

2009 Presidential Inauguration

January 17 – 21, 2009

REGIONAL AFTER-ACTION REPORT SUMMARY

August 31, 2009



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ADMINISTRATIVE HANDLING INSTRUCTIONS

1. The title of this document is “2009 Presidential Inauguration Regional After-Action Report (AAR) Summary.”

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EXECUTIVE SUMMARY

On January 20, 2009, Barack H. Obama was sworn in as the 44th president of the United States of America. As the first African-American elected president, the Inauguration of President Obama had greater significance than any Inauguration in recent history. The Presidential Inaugural Committee (PIC)¹ developed a program spanning five days:

- January 17: Whistle-Stop Tour from Philadelphia to Washington, DC
- January 18: “We Are One” Opening Inaugural Celebration
- January 19: Service activities by the Obamas and Bidens
- January 20: Swearing-In Ceremony, Inaugural Parade, and official Inaugural Balls
- January 21: National Prayer Service

The events drew enormous crowds, culminating on January 20 when an estimated 1.8 million people were present on the National Mall and along the Inaugural parade route for the swearing-in ceremony.² The 2009 Inauguration constituted the largest event in the history of the nation’s capital.

The Inauguration presented federal, state, regional, local, and non-governmental organizations with unique and complex challenges. The foremost challenge was how to balance the strict security requirements of the Inauguration with the desire to make the event as open and accessible to the public as possible. The Department of Homeland Security (DHS) designated the 2009 Presidential Inauguration as a National Special Security Event (NSSE), which placed the United States Secret Service (USSS) as the federal agency with lead responsibility for the design and implementation of the operational security plan.

The Inauguration demanded numerous, additional emergency planning and response operations beyond those related to security. National Capital Region (NCR)³ partners had to prepare for millions of visitors, crowds at outdoor Inaugural events, cold weather, and other variables and contingencies. These factors required that NCR partners coordinate their emergency planning, support, and response efforts to an unprecedented degree. Regional collaboration spanned a range of institutions and activities, including communications, emergency management, external affairs, mass care, medical care, public health, and transportation. Further, NCR partners had to be prepared to meet Inauguration contingencies while still providing day-to-day services to the region’s residents. These regional efforts contributed to a safe and peaceful 2009 Presidential Inauguration.

¹ There were several presidential inaugural committees, including the PIC, the DC PIC, the Joint Congressional Committee on Inaugural Ceremonies, and the Armed Forces Inaugural Committee.

² Michael E. Ruane and Aaron C. Davis, “D.C.’s Inauguration Head Count: 1.8 Million,” *The Washington Post*, 22 Jan 2009, <http://www.washingtonpost.com/wp-dyn/content/article/2009/01/21/AR2009012103884.html>.

³ The NCR is comprised of the District of Columbia; Montgomery and Prince Georges Counties in the State of Maryland; Arlington, Fairfax, Loudoun, and Prince William Counties and the City of Alexandria in the Commonwealth of Virginia; and all cities and other units of government within the geographic areas of such District, Counties, and City. Title 10, United States Code, Section 2674 (f)(2).

Regional After-Action Project

The NCR retained a project team (“NCR Project Team”) to conduct a regional after-action review of the 2009 Presidential Inauguration. This effort focuses on the regional planning and operations related to the Inauguration; *it is not intended to be a substitute for the after-action reviews of any individual jurisdiction or organization.* The NCR directed that this regional review follow the processes established by DHS’s Homeland Security Exercise and Evaluation Program. This document summarizes the regional AAR developed by the NCR project team.

Observations

This AAR summary includes observations which are grouped according to issue areas. Issue areas consist of priority Emergency Support Functions (ESF) as designated by the NCR and other important preparedness topics, namely planning and training, identified by the NCR Project Team during its analytical process. Section 2 of this AAR summary presents each observation, indicating whether it is a *strength* or an *area for improvement* and identifying recommendations as appropriate.

Major Strengths

This regional AAR summary identifies the following as major strengths that were demonstrated during the 2009 Presidential Inauguration:

- NCR partners undertook a variety of measures within a short timeframe to meet the challenges presented by an unprecedented number of Inauguration attendees. These measures contributed to a safe and successful event.
- Pre-Inaugural planning undertaken by NCR partners resulted in an unparalleled level of regional cooperation.
- NCR partners developed comprehensive transportation plans and emergency evacuation plans to accommodate the movement of Inauguration attendees.
- The Washington Metropolitan Area Transit Authority (WMATA) provided service to a record number of people.
- A unified regional public information campaign prior to the Inauguration provided key information to visitors and residents that helped manage expectations.

Primary Areas for Improvement

This regional AAR summary identifies the following as primary areas for improvement that were demonstrated during the 2009 Presidential Inauguration:

- The complex and dynamic planning environment made it difficult to integrate federal and NCR partner plans in time for the Inauguration.
- The NCR’s existing institutionalized processes for developing, coordinating, and validating region-wide plans for NSSEs, special events, and other incidents were inadequate for this event.
- The NCR lacks a comprehensive, regional approach for crowd management for inaugurations and special events.

- NCR partners often had to revise plans to account for new information or decisions. These frequent revisions prevented NCR partners from identifying and addressing the interdependencies across their respective plans and caused confusion among NCR partners during certain Inauguration operations.
- NCR plans and procedures for family reunification, mass evacuation, and mass sheltering suffered from a range of problems, indicating a lack of integration among all regional partners.

SECTION 1: EVENT OVERVIEW

The 2009 Inauguration of President Barack Obama constituted the largest event in the history of the nation's capital. The Inauguration required extensive planning and operations by federal, state, regional, local, private, and non-governmental organizations. The Secretary of DHS designated the 56th Presidential Inauguration an NSSE, making the USSS the federal agency with lead responsibilities for the design and implementation of the operational security plan. The USSS integrated federal, state, and local governmental agencies into security planning for the Inauguration through 23 subcommittees. DHS also designated the Whistle-Stop Train Tour from Philadelphia to the District of Columbia (DC) as a separate NSSE from the Inauguration NSSE. This was the first time that two simultaneous NSSEs had been designated for simultaneous or near-simultaneous events in adjacent or overlapping jurisdictions.

The DC Government led the planning effort for the District and coordinated its planning and operational efforts with other NCR partners. The DC Government also provided logistical coordination and support through the DC PIC. The Committee worked in close coordination with its federal, regional, and non-governmental partners to ensure oversight and management integration. The District Government interfaced effectively with the USSS, based upon its history of extensive collaboration on previous NSSEs. The District and the USSS began to coordinate planning for the Inauguration on June 11. From the early planning stages through Inauguration Day, the District worked closely with its NCR partners to coordinate a broad range of emergency planning and response activities related to the Inauguration.

By late November 2008, estimates of Inauguration attendees and visitors from outside the region vastly exceeded the number of attendees at previous events. Some planning estimates ranged as high as 4 million attendees for January 20, Inauguration Day. Similarly, transportation planners estimated that as many as 10,000 charter buses could arrive in the region for the Inauguration. Previous events at Invesco Field in Denver, CO, and Grant Park in Chicago, IL, demonstrated President Obama's ability to draw extremely large crowds. NCR planners recognized that the 2009 Inauguration would likely place a significant strain on community infrastructure and resources. This spurred planning efforts throughout the NCR that took advantage of existing structures and processes, including NCR chief administrative officers (CAO) and emergency managers subcommittees. NCR officials recognized that the 2009 Inauguration's impact would not be limited to the District, but would be felt throughout the region. At times, NCR planning efforts were dependent on decisions from the USSS or Federal PIC in order to proceed.

The United States Congress appropriated \$15 million to the District to cover costs associated with Inauguration preparations. Prior to the Inauguration, the governors of Virginia and Maryland and the mayor of Washington, DC, sent a letter to Congress estimating that transportation and law enforcement for the Inauguration would cost a combined \$75 million, including \$47 million for the District alone. On January 13, 2009, President George W. Bush issued an emergency declaration (FEMA-3300-EM), which made the District eligible to receive direct federal assistance from January 17 through January 21 and federal reimbursement for emergency protective measures for January 20. However, this emergency declaration only

applied to the District; the State of Maryland, the Commonwealth of Virginia, and WMATA were not eligible to receive reimbursements under this federal declaration.⁴

Official Inauguration events began with the Whistle-Stop Train Tour on January 17, 2009. During this tour, then President-Elect Obama and Vice President-Elect Biden held public events in Philadelphia, Wilmington, and Baltimore before arriving in Washington, DC. The next day, the “We Are One” Opening Inaugural Celebration, which featured various musical performances and readings, was held at 2:30 p.m. at the Lincoln Memorial. This free event concluded with Obama addressing the estimated crowd of 400,000. On January 19, the Obama and Biden families participated in multiple community service events around the District. The Inaugural events culminated on January 20, when Obama took the oath of office in front of an estimated 1.8 million people on the National Mall, parade route, and immediate surrounding area. A large number of people watched the Inaugural parade and attended Inaugural balls hosted by multiple organizations throughout the District. The Inauguration officially concluded with the National Prayer Service attended by President Obama and Vice President Biden on January 21 at the National Cathedral.

Numerous statistics demonstrate the magnitude of the 2009 Inauguration. Approximately 1.8 million people attended Inaugural events on January 20 in the National Mall area. Although this number was below some initial estimates, this population would have effectively constituted the fifth-largest city in the United States. Verizon cellular phone usage peaked at 1000.2% of normal volume in the vicinity of the National Mall during the swearing-in ceremony. On January 20, Metro provided approximately 1,120,000 rail trips; 423,000 bus trips; and 1,721 MetroAccess trips for a total of 1,544,721 trips—the highest ridership day in the transit authority’s history. During the previous day, January 19, Metro provided 866,681 trips, making it the second highest ridership day. Over 18,000 volunteers supported the NCR during Inauguration activities; more than 8,000 law enforcement personnel from 56 different agencies provided security for the event. Importantly, no arrests were made and no fatalities occurred in association with the Inauguration. Further, NCR jurisdictions conducted their Inaugural operations without any diminution of day-to-day services to their citizens.

The 2009 Presidential Inauguration had the largest attendance of any previous presidential inauguration. The influx of people to the NCR resulted in numerous attendance records, including:

- 1.8 million attendees for the swearing-in ceremony and Inaugural Parade
- 1.5 million Metro riders on January 20
- 2.6 million Metrorail riders from January 16 - 20
- 400,000 attendees at the “We Are One” Concert on January 18
- 20,000+ public safety personnel deployed on January 20
- 0 Fatalities

⁴ Federal Emergency Management Agency, Internal Agency Docket No. FEMA-3300-EM; Docket ID FEMA-2008-0018, 13 Jan 2009, <http://edocket.access.gpo.gov/2009/E9-1878.htm>.

Timeline of Major Events during the 2009 Presidential Inauguration

01 Aug 2008	Washington, DC PIC formed
20 Oct 2008	DHS designates 2009 Presidential Inauguration an NSSE
4 Nov 2008	2008 Presidential Election
10 Dec 2008	DHS designates Presidential Whistle-Stop Tour an NSSE
13 Jan 2009	President George W. Bush issues emergency declaration for Washington, DC (FEMA-3300-EM)
16 Jan 2009	DC Homeland Security and Emergency Management Agency (HSEMA) Emergency Operations Center (EOC) activated
17 Jan 2009	Presidential Whistle-Stop Tour brings the President-Elect and Vice President-Elect to Washington, DC
18 Jan 2009	"We Are One" Concert at the Lincoln Memorial
19 Jan 2009	Kids Inaugural Concert
0330 – 20 Jan	WMATA opens station parking lots
0400 – 20 Jan	Metro trains begin running
0638 – 20 Jan	3 rd Street tunnel experiences large volume of pedestrian traffic
0927 – 20 Jan	Person falls on tracks and requires medical attention at the Gallery Place Metro Station
1130 – 20 Jan	44 th Presidential swearing-in ceremony begins
1215 – 20 Jan	President Obama takes Oath of Office
1237 – 20 Jan	Benediction ends swearing-in ceremony, crowds begin to disperse from the National Mall
1330 – 20 Jan	Reports of large numbers of pedestrians walking on the 14 th St Bridge towards Virginia
1535 – 20 Jan	2009 Inaugural Parade begins
1853 – 20 Jan	2009 Inaugural Parade ends
21 Jan 2009	National Prayer Service – National Cathedral
22 Jan 2009	DC HSEMA EOC deactivates

SECTION 2: ANALYSIS OF ISSUES

This section of the AAR describes the Project Team's observations of NCR capabilities related to the 2009 Presidential Inauguration. These observations are based upon regional hotwashes, surveys, interviews, reviews of plans, and direct observations at emergency operations centers (EOC) throughout the NCR. These observations are organized by issue and include both strengths and areas for improvement. The issue areas consist of nine NCR-designated priority ESFs as well as two additional issue areas, planning and training, which the NCR Project Team identified during the analytical process.

Issue Area 1: Planning

Issue Summary: Regional planning for the 56th Presidential Inauguration resulted from separate but overlapping NSSE and NCR planning processes. Once an event is designated as an NSSE, the USSS becomes the federal agency with lead responsibility for operational security design, planning, and implementation. The Federal Bureau of Investigation (FBI) serves as the federal agency with lead responsibility for intelligence and counterterrorism. The Federal Emergency Management Agency (FEMA) is the federal agency with lead responsibility for consequence management. These agencies are part of an executive steering committee to guide the operational security planning process for the NSSE. The executive steering committee then forms functional subcommittees that distribute tasks among the participating agencies. The leads for each of these subcommittees also serve on the executive steering committee. The subcommittees enable federal, state, regional, local, and non-governmental partners to be incorporated into NSSE planning processes.

Much of NCR regional planning occurs through a series of regional committees and subcommittees. The Metropolitan Washington Council of Governments (MWCOG) supports planning and coordination for the NCR through committees and working groups. The NCR Senior Policy Group (SPG), consisting of senior homeland security and emergency management officials from Maryland, Virginia, the District of Columbia, and the Director for FEMA's Office of National Capital Region Coordination (NCRC) provide policy and executive-level focus to regional homeland security concerns. The NCR SPG and the CAO Homeland Security Executive Committee (HSEC) oversee homeland security programs in the region. In addition, the NCR Emergency Preparedness Council, an advisory body to the MWCOG Board of Directors, oversees the Regional Emergency Coordination Plan and coordinates the activities of Regional Emergency Support Function (R-ESF) Working Groups.⁵ The NCR has developed a strategic plan to improve regional preparedness to manage homeland security risks. The plan is intended to "build targeted and enduring capabilities shared among the NCR partners in a coordinated, efficient, and effective manner."⁶

⁵ NCR, Homeland Security Program, "Regional Emergency Coordination Plan," 11 Sep 2002, <http://www.ncrhomelandsecurity.org/security/security/download.asp>; FEMA, "Interagency Consequences Management Concept Plan," 19 Dec 2008.

⁶ NCR, Homeland Security Program, "National Capital Region Homeland Security Strategic Plan, Volume I: Core Plan," Sep 2006, <http://www.mwcog.org/uploads/pub-documents/y11XWQ20061114142143.pdf>.

Observation 1.1: Strength: Pre-Inaugural planning undertaken by NCR governmental and non-governmental organizations resulted in an unparalleled level of regional cooperation.

Analysis: DHS designated the 56th Presidential Inauguration as an NSSE, making the USSS the lead federal agency for the design and implementation of the operational security plan. The USSS integrated federal, state, and local governmental agencies into security planning for the Inauguration through 23 subcommittees. FEMA served as lead for the Intergovernmental Consequence Management Subcommittee (CMSC) and worked with over 30 federal, state, and local partners to prepare for the Inauguration.

The District held responsibility for public safety, medical support, and other tasks at events held in the nation's capital, including the Presidential Inauguration, the Inaugural Parade, and the Inaugural balls. The Mayor of the District issued Mayoral Order 2008-105 on August 1, 2008, to formalize establishment of the DC PIC, led by the DC Homeland Security and Emergency Management Agency (HSEMA). The DC PIC formed 12 multi-agency subcommittees to coordinate District support for the Inauguration: communications; finance and administration; fire/life safety/hazardous materials; health and medical; human services; legal affairs; public affairs; public works; security; transportation; vending, licensing, and inspection; and venue. These subcommittees mirrored the NSSE subcommittee structure.

Planners across the NCR recognized that the entire region would have to contribute to this Inauguration more so than had been done for previous NSSEs in the District. Several weeks after the election, in November 2008, government officials speculated that Inauguration attendance could range from 2 to 4 million people. These projections, coupled with the augmented program of Inauguration events, spurred planners in the federal, state, and local governments across the NCR to expand their planning and preparedness activities. The designation of a second, separate NSSE for the Whistle-Stop Tour reinforced the unprecedented regional dimension of the Inauguration period. Robust planning and preparedness measures would be necessary even for safe "steady-state operations," much less for a high threat environment or a mass casualty incident. In addition to the normal security planning associated with an NSSE, NCR partners had to develop more comprehensive plans that addressed communications, mass care, public health, sheltering, transportation, and other functions.

NCR partners developed their own plans and CONOPS for the Inauguration.⁷ They utilized existing NCR structures and processes, including the MWCOG Emergency Managers Committee (EMC) and the CAO teleconference calls. Localities shared Incident Action Plans (IAP) as part of their ongoing planning efforts. Regional pre-planning activities set the stage for a cooperative approach to managing Inauguration activities. It should be noted that there were no NCR-wide plans, *per se*, that were developed for the entire region for the Inauguration.

Recommendation:

1. NCR partners should identify opportunities to build upon these successful efforts and to apply them to short- or no-notice regional events. One such opportunity is

improving the use of existing collaborative tools or establishing enhanced tools to better share and coordinate calendars, taskings, and draft documents/plans on an ongoing basis.

Observation 1.2: Area for Improvement: The complex and dynamic planning environment made it difficult to integrate some federal and NCR partner plans in time for the Inauguration, such as transportation and evacuation plans.

Analysis: Several factors combined to limit the integration of federal and NCR planning efforts for the Inauguration. While planning for the Inauguration began in the summer of 2008, planning throughout the NCR gained momentum shortly before the election. This left planners throughout the NCR with approximately three months to develop their plans and coordinate them with other NCR partners and appropriate federal agencies. Further, the PIC's delays in making some decisions, including delays in finalizing the program of Inauguration events, and communicating its plans, had a negative impact on planning. NCR partners, already operating within a short planning window, could not finalize their plans until the PIC completed its decision-making process. In some cases, NCR partners had to revise their plans after the PIC made a decision.

Recommendation:

1. The NCR SPG, in consultation with federal partners, should identify major issues that require decisions and input from the PIC. These issues, along with their consequences for regional Inauguration planning and operations, should be provided to the PIC as soon as it is formed. The NCR SPG should identify opportunities to brief the respective campaigns and congressional leaders about these issues prior to the presidential election.

Observation 1.3: Area for Improvement: The large number of NSSE, NCR, and other planning subcommittees increased the coordination challenges.

Analysis: Local officials noted that there were over 60 different committees involved in Inauguration planning. The increased number of NCR partners contributing to the Inauguration planning process meant that more jurisdictions and agencies sent representatives to these subcommittee meetings. The large number of committee meetings and attendees inevitably increased the complexity of planning efforts and overall coordination challenges. Further, some NCR planners were unfamiliar with NSSE processes. DC HSEMA mitigated some of these challenges by serving as the coordination conduit between the NSSE subcommittees and other NCR jurisdictions.

The large number of planning subcommittees presented staffing and information sharing challenges for NCR partners. The number of meetings caused scheduling conflicts that prevented key agencies from participating in all of them. The designation of separate NSSEs for the Inauguration and the Whistle-Stop Tour resulted in parallel planning processes, which created coordination issues for Maryland jurisdictions that had to plan for both events. Further, establishing multiple working groups caused a duplication of effort that made the planning process inefficient. At times, the number of meetings made it difficult to ensure that the most current information was disseminated.

Recommendation:

1. Federal partners, in coordination with DC HSEMA, the NCR SPG, and CAO HSEC, should review their respective planning processes to determine whether subcommittees can be consolidated or whether some subcommittees can conduct joint meetings.

Observation 1.4: Area for Improvement: Federal and NCR partner planning efforts did not identify all potential “seams” between their responsibilities and authorities, which impacted operations on Inauguration Day.

Analysis: The short timeframe for conducting Inauguration planning, the complexity of the planning process, and the PIC’s delays in making decisions prevented planners from identifying and remedying seams between federal and NCR authorities and responsibilities. This had several negative impacts on operations on Inauguration Day. The problems associated with the 3rd Street Tunnel, access to ticketed areas on the US Capitol grounds, and general crowd management illustrate how public safety problems emerged in the jurisdictional seams (see Observations 8.1 and 8.2 below). While such problems are typical of large-scale incidents, they can be minimized through greater coordination during the planning process.

Recommendation:

1. FEMA NCRC, in coordination with NCR leadership and other federal partners, should conduct an assessment that identifies seams among NCR jurisdiction authorities and responsibilities. From this assessment, FEMA NCRC should develop recommendations to address seams in plans, policies, and procedures.

Observation 1.5: Area for Improvement: The NCR’s existing institutionalized processes for developing, coordinating, and validating region-wide plans for NSSEs, special events, and other incidents were inadequate for this event.

Analysis: The absence of formal, institutionalized processes for coordinating planning activities had several negative consequences for NCR Inauguration planning. Planners did not have sufficient visibility into the status, quality, or content of other NCR partners’ plans that would impact their jurisdiction or agency. In some cases, NCR partners either failed to develop plans or finalized them so late that other partners did not receive them in a timely manner. This left some NCR planners “in the dark” about other jurisdictions’ planning and, in some cases, required *ad hoc* coordination during Inauguration operations. Further, the continual revision of plans prevented regional partners from identifying and addressing the interdependencies across plans.

The NCR possesses several mechanisms and processes—including the NCR SPG, the Emergency Preparedness Council (EPC), and the R-ESFs—which served as forums for coordinating planning efforts for the Inauguration. More importantly, these or other entities should establish region-wide strategic priorities for future Inaugurations, NSSEs, or other regional events. Such efforts would be consistent with the approach established in the NCR’s *Homeland Security Strategic Plan*. Inaugurations or other planned special events could be used to refine the regional planning process, which would enhance

preparedness for no-notice emergencies.

Recommendation:

1. The CAO HSEC should set regional strategic goals in advance of future NSSE or special events (led by the lead jurisdiction impacted by the NSSE/special event). These strategic goals should be developed in concert with the initiation of planning conducted by NCR jurisdictions. Based on these strategic goals, the NCR SPG should work with regional partners to establish critical parameters for the development of plans, including a timeline for plan development and common planning assumptions. This timeline should allow sufficient time to identify gaps among plans, conduct any necessary exercises, and provide training to senior officials and key operational personnel.

Observation 1.6: Area for Improvement: NCR planners did not synchronize their planning assumptions when developing their Inauguration plans.

Analysis: Most Inauguration plans did not follow a common template or framework across the NCR. DC HSEMA developed a CONOPS that delineated responsibilities and actions under three different levels of operations. Other NCR jurisdictions did not structure plans according to these parameters. Some jurisdictions employed the Incident Command System (ICS)-205 form for communications plans, which ensured a common approach across these plans. Further, some jurisdictions did not distinguish between capabilities and incident requirements during the planning process. The wide range of Inauguration attendee estimates also presented several challenges for developing and coordinating regional plans. Initial estimates of attendees ranged as high as 4 million people, which spurred efforts to augment existing plans.

Recommendations:

1. The NCR EPC should establish formal, institutionalized processes for coordinating and validating plans among NCR partners. This should include processes for establishing common planning assumptions and identifying interdependencies among plans.
2. The NCR EMC should identify and select a secure information sharing system/tool to share draft plans, information, and updates among planners throughout the NCR during the pre-Inauguration planning process. This system/tool should be designed to provide planners with greater visibility into the status of efforts in other jurisdictions and other functional areas so that they can identify interdependencies and gaps.
3. The EMC, in consultation with the R-ESFs, should develop common plan templates to promote the regional integration and coordination of plans.
4. The NCR Exercise and Training Operations Panel (ETOP) should catalog, assess, and disseminate available training opportunities aimed at helping build emergency planning skills in NCR jurisdictions or organizations that lack such experience.

Observation 1.7: Area for Improvement: NCR partners “leaned forward” to develop plans for the Inauguration. However, uncertainty over federal emergency declarations and funding impacted how aggressively NCR partners could plan in advance.

Analysis: NCR partners dedicated significant resources during Inaugural planning and operations, despite uncertainty regarding whether reimbursements would be available (see Issue Area 6: Logistics for additional information). The Governor of Virginia signed Executive Order #80 declaring a state of emergency for the Commonwealth in response to the Presidential Inauguration, effective January 13. Other localities in Virginia also declared emergencies in anticipation of a large number of people travelling to the Inauguration. The jurisdictions under the Northern Virginia Regional Commission coordinated their local states of emergencies in order to be eligible for reimbursement.

Uncertainty over federal emergency declarations, as well as unclear policies about funding and reimbursements, hindered the ability of regional jurisdictions to lean forward in planning. Jurisdictions in Virginia, for example, were unsure whether declarations covered certain expenses and could not anticipate federal funding. The lack of a standardized template for assistance requests also complicated efforts to secure funding for localities outside of the District. Funding shortfalls had a notable effect on some jurisdictions’ ability to staff their EOCs and provide additional personnel to field operations.

The Bush Administration’s decision to include only the District in the emergency declaration forced local jurisdictions in Maryland and Virginia to seek other sources for support. State and local jurisdictions sought congressional appropriations after the Inauguration to cover the incurred costs. Congress allocated \$20 million to state and local governments for security and other expenses related to the 2009 Inauguration as part of the 2009 Omnibus Appropriations Act (H.R. 1105). Officials from Maryland and Virginia had estimated their Inauguration costs to total \$28 million. WMATA also requested approximately \$2.5 million to reimburse the cost of additional service during the Inaugural period; current federal guidelines, however, would reimburse the transit agency less than \$1 million.

Recommendation:

1. NCR political leaders should work with federal partners, including Congress, to provide greater funding certainty that will enable NCR partners to conduct the level of planning required for future Inaugurations. This includes seeking federal funding support for NCR activities ahead of the 2013 Inauguration.

Issue Area 2: Transportation

Issue Summary: The NCR developed comprehensive, multi-modal, regional transportation plans to manage the movement of crowds during the Inaugural period. These plans and other coordination efforts resulted in successful transportation operations. The 2009 NSSE Presidential Inaugural Law Enforcement and Public Safety Public Affairs subcommittee released its Joint Transportation Plan on January 7, 2009. The plan provided general outlines of road closures, vehicular restricted zones, public transportation, chartered vehicles parking, and

pedestrian routes. VDOT, the Virginia State Police (VSP), and the Virginia Department of Rail and Public Transportation (VDRPT) also released detailed road and bridge restrictions in Northern Virginia during the Inaugural period.

Observation 2.1: Strength: NCR regional partners developed comprehensive transportation plans to accommodate the routine movement of Inauguration attendees.

Analysis: The location of Inaugural events near the National Mall presented challenges for the NCR's transportation systems. The large number of expected attendees had the potential to impact the delivery of services to attendees and area residents. Due to the security concerns regarding Inaugural events on the National Mall, the USSS restricted access from Virginia into the District. Regional partners developed and successfully implemented a comprehensive plan for the Inaugural period without major problems.

Road closures were in effect throughout the Inaugural period in Virginia and the District. In an effort to accommodate the large crowds expected for Inaugural events, the District Department of Transportation (DDOT) also designated pedestrian walking routes. The VSP, VDOT, and VDRPT developed a Virginia transportation plan that limited traffic on I-395, I-66, Roosevelt Bridge, and the 14th Street Bridge to authorized vehicles. Memorial Bridge, Chain Bridge, and Key Bridge were designated for pedestrian and bicycle use only. Virginia urged the public to use Metrorail, Virginia Railway Express (VRE), and Amtrak as the primary transportation choices for travel into Washington, DC, on Inauguration Day. Other mass transit preparations included a bus parking plan in the District and shuttles between RFK Stadium and the area near the National Mall.

Recommendation:

1. Transportation planners should identify opportunities to extend these successes to plans for short- or no-notice events that affect the entire region. One potential solution is the development of an on-going regional operations coordination function, such as the Metropolitan Area Transportation Operations Coordination Program.

Observation 2.2: Strength: WMATA undertook comprehensive preparations to extend service during the Inaugural period in anticipation of the increased number of Metro transit riders.

Analysis: As the major transit authority in the NCR, WMATA had to develop a transportation plan that accounted for service in the District, Maryland, and Virginia. WMATA developed 23 Inauguration-specific Metrobus corridors and planned for longer Metrorail operations between January 18 and January 20. In coordination with USSS, WMATA implemented security measures to close Metrorail stations near certain Inaugural events and designated some stations as exit-only to expedite crowd movement. In preparation for the expected high volume of passengers, WMATA conducted simulations with Metrorail trains to test the power grid and surge capacity. WMATA also held a tabletop exercise that addressed several scenarios as part of its pre-Inauguration training.

WMATA planned for and ran 60 hours of Metrorail service between January 18 and January 20. Over 8,000 Metro employees worked on Inauguration Day, including 417 transit police officers, 143 volunteer transit police officers from other transit agencies, and 340 volunteer Metro Ambassadors. WMATA conducted region-specific safety training for police officers, including a demonstration about the safe space along the Metrorail track. This training proved critical when a Houston transit officer saved the life of a 68-year old woman from Nashville, Tennessee, who fell onto the tracks at the Gallery Place-Chinatown station on January 20 as a Red Line train approached. After unsuccessful attempts to pull the woman up to safety, the transit police officer tucked the woman down in a crawl space beneath the lip of the platform, preventing serious injury.

Recommendation:

1. WMATA should ensure that its planning and training activities are well-documented and systematized for future special events.

Observation 2.3: Area for Improvement: WMATA encountered situational awareness and regional coordination challenges, particularly when decisions deviated from agreed-upon plans during Inaugural events.

Analysis: In the weeks leading up to the Inauguration, WMATA staff participated in MWCOG's regional calls and highlighted the need for vigilance by local officials of potential traffic issues near Metrorail Stations. On Inauguration Day, collecting parking fares at Metrorail stations, including Shady Grove, Greenbelt, Franconia-Springfield, and Vienna-Fairfax, caused traffic backups onto I-66, I-95, and I-370 between Shady Grove Metro station and I-270. WMATA addressed this problem by temporarily suspending the collection of the \$4 cash-only parking fee. Once WMATA opened the gates, delays dissipated quickly.

Before and after Inaugural events, Metro experienced excessive overcrowding at stations close to the National Mall area. However, WMATA lacked situational awareness at rail stations where circulation plans were changed or modified by third parties, including non-WMATA law enforcement, with little notice on Inauguration Day.

Recommendations:

1. WMATA should coordinate with DC Metropolitan Police Department (MPD) and other local law enforcement agencies to pre-stage cameras near Metro station entrances to increase visibility and improve situational awareness.
2. WMATA should ensure that data about number of riders and capacity at its parking garages is shared more promptly with local EOCs and law enforcement agencies during Inaugurations and special events. This information is critical for establishing and maintaining a Common Operating Picture (COP).
3. WMATA should consider waiving parking fees or charging an amount less likely to require change to expedite movement into garages during special events.
4. Law enforcement agencies should ensure proper notification to and coordination with other agencies regarding any changes to agreed-upon plans.

Observation 2.4: Area for Improvement: Frequent changes and revisions to the Inauguration traffic plan caused confusion, particularly regarding the status of bridges and roads. This created significant implementation challenges for NCR law enforcement agencies.

Analysis: Managing the arrival and departure of attendees from Inaugural events presented some of the greatest challenges to regional governments. Virginia developed its Traffic Management Plan in conjunction with federal, Maryland, and District officials. Given the sophistication and complexity of transportation and crowd management plans, NCR jurisdictions executed the plans well. There were minimal traffic problems on I-95/I-395 into Washington, DC, and the majority of traffic congestion was inside the District. Road traffic on Inauguration Day was well below the expected volume due to the high use of public transportation. Despite coordination among the region's transportation systems, the NCR experienced several challenges in managing traffic, including confusion over the status of some bridges and roads. NCR partners indicated that surface transportation planning suffered from a lack of a unified voice in communicating and coordinating changes to the plan.

Recommendation:

1. DC HSEMA, in coordination with NCR transportation agencies and authorities, should develop transportation-focused exercises aimed at strengthening regional transportation/traffic planning. As an example, R-ESF-1 should utilize the data and information gathered during the 2009 Inauguration as the basis for a tabletop exercise to test a range of alternative transportation scenarios, such as a crushing incident within a Metro station or a pedestrian being struck on a bridge. The outcomes of this and other exercises should inform transportation planning for the next Inauguration.

Observation 2.5: Area for Improvement: NCR partners did not coordinate the details of their respective mass evacuation plans until shortly before the Inauguration.

Analysis: Confusion over road closures at jurisdiction borders extended to emergency evacuation procedures. The VDEM Northern Virginia Evacuation Plan and the DC HSEMA CONOPS differed over the status of Memorial Bridge. The VDEM plan referenced the George Washington Memorial Parkway (GWMP) Emergency Evacuation Plan to be implemented by the National Park Service/US Park Police (USPP), which would close the Memorial Bridge to all vehicle and pedestrian traffic. The DC HSEMA CONOPS, however, listed Memorial Bridge as a walk-out route in the event of an evacuation. These differences were only reconciled immediately prior to the Inauguration by senior officials (for more on mass evacuation planning, please see Observations 6.2 and 8.3).

Recommendation:

1. The NCR EMC, R-ESF-1, and R-ESF-6 planners should establish an integrated, regional mass evacuation framework. This framework should establish processes that enable planners to coordinate their efforts. As a first step, the NCR EMC and appropriate R-ESFs should develop a common mass evacuation plan template to be utilized by all NCR jurisdictions and partners.

Observation 2.6: Area for Improvement: NCR plans for tour bus parking did not adequately account for inclement weather or other similar problems that passengers may encounter when moving from parking areas to the event.

Analysis: DDOT held responsibility for managing the parking of charter buses as well as the movement of passengers to and from Inaugural events. A December DDOT plan projected that 500,000 people would travel via 10,000 charter buses within a six-hour arrival and departure window on Inauguration Day. Major roadways such as the Southeast/Southwest Freeway and Potomac Freeway would be closed and dedicated to bus parking. DDOT estimated that, combined with various arterial routes, the parking locations could accommodate 4,825 tour buses. The DDOT plans designated parking zones for buses from which passengers would walk, take the Metro, or, in limited cases, take shuttle buses to the Inaugural events. In some cases, these plans required bus passengers to walk several miles. If the region had experienced precipitation or significantly colder weather, many of the bus passengers would have faced serious exposure risks, particularly the elderly and those with special needs.

A total of 2,941 charter buses, well below initial estimates, traveled in and out of the District on Inauguration Day without any significant incidents. However, had the NCR experienced more severe weather on Inauguration Day, parking locations such as the Southeast/Southwest Freeway could have been dangerous for pedestrians and buses.

Recommendation:

1. NCR bus parking and passenger transit plans for special events should include provisions for delivery of human services and first aid to passengers in the event of inclement weather. This may be achieved through the deployment of additional aid stations or the re-positioning of existing stations.

Observation 2.7: Area for Improvement: NCR surface transportation plans for the Inauguration could have been enhanced through greater use of modeling.

Analysis: The NCR surface transportation planning process did not include adequate traffic modeling to determine the impact of the plan and closures on surrounding jurisdictions. Some local officials expressed concern that the I-66 and I-395 closures could have effectively isolated sections of Alexandria.

Recommendation:

1. R-ESF-1 should evaluate options for improving modeling of the impacts of surface transportation plans during special events.

Issue Area 3: Communications

Issue Summary: The NCR has taken numerous steps to strengthen emergency communications across the region, beginning before the September 11th terrorist attacks and continuing in the subsequent years. These efforts have provided the NCR with effective emergency communications during previous NSSEs and other special events.

Communications planners recognized that the 56th Presidential Inauguration would place extraordinary demands on the emergency communications systems throughout the region. Planners identified a range of measures that could help manage increased demand from the large number of public safety and emergency response personnel deployed for the Inauguration. DC Fire and Emergency Medical Services (FEMS) and the Office of the Chief Technology Officer (OCTO) led the development of the Presidential Inauguration Communications Plan for the NCR. The plans continued to be revised in the period leading up to the Inauguration in order to incorporate the measures undertaken to prepare for communications during the Inauguration.

NCR communications networks experienced an enormous increase in users and heightened traffic throughout the Inaugural period. NCR radio and cellular communications systems sustained the increased usage without any major outages. Despite the efforts undertaken by planners, the Inauguration demonstrated the limited remaining 800 MHz capacity in the NCR.

Observation 3.1: Strength: NCR partners collaborated in communications planning and preparedness measures to manage the communications demand during the Inauguration. Several jurisdictions allowed their 800 MHz channels to be utilized by other NCR partners during the Inauguration.

Analysis: DC FEMS and OCTO took the lead to work with NCR partners to meet the region's communications requirements for the Inauguration. DC FEMS requested and received NCR radio cache assets. DC FEMS received 800 MHz channel commitments from Arlington and Fairfax Counties, while the City of Alexandria allowed the use of talk groups. Communications planners dedicated one of these 800 MHz channels to DC DPW during the Inauguration. This ensured that DC DPW had effective communications, which would have been essential had the District encountered inclement weather. A second 800 MHz channel was dedicated to marine communications during the Inauguration.

Communications planners also established an NCR coordination channel by using one of the 800 MHz channels. This channel served as the main voice information sharing channel among NCR operations center, including the DC HSEMA EOC, the Multi-Agency Coordination Center (MACC), all NCR operations centers, mobile command posts, select field supervisors, and other key personnel. Communications planners prepared, tested, and made the appropriate personnel aware of the channel and its purpose.

Recommendations:

1. The NCR Joint Communications Interoperability Team (NCR-JCOMM), the DC Office of Unified Communications (OUC), DC FEMS, and other appropriate NCR partners should review communications capacity within the region and develop standard processes for managing communications demand during NSSEs and special events. For example, communications stakeholders could explore ways to optimize channel allocation to avoid traffic overcrowding.
2. In future Inaugurations and NSSEs, lead communications planners should ensure all appropriate officials are familiar with and prepared to utilize coordination channels established for the event.

Observation 3.2: Strength: Federal and NCR partners cooperated to utilize radio repeaters and to place additional repeaters at critical locations to ensure radio communications across the region.

Analysis: Prior to the Inauguration period, NCR communications planners worked to ensure that National Public Safety Advisory Committee (NPSAC) 800 MHz radio cache radios could be repeated throughout the region. This would enhance law enforcement coordination and incident response along the Inauguration parade route, facilitate interoperability, and help to provide emergency backup if needed. DC FEMS worked with other NCR and federal partners to identify and manage radio repeaters across the region, thereby ensuring that repeaters performed as intended during the Inauguration. These repeaters extended NPSAC channels throughout the NCR and helped to facilitate interoperability during the Inauguration. NCR partners observed that regional communications planning could be enhanced by conducting an inventory of all repeaters within the NCR.

Recommendation:

1. NCR-JCOMM, DC OUC, DC FEMS, and other appropriate NCR partners should conduct an inventory of all repeaters within the region. This can assist communications planning and preparedness for NSSEs and other special events.

Observation 3.3: Strength: NCR communications planners identified and remedied possible gaps in public wireless systems along the National Mall and parade route. Communications planners arranged for the placement of additional cell towers and the Wireless Priority System (WPS) to service those areas. These actions helped to accommodate the increased usage by both Inaugural attendees and key personnel.

Analysis: The Presidential Inauguration Communication Plan observed that cellular service provided by the major telecommunications companies would serve as the primary and secondary communications solutions for mobile voice and email messaging. The plan indicated that coverage for certain wireless systems would be unreliable along the parade route, on the National Mall, and other event areas with Inaugural attendees and personnel attempting to access those systems simultaneously. To help alleviate the strain on these wireless systems, AT&T, Verizon, and Sprint Nextel placed “cells on wheels” at locations in the downtown area. The additional towers proved critical on Inauguration Day. While many people experienced periodic denials of service and dropped coverage during this time, the public wireless systems serviced Inaugural attendees and personnel without collapsing under the increased usage.

WPS allowed key personnel to make vital calls and communicate effectively when their regular wireless service was inaccessible during the periodic small-scale outages. It provided priority access for emergency calls through a combination of special cellular network and hardware features, as well as the “high probability of completion” features used by the government emergency telecommunications service. Many regional partners noted that cellular communications worked well overall during the Inauguration, including on January 20, and did not suffer any large-scale problems or outages.

Recommendation:

1. In future Inaugurations and NSSEs, the NCR-JCOMM and DC OUC should ensure that all wireless providers are incorporated into the communications planning process. As part of this effort, the NCR-JCOMM and DC OUC should identify opportunities to incorporate wireless providers into regional responses to short- or no-notice events.

Issue Area 4: Emergency Management

Issue Summary: Emergency managers throughout the NCR collaborated to coordinate the operations of numerous jurisdictions, agencies, and localities. Prior to the Inauguration, NCR emergency managers utilized the CMSC and other subcommittees to inform each other about their planning and preparedness activities. As the Inauguration period began, jurisdictions across the NCR began activating their EOCs. Activation times, duration, and daily operational periods varied depending on how Inauguration activities impacted the jurisdiction or entity. NCR partners relied on several mechanisms to maintain situational awareness throughout the Inauguration period. First, NCR partners deployed representatives to key operations centers, such as the DC HSEMA EOC and state EOCs, to serve as emergency liaison officers (ELO). Second, DC HSEMA aggregated information from its staff, ELOs, and other information to develop a COP. DC HSEMA employed WebEOC as the primary platform for disseminating the COP to other NCR partners by providing them with access to its boards. Other NCR partners such as Arlington County Transit, USPP, and American Red Cross also used Capital Wireless Information Net (CapWIN) for interagency communications and situation awareness. The successful management of an incident during the Inauguration would require that all NCR partners share a COP.

Observation 4.1: Strength: Access to DC HSEMA WebEOC boards provided NCR partners with important information about Inauguration operations.

Analysis: DC HSEMA's WebEOC boards provided NCR partners with a detailed view of DC HSEMA operations, events, and priorities. ELOs and other personnel at the DC HSEMA EOC uploaded field reports and shared data via WebEOC with key personnel and activated operations centers in the region. The ability to access the DC HSEMA WebEOC constituted the most significant attempt to establish a COP among NCR partners. Many NCR partners commented that access to the DC WebEOC boards gave them the appropriate level of visibility into operational activities and enabled them to adjust their efforts accordingly. They noted that they based staffing and deactivation decisions on information gleaned from the DC HSEMA WebEOC boards. Further, several believed that formal processes could be established to coordinate the activation and deactivation of EOCs within the NCR during regional events. This could help ensure against the premature deactivation by an NCR partner during a regional event or incident.

Recommendations:

1. The NCR EMC should develop SOPs for coordinating and communicating the activation and deactivation of EOCs during regional events and incidents.

2. The NCR EMC should establish SOPs that allow EOCs to share their objectives for each operational period during activations.

Observation 4.2: Area for Improvement: Some NCR partners encountered difficulties accessing and using WebEOC during the Inauguration.

Analysis: Some NCR partners had difficulty accessing the DC WebEOC or had other technical difficulties with the system, such as being disconnected unexpectedly. A few NCR partners were unaware that they could get access to the WebEOC boards. For others, updates to the DC HSEMA WebEOC board did not load automatically, which required them to monitor and refresh the page manually. Many of the updates entered into WebEOC about ELO replacements in the DC HSEMA EOC, situation reports, and other minor information made it difficult for NCR partners to focus on information essential for them. Sifting through the large amount of data on WebEOC proved to be very time-consuming for some NCR partners.

Some NCR partners expressed frustration with WebEOC's limitations, which affected their ability to maintain a COP. Several recommended that regional WebEOC exercises be conducted in the future. They also noted that an NCR protocol could be developed to guide the posting of information to WebEOC.

Recommendations:

1. The NCR EMC should review WebEOC and other systems to determine their respective strengths and weaknesses for providing a regional COP. This review should also consider how multiple systems can be employed to develop a robust regional COP. The NCR EMC review of WebEOC should also assess whether the use of different versions of WebEOC or different functionality have any negative affects across the region during an event. The NCR EMC should develop a common WebEOC protocol for regional partners.
2. The NCR EMC should conduct a regional WebEOC exercise, integrating as many regional stakeholders as possible.

Observation 4.3: Area for Improvement: Insufficient coordination led to confusion about access issues for travel on certain roads within the region during the Inauguration.

Analysis: Confusion existed over I-395 and I-66 restrictions in Virginia, heightened by continually changing qualifications for access in the days leading up to the Inauguration. The credentialing and enforcement process was unclear in the traffic management plan. Some NCR partners expressed concerns that healthcare and EMS workers would not have the proper credentials required to travel into the District in the event of a mass casualty incident (for more on this issue, see Observation 7.7).

Recommendation:

1. Federal and NCR partners should review and coordinate processes that allow access to closed roads during NSSEs. In conducting this review, R-ESF-1 should leverage planned efforts to better incorporate modeling to assess and exercise road closing scenarios in special events.

Issue Area 5: Mass Care

Issue Summary: The expected number of Inauguration attendees led planners across the NCR to prepare to provide mass care in the event of inclement weather, a mass casualty incident, or other man-made events. The provision of mass care during the Inauguration ranged from basic services such as warming buses and aid stations to plans for worst-case scenarios involving a mass evacuation or sheltering. The DC Department of Human Services served as the primary District agency responsible for mass care, mass feeding, and mass sheltering during the Inaugural period. Other NCR partners prepared to provide mass care operations to support the District or if an Inauguration-related event occurred in their area, such as massive traffic jams that left motorists stranded. .

Observation 5.1: Area for Improvement: The District and the American Red Cross coordinated to provide sheltering and warming services to Inauguration attendees and to local citizens affected by regional traffic and other issues. However, the NCR lacked the shelter capacity and operational capability to meet potential demand.

Analysis: NCR partners took a number of measures, individually and collectively, to ensure that Inauguration attendees had access to shelters. NCR sheltering planners assumed that all hotels were booked to capacity within a 200-mile radius of the District. Planners also had to consider the possibility that some attendees would lack proper housing or accommodations. The DC Department of Human Services planned to operate shelters on a standby basis throughout the Inaugural period. If necessary, American Red Cross would assist the DC Department of Human Services to provide mass shelter, mass care, and mass feeding. In the event of a hypothermia risk, the DC Department of Human Services would be responsible for warming facilities. Prince William County pre-identified two shelter locations and placed them on standby in the event of an emergency. The county made sure it had sufficient mass care available in the event that a large number of people were stranded on the Interstate due to highway congestion, accidents, or loss of fuel. Similarly, Fairfax County opened schools for sheltering if needed. Prince George's County signed a Memorandum of Understanding (MOU) to use vacant apartments to shelter individuals whose residences could not be occupied due to fire or other emergency.

On the National Mall, the District and the American Red Cross coordinated to provide a system of warming buses, family reunification tents, and first aid stations to assist attendees seeking warmth. These were underutilized in part due to the public's lack of knowledge about their location. Shelters across the region had adequate staffing, although some DC shelters lacked the necessary level of medical staffing.

Overall, despite coordinated planning, the NCR lacked the capacity to meet the potential sheltering needs or operational demands of a mass care scenario, particularly one associated with a catastrophic incident.

Recommendations:

1. The American Red Cross, NCR EMC, and R-ESF-6 should work with all appropriate NCR partners to establish regional shelter goals. This effort should also identify regional shelter resources and establish a common shelter plan template for regional planners.
2. Each NCR partner should review its shelter plan and capacity in the event of a catastrophic incident.
3. Federal and NCR partners should assess and evaluate options for providing shelter and mass care during NSSEs and other special events that have very large numbers of attendees.
4. The American Red Cross, in coordination with NCR jurisdictions, should develop and conduct a tabletop exercise to assess the region's mass shelter capacity and processes.

Observation 5.2: Area for Improvement: The NCR lacked region-wide family reunification plans and protocols, despite the efforts of individual partners within the region.

Analysis: The anticipated Inauguration crowds necessitated the development of family reunification plans throughout the NCR. Many NCR jurisdictions and organizations either developed or refined their family reunification plans prior to the Inauguration. However, region-wide family reunification plans and protocols were not developed. In the weeks prior to the Inauguration, some NCR partners sought clarification about regional family reunification processes but did not receive information until January 19. Consequently, family reunification efforts during the Inauguration were disjointed.

The USPP planned for individuals who had been separated from their families on the National Mall to be taken to first aid tents. However, this plan changed when the demand for medical services overwhelmed the aid stations, leading separated individuals to be taken to MPD stations. This change in plans was not communicated widely.

The family reunification process for individuals who had been transported to a hospital emergency room required multiple interventions and queries. Often, there were no provisions for transporting these individuals to secondary locations once they had been discharged from the hospital. Ultimately, the small number of EMS transports from the National Mall helped to keep these family reunification issues to a minimum. However, regional partners recognized that an incident requiring a large number of transports could have presented significant family reunification issues for the NCR.

Recommendations:

1. R-ESF-6 should develop a coordinated and integrated regional approach for family reunification for special events and other large-scale emergencies.

2. R-ESF-6 should develop either a single database for all family reunification information or a method that allows each existing database within the region to be searched quickly and easily.

Issue Area 6: Logistics and Resource Management

Issue Summary: NCR partners dedicated significant resources to planning and executing Inaugural operations, despite uncertainty about the potential for reimbursement. DC HSEMA, FEMA, and other NCR partners collaborated to provide resources to support Inauguration operations. This enabled NCR partners to pre-position supplies and take other measures to ensure resources would be available during the Inauguration. However, uncertainty about reimbursement and other issues limited the ability of NCR partners to prepare for Inauguration operations.

Observation 6.1: *Strength*: NCR partners expended resources, committed personnel, and authorized overtime to meet the operational demands of the Inauguration.

Analysis: Many NCR partners expended resources and committed personnel, even while uncertain about the potential for reimbursement, because “it was the right thing to do.” Still, some NCR partners encountered staffing difficulties during the Inauguration due to budget cuts and reduced revenues. Many NCR partners noted that they could not contribute a full complement of personnel to staff their EOCs. In other cases, EOCs were activated for shorter periods of time to save money. A number of NCR jurisdictions kept staff “on-call” in the event of an emergency. Had there had been a large-scale emergency related to the Inauguration, the delay in recalling essential staff members to these EOCs could have prevented the provision of prompt and effective assistance to the affected area. Many NCR partners indicated that greater funding would have allowed them to be more forward-leaning with their logistics and resource management. Still, the willingness of NCR partners to expend resources to prepare for and conduct Inauguration operations despite the uncertainty of reimbursement demonstrates their commitment to ensuring safe and successful Inauguration activities.

Recommendations:

1. The CAO HSEC and NCR SPG should work with federal partners and congressional liaisons to secure federal funding prior to the Inauguration to ensure that states and localities are able to conduct the requisite level of logistical planning and support to Inaugurations and NSSEs. This federal funding should cover the full range of expenses including, but not limited to, law enforcement, transportation, health and medical, and planning. Funding should not be contingent upon a Stafford Act declaration.
2. R-ESF-7 should develop procedures for identifying and addressing regional logistics requirements for Inaugurations, NSSEs, and other special events in order to ensure there is a shared understanding of these requirements.

Observation 6.2: *Area for Improvement*: NCR planning for the identification and supply of mass evacuation transfer points proved insufficient.

Analysis: DDOT had primary responsibility for coordinating all logistics related to mass evacuation transfer points. The DDOT Walk-Out Evacuation Plan identified several transfer points where the public would be directed in the event of a mass evacuation, including the Kennedy Center, the Walter E. Washington Convention Center, and several public schools. However, DDOT did not coordinate its planning efforts with MPD, which would have provided security at the sites, or the Department of Human Services, which would have provided mass care support.

Upon discovering this issue, DC HSEMA took responsibility for the coordination effort. DC HSEMA leaders contacted the managers of the transfer points to coordinate their participation. The agency also submitted requests to FEMA for supplies. FEMA pre-positioned water and snacks at each site and quickly delivered multiple pallets of supplies to the transfer points identified in the DDOT plan. However, many transfer points were still unprepared to manage the FEMA supplies when they arrived. Consequently, DC HSEMA coordinated with DDOT, the DC Department of Human Services, the DC Office of Property Management, FEMA, and the American Red Cross to staff and supply the evacuation transfer points.

Recommendation:

1. R-ESF-7, in collaboration with R-ESF-6 and federal partners, should expand plans and procedures for staffing and supplying mass evacuation transfer points.

Issue Area 7: Public Health and Medical Care

Issue Summary: NCR partners effectively collaborated and planned to ensure that public health and medical care needs would be met for Inauguration attendees as well as the region's residents. Planners recognized that the unprecedented number of Inauguration attendees would place an increased burden on the public health and medical communities of the District, the NCR, and potentially beyond. NCR partners pre-staged medical personnel and equipment in the District to ensure immediate care and evacuation, if necessary. The DC PIC Health and Medical subcommittee led the ESF-8 planning effort for the Inauguration, with DC FEMS and DC DOH taking the lead for the provision of medical coverage within the District. Other NCR partners provided assistance to the District during the Inauguration and prepared to expand their operational activities, should it become necessary.

The planned EMS system for the Inauguration consisted of three components. First, aid stations would allow persons to self-report for first aid treatment and provided National Park Service (NPS) and DOH paramedics a location to treat non-critical patients that had been brought there. Also, Department of Health and Human Services (HHS) personnel capable of providing advanced life support (ALS)/advanced cardiac life support (ACLS) care staffed the NPS medical stations. Second, NPS and DOH paramedic teams at the aid stations would respond to calls from inside the crowd to treat patients at an aid station or call for a transport unit. Third, the EMS transport system—comprised of DC FEMS ALS, basic life support, bike patrol, foot, and gator teams—would move patients from inside the perimeter to the appropriate medical care. In addition, HHS set up two casualty collection points, pre-staged federal medical stations, and deployed two medical assistant teams, one in the District and one in Maryland, to assist in patient

flow management and contingency hospital care/hospital decompression if necessary.

Observation 7.1: Strength: NCR hospitals conducted their planning and preparedness efforts to an exceptional degree prior to the Inauguration period.

Analysis: Hospital coalitions and individual institutions took a wide range of steps to plan and prepare for the Inauguration. The DC Emergency Healthcare Coalition (DCEHC), the DC Hospital Association (DCHA), and the Northern Virginia Hospital Alliance (NVHA) developed plans and worked with their members to prepare for the Inauguration. These entities developed emergency operation plans, IAPs, and other documents to coordinate their members' response activities. Northern Virginia hospitals integrated their planning activities to a degree that exceeded their previous efforts. Further, the DCEHC led efforts to create a NCR hospital incident information sharing procedures for the Inauguration.

Conference calls, meetings, and discussions took place on a daily basis among NCR hospitals throughout the planning process. The DC Healthcare Coalition Response Team (HCRT) of the DCEHC coordinated daily conference calls with NCR partners, including the Maryland and Virginia hospital coordination centers. In Maryland, the Department of Health and Mental Hygiene conducted weekly conference calls with hospitals and provided them with information about the event. Suburban Hospital in Montgomery County had MOUs in place with the National Institutes of Health and the National Naval Medical Center prior to the Inaugural period to establish pre-credentialing with these facilities.

Recommendation:

1. Public health and medical planners should identify opportunities to extend these successes to plans for short- or no-notice events that affect the entire region.

Observation 7.2: Strength: R-ESF-8 established lines of communication for hospitals and EMS partners for the Inauguration period.

Analysis: DC DOH facilitated regional communication and coordination during the Inauguration through its HECC. The HECC provided a central location that allowed NCR partners to share information and reconcile issues. The HECC included liaisons from EMS, hospital, and healthcare entities across the region. This allowed these liaisons to meet face-to-face to resolve issues and make decisions in a collaborative, group environment. The collocation of NCR EMS, hospital, and public health liaisons at the HECC proved very successful and vital for an integrated effort during the Inauguration.

Other NCR hospital and healthcare entities took measures to promote communications and information sharing, as well. The DCEHC HCRT was staffed throughout the Inauguration period and held regular conference calls with its members. Further, the HCRT quickly corrected a misstatement about DC hospital status generated by a federal partner that had the potential to caused widespread confusion. Similarly, the NVHA IAP established a schedule for daily conference calls among Northern Virginia hospitals from January 17 - 21. DC FEMS units were to be equipped with 800 MHz radios capable of communicating with NVHA member hospitals on the normal EMS channels used daily

by Northern Virginia EMS to communicate with hospital emergency departments. During the Inaugural Period, DC FEMS planned to use these same channels to communicate with Northern Virginia Hospital Alliance member emergency departments before arriving with a patient.

The Hospital Mutual Aid Radio System, operated by the DCHA, provided direct communications among NCR hospitals during the Inauguration. The MEMA CONOPS noted that the DC800 AOPS radio channel for hospital coordination would be used by the HECC to coordinate and communicate with all hospitals and primary care clinic operations centers. Additionally, a patient movement plan was established by the Maryland Institute for Emergency Medical Services Systems to coordinate pre-hospital patient triage, treatment, and movement of patients out of the District to Maryland hospitals. Finally, an Emergency Medical Resource Center Operator was to be posted with the DC FEMS Liaison Officer to assist with hospital status and patient distribution.

Recommendation:

1. NCR hospital and EMS partners should identify opportunities to institutionalize these processes in order to prepare the region for large-scale, no-notice events.

Observation 7.3: Strength: The establishment of aid stations on the National Mall, along the parade route, and at other locations during the Inauguration ensured that attendees had access to immediate medical care. The stations helped to reduce the number of EMS transports from the National Mall to hospitals.

Analysis: The size of the crowd attending Inaugural events combined with the prolonged time outdoors in very cold temperatures created the potential for a large number of people to seek medical assistance. Public messages disseminated prior to the Inauguration resulted in large crowds arriving on the National Mall and parade route on Inauguration Day much earlier than in previous years. The messages warned the public not to bring certain items that might have enabled them to cope with the cold temperatures. The closure of many buildings and commercial establishments limited the locations where Inauguration attendees could get warm, rest, drink, use restrooms, and shelter from the inclement weather. Attendees began assembling on the National Mall before aid stations opened. Consequently, DC FEMS began receiving calls requesting medical assistance from individuals who had been in the cold for several hours. These calls continued after aid stations opened and peaked from 10:00 am to 2:00 pm. HHS personnel staffed 16 NPS aid stations on the National Mall that provided ALS-level care to Inauguration attendees. In preparation for the anticipated crowds, HHS opened an additional aid station at the Hubert H. Humphrey Building staffed by medical personnel pre-staged as a reserve or contingency element. The Inauguration illustrated how security issues can drive crowd movement, behavior, and timing issues that affect how EMS and other life safety personnel move into and around the event area.

Recommendation:

1. The NCR should develop an improved method for credentialing health personnel who are assigned to secure areas to ensure that they are cleared quickly and in

place before crowds begin arriving. This should also include the dissemination of placards for vehicles that will operate in these areas.

Observation 7.4: Area for Improvement: Some planned aid stations on the National Mall or in the District either did not open or were unable to remain open for the duration of activities on Inauguration Day.

Analysis: First aid stations on the National Mall were staffed and supplied to provide on-site medical support to the attendees at the swearing-in ceremony and along the Inaugural Parade route. Plans specified that the aid stations would acquire all necessary supplies and equipment to fulfill their mission during the pre-event phase. The plans did not delineate re-supply procedures because planners did not anticipate that stations would require additional resources during the Inauguration period. The National Mall aid stations began opening at 7:30 am on Inauguration Day. However, crowds began forming lines to enter the National Mall as early as 4:00 am; operations centers began receiving reports of large crowds by 6:40 am.

The early arrival of crowds to the National Mall on Inauguration Day prevented some aid station staff from reaching their assigned locations in a timely manner. In some cases, staff could not get through the crowds to their assigned location until much later in the day. Despite these challenges, the stations treated over 700 people. The NPS and DOH paramedic teams and HHS ALS/ACLS medical providers were pressed into service to keep pace with the patient load at the open aid stations and, thus, could not respond to calls from the crowd. Consequently, the EMS transport system had to expand its role to serve as both a first response and a transport system. EMS units located on the National Mall responded to reports of hypothermia, chest pain, diabetes, and seizures. DC FEMS had anticipated this expansion and had placed a standby request for 110 ambulances from a FEMA contract. DC FEMS requested the activation of these resources through HSEMA. Within two hours, these resources were in service assisting with response and transport activities throughout the city and surrounding jurisdictions. These proved critical for maintaining a tactical reserve in the event of a catastrophic incident.

The combination of cold weather and crowding rapidly depleted available supplies at aid stations. Attempts to deliver supplies to the aid stations were hindered by road closures and the massive crowds surrounding the National Mall. Re-supply vehicles proceeded very slowly even with the assistance of law enforcement personnel. This proved to be an inconvenience on Inauguration Day; however, the situation might have become critical had there been inclement weather or an incident on the National Mall.

The use of cellular phones by Inauguration attendees dramatically increased the call volume to the EMS system. Cell phones also made it difficult for EMS personnel to locate emergencies because callers were often unable to describe their precise location. Further, many cell phone calls to 911 for assistance could not be reconciled, which resulted in numerous crews searching for patients who could not be located, as they were duplicates of other calls.

Recommendations:

1. R-ESF-8 should leverage planned work on transportation/crowd modeling to model crowd arrival patterns during special events. Security and public messaging should be coordinated to create a predicted crowd arrival pattern. All elements of the EMS system for Inaugurations and other special events must be in place hours before the predicted crowd arrival time.
2. Public health/medical care plans for large events should ensure that aid stations are open, staffed, weather-shielded, numbered, and visible to the public before large numbers of attendees assemble.
3. Aid stations established for Inaugurations or other special events must have access to power, fuel, and other essential resources throughout their entire operational period. R-ESF-7 and R-ESF-8, including DC FEMS and the American Red Cross, should include re-supply procedures in plans for aid stations during NSSEs and other special events.
4. DC FEMS and DC HSEMA should develop a GPS map of the National Mall to enhance response on the National Mall during Inaugurations and other special events. This information should be made available to the appropriate NCR and federal partners.
5. DC FEMS and other NCR EMS partners should develop plans to place larger numbers of ALS responders inside security perimeters during Inaugurations and special events.
6. DC FEMS, DC DOH, and NPS should reevaluate the assumption that NPS and DOH paramedic teams located at aid stations will be available to conduct first response activities. This review should assess the application of the concept during previous events.

Observation 7.5: Area for Improvement: Hospitals across the NCR lack a common terminology for communicating capacity.

Analysis: NCR hospitals do not share a common terminology to describe capacity status. This is due, in part, to differing guidelines or regulations established by their respective state regulating authority. Hospital and EMS officials throughout the NCR are very familiar with the different terms utilized by hospitals throughout the region. Hospitals use such varying terms as “Open, Special Diversion, and Closed;” “Green, Yellow, and Red;” and “Baseline, Stressed, and Overwhelmed” to describe their status. During the Inauguration, officials unfamiliar with the terminology disseminated an announcement predicated on an erroneous understanding of hospital status. NCR partners, including the HCRT, moved quickly to correct this misinformation. This incident illustrates how officials unfamiliar with the differing terminology may make erroneous assumptions and conclusions about hospital status. The DCEHC and other NCR partners have undertaken efforts to standardize hospital terminology throughout the region. Such efforts should continue, although there may be limits due to state requirements.

Recommendation:

1. NCR EMC should ensure that NCR jurisdictions and non-medical personnel are briefed on and familiar with the divergent terminology on hospital capacity. R-ESF-8 should also review existing statutory terminology requirements and assess the viability of synchronizing terminology across the NCR.

Observation 7.6: Strength: NCR hospitals implemented a range of measures to prepare for a surge of patients in the event of a mass casualty incident associated with the Inauguration.

Analysis: Hospitals across the NCR undertook a variety of measures to prepare for a large influx of patients associated with the Inauguration. The DCEHC worked with member organizations to support the “clearing of beds” to the maximum feasible extent in the days prior to the Inauguration. Many hospitals stationed additional clinical staff at their facilities in anticipation of potential transportation challenges. Hospitals stocked excess supplies out of concern that transportation problems may cause disruptions. Vendors often had to overcome a variety of obstacles to deliver supplies to hospitals during the Inauguration period. Overall, many NCR hospitals committed resources to prepare for a surge even though they were uncertain about whether they would receive reimbursement for their activities.

Recommendation:

1. NCR health and medical partners should seek opportunities to build upon the successful medical surge planning for the Inauguration.

Observation 7.7: Area for Improvement: The NCR lacked plans and procedures for credentialing medical services professionals to allow access to emergency routes and closed roads.

Analysis: Inaugural activities led to several road closures throughout the NCR (for more on this issue, see Observation 4.3). In many cases, hospitals pre-positioned staff the night before the Inauguration to avoid disrupted traffic patterns. This was costly for hospitals and, more importantly, would not have been a viable solution if surge staff were needed in the District since hospital vehicles were not allowed access through road closures.

Recommendation:

1. R-ESF-1, R-ESF-8, and R-ESF-13 should review and coordinate credentialing processes that allow access to closed roads during NSSEs.

Issue Area 8: Public Safety

Issue Summary: The USSS served as the federal agency with lead responsibility for Inauguration security planning. NCR partners contributed to the security planning process through subcommittees chaired by the USSS. During the Inauguration period, the USSS relied on NCR law enforcement personnel as well as National Guard personnel to assist with public safety operations and to ensure the safety of the large ingress and egress of attendees to the National Mall and surrounding area. While US Capitol Police controlled security of the Capitol

grounds, MPD and other NCR partners used a three-tiered approach to crowd management for the National Mall area.

Observation 8.1: Strength: The public safety demands of the Inauguration did not diminish the delivery of routine public safety services to NCR citizens.

Analysis: Routine public safety operations throughout the NCR continued smoothly during the Inauguration due to advance planning and successful public information campaigns. Many NCR jurisdictions experienced a low volume of emergency and law enforcement calls. Law enforcement personnel across the NCR maintained day-to-day service while monitoring Inauguration events and tracking personnel deployed to the District for Inaugural duties. Alexandria County had traffic control and parking control officers on standby in addition to their normal public safety operations. Public safety campaigns prior to the Inauguration kept residents and visitors informed about key issues such as road closures, National Mall entry points, aid station locations, and public transportation schedules. According to some participants, this contributed to the reduced demand for services during the Inauguration period.

Recommendation:

1. Public safety planners should identify opportunities to extend these successes to plans for short- or no-notice events that affect the entire region.

Observation 8.2: Area for Improvement: The fragmentation of crowd management responsibilities between federal and NCR partners contributed to crowd management challenges during the Inauguration period.

Analysis: Multiple entities have jurisdiction in the area surrounding the US Capitol, including MPD, USPP, and US Capitol Police. The number of entities with jurisdiction contributed to a disjointed approach to crowd planning for the swearing-in ceremony. Some NCR partners noted that various agencies did not adequately coordinate their operations for crowd management.

Planners assumed that many Inaugural attendees would remain on the National Mall after the swearing-in ceremony to watch the parade on the jumbotrons. Due to the cold weather, virtually all of the attendees dispersed from their locations on the National Mall within thirty minutes of the conclusion of the swearing-in ceremony. However, parade route security to the north and east of the National Mall restricted movement to the south and west. This rapid, but non-emergency, exodus of attendees, combined with road closures and other restricted areas posed potential dangers to Inaugural attendees. Many of the Inauguration attendees were unfamiliar with the downtown area and followed others around them. The lack of posted directions and limited law enforcement personnel contributed to the problems at the Metro stations and on the 14th St. Bridge.

In the absence of a major incident, NCR partners planned to restrict pedestrians from using the 14th St. Bridge. However, shortly after the swearing-in ceremony, pedestrians leaving the District for Virginia gained access to the vehicle travel lanes of the 14th Street Bridge. Approximately 1,000 pedestrians used the bridge, quickly overrunning police

resources and encountering vehicular traffic. Pedestrians flooded into I-395 travel lanes, which forced all vehicular traffic to stop for over an hour. MPD eventually diverted all pedestrian traffic away from the travel lanes and the Interstate.

Recommendation:

1. R-ESF-13, R-ESF-1, and federal partners should establish a crowd management subcommittee for future Inaugurations and other special events to develop a comprehensive approach to managing crowds, including the necessary plans and procedures, during Inaugurations. The crowd management subcommittee should work with mass evacuation planners to coordinate their respective planning efforts to ensure the orderly and safe dispersal of crowds across a range of scenarios.

Observation 8.3: Area for Improvement: Operational personnel had limited opportunities to become familiar with mass evacuation and crowd management plans. This contributed to confusion on the National Mall and disjointed on-the-ground messaging regarding crowd management on Inauguration Day.

Analysis: Several key public safety plans, including the MPD CONOPS, the DDOT Emergency Walk-Out Plan, and region-wide transportation and traffic plans were not finalized until the days immediately preceding the Inauguration (see Observation 2.5 and Inaugural Pedestrian Evacuation Routes map on the next page). The delay in finalizing these plans accorded operational personnel few opportunities to become familiar with the plans. The USSS and District conducted tabletop exercises on Inauguration plans. However, no exercises were conducted for operational personnel to practice and refine the crowd management plans.

Consequently, on Inauguration Day, law enforcement officers provided inconsistent or inaccurate information to Inaugural attendees. For example, public safety personnel unfamiliar with the post-swearing-in dispersal plan provided attendees conflicting information about road and Metro station closures, resulting in the spontaneous migration of pedestrians over the 14th Street Bridge.

Recommendation:

1. NCR public safety plans for special events should be completed with sufficient time such that operational personnel can become familiar with key aspects of the plan and their responsibilities. When possible, public safety personnel should receive training on mass evacuation, crowd management, and public information ahead of special events.

Issue Area 9: External Affairs

Issue Summary: The considerable attendance at the 2009 Inauguration required a coordinated, regional public information campaign to communicate critical data. R-ESF-15 coordinated the development of a pre-Inauguration public information campaign. The DC PIC Media and Public Affairs subcommittee took the lead role in public messaging for the District. At the same time, other NCR partners disseminated information relevant to their jurisdictions to both visitors and

residents. During the Inauguration period, state PIOs in EOCs and joint information centers (JIC) helped manage the distribution of external affairs information.

Observation 9.1: Strength: NCR partners developed a comprehensive public information campaign for distributing information about Inauguration activities and other critical information to the region's residents and visitors.

Analysis: The projected attendance at the 2009 Inauguration necessitated the development of a cogent and unified public information campaign to convey critical information to visitors and residents. R-ESF-15 partners organized a multi-faceted campaign that utilized traditional and non-traditional media outlets and platforms. NCR partners implemented unified guidelines as part of their external affairs strategy. The Interagency Communications Plan, for example, provided comprehensive public affairs and response guidance for all federal agencies involved in Inauguration security efforts. Facts for news releases, talking points, and regional contact names for use by all NCR jurisdictions were developed and distributed. Each NCR jurisdiction was responsible for issuing any additional information relevant to their jurisdictions. The Regional Incident Command and Coordination System was used throughout this process to communicate electronically to stakeholders and announce conference calls and WebEOC postings.

For the first time, NCR state and local governments linked their Web sites to DC's official Inauguration Web site (<http://www.inauguration.dc.gov>), which ensured that a common, unified message was communicated to the public. Television, radio, and print ads helped to ensure that residents and visitors were apprised of road closures, detours, security, and other important event-specific information. The District also employed Facebook and Twitter, Web-based communication networks, to disseminate updated public information about checkpoints, shuttles, and other issues.

Together, these processes yielded an educated public that utilized public transportation, was patient with traffic, and was prepared for the security measures on the National Mall and along the parade route. As one regional partner noted, "It appeared the information got to the public, and they listened."

Recommendation:

1. External affairs planners should identify opportunities to extend these successes to plans for short- or no-notice events that affect the entire region.

Observation 9.2: Area for Improvement: Public information efforts struggled to adapt to dynamic, on-the-ground changes on Inauguration Day.

Analysis: The massive crowds attending the Inaugural ceremonies on January 20 forced NCR jurisdictions to deviate from established plans and to modify their operations. At times, information about such changes, particularly related to transportation and crowd management, was not promptly communicated to NCR partners. Field personnel often lacked updated information about warming stations, gate locations, Metro station status, road closures, and other information. Further, the failure to disseminate this information to the crowds in the National Mall area contributed to confusion and congestion in areas such as the 3rd Street tunnel, the L'Enfant Plaza Metro station, and Union Station. The

failure to communicate this information exposed some Inauguration attendees to unnecessary risks. Another partner commented that multiple JICs activated by both federal and NCR partners may have contributed to confusion about disseminating this information on Inauguration Day.

Recommendations:

1. R-ESF-15 and R-ESF-13 should develop procedures for communicating critical public information to attendees during Inaugurations and other special events. These strategies should include methods for communicated to attendees en route to these events. These procedures should be a central element in the overall crowd management strategy for the special event.
2. R-ESF-15 and federal partners should review JIC coordination processes during Inaugurations and other special events. Partners should consider conducting a functional exercise to test public information processes during various types of incidents that could occur during an Inauguration or special event.

Issue Area 10: Volunteer and Donations Management

Issue Summary: Volunteers provided critical assistance to many NCR organizations throughout the Inauguration period. The contributions of volunteers enabled jurisdictions and agencies throughout the NCR to meet their obligations and helped to make the Inauguration a safe and successful event. However, neither the District nor the PICs established a subcommittee for volunteer management for the Inauguration. Serve DC took the lead role in the provision of volunteer services within the District during the Inaugural period. Many other NCR partners developed plans to utilize volunteers for preparedness and operations related to the Inauguration.

Observation 10.1: Strength: NCR partners utilized volunteers efficiently and effectively throughout the Inaugural period.

Analysis: Approximately 18,000 volunteers provided critical assistance to public safety, emergency response, and other operations in the NCR during the Inauguration. Volunteers assisted state and local partners throughout the NCR with such tasks as providing directions to visitors, directing pedestrian traffic and charter buses, and assisting medical officials in emergency shelters and aid stations as directed by the American Red Cross. The American Red Cross received direct or standby support from 13 Voluntary Organizations Active in Disaster members. MPD strategically placed “Information Ambassadors” to disseminate literature and verbal information on entry points, prohibited items, and locations of first aid stations. The American Red Cross also deployed more than 70 volunteers to help direct Inauguration attendees to first aid stations, Metro stations, and other services. DDOT site captains appropriately teamed volunteers not familiar with the District with experienced personnel. The Humane Society of the United States, together with a team of animal service organizations from across the region, supplied a mobile communications vehicle, emergency animal shelter facilities, and foot patrol teams. These resources provided logistical support for veterinary, DC DOH, and companion and service animal personnel. Community Emergency Response Teams (CERT) and Voluntary Organizations Active in Disasters in

Maryland and Virginia were prepared to provide additional volunteer support, if required.

Serve DC sponsored a training program that allowed R-ESF 16 partners to conduct the same training in their respective jurisdictions. This created a ripple effect of potential volunteers, information sharing, and knowledge of District activities during the Inauguration. One partner noted that some volunteers had such a positive experience with DDOT that they sought additional training, including as members of CERTs. Some partners noted that many volunteer coordinators were not properly informed of changes in plans regarding warming stations, road closures, Metro station closures, and gate locations and closures. One NCR partner noted that many volunteers went above and beyond their stated duties in certain situations that called for immediate action. The contributions of volunteers across the NCR enabled regional partners to meet their obligations to their citizens and out-of-town guests.

Recommendation:

1. R-ESF-16 should continue its efforts to develop an integrated, regional approach to recruiting, training, and utilizing volunteers for Inaugurations and special events. The NCR should examine opportunities to provide additional staff support to R-ESF-16.

Issue Area 11: Training

Issue Summary: NCR jurisdictions delivered a number of training programs for their staff members and volunteers in anticipation of Inauguration events.

Observation 11.1: *Strength:* Many NCR partners provided specialized training to their staff members and volunteers, which contributed to their overall effectiveness during the Inauguration.

Analysis: NCR partners provided critical training to their personnel in advance of the Inauguration. DC HSEMA delivered improvised explosive device awareness training for 1,038 personnel who would work at Inauguration events. WMATA conducted region-specific safety training for 143 police officers deployed from other regions. This training proved critical when a Houston transit police officer saved the life of a woman from Nashville, Tennessee, who fell onto the tracks at the Gallery Place – Chinatown station on January 20. WMATA also held a tabletop exercise that addressed several scenarios as part of its pre-Inauguration training. Serve DC trained volunteers on the latest NCR plans and other relevant information. Many emergency managers provided training on WebEOC for personnel scheduled to be deployed at their EOCs.

Recommendation:

1. The NCR ETOP and R-ESFs should evaluate opportunities to coordinate training for personnel and volunteers in advance of an Inauguration or other special event. This will help to promote a common understanding of operational activities among personnel during these events.

Observation 11.2: Area for Improvement: NCR partners lacked sufficient time and opportunities to train staff on regional CONOPS.

Analysis: The late completion of many Inauguration CONOPS and plans prevented NCR partners from developing and conducting training on those documents (see Observations 1.5 and 8.2 above). The DC HSEMA CONOPS was not finalized until days before the Inauguration. Consequently, DC HSEMA did not have the time to develop training on its CONOPS. Further, the late completion of many other NCR CONOPS and plans precluded regional officials from having the appropriate familiarity with, much less training on those documents.

Recommendation:

1. The NCR EMC should monitor the development of Inauguration CONOPS across the region and work with jurisdictions to ensure that training is developed and conducted. Depending on the completion timeline for CONOPS, training may include pre-event exercises and in-depth training or quick-study CONOPS primers.

SECTION 3: SUMMARY

The 2009 Inauguration constituted the largest event in the history of the nation's capital, which presented federal, state, regional, local, and non-governmental organizations with unique and complex challenges. This necessitated extensive planning in the areas of security, emergency management, transportation, mass care, public health and medical care, logistics, and other related areas. NCR partners had to prepare for millions of visitors, crowds at outdoor Inaugural events, cold weather, and other variables and contingencies. This resulted in unprecedented coordination among NCR partners in the areas of emergency planning, support, and response operations. These regional efforts contributed to a safe and peaceful 2009 Presidential Inauguration.

This regional AAR summary has identified opportunities for NCR partners to build upon their successes and further strengthen the region's preparedness and response capabilities. These recommendations will help prepare the NCR for the next inauguration as well as for other special events. Further, many of the recommendations will enhance overall regional preparedness and enable NCR partners to meet the challenges presented by short- or no-notice incidents. Finally, this regional AAR illustrates the continued dedication of NCR partners to addressing preparedness and response issues through regional cooperation and coordination.

APPENDIX A: ACRONYMS

Acronym	Meaning
AAR	After-Action Report
ACLS	Advanced Cardiac Life Support
ALS	Advanced Life Support
CapWIN	Capital Wireless Information Net
CAO	Chief Administrative Officers
CERT	Community Emergency Response Team
CMSC	Consequence Management Subcommittee
CONOPS	Concept of Operations
COP	Common Operating Picture
DC	District of Columbia
DCEHC	District of Columbia Emergency Healthcare Coalition
DCHA	District of Columbia Hospital Association
DDOT	District Department of Transportation
DHS	US Department of Homeland Security
DMAT	Disaster Medical Assistance Team
DOH	[District of Columbia] Department of Health
DPW	[District of Columbia] Department of Public Works
ELO	Emergency Liaison Officer
EMC	Emergency Managers Committee
EMS	Emergency Medical Services
EOC	Emergency Operations Center
EPC	Emergency Preparedness Council
ESF	Emergency Support Function
ETOP	Exercise and Training Operations Panel
FBI	Federal Bureau of Investigation
FEMA	Federal Emergency Management Agency
FEMS	Fire and Emergency Medical Services
GWMP	George Washington Memorial Parkway
HCRT	Healthcare Coalition Response Team
HECC	Health Emergency Coordination Center
HHS	US Department of Health and Human Services
HSEC	Homeland Security Executive Committee
HSEMA	Homeland Security and Emergency Management Agency
IAP	Incident Action Plan
IP	Improvement Plan
JCOMM	Joint Communications Interoperability Team
JIC	Joint Information Center
MACC	Multi-Agency Coordination Center
MEMA	Maryland Emergency Management Agency

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Acronym	Meaning
MOU	Memorandum of Understanding
MPD	Metropolitan Police Department
MWCOG	Metropolitan Washington Council of Governments
NCR	National Capital Region
NCRC	National Capital Region Coordination, Office of
NPSAC	National Public Safety Advisory Committee
NSSE	National Special Security Event
NVHA	Northern Virginia Hospital Alliance
OCTO	Office of the Chief Technology Officer
OUC	Office of Unified Communications
PIC	Presidential Inaugural Committee
R-ESF	Regional Emergency Support Function
SPG	Senior Policy Group
USPP	United States Park Police
USSS	United States Secret Service
VDOT	Virginia Department of Transportation
VDRPT	Virginia Department of Rail and Public Transportation
VRE	Virginia Railway Express
VSP	Virginia State Police
WMATA	Washington Metropolitan Area Transit Authority
WPS	Wireless Priority System