



The University of Maryland
Center for Health & Homeland Security

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Director's Message

By Michael Greenberger, CHHS Founder and Director



*Founder and Director
Michael Greenberger, JD*

As I write this message, the Brazil Summer Olympics have come to a close. And those Olympic games were accompanied by worldwide media coverage about the serious consequences of a dangerous viral outbreak that is new to many, but which has hit Mexico, Central America, the Caribbean, South America, and now Miami and Miami beach very hard: the Zika Virus.

A mosquito-borne virus, Zika has usually been viewed as a relatively mild virus—many people may never even know they had it. But the present outbreak, especially in Brazil because of the Olympics and the recent outbreaks in Florida, has captured the world's attention due to the fact that this onset of Zika is now attended

by significant resulting complications: microcephaly and other severe fetal defects, as well as Guillain-Barre Syndrome and other brain-related effects. The World Health Organization has declared Zika a public health emergency of international concern and it has called for worldwide heightened awareness and response.

The U.S. had its first case of travel-acquired Zika confirmed in January of 2016, and its first baby born with Zika-linked microcephaly in June. As of this writing, the U.S. has confirmed at least two clusters of cases of locally-acquired Zika in Florida, and the Centers for Disease Control and Prevention (CDC) issued an unprecedented warning in early August, advising pregnant women and their partners not to travel to areas in Florida with recent outbreaks.

At the same time, there are over 1300 confirmed cases across the country in all but five states. Of those 1300 confirmed U.S. cases, over 300 were pregnant women. Although the majority of these cases were not locally-acquired through mosquitos, the virus' ability to be transmitted sexually has further complicated and expedited its spread in the U.S. Zika is now especially concerning for US territories, particularly Puerto Rico, where cases are multiplying exponentially. The CDC has warned that the virus could affect up to 10,000 pregnant women this year.

Much remains unknown about the virus, and daily headlines often raise more questions than answers, such as the likelihood of transmission not related to travel or sexual activity, as well as the extent to which U.S.

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CHHS Staff



First Row (left to right): Heather Shaivitz JD, Megan Timmins JD, Michael Greenberger JD, Alexandra Podolny JD, Jeanne Stringer, Christie Chung

Second Row (left to right): Orit Zeevi-Bell JD, Trudy Henson JD, Ashley McKibbin MRes, Lauren Morowit, Matilda Channel-Ward MBA

Third Row (left to right): Joe Corona CEM, Maggie Davis JD MA, Christine Gentry JD, Kasia Fertala JD, Preeti Emrick JD, Ellen Cornelius JD, Jie Liu

Fourth Row (left to right): Matt Stiglbauer, Michael Vesely JD, Christopher P. Ryan MA, Eric Oddo MPA, Ben Yelin JD, Max Romanik JD, Abdellaziz Batiss, Christopher Webster JD, Birch Barron MSPH, Markus Rauschecker JD

Not Pictured: Arnold Abraham MS, Michael Beland JD, Janet Clements M.Ed, Lisa Crow CEM, Clark Lee JD, Megan Williams MS

Director's Message (continued)

Continued from cover

mosquito populations could carry and transmit the disease and the full impact the disease has on the brain.

Our Center for Health and Homeland Security (CHHS) has been monitoring the international dialogue since it began, and we have also been focusing on public health preparations by state and local governments to respond to a Zika outbreak.

Many U.S. public health departments, emergency response agencies, and other health stakeholders started early to make sure the public were well-educated and prepared for the onset of Zika. As you will see throughout this newsletter, CHHS has been at the center of those efforts.

Outreach and Education

To better understand Zika and response efforts related to it, and to help communicate information about the virus, CHHS created a Zika Virus Discussion Series. Our Public Health Program Manager, Trudy Henson, for example, interviewed key players in Maryland Zika response efforts, including a videoed conversation with Dr. Leana Wen, Baltimore City's Health Commissioner. That conversation highlighted the critical need for early public education and outreach about the virus: <https://youtu.be/5Z-mZrKQ-14>.

CHHS has also been a key player in public education about Zika by using our public health expertise to write extensively about the virus, Zika response efforts and policies,

and related issues—such as the substantial funding needed to combat the virus. These writings can be found on our website: <http://www.mdchhs.com/how-we-think/blogs/>.

Planning and Response

CHHS is also heavily involved in governmental public health response efforts. A number of our staff are working with local agencies to develop hands-on Zika response planning. For example, Senior Law & Policy Analyst Maggie Davis, has worked extensively on Montgomery County Maryland's Zika efforts, and Senior Policy Analyst Megan Williams, has acted as the Zika point person for the City of Annapolis, Maryland by conducting presentations and interviews for the public health community specifically and the public generally throughout the city.

Finally, CHHS has worked with several counties in Maryland to develop Emerging Infectious Disease (EID) Plans. While not Zika-specific, these plans focus on all possible response measures a health department might need to help contain and control a serious infectious disease outbreak such as Zika—from surveillance and reporting, quarantine and isolation, to worker safety.

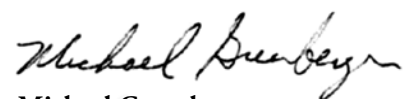
Zika is not unlike other serious infectious disease emergencies this country and the world are now regularly facing, where a pandemic or EID can immediately cause acute stress on our health systems through a huge hospital patient surge, or where the

public's concern is heightened by a possible EID high mortality rate, e.g., the worldwide Ebola outbreak.

In such pressing public health crises, the costs of public health preparation and response are very high. For example, the World Health Organization estimates Zika will globally cost \$3.5 billion in 2016 alone, and the CDC estimates the lifetime costs of caring for a microcephalic child to be somewhere between \$1 million and \$10 million.

These numbers, of course, cannot fully measure the public impact of these emerging infectious diseases, which underscores the importance of the vital efforts to stop the disease. Further adding to the serious nature of this evolving issue is that as of this writing, Congress has ignored the plea of public health stakeholders, especially the Centers for Disease Control and Prevention, by repeatedly failing to appropriate the funding all U.S. public health stakeholders agree is urgently needed to respond effectively to Zika. Funds to combat Zika will soon be depleted.

The regular advent of deadly, novel, emerging infectious diseases, such as Ebola and Zika, has unfortunately become a way of life. Our main mission has been and will continue to be preparation to prevent, resist and quickly respond to these deadly outbreaks domestically and abroad.



Michael Greenberger
CHHS Founder & Director

CHHS Turns its Public Health Expertise to Transportation

Public transportation's role in public health came into the national spotlight during the Ebola outbreak in fall 2014, when symptomatic citizens rode the New York subway and flew in a common carrier airplane. The question quickly became: Are public transit agencies prepared to respond to an infectious disease outbreak?

In fall of 2015, CHHS was awarded a prestigious contract from the National Academies of Science Transportation Research Board (TRB) to conduct a study and write a subsequent report answering just that question. The study and report focuses on the legal issues regarding Public Transit Emergency Preparedness against Ebola and Other Infectious Diseases. Phase One of the study was completed this past winter, and Phase Two—which includes extensive research and a subsequent report—is currently underway.

The project, led by Public Health Program Manager Trudy Henson, with assistance from Senior Law & Policy Analysts Ben Yelin and Kasia Fertala will examine responses to infectious diseases in order to identify legal issues that transit



agencies may confront during an outbreak of Ebola or other infectious disease. As part of the study, CHHS is using its legal expertise to research potential responses and remedies to an epidemic or pandemic, such as closures of public facilities and businesses; checkpoints for screening; quarantine zones; infection control and disinfection measures; compulsory leave for symptomatic employees; employee refusal to work; pre-screening of passengers; and full or partial suspension of service.

In addition, CHHS crafted an online survey that it will use to electronically survey 250 U.S. transit agencies. The questionnaire will determine transit agencies' existing response plans for infectious disease outbreaks, and provides open-ended opportunities for agencies to describe their experience with protocols/policies implemented in a real-world response. CHHS will use these responses to determine if additional potential case studies, trends, or observations should be included in the final report.

Funds for the Center for Health and Homeland Security are administered by the University of Maryland, Baltimore Foundation, Inc.

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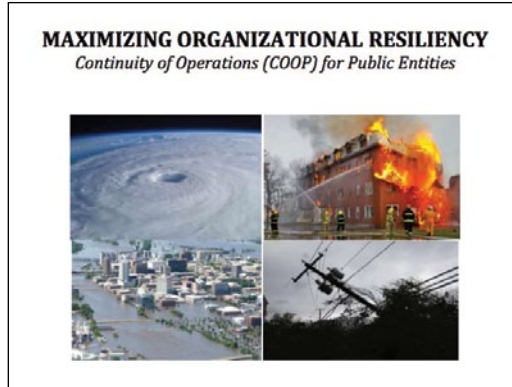
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CHHS Continues Deliveries of Revamped, Rebranded COOP Course

After many successful years delivering “Preparing the States: Implementing Continuity of Operations Planning” (COOP) under the DHS/FEMA Continuing Training Grant program (as certified FEMA training course MGT-331), CHHS recently revised and updated the course, now called “Maximizing Organizational Resiliency: Continuity of Operations for Public Entities.”

In the ten years that the course was funded and certified by DHS/FEMA, CHHS travelled throughout the country, including tribal and territorial jurisdictions, delivering hundreds of classes and training



thousands of participants from every type of agency and organization. The revised course, a two-day comprehensive training on the development of COOP plans for organizations, is updated to include recent Federal guidance, as well as lessons learned and best practices from over a

decade of COOP training, planning, exercising, and real-life implementation of plans.

Since the revision, CHHS has rolled out the course to numerous agencies in multiple states. CHHS instructors have recently trained over 100 health care, hospital, and emergency management staff members in North Carolina and Delaware.

For more information about our course, Maximizing Organizational Resiliency: Continuity of Operations for Public Entities, or to request a training, please visit our website or contact Associate Director Alexandra Podolny.

Find us at mdchhs.com

Senior Crisis Management Seminars

Working with the U.S. Department of State Office of Anti-Terrorism Assistance (ATA), CHHS continues to develop and deliver Senior Crisis Management Seminars for international delegations looking to enhance their emergency management capabilities. Since our last publication, CHHS has conducted seminars in the Washington, D.C. region for India, the Philippines, and Burkina Faso. We also sent a team to Rabat, Morocco in May to conduct a seminar in-country. Each seminar was tailored to the country's interests and needs. The subjects included: threat and hazard identification and risk assessments, human rights, mass evacuations and

sheltering, the incident command structure and emergency operation center activations, crisis communications, leadership in a crisis, and mass casualty response. Participants were given the opportunity to test these capabilities through a series of hands-on exercises throughout the seminars.

Additionally, CHHS worked with the Maryland Emergency Management Agency and Speaki2i to produce two videos on Emergency Operations Centers (EOCs) to be used in conjunction with the presentations. The first video is an in-depth look at all aspects of an EOC that delegations can take home and use with their colleagues when creating plans for

their own EOCs. The second video is a shorter overview that shows EOCs in action; it serves as an introduction to EOCs for delegations who are not familiar with the concept or the way EOCs are used in the United States. CHHS is looking forward to a continued relationship with ATA throughout the coming year.

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Hospital Evacuation Planning

This spring, CHHS worked with Baltimore area hospitals to improve hospital emergency preparedness. CHHS coordinated with The Johns Hopkins Hospital in enhancing its hospital evacuation policies, and with the Region III Health & Medical Coalition in developing regional evacuation guidance for a multiple facility evacuation.

Senior Law & Policy Analyst Preeti Emrick worked with senior emergency management officials at Johns



Hopkins Hospital to develop a concise evacuation flowchart with accompanying procedures to provide The Johns Hopkins Hospital personnel with an accessible guide to its evacuation policies. Expanding upon

that project, Ms. Emrick worked with the Region III Health & Medical Coalition (members include The Johns Hopkins Hospital, University of Maryland Medical Center, Mercy Medical Center, and various Medstar affiliate hospitals, among others) to develop evacuation guidance that could be used by all hospitals in the region as well as policies for regional coordination. A handbook was also developed for the hospitals outlining the policies for the various facets of an evacuation.

Recovery Planning in Howard County, MD

Facing the damage from historic flooding in Ellicott City, MD, The Howard County Office of Emergency Management is already putting into action its latest major initiative, a recovery plan that engages communities at the local, regional, and state level. Working through all levels of government will not only provide enhanced collaboration and operations through the jurisdictions, but will also establish a model that can be replicated throughout the State.

At the regional and state level, some overarching objectives under discussion include examining the interconnectedness of all the respective jurisdictions, recovery-led resource sharing, and



Birch Barron, Senior Policy Analyst, serves as a shift manager in the Howard County Emergency Operations Center after catastrophic flooding destroys historic downtown Ellicott City, Maryland on July 30, 2016.

identifying potential national implications when the region is severely impacted. The committee will also explore opportunities to forge relationships with any national organizations that have a disaster preparedness/response mission.

Developing a local Recovery Plan will establish the internal structure for coordinated recovery operations. CHHS staff in the Howard County Office of Emergency Management will develop a plan to fit the specific needs of recovery for the community – regardless of the specific circumstances of the disaster, location, and scope. This will include engaging with local businesses and nonprofit organizations, including faith-based groups. By reaching out to the greater community during the recovery planning process, the County will gain a comprehensive understanding of the community needs during recovery and build a plan through a cooperative approach.

CHHS' Academic Presence Continues to Grow

CHHS continues to build a strong Academic Program that blends legal theory with practical experience. CHHS has now developed - and teaches - six courses in the homeland security and crisis management field. These courses are available to law students at the University of Maryland Carey School of Law, as well as Masters students enrolled in the University's Master of Science in Law (MSL) degree program.

CHHS is committed to providing students with the knowledge, skills, and practical experiences they need to be successful in their professions. CHHS is therefore very happy to announce that the Maryland Higher Education Commission recently approved a Certificate in Cybersecurity and Crisis Management. By obtaining this certificate, Maryland

Carey Law School graduates will be able to demonstrate to potential employers that they not only have a law degree, but possess specialized knowledge within the areas of cybersecurity and crisis management.

This fall, the Masters of Science in Law (MSL) program welcomes a new class of students. CHHS is responsible for two of the five academic tracks of the program – cybersecurity and crisis management. By all accounts, the MSL program is a success and overall enrollment has increased substantially. Almost half of the incoming class of 57 students will be part of CHHS-taught cybersecurity or crisis management tracks. What is more, current MSL students are extremely enthusiastic about the program. They are already applying what they are learning in the program to their jobs.

The MSL program was especially designed for non-legal professionals to gain an understanding of law and policy issues in their fields. Our cyber students who are technical experts are now able to engage with their organization's leadership on legal, policy, and strategic decision making.

These academic programs are being offered at a key time for the emergency management and homeland security field. Employers are seeking professionals who have in-depth knowledge of law and policy surrounding crisis management and cybersecurity.

For more information about our academic programs, please visit: <http://www.mdchhs.com/what-we-do/academics/> and <https://www.law.umaryland.edu/academics/msl/>.

CHHS the Video



Learn more about who we are and what we do:



www.youtube.com/MDCHHS

CHHS Focuses on Cybersecurity

Cyber Symposium

On February 5, 2016 CHHS held its first Law and Policy of Cybersecurity Symposium. The Symposium was co-sponsored with the University of Maryland Francis King Carey School of Law and the Universities at Shady Grove. The Symposium had over 100 attendees from government entities, the private sector, and academia and covered the most important legal and policy issues in cybersecurity. Expert speakers included: Chris Inglis, former Deputy Director of the National Security Agency (NSA), who gave the opening keynote address where he shared his insights on the state of cybersecurity and future developments; Ira Hoffman, JD, Butzel Long, provided a general overview of current and emerging cyber law; Jonathan Litchman and Dan Caprio, The Providence Group, addressed data breaches, risk management, and response strategies; Matt Barrett, National Institute of Standards and Technology (NIST), provided a walk-through of the NIST Cybersecurity Framework; Jeff Kosseff, JD, Assistant Professor U.S. Naval Academy, explained the Framework's potential legal implications; Nancy Libin, JD, Jenner & Block, provided an in-depth presentation on civil liberties and privacy issues in cyberspace; and Markus Rauschecker, JD, CHHS Cybersecurity Program Manager, rounded out the program by covering major



Michael Greenberger addresses attendees at the February 5, 2016 Law & Policy of Cybersecurity Symposium

cyber legislation and important court decisions in cybersecurity. Attendees left the Symposium having made important connections across many sectors within the field and having learned about a multitude of issues that they may not have previously considered. CHHS will build on the success of the Law and Policy of Cybersecurity Symposium and plans to offer future events.

Cyber Council

This past Fall, CHHS Director Michael Greenberger was invited to join the Maryland Cybersecurity Council. The Council is chaired by the Maryland Attorney General, Brian Frosh, and includes distinguished cybersecurity experts from

Federal and State governments, various businesses, law firms, and academia. The Council's mission is to improve Maryland cybersecurity through the creation of recommendations that will support critical infrastructure, reinforce the State's strategic plan to respond and recover from cyber incidents, and further advance State cybersecurity laws and policies. Director Greenberger chairs the Critical Infrastructure and Cybersecurity Framework Subcommittee. The Subcommittee has already contributed its recommendations to the Council, which submitted a final report to the Maryland General Assembly on July 1, 2016 and will submit updated recommendations every two years thereafter.



CHHS Cybersecurity Program Manager Markus Rauschecker discussed legal issues in cybersecurity.

CHHS Enters into Partnership with Maryland Department of Commerce

This spring, CHHS entered into a strategic partnership with the Maryland Department of Commerce. Over the next year, CHHS and the Department will work together to educate Maryland businesses, trade associations, and other stakeholders on the important legal and policy issues they face in cybersecurity. Addressing cyber threats requires not only technical solutions, but must include an understanding of the legal landscape and the implementation of sound policy. Together, CHHS and the Maryland Department of Commerce will help “to ensure that

Maryland remains at the cutting edge of public policy in the rapidly expanding cybersecurity arena.”

Conferences – CyberMaryland and GovConnect Cyber 7.0

CHHS continues to contribute to important cybersecurity conferences. Director Greenberger remains a member of the CyberMaryland Advisory Board and will again help shape this year’s conference agenda. Meanwhile, CHHS Cybersecurity Program Manager Markus Rauschecker was invited to join the GovConnects Cyber7.0 Conference Committee. Cyber 7.0 focused on Critical Infrastructure and The Internet of Things.

2016 Preparedness Summit



This April CHHS staffers Christine Gentry and Raymond Shin attended the 2016 Preparedness Summit in Dallas, and alongside clients from the Prince George’s County Health Department (PGCHD) Public Health Emergency Preparedness (PHEP) program, presented Continuity of Operations During a Public Health Emergency: Resource and Volunteer Management.

The conference focused on the importance of rigorous Continuity of Operations planning for public health organizations. Shin outlined key COOP components and challenges, while Gentry described legal issues to consider in COOP development. The presentation concluded with the practical application of COOP to a public health-related emergency scenario.

CHHS Helps Maryland Prepare for Zika Virus through Education, Outreach, and Planning



CHHS Director Michael Greenberger joins Baltimore City Health Commissioner Dr. Leana Wen to discuss Emergency Preparedness issues.

As mentioned in the Director's message of this newsletter, CHHS has been focused on the continually evolving threat of the Zika Virus. CHHS has assisted clients in preparing for state and local response during summertime, which is prime mosquito season.

To better understand response efforts, and to help spread the message about Zika prevention out, CHHS created a Zika Virus Discussion Series. Public Health Program Manager Trudy Henson interviewed two key players in Maryland response efforts: Dr. Leana Wen, Baltimore City's Health Commissioner; and CHHS' Maggie Davis, Senior Law and Policy Analyst, and Emergency Planner for Montgomery County. The interviews (available video at <http://www.mdchhs.com/how-we-think/blogs/>), focused on each jurisdic-

tion's response efforts; why early response was critical; and how efforts vary jurisdiction to jurisdiction.

CHHS is also involved in planning and exercise efforts around the state:

City of Annapolis

The City of Annapolis Office of Emergency Management (OEM) began to take measures in March and April to get ahead of the virus' spread into the continental United States. OEM has taken a very active approach working with the local health department and the Maryland Department of Health and Mental Hygiene to inform elected officials and community leaders of the impending virus threat, as well as Annapolis residents

and visitors who will be spending more time near the water.

OEM has provided various outlets for residents to receive the most-up-to-date Zika information at any time. CHHS Senior Policy Analyst Megan Williams has become the point person for Zika information in the City of Annapolis, creating a slideshow displayed on the Annapolis website, giving presentations to community organizations, and working with the local radio station WNAV to conduct interviews to reach as many residents as possible. Zika is a new threat to Annapolis – therefore, OEM strives to reach all residents by distributing information about how individuals can prepare, as well as information regarding the proactive steps the City and the State are taking in preparation for the virus.

OEM is engaging in a public outreach campaign to educate its citizens about the virus and protective measures that citizens can take to limit possible exposure. Based on information gathered by the Centers for Disease Control and Prevention (CDC), Annapolis OEM has made recommendations for bug sprays, with specific active ingredients, and other protective measures, including clothing treatment and property safety, that are easily attainable for citizens.

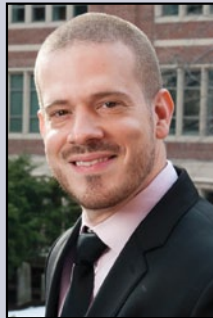
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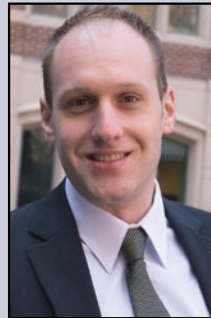
CHHS Announces Three Staff Members Designated as New Certified Emergency Managers



Lisa Crow



Joseph Corona



Birch Barron

CHHS would like to congratulate Senior Staff members Birch Barron, Joseph Corona and Lisa Crow, who have recently earned recognition from the International Association of Emergency Managers by being among the group of professionals designated Certified Emergency Manager (CEM®). This is the greatest professional honor provided by the Association, whose members constitute over 9,000 emergency managers representing profes-

sionals who seek to save lives and protect property and the environment during emergencies and disasters.

All three qualified for the CEM® designation by submitting an extensive credentials package and successfully completing a Management Essay and written examination. To maintain certification, they must continue a program of professional development over successive five-year periods in the future. Thus, this is an honor neither easily earned nor maintained.

The CEM® designation presently is held by 2,504 men and women in the emergency management profession. As CEMs, they demonstrated a high level of competence and ethical fitness for emergency management.

CHHS is extremely proud to have these individuals on staff.

Montgomery County

In the spring, as the Zika Virus garnered attention, the Montgomery County Public Health Department contracted with CHHS to create an Emerging Infectious Disease (EID) Plan. Although not disease-specific, the plan focused on all possible response measures the Health Department might need to use to help contain and control an outbreak—from surveillance and reporting, to quarantine and isolation, to worker safety. Trudy Henson and

Senior Law & Policy Analyst Chris Webster worked closely with the Montgomery County Public Health Department to ensure the plan was concise and accessible while leveraging the extensive public health emergency planning Montgomery County had already completed. Written with lessons learned from H1N1 and Ebola kept in mind, as well as newly-emerging lessons from Zika, the Montgomery County EID Plan is one of the first of its kind.

Prince George's County

Further, CHHS is supporting the Prince George's County Health Department in preparing and facilitating an Emerging Infectious Disease seminar and workshop. CHHS staff partnered with the Health Department and other county stakeholders to develop a scenario that would allow the County to test its EID Plan this summer. The seminar and workshop are the culmination of planning efforts in the Prince George's County Health Department over the last year, where CHHS helped develop the County's EID Plan.

CHHS in Social Media



CHHS maintains active social media accounts on a number of platforms. Follow us for updates on CHHS media appearances, webinars and blogs on current events, and all the information on CHHS special events.



Check out our YouTube Channel to see our video blog series on the Zika virus



Follow us on Twitter at @mdchhs to get up to the minute updates on news, events, and CHHS speaking appearances



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[HTTP://WWW.MDCHHS.COM](http://www.mdchhs.com)

CHHS Expands its Work in Countering Violent Extremism

With the recent attacks in Orlando and Nice, it is undisputable that Homegrown Violent Extremism (HVE) is a major threat in the United States and abroad. In the National Capital Region, however, there has been substantial work to prevent and mitigate HVE threats as part of a whole community partnership. The Building Resilience Against Violent Extremism (BRAVE) model, originally called the Montgomery County Model, developed in Montgomery County, Maryland, was the first evidence-based, community-led Countering Violent Extremism (CVE) program in the nation. The BRAVE model is best described as an early-warning system that expands the circle of trusted adults and peers who could intervene in the pre-criminal space to prevent targeted violence. The model's multi-faceted approach has been recognized by the White House as a best practice.

Under the stewardship of Dr. Hedieh Mirahmadi, the World Organization for Resource Development and Education (WORDE) developed the BRAVE model. Motivating its development was WORDE's desire to test the efficacy of social integration theory in the CVE context. After a rigorous evaluation, the BRAVE model programming showed statistically significant outcomes in 12 out of 14 social integration indicators studied.

Senior Law & Policy Analyst Maggie Davis began working with WORDE on the BRAVE program in 2014 through her client, the Montgomery County Office of

Emergency Management and Homeland Security, as part of the BRAVE model's large array of stakeholders. In 2016, WORDE hired CHHS to begin assisting it in further developing the BRAVE model and preparing it for replication in new jurisdictions. Through this work, Ms. Davis has helped WORDE develop the BRAVE model strategic plan to institutionalize the program within Montgomery County and assist new jurisdictions in implementing a BRAVE program within their community.

To help educate more jurisdictions about the BRAVE model, in June 2016, Dr. Mirahmadi and Ms. Davis presented at both the Maryland Emergency Management Association and National Homeland Security conferences. Their presentation included an overview of the BRAVE model development in Montgomery County as well as the concept of operations of a fully functioning BRAVE model intervention in the pre-criminal space.

One of the first new jurisdictions working to implement a BRAVE model is Denver, Colorado. WORDE has been contracted by the United States Attorney's Office in Denver to assess the metropolitan area's needs and resources and provide a recommendation for how best it can implement a BRAVE model within the region. Continuing the relationship with WORDE, Ms. Davis is helping with the Colorado project by providing subject matter expertise in emergency management, training, and local governance issues.

Maryland National Capital Region (MD NCR) Mutual Aid Exercise Series

This spring, Senior Law & Policy Analyst Kasia Fertala and Senior Policy Analyst Eric Oddo worked with the Maryland Emergency Management Agency (MEMA), the Montgomery County Office of Emergency Management and Homeland Security (OEMHS), and the Prince George's County Office of Emergency Management (OEM) to develop a two-part exercise series to test the participating jurisdictions' various mutual aid mechanisms including county-to-county mutual aid agreements, the Maryland Emergency Management Assistance Compact (MEMAC), and the Emergency Management Assistance Compact (EMAC). MEMAC is a state-wide mutual aid system that allows any jurisdiction in Maryland to request and receive assets from another Maryland jurisdiction. All requesting procedures and financial liability issues are addressed through MEMAC ahead of time. EMAC is a similar resource request mechanism that facilitates the sharing of resource from state to state. To be activated, both MEMAC and EMAC require a formal state of emergency declaration to be in place in the requesting jurisdiction.

The Maryland National Capital Region (NCR) Mutual Aid Workshop/Tabletop Exercise was held on March 29 at the Montgomery County Emergency Operations



Maryland counties exercise resource sharing capabilities through mutual aid partnerships.

Center (EOC). First, MEMA's Resource Management Subject Matter Experts provided training to County representatives on the various resource request mechanisms. Then, participants were afforded the opportunity to discuss the resource request process, including MEMAC and EMAC, using a real-world hurricane scenario, and to identify any potential gaps or areas for improvement.

Building on the lessons learned from the Workshop, the Exercise Planning Team then developed a Functional Exercise, which was held on May 20. Over 50 exercise participants operated from the State Emergency Operations Center (SEOC), Prince George's

County's EOC, and Montgomery County's EOC. Eight CHHS staffers served as controllers, evaluators, and simulators at each location during the exercise. The exercise featured a hurricane scenario, during which the greatest impact in the region was to Prince George's and Montgomery Counties, specifically. The exercise challenged participants to primarily request resources via the established MEMAC and EMAC processes, as regular mutual aid options were exhausted. Given the opportunity to test these processes, several areas of improvement were identified during the After Action Review.

CHHS Continues Supporting UMB

During the Fall and Winter of 2015-16, CHHS partnered with the University of Maryland Baltimore (UMB) Office of Environmental Health and Safety (EHS) to conduct individual Continuity of Operations (COOP) planning workshops for the Schools of Dentistry, Law, Nursing, Medicine, Pharmacy and Social Work.

COOP is a comprehensive process to ensure that the capability exists within an organization to continue the core components of its operations in the aftermath of a disruption.

The individual workshops were well-attended by the executive leadership, including the Deans of each school. There were four fundamental objectives: first, familiarize the participants with the emergency management structure of UMB;

second, review each school's list of essential functions; third, discuss the completion of function-specific standard operating procedures; and fourth, engage with a hypothetical emergency situation and discuss how school operations would be impacted and decisions made.

For the purpose of establishing context, it was important that workshop participants understood where they, as continuity personnel, fit within the organizational structure of the University. As such, the roles and responsibilities within the Incident Command System, Emergency Operations Center, and Emergency Management Team were discussed in-depth.

Essential functions represent the areas of operations that must be

continued by UMB schools or offices under all circumstances. These workshops provided a helpful forum for analyzing which functions truly rise to the definition of essential, and which can be temporarily suspended during an emergency. To ensure that UMB COOP plans are user-friendly and operational documents, CHHS and EHS designed a functional template for all UMB entities to complete, which details the critical components (such as responsible personnel and resource requirements) for their respective essential functions.

These workshops proved to be a valuable chance to identify potential gaps and areas for improvement for the UMB campus. CHHS looks forward to a continued partnership with UMB in an effort to keep our campus safe.

Carroll County Health Department Operations Center Plan

In spring of 2016, CHHS contracted with the Carroll County Health Department (CCHD) to create a Health Department Operations Center (HDOC) Plan. The plan builds on a Concept of Operations Plan CHHS completed for CCHD in 2013. Using customized position-specific checklists, the HDOC Plan provides an easily

accessible list of tasks for each HDOC position, from Incident Commander to the Administrative Branch Director. Where possible, the plan incorporates elements of the functions and tasks listed in the Centers for Disease Control's (CDC) Public Health Capabilities.

Capitalizing on these planning efforts, and as a way to familiarize staff with the plan, CHHS conducted

a workshop on the HDOC Plan for CCHD. The half-day workshop served as a training tool for staff, and allowed them to practice applying the plan to a hypothetical scenario during a tabletop exercise. Participants were able to engage with one another and work through roles and responsibilities during an emergency.

Give to CHHS

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Summer/Fall Newsletter • 2016

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The CHHS newsletter is published on a semi-annual basis. For more information about CHHS or to join our mailing list, visit us online at www.mdchhs.com.

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