

#### Agenda



- Welcome from FEMA Office of Emerging Threats (OET) ROSS Program Manager Jon Gill, PhD and Jeramie Calandro, FEMA ROSS Program Manager
- Welcome from CRCPD ROSS Program Manager Bill Irwin, ScD, CHP, FEMA Type 1 ROSS
- The State Support Section Report Juan Garcia, California
- The ROSS Advancement Section Report Amy Hass, Minnesota
- The Records Management Section Report Stephan Brown
- Project STORRM Report Angela Leek, PhD, CHP, Type 1 ROSS
- Topical Training: ROSS and Community Reception Centers Nancy Stanley, New Jersey
- Closing Remarks FEMA OET







FEMA Office of Emerging Threats
Welcome and Opening Remarks
Jonathan Gill, PhD and Jeramie
Calandro, FEMA ROSS Manager



Source: GAO. I www.gao.gov

https://www.gao.gov/products/gao-19-164 accessed 2/23/23.

### **FEMA OET Updates**

- Federal Funding Hiatus
  - □ Thank you CRCPD
  - Contingency Options-SOP
  - Updating MissionEdge
- ROSS Trainings
  - □ RESRAD for all ROSS
  - □ EMAC 101 for ROSS State Coords/AHJs
- Program
  - Analysis of FEMA Program Documents





Bill Irwin, ScD, CHP, FEMA Type 1 ROSS, CRCPD ROSS Program Manager





Questions? william.lrwin@vermont.gov





- This is the second federal government shutdown over the course of the ROSS Program, and both have been challenging.
- FEMA OET is developing a plan to help if another funding hiatus occurs, which is possible as soon as 30 January.
- It reinforces our efforts to:
  - Help states develop their ROSS organizations so they can work more independently with the help of the CRCPD organizations.
  - Evaluate where the CRCPD must develop or extend State ROSS Program support capabilities.







#### **Important Developments Since September**

- Focused development of a plan for teaching four to five offerings of the CDC Public Health Decision Making in a Nuclear Detonation Course.
  - More to come from Amy Hass of Minnesota shortly.
  - It is critical to efficiently take advantage of the CDC funding for this in fiscal year 2026.
  - Everyone involved will enhance their abilities to help our nation prepare for, respond to and recover from a nuclear detonation.
- The ROSS Advancement Section is managing this with a new task force.

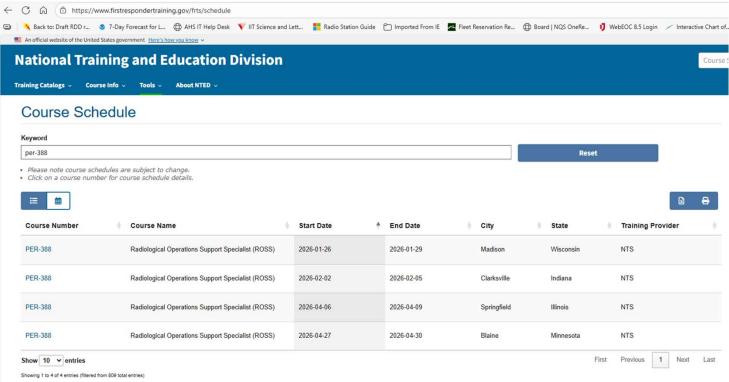


#### Other Work by Our ROSS Advancement Section

- Helping the jurisdictions hosting the ROSS Initial Training Course PER-388.
  - Hosting these Counterterrorism Operations Support (CTOS) classes is complicated.
  - Among other things, Dr. Mark Maiello of New York uses past course hosts to help the new course hosts.
  - Our goal is to get as many good ROSS candidates into the training as possible to our classes.
    - Includes health physicists, radiation control program and emergency managers from government, radiation safety officers, medical physicists, reactor radiation protection managers, and hazardous materials, fire service, EMS and other first responders.
- Leading our effort to develop training for our Quarterly Calls and other continuing education in 2026 and beyond.



#### **Upcoming PER-388 Offerings**





# While I Am Thinking of It, I Want to Thank the ROSS Who Support CTOS Who Provides the First Building Block to Becoming a ROSS

We are fortunate to have numerous ROSS who teach or have taught the Initial ROSS Training Course PER-388:

Bobby Baker of Texas
 Toni Bamford of Oregon

Jeff Day of California
 Greg Funderburk of California

Bill Irwin of Vermont
 Angela Leek of Iowa

Matt McKinley of Kentucky
 Tanya Ridgle of California

We hope to keep senior ROSS like these folks leading the instruction in this initiating step into the ROSS profession!



# The State Support Section Has Been Working Diligently to Empower the State AHJs and SRCs

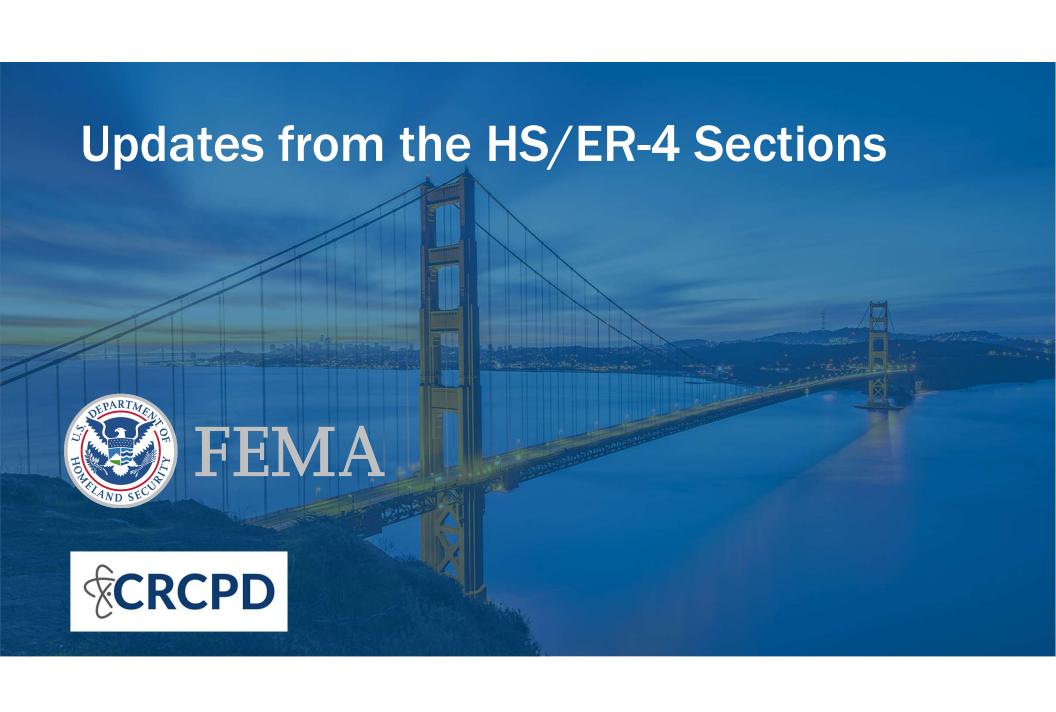
- The State Support Section has delivered multiple trainings for the state Authorities Having Jurisdiction (AHJ) and State ROSS Coordinators (SRCs).
- More to come from Juan Garcia of California shortly.
- The most important element of this work is hearing from the different states.
- Another essential part of the process is continuously demonstrating how MissionEdge makes ROSS Cadre Management more efficient.
- The next call for AHJ/SRC is planned for 16 January at 1400-1530 Eastern time.



#### **ROSS Continue Advancement!**

- The Qualification Review Board (QRB) met this month to evaluate the Type 2 Position
   Task Book and documentation for Chris Salz of Ohio.
- The QRB is happy to recommend that the AHJ, Bill Loehner of Ohio, that Chris be advanced to Type 2.
- The MissionEdge Workflow has already been processed to document the QRB recommendation and we find MissionEdge to be very efficient for us.
- These QRB meetings are wonderful occasions for the ROSS Program!
- We hope more of you take the time to document your extensive and valuable experience, training, and education to complete tasks and to submit completed PTBs for advancement by type.



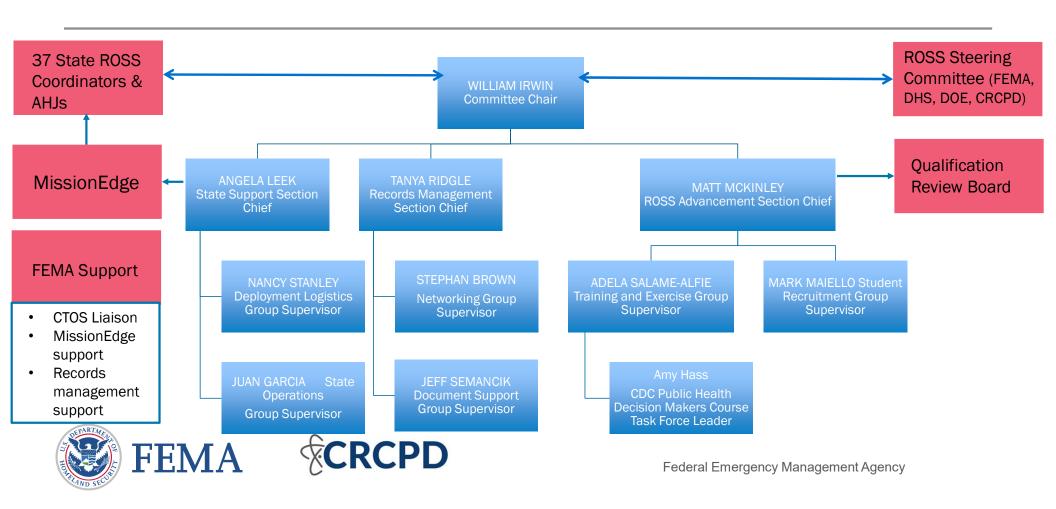


#### Before We Hear From Our Future Leaders Themselves - Introductions:

- We have shared the organization chart below multiple times over the past year.
- This is one of the best developments in our ROSS Program
  - It is exciting to have these solid people who are volunteering so much time and expending so much effort to help our profession.
  - It is essential to our success in delivering the services required of the ROSS as professionals.



### **CRCPD HS/ER-4 Organization Chart**





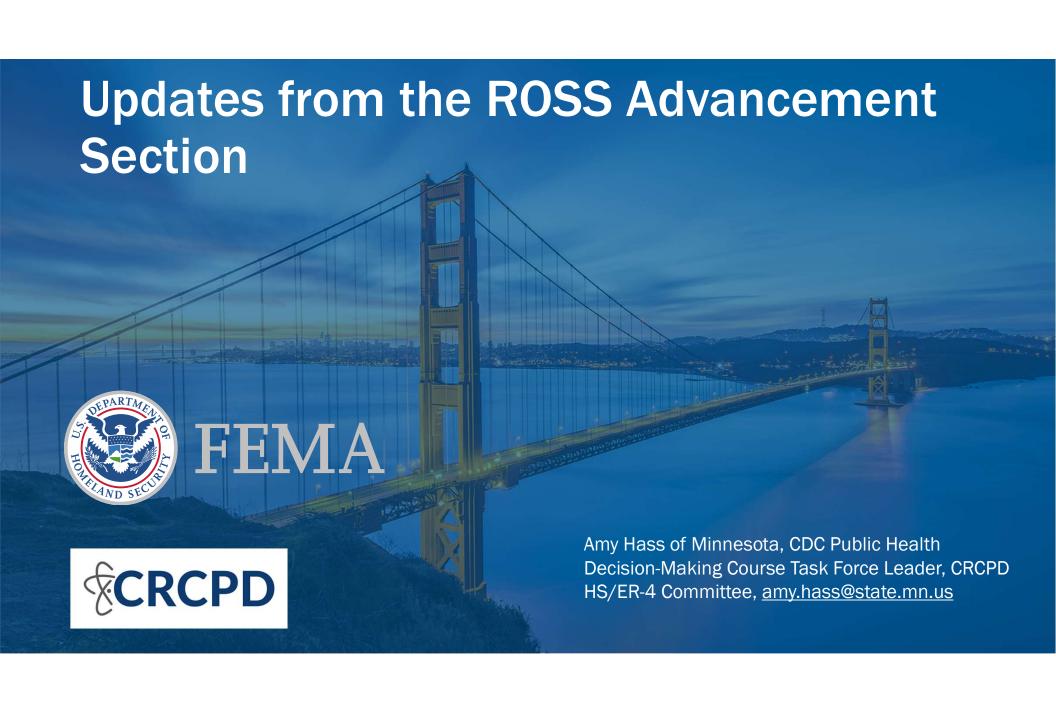
#### State Support Overview from Juan Garcia, California State ROSS Coordinator

- Cadre Management
- Deployment
- Event logging
- Plans to incorporate ROSS
- PTB completion road map
- How to upload to ME
- Outreach to partners on using ROSS

Recent development: Separate State AHJ/SRC meeting







## MN ROSS EMAC Experience

 Created Mission Ready Package (MRP) based on CRCPD HS/ER-4 Committee Document and links

#### ROSS-EMAC-MRP-Job-Aid-Final-V1.0-rev-1.pdf

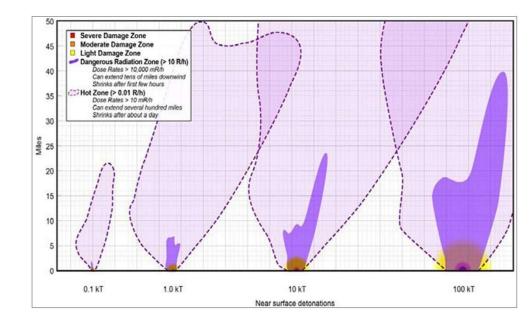
- As State ROSS Coordinator, found MN State EMAC Coordinator from Homeland Security and Emergency Management (HSEM) organization
- State EMAC Coordinator uploaded MRP to MASS, the system where EMAC is accomplished
- Working with other state ROSS in other organizations to create their MRP





## CDC Public Health Decision Making in a Radiation Emergency Course

- From 18 Train the Trainer ROSS, 4-5 ROSS Instructors
   will deliver each course with 30-35 max attendees
- Limited by funding for travel for instructors (3-5 courses in 2026) depending on funding
  - February 10-12 in Frankfurt, KY
  - May in Middlesex County Fire Academy Sayreville,
     NJ
  - Late July to early August with the New England Radiological Health Compact
  - August 4-6 in St. Paul, MN
  - Texas newest request (UT Medical Branch and Harris County)







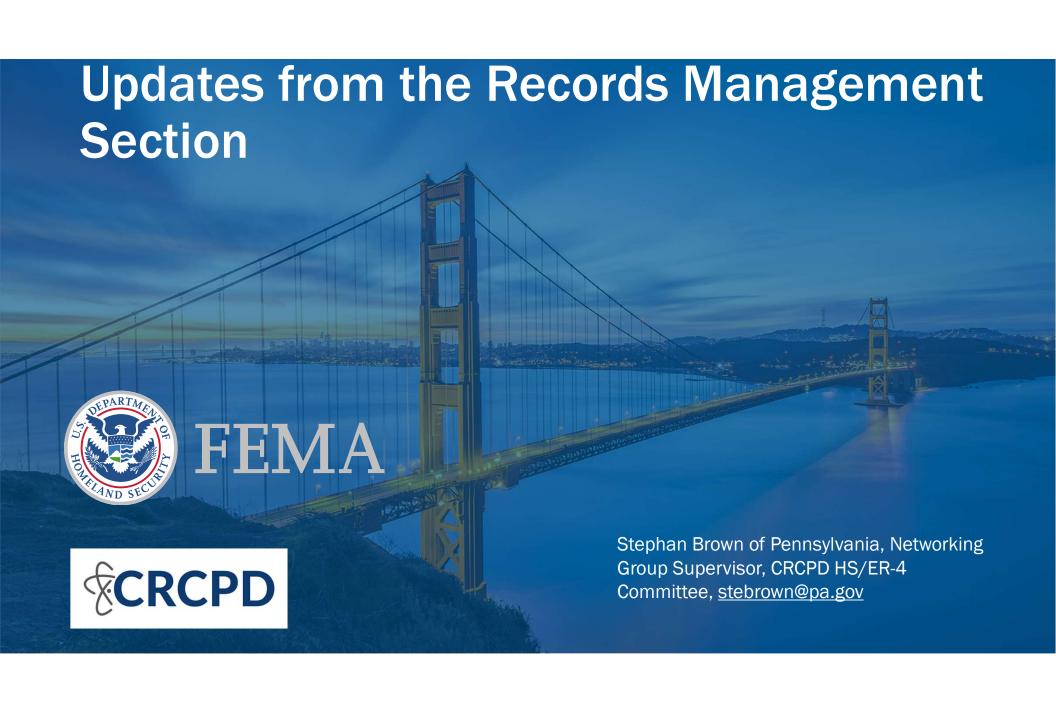
# Logistics

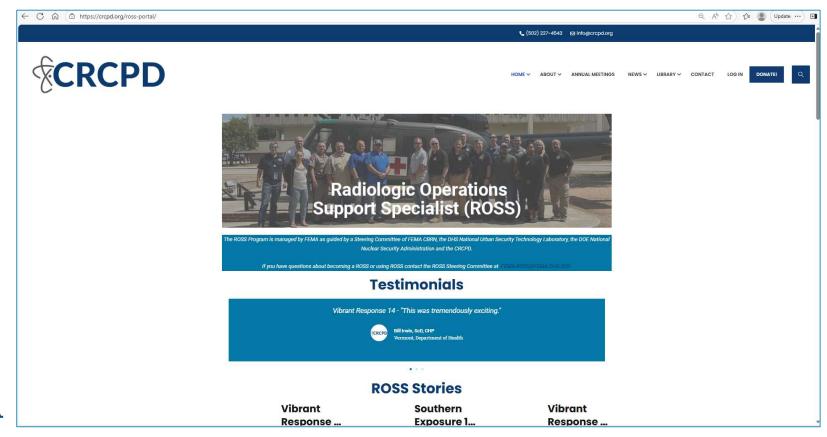
- Host POC
- Designated Room reserved Mon-Thur with Course Tue-Thur
- Host location prints 3-ringed manuals and handouts for 30-35 participants
- Availability to either provide working lunch, or easy individual order/delivery of lunches
- CRCPD ships box to/from POC for course instructors
- HS/ER-4 provides course flyer, files to print, and assistance with registration



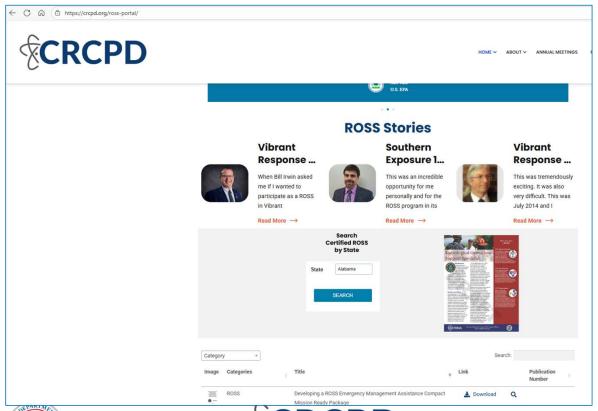












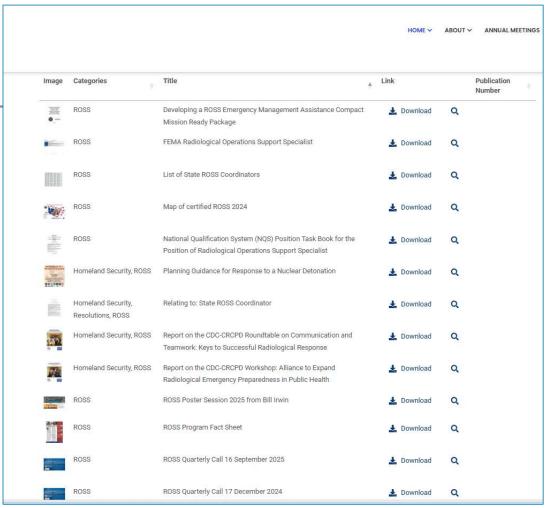
Share yours with <a href="mailto:stebrown@pa.gov">stebrown@pa.gov</a>.





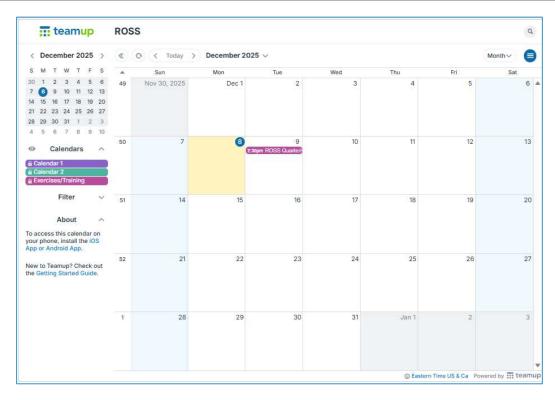
Our ROSS Library.

Share suggestions with <a href="mailto:Stebrown@pa.gov">Stebrown@pa.gov</a>.







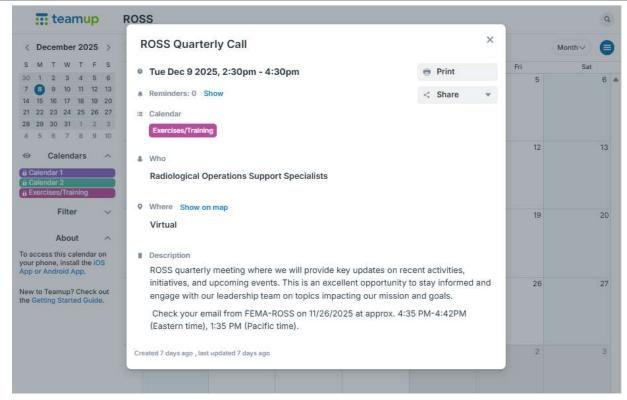


Our calendar.

Please share events with us (<a href="mailto:stebrown@pa.gov">stebrown@pa.gov</a>) to get them posted.











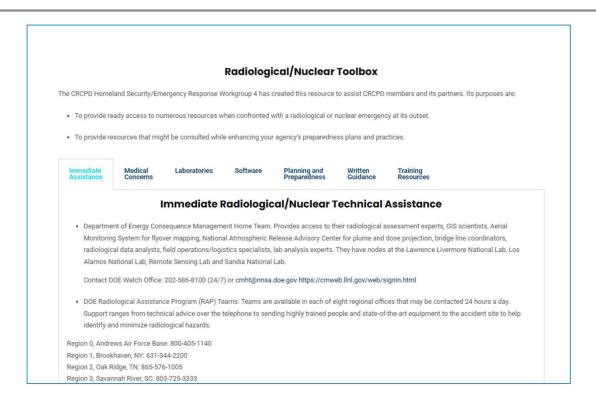


A link to our YouTube Channel





One of our earliest toolboxes is still maintained here.



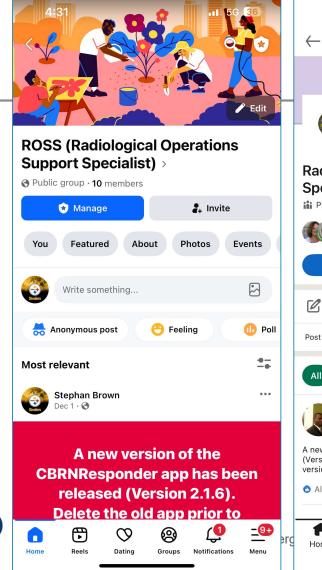


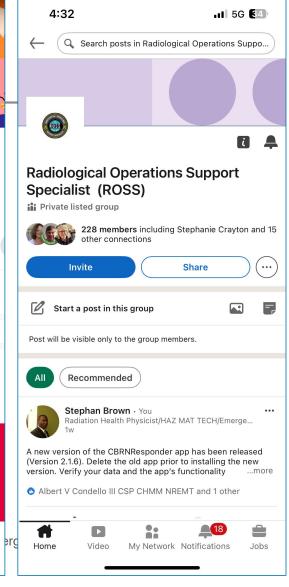


Our ROSS Facebook and LinkedIn pages













# Project STORRM 2025: Operation First Light

Simulation and Training for Operational Radiological Response Management



Recap for ROSS December 2025



## Introduction to the Exercise Series



This was the inaugural event in a recurring radiation preparedness exercise series created and delivered by Radiation Emergency Services and Quantum Radiation Solutions.

(No Federal sponsorship or play)

The intent was to provide a "no-fail" zone for interested response partners and jurisdictions to practice procedures, leveraging technology, and coordination.

This iteration focused on a low probability, high consequence nuclear detonation scenario.

Over several days, participating organizations explored key considerations for responding to a 10 kT nuclear detonation, including evolving fallout, ground monitoring challenges, public protection decisions, and interagency coordination.





## Participating States (Including Exercise Support & Players)



#### Project STORRM 2025 Operation First Light

#### PREDICTED EXTENT OF RADIATION IMPACT

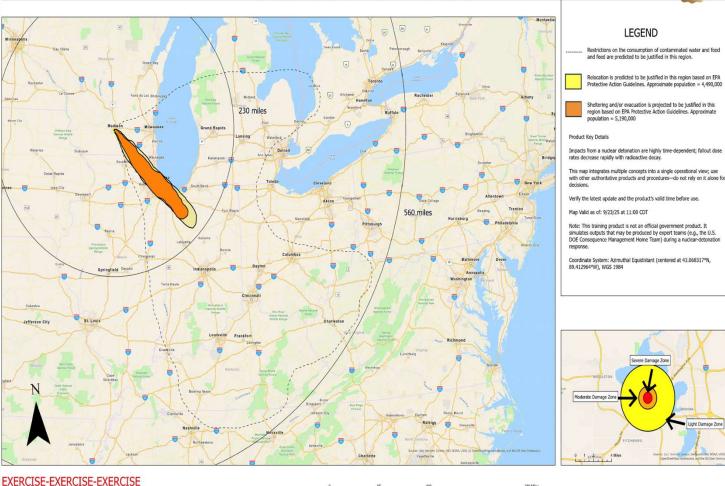
Areas of Concern Over Time
Based Only on Model Data
No Measurements are Included in these Predicted Impacts



#### Exercise Scenario:

10kT Nuclear Detonation Surface Burst

Madison, WI



## Simulated Field Activities using RadTeamSim.Route









# RadTeamSim.Route

Health Impact	Above the range of normal, everyday radiation levels, but no health effects expected (US CDC Hazard Category 2)							(syr	nptoms	k of cancer later in Ufe may take decades to DC Hazard Category 3)	Increased risk of radiati is not likely (symptoms days) (US CDC Ha	Death may occur in days to weeks (U			
External Dose (mR) <sup>1</sup>	0	0.01	0.1	10	1,000	5,000	10,000	20,000	50,000	100,000	150,000	200,000	300,000	600,000	1,000,000
This Mission Simulation Result	<b>PROPERTY</b>														

<sup>(1)</sup> Health impacts in this comparison only include external exposure to radation

<sup>(2)</sup> CDC suggested dose guide for category 4 is 1 Gy/114,025, and for Categroy 5 is 2 Gy/228,050mR

Responder Mission Summary							
Mission Report File Name	STORKM Training Network Wide_wandy_Mission_D-09-11-25_T-06-4 00						
Event Name	STORRM Training Network Wide						
Responder First Name	Wendy						
Responder Last Name	Renno						
Field Team	Alpha						
Mission Duration	00:20:58						
Highest Dose Rate Encountered	30.10 R/h						
Total Dose Received	823.30 mR						
% Of population that could experience nausea/vomiting within 4 hours	ø						
Predicted Health Impacts	None						
Dose Comparison	Mamogram						
Dose Comparison Value	18 mR						
Reference	ESC, Aggerdia A, COP Seport No. 188 - Medical Belletion September of Patients to the Section (2013)						



**Dose Rate Graph** 

**Exit Simulation** 





## Themes Identified



There is a need for access to actionable, decision-ready data products - particularly those supporting plume modeling, population exposure estimation, protective action planning, and field monitoring integration.



There is value of complementary simulation tools (e.g., RadResponder, Mission Edge, RadTeamSim) for training and cross-system interoperability.



The importance—and inherent complexity—of validating data across multiple jurisdictions.



The operational challenges posed by real-world decision timelines, communication pathways, and technical constraints test both coordination and technology integration.





# Key Actions for Nuclear Detonation



- Initial message is critical Go Inside, Stay Inside, Stay Tuned
- Ensure responders in the DRZ stay inside during first 12-24 hours
- Initially shelter populations in a 50-mile radius around blast





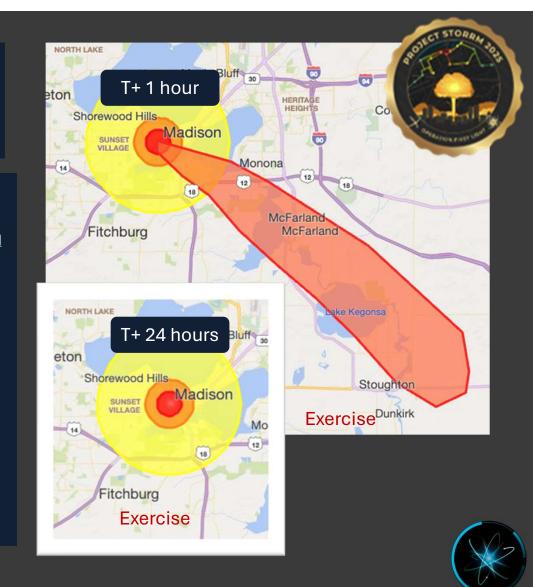






# Nuclear Detonation

- Evacuation of those sheltered in the DRZ should be priority at 24-48 hours
  - Those sheltered in high radiation zones may have accumulated nearly 50 rem or higher by leaving them sheltered instead of evacuating after the initial 12-24 hours had passed.
- Higher doses must be considered for emergency workers and lifesaving
  - 50 rem or higher
- Supporting jurisdictions should be prepared to offer assistance and resources to the impacted jurisdiction
  - Balance need to retain radiological resources in areas where deposition will continue to fall but will be below the hot zone levels



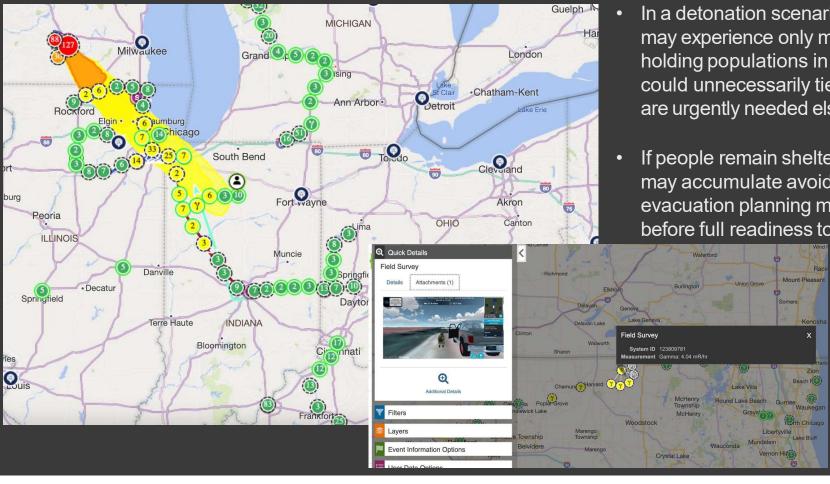


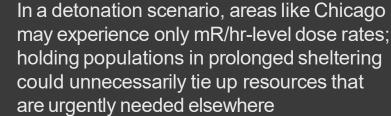


- Once we know where fallout is headed (projection models)
  - Extend shelter to those in projected DRZ and hot zone
  - Consider releasing populations in 50-mile ring without fallout to assist with response – may not have time for extensive measurements
  - In areas exceeding EPA PAG of 1-5 rem do not use typical shelter in place
    - Could be adjusted to be limited activities, but still get resources and provide support
    - Need to ensure those resources are available for response



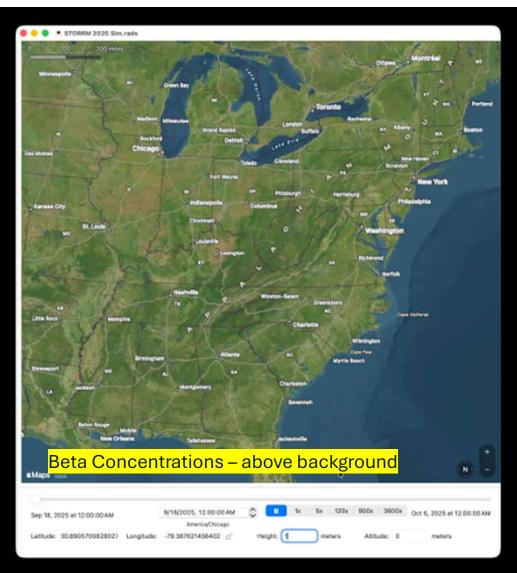
## Critical Differences between NPP and NuDet

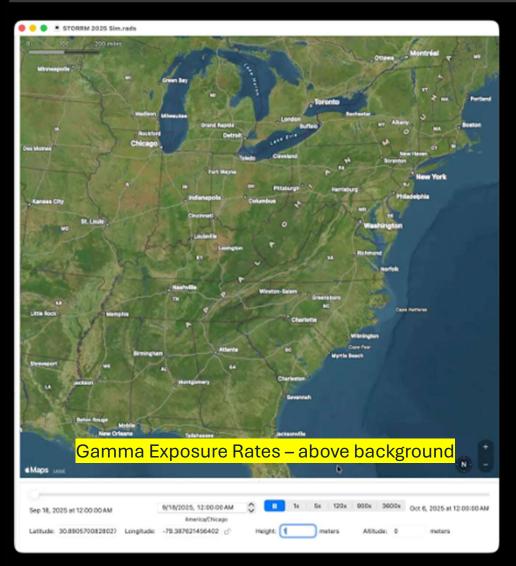




If people remain sheltered for too long, they may accumulate avoidable dose; phased evacuation planning must begin early, even before full readiness to execute







Video representations developed by Lokahi Enterprises - <a href="mailto:eric@lokahi.enterprises">eric@lokahi.enterprises</a>



# Some Key Takeaways



- The planning guidance gives basis for critical plan adjustments that can address nuclear detonation response
- Public reaction, policy decisions, and economic pressures will have influence,
  - However planning now can ensure initial actions can occur so those discussions do not delay critical actions that MUST happen in the first hours/days to save lives.
- We should try to get data from anywhere we can (fire stations, EPA RadNet)
  - Field missions may be difficult due to damage/response challenges and limited resources
- There will be more data than we can manage a plan to address review of the data is key – Many ROSS will be needed
- Coordination across priorities from Incident Command to Data Validation to Field Teams is vitally important

## **Exercise Staff**





We are grateful to these dedicated colleagues who are sharing their expertise, time, and energy to make this exercise a success.

Your commitment, leadership, and volunteer spirit drive strong national preparedness.

Bill Irwin

Chris Moore

Roy Renno

Craig Marianno

Sonia Carpena

Amanda Hughes

**Dustin Willett** 

Jessica Weider

Adela Salame-Alfie

Linda Wendt

Brendan Palmer

Ken Yale

Matt McKinley



#### **Overview**

- Definition of a community reception center (CRC)
- Roles and Responsibilities of a CRC
- Items of note
- ROSS integration opportunities
- My experiences
- Available resources
- Q & A and Discussion







#### What is a Community Reception Center?

A Community Reception Center (CRC) is an established location where population monitoring and wash/decontamination occur following a radiation emergency or incident. Population monitoring services include, but are not limited to:

- •Surveying members of the public for radioactive contamination;
- •Wash/Decontamination of external radioactive material from people, service animals, and pets;
- •Establishing an exposure registry to track long-term health effects.

Radiation incidents for which a CRC could be activated may include/involve nuclear power plants, radiological dispersal devices, improvised nuclear devices/detonations, transportation accidents, and industrial accidents involving radioactive materials.

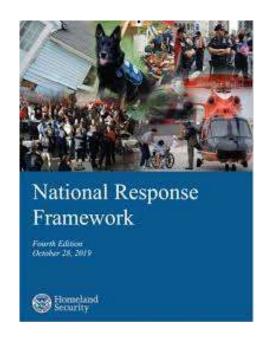






#### Responsibility

- After a major disaster it is the public health workers who are called upon to assist in a coordinated response.
- ESF 8 Public Health & Medical Services
- Decontamination & population monitoring is "accomplished locally and is the responsibility of State, Tribal, and local governments." (www.fema.gov/emergency/nrf)







#### **Key Elements of Population Monitoring**

Providing a mechanism for monitoring & evaluation after a radiation emergency:

- Determine need for medical treatment
- Finding contamination on body or clothing
- Identifying internal contamination
- Removal of external contamination
- Assessment of radiation dose and health risk
- Tracking for long term health effects







#### **Facility Considerations**

Facilities or sites in the community being considered for use as CRCs should be assessed on the following characteristics (not a complete list):

- Size
- Location
- Restroom facilities
- Shower rooms or facilities
- Accommodations for people with disabilities
- Environmental controls (heat & air conditioning)
- Adequate access and exit control

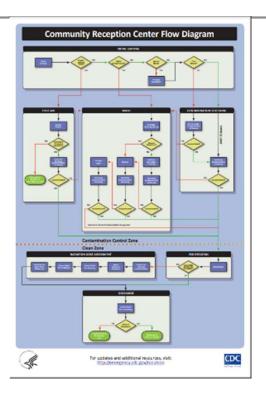


Population Monitoring in Radiation Emergencies, 2<sup>nd</sup> Ed. CDC, April 2014





#### Going with the Flow



- There are many ways to set up the "flow" in a CRC
- May be adjusted for specific needs/scalable
- Dependent on location







#### There are a <u>lot</u> of moving parts

- Registration
- Preliminary screening (outside)
- Screening
- Dose assessment
- Decontamination (people & pets)
- Mental health services
- Vulnerable populations
- Access & functional needs
- Translators
- Staffing!











#### **Some Things to Note**

- Setting up a CRC is incredibly complex
- It can be the most difficult aspect of a response because it's so hard to get enough people to staff it, let alone staff it with enough rad folks
- You are also dealing with "concerned citizens"
- Could be open for weeks
- What if another public health emergency occurs?







#### Some of the Roles that a ROSS Can Fill

- Provide just in time training
- Survey instrument troubleshooting
- Facility setup (portal monitors)
- Dose assessment/tracking
- Assist the RSO, or act as RSO
- Work side by side with mental health professionals to answer radiation related questions raised by members of the public
- Exercise controller/evaluator









#### **Some Personal Experiences with CRCs**





#### Experience:

- Participation in large scale exercises such as Gotham Shield (2017)
- Participation in several smaller scale exercises
- Led training, assisted with planning
- Evaluated exercises

#### **Observations:**

- Radiation SMEs welcomed with open arms ©!
- Can get spread thin quickly

#### As a ROSS What Can We Do to Prepare?

- Get to know which agency is responsible for running CRCs in your state/region!
- Do they have exercises?
- What is their written plan?
- Review the CRC resources on the CDC's web site
  - they're excellent!







#### Resources

If you only look at one thing, this should be it:

Population Monitoring in Radiation Emergencies: A Guide for State and Local Public Health Planners, April 2014, Radiation Studies Branch, CDC (Part of the CDC's Toolkit - <a href="https://www.cdc.gov/radiation-emergencies/php/toolkit/index.html">https://www.cdc.gov/radiation-emergencies/php/toolkit/index.html</a>)

Population Monitoring in Radiation Emergencies
A Calde for Stree and Local Public Health Planners

populations

spaces









#### **Questions & Discussion**







#### Thank you for your support of the ROSS Program!

Our next call will be in March 2026!

Contacts: <u>FEMA-ROSS@FEMA.DHS.GOV</u>

