Critical Infrastructure

Resource	S/W	Comments
People	S	• Key personnel are available for the CI assessments needed since 911. • COG NCR CIP committee was established to address issues related to infrastructure protection. • Utility personnel have expertise and experience in emergency response. • Groups like utility companies and hospitals historically give priority to SNP.
	W	• Hospitals, dispensing centers, and medication caches need increased personnel with arrest powers and security abilities. (6) • Need more staff for CIP such as regional cyber security and the NOC. (4) • Need funding to sustain CIP at NCR. (2) • Need to better engage private sector. (2) • Lack of ability for NCR emergency responders to utilize existing metro CCTV capabilities. • Need to include SNP in the decision making process because they are more vulnerable by the loss of critical infrastructure. • Need to integrate non-profit CIP leads into the NCR. • Hospitals should be classified as "Critical Infrastructure." • Need a critical infrastructure program in DC.
Equipment	S	• Radio cache can restore communications on a limited basis
	W	• NCR needs to ensure back-up power generation both mobile units and for major facilities (8) • Hospital security and hardening needs to be emphasized so hospitals don't close as a result of an emergency (4) • We need back up systems to support communications (2) • NCR has single points of failure that could lead to system wide breakdowns; need redundant control capability and enhanced monitoring systems. (2) • Need to secure server and cache sites (2) • Single point of communication failure in DC metro radio station (2) • Single points of failure are known to be taken care of (need common secure analysis) • We are vulnerable because of our cyber-security weaknesses

		• Resources are not available in a critical time; need more stockpiles, etc. • Need back up systems to support transportation requirements • Inventory of existing equipment and supporting fuels. • Need to secure network ops center • Lack of CBRNE detection equipment • Lack of equipment/system mitigation (hospitals) • Lack of reliable communications in the metro system • Lack of sufficient resources to mitigate and restore CIS-metro • Need standardized software program for risk assessment and threat assessment • PLOSN need critical infrastructure, power, transportation, emergency healthcare, etc., more that non-disabled populations, especially if they used equipment like power wheelchairs, accessible communication devices, dialysis equipment, etc. • Standardized assessment tools • Standardized protection tools • Secure equipment and information exchange • PCJJ certification for NCR • Trucked radio system outage at risk • Lack of ability to reconstruct a system that has been lost • Information protection • Fusion/analysis center • Databases • "Acams and Ramcap" • VDOT smart traffic center software platform, computer hardware, etc, are all legacy equipment and in need of replacement, before the region can be effectively integrated. New software systems would enable us to more effectively and efficiently, identify incidents, verify situations, form response, deploy right resource, inform road users, etc. • Need more protective equipment
Training	W	• Lack of comprehensive NCR training program for METRO system (2) • Regional training in infrastructure protection including dams aw well as electrical or water supply • Management level understand what ability is their (capability); communication resources • Need training of facility staff on roles and responsibilities degree of force – and legal issues

		surrounding protection • Regional assessment training • No set regional training piece • Training of critical infrastructure personnel needs to include the needs of PLOSN, especially the higher risks they face with loss of power, transportation, and other critical infrastructure. • Need to standardize the risk assessment process between feds, state and local • Need for enhanced reliability of existing communications capability in transit tunnels both for first responders and train operations • Joint communications training with Red Cross techs and other communications techs. • COOP training for key VOAD organizations • We do not train private sector folks who are responsible for critical facilities • Create and implement a test plan • The NCR has trained for natural and man-made events, but the consequences of losing power, water, communications, transportation are unclear • Fortify energy responders with the appropriate training. Establish a minimum level of training for ESF-12 respondents on ELD's in all jurisdictions in NCR • Need integration with law enforcement to have response teams to protect "critical" buildings
Exercises/Evaluation	W	• Need exercises to perform recovery/restoration exercises with emphasis on decontamination, communication, etc. (4) • Need an exercise/evaluation component (3) • Need to practice responses, evacuations, shelter in place, etc. • Unsure as to whether we can prevent water born attacks • Have not exercised a communication failure • Need more exercises on targeting • Need exercises to take into account people with special needs • Lack of PPE training and exercises (hospitals) • Need to exercise equipment at run at load and beyond maintenance test levels • Need to perform COOP exercises, including key government, non-profit, and homeland security partners.

		• Need to exercise whether generators can run under load and be refueled. • Need to create and implement exercises that assume communications capability is compromised. • Need utility participation in active exercises.
Plans, Policies and Procedures	S	• Formation of NCR – CIP working group • Established agreement between NCR jurisdictions and WMATA • Redundancy in some systems in some areas • Utility, transportation, sectors have good vulnerability assessments ; government mandate • Extensive back-up generator capability/requirements • Learned that solar technology was very beneficial in Rita • Hospitals have in house plans to maintain power, water, and food
	W	• Recovery needs more emphasis in terms of plans and procedures for restoring services with emphasis on decontamination ; also equipment issue (9) • CIP must be expanded to include healthcare facilities (hospitals). Target hardening and law enforcement perimeter security must be prioritized. Fire/hazmat support (including WMD detection) and response to events requiring mass decontamination operations occurring at hospitals. (4) • Lack of reliable communication system (4) • Need for regional methodology for prioritizing risk across CIP sectors within NCR (4) • Communications infrastructure needs to be protected and secured ; highly reliant on electricity (3) • No coordination between DHS and NCR planning organizations (2) • How are we implementing private sector (2) • Need a process and means for emergency notification • Not specified in most plans for security reasons • Plan implementation for CIPP • Focus on identifying gaps in the fire services infrastructure, resources and its protection • Lack planning to maintain fuel for response vehicles • What will you do if you loose an entire service? • There are no plans in place to harden targets that result from an event • Need a governing council to push regional policies and regulations and MOU • Need to address special needs and prison population

		needs in regional policies and procedures for CIP in the NCR. • Regional T.I. P.P. program, tip line. • Need to better recognize the needs of LOSN and management and analysis should include the heightened risk to PLOSN who are more vulnerable to the effects of losing critical infrastructure services. • Agreement needs to be reviewed and revised • Hospitals have plans however they do not have personnel • Prioritization and I.D. of critical infrastructure needs to be developed using a common tool. Could seek help from DHS. • Reliance solely on grid system • Command and control • Lack of resources for training on emergency response, response mitigation, etc. with Metro (esp. Underground) • Need to test back-up generators more regularly also testing protocols need to be enforced. • Region's population is underutilized and capable of being an effective threat evaluator • Need regional plan for generators to move fuel • Monitor transportation infrastructure ; then communicating threats to different ESFs • Mandate of COOP/COG plan for critical infrastructure in the NCR (private sector) • Develop a plan to har5den the targets that relate to critical facilities • Notification of ESF 5 during outages utilities • Develop a standardized way to analyze the critical facilities • Daily security at hospitals is very lax with the exception of obstetrics • Failure to include private sector in planning process • Failure to link regional and national reporting system for cyber attacks • Failure to link terrorism databases with CRO personnel databases • Failure to include CI/KA private sector in vulnerability assessments • In place emergency generation equipment 1) inventory with details 2) maintenance 3) upkeep in operating mode 4) fuel source(s)/re-fueling • Inclusion of potential mass care facilities within CIP

		plans • Generators; inventory, where are they, what can they support • In the process of identifying a CONOPS and governance structure • Need to complete a risk assessment • Need to create an IT security policy • Need to create an IT architecture • Implement IT security tools • Create a continuity of operations plan for voice/data systems • Unaware of plans for a complete break –down of the critical infrastructure • Minimum standard of readiness for plans • Mutual (regional) standard operating procedures