

# How Safe Are We?

## A report card on regional security



**EAST-WEST GATEWAY**  
Council of Governments

Creating Solutions Across Jurisdictional Boundaries

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## About STARRS

In the aftermath of the September 11, 2001 attacks and subsequent mailings of anthrax spores, Congress passed the Homeland Security Act (HSA) of 2002. The HSA created the United States Department of Homeland Security and the new cabinet-level position of Secretary of Homeland Security. From this new department, the Urban Area Security Initiative (UASI) Program was authorized under the umbrella of the Federal Emergency Management Agency (FEMA).

As national efforts to address the rising threat of terrorism were underway, the Greater St. Louis Metropolitan region began initiatives that started with a few volunteers from the medical community, Emergency Medical Service (EMS), fire, police, public health, and government to coordinate multi-disciplinary, multi-jurisdictional responses to large-scale medical emergencies. This working group later formed under the name St. Louis Metropolitan Medical Response System (SLMMRS). In 2002, SLMMRS was incorporated and began operating as a nonprofit 501(c)(3) Missouri Corporation authorized to conduct affairs in Illinois. In 2003, after the UASI Grant Program directed a regional approach to Homeland Security funding, SLMMRS adopted the name St. Louis Area Regional Response System (STARRS) to encompass its growing role in regional planning. In February of 2004, STARRS entered into a Memorandum of Understanding (MOU) with the East-West Gateway Council of Governments (EWG) whereby EWG recognized the multidisciplinary working group as the metropolitan agency for planning and implementation of emergency medical response in the bi-state metropolitan region.

As an agency, STARRS cooperates with the eight governments that make up the St. Louis Urban Area. In Missouri, the footprint encompasses the City of St. Louis, Franklin, Jefferson, St. Charles, and St. Louis Counties while the governments of St. Clair, Madison, and Monroe Counties are included in Illinois. STARRS has a formal relationship with these governmental agencies through the MOU with EWG, which also serves as its fiscal agent and provides administration services for homeland security and healthcare grants.

Our mission to help local governments and businesses is guided by an established Board of Directors who steer grant funds and programs toward success. The Board is comprised of appointed representation from the eight county elected leaders, the emergency managers from each of the eight counties, and operational subject matter experts from key disciplines including EMS, fire and police agencies, hospitals and public health. In addition, several technical committees have been established to determine the best application of grant funding and implement the important work of developing and maintaining regional plans and response capabilities. The various governments and agencies within the St. Louis region are better prepared to work together during disaster events as a result of the planning that takes place in these groups.

For more than 14 years, STARRS has relied on people who touch complex issues every day to inform it. Key subject matter experts with different emergency response capabilities and



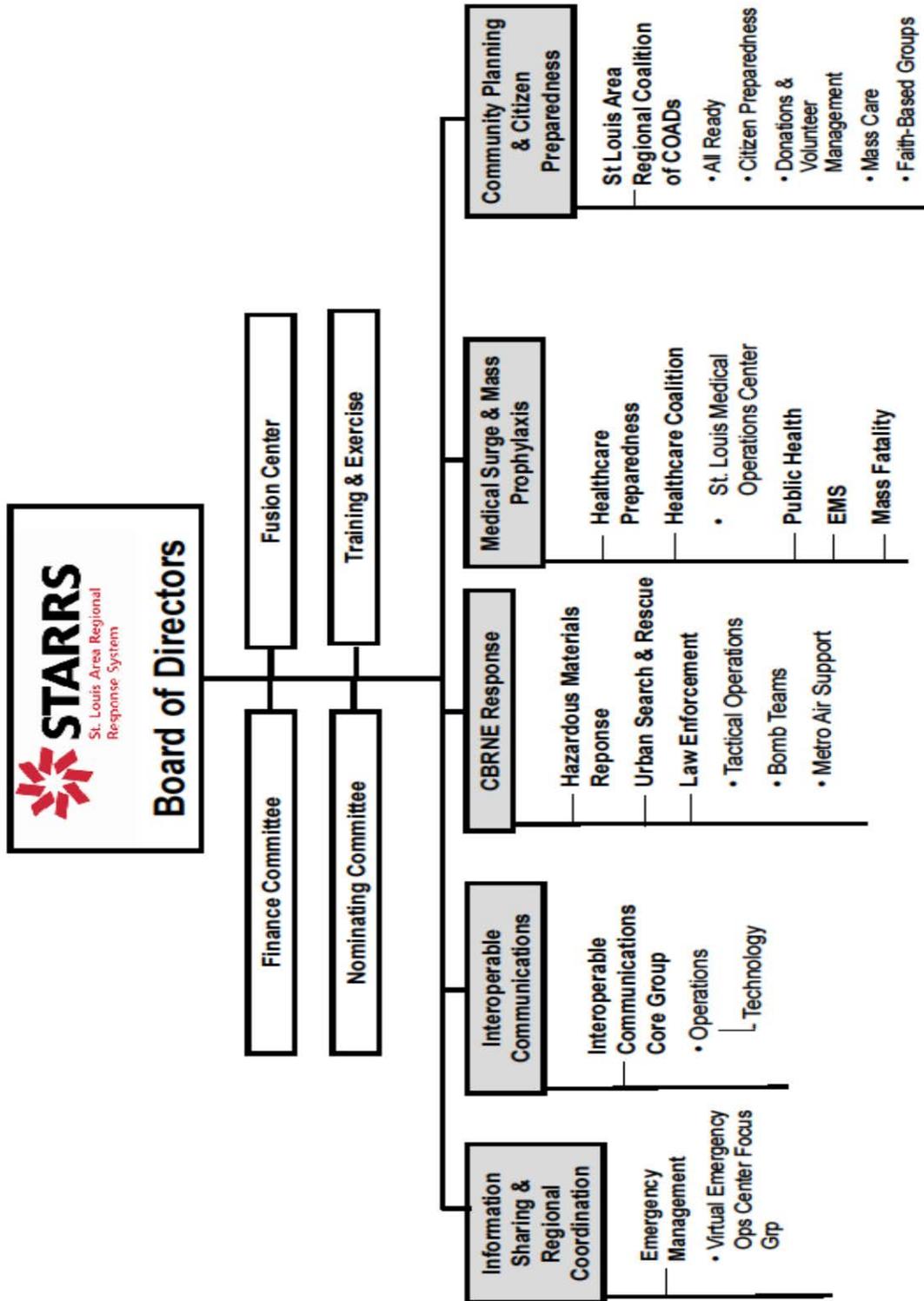
concerns stepped across the aisle and came together to keep the citizens of this vital metropolitan region not only safe but prepared. It is these actions that are the foundation of STARRS; the system is the people.

Over the course of its tenure, STARRS has distributed more than \$100 million dollars in grant funds to the entire St. Louis Urban Area in accordance with the Department of Homeland Security's guidance. Its programs have benefited a wide array of local, state, and intra-state responses between 2005 and 2018, from outer state hurricane deployments to Mississippi and Meramec Rivers flood response in the St. Louis region.



**STARRS**

**Organization Chart (2018)**



[Shaded boxes indicate functional categories]

St. Louis Area Regional Response System (STARRS)  
 Urban Area Working Group Committee Structure – May 2018



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## **Committees (2018)**

- Emergency Medical Services
- Emergency Management
- Hazardous Materials (Hazmat)
- Healthcare Coalition
- Healthcare Preparedness
- Heavy Rescue
- Interoperable Communications Core Group
- Law Enforcement
- Mass Fatality
- Public Health
- St. Louis Area Regional COAD (SLARCC)
- Terrorism Early Warning Fusion Center
- Training and Exercise



**Emergency Medical Services (EMS)**

Chair: Jim Fingerhut, Deputy Chief, Special Operations  
Clayton St. Charles County Ambulance District

Vice Chair: John Nowak, Operations Manager  
MedStar Ambulance

Mission: Enhance the region's capability to manage mass casualty incidents by building a mutual aid system for large scale triage, treatment, and transport; ensuring availability of adequate medical response supplies; providing training for EMS strike teams and task forces; and coordination among regional EMS agencies and with hospitals and public health agencies as well as with law enforcement to support treatment of officers responding to tactical incidents.

Projects: Installation of on-board mobile routers to improve communications between ambulances, hospitals, and dispatch centers, and the placement of SMART triage kits into emergency vehicles to assist with the triage and tracking of patients following an MCI event.

**Emergency Management**

Chair: Mark Diedrich, Director  
St. Louis County Police Department

Vice Chair: Warren Robinson, Director  
Jefferson County Emergency Management Agency

Mission: Assess current command and control capabilities of County Emergency Operation Centers and, if necessary, purchase new standardized software applications to support terrorism prevention, emergency response and recovery activities.

Projects: Projects include the E-Sponder disaster incident management tool that allows emergency managers to coordinate and share resource during an event; and planning for the purchase of a web based tool for sharing and managing changes in emergency response plans.



### **Hazardous Materials (HazMat)**

Chair: Dennis Jenkerson, Chief  
City of St. Louis Fire Department

Mission: Provide planning and coordination among the region's hazardous materials response teams to ensure that all teams have standardized equipment and training. These teams can provide response across the region and seamlessly scale up efforts during mutual aid assistance.

Projects: Projects include providing specialized training to all team members; operation and maintenance of high-capacity decontamination units; purchase of monitoring instrumentation to identify and assess hazards of all types of chemical, radiological, and biological releases; purchase of personal protective equipment to ensure the health and safety of responders in the hot zone.

### **Healthcare Coalition**

Chair: Vanessa Poston, Environmental Health and Safety Manager  
Missouri Baptist Medical Center

Mission: The ESF-8 Committee coordinates health and medical planning for the Missouri Region C Healthcare Coalition and the St. Louis metropolitan region. The ESF-8 Committee is made up of representatives from the Hospital Preparedness, Public Health, EMS, Mass Fatality, and Emergency Management Committees plus key subject matter experts in healthcare. Hospital Preparedness Program (HPP) grant projects initiated at the primary committee level are vetted at the ESF-8 Committee

Projects: Projects include development and sustainment of the St. Louis Medical Operations Center (SMOC).



### **Healthcare Preparedness**

Chair: John Whitaker, Fire & Safety Specialist  
Eastern Missouri Psychiatric Hospital System

Vice Chair: Michele Tanton, Emergency Preparedness & Compliance Coordinator  
St. Louis Children's Hospital

Mission: Provide leadership to develop a coordinated hospital response to critical medical surge incidents in the St. Louis Bi-State region. The group focuses on regional healthcare planning, response coordination, and recovery. They also collaborate with public health, EMS, fire, police, fatality management, emergency management agencies, the transportation sector, utilities, and other healthcare partners to support the Missouri Region C Healthcare Coalition. The committee develops and implements plans, training, and exercises to meet the requirements of hospital-focused grant funding and assist hospitals to meet or exceed regulatory and accreditation healthcare requirements and compliance.

Projects: Development of the Regional Healthcare Coordination Plan (RHCP) and implementation of the St. Louis Medical Operation Center (SMOC); development of regional disaster incident management web-based tools; medical surge planning and equipment procurement including various general and specialized mobile medical surge caches; development of a patient tracking system; and training, exercises and drills.

### **Interoperable Communications Core Group**

Chair: Greg Brown, Chief  
Eureka Fire Protection District

Vice Chair: Joann Leykam, Director of Administration  
St. Charles County, Missouri

Mission: The Core Group represents the member communication systems in the effort to enhance interoperable communications within the region, with the states of Illinois and Missouri, the Federal Communications Commission, and other systems as deemed beneficial to the Region. It provides direction on achieving interoperable communications among all first responders in the region.



**Projects:** Oversight of the St. Louis Regional Digital Microwave backbone system installation, operations, and governance; Identification and coordination of enhancements to the system. Maintenance of the St. Louis Regional Tactical Interoperable Communications Plan (TICP) and the St. Louis Regional Frequency Plan.

#### **Law Enforcement**

Chair: Colonel Jon Belmar, Chief  
St. Louis County Police Department

Vice Chair: Colonel Dave Todd, Chief  
St. Charles County Police Department

**Mission:** Provides planning and direction in three primary areas: bomb and tactical teams and the Metro Air Support Unit. Their efforts focus on procuring reliable technology, standardization among teams, joint training and exercise, capability to respond to Human Adversarial Threats including enhancing the ability to function within contaminated areas to protect other support teams.

**Projects:** Projects include purchase of personal protective equipment (PPE) for SWAT teams, bomb detection and containment devices, joint training among teams, and an aircraft for aerial surveillance.

#### **Mass Fatality Committee**

Chair: Sarah Gamblin-Luig, Deputy Commissioner  
City of St. Louis Emergency Management Agency  
Missouri Disaster Response System (MoDRS) Disaster Mortuary Team

Vice Chair: Kathleen Hargrave, Chief Death Investigator  
Office of the Regional Medical Examiner - Franklin, Jefferson, and St. Charles County,  
Missouri

**Mission:** The Mass Fatality Committee is responsible for the developing a regional coordinated approach to mass fatality responses. They are responsible for establishing and managing specialized equipment caches and developing a regional team approach to these types of incidents. Composition includes representatives from public health, coroners/medical examiners, funeral directors, hospitals, and emergency management.



Projects: Maintaining and augmenting the region's Mass Fatality Resource Coordination Plan; a Family Assistance Center plan; training local responders for roles and responsibilities likely encountered in a response to a mass fatality incident; and the design and procurement of regionally deployable trailers equipped with resources needed for a response to a mass fatality event.

#### **Public Health**

Chair: Justin Hauser, Emergency Response Planner  
City of St. Louis Health Department

Vice Chair: Nicholas Kohlberg, Emergency Planner  
St. Charles County Health Department

Mission: The Public Health Committee addresses planning and equipment needs for mass prophylaxis and disease surveillance. Planning efforts include coordination and staffing of regional dispensing sites designed to distribute medication to citizens and first responders during pandemics or bioterrorism attacks, access to the Strategic National Stockpile resources, and conducting epidemiological surveillance to ensure quick identification and response to public health emergencies.

Projects: Establishment of real time syndromic surveillance in all hospitals and Illinois hospital-based urgent care sites; establishing open (public) and closed (hospital and corporate based) Points of Dispensing Sites (PODS); procurement of mass prophylaxis supplies, dispensing software, storage trailers, and tow-vehicles; Pre-placement of medications in first responder agencies; and an epidemiological training program.

#### **St. Louis Area Regional Coalition of COADs (SLARCC)**

Chair: Warren Robinson, Director  
Jefferson County, Missouri Emergency Management

Vice Chair: Kate Struttman, Disaster Program Manager  
American Red Cross of Eastern Missouri

Mission: This committee addresses citizen preparedness and the provision of human services during a disaster and citizen recovery after disasters. The committee is comprised of Citizen Corps Councils, non-governmental service agencies such as the American Red Cross, the



Salvation Army and faith-based groups and governmental agencies like human services and emergency management agencies. The committee these focus areas:

- **Citizen Preparedness and All Ready**– Training of citizens to prepare for and respond to disasters; public information campaigns, especially for those with access and functional needs; and Mental Health plans for provision of counseling during and after disasters.
- **Mass Care** – Population sheltering, feeding, evacuation, and companion animals
- **Community Recovery** – Facilitates access to recovery assistance by those affected by the disaster
- **Volunteers and Donations Management** – Recruitment, badging, and management of volunteers and the management of donations received during disasters.

Projects: Obtaining caches of equipment for companion animal sheltering and for persons with functional needs in general population shelters; funding of Citizen Emergency Response Teams for training classes and equipment; and a media based public awareness personal emergency preparedness campaign with an emphasis on the functional needs population.

### **Terrorism Early Warning Fusion Center**

Chair: Bill Roche, Sergeant

St. Louis Terrorism Early Warning Group, St. Louis County Police Department

Mission: Develop comprehensive plans to assess and protect critical infrastructure in the region, including buildings, public arenas, utilities, public works, and transportation systems. Coordinate planning for special events that may require a high level of security. Operate an intelligence fusion center and disseminate information gained to appropriate parties.

Projects: Enhancement of the Fusion Center to accept and store classified information, Salary and training support for Fusion Center staff and CI/KR assessors, and enhancement of intelligence gathering.



### **Training and Exercise**

Chair: Derek Reiger, Captain  
City of St. Louis Fire Department

Vice Chair: Josh Wilderson, Detective  
City of St. Louis Metropolitan Police

Mission: The Training and Exercise Committee consists of representatives from all of the other STARRS committees. They ensure that all training and exercises utilizing grant funds administered by STARRS are consistent with the Urban Area Security (UASI) grant guidance and the Threat and Hazard Identification and Risk Assessment (THIRA). They also develop regional multidisciplinary exercises and hold an annual training and exercise workshop.

Projects: Development and annual update of the STARRS Multi-Year Training and Exercise Plan (MYTEP).

### **Urban Search and Rescue (USAR)**

Chair: Les Crews, Deputy Chief  
Monarch Fire Protection District

Vice Chair: Brian Gettemeier, Firefighter/Paramedic  
Cottleville Fire Protection District

Mission: The St. Louis regional Urban Search and Rescue (USAR) response capability is coordinated through the St. Louis Regional Heavy Rescue Task Force which provides coordination of the region's five USAR teams. The Task Force gives direction on increasing regional USAR capabilities, especially swift water rescue and structural collapse rescue.

Projects: Projects include standardization of equipment and training of team members, training additional personnel, developing enhancing capability in live scent canine teams, and procurement of swift water team equipment and training.



## **Key Accomplishments (2004-2018)**

Since 2004, STARRS has supported innumerable regional projects that have enhanced preparedness and mitigated the far reaching impacts of disasters on communities and businesses across the bi-state metropolitan region. Over the past 14 years, its investments in regional planning, training and exercise projects and programs have resulted in steady progress being made to address and close identified gaps associated with the National Preparedness Mission Areas consisting of Prevention, Protection, Mitigation, Response and Recovery. In an effort to highlight some of what can be solved when individuals function as a part of a system with shared goals and vision, a select list of some of STARRS most tenacious and ingenious accomplishments has been provided below.

### **Regional Planning and Coordination**

- **All Ready Preparedness Campaign** – Since 2010, STARRS along with the St. Louis Area Regional Coalition of Community Organizations Active in Disasters (“SLARCC”) and the All Ready Steering Committee, which includes representation from the American Red Cross, Salvation Army, faith based groups and local agencies across the St. Louis region, have undertaken a comprehensive public awareness campaign that was developed to help foster a culture of emergency preparedness in the St. Louis region, that is accessible to all, and that is presented in a single approach. The “All Ready” Campaign has substantially “moved the needle” on personal preparedness for high risk groups, especially those with functional and access needs, across the region. The campaign has created successful preparedness messaging, empowering individuals and organizations to move from awareness to action. In its first phase, the campaign was created and launched within the Urban Area and included the development of the project logo, website, printed materials, media outreach, social media, and direct community outreach. Phases II and III of the campaign were implemented in 2011 through early 2014. These phases of the campaign included community outreach, outreach regarding the train-the-trainer program, social media, media outreach, and special events.

As part of its mission to address the major concerns of preparedness in the functional and access needs community, the All Ready campaign focused on messaging that “people with disabilities need to prepare themselves and their support communities for disasters, because first-responder-type assistance may be very difficult to secure.” The main foci of the campaign’s action include: building training modules for agencies that serve people with disabilities; hosting a venue for community organizations to learn, share and train; offering assistance to Emergency Management Agencies to build up functional and access needs planning; continuing to reach out to the region-wide community with support and resources; and offering the model to other organizations and communities across the country.



The American Red Cross, the St. Louis City Office on the Disabled, regional Independent Living Centers, DEAF, Inc., and several other agencies that serve people with disabilities collaborated to develop the train-the-trainer program. The training offers: direction on how to message preparedness information with empowerment principles; a presentation with general information on how those with disabilities can become prepared; guidance on how to begin preparedness conversations with those who are deaf or hard of hearing, blind or have low vision, have mobility disabilities, or have intellectual disabilities; and specific preparedness information that may pertain to the varying disability. The program is targeted at service providers with the intention of training others to “prepare it forward.”

- **Gaps Analysis and Strategic Plan** – The region maintains a comprehensive gaps analysis and strategic plan that identifies gaps in planning, staffing, equipment, training and exercise programs as they relate to disaster preparedness and response. The gaps have been compiled into a Strategic Plan that is used to guide grant investments.
- **Threat and Hazard Identification and Risk Assessment** – The region develops and maintains a current Threat and Hazard Identification and Risk Assessment (THIRA) which describes the highest impact terrorist events and disasters that the region could experience along with desired outcomes for protection, prevention, mitigation, response, and recovery efforts. This document aids in updating and refining the gaps analysis and guides future grant supported strategies. This may include new projects as well as sustainment of existing capabilities. Completion of the THIRA is a performance requirement for the FY2012 UASI Grant.
- **Regional Emergency Resource Coordination System (RERC)** – Because the St. Louis region is vulnerable to large scale, potentially catastrophic hazards including floods, earthquakes, industrial accidents, and terrorism, and because the region encompasses over 200 municipalities, two states, and two FEMA regions, the St. Louis metropolitan area determined the need for a Regional Emergency Resource Coordination Plan. A Regional plan core group consisting of representatives from emergency response, emergency management, and healthcare agencies oversaw the development of this plan, which was completed in 2010.

The Plan provides a structure for notification, communication, and decision making between elected leaders during disasters that cross jurisdictional boundaries or result in catastrophic levels of casualties, infrastructure damage, or impact to government, the economy, or the environment. It also identifies resources available within the region for response to significant emergencies and provides a mechanism for county-level emergency managers to coordinate and deploy these resources throughout the region. As part of plan development, planning, training, organizational, and resource gaps were identified in order to guide future investment



strategies. These were incorporated into the regional Strategic Plan. Also, a Multi-Year Training and Exercise Plan (MYTEP) was developed to organize training and exercise priorities for the regional as well as to test and improve the RERC Plan. A tabletop exercise of a working draft of the RERC Plan was held. The RERC Plan culminates years of work in regional preparedness and advances the St. Louis region to a higher level of preparedness and response capabilities.

- **Regional Collaboration Software** – The region's hospitals currently have access to several collaboration systems provided by the Missouri Hospital Association and funded through the U.S. Department of Health and Human Services, Assistant Secretary of Preparedness, Hospital Preparedness Grant program. These include EMResource and eICS. EMResource tracks the status and availability of Emergency Departments within the St. Louis region, in addition to performing queries about bed availability at hospitals in the region. EMResource is available on both sides of the river. The eICS system is a collaborative tool that allows hospitals to create and share emergency response plans, notify emergency responders of issues, and to create and share Hospital Incident Command System (HICS) forms during and after an incident. Currently eICS is only available to Missouri side hospitals.

In 2014, the STARRS procured a regional version of WebEOC, to replace the aging E-Sponder system. The St. Louis regional WebEOC system provides situation status updates and resource request processes to users and was linked to the state of Missouri WebEOC system for collaboration and the exchange of data. As of May 2018, the St. Louis Regional WebEOC system is still available to the eight county level emergency management agencies on both sides of the river.

In 2018, the Hospital Preparedness committee procured a tool known as Virtual Emergency Operations Center (VEOCi) to assist the regional healthcare coalition with its collaboration efforts. It is expected to share situation status reports, provide resource request processes and perform alert notifications for the St. Louis Regional Healthcare Coalition.

- **Incident Support Team (IST)** – The St. Louis region has established a regional IST which is comprised of personnel from law enforcement, fire, public health, public works, and other organizations and agencies from throughout the St. Louis area. The IST is available and can be activated to support emergency responders managing an event where the event continues over many hours or days. The overall goal of the IST program is to develop teams that are designed to function under the National Incident Management System (NIMS) during a large and/or complex incident or a major event. The IST can either support an existing incident command system structure or, if requested to do so, can assume command of an incident. St. Louis IST members have been deployed statewide and under a FEMA multistate compact to assist with various emergencies and declared disasters.



- **The St. Louis Fusion Center: Terrorism Early Warning Group** – This multilateral, multijurisdictional, and multidisciplinary effort was established in 2006. The St. Louis Fusion Center integrates law enforcement, fire protection, health services, and emergency management agencies to address the intelligence needs for combating terrorism and protecting critical infrastructure. It utilizes the services of both the St. Louis City Metropolitan Police Department and the St. Louis County Police Department’s intelligence staff by integrating all the information necessary for achieving a situational understanding at all phases of operations before, during, and after an incident, with a strong emphasis on detection and prevention. The purpose of the Fusion Center is to improve prevention and response, and to ensure an appropriate exchange of information between investigative and response entities. This results in a highly coordinated and focused response to critical incidents and acts of terrorism based on careful assessment of information and intelligence and detailed planning.

The Center relies on the following elements to accomplish that mission:

- Advance Planning – Detailed scenarios of likely incidents are developed, including the different levels of response that might be required.
- Intelligence Reservoirs – Intelligence information is maintained in accordance with established privacy guidelines and updated to provide a clear picture of likely occurrences.
- Integrated Team Network – Representatives from all involved agencies are assigned to the Fusion Center in a staff or liaison capacity. This keeps vital information flowing. New partnerships are always being sought with needed departments and organizations to expand and improve the network.
- Training and Exercises – All aspects of the program are continually tested and the Fusion Center routinely educates its partners on developments and on ways to improve and maintain skills.

In a joint project with their counterparts in Kansas City and the State of Missouri, the St. Louis Fusion Center used UASI grant funds to purchase a 40 page quick reference guides titled “Terrorism Prevention & Response.” Although the target audience of this publication is law enforcement officers, it contains information valuable to the entire responder community. The UASI grant funded a Sensitive Compartmented Information Facility within the TEW that expedites management of sensitive intelligence information.

Since its inception, the Fusion Center has initiated investigations into a yearly average of 60 terrorism activity reports. These reports are then coordinated with federal partners such as the



Federal Bureau of Investigation, Joint Terrorism Task Force, and the United States Department of Homeland Security. There are 207 local agencies (both public and private) that lend their expertise to the members of the St. Louis Fusion Center. In addition, there are 300 terrorism liaisons officers, which are representative of law enforcement, fire, public health, and private sector partners from across the region.

Over the last several years, the Center has sponsored numerous terrorism related regional training courses which have provided instruction to students from law enforcement, fire, public health and from the private sector.

- **Critical Infrastructure/Key Resources (CI/KR)** – With the help of grant funds, the position of Critical Infrastructure Protection Coordinator has been established within the St. Louis Fusion Center. One key function of the Center is to reduce the region’s vulnerability to terrorism by preventing the use of critical infrastructure and key resources as a weapon. The CI/KR Coordinator implements plans and programs that identify, catalog, prioritize and protect CI/KR in cooperation with all levels of government and private sector partners. This classification of CI/KR is used by federal agencies in determining the risk to our region and is one basis for awarding grant funds. The CI/KR Protection Coordinator maintains a prioritized database of assessed vulnerabilities and risks. Additional sites are constantly assessed, reported to, and accepted by the federal government.

Often, federal and state laws and regulations require that classified and sensitive information about CI/KR be solely distributed to and maintained by members of law enforcement agencies with a need and right to know. To facilitate these requirements, the STARRS Board of Directors recommended that the St. Louis regional CI/KR position be located within the St. Louis Fusion Center at the St. Louis County Police Department.

### **Interoperable Communications**

- **Interoperable Communications Project** – At STARRS inception, the interoperable communications discussion took on a regional perspective with the formation of the STARRS Interoperable Communications Committee. With the committee's assistance and guidance, and participation from a wide range of users from the region, the St. Louis Tactical Interoperable Communications Plan was created. The plan was limited in scope, however, in that it was designed to help agencies coordinate and communicate with systems and equipment already in place and was not intended to recommend new systems or equipment.



In November 2007, the East-West Gateway Council of Governments, on behalf of STARRS hired a communications consultant to develop a comprehensive St. Louis Regional Land Mobile Radio Plan. Its purpose was to serve as a source book for agencies and users to budget and plan for future radio communications improvements in a regional network, shared frequencies and upgraded equipment. The plan's purpose was to serve as a guide to eventually build a truly interoperable radio system for the entire St. Louis region.

The St. Louis Land Mobile Communications plan was presented to the East-West Gateway Board of Directors at their April 2008 meeting. The Board voted to establish an ad hoc Regional Communications Advisory Committee to review the plan and determine if it should be endorsed as the model for building a future interoperable communications system in the bi-state area. The ad hoc committee held two meetings in May and one in June. Its final recommendation was to adopt the plan as the St. Louis Regional Land Mobile Radio Communications Plan.

In order to continue the synergy that has developed in the St. Louis area for a true regional communications network, STARRS recognized a need to hire a communications consultant to take the plan to its next phase. A consultant was hired to act as a liaison between STARRS and system owners, and users in the St. Louis region in the development of a Regional Interoperable Communications Frequency Plan that will define the approach and management of frequency resources available for interoperable communications in the St. Louis region; develop design specifications for a reliable, redundant and fault tolerant communications network that will provide seamless interoperability and redundant coverage across the St. Louis region as outlined in the St. Louis Land Mobile Communications plan; and develop a St. Louis region-wide point-to-point microwave system that will provide a flexible, reliable redundant and fault tolerant microwave system to be the backhaul system for the communications network outlined in the plan.

Phase II of the communications project began in August 2009 when the St. Louis Regional Communications Core Group was formed. This communications governance committee has representation from each of the eight counties within the St. Louis region. The Core Group's task is to oversee Phase II project's goals and objectives, scope, responsibilities, communications procedures, roles and responsibilities, and logistical requirements.

The St. Louis region now enjoys enhanced interoperability from the support of a region-wide modern digital microwave network that is the back haul network for several land mobile radio systems in the region. This includes the State of Illinois's STARCOM21 system, the City of St. Louis's land mobile system and the St. Louis Area Trucked



Emergency Radio (SLATER) system which supports emergency response agencies in Jefferson, St. Charles and St. Louis Counties in Missouri.

### **Law Enforcement Special Teams**

- **Tactical Teams** – There are six law enforcement tactical teams within the St. Louis region identified as regional assets. This includes the metro east team which consists of law enforcement agencies within St. Clair County, Illinois and the Franklin and Jefferson County Sheriff’s Departments. Additionally, in Missouri there is the St. Charles County Police Department, St. Louis County Police Department, and the St. Louis Metropolitan Police Department. These teams respond to active shooter events and other dangerous criminal incidents when local law enforcement is overwhelmed or needs specialized assistance. They often work in collaboration with the Federal Bureau of Investigation (FBI) and the Bureau of Alcohol, Tobacco, Firearms, and Explosives response (ATF).

UASI Grant funds have been used to purchase equipment and provide training for each of the regional tactical units. Grant funding was used to purchase an MD-500E helicopter which provides aerial surveillance and command support. Additionally, forward looking infrared (FLIR) cameras have been purchased which are mounted on the Metro Air Support Unit’s aircraft. A Video Downlink system, which is a specialized transmitter that transmits video from the FLIR camera to a receiver on regional communication towers and to ground units allowing real-time sharing of the video signal from the aircraft. A current project will connect the transmitters on board the helicopters to regional county-level Emergency Management Agency operations centers.

In addition, specialized armored vehicles have been purchased to allow the teams to approach a scene safely and quickly. In support of officer personal protection, ballistic vests and tactical respiratory protection equipment has been purchased for all of the regional tactical teams.

The teams have conducted several training and exercise events over the past six years including specialized training in firearms use, overcoming physical obstacles, canine assisted response, vehicle assaults, and use of chemical protective gear.

- **Bomb and Arson Squad** – There are three ordinance disposal teams staged in the St. Louis region. Grant funds have equipped the teams with specialized response vehicles and bomb remote control robots used for approaching potential improvised explosive devices (IEDs). UASI grant funds were used for the purchase of a total containment vessel capable of securing an IED containing a toxic chemical or radiological substance and additional robotic bomb disruptive equipment for each team. Bomb detection dogs have been purchased along with explosive and radiological detectors which enhanced the



capabilities of the regional bomb disposal teams. Funding continues to be used to sustain equipment and address response needs.

### **Fire Services Special Teams**

- **Heavy Rescue Task Force** – UASI grant funding created the St. Louis Heavy Rescue Task Force, which consists of five heavy rescue strike teams staged within the St. Louis region. The five teams are; Team 1 – St. Charles County Rescue Task Force; Team 2 – St. Louis City Fire Department Rescue Task Force; Team 3 – St. Louis County Rescue Task Force; Team 4 – St. Clair County, IL Special Emergency Services Unit; and, Team 5 – Franklin/Jefferson Rescue Task Force. Each team is staffed with fire agency personnel from across the region. These teams respond to collapsed buildings and other situations where victims are trapped and special rescue techniques are required. Each team is equipped with matching equipment in identical response vehicles. The teams train together and are familiar with the equipment in use by each team, which allows the deployment of personnel and/or equipment throughout the region without the need for on-the-spot orientation. Additionally, each strike team is capable of self-sustainment for a minimum of 48 – 72 hours of operations. This concept also allows for “back fill” to an area where a Strike Team may be engaged in an operation, avoiding an “unprotected” area in the region should additional needs arise. U.S. Department of Homeland Security approved rescue training is conducted each year for each team bringing all members to a minimum level of expertise in the areas of technical rescue.

UASI grant funds have purchased US&R equipment which includes a trailer and medical supplies for a medical component to the Heavy Rescue Task Force. This specialized medical equipment is staged with the St. Charles County Ambulance District. The list of supplies held in this regional cache is lengthy - over 100 items from bandages to specialized surgical equipment that can be used at the scene of an incident. In addition, Homeland Security grant funds were used to purchase personal protective equipment such as pants, jackets, and respirators for the rescue teams. In 2010, a variety of power tools and equipment were purchased including ring saws, drills, drill bits, and seismic listening systems to enhance their collapsed structure response capability. The teams also have a swift water rescue component for all five teams. This requires extensive training as well as specialized equipment including boats, ropes, and special floatation suits.

To date resources from the Heavy Rescue Task Force have been deployed throughout the State of Missouri through the Missouri Fire Mutual Aid plan. This includes responses to Caruthersville, St. James, and Joplin Missouri tornado incidents and the Clinton, New Haven and Washington Missouri building collapses. The teams have also been deployed via FEMA Emergency Management Assistance Compact assistance; most recently to Houston, Texas for Hurricane Harvey.



- **WMD HazMat** – There are seven regional hazardous materials response teams staged in the St. Louis Urban Area. These teams respond whenever hazardous chemicals are released or involved in a fire incident. They are also available for biological and terrorist incidents involving chemical agents. Funds from the UASI grants have purchased specialized field analytical instruments as well as personal protective equipment. Each team is also equipped with a large capacity decontamination trailer that can be used in the event of a large scale chemical release affecting the public.

### **Public Health and Medical Services**

- **Gateway ESSENCE: Regional Syndromic Surveillance** – In 2004, the STARRS Public Health Committee initiated a Syndromic Surveillance Workgroup, which was tasked with identifying and recommending a system that would monitor illness and infection in the St. Louis Metropolitan Area for signs of developing patterns, thus giving healthcare agencies as much warning as possible for major outbreaks of contagious infections. After a thorough consideration of existing systems in use in different states around the country, the workgroup recommended the ESSENCE (Electronic Surveillance System for the Early Notification of Community-Based Epidemics) program, developed through Johns Hopkins Applied Physics Laboratory (APL).

This bi-state syndromic surveillance system became operational in May 2009. The system tracks emergency room visits to the region's hospitals in real time. Chief complaints from those presenting to emergency rooms are assigned into syndromes (i.e., gastrointestinal, influenza like, neurological, rash, etc.) and then statistically analyzed to determine whether these syndromes are increasing. Demographic, clinical, and geographic information assist in determining if any illnesses instances are related. The State of Missouri operated a similar statewide ESSENCE system but it did not include the three counties located in Illinois that are a part of the St. Louis Urban Area. This project brought the nine Illinois hospitals on board into the Gateway ESSENCE system that collects data from all hospitals in the bi-state region to maintain a complete regional view of the population. The system detects clusters of illness and provides situational awareness during disasters such as extended power outages, periods of extreme weather, H1N1 influenza and mass gatherings such as major sporting events like the World Series or All-Star Game or events of national significance such as the 2008 VP Debate and the 2016 Presidential Debate at Washington University in St. Louis.

- **St. Louis Region Hospital Mutual Aid Agreement For Medical Disasters** – This agreement, first developed in 2003, created a Memorandum of Understanding (MOU) that establishes a coordinated system in which hospitals in the St. Louis region agreed to provide mutual aid to one other as necessary in a medical disaster. A total of 59 hospitals in the St. Louis region are signatory to this agreement.



The MOU allows hospitals to share staff and equipment during disaster events and sets up a legal agreement for salary payment, liability, and replacement or repair of equipment and supplies. It also establishes coordination of response efforts among hospitals through a neutral entity called the St. Louis Medical Operations Center (SMOC). Coordination also takes place between hospitals, public health, and county emergency management agencies, as well as human services organizations such as the American Red Cross and private entities such as medical equipment suppliers. The agreement also allows hospitals to qualify for FEMA reimbursement under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Public Law 93-288) as amended. The agreement is designed to augment each hospital's emergency operations plan by adding a regional component.

This coalition approach is being utilized statewide to encourage efficient sharing of resources and mutual aid. A parallel MOU has been established by the Missouri Department of Mental Health in 2009 to address the unique needs of state-owned psychiatric facilities.

- **Regional Healthcare Coordination Plan (RHCP) and St. Louis Medical Operations Center (SMOC)** – After establishing the Hospital MOU, the region identified a need for an operational plan to support the agreement. When it was developed in 2003, the mutual aid agreement was considered groundbreaking because area hospitals were agreeing to share resources during a major incident, something that was unprecedented. Hospitals had been cooperating informally under the MOU, and while this worked in relatively minor incidents, the need for a specific set of protocols for major incidents became clear after the summer and winter storms and power outages that occurred in 2006.

The St. Louis Regional Healthcare Coordinate Plan (RHCP) was developed in 2009 as an annex to the Regional Emergency Resource Coordination (RERC) Plan. The RHCP outlines a system for regional information sharing and resource coordination between hospitals and other healthcare organizations during disaster events. The St. Louis Medical Operations Center (SMOC) is the coordination body for the RHCP and is made up of emergency preparedness professionals from hospitals and healthcare organizations in the St. Louis metropolitan area. A duty officer is on call at all times and, when a hospital experiences an event, which overwhelms their ability for patient care, they contact the Duty Officer directly or through a local dispatching agency. When the SMOC is activated, the SMOC Duty Officer acts as the team leader bringing in additional staff as necessary. For larger incidents, the SMOC may set up operations in the St. Louis County or City of St. Louis Emergency Operations Center.

Implementation and refinement of this plan and the SMOC concept have been ongoing. A working group meets on a monthly basis to discuss improvements and plan drills and exercises.



The SMOC has been activated in several real events including winter storms, the tornados that hit the region in 2010 and 2011 as well as a water main break incident outside the Barnes Jewish Hospital, which caused a power outage and necessitated the evacuation of a hospital tower.

- **Regional Healthcare Coordination Center (RHCC) Plan** – St. Louis area hospitals in collaboration with public health, emergency management, and disaster human service organizations identified a need for medical support at mass care shelters. In the event of a disaster that displaces families from their homes, emergency management agencies may designate temporary sheltering sites located in schools, churches or other facilities. In the St. Louis region, the American Red Cross staffs and manages these sites. When families or individuals arrive at the Red Cross Shelters with existing or emerging medical needs, they are often directed to hospitals for care. In disaster situations, hospitals will likely be overwhelmed with patients with acute needs. By setting up medical care for non-acute patients and those with medical functional needs who would otherwise be treated by homecare, hospitals can handle the more urgent needs of the community and the non-acute patients can be treated in a more expedient manner at the shelter site. In 2010, a plan was developed to provide procedures and staffing models for this concept. Planning and implementation efforts are continuing through the RHCC Working Group subcommittee. This concept could also be used if residents from another state were evacuated to Missouri, as in the case of a major hurricane impacting the Gulf region states.
- **Regional Hospital Alternate Care Sites Plan** – When a hospital experiences a significant surge in patients, or experiences damage due to disaster events, they may expand to an alternate care site. Many hospitals have plans to set up alternate care operations at a nearby facility they own or with which they have existing agreements. In 2011, a plan was developed to augment these arrangements by setting up a regional alternate care site or sites that could serve multiple hospitals. They would be staffed by teams of medical professionals in a way similar to that described above for medical shelter support.
- **Mass Fatality Resource Coordination Plan (MFRCP)** – Beginning in 2009, a working group consisting of regional coroners and medical examiners, public health planners, hospital representatives, county emergency managers, and funeral home directors oversaw the development of a Mass Fatality Resource Coordination Plan for St. Louis Urban Area. The plan addresses emergency or disaster situations that result in numbers of fatalities greater than local agencies can handle by themselves. The intent of the plan is to provide a mechanism whereby fatality management agencies from throughout the region can function as a team in response to a mass fatality incident anywhere in the region. ASPR Grant funds have been used to develop the plan and its operational procedures. UASI, MMRS, and ASPR funds have been used to buy refrigerated trailers and specialized equipment and supplies for field incident response. Training is underway



for fatality specialists to learn how to set up temporary morgues, conduct field investigations for large scale events, and to integrate into existing incident command structures.

- **Hospital Amateur Radio Equipment** – The placement of amateur radio equipment in the region’s hospitals enhances the communication interoperability by providing an additional method for local and statewide communications during a disaster event. A package consisting of a radio base station, antenna, and cabling was distributed to 26 hospitals in the region in 2008. The second phase of installation was completed in 2009. Training and exercising is ongoing. In late 2009 a subcommittee was established called the Hospital Amateur Radio Network (HARN) Committee. The HARN Committee has been reaching out to amateur radio groups in the region; cross training with other amateur radio operators; providing education and awareness; building protocols; and holding drills and exercises. Each hospital with an amateur radio now has a designated radio operator available to deploy to the hospital when needed.
- **Amateur Radio for Public Health** – County-level public health agencies in the eight counties of the St. Louis Urban Area are also purchasing amateur radios for use during disasters. They are receiving training as well with at least one individual in each office receiving training to be an operator.
- **Hospital Equipment and Supply Caches** – Caches of specialized equipment and supplies were purchased and stored at key locations within the region to be available for deployment as needed. Some caches are stored in trailers kept ready for transport. Others are stored at facilities like hospitals:
  - Evacuation Sleds/Disaster Body Bags for Hospitals
  - Pediatric Medical Surge Cache for Hospitals
  - Supplemental Pandemic Flu Supplies for Functional Needs Patients
  - Mass Casualty Incident (MCI) Basic Life Support (BLS) Trailers & Supplies
  - Hospital Ventilator Caches
  - Pulmonary Trailer Cache
  - Impaired Mobility Cache
  - Burn Cache
- **Hospital Preparedness Training and Exercises** – The region has invested in several training and exercise programs for hospital preparedness. Focus areas have included training in hazardous materials response and decontamination, psychological first aid for



responders. Specific programs have included:

- Hazardous Material Training Instructor's Program (2010)
  - Optimizing Long Term Care Disaster Preparedness and Multi Agency Coordination Seminar (2009)
  - Long Term Care Emergency Preparedness and Disaster Planning Workshop (2010)
  - Decontamination Awareness Course (2007-2010)
  - Psychological First Aid Training Train-the-Trainer Course (2007-2009)
  - Israeli Medical System: Disaster Triage Seminar (2009)
  - Biological/Chemical Decontamination Tent System Training (Ongoing)
  - Ambulatory and Ancillary Services Emergency Preparedness Workshop (2010)
- **Emergency Medical Services Mass Casualty Incident Response** – Emergency Medical Service (EMS) services in the St. Louis region are made up of several types of agencies: some are part of a jurisdiction's fire department or district and some are private companies spanning several jurisdictions. Through the STARRS EMS Committee and other regional planning bodies, efforts are being made to integrate the differing agencies and create regional coordination.

Regional assets that have been purchased include mass casualty incident trailers and supplies, a triage tagging system called SMART Triage, response vehicles designed to support first responders during lengthy incidents or in difficult weather conditions, and medications called DuoDotes which can be administered to first responders in the event they encounter the release of chemical nerve agents by terrorists. The EMS committee has also conducted Strike Team Leader training which provides skills in integrating into large incidents as medical officers.

- **Mass Prophylaxis Capabilities** – Public health agencies and healthcare facilities are planning for an attack with a biological agent as well as pandemic influenza outbreaks by developing plans and procedures for distribution of prophylactic medications to the public. The U.S Department of Health and Human Services, working with the states has staged caches of medications and medical supplies throughout the country. In St. Louis, grant funds have been used to purchase tow and transport vehicles for public health agencies to store and transport Point of Dispensing (POD) supplies to designated sites.



## **Mass Care and Citizen Planning and Preparedness**

Over the past several years, STARRS has increased coordinated regional planning in and among several disaster human services agencies. This includes disaster and contingency planning for long term care facility planning, community preparedness, supporting Citizen Corps Councils and Community Emergency Response Teams (CERT), mass care for those with functional needs and companion animals, and general public awareness for disaster preparedness.

The epicenter of this planning was the STARRS Disaster Human Services Committee (DHSC) which promotes citizen preparedness planning and supports continuing collaboration on disaster recovery for short and long term. Previously, a regional workgroup comprised of the American Red Cross, Salvation Army, United Way, and church affiliated assistance agencies met to collaborate on their disaster recovery services to victims. The DHSC expands this group adding emergency management agencies and expands the work of this recovery group to be more proactive as a preparedness planning group by adding the citizen preparedness planning component. The committee recently began a media campaign to increase public awareness of emergency preparedness throughout the St. Louis region.

In recent years, the STARRS Disaster Human Services Committee became the St. Louis Area Regional Coalition of COADS (Community Organizations Active in Disasters) or the SLARCC.

- **St. Louis Regional Sheltering Project** – STARRS purchased a stockpile of sheltering equipment for the Bi-State Fire Mutual Aid System to be used by governmental and non-governmental organizations and their volunteers to provide shelter to displaced citizens. Through this mutual aid system, these resources can be in use within four hours of the request. The components of the project included: 40 60kw generators each equipped with an electrical distribution box and wiring cable; 24 portable HVAC systems and 40 portable heaters; 10 large shelter tents; cots, carts, and blankets (194 for special need persons and 1,360 regular cots); 16 cargo trailers and a portable forklift. In 2009, we expanded our sheltering capability by purchasing companion animal sheltering equipment caches and developing agreements between human and animal welfare disaster services organizations.
- **Functional Needs Sheltering** – STARRS established a Functional Needs and Sheltering Planning Partnership Coalition. Individuals with functional needs include individuals who normally receive home healthcare but because of a disaster may have to leave their homes and go to a special shelter for an extended period. Hospitals, public health and the



American Red Cross collaborated on a coordinated approach needed to address the functional needs population. Regional stakeholders are working on a strategy of reaching out to partner agencies and the formation of a focus group to discuss the Regional Healthcare Coordination Center (RHCC) concept in greater detail. The RHCC is a management framework for the coordination of sheltering and basic medical care for the functional needs population when they are displaced from their homes or healthcare facilities.

- **Citizen Corps** – The region’s Community Emergency Response Team (CERT) training program was enhanced by the purchase of a total of ten fully equipped training trailers. These trailers are deployed throughout region and are used in drills and by communities starting up CERT teams. In addition, we have purchased backpacks, training manuals, and equipment to support CERT teams.
- **All Ready Public Awareness Campaign** – The STARRS Disaster Human Services Committee initiated the All Ready public awareness campaign in 2010. The project’s goal was to reach out to community groups to educate them on disaster preparedness. In 2011 and 2012, efforts were expanded to include outreach to those with disabilities and functional needs. A marketing program was developed which included the development of the website [www.allreadystl.com](http://www.allreadystl.com) where disaster preparedness information is available with links to related websites, social media, and attending community event information can be found. In September 2012, an All Ready Summit was held at Mercy Hospital in Creve Coeur, Missouri. The Summit targeted the special needs community and provided information on disaster preparedness measures specifically for individuals with disabilities and functional needs.

### **Training and Exercise**

The STARRS Training and Exercise Committee was formed to bring together all the disciplines involved in the STARRS regional planning and capability development efforts to enhance and sustain their skills and capabilities through continued education and practice through drills and exercises. The committee strives to support regional multi-discipline training and exercise programs that promote the community working together. Support is also given to specialized training classes required to develop special response teams in fire, law enforcement, healthcare, and other disciplines. All training or exercise programs must be discussed and approved by the committee. This allows for greater participation and cross training.

This training and exercise program is especially important to keep agencies and teams proficient with the use of the regional equipment and capabilities that have been purchased



built through grant funding. Equipment caches and multi-jurisdictional plans and capabilities might otherwise fall into disuse or be abandoned.



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- Healthcare Preparedness Grant Program Coordinator
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- St. Louis Area Regional Coalition of COADS (SLARCC)
- St. Louis Regional Incident Support Team (IST)
- Training & Exercise
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