







City of Austin Operation Prepared Community Project Massada








**City of Austin
Operation
Prepared
Community
Project Massada**




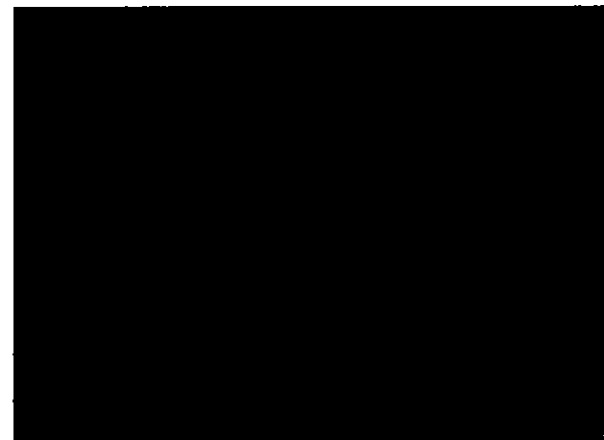
Project Massada Team

- Gordon Bergh, Assistant Director, ATCEMS
- Chris Calken, Senior Division Commander, ATCEMS
- David Guzek, Clinical Practice Manager, ATCEMS
- Dr. Pat Crocker, Director of Emergency Department, Brackenridge Hospital
- Rick Hinkle, Commander, APD
- Jim Reichen, Detective, APD Bomb Squad
- Harry Evans, Battalion Chief, AFD
- Steve Collier, Emergency Management Coordinator, COA
- Byron Sage, President, International Crisis Management Inc.






Project Purpose & Funding

**Compare, Contrast & Identify
Best Practices in Terrorism
Prevention
Preparedness
Response**

Core Findings: Three Key Themes



- *Rings of Security*
- *Cooperation*
- *Unity in Focus*

Response

Cooperation & Single Focus



- **Single Emergency Response Objective**
 - Unity of Mission "prevent the preventable death"
- **Single Emergency Response Approach**
 - Prompt Local Response to Every Incident with Potential for Mass Casualties
 - Use of paid personnel and volunteers in major and routine incidents
 - Activate Joint electronic paging network
- **Single Emergency Response Goal**
 - "Clear Scene Quickly and Get Back to Normal"
 - "Routine" handled within 2-3 hours
 - "No lengthy" investigative processes"

Prevention

Rings Of Security


- **1st Ring: Protecting Israel:**
Border Military Intelligence & Intrusion Protection
- **2nd Ring: Citizen Empowerment:**
Public Information & Education
 - Uniformededuties
 - Threat Awareness Recognition
 - All incidents reported immediately managed
- **3rd Ring: Private Security Protection**
 - All Commercial Establishments
 - Everyone subject to search
 - All trained and armed





Response

Interagency Cooperation


- **Single Most Important Attribute of Response**
- Line level cooperation more consistent than strategic or leadership cooperation at the agency level
- Event frequency is catalyst for high degree of on-scene cooperation by line staff






International Terrorism Conference

Current and Developing Themes in Global Terrorism




- Radical Islamic Terrorism is a growing worldwide threat but so is terrorism in general
- Domestic and International Terrorism will continue to be present and will accelerate
- The US continues to be a prime focus, even more so since the Iraq War



International Terrorism Conference

Current and Developing Themes in Global Terrorism

- Prevention is ultimately more effective than tactical response but depends upon:
 - close working relationships between all levels and agencies within individual countries; municipal governments
 - fluid communications & information sharing
 - on-going public awareness and improvement program
- The definitive solution is not simply democracy
 - international criminalization of Jihad ideology
 - Active involvement of the moderate Islamic community in fight against radicalization of their religion




International Terrorism Conference

Current and Developing Themes in Global Terrorism

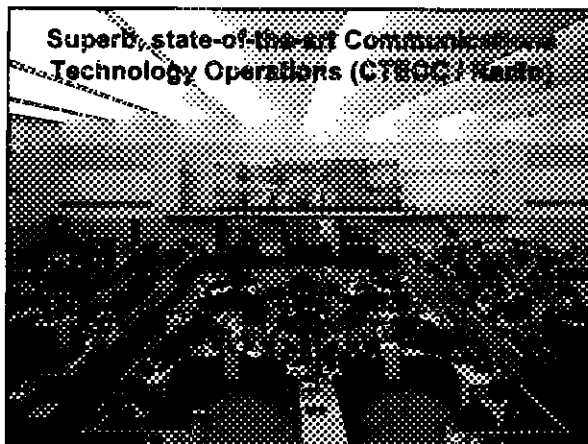

"Islam isn't in America to be equal to any other faiths but to become dominant. The Koran, the Muslim book of scripture, should be the highest authority in America."

Wahidullah Khan Co-Founder
Washington DC






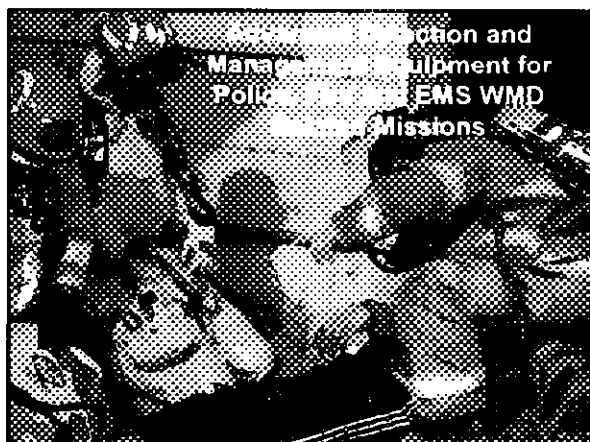

Terrorism Management

Where Is Austin?

Terrorism Management
Where is Austin?

- Community Volunteerism
- Unified Command Methodology and the National Incident Management System (NIMS)
- Regional Partner & Leader in WMD, HazMat, Bomb, Rescue, Incident Command
- Integrated Public Safety Training Philosophy

Local Considerations
Suggested Next Steps

- Clear strategic objectives need to be routinely reviewed to prevent conflicting priorities from hampering response operations (e.g. preventing the preventable death)
- Strengthen our focus and capability as a community team through attendance at FEMA Advanced Homeland Security Program (Elected Officials, CMO, Executive & Operations Personnel)
- Reinforce an organizational culture that rewards and recognizes Interagency Cooperation and Partnerships as well as Innovative
- Focus training to create responders that are flexible, adaptive, and cooperative and well prepared to think on their feet with a focus on systems thinking where process is only a guide and effective outcomes the operational mandate



Final Thoughts

- Local threats transcend terrorism and encompass such challenges as emerging diseases and pandemics as well as natural disasters
- We decrease our vulnerability based upon our continued commitment to preparing for the full range of threats - regardless of type
- Our organizational objectives should continue to raise our baseline preparedness and response capabilities for all types of threats and consequences
- We should continue to sharpen our focus on the ALL HAZARDS APPROACH, not just managing terrorism



Meyer Levy Foundation



City of Austin Operation Prepared Community Project Massada

Fact Finding Mission to the State of Israel
Executive Summary
October 5, 2004

The Purpose

The City of Austin's "Operation Prepared Community (OPC)- Project Massada" was conceived in early 2002 as a means to address the City Manager's mandate to EMS, Fire, Police and Emergency Management to fortify the City's emergency response capabilities against the threat of terrorism. The concept for the "project" was simple: go to the experts in terrorism preparedness and response and learn first hand about their hard won lessons and practices in managing terrorism and its deadly consequences and, upon returning, use the information to refine and enhance the City of Austin's capabilities. The next question, who to go to for such "expertise," was just as simple. The State of Israel and her emergency response organizations, in the wake of more than 50 years of attacks, are considered among the world's experts in responding to terrorism. Since the initiation of the 2000 Intifada, Israel had endured hundreds of terror attacks and managed thousands of civilian casualties (as of 2004 Israel has had 1,465 attacks, more than 1,000 fatalities and 6,600 casualties).

The Funding Source

Funding for Operation Prepared Community-Project Massada was arranged through the Meyer Levy Foundation in cooperation with the Austin Community Foundation. The Impetus for funding Project Massada came from Mara Levy, the daughter of TEXAS MONTHLY founder and publisher Mike Levy, who has been part of the development and growth of ATCEMS since the inception of the program in 1976. Ms. Levy had recently returned from a trip to Israel with her mother and based upon what she saw on the trip, suggested to her father that the City of Austin's public safety agencies could learn a great deal about terrorism and casualty management by spending time with their respective colleagues in Israel. Mike took the suggestion to heart and notified the City's EMS Department that the Meyer Levy Foundation (created by Mike's late uncle and for which Mike serves as a trustee) stood ready to fully fund the 2002 proposal for Operation Prepared Community-Project Massada.

The Team

The team selected for the trip consisted of:

Austin-Travis County Emergency Medical Services:

- Gordon Bergh, Assistant Director
- Chris Callsen, Division Commander- Homeland Security and Strategic Planning
- David Gruell, Chief of Clinical Practice Division

Austin Police:

- Rick Hinkle, Commander- Homeland Security
- Jim Neilson, Detective- Bomb Squad

International Crisis Management, Inc.

- Byron Sage, President, Homeland Security Consultant-Retired FBI

Austin Fire:

- Harry Evans, Battalion Chief, Special Operations
Austin Office of Emergency Management
- Steve Collier

Seton Medical System- Brackenridge Hospital Emergency Department

- Pat Crocker, M.D.- Director of Emergency Department

The Trip

On September 5th 2004, the above listed team departed on their ten-day mission to the State of Israel. The delegation was hosted by the National Police who arranged meetings with key Israeli public safety officials in the cities of Jerusalem and Tel Aviv. The meetings and accompanying briefings provided opportunities for in-depth examination of all areas of response to incidents involving terrorism. Special emphasis was placed on reviewing and understanding Israel's management of mass casualties and the protection of emergency response personnel and victims from secondary attack. The delegation also attended an international counter-terrorism conference to further enhance the sharing of information with professionals from a large international cross-section of counterterrorism experts, including several members of the European Union. Emphasis was placed on identifying and assessing best practices for managing the *most likely* evolving terrorism threats to the U.S. and the Western World.

Core Findings

We have divided the "core findings" into two basic sections mirroring the phases of our visit: Preparedness / Response and International Terrorism Conference. Each section reflects the key themes learned or observed during our trip. These themes reflect how Israel manages terrorism and the views on current and future terrorism by a broad cross section of academic experts studying terrorism and those charged with managing its consequences. These themes are not "calls for action" only food for thought and a construct of practical experience against which we can examine and evaluate our current and future directions. Frankly, many of the themes noted in how Israel responds to terrorism are not easily translated into similar actions in the United States due to how our governments are organized (Federal, State, County, Municipal) and the broad array of public safety entities and military sections that have specific responsibilities for aspects of terror incidents. But they are worth noting and worth reviewing for operational "nuggets". Israel is not the "Mecca" for how to manage terrorism but they are one of the world's most experienced countries as well as being a representative democracy. Their experiences and approaches have value to those seeking to learn how to manage terror more effectively.

In addition to the two basic sections, a third and final section offers the teams' preliminary considerations or recommendations for enhancing or refining our current response and training protocols within the City of Austin. They are the team's opinion only. They do not represent an endorsed modification in policy or practice by the represented agencies. Those can only develop over time after each agency has time to digest the information brought back from the trip by respective staff and also after a series of more detailed group presentations on the trip. An Executive Summary is not intended be the vehicle for definitive change; it provides a framework for entering into a more detailed examination of the information learned and an

honest evaluation of our strengths and weaknesses. As we have demonstrated repeatedly with the City, open vigorous discussions, especially at the interagency level, is the methodology that yields the effective, comprehensive, and innovative solutions and doctrine that those we protect deserve.

Also in the interest of brevity this summary does not compare and contrast the Israeli and American approach to terrorism preparedness and response. Those discussions will be take place interactively during actual presentations to various department staff and city management. This document is only a summary of key themes and preliminary considerations for enhancing our current protocols for terrorism preparedness and response. It is simply a chronicle summarizing a remarkable journey of discovery.

► ***Core Findings- Key Themes Involving Israeli Preparedness and Response to Terrorism Incidents***

- **Cooperation-THE Single Most Important Attribute of Response:**

On a day to day basis police, EMS, fire and the military work closely together. This is at the front line service level of the organizations and is underscored by the sheer regularity and volume of terrorism incidents. They still have their organizational conceptual differences, but because they do this virtually every day, the cooperation comes from repeated interaction on real events, not just the occasional training exercise. This cooperation is the means for accomplishing their goal to get the event cleared as soon as possible. The single most important message the team heard over and over again was the importance of cooperation and agency interaction. **RELATIONS are KEY.**

- **Societal Objective:**

Because of the very real nature of terrorist incidents and their frequency, the societal objective of all response entities is to return the affected area to a state of normalcy as quickly as possible (2-3 hours is routinely achieved). This would compromise some aspects of our total response to such events, especially in how we process crime scenes. However, it provides a very simple focus and allows the actions of all involved organizations to move quickly to close-out an incident. Maintaining community normalcy is paramount to the citizens of Israel and is clearly a method to fight the impact of terrorism individually and collectively.

- **Training:**

All emergency agencies actively support and engage in regular inter-agency training and drills. These activities are conducted on near a weekly basis. Coordination is as easy as a "phone call" to the other agencies. Active support, regular "face time" by all first responders, was considered one of the most important factors in explaining how police, EMS and fire are able to manage these incidents so quickly and effectively.

- **Emergency Communications:**

First and emergency responders from all disciplines have access to a statewide rapid notification system is utilized to provide notifications or updates on a developing event or actual terrorist incident. This system, utilizing both pagers and Nextel type phones,

allows for unencumbered communication between emergency responders. With one push of the button an entire city or response district can rapidly mobilize emergency personnel & equipment. Additionally, through the use of a statewide dedicated emergency frequency the command staffs have direct communication with one or all "critical responders" while en route or on-scene.

- Emergency Response Goal:

The unifying emergency response goal for all agencies is: "preventing the preventable death". The Israeli's consider casualty management as "job one". All other response functions support this single focus. Toward this goal Israel has developed a statewide *paging system that links all emergency staff and updates them on emergencies in their area*. Both on-duty and off-duty staff respond to an incident if they are close. The police establish scene safety and secure specific routes to hospitals for the EMS units. All casualties are routinely evacuated from the scene in less than 30 minutes.

- Emergency Response Approach:

Israel substantially front loads their response to virtually every incident that has any potential for mass casualties based upon the premise that they can cancel or reduce levels with more efficiency than they can increase a response. They get immediate response from paid personnel who are off duty as well as from volunteers based on information via pager. In talking to several personnel the tendency is for personnel to respond directly to a scene once they get information either formally or informally. They use a combination of full time paid, part time paid and volunteer responders. In most cases, volunteers outnumber paid by a three to one margin. They encourage volunteerism by providing full official status and uniforms to volunteers. They find ways to increase their resource alternatives rather than focus on how to control them.

- Managing Mass Casualty- Israeli Chaos Theory- Inside-Out, not Outside- In:

The first 15 minutes of a mass casualty event are critical. They use the motion of the event to the benefit of their primary focus. They don't restrict bystanders; they use them to evacuate patients. They don't control the event from the outside in. They get patients out of the scene as fast as possible using EMS, Police, bystanders, etc. Police, via *special units, do check out all vehicles, etc, but it is done simultaneous to other response efforts*. Their clear focus initially is life saving, i.e. get viable patients on the way to the hospital. What isn't simple and routine will not happen. The Israeli's don't always use the most sophisticated equipment. They use what works and works quickly.

- Incident Management:

One of the real differences between the U.S. and Israel is that national law specifies that Israeli police are legally in command of all terrorist events. All other emergency agencies have on site command presence for their function, but police "technically" has the lead role. What is interesting, however, is that all agree no one agency can manage an event and admit they actually utilize a de facto Unified Command model for scene management. All assemble at a police command post, quickly assess the problem and identify the management objectives and then get to work. It is not without the occasional difference of opinion, but when these do occur those involved have their moment and

then get back to the job at hand. It appears to be a very fluid and adaptive process with lots of flexibility built in to accommodate for unknown factors and the unpredictable.

○ Emergency Management & Recovery

We were able to learn very little about how or where inter-agency coordination occurs at the national level in response to major emergencies. Because most of the response agencies are national, municipal or regional authorities are not significantly involved in the *initial* management of incidents. It is worth noting that there is occasional friction between response agencies (from all indications resolved quickly on scene) and the basis for the "difference of opinion" appears

rooted in policy interpretation differences between response agencies by their upper / mid-level management teams. From our perspective, the interagency policy *disconnects appear to occur because there is no umbrella process to coordinate and integrate agency policies into a common response profile*, hence the occasional on-scene confusion and conflict in priorities.

Municipalities are significantly involved in *recovering* from emergencies. They establish information centers in order to provide information about the status of the emergency and the whereabouts of loved ones. They do provide substantial social, psychological, and financial support to those affected. The City of Herzliya has recently developed an aggressive municipal incident response and recovery plan which they promised to send to us. This does include the activation of a municipal operations center.

○ Public Information and Education:

They have succeeded in getting the participation of citizens nationwide. They are all aware of the ongoing nature of the threat. Citizens are, therefore, collectively vigilant. They understand the value of security and accept the potential compromises it causes in their freedom. They deal with the delays it causes because it is a day to day reality. The Israeli's are very effective here. Clearly the public is a player in every aspect of the Israeli response to terrorism, from the cooperation with ongoing security efforts to the *vigilance of every citizen in being aware of the potential actions of terrorists*. They stop 95% of terrorist attempts, primarily because of the wealth of information they receive. They also respond seriously to all information they get. Bomb technicians in Tel Aviv handle over 100 calls per day. They do it not merely because they take everything seriously, but because it sends the message that they value the contribution of every citizen. They also manage the media processes, insurance that the release of information ensures the delivery of the message that needs to be conveyed. There are two factors that tend to increase the active participation and promote volunteerism. The frequency of events highlights the fact that war exists. They are constantly under threat. Also, mandatory military service provides an overall citizenry with a base of insight, knowledge, first aid training, etc.

○ Community Resiliency:

The resilience of the Israel people in the face of the "Intifada" or uprising, which has been underway for four years, is very impressive. The Israelis are not a terrorized people. This seems to be related to three areas they focus on in response and recovery (and referenced earlier).

Cleaning up bombing and incident sites as quickly as possible and physically returning the area to normal. In some cases the road on which a bus bombing occurred is opened up in 2 to 3 hours.

Providing complete and honest information to the public as quickly as possible concerning all aspects of the incident and the whereabouts and status of loved ones. Accounting for everyone and sharing information rapidly is a major way of coping with these incidents.

Providing intense social, psychological, and financial support to those affected. There is a strong, family-like outpouring of help. A substantial portion of Israel's population knows someone who was injured or killed in a terrorist attack during the last four years.

► International Terrorism Conference: Current and Developing Themes in Worldwide Terrorism

Radical Islamic based terrorism continues to be a substantial and growing threat worldwide.

A large percentage of the "fanatical brand of Islam" or "Islamist" movement is fostered and actively promoted by the Wahhabi clerics of Saudi Arabia who in turn are indirectly financially supported by the Saudi royal family.

The U.S. continues to be the prime focus of the Islamist terrorist organizations and this focus has been significantly enhanced as a result of the War in Iraq.

The Islamist fanatics consider their religion to be the "only accepted religion on Earth." To quote the Washington D.C. based Wahhabi Lobby co-founder: "Islam isn't in America to be equal to any other faiths but to become dominant. The Koran, the Muslim book of scripture, should be the highest authority in America."

The "new" terrorism threat is an asymmetrical war of terror with four objectives: mass casualties, economic disruption, demoralization / panic of the public, and a loss of confidence in our government's ability to protect and defend the citizens.

Unconventional weapons (primarily biological, chemical and radiological) are considered the terrorist's "advanced" tools for breaching and disrupting the Western World.

The key criteria for use of terrorist weapons are: opportunity and availability. Availability of "ingredients" is relatively easy within the Western World (example: Houston with its rich inventory of easy to access chemical / gas / oil / biological products) not to mention other readily available toxic industrial chemicals or "TIC's" already in our communities. It was the clear consensus opinion that when opportunity and availability coincide, the use of unconventional weapons by Islamist terrorist organizations will become a reality.

Conventional weapons (homicide bombers, car bombs, ambush, or similar) are still considered the terrorist's "core tools" and the most likely threat to Western countries given their easy construction and relatively high success rate.

The best defense available to address and deter acts of terrorism is the close working relationship between key "Public Safety" agencies (which validates the current exceptional inter-agency working relationship that we have developed in the Austin / Central Texas region).

One of the most vital components of a community safety program is the proactive education and involvement of the general public in being vigilant toward possible acts that might herald a terrorist act. Volunteerism is vigilance by the citizens of our city and region are critical in ensuring the highest level of preparation and continued safety for all of our neighborhoods, critical infrastructure and daily lives.

► Post-Script

This "working visit" was extraordinary. The team considered the entire experience relevant, meaningful, informative and insightful. Not only did each agency representative derive important operational information specific to their role in managing terrorism but more importantly, all agreed the multidisciplinary team approach for the trip dramatically enhanced the overall learning experience of the group. Issues were viewed from five different perspectives. In the process all participants learned how they could interact more effectively to address preparedness and response. Our Israeli National Police Liaison Officer noted that our team was the first interagency team she thought her agency had ever hosted. She also stated that she preferred our approach because it seemed to create a dynamic for better information exchange for all involved.

► Preliminary Team Considerations / Recommendations

Develop an integrated explosive / bomb response and recovery procedure for the City of Austin (police, EMS, fire, OEM). This should serve as a model for the future development of integrated response procedures.

Actively pursue regular joint training opportunities between AFD, A/TCEMS and APD. This training could begin with the AFD, APD and EMS Special Operations units because these units are smaller, flexible and adaptive. These Special Operations units have already conducted joint training and this would be an expansion of these efforts. From there the training would be delivered to all operational levels of each department.

Conduct a risk management and the risk benefit analysis to insure that we are doing all that can possibly be done, in the shortest amount of time, for the immediate rescue from the "hot zone" of victims.

Adopt the basic tenants of SBCCOM's (U.S. Army Soldier Biological and Chemical Command) 3/30 rule (similar to the Israeli EMS and Fire criteria for these types of incidents). This rule advocates immediate entry and rescue in chemical or biological environment because firefighting turnouts and self-contained breathing apparatus (SCBA) provides adequate protection of up to 30 minutes in a number of situations.

Because of the potential of secondary devices, use large heavy fire apparatus as blast shields for patient rescue, triage and equipment staging areas.

Use AFD to augment and assist the APD bomb squad with the search for possible secondary devices and recognition of possible secondary "suicide / homicidal bombers." In this fashion

AFD would act as eyes and ears for APD, notifying them of possible suspicious packages, devices or suspects. However, firefighters would not be involved in neutralizing a bomb due to the highly technical nature of explosive ordinance disposal (EOD).

Use AFD to assist APD Bomb Technicians in a non-technical fashion with the opening of vehicles potentially containing car bombs. This assistance would be in the form of providing tools and technical advice on gaining entry in the quickest manner without placing firefighters in the immediate blast zone.

Create a Public Safety Training Academy to train staff on incident management, multi-casualty management, threat and risk analysis, counter-terrorism principles and citizen volunteer teams.

Review and expand APD's role in securing entry and exit routes from the scene of an incident for emergency vehicles.

A/TCEMS should consider expanding its response capabilities by adding two or more Mass Care Patient Management Trailers.

Lastly, the City of Austin should consider launching a multi-agency initiative to provide key instruction to citizens providing clear, simple guidance related to the recognition of suspicious activity and (most importantly) how to provide such information and ongoing support to the appropriate emergency services agency. Including the citizens in the overall protection and security of their communities will provide them with a personal motivation to be a part of the solution.

Respectfully Submitted:

Austin-Travis County Emergency Medical Services Department

- Gordon Bergh, Assistant Director
- Chris Callsen, Division Commander- Homeland Security / Strategic Planning
- David Gruell, Chief of Clinical Practice Division

Austin Police Department

- Rick Hinkle, Commander- Homeland Security / Special Operations
- Jim Neilson, Detective- Bomb Squad

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Austin Fire Department

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The Personal Diary of Patrick Crocker, M.D.

City of Austin Operation Prepared Community Project Massada



City of Austin Project Massada-September 2004

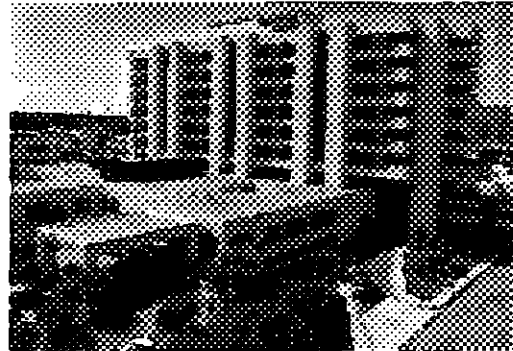
I have just returned from a most remarkable trip to Israel. The purpose of this trip was to observe first hand the system of care for the victims of terrorism



accompanying the current wave of violence there, known as the Intifada. While we are tempted to think otherwise, the American Press does not provide real insight into the situation, the staggering volume of terror attacks, the personal dedication, or the challenges faced by those caring for these victims. To say my experiences were an eye opening awakening is an understatement, and I would like to share some of them with you. The

following journal reflects some of these experiences. Experience that I could not have gleaned from journal articles, textbooks, or the typical medical symposia physicians attend. My name is Pat Crocker, I am an Emergency Medicine physician, and Medical Director of the Emergency Department Trauma Center at Brackenridge Hospital, Austin, Texas.

Our trauma center, one of the busiest in the nation, receives the seriously injured victims of trauma from an eleven county area in Central Texas, and will treat approximately 130,000 patients this year. Despite this experience there is much to learn from those who now must respond routinely to the large terrorism incidents in Israel that result in multiple injured patients. Those providing emergency care



there do so under the constant threat of personal injury from the terrorists, their bombs, and their sniper fire. The intent of this trip was to experience the challenges facing public safety agencies and the medical community in responding to these mass casualty incidents, and then bring back to Texas the lessons learned to improve our own disaster planning. And of course should it be needed in the future, our own ability to cope with such acts of terrorism here at home, on our own soil. I hope you find this as interesting and compelling as I have.

Project Massada has been in the planning stages by Austin/Travis County EMS Assistant Director Gordon Bergh and EMS Division Commander Chris Callsen, for the past two years. Unfortunately however, though of recognized value, the project lacked a ready source of funding. Impetus for funding the project ultimately came following a trip to Israel by Mara Levy, the daughter of Texas

Monthly founder and publisher, Mike Levy, based on her experiences on that trip. Her recognition of the tremendous wealth of untapped knowledge and experience that could be brought back to Austin, and Mr. Bergh's continued dogged persistence and planning, ultimately led to fruition this year. (Mr. Levy has played an integral role in the inception of the current Austin EMS program in 1976, and has maintained a high level of interest and participation in EMS activities ever since. It seems his daughter has inherited some of the same interest and community spirit.) The Levy father-daughter combination of support and enthusiasm in helping to improve the area's ability to cope with the mass casualties a disaster can bring, led to the attention of the Meyer Levy Foundation. This foundation was created by Mike's late uncle, and for which he serves as one of the trustees. The final funding was accomplished through the Meyer Levy Foundation and in cooperation with the Austin Community Foundation.



Today we watch the massacre of innocents under the guise of political expression on an almost daily basis. Literally thousands have been murdered while going about the daily activities of their lives. New York, Jerusalem, Tel Aviv, Moscow, Beslan, Baghdad, Bali, Madrid, Jakarta... few are left untouched. The truth is that only the large events make our Western news, and the actual frequency of events is far under

reported. Preparation and planning in the evaluation and treatment of victims of mass casualty situations have proven to be effective in reducing the unnecessary loss of life. Though currently focused as a response to terrorism these same efforts will also serve us well for other natural mass casualty situations such as tornado, hurricane, earthquake, SARS, and even large outbreaks of influenza. We are actively re-working our plans for Central Texas to meet these challenges.

I first learn of Operation Massada when I am called at home, working at my computer, trying to puzzle out our own new plans for treating disaster patients in the covered parking area under the helipad at Brackenridge Hospital. I am having trouble getting the kind of cooperation I need for the most mundane requirements of the plan, rapidly clearing out the cars that routinely park there, so that the space can be converted to clinical care space. In this simple effort I am frustrated. I feel "Pogo-ed" to death, "we have met the enemy, and he is us". Coincidence or Karma that the invitation to be part of a team to travel to Israel to experience and study with experts in this field comes at this moment in time. I wonder. I am honored to participate in this unique multi-disciplinary team. I learn later during the visit that the team approach encompassed by the planners of the trip, is central to the success of treating mass casualty events in ways I had not previously considered. I admit a moment of hesitation in saying yes, there are travel advisory warnings for the area, there are almost daily terrorist events,



bombs go off with a disturbing frequency in the very cities we will visit, and of course it is ten more days away from my family that has been extremely supportive of my busy career already. But the hesitation is

brief, the opportunity to learn from the best in the world about treating mass casualty situations too enticing, and I am added to a list of professionals I am proud to travel and work with. Gordon Bergh, Assistant Director of EMS, Steve Collier, Director of Emergency Operations, Jim Neilson, APD Detective-Bomb Squad, Ricky Hinkle, APD Homeland Security, Byron Sage, retired FBI now Homeland Security Advisor, Harry Evans, AFD Battalion Chief for A Shift Special Operations Section, Chris Callsen, EMS Division Commander for Homeland Security and Strategic Planning, and David Gruell, EMS Chief of Clinical Practice Division. The Meyer Levy Foundation, through the Austin Community Foundation, has generously provided funding for the trip. A once in a lifetime opportunity that will help us prepare for the unthinkable, help the community prepare, leave me a better physician, and perhaps a better person. As a personal commitment to future casualties I find I cannot be a passive observer.

Beslan, Russia. 326 hostages killed, 727 wounded. Mostly school children. The world is shocked by the loss.

On August 31st, just days before we are to depart, yet another in a



seemingly endless string of bombings occurs in Be'er Sheva, only a few miles from where we will be in Jerusalem. The number of dead....20. The first double bus bombing that has been encountered. The nation is on high alert, there will be retaliation, and of course the endless cycle of re- retaliation. We wonder if we will witness an incident first hand.

September 5th

We meet our Israeli National Police escort for the trip. Superintendent Daniella Rubinstein. She will keep us out of trouble, serve as our guide, and is a fountain of information on the State of Israel and counter-terrorism. As we leave Tel Aviv for Jerusalem we travel through the Judean Hills along a road called the Jerusalem Corridor. At one time this road served as the sole link for supplies between Tel Aviv and Jerusalem during the 1948 war, and is still littered with vehicles destroyed there before I was born. Daniella explains their national importance and



contribution to their history. They are maintained as they are now, littering the hillsides and now with many coats of a dull red rust preventive paint, so that they may serve as reminders to all of what has been sacrificed in the past. "That we shall not forget. That this shall not happen again". This appreciation of history is drawn upon on a daily basis and seems central to the dedication of many we meet. The historical sacrifices, the almost daily terrorism, all motivate the citizens and meld them into a dedicated team. I am struck by how differently our citizens have responded to the events of 9/11. For many, if not most Americans, the horror of that day and the loss of over 3,000 lives at terrorist hands has been relegated to the back of our minds. Three years later the teamwork and motivational force so evident shortly after are now virtually lost. I am reminded of the poignant contrast to our cultures as I continue to be frustrated by my inability to get a few cars moved out from the helipad so that we can treat potential disaster or terrorism victims, while in this country everybody with a pager drops



what they are doing and rushes to the aid of whomever needs it, whenever it may be, and frequently as volunteers. As I will learn later they even rush to the aid of the terrorist who only minutes before tried to murder Israeli Defense Force (IDF) soldiers, and now lies wounded and dying, and at their mercy. Yet they work to rapidly to save

his life. He is in the operating room within fifteen minutes of his arrival to the hospital.

We first travel to the old City of Jerusalem for a security briefing at the local police headquarters. Five workstations are staffed and watch over the areas critical sites through a series of about 278 video monitors. We are told that about 80 of these were destroyed recently during demonstrations. They will be replaced, broken again in the future, and replaced yet again. While not often helpful in preventing attacks, the videotape frequently leads to the capture and arrest of those responsible. For more minor crimes, hot spots and confrontations boiling up, the cameras allow for the immediate direction of Israeli National Police (INP), and the ever-present patrolling Israeli Defense Force (IDF) soldiers to the scene. No doubt many more serious problems are prevented this way. No problem is considered "minor" in this particular section of town however. Why I ask? All realize that the immediate skillful handling of each and every event in this highly contested section of Jerusalem is critical. Failure, escalation of an event, a riot, can lead to a major international event, to more attacks, even to the outbreak of war. In some ways they are the first line of defense and prevention of an even higher escalation of Middle Eastern violence.

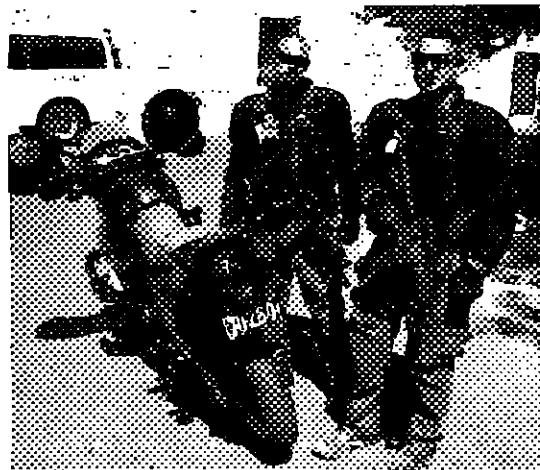


September 6th



This morning we go to Jerusalem National Police Headquarters. When we arrive at the station we are warned they are short staffed today. They are on high alert as they have received specific information on a new threat. Human intelligence, I grow to believe sometimes supplied by Palestinian sympathizers, is central to their ability to prepare and respond to threats. While we are being briefed this morning there are in fact multiple events. A car bomb was detonated south of Jerusalem without the loss of life. We never learn the details. In a separate event members of the Israel Defense Force come under attack from terrorists. Two IDF are wounded, and one terrorist seriously wounded. All are taken to a hospital minutes from where we are studying. Sha'arei Tzedek hospital cares for the wounded this time. The terrorist, contrary to logic, is rushed efficiently to surgery to care for his two abdominal gunshot wounds. The same citizens he has attacked now work to save his life. We tour this hospital Emergency Department and meet with staff later that day. This is a brand new facility that has just been opened. The trauma unit itself has a mere five stations. The ability to easily flex up to 8-10 stations is built-in. Somehow I expected more. To do so much with so little demands efficiency. We also meet one of the only specially trained Emergency Medicine specialists in the country, an American expatriate, now living in Jerusalem.

The Israel National Police is a single unit spanning the entire country. An officer is never out of his jurisdiction, never without his weapon, essentially always on duty. Each carries a pager that notifies them immediately of any events in their area. They respond to all when able. 24/7/365. Extreme dedication. One very unique group of officers is a group of motorcycle SWAT officers. Patrolling the city in pairs, armed with machine guns and protective body armor, they can be dispatched to a scene and arrive within minutes. There are no warning shots. For the bombers no Miranda rights. If lives are at risk and it is necessary, the terrorist is simply killed on the spot.



I learn the meanings of some words I have heard before but never really understood. Intifada. The name given to the recent escalation of terror in Israel. All of the professionals we meet consider Israel on a war footing, and in fact it is.



Qassam. This is a more or less homemade or terrorist assembled rocket. It is unguided and built by amateurs. It frequently fails to fire or explodes on launch. Some however find their way into populated areas. During our visit a number are launched out of the Gaza area though all but one explode harmlessly. This one hits a parked car but there are no casualties. There is reported concern that the coming High

Holidays will be greeted with hundreds of such launches out of the Gaza area. Some will undoubtedly lead to injuries or the loss of life.

But life goes on here. A typical time line for these events staggers our sensibilities and we wonder if we can ever match this efficiency. A bomb explodes shattering the quiet of morning life on the street. T plus 5 minutes the area is teeming with mix of volunteers who play real active roles. In addition the Magen David Adom, the Israel equivalent of EMS, Fire fighters, Police officers, and IDF members all arrive on the scene, many notified directly by text pagers and come from their homes. T plus 11.5 minutes the first victims are on their way to the hospital. Little in the way of on-scene triage occurs, as we know it. Partly the need for this is obviated as

ambulances to transfer all of the serious patients will be immediately available. There are no expectant category patients, only the dead, and those still living. T plus 30 minutes finds each and every seriously injured victim evacuated to a hospital. T plus 59 minutes and the scene of a multi-casualty incident (MCI) is totally cleared of all injured. All of this happens while MDA staff work side-by-side with bomb squad technicians who search for secondary devices. It is not enough to kill the innocent, and the stakes are now raised in attempts to kill the rescuers

as well. These secondary devices are placed in locations targeting search and rescue operations. Crime scene work, Zaka body part collections, and clean up of the scene. T plus 2.5 hours and the street is re-opened, life goes on, the event now a bitter memory adding to the resolve to respond more rapidly and do better next time. A memorial will later be placed here.



Every site of a mass casualty bombing seems to have a memorial of some sort. Some large, some small, but always there. Always a reminder. Always a motivator. So that we shall not forget. So that this shall not happen again. These

We learn that since the attacks began on September 29th, 2000, over 1006



Israelis have died, most of them civilians. Over 6,000 have been seriously injured or wounded. Over 20,000 terrorist events have been logged. Few make it to our Western newspapers. Put in the perspective of their national population these people have suffered losses roughly the equivalent of our losses in Vietnam. In contrast though these have mostly been civilians, friends, neighbors, friends of friends, and not soldiers knowingly in

harm's way. Virtually nobody is untouched by tragedy. Very personal. Very motivating. It is the central motivation and the reason for the dedication of all that we meet.

I also learn Shahid. Shahid means martyr. The Palestinian terrorists consider that sacrificing one's life murdering civilians guarantees them a place in heaven. It



seems an all too enticing justification for mass murder. The INP share their profiling of the suicide bomber, and he is not what we think. In a few days we will spend hours detailing the profile and beliefs of the current wave of bombers, but for now we learn most frequently he more or less views himself as a social failure, is not a true religious fundamentalist, and is rather an angry young man who chooses mass homicide as a route to his

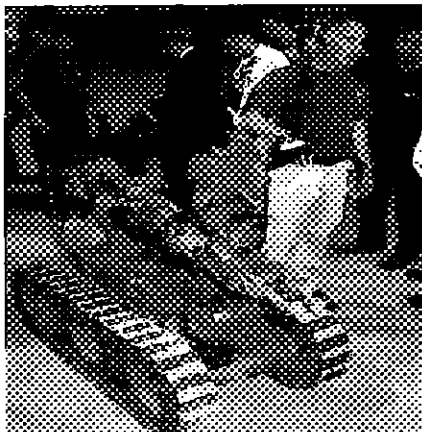
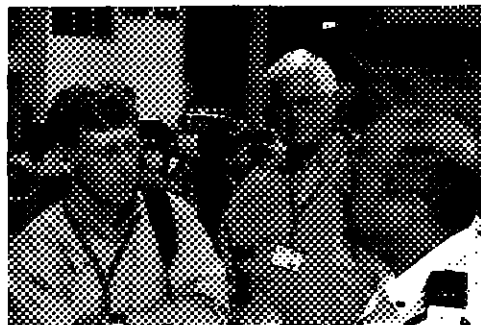
heaven and social and economic improvement for his surviving family.

I learn Zaka. This is a group of the ultra-orthodox Jewish who perform the grisly task of body part collection after a bomb blast. Jewish beliefs demand that all portions of the victim be found, identified, matched, and buried together. We watch videos of the results of a recent bomb blast, and they are sobering. A severed foot still in a Nike tennis shoe, a hand and leg charred and stripped of flesh many meters from the bus, a headless limbless torso embedded into the side of a bus seat, ghastly remains of a the tragedy. In one case we learn that all that remained of a victim was a fingertip. This too, was identified and given burial, helping give the family some closure to their loss. The Zaka use paper towels to mop up blood and tissue off walls, sidewalks, and off other survivors, to help insure a proper burial of the victim's remains. Jewish law demands the burial be completed within twenty-four hours.



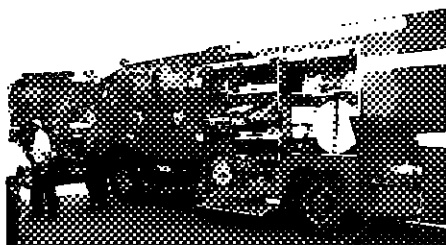
words seem to get all responders into a single unit and keep unity and sense of purpose between the attacks.

We are briefed by the equivalent of the INP Public Relations officer. He is an inspired man. He gives numerous tips and stresses the importance of just two. Always tell the truth as you know it to the media. Attempting to hide information or down play the event will not work in an open society, and undermines the credibility of the system. The myth that the populations will panic if they know the truth is ridiculous he says, and it is through the sharing of information that order is maintained during chaotic events. The myth of public panic when we are given the truthful details of an event is echoed a few days later during the International Conference on Terrorism. An informed public responds appropriately and the truthful information sharing builds confidence in the governments ability to respond. The second pointer is that you should have a single basic point to make to the media about the event. It is all they will take away as a twenty-minute interview will be reduced to a ten second sound bite. Make sure you make your point. His point recently has been that the security wall works, and works well, as bombings within the city have been reduced tremendously. He makes this point EVERY time he has the chance.



We move back to the INP station in the Old City of Jerusalem. Jerusalem itself has 6 bomb squads, and responds to about 110 calls on a daily basis. Most are false alarms, a package of groceries left unattended, the recent purchase of a t-shirt forgotten on the ground in the market place, but each result in calls for the bomb squad. Intelligence and observation by every citizen is relied upon and taken as credible, and results in a full turnout. Once you have lost a friend, relative or neighbor, the false alarms are not inconvenience, just part of the job of making sure you don't lose another. Robots are frequently used to examine the bomb. Some are actual devices that must be defused, or if possible moved to a safer place and detonated. Two officers from this particular squad have lost their lives while defusing bombs. Their equipment is adequate, though basic. Again it is their dedication and professionalism that leads to their success. The bomb squad response is typical of the call to action in an emergency here. Over respond, ask questions later, but be certain that everybody and everything that may be needed is at the scene as quickly as possible.

A few of us sit at a table in the briefing room of the station waiting for the next presentation with the Civilian Defense Force. They marvel that we don't sound like Texans, none of the famous accent. We provide them with a few y'all's for amusement. Round robin reviews of our backgrounds reveal none of us were born a Texan, and none of them are dyed-in-the-wool born Israeli's. All of us oddly brought together by terrorists and devotion to preventing loss of life at the terrorist's hands. The irony that none of us are from where we are working is not lost on me. I have to wonder and doubt the same is true of the Palestinian Muslims just blocks from our location and I must believe they in fact are from this place of violence by birth.



While we tour and receive briefings at the fire station on their equipment and response plans, yet another terrorist event. Arson apparently is also a common though less reported terrorist activity. The fires are frequently set in areas from which it is hoped they will spread to structures. Few do, as the response is overwhelming and rapid. Fire fighters here also

have a few armored fire trucks, and the need to arm the fire fighters as well with carbines has been learned through past experience.

This afternoon we get first hand experience with community policing. There are 25,000 Israeli National Police, who are augmented by 75,000 volunteers. The volunteers receive training, work in conjunction with a regular officer usually, though are armed and have powers of detention. They are always in radio contact with the local headquarters and wear regular uniforms. Later we will patrol the beach area and surrounding neighborhoods, and then traffic stops in an area near a number of embassy buildings. All pretty routine. The officers are very proud of their profiling skills and attribute some of their ability to prevent events through this means. It strikes me, and them, as odd that profiling in our own security and policed departments is so negatively viewed. They believe it is central to their success, and question the logic of searching old women traveling to visit grandchildren. The Israeli's seem practical and pragmatic in their approach to everything.



One of the basic underlying premises of response to a terrorism event is "over response". The plan is that more than enough of every resource is available at

the scene and hospital to insure the minimal loss of life. This means that at some events with a scale of 30-40 casualties may receive as many as 26 MDA ambulances, 110 EMS staff and volunteers, untold police and community police, bomb squad and of course the ever present IDF soldiers. There are ALWAYS enough personnel to clear the scene, insure security, and treat the wounded. They are VERY proud of this, and so they should be.

We are introduced to a very unique EMS vehicle, and there are 6 of these in the Jerusalem area.

The armored EMS unit. These units are equipped with all of the usual life saving equipment, and also have armored vehicle walls sufficient to stop an AK47 round, bulletproof glass, and run flat tires. They are usually not deployed unless there is IDF presence on the scene, and usually only go into hostile areas on the West Bank. Most

frequently it would seem these vehicles are actually used to provide emergency medical care to Palestinians living in contested and hostile areas.



The second unique EMS vehicle is the MCI Response vehicle, or Multi-Casualty



Response vehicle. It is packed with materials to respond to almost anything including level A and level C chemical suits, flak vests, as well as high density ceramic plate vests as personal safety items. The contrast is stark as our concept of personal safety equipment is usually a pair of rubber gloves, a paper mask and perhaps anti-splash goggles, which in fact are infrequently worn.

The MDA also manages the blood banks, and donor centers are at each major MDA station. Typically they keep on hand 3X the usual daily use of blood to cover unexpected events. They are able to augment this to 6-8X the daily use stock within 16 hours through local donors. In contrast our own blood bank has frequently run low as we ship considerable blood to other parts of Texas. What is our ability to rapidly increase our supply? Is it enough? Do we donate enough? Will our own supply be adequate to cope with an emergency need? Questions to be answered on our arrival home.

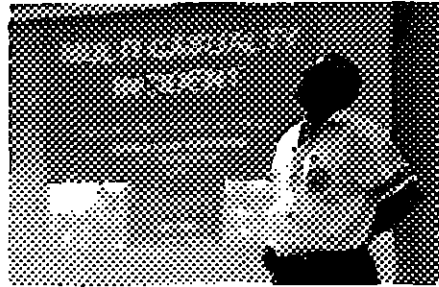
Stress debriefings are integral to events for every agency. It is how they cope with the devastation and grief. They are surprised the we utilize this tool so infrequently. We must get better at this, or face the burnout that comes with continued unreleased and ignored stress. It is a well known that emergency professionals of all types bring this stress home to their family's detriment, but the macho we can do anything attitude in our own country prevents routine debriefings.

Sept 7th

We awaken to find the IDF and INP on high alert. In a response to the Be'er Sheva bombings Hamas leadership has been struck with a missile attack. 15 dead, and 26 wounded. The police and military are expecting retaliation today or tomorrow.

Today we will spend the day meeting with members of the Magen David Adom (MDA), the Israeli equivalent of EMS. We have endless questions about the bombing scenes for those who have responded to so many.

Two things are frequently mentioned, in fact almost by all, details that magnify the gut wrenching visual spectacle of the disaster scene. The first is the smell, that horrific odor of burned skin and flesh that accompanies these explosions, and lingers over every bombing site. It is unforgettable, and adds to the sense of loss. This is not the smell of a charred steak or ruined chop from the grill. It is the acrid smell of death. Only those who



have treated severe burns know it. Those who have known it, never forget it. It is burned humanity, the loss of life, embodied in the very air the rescuers breathe. The second is the ringing of the cell phones. The haunting cell phones, which ring intermittently throughout the rescue, and into the night. While my own cell phone seems to break if simply dropped, the cell

phones in Israel, like the people, are made of sterner stuff. These phones that ring in the quiet after the bombing are the phones of the victims, having survived the attack while their owners have not. A friend, mother, father, sister, brother, has learned of the bombing and are calling to see if their loved one has become a victim. After the second or third unanswered call the concern must be terrible.

Somebody who loved this person that now lies dead on the floor of the bus seeks reassurance all is well.

The calls continue, some repeat and repeat, recognizable by the unique ring the victim may have picked for his or her phone, and that is now the last vestige of their personality. All the calls go

unanswered. It is against policy for rescuers to

answer. The loved ones will learn of their loss through more personal communications, but the first icy chills of grief must begin with the unanswered calls. Tragedy has struck again. This time the loss will be even more personal.

We learn later in the visit that 29 staff members of Hadassah Hospital have lost first-degree relatives to terrorists since the start of the Intifada.

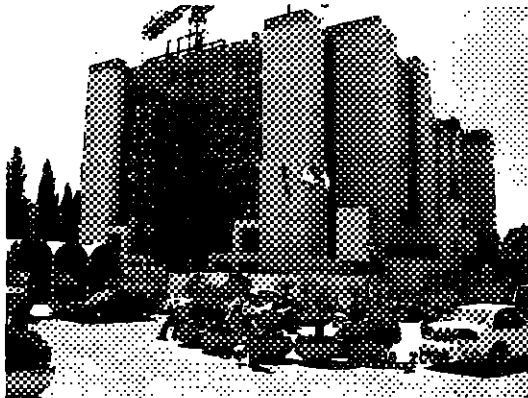


The paramedic and medic staff of the MDA carry with them at all times the basic materials they will need to provide first aid assistance should an event occur while they are off duty. They respond to the scenes without hesitation and at personal risk. Nobody complains.

September 8th

Two IDF have been injured and one Palestinian terrorist seriously wounded a few miles East of our location. The casualties will all be treated in a hospital we will tour later in the day.

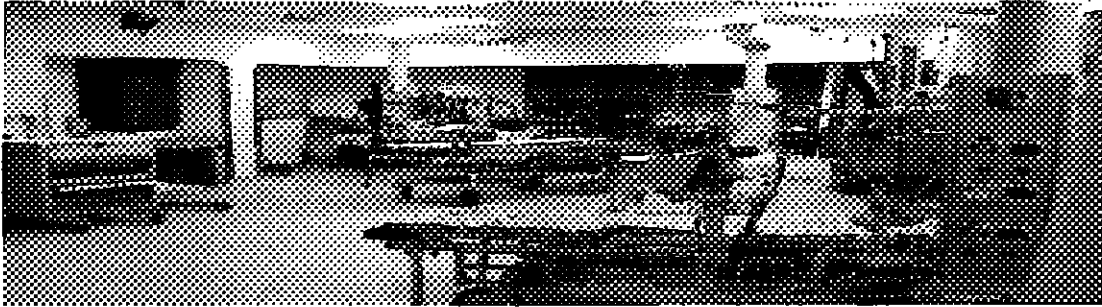
A car bomb has detonated while we are with the MDA receiving our briefing. No casualties. We learn from the newspaper the following day the car contained 100 kilograms of explosives, and went off near an empty army jeep in Baka al-Sharkiya, North and West of our location.



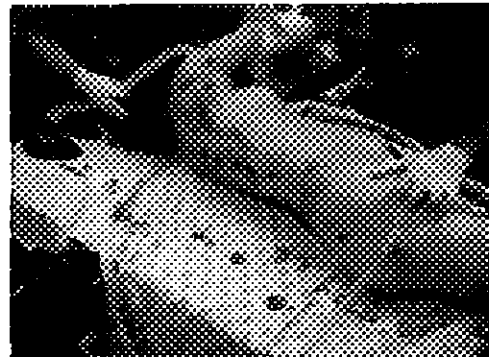
Hadassah Hospital. I have anxiously waited visiting this Mecca of mass casualty know-how. Their experience in treating mass casualties resulting from terrorist attacks is unmatched in the world. I anticipate what I will see, learn, experience here, and wonder what can be brought back home. I imagine a large open trauma bay, perhaps 15-20 treatment stations, bustling with activity. Something similar to our own trauma

center at Brackenridge Hospital on a busy weekend night shift, only on a larger scale. I find in fact a rather small trauma bay, five treatment spaces, and total quiet as it is devoid of patients. The treatment bays are simple, but everything that is essential is there. I look with envy at the simplicity and accessibility of equipment, medications, and supplies that we typically use. A pet peeve of my own is the need for our nurses to leave the room and the patient, access a patient identification for a locked cart of medications called a Sure Med so that the patient can be billed, and the inevitable delay in getting what the patient needs. Here, all is laid out and ready, ketamine, succinylcholine, etomidate, versed, propofol...like pieces of gold they shimmer within the immediate grasp of the physician. How marvelous! The roles of each provider are highly defined, an Anesthesiologist for the airway and ventilator, a trauma surgeon for overall evaluation, and a Radiologist to perform an immediate ultrasound. An Orthopedist will be called in for each fracture. I ask naively the role of the Emergency Medicine attending physician here in Israel. None, I am told. I am at first a bit hurt, disappointed that my own specialty has no recognized value here, but learn later there are only 3 residency trained Emergency Medicine physicians in all of Israel. Temporarily I am the fourth. Emergency Medicine will come to

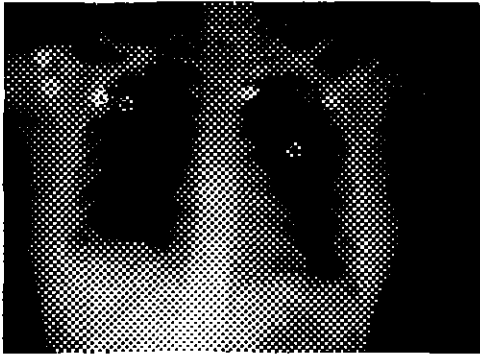
Israel, but it will be years into the future before this specialty can be integrated into their system of care.



We meet with Dr. Shapiro, the director of the hospital, and a man highly experienced in the management of trauma patients. He explains much, and answers my numerous questions. Following an outdoor bombing expect 15% dead on the scene, 25-40% dead if the event is in a closed space such as a bus. Terrorists now prefer the bus for this very reason. The body counts are much higher. For the same reason nightclubs are favored in the evening hour bombings. Expect 25-40% to have serious life threatening injuries. Blunt force blast injuries, penetrating injuries from the nuts, bolts, screws, tacks and ball bearings the terrorist wraps around his bomb, and the flying debris caused by the explosion itself. Burns, pulmonary injuries, and the injuries from the secondary trauma of being thrown by the blast such as fractures and head injuries are also common. These are the patients that will benefit most from our care and we may save some of these lives if we act quickly. The remainder will have injuries, but they won't be life threatening. They will have to wait while the others are cared for. I doubt there are complaints about the waiting time. We discuss a number of issues of emergency care and I am quite interested in the use of permissive hypotension. This is an emerging concept in trauma care in which the medical team accepts a lower than normal blood pressure of 120/80 for a variety of potentially beneficial reasons. He says no, we don't use it, though then immediately states they use a systolic blood pressure of 90 as a reasonable stabilization and pre-operative goal. A rose by any other name I conclude.



He uses a term I have heard only once before, and he wants to change the world's view of the "suicide bomber". He prefers "homicide bomber", and I can't agree more. These events have ceased to be valid forms of political expression and are nothing more than an excuse for mass murder. Later in the trip we will learn that in fact that for the bomber the event has nothing to do with suicide, which is strictly forbidden under Islamic beliefs.



The lessons at Hadassah are very basic. I learn Hadassah hospital's Emergency Department succeeds in its mission so well for reasons I had not anticipated. It is not from new techniques, it is not newly accumulated knowledge of trauma care, there is no special equipment, and there are no special resuscitation protocols. While the dedication of this staff is tremendous, this is not the reason either. Hadassah succeeds

based on a level of cooperation between all the actors on this stage to a degree I have never seen. When the call comes in, the staff comes running from everywhere, ready to work, ready to save lives, ready to meet their mission. It begins at the scene of the event, and continues on through the hospital stay. It is all of these people working together seamlessly that makes the difference. They are very proud of this. I want desperately to bring this home and in some fashion incorporate it into our own plan. It is the central driving force of their success, it doesn't require hospital budget approval, and because it comes from the heart, it is free.

September 9th

The Australian Embassy in Jakarta is struck by terrorist bombers. 10 dead, over 200 injured. The Australian government states that it will not be intimidated. An ally's resolve in the war on terrorism is strengthened.



This morning we meet with the director of the Environmental Protection Agency. This agency is charged with the evaluation of chemical, biological and radiological hazards. There are eleven stations and vehicles fully equipped to detect such hazards and they are spread across the country. The basic approach to detection seems to be centered on a high level of suspicion, and then directed evaluation with a number of state of the

art sensors and detectors is employed. The basic conclusion for this care is as always the simplest. Remove the casualty from the contaminated area, remove the contamination from the casualty, end the exposure for the patient and the rescue crew. Disrobing the patient and washing with soap and copious water still seems to be the most effective actions. He believes in most instances unless there is visible liquid contamination of the patient, simple disrobing is probably adequate. I wonder about the need to wash anyway, particularly if there are unknown toxins, bacteriologic agents, or as yet undiscovered radiological agents.

I am not giving up on the wash decontamination in our own local plan, though so far his approach has worked adequately. He confirms for us as we expect that the cumbersome Level A suits with self-contained breathing apparatus is almost impossible to conduct rescue operations from. It seems that some risk to the rescuer cannot be avoided, and is accepted by all rescue workers in both of our countries. The Level C suit that provides filtered air and a chemical resistant body suit is generally adequate, and is felt to be fully adequate if you are in an area in which there are currently survivors. Limit your time in the area. Two trips in to the contaminated are maximum per rescue staff, and then switch out suits and rescue staff. Simple, easy to remember, easy to accomplish. The Level C suits are in fact the same suits that our Emergency Departments in Austin are equipped with. All consistent with what we learn from each expert we meet. The KISS principle, or Keep It Simple Stupid, is tantamount. To be effective the plan must be simple, and if not simple the plan should be simply left behind.

We are also introduced to the "Shelter in Place" concept. Essentially this means civilians within an area of contamination are safest within their own homes. Close all the windows and doors. Turn off the air conditioning. Move to the center of the house. He assures us multiple sensor tests have proven this to be the safest method of protecting large areas until the toxins dissipate. Maybe there is room for duct tape and plastic sheeting after all.

Finally we hear again that to date there have been no confirmed uses of chemicals or toxins with conventional explosives. He doubts they would be effective in most cases in any event unless sophisticated military weaponry is procured, and this is generally unavailable to terrorist to date because of the expense. Stopping the flow of monetary support to terrorist seems essential in the war on terrorism.

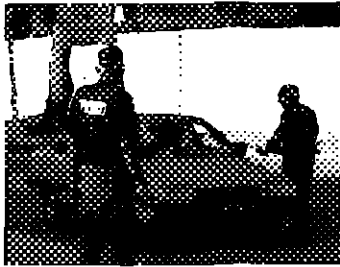
At the close of our time in Jerusalem we walk the outer wall of the old city. Incredible amounts of history have occurred on this ground, for both the Judeo-Christians and the Islamic community. These sites are holy ground for the three most prevalent religions in the world. Two have ascended directly to heaven from here, literally a few hundred meters from each other. It is what makes this holy ground so contested. As sundown nears we find ourselves on the wrong side of the wall, and decided to take a short cut through the Muslim section of Old Jerusalem. The streets are unbelievably narrow and filled with people, the small shops set shoulder-to-shoulder leaving a virtual alleyway to pass through. It is a bit tense. There are no friendly faces. The street names are in Arabic, our map in English. A single man



taunts us loudly, and for a few minutes we are concerned his obvious expression of hate might spread to others. I am happy to leave this area behind as we exit into the Jewish section near the Temple of the Sepulcher.

September 10th

Today we travel to Herzliya, and will spend part of the evening patrolling with the INP, augmented by the ever-present volunteers. 25,000 formal INP. 75,000 volunteers. The volunteers patrol with the regular police units, and bolster their



presence throughout the country. The City of Austin, has only seven such volunteers. While the community needs are much different the contrast is stark. The Israeli volunteers are members of the silent majority who quietly perform so much volunteer work. They are armed with a variety of weapons, usually a hand gun or rifle. This evening one has an M1 carbine that is old before I was born, but he reminds us it remains effective if needed. Their primary weapon however is their simple presence, their eyes and ears that aid the INP. They work their days at various occupations, and after dinner spend the evening patrolling their neighborhoods. Playing the role of protector, their personal contribution to national and neighborhood security. They take pride in their work and that they have joined so many that stand on the proverbial wall and say to their neighbors, I will stay awake tonight so that nobody will harm you tonight. It seems a high calling.

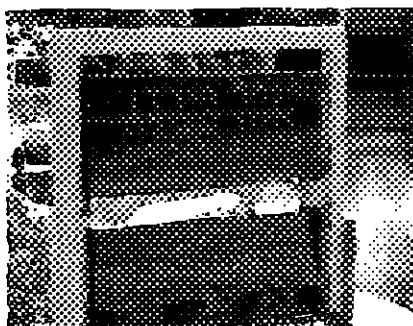
September 11th

In Jenin, a few miles from where we will visit an outpost on the security wall two bombs are found on the roadside. They are apparently removed without problem though we are informed bomb squad removals in this area are particularly hazardous as they are within the range of Palestinian snipers. There is also a page about a shooting incident a few miles away, though about which we receive no details. Later in the day our planned visit to the outpost will be moved a few miles further south to avoid this area.

Today we will spend the day with Ytzik Cohen, a Commander in the Tel Aviv bomb squad. He is highly knowledgeable and a great ambassador for his police unit as well as his country. He is also the kind of guy you would like to spend an afternoon with playing touch football and then share a few beers with. On the final night we do, his humor and easy-going nature appreciated by all. It will be a long day, and we will mix touring some religious and

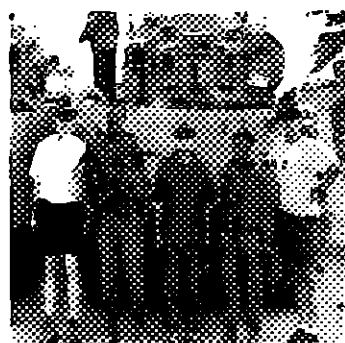
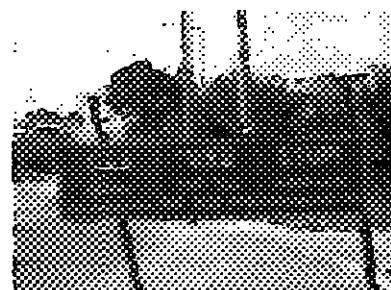


historic sites, see most of the Northern half of Israel, and the day will be filled with constant conversations on securing bombing sites, the interaction of police, fire, MDA, and bomb squad at these scenes. How they work together. How we will work together in new ways on arrival home. The constant threat of the secondary device designed to kill rescue units is a source of endless questions and answers. The bottom line is they just do the best they can, balancing the risk to the rescuers against potential delays that might lead to greater loss of life among the victims. Ultimately we decide we must do the same and bomb squad, police, fire and EMS will work simultaneously. We start to develop plans to utilize a large AFD ladder truck at the scene to create a safe zone between the rescued and a bomb scene.



We travel through Nazareth, the Sea of Galilee, Copernicus, the Golan Heights, into contested Syrian country side where prominent signs warn us it is unsafe to leave the road way because of mines left from prior wars, to within 20 miles of Damascus, along the Jordanian border, and briefly into Lebanon. The mines used by the Syrians during the last war are non-metallic, and therefore defy current technology in removal. They dot the

landscape throughout this region and will remain a hazard for years to come. Such mines have in fact become a worldwide hazard, remnants of prior conflicts that remain a threat. They randomly claim and arm or leg of the unsuspecting in these areas, long after any conflict has ended, and are now a source of major concern for the United Nations. After we cross into Lebanon Itzick points out a yellow pennant flag flying in the breeze a few hundred yards away. He nonchalantly informs us this is a Hezbollah encampment, and I conclude that it is time to head back South to safer territory. I promised my wife and daughter before we left, as I am sure the others have, that I would be safe and not do anything unnecessarily risky. Our presence here seems to be pushing the



envelope a bit. In this part of the world I remain uncertain whether traveling in a marked police vehicle with an armed INP officer makes you safer, or makes you a better target. I suspect it is the latter. We also travel to the security wall East of Netanya in a Palestinian controlled area. Here we observe procedures and equipment, take some pictures with the ever-present IDF, who all seem to be in good spirits, but on high alert. We are within sniper range of the Palestinian terrorists. They accept this as part of the

job. It is all amazing and gives us new insight into some of the problems we may face in the future, and how our view of scene safety must seem rather dull and mundane to them.

September 13th

In retaliation to yesterday's bombing in Jenin, IDF respond with a missile attack after those responsible are identified. Three Palestinian organizers are killed.

Tonight we meet with the INP Commander over Hostage Rescuer in Tel Aviv. His specialty, hostage rescue and negotiations, and understanding the mind of the bomber. He is a psychologist and an expert on the profiling of the bombers, and well versed in the religious fundamentals of Islam. Again, we have found a fountain of practical knowledge. The background profile of the bombers is a story almost as complex as the history of the region. Early bombers such as those involved in the 9/11 losses were in fact religious fundamentalists, engaged in holy war, their Jihad, against the United States. It is explained that while world domination is central to the basic Islamic belief, there is a large measure of tolerance included in this goal, and that these bombers and this approach is not one condoned by other Islamic Muslims. Only the most radical approve of the murder of innocents. Just days before in an editorial published in the *International Herald Tribune* titled *The Anguish of a faithful Muslim*, by Nassrine



Azimi, we learn her personal view, and that she believes the acceptance of violence is spreading within her faith. The litany of attacks has left her questioning what has become of the more gentle faith she knew as a child, and she fears that in only a generation or so in the future Islamic may no longer embrace tolerance, humanity and peace. The definition of Islam changed forever by Bin Laden and those like him. Without

an uprising of the moderate Islamic the situation will worsen worldwide. The middle ground moderates, by far the largest group of Islamics, are the solution and we will depend upon them. It seems only through their activism and their condemnation of the terrorists will we ever attain peaceful coexistence. She wonders if it is already too late as generations of children in Iran, Pakistan, Iraq, Palestinians, to name a few, are all now raised to hate. Compounding the problem is the



new profile of the bomber. We are cautioned that bomber profiles and motivations vary the world over, but for Israel a new bomber has emerged. He is usually male between the ages of 18-24, he is socially disadvantaged and economically impoverished. He has low self-esteem. His death during the bombing has nothing to do with suicide, for he believes he will simply be transformed through the bombing to sit at the feet of Allah, serviced by 72 virgins, and with the right to have 70 of his family members join him in heaven. The mangled torsos, disjointed body parts, and severed heads of the bombers and victims argue otherwise to the rational mind, for surely Allah cannot approve of this. His family will suddenly achieve a higher social status, money, community support, and will be honored annually during the holiday of the Shahid. Violence against Westerners built into the culture and celebrated annually.

Our host's beeper goes off, the text pagers that are worn by all supervisors and keep them informed of events, and we learn the IDF has again retaliated. Those responsible for a car bomb in Jenin just days ago have been located, and missiles sent into their meeting place killing three important leaders. Again just miles from our location. In the morning the IDF bulldozers will come and level the site, and all of their family's homes. The money that had flowed so freely to compensate these families for their loss is drying up, partly as a result of the United States intervention in Afghanistan and Iraq we are told. This must eventually have some effect, as the economic solution for the bombers family that the bomber seeks will no longer exist. The current bombings are very much a solution for the economic problems of the bombers family, and this now is no longer reliably secured.

September 12th, 13th, and 14th

A Palestinian, well known to the checkpoint guards, today arrives by bicycle instead of on foot as usual. This arouses suspicions and he is held a distance off until an armored vehicle can be called up to investigate. He detonates the bomb injuring two IDF members. Re-retaliation to the incident in Jenin.



These are the days spent at the International Conference on Terrorism. The opening address is by the head of the Russian Dumas, the directorate over internal Russian security. He does not specifically mention the Besian incident, or the recent two airliners that have been brought down by Chechnyan terrorist. While he underscores terrorist attacks are local internal

Russian events, he does state clearly that we have a new ally in the war on terrorism and that counter terrorism activities must be worldwide. It is good to have allies in this. Sadly and in contrast we learn that the minister from Iraq was summarily fired from his position because he had made comments that indicated

a need for his country to cooperate and learn from the Israeli experience. A political faux pas that has cost him dearly, and may have that left him a man without a country. Simply because he chooses to cooperate in preventing the continued tragic loss of life. The countries of the world that have yet to embrace the battle must rise to the challenge. The terrorists must be made to face the Goliath that a world united against them can be. It is only then, when every safe haven is removed, that we can be successful.

Speakers and panel presentations on every aspect of terrorism are presented. The common theme is that we are all at risk, that the frequency and acceptance of mass murder of the civilian population is becoming more accepted. It is also stressed that we in the USA are at more risk of natural disasters, domestic terror, influenza, and perhaps new and emerging diseases such as SARS. We are reminded that the same preparations for terrorist related mass casualties would serve us equally well in times of natural disasters. Preparation for mass casualties is not only about terrorism, and must include many possible scenarios.

September 15th

It is time to return home and the ten days have flown by. I am sure that the others are now like me, starting to dread their "In-Box" and the pile of accumulated work that awaits our return. But there are many lessons from the visit to bring home, new experience, knowledge, and perspectives that simply cannot be gleaned from any textbook or training video. Perhaps the most valuable is in fact the simplest. The public safety and hospital limbs of emergency care in Austin have always worked well together, but the threat of mass casualty incidents brings a new level of challenge, a challenge our Israeli counterparts have overcome through unprecedented planning, information sharing, and cooperation on every level. All planned in advance of the need. All with disarmingly simple straightforward operational plans. We will bring this new level of integration home as our most valuable lesson. The underlying premise and theme that was related to us for planning purposes at the Magen David Adom headquarters station returns to my mind and sums the required thinking for disaster planning, "If it isn't simple, simply leave it behind". Stark recognition that our overly complex voluminous disaster plans will fail us when needed, and that the solution is to simplify down to the next level. The work to accomplish the changes awaits us, but we are all energized and eager to become better prepared to care for mass casualties, whether they are from a natural disaster, a new emerging disease, or the result of a homicide bomber.



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Post Script

September 22, 2004

Today a homicide bomber detonates them self within the city of Jerusalem. I have been home for just seven days and traveled near this area. I can't help but wonder if some of my new friends in Israel's EMS, police, and bomb squad are involved. I have little doubt that they are involved in the care of these victims. 1 dead, 14 injured. The story was covered tonight on ABC.....a six second sound bite.