

**COUNTY OF SAN LUIS OBISPO BOARD OF SUPERVISORS  
AGENDA ITEM TRANSMITTAL**

(1) DEPARTMENT Public Health		(2) MEETING DATE May 2, 2006		(3) CONTACT/PHONE Cathi Slaminski/781-2067	
(4) SUBJECT Request to approve (1) and sign the renewal agreement with the California Department of Health Services (CDHS) for Bioterrorism Preparedness Activities through the Health Resources and Services Administration (HRSA); (2) the required certification that funds shall not be used to supplant funding for existing levels and shall only be used for bioterrorism preparedness and planning; and (3) a corresponding budget adjustment in the amount of \$195,684. <span style="float:right">(Clerk's File)</span>					
(5) SUMMARY OF REQUEST HRSA provides funding to States to implement local efforts of the National Bioterrorism Hospital Preparedness Program. The Program improves the capacity and capability of healthcare systems to respond in a coordinated and effective manner to acts of terrorism and other public health emergencies.					
(6) RECOMMENDED ACTION Approve: (1) and sign the attached renewal agreement with the CDHS to fund equipment and training to enhance bioterrorism preparedness and response activities; (2) the required certification that funds shall only be used for bioterrorism preparedness and planning; (3) a corresponding budget adjustment in the amount of \$195,684 (\$165,684 from unanticipated revenue and \$30,000 from the 04/05 HRSA Bioterrorism Grant. Approval by 4/5's required					
(7) FUNDING SOURCE(S) CDHS		(8) CURRENT YEAR COST \$209,057		(9) ANNUAL COST \$209,057	
(10) BUDGETED? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> N/A					
(11) OTHER AGENCY/ADVISORY GROUP INVOLVEMENT (LIST): Public Health Department, County EMS Agency, the four area hospitals, urgent care facilities, Community Health Centers, ambulance care providers, and County Counsel					
(12) WILL REQUEST REQUIRE ADDITIONAL STAFF? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes, How Many? _____ <input type="checkbox"/> Permanent _____ <input type="checkbox"/> Limited Term _____ <input type="checkbox"/> Contract _____ <input type="checkbox"/> Temporary Help _____					
(13) SUPERVISOR DISTRICT(S) <input type="checkbox"/> 1st, <input type="checkbox"/> 2nd, <input type="checkbox"/> 3rd, <input type="checkbox"/> 4th, <input type="checkbox"/> 5th, <input checked="" type="checkbox"/> All		(14) LOCATION MAP <input type="checkbox"/> Attached <input checked="" type="checkbox"/> N/A		(15) Maddy Act Appointments Signed-off by Clerk of the Board <input checked="" type="checkbox"/> N/A	
(16) AGENDA PLACEMENT <input checked="" type="checkbox"/> Consent <input type="checkbox"/> Hearing (Time Est. _____) <input type="checkbox"/> Presentation <input type="checkbox"/> Board Business (Time Est. _____)		(17) EXECUTED DOCUMENTS <input type="checkbox"/> Resolutions (Orig + 4 copies) <input checked="" type="checkbox"/> Contracts (Orig + 4 copies) <input type="checkbox"/> Ordinances (Orig + 4 copies) <input type="checkbox"/> N/A			
(18) NEED EXTRA EXECUTED COPIES? <input type="checkbox"/> Number: _____ <input type="checkbox"/> Attached <input checked="" type="checkbox"/> N/A		(19) BUDGET ADJUSTMENT REQUIRED? <input checked="" type="checkbox"/> Submitted <input checked="" type="checkbox"/> 4/5th's Vote Required <input type="checkbox"/> N/A			
(20) OUTLINE AGREEMENT REQUISITION NUMBER (OAR) _____ N/A _____		(21) W-9 <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		(22) Agenda Item History <input type="checkbox"/> N/A    Date 8/9/05	
(23) ADMINISTRATIVE OFFICE REVIEW <p align="center"><i>OK Dan Budaber</i></p> <p align="right"><i>B.S. (5.2.06)</i></p>					



# County of San Luis Obispo • Public Health Department

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Gregory Thomas, M.D., M.P.H.  
County Health Officer  
Public Health Director

TO: Board of Supervisors

FROM: Gregory Thomas, M.D., M.P.H., Health Officer/Public Health Administrator

DATE: May 2, 2006

SUBJECT: Request to approve (1) and sign the renewal agreement with the California Department of Health Services for Bioterrorism Preparedness Activities through the Health Resources and Services Administration (HRSA); (2) the required certification that funds shall not be used to supplant funding for existing levels and shall only be used for bioterrorism preparedness and planning; and (3) a corresponding budget adjustment in the amount of \$195,684 (\$165,684 from unanticipated revenue to fund HRSA Coordinator, required training, communication systems, and ReddiNet license renewal and \$30,000 from the 04/05 Health Resources and Services Administration (HRSA) Bioterrorism Hospital Preparedness Program Grant).

## Recommendation

It is recommended that the Board approve: (1) and sign the attached renewal agreement with the California Department of Health Services (CDHS) to fund equipment and training for local area hospitals, ambulance companies, urgent care clinics, community health centers, skilled nursing facilities, the Emergency Medical Services Agency, and the Public Health Department to enhance bioterrorism preparedness and response activities; (2) the required certification that funds shall not be used to supplant funding for existing levels and shall only be used for bioterrorism preparedness and planning; (3) a corresponding budget adjustment in the amount of \$195,684 (\$165,684 from unanticipated revenue to fund HRSA Coordinator, required training, communication systems, and ReddiNet license renewal and \$30,000 from the 04/05 Health Resources and Services Administration (HRSA) Bioterrorism Hospital Preparedness Program Grant to reimburse local area ambulance providers (SLO Ambulance and Cambria Healthcare District) for TACPAK Mobile Command Centers to increase their communications capability during a public health emergency). Approval by 4/5's required

## Discussion

The Federal HRSA provides funding to States to implement local efforts of the National Bioterrorism Hospital Preparedness Program. The National Bioterrorism Hospital Preparedness Program improves the capacity and capability of healthcare systems (hospitals, emergency departments, health centers, EMS systems, and poison control centers) to respond in a coordinated and effective manner to acts of terrorism and other public health emergencies.

As part of the Federal HRSA Grant Program, it is required that the States distribute the federal funds to their respective counties. This grant provides funding to upgrade the preparedness of the local hospitals and emergency medical systems to respond to bioterrorism, and other public health emergencies. On January 10, 2006, the California Department of Health Services awarded San Luis Obispo County Public Health Department

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HRSA Year 4 Grant funds in the amount of \$275,388, which will be spent by August 31, 2006. This will ultimately allow San Luis Obispo County's local hospitals and emergency medical system to become more prepared to deal with biological disasters, as well as non-terrorist epidemics of emerging diseases, exposures to chemical toxins and radiological materials, and mass casualties due to explosions.

The Public Health Department will retain \$179,057 of the \$275,388. The remaining funds, in the amount of \$96,331, will be retained by the State Department of Health Services to directly purchase equipment on behalf of the local area hospitals, ambulance providers and urgent care clinics, with the Public Health Department serving as the agent. This arrangement allows the State to access a price agreement, thereby getting the highest values for each dollar.

The San Luis Obispo County Public Health Department led the grant application effort and will oversee the administration of the HRSA Grant Program. As required by the State, San Luis Obispo County has formed an informal collaborative HRSA Planning Group to identify local bioterrorism preparedness needs and help shape the grant disbursements. Membership on San Luis Obispo County's HRSA Planning Group includes representatives from the Public Health Department, San Luis Obispo County Emergency Medical Services Agency, Sierra Vista Regional Medical Center, French Hospital, Arroyo Grande Community Hospital, Twin Cities Community Hospital, San Luis Ambulance Company, Cambria Healthcare, one representative for the County's ten Community Health Centers, and one representative for the County's four Urgent Care Clinics. The HRSA Year 4 Grant, priority was given to improving the communication infrastructure amongst San Luis Obispo County's emergency medical community, increasing personal protective equipment and decontamination capability, and emergency response training and exercises.

**The State will utilize \$96,331 of the \$275,388 to directly purchase equipment and supplies for the Public Health Department, which will be distributed to each of the 4 hospitals, 4 urgent care facilities, and 2 ambulance providers, as follows:**

- Additional personal protective equipment listed below will provide enough equipment for hospital, clinic, and ambulance staff to use during training without using up the equipment that they would normally need during an actual event; the air purification/negative pressure systems will help equip each of the 4 hospitals to properly contain and treat patients with infectious diseases.
  - Personal protective equipment, including suits & booties, PAPR respirator hoods, N-95 and 3M particulate respirator masks (\$7505);
  - Air purification systems (\$17,970);
  - Negative Pressure Isolation kits (\$4170);
  - Replacement Modular HEPA filters (\$4740); and
  - Replacement pre-filters (\$1500).
- Six Globalstar GPS Satellite Phones for the County EMS Agency, MedStop Clinic, and each of the 4 hospitals (\$4284).
- Pharmaceuticals (Bactrim DS and Levaquin) that will go towards the County's first responder pharmaceutical cache, stored at the Community Health Clinic on Bishop Ave in San Luis Obispo, to provide prophylaxis and treatment for a broad spectrum of bacterial illnesses (\$56,161).

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**The Public Health Department will retain \$179,057 of the \$275,388, to be used in the following manner:**

- The National Bioterrorism Hospital Preparedness Program realized the increased workload to implement this grant and the need for staff to administer the program; therefore, new to this year's HRSA Grant Program is the allotment of \$49,990 to the Public Health Department to contract a part time "HRSA Coordinator" to administer the HRSA Grant Program. The Public Health Department has hired Category Five Professional Consultants, Inc. to oversee the HRSA Planning Group, develop the grant application, and provide deliverables that are required by the grant, such as: progress reports, bed capacity survey, training and exercise coordination, and assistance to the hospitals in developing their surge plans. This contract was enacted on October 10, 2005 and is valid through August 31, 2006.
- In the event of a bioterrorism attack or a major public health emergency, medical providers having contact with infected patients must be protected from contamination. As part of the HRSA Year 4 Grant allocation, the State has provided funds (\$44,700) to the Public Health Department to coordinate training and exercises, as follows:
  - First Responder Awareness course for 30 health care workers from the county's hospitals, urgent care facilities, community health centers, and ambulance care providers to provide training in the appropriate care and operation of the personal protective equipment and decontamination procedures (1 class at \$4,500);
  - First Responder Operations Train-the-Trainer course for 4 hospital health care workers to be trained in teaching the Awareness & Operations level courses (1 class at \$2,000). This training is cost effective in that it will allow these health care workers to regularly provide future training to their employees and others in the healthcare community (this course is required as an annual refresher and to new employees) without having to spend additional funding to hire an outside vendor to do this every year;
  - Incident Command System (ICS) 100 and 200 level training for 50 healthcare workers from SLO Ambulance, Cambria Community Health Care District and the Public Health Department (1 class at \$1650) to learn the appropriate emergency response organization and system in which they will respond during an emergency; and
  - ICS-300 level training for 10 healthcare workers form SLO Ambulance and Cambria Community Health Care District to learn the appropriate emergency response organization and system in which they will respond during an emergency (1class at \$550).
  - Strategic National Stockpile/Mass Prophylaxis Plan training and tabletop exercise for 60 public health care workers from Public Health and other allied agencies (such as local law and fire agencies, General Services, Public Works, Office of Emergency Services, CalTrans, CalPoly) to familiarize them with the Plan and prepare them on how to respond to a public health emergency requiring mass prophylaxis or use of the Strategic National Stockpile (1 class at \$36,000)
- To ensure that the county's hospitals and ambulance companies are adequately equipped to protect themselves and care for patients in the event of a bioterrorism attack, the State has allotted funds (\$10,120) for the Public Health Department to purchase:
  - Ten Sure-Vent Disposable Ventilators for each of the 4 hospitals in the county (total of \$8800); and
  - One Mark 1 and Two AtroPen Nerve Agent Antidote Kits for Cambria Community Health Care District (total of \$1320).

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- To ensure reliable communications between first responders in the field and the hospital base stations, the State has also allotted funds (\$51,974) to the Public Health Department to reimburse hospitals and SLO Ambulance Company for the purchase of equipment and supplies, as follows:
  - Six pre-paid airtime cards (valid for 1 year) for the Iridium satellite phones at the 4 hospitals, MedStop Clinic, and the local Emergency Medical Services Agency (total of \$3270);
  - Base Station upgrades for SLO Ambulance Company and each of the 4 hospitals in the County, to include UHF 512 channel radio, desk microphone, base station module and power supply, VHF/UHF handheld radios and cases, batteries, antennas for handhelds and base station, antenna connectors and surge protectors, telescoping 20' H/D Mast and miscellaneous mounting hardware, Newmar Emergency Battery Cutover, portable Honda 4000watt generators. The total of this is \$48,704, broken down as follows:

Item	SLO Ambulance	Arroyo Grande	Twin Cities	French	Sierra Vista	Cost Each	
UHF 512 CH Radio	8	1	1	1	1	\$525.00	\$6,300.00
Desk Microphone	8	1	1	1	1	\$61.50	\$738.00
Base STN Module	8	1	1	1	1	\$30.00	\$360.00
Base STN Power Supply	8	1	1	1	1	\$123.75	\$1,485.00
VHF Handheld PKG	15					\$500.00	\$7,500.00
UHF Handheld PKG	15					\$512.50	\$7,687.50
Spare Battery	30					\$73.75	\$2,212.50
Spare Battery-Clam Shells	30					\$53.00	\$1,590.00
Antennas for Handhelds	30					\$10.00	\$300.00
Base STN Antenna	8					\$600.00	\$4,800.00
Low Loss Antenna Line	400					\$1.25	\$500.00
Connectors Antenna	16					\$8.00	\$128.00
Antenna Surge Protectors	8					\$80.00	\$640.00
Telescoping 20' H/D Mast	8					\$72.00	\$576.00
Misc. Mounting Hardware	8					\$30.00	\$240.00
VHF Handheld Pkg (CCHCD)	3					\$386.75	\$1,160.25
UHF Handheld Pkg (CCHCD)	3					\$399.25	\$1,197.75
Spare Battery	6					\$70.00	\$420.00
12V GEL Battery	8					\$210.00	\$1,680.00
Emergency Battery Cutover	8					\$126.15	\$1,009.20
Radio Cache Cases (Pelican)	6					\$185.00	\$1,110.00
Portobale Honda Generator	3					\$1,259.10	\$3,777.30
Sales Tax (7.25%)						\$3,292.33	\$3,292.33
<b>TOTAL:</b>							<b>\$48,703.83</b>

- The Public Health Department will utilize \$8900 to contract out for the following activities:
  - Installation of the above-mentioned communications systems for each of the 4 hospitals and 2 ambulance providers (\$8000); and
  - Purchase of the ReddiNet Renewal License (\$900). ReddiNet is a secure internet-based communications system used between health care facilities, emergency management and public safety agencies, emergency medical services, neighboring jurisdictions, and with State and local health departments to ensure communications connectivity during a terrorist incident or other public health emergency.

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- The State has allotted \$13,373 for fiscal agent costs to help off-set the administrative staff costs incurred by the Public Health Department providing program oversight and monitoring, review and submittal of required invoices and reports, and other administrative activities. It is not necessary to include this fiscal agents cost in the budget adjustment because the Public Health Department will be using existing salary savings.
- The table below should help summarize the items described above.

2005/06 HRSA Grant					
DHS-Purchase			Non-DHS Purchase		
Amount	Equipment/Service	For	Revenue Amount	Equipment/Service	For
<b>\$35,885</b>	<b>Surge Capacity Equipment</b>	Hosp, ambulances, MedClinics	<b>\$49,990</b>	<b>HRSA Coordinator</b>	
\$7505	Personal protective Equipment – masks, booties, coveralls, etc		<b>\$44,700</b>	<b>Training &amp; Exercises</b>	Hospitals, Ambulances, MedClinics, CHCs, PHD
\$17,970	Air purification systems		\$4500	FRA class	
\$4170	Negative Pressure Isolation kits		\$2000	Train-the-Trainer class	
\$4740	Replacement Modular HEPA filters		\$1650	ICS 100/200 class	
\$1500	Replacement pre-filters		\$550	ICS 300 class	
<b>\$4284</b>	<b>6 Satellite Phones</b>	Hosp, MedCenter, EMSA	\$36,000	SNS Plan training & Tabletop Exercise	
<b>\$56,161</b>	<b>First Responder Pharmaceutical Cache</b>	PHD/CHC	<b>\$10,120</b>	<b>Responder &amp; Patient Protection</b>	
			\$8800	Sure-Vent disposable ventilators	Hospitals
			\$1320	Nerve agent antidote kits	Cambria Healthcare District
			<b>\$51,974</b>	<b>Comms Equipment</b>	
			\$3270	6 Satellite Phones 1-year Airtime service cards	Hosp, MedCenter, EMSA
			\$48,704	Base Station Upgrades	Hosp, Ambulances
			<b>\$8900</b>	<b>Contract Services:</b>	
			\$8000	Comms Equip Install	Hosp, Ambulances
			\$900	ReddiNet	EMSA
<b>TOTAL Amount paid by CDHS = \$96,331</b>			<b>TOTAL Revenue to PHD = \$165,684</b>		

The California Department of Health Services (CDHS) has decided not to directly purchase two TACPAK Mobile Command Centers, as was previously agreed to in the 2004/05 HRSA Grant. The Public Health Department will reimburse the local ambulance companies for their purchase of the TACPAK's. A discussion on this follows:

- Originally, the 2004/05 HRSA Grant Agreement included two TACPAK Mobile Command Centers to be directly purchased by CDHS for each of the local area ambulance companies (SLO Ambulance and Cambria Healthcare District). The TACPAK Mobile Command Center is a portable, redundant data communications center (includes a computer, printer/copier/fax, digital camera, GPS, cellular data link, and satellite phone) that provides necessary redundant data communications to their command vehicles for use in the field during an emergency.

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- After the grant agreement had been signed, CDHS changed to another vendor that did not carry the TACPAKs. As a result of this change, CDHS could no longer directly purchase this equipment and must now be purchased by the local ambulance companies from another vendor. The local area ambulance companies will each be purchasing their own TACPAK Mobile Command Center, and the Public Health Department will be reimbursing them for their purchase, utilizing the 04/05 HRSA Grant funds. This expenditure is already approved by CDHS; it has just been transferred from the Grant's DHS-Purchased Equipment line item to the Non-DHS Purchased Equipment line item.
- Since each TACPAK is in the amount of \$15,000, a budget adjustment must be made in the amount of \$30,000 due to unanticipated revenue from the 2004/05 HRSA Grant.
- The table below should help illustrate the items described above for the 2004/05 HRSA Grant:

2004/04 HRSA Grant		
Non-DHS Purchase		
Revenue Amount	Equipment/Service	For
\$15,000	TACPAK Mobile Command Center	SLO Ambulance
\$15,000	TACPAK Mobile Command Center	Cambria Healthcare District
<b>TOTAL Revenue to PHD= \$30,000</b>		

Other Agency Involvement/Impact

The San Luis Obispo County EMS agency is involved in coordinating receipt of all equipment with the hospitals. The Public Health Department, County EMS Agency, the four hospitals (Sierra Vista Regional Medical Center, French Hospital, Arroyo Grande Community Hospital and Twin Cities Community Hospital), urgent care facilities, and Community Health Centers, and ambulance care providers have coordinated with the Department and the State. County Counsel has approved the agreement as to form and legal effect.

Financial Considerations

The HRSA Year 3 (04/05) agreement with the Public Health Department was budgeted in the amount of \$166,991. The Board approved the allocation in August 2005. These funds were not included in the Public Health Department original 05/06 adopted budget.

The County Public Health Department acts as the fiscal intermediary agent for the attached HRSA Year 4 agreement totaling \$275,388. Of this amount, the Public Health Department retains \$179,057, which will be utilized to coordinate a contract for a HRSA Coordinator, required emergency preparedness & response training, and tabletop exercise; reimbursement for purchases of disposable ventilators, nerve agent antidote kits/Atropen auto-injectors, and communication systems (base stations, radios, and satellite phone prepaid service agreements) and installation; and for the renewal of the Public Health Department's ReddiNet Contract. A budget adjustment in the amount of \$195,684 is requested; \$165,684 from unanticipated revenue to fund HRSA Coordinator, required training, communication systems, and ReddiNet license renewal; \$30,000 from the 04/05 Health Resources and Services Administration (HRSA) Bioterrorism Hospital Preparedness Program Grant for the Public Health Department to reimburse the purchase of two TACPAK Mobile Command Centers. The Public Health Department will be using existing salary savings to fund the fiscal agents cost of \$13,373.

The remainder amount of \$96,331 will be utilized by the State Department of Health Services to directly purchase pharmaceutical cache for the 4 hospital pharmacies, as well as equipment and supplies [personal

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protective equipment, negative air pressure systems, communication systems (satellite phones) on behalf of the local area's 4 hospitals, 4 urgent care facilities, 10 community care centers, 9 skilled nursing facilities, 2 ambulance providers, and Public Health Department (there will be no General Fund money spent on the HRSA Renewal Agreement).

## Results

In the HRSA Year 3 Grant (September 1, 2004 – August 31, 2005), the Public Health Department was able to increase the preparedness and response capability within the County to accommodate the triage, treatment and disposition of 500 patients during a chemical, biological, radiological, nuclear or explosive (CBRNE) terrorist incident through coordination with State for the following HRSA Year 3 Grant activities:

- (1) Purchased personal protective equipment (PPE) to protect healthcare workers, such as protective coveralls, batteries, battery chargers, and cartridges for the Powered Air Purifying Respirators (PAPRs) for each of the 4 local area hospitals,
- (2) Purchased trailers to store the PPE and other response/decontamination equipment for 3 of the hospitals (1 was already equipped with a trailer), and for the Public Health Department to store equipment and supplies for emergency vaccination/prophylaxis clinics;
- (3) Purchased equipment and supplies to support the emergency vaccination/prophylaxis clinics, such as biohazard bags, caution tape, gloves, N95 respirators, safety vests, cots, blankets, traffic delineators, megaphone, extension cords, flashlights, outside shelter, coolers, and storage containers;
- (4) Purchased response and mass casualty equipment, such as 4 generators for the 4 urgent care facilities, and hospital response kits, treatment area flags, mass casualty O2 manifolds for each of the hospitals;
- (5) Purchased equipment and supplies necessary for the operation of the decontamination shelters (water heater, waste water pump, hose and sprayers, transfer boards, berms, light fixtures, air heater), and pre-and post-decon personal privacy kits for each hospital to manage 500 patients in the event of a CBRNE incident;
- (6) Purchased satellite phones with 1 year airtime service for each of the County's 10 Community Health Centers, 9 Skilled Nursing Facilities, and 3 of the urgent care facilities;
- (7) Purchased Universal Porta Count Fit Test Systems (to ensure proper fitting of the N95 respirators) for each of the 4 local area hospitals;
- (8) Purchased specialized training for 120 healthcare workers at the hospitals, clinics, ambulance care providers, and Public Health Department in the County on the use of the PPE and decontamination procedures at the First Receiver Awareness, First Receiver Operations, and First Receiver/HazMat First Responder Train-the-Trainer course levels;
- (9) Coordinated and participated in a bio-chemical terrorist disaster exercise in November, along with the California Department of Health Services, hospitals and first responders within the local jurisdiction, and the California National Guard's Weapons of Mass Destruction Civil Support Teams;
- (10) Renewed the ReddiNet License to ensure continuation of a redundant communications and connectivity capacity.

Approval of the 04/05 HRSA Grant budget adjustment will allow for the purchase of two TACPAK Mobile Command Center for each of the local area ambulance care providers, which will provide them with an instantaneous and robust portable incident command system, ensuring better preparedness and response efforts that will benefit the public's health and welfare during a public health emergency.

Approval of the 05/06 HRSA Year 4 Grant Agreement (September 1, 2005 – August 31, 2006) will provide: (1) public health emergency training for 94+ health care workers from the County's hospitals, urgent care facilities,

community care centers, ambulance providers, and Public Health Department; (2) increased capability to accommodate the triage, treatment and disposition of 500 patients during a biological, chemical, radiological, or explosive terrorist incident; and (3) improved redundant communications systems at the hospitals, urgent care facilities, community health centers, skilled nursing facilities, and ambulance providers within the County. Doing so will ultimately help ensure the safety and interests of the County and its citizens are met through increased hospital and emergency medical system preparedness for response to acts of terrorism and non-terrorist incidents.

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