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State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for REGINOMBER Quotation

CME90131

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ROBERTA WAGNER 304-558-0067

HEALTH AND HUMAN RESOURCES 619 VIRGINIA STREET, WEST CHARLESTON, WV

BUREAU FOR PUBLIC HEALTH
OFFICE CHIEF MEDICAL EXAMINER 25302 304-558-4865

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GENERAL TERMS & CONDITIONS REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

- 1. Awards will be made in the best interest of the State of West Virginia.
- 2. The State may accept or reject in part, or in whole, any bid.
- 3. All quotations are governed by the West Virginia Code and the Legislative Rules of the Purchasing Division.
- 4. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee.
- 5. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, this Purchase Order/Contract becomes void and of no effect after June 30.
- 6. Payment may only be made after the delivery and acceptance of goods or services.
- 7. Interest may be paid for late payment in accordance with the West Virginia Code.
- 8. Vendor preference will be granted upon written request in accordance with the West Virginia Code.
- 9. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
- 10. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 11. The laws of the State of West Virginia and the *Legislative Rules* of the Purchasing Division shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract.
- 12. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
- 13. BANKRUPTCY: In the event the vendor/contractor files for bankruptcy protection, this Contract may be deemed null and void, and terminated without further order.
- 14. HIPAA BUSINESS ASSOCIATE ADDENDUM: The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, and available online at the Purchasing Division's web site (http://www.state.wv.us/admin/purchase/vrc/hipaa.htm) is hereby made part of the agreement. Provided that, the Agency meets the definition of a Cover Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.
- 15. WEST VIRGINIA ALCOHOL & DRUG-FREE WORKPLACE ACT: If this Contract constitutes a public improvement construction contract as set forth in Article 1D, Chapter 21 of the West Virginia Code ("The West Virginia Alcohol and Drug-Free Workplace Act"), then the following language shall hereby become part of this Contract: "The contractor and its subcontractors shall implement and maintain a written drug-free workplace policy in compliance with the West Virginia Alcohol and Drug-Free Workplace Act, as set forth in Article 1D, Chapter 21 of the West Virginia Code. The contractor and its subcontractors shall provide a sworn statement in writing, under the penalties of perjury, that they maintain a valid drug-free work place policy in compliance with the West Virginia and Drug-Free Workplace Act. It is understood and agreed that this Contract shall be cancelled by the awarding authority if the Contractor: 1) Fails to implement its drug-free workplace policy; 2) Fails to provide information regarding implementation of the contractor's drug-free workplace policy at the request of the public authority; or 3) Provides to the public authority false information regarding the contractor's drug-free workplace policy."

INSTRUCTIONS TO BIDDERS

- 1. Use the quotation forms provided by the Purchasing Division.
- 2. SPECIFICATIONS: Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as EQUAL to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
- 3. Complete all sections of the quotation form.
- 4. Unit prices shall prevail in case of discrepancy.
- 5. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
- **6. BID SUBMISSION:** All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications: Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130, Charleston, WV 25305-0130



You can't predict. You can prepare."

State of West Virginia – Request for Quotation CME90131

Development of a Strategic Mass Fatality Response Plan
Office of the Chief Medical Examiner

June 30, 2009



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Ms. Roberta Wagner

Department of Administration

Purchasing Division

2019 Washington Street, East

Charleston, West Virginia 25311

RE: RFQ # CME90131

Dear Ms. Wagner:

Disaster Management International (DMI) is pleased to present our response to the Request for Quotation (RFQ) Number CME90131, entitled *Development of a Strategic Mass Fatality Response Plan* for the Office of the Chief Medical Examiner of the State of West Virginia.

Attached please find our proposal response along with all appropriate documentation as found within the attachment section of the RFQ response.

Additionally, please feel free to contact us at any time if we can be of assistance.

Finally, DMI wishes you and the review committee much success in your deliberations.

Very Respectfully,

Ronald Crane,

Vice President - Assessment & Planning

Disaster Management International

Request for Quotation (RFQ) NUMBER: CME90131

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RFQ Section 1 - Introduction

DMI is a full-service disaster preparedness and response consulting firm. DMI has a particular interest in Mass Fatality Planning and Response as DMI professionals have world wide experience in Mass Fatality Management ranging from large scale multinational incidents involving thousands to small, rural isolated incidents involving few bodies, both open and closed manifest responses.

DMI professionals have been on the beaches of Thailand post tsunami, in the flood waters of New Orleans post Katrina, and even within our own jurisdiction following the crash of American Airlines Flight 1420 in Little Rock. Mark Malcolm, DMI's President was the Pulaski County Coroner at the time of the crash and with all of the other incidents mentioned, coordinated and ran all fatality operations. Both prior to and now with DMI, we have provided planning, management, and response for a variety of public and private organizations; culminating in over 20 years of experience within the Mass Fatality realm.

DMI has been incorporated for 2 years and since its inception has been providing Mass Fatality consultative and response services.

Mass Fatality Operations Prior to DMI						
Eastman Kodak 1987	Worthen B	Bank 1989	American Airlines Flight 1420 – 1999			
Air France Flight 358 – 2005	Tsunami 2005	Thailand	Hurricane Katrina - New Orleans 2005			
Hellos Airways Crash - 2005			Swiss Air Flight 111 - 1998			

DMI Mass Fatality Operations & Planning							
Rio Tinto Mining – Peru 2008	Deep 2008	Sout	n Crane	Liberty Mutual Insurance 2008			
State of Arkansas 2007, 2008, 2009	Statë 2008	of	Louisiana	Arlington County, Virginia (ongoing)			
State of Nevada Planning	Kern Califor	nia	County, Planning	State of Nevada Mass Fatality			

Development of a Strategic Mass Fatality Response Plan

(ongoing)	(ongoing)	Workshops (ongoing)

DMI has provided numerous consultative, planning, and operational responses to a variety of clients ranging from the public/governmental sector as well as private industry, both in a mitigative planning environment as well as in a post incident response capacity. DMI has also worked with other entities and agencies ranging from healthcare to educational institutions in developing planning and response documents.

We have a tremendous amount of experience relating to and working with private entitles and understand their needs and wants as we do with public agencies having worked with and worked in them in the past.

Past experiences have ranged from full range Emergency Operations Plans with multiple annexes and complicated levels of collaborative interaction. We also have experience with specific, defined projects, such as Mass Fatality Planning and Response as well as Points of Distribution (POD) development and implementation. Furthermore; our current work with Arlington County, Virginia in Family Assistance Center development, as well as our Repatriation Study for fatalities post NDMS evacuation for Hurricane Gustav are other examples.

In terms of Mass Fatality Planning DMI is responsible for all operational aspects to the State of Arkansas Mass Fatality Plan as well as the Plan development itself. Additionally, DMI has been instrumental in planning and response capability for the State of Louisiana as well as in the process of writing the Mass Fatality Response Plan for the State of Nevada.

In addition to DMI qualifications and personnel, Beck Disaster Recovery (BDR) will partner with DMI in providing the state of West Virginia the best possible outcome from two very well qualified firms. BDR has significant experience working with the State of West Virginia and their knowledge of the State and its people provide a very effective combination. BDR will provide all exercise expertise and capability. Their qualifications are listed in Appendix #1.

RFQ Section 2 - Project Deliverables

<u>Project Deliverables Overview</u>

DMI is well versed in providing specific guidance on the strategic response to a mass fatality incident, considering DMI professionals have multiple operational experiences to draw from. This is not only in terms of immediate response to the incident but also

Development of a Strategic Mass Fatality Response Plan

responses tailored to ensuring day to day duties and operations of the Office of the Chief Medical Examiner (OCME) continue in light of the mass fatality incident.

As described within the RFQ, the following items will be delivered:

Concept of Operations

o Within all DMI planning documents is an understandable and hierarchical Concept of Operations which not only is NIMS compliant but also provides an effective management as well as operational structure, clearly defining the incident and all that it entails.

Incident Characterization

o Clear and precise definitions including triggers and activation matrices are vital for not only management/command elements, but also operational and response personnel. DMI will work with the State of West Virginia to determine what constitutes a mass fatality incident, its triggers and all activation protocols/processes.

Response Actions

- o Effective response to a mass fatality incident is not entirely understood until one actually is a part of an actual incident. Responding is so much more than recovery of human remains. DMI will craft a plan as well as work with the State to understand and respond appropriately to an incident mindful of the following elements:
 - Recovery , Inventory, and Repatriation of human and disassociated remains
 - Recovery, Inventory, and Repatriation of personnel effects
 - Family Assistance Center Operations
 - Crisis and Tactical Communications
 - Maintenance of Day to Day Operational Capacity for Jurisdiction independent of incident

Key Roles and Responsibilities

o All key roles and their attendant responsibilities will be identified and defined in coordination with OCME personnel and capabilities.

Development of a Strategic Mass Fatality Response Plan

Furthermore, Job Action Sheets as well as graphical flow diagrams will also be provided.

Functional Components (OCME Mass Fatality Incident Response)

The Functional Components as listed on page 5 of the RFQ are all well within the ability and experience of DMI.

- Define the OCME authority, responsibility, jurisdiction and its key stakeholders
 - o Working with the OCME, DMI will provide concrete, specific definitions and reference all available West Virginia and other applicable statues/codes. In addition, appendices listing key stakeholders and their appropriate contact information will be included.
- Provide the OCME a mechanism for incident characterization
 - o Defining what a mass fatality incident is for the State of West Virginia is the first step. Further actions include triggers or characterization of an incident. This will be facilitated through step by step checklists which will allow for characterization, activation, and response if applicable.
- Define the OCME's initial response actions
 - Once an incident has been characterized as rising to the level of a mass fatality; concise and proven response actions will be defined and detailed providing all facets of the OCME to take appropriate and measurable steps/actions as dictated by the plan.
- Identify the OCME's functional components of a response and responsible units for implementing action plans
 - Within the items listed above, many of these issues will be resolved and/or Identified. However, after discussion and investigation of the capacity and capability of the OCME; DMI will be able to construct the appropriate functional response. This will be tailored to the personnel, authority, and equipment owned by the OCME. The functional response will also take into account resource requests and management of any and all additional resources required for the incident among other things.
- Identify OCME's resource requirements
 - After a thorough examination of the functional capacity and capability of the OCME, items necessary to providing an effective mass fatality response will be listed in a resource annex. Additional resources will be

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considered and specific resource needs list/appendix will be provided to the OCME in the event it is needed in the future. Furthermore, MOUs and other instruments will also be investigated in conjunction with potentially being entered into at the discretion of the OCME. Finally, the aforementioned resource needs list will be considered for Emergency Management Assistance Compact (EMAC) aid should an incident rise to this level.

- Identify potential sites for the OCME to utilize in relation to short and extended operations
 - o DMI will work with the OCME to devise a Logistical Annex detailing all that is needed to run both short and long term mass fatality operations. Additionally, in conjunction with OCME personnel, appropriate locations bearing in mind logistical needs will be preselected for both short and long term operations.
- Identify key assets that the OCME will need
 - o In addition to the two aforementioned items, DMI will work with the OCME to inventory all existing assets and capacity/capability. Once this baseline assessment is done it will be easy to add what is needed by the OCME dependent upon the size and scope of the incident/operation.
- Identify areas of the plan that require additional specification and development that is beyond the scope of the contract
 - o At this point it is premature to identify issues specific to the OCME in terms of the RFQ. However, past experience has identified the following common/general areas requiring additional development:
 - Training
 - Equipment
 - Human Remains / Personnel Effects Inventory Database Tools
- All plans created/written by DMI are NIMS/NRF/ICS compliant.
- DMI will provide all necessary spiral bound copies of the plan in the agreed upon formats and media.
- BDR will assist DMI in the creation, facilitation, control, and evaluation of a Table
 Top Exercise (TTX). The TTX will be conducted on the predetermined dates

Development of a Strategic Mass Fatality Response Plan

according to the RFQ and the OCME. In addition an After Action Report (AAR) will be produced for the OCME following the TTX.

RFQ Section 3 - Source Requirements

The Project Team will be headed by Mark Malcolm, F-ABDMI. He is the President and Founder of DMI. While Mr. Malcolm meets and/or exceeds the requirements set forth within the RFQ there will be additional principals to provide appropriate and specific subject matter expertise as requires by the unique requirements of the RFQ.

Source Requirement #1:

Mr. Malcolm has managed several mass fatality incidents worldwide including

- Tsunami response for the nation of Thalland over 5,000 bodies, open manifest
- Hurricane Katrina body recovery for Orleans & St. Bernard Parishes over 1,000 bodies, open manifest
- Crash of Helios Airways Flight 522 121 souls aboard, closed manifest
- Swiss Air Flight 111 229 souls aboard, closed manifest

Source Requirement #2:

Mr. Crane and Mr. Fruchtman have experience in designing a wide array of Homeland Security Exercise and Evaluation Program (HSEEP) compliant exercises from workshops to full scale exercises including mass fatality exercises for:

- State of Arkansas FSE & TTX
- State of Louisiana TTX

Source Requirement #3:

The Project Manager as well as Subject Matter Principals have a multitude of certifications to include for these purposes:

- FEMA/EMI ICS 100 400 including Instructor Status
- OSHA/DOT Hazardous Materials Technician
- DOJ Incident Response to Terrorist Bombings

Source Requirement #4:

Development of a Strategic Mass Fatality Response Plan

Mr. Malcolm recently retired as Coroner for Pulaski County serving a large metropolitan area. However, he was then and still remains the Director of Mass Fatality Operations for the State of Arkansas with a population of over 2 million. In both capacities he is very adept in all functions related to executive management. Furthermore, in his capacity with the State of Arkansas, Mr. Malcolm also coordinates grant and state funding.

Source Requirement #5:

Mr. Malcolm was the operational commander for all operational aspects of the response to the tsunami in Thailand in 2004/2005. He also not only coordinated all facets of the body recovery operations in New Orleans post Katrina but also actively participated in operational duties.

Source Requirement #6:

Both Mr. Malcolm's responses and management of incidents in Thailand as well as in New Orleans demonstrates not only experience with working with all levels of government within the United States but also internationally too.

Source Requirement #7:

As a Coroner, Mr. Malcolm was also a sworn law enforcement officer. Consequently, he understands the law enforcement needs as well as integrating them into a mass fatality incident. Furthermore, having responded to a mass fatality incident within his own jurisdiction, American Airlines Flight 1420; he not only interfaced with but coordinated and managed all aspects of law enforcement, emergency and medical examiner operations.

Source Requirement #8:

Managed manifests for incidents listed in Source Requirement #1.

Source Requirement #9:

Mr. Malcolm was a Coroner for over 10 years and involved with Coroner operations for over 20 years.

Source Requirement #10:

DMI professionals have tremendous experience in terms of data management and the attendant programs that assist with and manage the intricacies of mass fatality management. Furthermore, as having managed such complex incidents, the safety of our personnel is paramount, both physical as well as mental. Consequently, not only do we actively set up and run Family Assistance Centers, but we do the same for our

Development of a Strategic Mass Fatality Response Plan

personnel and those responding to an incident where critical incident stress management and other behavioral and mental first aid tools are employed.

RFP Section 4 - Biographies and Qualifications

Mark Malcolm - DMI

Mark Malcolm is the president and founder of Disaster Management International (DMI).

Professional Background

Mr. Malcolm was appointed Coroner of Pulaski County in 1995 and was the only full-time county coroner in Arkansas until he left to found DMI. He served as the Chief Deputy Coroner for 8 years prior to being appointed Coroner.

Mr. Malcolm served as Director of Field Operations - Morgue during the search and recovery of those who died in New Orleans following Hurricane Katrina; and he served as Director of Morgue Operations in Phuket, Thailand, following the December 2004 tsunami. He also has had numerous air crash recoveries and operations.

During his twenty years in law enforcement, Mr. Malcolm has been involved in over 40,000 death investigations.

Education & Certifications

Mr. Malcolm holds Fellow status with the American Board of Medicolegal Death Investigation at the St. Louis University School of Medicine and is one of only one hundred ten board-certified death investigators in the United States. He serves as an instructor for the University of Arkansas Criminal Justice Institute and the University of Arkansas for Medical Sciences.

Mr. Malcolm is certified as an instructor in death investigation, crime scene management, and evidence preservation by the Arkansas Commission on Law Enforcement Standards and Training and serves as the primary death investigation instructor for the Little Rock Police Department Training Academy. He is qualified as an expert in death investigation in United States District Court and the Arkansas Circuit Courts.

Appointments & Legislation

In June 2007, Mr. Malcolm was appointed to the FEMA National Advisory Council. The Council was created by the Congress of the United States to provide advice and guidance to FEMA Administration on all aspects of preparedness and emergency management. Also in 2007, Mr. Malcolm was named Director of Mass Fatality Planning and Response for the Arkansas Department of Health.

Development of a Strategic Mass Fatality Response Plan

Mr. Malcolm serves on the National Institute of Justice Mass Fatality Review Panel, which published Mass Fatality Incident: A Guide to Human Forensic Identification in June 2005. He previously served as a member of the National Institute of Justice technical working group formed to develop national guidelines for death investigation. He currently sits on the National Institute of Justice Mass Fatality Incident Management Training Curriculum Committee. This committee is charged with the responsibility for developing a mass fatality training module for use in all 50 states.

In March 2002, Mr. Malcolm appeared before the United States Senate Committee on Aging and provided testimony regarding the Arkansas law he authored that mandates reporting all nursing home deaths to the county coroner. He also advised committee members of the procedures used by his office to conduct those investigations.

Ron Crane - DMI

Ron Crane Resume & Experience:

As DMI's vice president - assessment and planning, Mr. Crane is responsible for assisting clients in assessing and analyzing their vulnerabilities and weaknesses, then developing comprehensive strategies to mitigate them. His support most typically involves consultation, evaluation, planning, and oversight of programs for integrated emergency management, continuity and sustainment of operations, emergency response, and interoperable communications.

Professional Background

Before joining DMI, Mr. Crane was the Hospital & Medical Liaison Officer for the Pulaski County Office of Emergency Management, and at the same time, he served as the Emergency Preparedness Manager for the University of Arkansas for Medical Sciences, the only academic medical center within the Arkansas. His experience includes numerous assessment, planning, and oversight responsibilities for clients in commercial, government, and healthcare environments.

Certifications

Mr. Crane has disaster management certifications and in many areas, including National Incident Management Systems, Incident Command Systems, National Emergency Response, WMD/Terrorism Incidents, Hazardous Materials & Decontamination, Fire Fighting, Emergency Management for Healthcare Organizations, Integrated Emergency Management, Continuity of Operations, and Disaster Life

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Support, from various institutions of higher learning, Federal Emergency Management Agency, U.S. Department of the Army, U.S. Department of Transportation, U.S. Department of Homeland Security, American Medical Association, and National Fire Academy. Mr. Crane is also one of the first people nationwide to have received the CHEP (Certified Hospital Emergency Preparedness) certification.

Appointments

Mr. Crane is the only hospital-related person in the U.S. to be on the final State Communications Interoperability Plan (SCIP) review and evaluation team (Department of Homeland Security and the Department of Commerce) and the only hospital-related person in the U.S. to be a peer reviewer with the Interoperable Communications Technical Assistance Program (ICTAP) as part of the Department of Homeland Security to evaluate Tactical Interoperable Communications Plans (TICP) and their respective Tactical Validation Exercises (TVE).

Mr. Crane is an adjunct instructor for the Arkansas Department of Emergency Management (ADEM) for ICS and Hazardous Materials instruction as well as an Adjunct Instructor with the Arkansas Fire Academy. He also is an instructor for DHS related to WMD awareness and instruction.

Steve Fruchtman - BDR

Mr. Fruchtman, a former fire chief and emergency management director, now leads BDR's Washington D.C. emergency preparedness planning practice. He serves as senior subject matter expert in homeland security and emergency preparedness planning compliance, with more than 20 years of practical emergency management experience including working with emergency management agencies across the country in plan review and development, capabilities assessments, urban area security initiative (UASI) investment justifications, emergency

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operations center training and comprehensive exercise development. Mr. Fruchtman also served as the Chief in Charge of Operations for a regional hazardous materials response team that encompassed a 350 square mile response district.

He is also responsible for helping federal, state and local public safety agencies in their compliance with multiple regulations and plan requirements. He has delivered executive level strategic planning and guidance based on Department of Homeland Security Presidential Directives and comprehensive emergency management practices. Mr. Fruchtman prepared and presented comprehensive briefings to senior agency staff including State Governors, Cabinet and Secretaries. He has also developed numerous continuity of operations and continuity of government plans (COOP/COG plans) for both the public and private sectors; conducted tests, training and exercises; and developed multi-year strategies and program management plans.

Mr. Fruchtman has extensive emergency planning and training experience having served as the Vice President for the Response and Emergency Management Division of CRA. The majority of this work was in support of the U.S. Department of Homeland Security (DHS) Office of Grants and Training, as well as associated work with federal, state and local agencies. In this position, Mr. Fruchtman oversaw the TSA PortStep Exercise contract, the Public Health Preparedness Group and the federal/state/local exercise work comprising seven exercise teams involved in the design, development and execution of comprehensive all hazards, WMD, chemical, biological, radiological, nuclear and explosives (CBRNE) and terrorism exercises covering prevention, response and recovery components.

In addition, Mr. Fruchtman managed the development of the Department of Homeland Security Tactical Interoperable Communications Plan draft exercise materials for the 75 UASI/Metropolitan area full-scale exercises series, and worked as part of a team to design and deliver a comprehensive suite of exercises for high-profile national special events including the 2004 Presidential Inauguration, Republican and Democratic National Conventions and the G8 Summit.

As part of the comprehensive planning and exercise work that Mr. Fruchtman completed while supporting DHS, he has conducted numerous large scale venue-related exercises, including work with NASCAR, Major League Baseball and the National Football League.

In addition, Mr. Fruchtman supported a number of large, high-profile transportation related exercises in the aftermath of the Madrid, Spain train bombings. Projects included a Senior Leaders Exercise with the Massachuessetts Executive Office of Preparedness Senior Leaders and Full Scale exercises with the Metropolitan Atlanta

Rapid Transit Authority and the New York Office of Emergency Management – Operation Transit full scale exercise.

Mr. Fruchtman has also worked with DHS and FEMA in the design and execution of emergency management concept of operations plans (CONOPS) and operations synchronization for the response to natural and man-made disasters.

Relevant Project Experience

Regional Resource and Equipment Deployment East-West Gateway Council of Governments and the St. Louis Area Regional Response System (STARRS)

Mr. Fruchtman is assisting with the St. Louis Area Regional Response System (STARRS) regional planning effort. This effort involves the development of a regional resource and equipment deployment plan, which will be integrated into the regional emergency coordination plan. The overarching goal is to set forth how resources in the region are to be shared and how local elected officials should cooperate in a catastrophic emergency. Additionally, the plans will help guide priorities for additional investments for equipment, training and policies that are consistent with the risk assessment and in managing a coordinated response.

Comprehensive Operational Plan for Family Assistance/Reunification and Resource Center Annex

Arlington County, VA

Mr. Fruchtman is the program manager for the development of a Comprehensive Operational Plan for Family Assistance/Reunification and Resource Center Annex (FAC) for incorporation into the County Emergency Operations Plan. The plan will comply with National Incident Management System (NIMS), Incident Command System (ICS), Emergency Management Accreditation Program (EMAP) and the National Response Framework (NRF) standards. Project components include:

- FAC Annex to the County EOP
- Logistics Annex
- FAC Standard Operating Procedures
- Job Action Sheets

Regional Evacuation Exercise

Pulaski County, AR

The Pulaski evacuation plan training, testing and exercise (TTX) was designed to identify issues surrounding the evacuation of a large number of residents, business, visitors and critical facilities during a significant weapon of mass destruction (WMD)/terrorism incident. The exercise reviewed homeland security response issues, as well as response agency capability to provide mutual and coordinated response. The exercise included more than 90 regional participants from all components of the first responder, emergency management and private sector. The TTX offered federal, state and local senior leaders the opportunity to gain an understanding of problems they might face during WMD/terrorism incidents.

COOP/COG for County and Municipalities

Wicomico County, MD

Mr. Fruchtman serves as project manager for the County and eight municipal continuity of operations/continuity of government planning project. This project incorporates the State of Maryland COOP Guidance, Federal Continuity Directive 1, NFPA 1600 and industry best practices. When complete, this plan will include more than 80 individual county departments and more than 50 individual municipal departments.

LNG Emergency Evacuation Plan – U.S. Coast Guard Facility

Freeport, TX

Based on Sandia National Lab scenarios for Liquefied Natural Gas (LNG) tankers, it was determined that the USCG station was located in a danger zone and was in need of an emergency evacuation plan. Mr. Fruchtman worked with the USCG station Freeport, that is located across the channel from the Freeport LNG terminal, to write and then exercise an evacuation plan for the entire station.

LNG - Comprehensive Integrated Emergency Response Plan

Point Fortin, Trinidad

While with another firm, Mr. Fruchtman developed comprehensive integrated emergency response plan for the largest LNG production facility in the world by combining seven individual response documents into a single comprehensive plan. Mr. Fruchtman briefed senior security advisor and senior business staff (CEO, COO, CFO) on proposed development process and provided training to key senior staff. In addition,

Development of a Strategic Mass Fatality Response Plan

Mr. Fruchtman developed and provided incident command and emergency operations center training. The team also provided support to the facility EHS staff during the development of the Integrated Emergency Management Plan (IEMP). This quick turnaround project was completed in four weeks and included:

- Research and analyze elements common to best-in-class emergency response plans and evacuation plans regarding terminal, vessel and pipeline emergency response planning, port security and crisis management.
- Alignment of the IEMP with the National Incident Management System.
- Facilitation of a series of training sessions for Atlantic employees on the new IEMP. The development of the IEMP was based on FEMA and DHS guidance as well as industry best practices. The new document incorporated the seven individual documents listed into a new, comprehensive IEMP.
- Emergency Preparedness and Response Plan
- Marine Emergency Response Plan
- Crisis Management Plan
- Port Facility Security Plan
- Corporate Security Policy Manual
- Princess Courts Emergency Response Procedures
- Clifton Courts Emergency Response Procedures

<u> Lisa Danner - BDR</u>

Ms. Danner has extensive knowledge of local, state and federal laws and regulations regarding emergency management and the National Response Plan (NRP). She possesses over 20 years of emergency management experience and has a thorough understanding of emergency operations, continuity of operation (COOP) and hazard mitigation planning. In addition, Ms. Danner has extensive knowledge of radio and telephone communications systems, their operations and implementations into emergency services and response.

Ms. Danner is a certified Emergency Management Accreditation Program (EMAP) assessor, having conducted assessments for the State of New Hampshire and San Diego County, California.

Relevant Project Experience

Emergency Operations Planning

West Virginia Department of Military Affairs and Public Safety

Ms. Danner was part of the team rewriting the State of West Virginia's Emergency Operations Plan (EOP) to achieve compliancy with industry standards, including EMAP, NIMS and the Nationwide Plan Review. Ms. Danner coordinated the development of the basic plan and the 34 annexes which support the EOP. Ms. Danner also assisted with the development of the State of West Virginia COOP Plan.

Multi-Jurisdictional Mass Casualty/Mass Fatality Workshop Exercise

Northeast North Carolina

Mrs. Danner served as project manager for the Northeast North Carolina Incident Preparedness Project which involved 13 northeast North Carolina counties and conducted a regional mass casualty/mass fatality workshop. Mrs. Danner coordinated the workshops and their delivery.

Emergency Management Accreditation Program (EMAP)

San Diego County, California

The Emergency Management Accreditation Program (EMAP) is a standard-based voluntary assessment and accreditation process for state and local government programs responsible for coordinating prevention, mitigation, preparedness, response, and recovery activities for natural and human-caused disasters. Accreditation is based on compliance with collaboratively developed national standards.

In February 2007, Ms. Danner was part of an EMAP Assessment team that assessed the San Diego County, CA's emergency management program against 63 EMAP standards. As a certified EMAP assessor, Ms. Danner spent one week at the San Diego County Emergency Operations Center interviewing, reviewing and documenting information to assess against the EMAP standards.

Emergency Response Tabletop Exercise

North Carolina State University

Ms. Danner served as controller/evaluator for a 200+ participant functional tabletop exercise to test the campus procedures for a train derailment at the North Carolina State University (NCSU). A major east coast north/south rail corridor runs through the

Development of a Strategic Mass Fatality Response Plan

center of NCSU campus. The scenario involved a derallment and hazardous material leak causing mass evacuation of dormitories and campus buildings, as well as mass care. Ms. Danner wrote the after-action report (AAR) for the NCSU exercise and facilitated the AAR conference with the exercise planning team.

Frank Harper - BDR

Mr. Harper recently joined the firm as an Emergency Management consultant. Mr. Harper brings more than 30 years of disaster response and recovery and incident management and command experience to the team. Mr. Harper has extensive experience performing risk and vulnerability assessments and security surveys. He has also performed and reported electronic site surveys (ESS) and is certified in Homeland Security Comprehensive Assessment Model (HLSCAM) as taught by the National Domestic Preparedness Coalition.

Relevant Experience

Risk and Vulnerability Assessments (HLS-CAM Methodology)

Florida Department of Transportation

Mr. Harper performed risk and vulnerability assessments using HLS-CAM methodology for the Florida Department of Transportation (FDOT). He also surveyed and supervised the completion and report delivery of over one hundred critical infrastructure facilities including bridges, rest facilities, communications complexes and maintenance/construction compounds.

Risk and Vulnerability Assessments and Security Survey

Mississippi State University

Mr. Harper conducted risk and vulnerability assessments, as well as security surveys for the University, which is home to more than 16,000 students and faculty.

Electronic Site Surveys (ESS)

Army National Guard Facilities

Mr. Harper performed and reported electronic site surveys (ESS) for Army/Air National Guard State Joint Forces Headquarters (JFHQ) facilities on the east coast in conjunction with SPAWAR (Space and Navel Warfare Systems Command, Charleston, S.C.)

Electronic Security System (ESS) Design Reviews

Development of a Strategic Mass Fatality Response Plan

Army National Guard Facilities

Mr. Harper performed Electronic Security System (ESS) design reviews (Intrusion Detection, Access Control and CCTV) on Army National Guard Facilities covering 54 U.S. states and territories.

Anti-Terrorism-Force Protection (AT-FP) Design Reviews

Army National Guard Facilities

Mr. Harper performed Anti-Terrorism – Force Protection (AT-FP) design reviews on Army National Guard facilities covering 54 U.S. states and territories.

Katie Herskovitz - BDR

Ms. Herskovitz is a recent addition to the BDR planning practice in the firm's Washington, D.C. office. She graduated from one of the top 10 liberal arts and sciences colleges in the nation. She is responsible for providing research and analytical support as well as production support for the development of continuity of operations, business continuity, emergency operations and other preparedness planning documents.

Prior to joining the firm, Ms. Herskovitz was employed by Jones Communications in San Carlos, California as a deposition evaluator. In this position, she was responsible for producing summary reports of thousands of pages of testimony for evaluation by an industrial health expert witness in exposure liability cases. She also developed curricula, delivered lectures and led hands-on activities at the Wesley School for Girls and the Cape Coast School for the Deaf for local children in Cape Coast, Ghana.

Ms. Herskovitz is proficient in Spanish and attended the Universidad de Buenos Aries in order to study Spanish language skills and improve her conversational ability.

Relevant Project Experience

Family Assistance Center (FAC) and Unification Plan

Arlington County, VA

Ms. Herskovitz is assisting the project manager in the development of a comprehensive operational plan for family assistance/reunification and resource center annex to its emergency operations plan (EOP). The project plan will provide Arlington County with the coordinated ability to track, reunite, identify and assist disaster victims and their families as well as serve as the single, authoritative center for emergency information. On-site services provided by an FAC may include behavioral and mental health care, referral services, child and elder care, spiritual/pastoral care, missing persons law enforcement investigation, family reunification, and identification of physical remains. One of the first in the nation, this FAC plan is contracted to serve as a template nationwide.

Medical Surge Capacity Gap Analysis and Funding Recommendation Report

Metropolitan Washington Council of Government

Ms. Herskovitz is a member of the project team responsible for conducting interviews with 14 surge capacity subject matter experts from around the nation representing private and public sector public health and healthcare organizations. The interview process was utilized to identify best practices and common challenges of surge capacity planning. The information from the interviews has been compiled into an executive summary report for the NCR Senior Policy Group (SPG), which is comprised of homeland security advisors from Maryland, the District of Columbia and Maryland, principals of the emergency management administration for each jurisdiction and the Director of FEMA's Office of National Capital Regional Coordination, who has fiduciary and policy responsibility for the programmatic and grants process for the Urban Area Security Initiative (UASI) grant, as well as responsibility for state-level coordination in all facets of preparedness in the NCR.

Continuity of Operations (COOP) Planning

Wicomico County, MD

Ms. Herskovitz was the project assistant on the team responsible for analyzing Wicomico County's departmental COOP/COG capabilities and defining the overarching COOP/COG program. The team oriented personnel from core departments to the COOP/COG planning process and conducted interviews with key departmental staff to gather information regarding mission essential functions, resources and potential risks.

Development of a Strategic Mass Fatality Response Plan

Wicomico County found the process very useful and contracted the BDR team to provide further plans for each of its municipalities. The planning process ultimately culminated in the development of a countywide COOP/COG plan and eight municipal COOP/COG plans as well as recommendations on how to successfully implement, maintain, test, train and exercise the plans.

Christine Packard - BDR

Mrs. Packard has nearly 10 years of emergency management experience. She has worked in a variety of roles ranging from the Special Assistant to the Lieutenant Governor for the Commonwealth of Massachusetts to most recently serving as the Preparedness Branch Chief for the Massachusetts Emergency Management Agency.

Ms. Packard's career with the Commonwealth has also included the administration of over \$2 million for the Agency's training program. Ms. Packard has overseen the activities of the training department to ensure that the Agency offers varied courses and the necessary technical assistance on NIMS compliance, exercise and other management training to all emergency responders in the Commonwealth. Under her leadership, the Agency increased course offerings from three per month to approximately twenty per month. She worked in partnerships with other state agencies (police, public health, fire services) on joint training programs. Ms. Packard also worked with the Massachusetts Department of Education and other professional organization to reinstitute education and training on school safety programs. Ms. Packard is a certified FEMA Radiological Emergency Response Program exercise evaluator.

As Chief of the Preparedness Branch, Ms. Packard advised the Agency Director on all planning, training, nuclear preparedness and government preparedness initiatives for the Commonwealth. In addition, she was responsible for overseeing the planning department, comprised of eleven employees spread across four locations. Ms. Packard ensured that the Commonwealth's all-hazards comprehensive emergency management plan (CEMP) was maintained and updated annually. In addition, she oversaw the technical assistance and update of CEMPs for over 352 municipalities.

In addition, Ms. Packard oversaw the critical evaluation of the Commonwealth's evacuation capabilities and assisted with the coordination of the establishment and implementation of regional shelters that can accommodate a large number of people for a prolonged period of time. This effort, a major public safety priority for the Governor, devises regional evacuation and sheltering capacity and includes provisions for special populations. Ms. Packard's evacuation planning efforts also included the creation of full-time position in the Agency to foster and further develop the State of Massachusetts Animal Response Team (SMART) from its infancy to effectively deal with issues related to pets and other animals during times of emergency.

Ms. Packard has served as the voice of public health and emergency management on various workgroups, committees and conferences. Currently, Ms. Packard is assisting the Metropolitan Washington Council of Governments (MWCOG) with its medical surge capacity project to identify best practices and common challenges of like jurisdictions from across the nation for surge capacity planning.

Relevant Experience

National Capital Region Senior Leaders' Seminar

Metro Washington Council of Governments

Ms. Packard served as the lead planner for Senior Leaders Seminar which focused on the preparedness, response and recovery of the National Capital Region during a pandemic influenza event. The seminar was held on October 21, 2008, and was for elected officials of the 17 jurisdictions of the NCR, including the District of Columbia and jurisdictions in Northern Virginia and Maryland. Ms. Packard conducted extensive research of state-level pandemic influenza plans and interviewed public health officials at the federal and state levels to develop a medically-sound scenario for the exercise. Ms. Packard developed the player's guide, which included authorities, references and a wealth of materials to support the seminar and serve as a resource beyond the seminar.

Medical Surge Best Practices Report

Metro Washington Council of Governments

As part of the medical surge capacity project for MWCOG, Ms. Packard conducted interviews with 14 surge capacity subject matter experts from around the nation to identify best practices and common challenges for medical surge capacity planning. Ms. Packard compiled the findings into a report for the Senior Policy Group, which will be the basis of future medical surge planning activities.

Regional Hospital Coordination Plan

East-West Council of Government and the St. Louis Area Regional Response System

Ms. Packard is a member of the project team charged with developing a comprehensive regional hospital coordination plan, which will be designed in a manner such that it can be seamlessly integrated into the regional emergency coordination

Development of a Strategic Mass Fatality Response Plan

plan. Ms. Packard has collaborated with STARRS officials, subject matter experts from the St. Louis hospital/healthcare community and other agencies at over 30 hospitals to develop a viable and executable plan that will serve as a framework for centralized communication and resource sharing among healthcare providers and other agencies in the region during a large-scale or catastrophic event.

Virginia Family Assistance Center and Unification Plan Arlington County, VA

Ms. Packard is working with the Virginia County, located in the heart of the high-profile National Capital Region (NCR) and home to the Pentagon on the development of a comprehensive operational plan for family assistance/reunification and resource center annex to its emergency operations plan (EOP). The goal of the project is to provide communities with the ability to track, reunite, identify and assist disaster victims. It also serves to prevent confusion and disorder by ensuring the delivery of a single, concise message to the community and media. On-site services provided by an FAC may include behavioral health care, shelter, nourishment, child and elder care, spiritual/pastoral care, missing persons law enforcement investigation, and DNA identification of physical remains.

Pandemic Influenza Emergency Operations Plan Components State of Vermont, Department of Public Safety

Ms. Packard is managing the planning effort to assist the State of Vermont in ensuring compliance with federal pandemic influenza guidance issued in March 2008. Specifically, Ms. Packard is facilitating interagency coordination with state agencies for the further development of a comprehensive and integrated pandemic influenza annex; facilitating private sector coordination for the support of the annex; supporting Continuity of Operations planning efforts by integrating influenza planning considerations; and assisting in the outreach and coordination of the annex for mitigation and protective actions at local jurisdictions.

Career Highlights/Accomplishments

- Served as liaison to the Massachusetts Emergency Management Agency for all aspects of public health emergency preparedness planning, including but not limited to bio-terrorism, nuclear preparedness, and the Strategic National Stockpile.
- Developed and coordinated the Massachusetts Integrated Statewide Exercise Program in partnership with the Executive Office of Public Safety.
- Oversaw and coordinated the development of training programs, such as forensic epidemiology training, on call staff training, and senior leadership training.

Development of a Strategic Mass Fatality Response Plan

- Staffed the Emergency Support Function 8 (Health and Medical) during activation of the SEOC. Participated in FEMA graded nuclear power plant exercises.
- Served as the state public health representative for the 2004 Democratic National Convention preparedness planning.
- Participated as a public health representative on the International Emergency Management Group for resource typing.
- Served as Public Safety Secretary's Chief Policy Advisor on statewide public safety policy initiatives generated from and operated through the Commonwealth's Executive Office of Public Safety (EOPS) and as a liaison to the Governor's Office.
- Intricately involved with budgetary, administrative, public relations and political aspects of all public safety initiatives. Served as Acting Undersecretary of Public Safety (11/00 8/01) overseeing several public safety agencies such as the Department of Fire Services, Office of the Chief Medical Examiner, Highway Safety Bureau, and the Department of Public Safety among others.
- Oversaw the Commonwealth's Radiological Emergency Response Program (RERP) for the three nuclear power plants that affect Massachusetts, including the maintenance of the statewide Radiological Emergency Response Plan.
- Ensured the Commonwealth's successful participation in three federally-graded exercises. Each exercise culminated in a FEMA-generated public report, detailing any deficiencies in planning or response identified during the exercise. Under her direction, the Commonwealth conducted its first flawless exercise in state history in 2006.
- Coordinated the Agency's participation in the Emergency Management Accreditation Program (EMAP).
- Coordinated the Commonwealth's response to the Nationwide Plan Review (NPR), receiving the highest rating from the federal government. Massachusetts was one of only two states that was EMAP-accreditation and received the highest NPR rating.
- As Consultant to the United States Marshals Services (USMS), she worked with USMS chemical/biological specialists to learn about chemical/biological agents, recommend preventative and emergency response programs a to the Chief and identify appropriate personal protective equipment and monitoring devices for marshals.

Beck Disaster Recovery Qualifications

Company Profile Information

BDR is one of the nation's premier emergency management and homeland security firms – providing emergency planning, risk assessment/mitigation, evacuation planning, training and exercise design services to local, state and federal government agencies nationwide. We have worked with organizations of all sizes, ranging from major metropolitan urban areas to rural communities, providing emergency planning, risk management/mitigation, training and exercise design services. Since 2001, the firm has supported more than 200 collaborative planning projects for mass care, hazard identification, risk assessment, evacuation planning and training and exercising, while ensuring compliance with federal, state and industry standards.

Our staff has backgrounds and experience in all-hazards planning, disaster resiliency, emergency management and homeland security readiness planning, response and recovery initiatives. Many are first responders, former local and state emergency management directors and consultants who have been at the forefront nationally in developing strategies and plans in support of the Department of Homeland Security's (DHS) National Preparedness goal. Our team includes individuals who have led actual multi-jurisdictional emergency responses and who understand the importance of sound planning assumptions, real-time communication and well-coordinated plans and decision making.

As an experienced leader in the emergency management industry, BDR knows what it takes to not only respond effectively, but also initiate recovery activities almost simultaneously, while maintaining transparency for the public and elected officials. Most recently, BDR demonstrated its ability to successfully support regional catastrophic response and recovery efforts by providing services to 118 cities and counties spanning the Gulf Coast, from the southern tip of Texas to the southern tip of Louisiana, following Hurricane Ike.

BDR planners are better because of our active involvement in response and recovery efforts. We develop operationally realistic plans that can be effectively implemented during a response. We have built our firm specifically to rapidly mobilize and adapt to support long-term recovery efforts and have the infrastructure necessary to make immediate changes that occur in the work environment.

Company Qualifications

Emergency Operations Plan Development

West Virginia Department of Military Affairs and Public Safety

In 2006, the State of West Virginia (State) selected the BDR Team to rewrite the State's Emergency Operations Plan to achieve compliance with industry standards, including Emergency Management Accreditation Program (EMAP), National Incident Management System (NIMS) and the Nationwide Plan Review standards.

The first and highest priority initiative of the plan revision was to develop a migration annex for the State EOP to address possible evacuation of the National Capital Region to surrounding states including West Virginia. BDR provided planners to participate in the evacuation planning statewide working group sessions. Through collaboration with the Statewide Planning Team, which included state lead agencies and local stakeholders, BDR drafted the evacuation planning annex, which included coordination of a large-scale influx of population through the State, termed "urban-to-The planning annex focused on the receipt, staging, onward rural migration." movement and integration (RSOI) of the evacuating population. assumptions were to move the population through the state by providing fuel, food/water, rest and medical assistance to evacuees, since State and local government infrastructure does not have the capacity to shelter large-scale evacuee populations. BDR participated in working group sessions and provided subject matter expertise at two multi-state leadership summits, which included State agency leads from emergency management, transportation and social services from surrounding states in order to draft the West Virginia EOP annex.

Mass Casualty Plan

Mississippi Department of Health

Located in Jackson, the Mississippi State Department of Health (MSDH) coordinates an array of essential health services throughout the state's nine public health districts and 82 counties. The MSDH called on BDR for assistance in developing a comprehensive public health emergency preparedness and planning program. Plans developed under this program work within the broader context of the state's emergency management program.

The Mississippi State Department of Health (MSDH) is the principal agency for protecting the health of all Mississippians. MSDH provides essential services, especially for those who are least able to help themselves. Mississippi is vulnerable to hurricanes,

earthquakes and other hazards to varying degrees of probability. Natural and manmade hazards have the potential to generate large numbers of casualties. Mass casualty-producing events are likely to overwhelm local, regional and state resources. As a result, MSDH retained BDR to assist in the development of a mass casualty plan (plan) to support local agencies in responding to events involving large numbers of injuries and event- related illnesses. The plan is based on Center for Disease Control (CDC) guidelines for field triage and surge capacity and Association for Professionals in Infection Control and Epidemiology (APIC) checklists for mass casualties. It is also premised on DHS Response Mission Area Target Capabilities for treatment of mass casualties. This plan was developed in accordance with all federal, state and local planning guidelines for mass casualty incidents. This plan is specifically tailored to MSDH and solidifies current emergency operation planning initiatives.

Six-County Regional Functional Exercise

Sponsoring Agency: Martin County, North Carolina

Participating Agencies: Beaufort, Hyde, Martin, Pitt, Tyrrell and Washington Counties

The BDR Team provided design, development, delivery and facilitation for a multijurisdictional exercise for six counties in eastern North Carolina. The six-hour exercise focused on a scenario involving multiple chemical, biological, radiological, nuclear or high-yield explosive (CBRNE) terrorist events, the presence of hazardous materials and mass casualties.

Participants in the exercises included senior leaders and staff of the six counties of Beaufort, Hyde, Martin, Pitt, Tyrrell and Washington. The exercise focused on regional collaboration capabilities to respond effectively to a CBRNE terrorist event, which affects the entire geographical area. With such an event the ability to communicate and make decisions quickly, on a regional basis is critically important. The responding Counties must have communication lines in place prior to the event in order to respond effectively. In all regional exercises multi-agency and multi-jurisdictional cooperation is a cornerstone of a successful exercise.

Planning for an exercise of this scale, message volume and complexity typically takes up to six months. The BDR Team compressed the exercise planning schedule into less than six weeks, due to the expiration of grant funds. We were engaged in the project in early July and began work on the project within one week of contract execution. The BDR Team completed an AAR.

Development of a Strategic Mass Fatality Response Plan

The exercise included discussion, simulation and a hot wash to document decisions. The exercise was designed to examine the Counties' Emergency Operations Plans and Emergency Operations Center procedures in a widespread regional terrorist event. Specifically the exercise was designed to examine the terrorism annexes, mass evacuation and sheltering and mass casualty annexes of the Emergency Operations Plans. BDR also tested their ability to address communications, alert and warning systems and the evacuation of special needs populations in the vapor-hazard zone. Effective NIMS implementation was a major focus of the exercise.

Continuity of Operations Plan, Tabletop Exercise and Terrorist/Mass Casualty Full-Scale Exercise

Brunswick County, North Carolina

The BDR Team developed a COOP for the County, which is one of the fastest growing coastal counties in North Carolina. The plan was developed within a *very aggressive timeframe – less than eight weeks* during the fourth quarter of 2004. Despite the fast turn around time, the County developed an effective plan that was subsequently tested with a tabletop exercise in March 2005. The BDR Team designed a full-scale exercise which involved a terrorism scenario and mass casualty event on June 10, 2007.

Pandemic Influenza Planning, Training and Exercises

Champaign-Urbana Public Health District, Illinois

BDR was selected by the Champaign-Urbana Public Health District (District) to develop a countywide COOP plan for responding to a pandemic influenza incident.

In addition to developing a COOP template that will allow stakeholders who have emergency response roles, the BDR Team is also developing and holding a series of tabletop exercises that will not only test the plans, but also serve as training for the myriad of stakeholders to familiarize themselves with the plans. Through preliminary meetings amongst stakeholders, the BDR Team will ensure the following specific areas are addressed in the plans:

- Develop criteria that will be applied to identify "essential services" for hospitals, health departments, home health care programs, physician offices and 911 centers during a pandemic incident.
- Evaluate and summarize in writing the ethical ramifications and population impact of the "essential services" selected and those that are not.
- Determine the minimum staffing and personnel types, as well as supplies and resources required to deliver these "essential services" and care for patients with influenza during a Severity Index 5 pandemic influenza event. Planning will then

Development of a Strategic Mass Fatality Response Plan

reflect this information covering an 8-week period (1 wave) with contingency plans for covering a second and third wave for a period of up to 24 weeks.

Include in the framework and/or incident response plan a description of how home healthcare services will be considered and address.

Additionally, the BDR Team will develop a countywide plan for handling crisis communications during an event, for instance, a pandemic influenza outbreak or other such incidents impacting the District.

Disaster and Emergency Special Medical Needs Shelter (SMNS) Plan and Resource Management Plan

Mississippi State Department of Health (MSDH)

The Mississippi State Department of Health (MSDH) provides critical services during emergencies, including natural disasters, industrial emergencies and pandemic events. BDR developed both a special medical needs shelter plan (SMNS) and a resource management plan for MSDH. The SMNS plan was developed from best practices extracted from various disasters and emergencies within Georgia, Florida, Alabama and North Carolina, and provides direction for the structure, operation, management and staffing for special medical need shelters. The logistics plan was designed to provide guidance for MSDH and the state's health and emergency medical support function (ESF-8) to appropriately describe, order, mobilize, dispatch, track, recover and demobilize public health resources. BDR developed an equipment field operations guide (FOG) that will facilitate a rapid and informed response to emergencies.



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State of West Virginia
Department of Administration
Purchasing Division

Request for
Quotation 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

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ROBERTA WAGNER 3<u>04-558-0067</u>

HEALTH AND HUMAN RESOURCES OFFICE CHIEF MEDICAL EXAMINER 619 VIRGINIA STREET, WEST CHARLESTON, WV

ADDRESS CORRESPONDENCE TO ATTENTION OF

BUREAU FOR PUBLIC HEALTH 25302 304-558-4865

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RFQ COST SHEET

Bidders shall provide a cost for the following:

Developing a strategic mass fatality response plan including production of ten spiral bound copies of the final plan, tabletop mass fatality management exercise and after action report, and three site visits to West Virginia for the project team.

Total Cost of Project

\$ 59,000.00

The award will be made to the vendor with the lowest overall total cost which meets all requested specifications and requirements. Payment will be made in arrears.

Vendor Signature

Date 70

STATE OF WEST VIRGINIA **Purchasing Division**

PURCHASING AFFIDAVIT

VENDOR OWING A DEBT TO THE STATE:

West Virginia Code §5A-3-10a provides that: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owed is an amount greater than one thousand dollars in the aggregate.

PUBLIC IMPROVEMENT CONTRACTS & DRUG-FREE WORKPLACE ACT:

If this is a solicitation for a public improvement construction contract, the vendor, by its signature below, affirms that it has a written plan for a drug-free workplace policy in compliance with Article 1D, Chapter 21 of the West Virginia Code. The vendor must make said affirmation with its bid submission. Further, public improvement construction contract may not be awarded to a vendor who does not have a written plan for a drug-free workplace policy in compliance with Article 1D, Chapter 21 of the West Virginia Code and who has not submitted that plan to the appropriate contracting authority in timely fashion. For a vendor who is a subcontractor, compliance with Section 5, Article 1D, Chapter 21 of the West Virginia Code may take place before their work on the public improvement is begun.

ANTITRUST:

In submitting a bid to any agency for the state of West Virginia, the bidder offers and agrees that if the bid is accepted the bidder will convey, sell, assign or transfer to the state of West Virginia all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the state of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the state of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to the bidder.

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership or person or entity submitting a bid for the same materials, supplies, equipment or services and is in all respects fair and without collusion or fraud. I further certify that I am authorized to sign the certification on behalf of the bidder or this bid.

LICENSING:

Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, West Virginia Insurance Commission, or any other state agencies or political subdivision. Furthermore, the vendor must provide all necessary releases to obtain information to enable the Director or spending unit to verify that the vendor is licensed and in good standing with the above entities.

CONFIDENTIALITY:

The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in http://www.state.wv.us/admin/purchase/privacy/ noticeConfidentiality.pdf.

Under penalty of law for false swearing (West Virginia Code §61-5-3), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated.

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Purchasing Affidavit (Revised 01/01/09)	/		



VENDOR

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Department of Administration
Purchasing Division
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Charleston, WV 25305-0130

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ROBERTA WAGNER 304-558-0067

HEALTH AND HUMAN RESOURCES
BUREAU FOR PUBLIC HEALTH
OFFICE CHIEF MEDICAL EXAMINER
619 VIRGINIA STREET, WEST
CHARLESTON, WV
25302 304-558-4865

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HEALTH AND HUMAN RESOURCES 619 VIRGINIA STREET, WEST CHARLESTON, WV

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## ertificate of Attendance

This is to acknowledge that

## Steven Fruchtman

Emergency Responder Nuclear, Biological and Chemical has attended the Technical Assistance Responder Awareness Workshop

August 12, 2000

Sponsored by the United States National Domestic Preparedness Program

James K. Warrington
Program Director for Domestic Preparetiess

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### Awarded to

Steven Ware Fruchtman

in recognition for completion of the

National Fire Academy Course



EMERGENCY RESPONSE TO TERRORISM: BASIC CONCEPTS

issued on

November 19, 1998

James Lee Witt, Director anne & with

Federal Emergency Management Agency

Bureau of Justice Assistance

Namey E. Gist, Wirector

# 

This is to certify that

## Steven M. Fruchtman

has successfully completed 4 contact hours of instruction, representing 0.4 continuing education units

Course of Study

**NBC Domestic Preparedness Training** 

This Certificate is duly awarded as evidence of this achievement on

this 15th day of August, 2000

Dean of the College of Graduate Studies and Continuing Education



Presented to

### STEVEN M. FRUCHTMAN

upon completion of Hazardous Materials Emergency Response Training (29 CFR 1910.120 - 24 hour). This person has completed course requirements to the hazardous materials technician level.

Certificate Number: 02598

SEPTEMBER 2-4, 199

Date

Susantkaisen

Susan K. Kaiser, Supervisor Environmental Education

Presented to

### TEVEN M. FRUCHTMAN

upon completion of Hazardous Materials Emergency Response Training [29 CFR 1910.120 (p) (vii)]. This person has completed course requirements for a site and

Certificate Number: 02596

NOVEMBER 2-6, 1992

Date

Susandlawer

Susan K. Kaiser, Supervisor Environmental Education

Presented to

### STEVEN M. FRUCHTMAN

hazardous materials technician level 1910.120 - 40 hour). This person has completed course requirements to the upon completion of Hazardous Materials Emergency Response Training (29 CFR

Certificate Number: 02597

OCTOBER 6-10, 1992

Date

Susanthaiser

Susan K. Kaiser, Supervisor Environmental Education

## E.I. DU PONT DE NEMOURS & COMPANY, INC.



### STEVEN FRUCHTMAN

Has successfully completed

Emergency Response Technician Level Refresher Training As Per OSHA, 1910.120 (q)



United States Fire Administration National Fire Academy 9661 'IE - 97 18n8ny HYZYKDON2 WYJEKIYTZ INCIDENJ WYNYCEWENJ tor the course of study and successfully completing all requirements National Fire Academy at the by pursuing professional development Nation's loss of life and property from fire has demonstrated a commitment to reduce our Steven Marc Fruchtman This is to acknowledge that EIRE ACADE 🗢 nnited states fire administration 🤝



This is to certify that

STEVEN M. FRUCHTMAN

EMERGENCY RESPONSE TO TERRORISM: BASIC CONCEPTS
[16 HOURS] Has Completed the Requirements for

With All the Rights and Privileges Appertaining Thereto

NOVEMBER 19, 1998

### S. ENVIRONMENTAL AGENCY PROTECTION

This certifies that

STEVEN PROCHTMAN

has completed the

EMERGENCY RESPONSE TO HAZARDOUS MATERIAL INCIDENTS (165.15)

Training Course

2.1 Continuing Education Units Concord, New Hampshire

July 15 – 19, 1991

Presented by the

OFFICE OF EMERGENCY AND REMEDIAL RESPONSE

Course Director

Training Coordinator

Environmental Response Branch