

# **Joint Readiness Center – Pittsburgh: A Model of Military-Civilian Readiness And Response**

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Established by a decision of the Base Realignment and Closure Commission in 2005, the Joint Readiness Center located at the Air Reserve Station at Pittsburgh was identified by the Department of Defense as a Center of Excellence in integrating civilian medical and business resources with military assets to provide unique, flexible and effective emergency preparedness, response and recovery to the nation. Supported by a community organization, known as the Joint Readiness Center Task Force (JRC Task Force), the JRC concept is a national model for homeland security and homeland defense and is consistent with the dictates of the U.S. National Response Plan and U.S. National Incident Management System.

The objective of the JRC is to improve the nation's response to natural or human-caused disasters by combining the strengths of the active duty, reserve, and guard components of the military, including the five armed services; federal, state, and local government agencies such as the Federal Emergency Management Administration, National Disaster Medical System, Disaster Medical Assistance Team, Pennsylvania Emergency Management Agency; civilian practitioners skilled in disaster management; and the Pittsburgh region's extensive healthcare resources.

This article examines the history of the JRC in light of the actions of the Base Realignment and Closure Commission, public perceptions of civil-military preparedness, the benefits of the JRC to Pittsburgh and the nation, and its evolving role.

## History

The Military Affairs Council of Western Pennsylvania (MAC) was created in 2000 to recognize the importance that the 171<sup>st</sup> Air Refueling Wing of the Pennsylvania Air National Guard (ANG), the 911<sup>th</sup> Tactical Airlift Wing stationed at the Pittsburgh Air Reserve Station (ARS), and the 99<sup>th</sup> Regional Readiness Command (RRC), and all local military installations contribute to the overall well-being of the 10-county Pittsburgh region's economic and quality of life climate. MAC's mission is to enhance the importance of the military presence in the Pittsburgh region and strive to facilitate, communicate, and cooperate with military units, surrounding communities, businesses, colleges and universities, and governments. The goal is to connect the community and military in symbiotic partnership through:

- Increasing public knowledge of the contributions made by the Pittsburgh region's military units, which have global, national, and regional impacts.
- Bringing attention to the community-wide support and pride for the Pittsburgh region's local military units, through campaigning, lobbying, advertising, and special events.

In late 2004, the MAC undertook a proactive initiative in developing a regional strategy to protect and enhance the Pittsburgh region's defense community in anticipation of the May 2005 report by the U.S. Department of Defense (DOD) recommending the closure or realignment of military bases across the globe. It was critical for the community to take this stance in support of the Pittsburgh region's military bases, personnel, and related economic impact on the surrounding communities. To assist in crafting the MAC plan, grant funding was secured from the Pennsylvania Department of Community and Economic Development to pay for a study to:

- Develop the concept of a Regional Joint Readiness Center, integrating civil-military operations, homeland security, and community-based medical support;
- Explore consolidation of existing military and defense entities within the Pittsburgh region to a location at the Pittsburgh International Airport;

- Identify properties for further development in the immediate and surrounding areas of the airport; and
- Create a public affairs strategy and implementation plan.

Recognizing the role Pittsburgh could play as the keystone in the country's homeland security and homeland defense future, the report outlined a plan to build on the region's military assets, creating a vital daily operational resource for coordinated, multi-agency multi-jurisdictional disaster response. The study resulted in a plan for the creation of the country's first civilian-military Joint Readiness Center, building on the Pittsburgh region's military presence as the core.

### **Base Realignment and Closure Commission Action**

After the MAC study was completed in May 2004, the community braced itself as DOD released its plan for realignment and closure of military installations. DOD's report recommended the closure of 33 major bases across the country, and further recommended that an additional 29 be downsized ([www.defenselink.mil/brac/pdf/Appendix\\_C\\_Final\\_Updated.pdf](http://www.defenselink.mil/brac/pdf/Appendix_C_Final_Updated.pdf)). In Pennsylvania, 13 installations were targeted for closure or realignment, including Air Force Reserve's 911<sup>th</sup> Airlift Wing, near Pittsburgh International Airport in Moon Township, Allegheny County. The 911<sup>th</sup>'s eight C-130s would be moved to Pope Air Force Base near Fort Bragg, North Carolina, and combined with eight others to build a new squadron (U.S. Department of Defense, Base Closure and Realignment Report, May 2005, Department of Air Force, p. 35). Army Reserve's 99<sup>th</sup> Regional Readiness Command, along Business Route 60 in Moon Township, Allegheny County, would be one of four reserve headquarters consolidated at Fort Dix, New Jersey. The Army's Charles E. Kelly Support Center, Oakdale and Neville Island, as well as a site in Collier, Allegheny County, would be closed (U.S. Department of Defense, Base Closure and Realignment Report, May 2005, Department of Army, p. 120).

With the DOD plan outlined, the MAC led the charge to rally community support to save the local installations. Pennsylvania Governor Edward G. Rendell approached MAC to engage the organization in fighting to preserve the local military presence, and named co-chairs for the effort: Allegheny County Chief Executive Dan

Onorato and Michael Langley, CEO of the Allegheny Conference on Community Development. MAC created a community organization for the effort named the Pittsburgh-Base Realignment and Closure Committee (PIT-BRAC). Through PIT-BRAC and the participation of hundreds of community leaders and volunteers from across the Pittsburgh region, an effort came together to pour through the data used by DOD to make its May 2005 base closure and realignment recommendations. PIT-BRAC staff and volunteers identified errors and misinformation in the DOD analysis, rallied public support for the Pittsburgh region's military during meetings and events; provided formal testimony before the Presidentially-appointed Base Realignment and Closure Commission (BRAC Commission); and communicated regularly with BRAC Commission staff reviewing the DOD recommendations. In addition to advocacy aimed at keeping the existing military installations open, the PIT-BRAC Task Force recommended creation of a Joint Readiness Center and linking the Joint Readiness Center concept to the operations at the Pittsburgh Air Reserve Station.

On September 9, 2005, the BRAC Commission completed months of hearings and deliberations on the DOD recommendations and submitted its final report to President Bush. The BRAC Commission recommendations were accepted by the White House and ultimately upheld by Congress in November of 2005. In regard to the Pittsburgh region, the approved plan included:

- Realignment of the 99<sup>th</sup> Regional Readiness Command, Coraopolis, to Fort Dix, New Jersey;
- Closure of Charles E. Kelly Support Facility, Oakdale and Neville Island, Allegheny County, Pennsylvania, and relocate units to Pitt U.S. Army Reserve Center, Coraopolis, Allegheny County, Pennsylvania (2005 Defense Base Closure and Realignment Commission Report, Volume One, Department of the Army, p. 70);
- Realignment of the Pittsburgh International Airport (IAP) Air Reserve Station (ARS), Pennsylvania. "Establish a contiguous enclave at the Pittsburgh ARS, Pennsylvania, sufficient to support continued operations of the reserve station units, including flight operations, and compatible with combined use of the civilian airport by the Air Reserve, Air National Guard, and civilian users. Within that enclave, establish a Regional Joint Readiness Center (RJRC) at

the Pittsburgh International Air Station with the mission of providing civil-military operations, homeland security, and community-based medical support to the Department of Defense and the Department of Homeland Security National Incident Management Plan and the National Incident Response Plan. The enclave and RJRC will be staffed at the current manning level of the ARS. The PAA and personnel allocation of Air National Guard units at Pittsburgh are unaffected by this recommendation.” (2005 Defense Base Closure & Realignment Commission Report, Volume One, Department of the Air Force, pp. 150, 151.)

With the final report as law, DOD has up to five years, or until 2011, to implement the commission recommendations.

### **Public Perception of Civil-Military Preparedness**

The September 11, 2001, terrorist attacks, along with Hurricane Katrina, and recent threats of pandemic disease outbreaks, have raised awareness and concern among the general public related to federal, state, and local government's ability to respond to terrorist events, natural disasters, and health emergencies. As a result, all levels of government are undertaking efforts to ensure that plans exist and are integrated for responding to natural or man-made disasters.

The White House, in the report *The Federal Response to Hurricane Katrina: Lessons Learned*, identified four critical flaws in national preparedness: the absence of a process for unified management of the national response; lack of command and control structures within the federal government; lack of knowledge of preparedness plans; and an absence of regional planning and coordination. (The White House, *The Federal Response to Hurricane Katrina: Lessons Learned*, p. 90.) These findings point out the need for an organization such as the Joint Readiness Center and clearly support the role it can play. The JRC maximizes the skills and strengths of the Pittsburgh region to respond to almost any incident. Focusing on the strengths of the public and private sectors in the Pittsburgh region, and integrating and enhancing that capacity from the bottom up, would create a resource able to provide a more timely response to incidents, along with the needed command, control, communication, and coordination capability.

To assist the federal partners in the development of an implementation plan, the PIT-BRAC Task Force evolved into another community effort led by Allegheny County Executive Onorato and Allegheny Conference CEO Langley as co-chairs, with the involvement of private sector partners, community leaders, and volunteers. Known as the Joint Readiness Center Task Force (JRC Task Force), the group has been working since November of 2005 to build this first-of-its-kind national model for homeland security and homeland defense, in support of the National Response Plan (NRP) (<http://www.fema.gov/emergency/nims/index.shtm>) and National Incident Management System (NIMS) ([http://www.dhs.gov/xprepresp/committees/editorial\\_0566.shtm](http://www.dhs.gov/xprepresp/committees/editorial_0566.shtm)).

Working in collaboration with the private, academic, and institutional sectors, along with federal, state, and local government agencies, the JRC Task Force developed a vision of the BRAC-mandated JRC. The mission of the JRC is to support the Departments of Defense, Homeland Security, and Health and Human Services, other federal, state, and local organizations in transcending jurisdictional borders to build on existing capabilities and provide for more effective, synchronized, and collaborative regional readiness, with a special focus on medical emergency management and corporate response. The objectives of the JRC are to optimize military, civilian, public, and private collaboration; coordinate emergency response; facilitate rapid mobilization; integrate community based education and training; model operations as a “Center of Excellence” focused on the delivery of world-class medical care and business continuity support; and create a national paradigm.

### **Qualitative Improvements through JRC**

The JRC aims to improve the nation's disaster readiness, response, and recovery by combining the strengths of the military, including the active duty, reserve, and guard components of the five armed services; local, county, state, and other federal government agencies such as the Federal Emergency Management Administration (FEMA), NDMS (National Disaster Medical System), DMAT (Disaster Medical Assistance Team), Pennsylvania Emergency Management Agency (PEMA) and civilian counterparts skilled in disaster management; and the Pittsburgh region's extensive healthcare resources. This group of experienced and talented individuals will serve as a center of excellence

that will jointly train, prepare, and be available to coordinate appropriate resources for rapid deployment, and respond and provide support to hazards of all kinds, including both man-made and natural.

A key component of the JRC program is to bring these diverse groups of talented and experienced people together on a day-to-day basis, even if only virtually, to ingrain in them this collaborative and cooperative approach so that it is second nature. This day-to-day interaction will prepare the various groups to cooperate at a level not experienced during prior disasters. Although the majority of these response groups may not be physically located day-to-day in the JRC, the center will be able to serve as a command, control, and coordination point for all-hazard response assets within the Pittsburgh region, state, nation, and beyond.

In order to prepare individuals for these roles, new training programs encompassing a variety of clinical and educational disciplines will be established. The development of training programs will utilize the unique partnership among military leaders, Pittsburgh region health care providers, and educators to craft programs ensuring participants possess the necessary skills sets and competencies to protect our citizens. Also key to this transformation will be the development and execution of realistic drills and exercises, which will again allow the personnel of the JRC to develop the working relationships that will allow them to succeed.

This unique level of interoperability among military, government, and civilian agencies is currently non-existent at the national level, and will become a model program for the country. In support of developing this national model, the JRC will provide consultation and training to groups across the United States, in effect multiplying the JRC's response capabilities.

### **Defining the JRC**

The JRC will serve two main operational roles in response to natural or man-made disaster situations. The first is to coordinate and transport deployable equipment and trained personnel to the on-scene incident commander at the site of a major disaster. Tailored to each situation, the type and amount of this response will bring much needed resources to

help care for patients at the disaster site. The second JRC operational role is to act as a receiving point to triage and distribute disaster victims to appropriate health care facilities. On a small scale, this will be completed independent of the NDMS system. On a larger scale, the JRC would integrate with NDMS plans and would be a lead asset in a large-scale evacuation.

An example of a mission performed by the JRC in its operational role would be in response to a natural disaster or terrorism event located outside the Pittsburgh region. This would involve transporting air assets, medical crews, aircraft maintenance supplies and equipment, and medical supplies to the disaster area. The nature and size of the event will dictate the number of resources sent to the area. The following is one possible deployment scenario:

- Civilian aeromedical helicopters are dispatched to the disaster area. Each will be sent with two complete crews, and thus be capable of 24 hour operation. Although it is possible that these helicopters could be broken down and placed on military aircraft, the difficulty in accomplishing this in a short period negates any time savings due to the shorter flight times and higher speed of military transport aircraft.
- Additional aeromedical evacuation (AE) crews and physicians and nurses, along with enough food, water, and medical supplies to make the “unit” self sufficient, are dispatched via military airlift. If possible, living quarters will be transported to the area.
- Additional 911<sup>th</sup> C130 aircraft and 171<sup>st</sup> KC135 aircraft are dispatched to the disaster scene as needed. These will be staffed with AE crews from the 911<sup>th</sup> (or other AF Reserve units), supplemented with medical attendants from area helicopter crews, and physicians and nurses from local medical centers.
- At the disaster area, helicopter crews will perform evacuation of ill and injured persons. Due to design limitations, there will be no rescues conducted requiring hoists. These patients will be transported to a Mobile Aeromedical Staging Facility.
- Mobile Aeromedical Staging Facilities (MASFs) can be erected and jointly staffed by Air Force medical personnel, and civilian helicopter crews, physicians, and nurses. These staging units are



capable of triaging, stabilizing, and staging patients for medical evacuation to tertiary care centers.

- Military airlift will transport the patients back to the Pittsburgh area for triage to the appropriate medical facility. Transport to these hospitals can be accomplished by helicopter or ground ambulance.
- Depending on the size and nature of the event, military airlift could be used to transport and support specialized medical and scientific experts from area hospitals. For example, there may be the need for specialists in infectious disease, immunology, and microbiology for the management of health conditions related to a bioterrorism event. Or, medical and other experts would be needed for mitigating and treating the effects of a radiation release event.

The JRC will also serve a major role in disaster preparedness and planning, and in developing the nation's joint military and civilian response capability. One major component of this role will be providing comprehensive, combined training and joint exercises for military, medical, and civilian personnel, including first responders and first receivers from across the Pittsburgh region. This total training system will make the Pittsburgh region more prepared for a national response by creating a joint pool of skilled personnel. It will also expose disaster response personnel from around the country to the JRC's model disaster response capabilities.

### **JRC: National Medical and Business Resource**

Pittsburgh is unique in its ability to serve as a center of excellence for medically related disaster response. The Pittsburgh region is home to some of the nation's most advanced tertiary and academic medical centers and offers expertise in long-term acute care, as well as healthcare. In Allegheny County alone, there are 43 hospitals with 9,031 staffed beds. These hospitals host four Level I Trauma Centers (three adult and one pediatric), two burn centers, two comprehensive transplant programs, and multiple open-heart surgery programs. Through the Pittsburgh region's many teaching and research programs, and its world class academic medical center, these healthcare systems have vast experience in assisting areas around the world in improving their medical care systems. This experience is a major asset in the development of the

JRC model, and in assisting other communities in developing and upgrading the response capabilities of medical resources.

The NDMS is a federal initiative that is governed by the Emergency Management Strategic Health Group (EMSHG) and is intended to provide a nationwide, coordinated response of emergency medical services in the case of a disaster of great magnitude. The system is a cooperative effort of the Department of Health and Human Services, (HHS), DOD, FEMA, Department of Veterans Affairs, state and local governments, and the private sector. The NDMS does not replace existing emergency medical activities, but rather is intended to complement state and local efforts in the case of a disaster that is so widespread, that “mutual aid” from different areas of the nation is required. NDMS responds to “national” disasters both here in the United States and internationally, and is totally supported by the military for transportation, medical evacuation, and security.

The Pittsburgh region is designated as one of just 70 federally coordinated NDMS sites in the nation. Geographically, the region includes southwest Pennsylvania and northern West Virginia. Most of the hospitals, EMS groups, and other local and regional agencies are dedicated participants in the NDMS program. Once alerted of a national disaster scenario, the functions of the Pittsburgh NDMS area will be to: deploy its Disaster Medical Assistance Teams (DMAT) if necessary; receive casualties via air evacuation flights and transport to appropriate medical facilities; provide definitive hospital treatment to casualties; and finally, maintain communications within the area and with the Global Patient Movement Requirements Center (GPMRC) regarding the status of patients and the availability of hospital beds.

While the Pittsburgh area NDMS has been developed specifically to lend support during a national crisis, its basic elements are intended to be useful for implementation during local or statewide emergencies as well. The Pittsburgh area NDMS can also be utilized to evacuate patients from the tri-state area to other NDMS reception sites in cases of manmade or natural disasters affecting local communities. Regardless of the kind of disaster, or the manner used to activate the system, the NDMS is flexible enough to provide for effective medical response under most disaster scenarios. The complete NDMS program has been exercised annually in the Pittsburgh Region since its inception.

The JRC has a unique link with local, regional, and national companies based in the Pittsburgh region. Through this link, not only are these resources available to respond to a national disaster situation, but also the combined resources of these companies serve as a national model for business preparedness. These businesses are represented by the Pittsburgh Regional Business Coalition for Homeland Security (PRBCHS). The Coalition is dedicated to assisting businesses as they prepare for, respond to, and recover from natural disasters, technological disasters, or terror attacks. The PRBCHS also serves as a vital link between the public and private sectors in the Pittsburgh region and their pursuit of common goals and mutual assistance. In addition to developing resources for disaster recovery for its members, one of the first tasks the group undertook was the development of a regional asset list for the Pennsylvania Region 13 Command Center, so that available business assets could be easily located and used in a disaster situation.

### **Pittsburgh Location Adds Value to the JRC and Benefits to the Nation**

Through preliminary discussions with the federal government partners, there is current thought of replicating the JRC model nationally, creating a network of JRC-like capability centers to address the 15 threat scenarios outlined by the NDMS. The Pittsburgh region and Commonwealth of Pennsylvania have a unique opportunity to be the first of the network of JRCs to be implemented. As recognized by the federal partners, Pittsburgh is a valued location as a home to the first JRC.

- The Air Reserve Station located at Pittsburgh International Airport provides a high level of physical security as a location for a JRC.
- The airport is accessible by a superior highway system, and a precision instrumented, multi-runway airport, with the longest being 11,500 feet. A reliever field is only 16.1 nautical miles away, with a maximum runway length of 6,501 feet.
- The climate in the Pittsburgh region is not subject to extremes, permitting year-round operations, and 24/7/365 availability for operations.
- The site is located within 500 miles, or a two-hour flight, of 55% of the population of the United States, including the major metropolitan

areas of Washington, DC; New York City; Chicago; and Philadelphia.

- The emergency response capabilities and resources of Pennsylvania Region 13 have matured to the point that work on the JRC can begin immediately and progress rapidly.
- Pittsburgh is home to some of the nation's most advanced tertiary and academic medical centers and offers expertise in long-term acute care as well as healthcare.
- The Pittsburgh Regional Business Coalition for Homeland Security can serve as a catalyst to build network of private sectors to aid at times of emergency.

These attributes position the Pittsburgh region and Commonwealth of Pennsylvania as the perfect location for the JRC and can assist in making it the model of excellence in providing readiness, response, and recovery service to meet the homeland security needs that currently exist in our country. This designation would bring national recognition, create new job opportunities for residents, and lead to new capital investment.

The JRC is positioned to provide a wide range of benefits to the nation and to communities where it is located. By design, it provides support for incident preparedness, response, and recovery activities. As mentioned above, its location facilitates rapid movement of resources to an incident site, or evacuation of victims from that site. As a collaborative model, it allows for seamless integration of private sector medical and business resources to deploy as an incident response tool. And most critically, it serves as a hub for the interaction of civilian and military assets as they prepare for, respond to, and recover from, natural or man-made disasters.

As mentioned in previous sections, the JRC conducts programs that support emergency preparedness, response, and recovery activities. As a center devoted to civilian-military integrated effort, the JRC offers a unique training environment capable of replicating actual conditions where resources from a variety of sources combine to address a crisis. Cooperative preparedness training builds relationships and refines protocols that translate into more timely and effective response to natural or man made incidents. Additionally, by identifying civilian medical and business expertise and resources – and training in an integrated fashion

to work seamlessly with government and military assets – more rapid, effective, and efficient recovery efforts can be provided to affected areas.

The JRC’s Pittsburgh location, noted above, places it proximate to large eastern, mid-Atlantic and midwest population centers. This location facilitates rapid movement of resources to an incident site. In addition, this location allows for the rapid evacuation of victims from incident sites and ready access to the more than seventy hospitals in the region.

As a center of excellence for the integration of medical and business civilian resources with public assets to prepare for, respond to, and recover from emergencies, the JRC serves as an incubator for protocols and processes that other joint centers can utilize in developing approaches bringing together private and public sector assets. Successful development of the JRC “practice” will allow for a better prepared and more responsive resource available in emergencies, and provide for faster recovery of communities impacted by natural or man-made disasters.

Crafting a seamless, integrated, civilian and military joint resource will provide for a better-prepared and more responsive asset. In the end, the success of the JRC will be measured by the many lives saved, property protected, and communities returned to normal. These results will be achieved through the development and full implementation of the JRC’s innovative national model for preparedness, recovery, and response.

### **Next Steps**

Realizing the full potential of the JRC will take a strong collaborative between community and DOD/DHS leadership; funding for continued program development and operations; and ultimately the allocation of sufficient resources to build, man, and operate the JRC. The beginnings of an effective collaborative between the community and DOD/DHS leadership are already in place. Briefings and leadership interaction has occurred in Pittsburgh, in Washington, DC, and in the many locations where key Homeland Security and Homeland Defense commands are headquartered. These sessions must not only continue, but must continually broaden and deepen to allow full discussion of issues associated with JRC establishment.

Funding to provide support for JRC concept development, research, and outreach efforts has been supplied by local business and from the Commonwealth of Pennsylvania. Further funding is necessary to support the next phase of JRC program design and development. While local resources can provide a significant amount of resource for the JRC, these local contributions can only supplement, not supplant, federal funding necessary to finish development of the JRC concept. Finally, federal resources are necessary to actually establish the JRC and implement its programs. While community resources and state support can add up to significant assistance, only a commitment of federal manpower and funding resources will allow a well-crafted, fully functional, and effective and efficient JRC to become reality.