the incident covers a large portion of the State.

In 2008, Warren County conducted a comprehensive Gap Analysis with the direction of the NYSOEM. There were various gaps that were noticed. Among them were:

- The County is unable to evacuate and shelter the majority of the population
- The County is unable to provide meals and other necessities to the majority of the population
- Evacuation of large amount of those with limited mobility will take a long time

The County HAZMAT Team has a limited amount of response equipment in regards to a biological event.

In 2014, Warren County participated in the County Emergency Preparedness Assessment (CEPA) with NYSOEM. Some of the gaps were:

- Continuing to develop tactical teams
- Citizen preparedness
- Lack of staffing

Response

I. Overview

This section addresses the response period of the incident cycle. It will delineate primary and support responsibility based on jurisdiction or entity. State and federal entities will have a significant role in the response efforts. Some of those roles will be covered here.

II. Alert, Notification and Activation

The Warren County Emergency Operations Centers (EOC) will open at Level 1 for the initial period until the response dwindles to require less staffing. The EOC will be staffed 24 hours per day. The decision to change the level of operation or the hours of operation will be up to the EOC Manager. The EOC will be staffed as per the EOC Annex in the Warren County CEMP.

It is most likely that the State EOC will also be open. Federal and State representatives will be in the State and Warren County EOC. These could include but may not be limited to: NYS Police, FBI, DEC Police, OFPC, Office of Homeland Security, NYSOEM, NYS DOH, CDC Ag & Markets.

The EOC Manager will notify the appropriate agencies that the EOC will be open via email. This has been established in the CEMP.

Notification of public will be through the PIO and/or the EOC Manager. This could include a synopsis of the incident, directions for victims, and warnings for all.

III. Response Organization

The State of New York and Warren County both endorse the use of one response organizational structure that will include all responding agencies: local, state, and federal. Responding agencies will be organized under the framework of the National Incident Management System (NIMS) Incident Command System (ICS) as required by Homeland Security Presidential Directive (HSPD) #5. Warren County will utilize a Unified Command Structure to coordinate the overall county response and will utilize all of the NIMS components deemed necessary to effectively manage the incident.

Based on incident specifics, Warren County may utilize the capabilities of New York State's Incident Management Assistance Team (IMAT) or one from another state. The IMAT will serve to support onscene and county EOC interagency coordination between responding disciplines, local governments and the State EOC. The county will process requests for assistance to the State EOC, and may utilize the IMAT for coordination of the asset.

Derived from NYSEMO Pandemic Guidance - Section III

IV. Agency Roles and Responsibilities

These are not listed in any particular order of importance. Roles may be altered or changed during the response as needed by the EOC Manager. The Warren County CEMP provides a framework of general roles and responsibilities for some of the players. Not all positions will be listed below.

EOC Manager

This role is usually covered by the Director of Emergency Services or the Emergency Services Coordinator.

- Responsible for the opening, managing and closing of the EOC
- Responsible for the proper staffing of the EOC
- Responsible for acquiring additional resources as needed

PIO

The Warren County Administrator is the Public Information Officer out of the County EOC. The Assistant County Administrator has been appointed as a backup when the need arises.

- Distribute timely information to the public via the media for the purpose of informing, assisting and giving potentially lifesaving information to the public
- Handles inquires from the media
- Monitors reports from the media for accuracy. Corrects information when necessary
- Coordinating with the State JIC and other PIOs (i.e. Public Health, WCSO, GFH)
- Presence in the EOC

Public Health

- Coordinate county wide surveillance and report back to county and state.
- Coordinate with PIO in developing information to distribute to the public
- Coordinate with the State for the arrival of SNS and MERC supplies
- Assisting those with special needs
- Coordinating volunteers through ServeNY
- Representative in the EOC

Law Enforcement

- Gather intelligence and distribute to best serve the responders
- Handle all matters relating to criminal activities
- Assist with the security of the medical supplies (SNS and MERC) and at the scene
- Representative in the EOC
- Coordinate with PIO in developing information to distribute to the public

Chairman of Board of Supervisors

The Chairman of the Warren County Board of Supervisors is the Chief Executive Official within the county.

- Responsible for declaring and later rescinding a local state of emergency
- Responsible for issuing an emergency orders that are deemed necessary
 - Travel restrictions
 - Gatherings closed
- Assist with the approval of expenditures of county funds for the emergency

• Presence in the EOC

Emergency Manager

- Handle the role of EOC Manager
- Request additional resources outside of the county via the State EOC
- Activate the Mass Fatality as needed, including DMORT
- Advise local responders and elected officials

EMS Coordinator

- Coordinate the local EMS response and triage
- Assist with the distribution of medical supplies (SNS and MERC)

Fire Coordinator

- Coordinate with local fire departments in assisting with response efforts
- Activate Warren County HAZMAT Team as needed
- Request additional fire resources through OFPC

Public Works/Highway

- Assist with security of buildings and supplies
- Closing and/or barricading of roads/entrances as needed
- Assist with the transportation and distribution of resources and supplies

Animal Control Officer

• Activate CART as needed

American Red Cross/VOAD/Social Services

- Open shelters and kitchens as needed
- Coordinate distributing of supplies in a POD as necessary (water, food, supplies)
- Open family assistance center as needed

Glens Falls Hospital

- <u>Surveillance</u>
- <u>Report suspected cases to Public Health</u>
- <u>Provide medical triage and treatment to those in need of care</u>
- <u>Provide prophylactics to patients and hospital staff</u>
- <u>Liaison with EOC possible presence there</u>

Ag. & Markets

- Provide additional support as needed
- <u>Liaison with the EOC possible presence there</u>

Recovery

I. Overview

The response of an incident is short compared to the recovery time period. Recovery time may last for years. There may be additional terrorist related incidents that manifest themselves. It is important to maintain good communication through the recovery section both as first responders and to the public. We need to keep the public calm, yet encourage them to help themselves by following public health guidance and getting the community back to normal. First responders need to share information to speed the process of recovery.

II. Decontamination

Decontamination will start in the Response section and continue into the Recovery section. The Warren County HAZMAT Team will take the lead on decontamination. Support functions will include, but not be limited to:

- Fire Departments assist with operations of decontamination
- Public Health provide safety information for the public and first responders
- PIO disseminate safety information to the public
- Law Enforcement provide security until decontamination is done

III. Surveillance

Surveillance is on-going in all phases of an incident for all types of symptoms. This is handled by a coordinated effort through the health care providers lead by the Warren County Public Health Department. This information is then forwarded to NYSDOH and subsequently to CDC.

The Department of Agriculture and Markets will monitor the situation through its regional staff. This will be through close contact with producers, animal owners, veterinarians, ag-businesses and emergency responders. The information will be reported to Agriculture and Markets Albany Office or the Agriculture and Markets desk at the State Emergency Operations Center (EOC), if activated.

Air quality around the scene will be monitored until it is deemed unnecessary. This will be a collaborative effort involving HAZMAT, law enforcement and public health. NYSDOH and DEC may be asked to assist.

IV. Isolation and Quarantine

Starting in the Response section, continuing through the initial stages of the Recovery section isolation and quarantine may be used. The Warren County has developed a plan for isolation and quarantine that is located in the BT Files of Warren County Public Health Department. Warren County Public Health is the lead agency in I & Q.

- County Attorneys assist with the development of the I & Q plan and legal questions that arise during the process
- Law Enforcement assist with carrying out orders of the judge

V. Investigation

The investigation process could go on for months or even years. This also needs to start in the Response section. Local law enforcement will initiate the investigation based on the first car on the scene. Often the Warren County Sheriff's Office and the New York State Police will coordinate investigations. The investigation may escalate to the federal level.

• DPW – may assist with transportation or storage of items

VI. Demobilization of the Response

As resources or services are no longer needed they should be demobilized as soon as possible. This will help with the cost, organization of resources and help keep the resources from being unnecessarily expended. The Incident Commander and EOC Manager would take the lead on their respective resources. The Demobilization process should start as soon as the asset is requested.

If schools are being used as shelters or alternative care centers, they will need to be moved to open the schools up for the students. Family assistance centers could be moved to a smaller location and hours of operation limited to normal business hours. States of emergency and emergency orders may be rescinded. If there is a presidential declaration, PA and IA surveys may need to be facilitated through WCOES. SBA loans may be made available to businesses to assist them.

VII. Mental Health

The mental health of the community as well as the first responders is an on-going concern. The lead agency would be the Warren Washington Counties Mental Health Disaster Preparedness Team. The Critical Incident Stress Debriefing Team would also assist with the first responders. All agencies should make these teams available to their respect staff members. Supervisors should be aware of the signs and assist those who

need it. Glens Falls Hospital maintains a separate mental health team for hospital based patients and responders.

Victims and other members of the community may suffer from mental health issues long after the incident. Information will be made available through the Warren County website and United Way 211 to get help.

VIII. Disposal

This section is broken into three subsections: contaminated debris, animal carcasses and human remains. All of these need to be handled in a timely manner. Additional items will need to be properly taken care of as the Recovery section continues.

Contaminated Debris

The Warren County HAZMAT Team along with DEC will take the lead on handling contaminated debris. Guidance will be given to the public on how to handle and properly dispose of any contaminated debris.

Animal Carcasses

New York State Department of Agriculture and Markets will be the lead agency on providing information on proper disposal of animal carcasses. This information will in turn be provided to the public along with a means for proper disposal.

Human Remains

The Warren County Mass Fatality Plan will be implemented when six or more people die. As per this plan the local morticians and coroners will work with the State to expedite the autopsy and respectful handling of the remains, including a proper cremation or burial.

Impacts

Predicting impacts to the area is important for dealing with all four phases of the incident. A good starting point is the demographics of the area. The following information is a general overview of Warren County.

People QuickFacts	Warren County	New York
Population, 2011 estimate	65,831	19,465,197
Population, 2010 (April 1) estimates base	65,705	19,378,104
Population, percent change, April 1, 2010 to July 1, 2011	0.2%	0.4%
Population, 2010	65,707	19,378,102
Persons under 5 years, percent, 2011	4.9%	6.0%
Persons under 18 years, percent, 2011	20.1%	22.0%
Persons 65 years and over, percent, 2011	17.5%	13.7%
Female persons, percent, 2011	51.2%	51.5%
White persons, percent, 2011 (a) Black persons, percent, 2011 (a) American Indian and Alaska Native persons, percent, 2011 (a) Asian persons, percent, 2011 (a) Native Hawaiian and Other Pacific Islander persons, percent, 2011 (a) Persons reporting two or more races, percent, 2011 Persons of Hispanic or Latino Origin, percent, 2011 (b) White persons not Hispanic, percent, 2011	96.5% 1.2% 0.2% 0.7% Z 1.3% 1.9% 94.9%	71.5% 17.5% 1.0% 7.8% 0.1% 2.2% 18.0% 58.0%
Living in same house 1 year & over, 2006-2010	87.1%	88.3%
Foreign born persons, percent, 2006-2010	2.9%	21.7%
Language other than English spoken at home, pct age 5+, 2006-2010	4.8%	29.2%
High school graduates, percent of persons age 25+, 2006-2010	89.6%	84.4%
Bachelor's degree or higher, pct of persons age 25+, 2006-2010	27.3%	32.1%
Veterans, 2006-2010	6,172	1,025,496
Mean travel time to work (minutes), workers age 16+, 2006-2010	21.1	31.3
Housing units, 2011	38,949	8,119,364
Homeownership rate, 2006-2010	68.5%	55.2%
Housing units in multi-unit structures, percent, 2006-2010	22.1%	50.6%
Median value of owner-occupied housing units, 2006-2010	\$183,000	\$303,900
Households, 2006-2010	28,533	7,205,740
Persons per household, 2006-2010	2.25	2.59
Per capita money income in past 12 months (2010 dollars) 2006-2010	\$27,744	\$30,948
Median household income 2006-2010	\$51,619	\$55,603
Persons below poverty level, percent, 2006-2010	10.0%	14.2%
Business QuickFacts	Warren County	New York
Private nonfarm establishments, 2010	2,372	519,504
Private nonfarm employment, 2010	31,125	7,266,189
Private nonfarm employment, percent change, 2000-2010	-11.4	-1.2

Nonemployer establishments, 2010	4,819	1,575,780
Total number of firms, 2007 Black-owned firms, percent, 2007 American Indian- and Alaska Native-owned firms, percent, 2007 Asian-owned firms, percent, 2007	7,410 S F S	1,956,733 10.4% 0.7% 10.1%
Native Hawaiian and Other Pacific Islander-owned firms, percent, 2007	F	0.1%
Hispanic-owned firms, percent, 2007	F	9.9%
Women-owned firms, percent, 2007	26.7%	30.4%
Manufacturers shipments, 2007 (\$1000)	1,130,451	162,720,173
Merchant wholesaler sales, 2007 (\$1000)	341,996	313,461,904
Retail sales, 2007 (\$1000)	1,382,215	230,718,065
Retail sales per capita, 2007	\$21,005	\$11,879
Accommodation and food services sales, 2007 (\$1000)	299,993	39,813,499
Building permits, 2011	133	22,575
Geography QuickFacts Land area in square miles, 2010 Persons per square mile, 2010 FIPS Code	Warren County 866.95 75.8 113 Glens Falls, NY Metro	New York 47,126.40 411.2 36
Metropolitan or Micropolitan Statistical Area	Area	

(a) Includes persons reporting only one race.

(b) Hispanics may be of any race, so also are included in applicable race categories.

FN: Footnote on this item for this area in place of data

NA: Not available

D: Suppressed to avoid disclosure of confidential information

X: Not applicable

S: Suppressed; does not meet publication standards

Z: Value greater than zero but less than half unit of measure shown

F: Fewer than 100 firms

Source: US Census Bureau State & County QuickFacts

Derived from http://quickfacts.census.gov/qfd/states/36/36113.html

From this snapshot we gather that most of the permanent residents in Warren County are lowincome, white and have attained a high school education. From previous disasters we have attained that the rural communities are very resilient; whereas the residents that rely on technology expect more assistance from the first responders. It is estimated in the United States the 20% of the population are considered special needs.

Language Barrier

A majority of the population speaks English as their main language. This makes distribution of instructional information less challenging. A smaller percentage of the rural communities use computers for gathering information.

Capability

The capability of resources is a valid concern. There is a small group of well trained first responders. Resources are tight due to financial constraints. Some of the first responders are volunteers or have multiple jobs. This limits their availability. The capacity of resources is based upon the population listed above, but during the summer months the tourist population exponentially grows.

Economy

A bioterrorism event would have a huge impact on the economy – short term and long term. The specific location would not be able to be used until the investigation and decontamination was complete. There is a small amount of farms with livestock and/or gardens that could be impacted. The larger, more costly impact would be tourism. Terrorism would scare most people away, but some would visit to check it out. Depending on the ratio and how long it took for people to relax the economy could suffer for years.

Mental Health

Mental health symptoms can appear quickly or take years to manifest. If professional counsel is not sought out the problems may escalate. Mental health issues can arise in victims, responders and other members of the community.

Physical Health

From the events on 9/11/01, we learned that the physical health of those exposed to the harsh environment of a terrorist event can have long term effects. Special surveillance should be put in place to monitor the potential long term ill effects on responders and others in the area.

An incident of this magnitude would potentially have severe short term and long term consequences. The items listed above include a list of likely effects but there are certainly more that may be considered.

Appendix 1

Acronyms

CDC	Centers for Disease Control
CEMP	Comprehensive Emergency Management Plan
COG	Continuity of Government
COOP	Continuity of Operations
DECON	Decontamination
DHS	Department of Homeland Security (U.S.)
DMORT	Disaster Mortuary Services
DOH	Department of Health (N.Y.)
EMS	Emergency Medical Services
EOC	Emergency Operating Center
FBI	Federal Bureau of Investigation
FEMA	Federal Emergency Management Agency
FERC	Federal Energy Regulating Commission
HAZMAT	Hazardous Materials
IA	Individual Assistance
LEO	Law Enforcement Office
MERC	Medical Emergency Response Cache
NIPP	National Infrastructure Protection Plan
OEM	Office of Emergency Management (N.Y.)
OES	Office of Emergency Services (W.C.)
OHS	Office of Homeland Security (N.Y.)

PA	Public Assistance
PH	Public Health (W.C.)
PIO	Public Information Officer
POD	Point of Dispensing
SNS	Strategic National Stockpile
SUNY	State University of New York
WCSO	Warren County Sheriff's Office

Appendix 2

Definitions

Arrival screening: Medical screening upon arrival to detect individuals who have signs of illness or who are at high risk of developing illness.

Asymptomatic: Without Symptoms

Bioterrorism – The terrorist use of microorganisms or toxins derived from microorganisms to produce death or disease in humans, animals or plants

Containment: Contain an outbreak to the affected region(s) and limit of spread of the disease through aggressive attempts to contain via isolation, quarantine or social distancing

Continuity of Operations: Refers to the capability to ensure the performance of essential functions during any emergency or situation that may disrupt normal operations.

Essential functions: Functions that is absolutely necessary to keep a business operating during an incident and critical to survival and recovery.

Geographic quarantine: The isolation of localities with documented disease transmission from localities still free of infection.

Isolation: Separation of infected individuals from those who are not infected.

Point of Dispensing (POD): Locations or facilities where local authorities will be dispensing vaccine or anti-viral medications, if available.

Post-exposure prophylaxis: the use of antiviral medications in individuals exposed to others with an infectious disease to prevent disease transmission.

Prophylaxis: The prevention of a disease or of a process that can lead to disease.

Quarantine: Separation of individuals who have been exposed to an infection but are not yet ill from others who have not been exposed to the transmissible infection.

ServeNY: A registry of health care and mental health professionals who wish to volunteer during an emergency or major disaster.

Social distancing: Infection control strategies that reduce the duration and/or intimacy of social contacts and thereby limit the transmission of influenza.

Derived from: NYSEMO Pandemic Guidance and