

Second Meeting  
Geneva, 6-10 December 2004

Meeting of Experts  
Geneva, 19-30 July 2004  
Items 5 and 6 of the agenda

**Existing mechanisms for responding to and mitigating the effects of cases  
of alleged use of biological or toxin weapons or suspicious outbreaks of  
infectious human diseases in Italy**

**Submitted by Italy**

**I. Response to cases of alleged use of biological or toxin weapons or suspicious outbreaks  
of infectious human diseases within the Italian territory**

**A. General coordination**

1. Since 2003 - following the increased danger that terrorist organisations may acquire biological and toxin weapons - the Head of the Department for Civil Protection of the Presidency of the Council of Ministers has the power to promptly adopt all necessary initiatives aimed at minimising damages to public health caused by terrorist activities.

2. To this end, the Head of the Department for Civil Protection, inter alia:

- (i) Defines emergency plans identifying relevant medical interventions related to possible chemical, biological, nuclear and radiological contamination;
- (ii) Identifies administrative procedures aimed at gathering relevant information needed in order to timely implement emergency plans;
- (iii) Drafts information plans with relevant guidelines for public and private structures potentially involved in emergency situations caused by the intentional release of biological agents.

3. In particular, the Head of the Department for Civil Protection - based on indications provided by ad hoc planning of the Ministry of Health - adopts all necessary initiatives aimed at detecting and preventing potential risks caused by the intentional release of biological agents.
4. To this specific end, the Head of the Department for Civil Protection, inter alia:
  - (i) Defines plans for extraordinary deployment of medical staff in airports or in other structures of transit of persons and goods;
  - (ii) Provides so that staff operating in airports or in other transit structures be adequately equipped to ensure effective prevention and protection from possible infectious outbreaks;
  - (iii) Identifies and orders the adoption of health verification procedures on persons or goods aimed at detecting potential risk situations;
  - (iv) Determines the strengthening of the National Institute for infectious diseases "Lazzaro Spallanzani" in Rome and of the hospital "Luigi Sacco" in Milan.
5. Finally, the Head of the Department for Civil Protection has the power to:
  - (i) Request air companies as well as shipping and delivery companies to provide, within 24 hours, all information on passengers and goods traffics that could be relevant in order to prevent or detect biological attacks;
  - (ii) Deny the use of Italian airports to air traffic involving countries that do not adopt effective measures aimed at ensuring appropriate health controls.

## **B. Risk assessment**

6. In March 2002, the Italian President of the Council of Ministers - responsible for national security - has established the "Committee for risk assessment related to the terrorist use of Nuclear, Radiological, Chemical and Biological technologies" in order to effectively respond to the increased threat by organised terrorism.
7. The Committee is tasked to elaborate and update an overview on the proliferation of biological agents that could be potentially used as means of aggression, in order to identify and address security requirements and priorities in this sector.
8. The Committee, chaired by a Secretary-General, is composed of representatives of the Ministries of Defence, Health, and Interior, of the Department for Civil Protection and of representatives of intelligence services. In connection with specific items, experts belonging to other national administrations can also attend the Committee's works.

9. The Committee supports relevant national authorities in establishing procedures and methodologies to improve collaboration in strategic threat assessment, with a view to preventing or mitigating potential attacks through identifying threat and vulnerability priorities.
10. The Committee evaluates potential risks taking into consideration capabilities and intentions of individuals or groups that could pursue terrorist activities. For the evaluation of the biological risk, the Committee has decided to adopt the list of the biological agents of the CDC (Atlanta), and has established nine “objective” criteria, each one defined by a set of different parameters.
11. The latter have been jointly elaborated by a “technical sub-Committee”, that rated them according to numerical values, appropriately weighted. The above criteria included: the availability of the biological agent, manageability, production, dissemination, transmissibility, illness, lethality, health-care resources and impact.
12. The average of values attributed to each objective criterion has been eventually combined with the one elaborated by the intelligence sources.
13. This system allowed for a ranked assessment of risk for each considered biological agent; consequently, some of them have been identified as potential “agents of choice” for terrorists. That provided a useful guidance to competent national administrations in drafting emergency response plans related to possible BW attacks.
14. The Committee, periodically or on request of its members, reviews its evaluations in the light of new relevant developments or intelligence information.

### **C. Operational frameworks**

#### **(a) Operational structures and procedures**

15. In order to effectively counter potential threat to public security and health caused by possible intentional release of biological pathogens and toxins, the Italian Presidency of the Council of Ministers has drafted a “National Defence Plan against chemical, biological and radiological terrorist attacks”.
16. The Plan, that is consistent with similar initiatives adopted within the European Union and NATO:
- (i) Determines the national chain of command to be activated in cases of biological attacks;
  - (ii) Defines competence and tasks of relevant ministries involved (mainly the Ministry of Interior, the Ministry of Health and the Ministry of Defence).

17. The National Plan identifies the following institutions in charge of policy decision-making:

- (i) The President of the Council of Ministers;
- (ii) The Council of Ministers;
- (iii) The Political-Strategic Committee (Co.P.S.), composed of the President of the Council and of Ministers of Foreign Affairs, Defence and Interior.

18. The national coordinating institution for the Plan implementation is the “Political-Military Crisis Team” (N.P.M.), currently chaired by the Military Counsellor of the President of the Council, that is composed of representatives from Ministries of Foreign Affairs, Defence and Interior, from the intelligence services and from the Department for Civil Protection.

19. In emergency situations, the “Political-Military Crisis Team” activates the “Inter-ministerial Technical Committee for Civil Defence” (C.I.T.D.C.), established at the Ministry of Interior and responsible for coordinating operations at the central level.

20. At the local level, the coordination of civil defence activities is entrusted to the provincial administrative authority (the “Prefect”).

21. Upon notification of a potential BW attack at the local level - provided either by the ordinary national epidemiological surveillance network or by intelligence sources - the Prefect immediately informs the Presidency of the Council of Ministers and the Ministry of Interior, that activates C.I.T.D.C. In that framework, the Ministry of Defence evaluates whether it is necessary to deploy relevant military assets.

22. Ministry of Interior’s “National Fire-fighters Brigade” is responsible for the emergency intervention, assisted if necessary by security and armed forces.

23. The “National Fire-fighters Brigade” handles emergencies caused by the release of biological agents with three different operational structures:

- (i) “*Basic squad*” of first intervention, at the level of Provincial Headquarters;
- (ii) *Provincial experts*, present in each Provincial Headquarters;
- (iii) “*Regional Operational NBC Unit*”, present at the level of regional administrative authority (“Regione”).

24. Members of the “National Fire-fighters Brigade” have been specifically trained in order to timely and effectively identify and classify NBC-related crisis. To this end, they adopt an approach articulated in eight steps:

- (i) Site control and management;
- (ii) Identification of involved material;
- (iii) Risk assessment;
- (iv) Evaluation of required protective equipment;
- (v) Information and resources coordination;
- (vi) Control, confinement and containment of the biological agent;
- (vii) Decontamination;
- (viii) End of the intervention.

25. Since the beginning of the intervention, security forces isolate and interdict access to the infected area. Interdiction - determined according to characteristics of the biological agent involved, once the latter determined - will imply a prohibition to either access or leave the above areas.

26. Exposed persons will undergo medical surveillance and post exposure prophylaxis according to operational descending plans previously drafted by the Ministry of Health.

**(b) Operational descending plans**

27. In accordance with the general guidelines of the National Defence Plan, the ministries - Defence, Health, Interior - more directly involved in emergency response to potential biological attacks have eventually drafted descending implementation plans for their respective sectors of activity.

28. In line with the conclusion of the Atlanta CDC Working Group, the WHO publication “Health Aspects of Biological and Chemical Weapons” and with the national “Committee for risk assessment related to the terrorist use of Nuclear, Radiological, Chemical and Biological technologies”, those plans take into consideration biological agents most likely to be used for terrorist activities.

29. Descending plans are based on the adoption of:
- (i) *Preventive measures*, aimed at preparing and enhancing national response capabilities in pre-crisis situations;
  - (ii) *Surveillance measures* (to be activated if strong evidence indicates that a biological attack becomes imminent or unusual infectious events occur), aimed at strengthening controls and adopting further emergency measures to effectively minimise potential damages caused by the expected event;
  - (iii) *Assistance, treatment and stabilisation measures*, aimed at:
    - (a) Restoring normal health conditions of people exposed to biological agents;
    - (b) Decontaminating infected environment;
    - (c) Containing and neutralizing remaining risks.
30. *Preventive measures* include, inter alia:
- (i) Intensified information sharing and cooperation with foreign partners and competent International Organisations in the field of epidemiological surveillance, mutual emergency assistance, control of biological dual use goods and technology trade;
  - (ii) Enhanced intelligence activities;
  - (iii) Planning and preparation of resources and assets necessary to respond to biological attacks (identification of medical infrastructures to hospitalise and quarantine infected patients, adequate stockpiling of relevant vaccines, medicines and protective equipment, allocation of dedicated transport units);
  - (iv) Preparation of plans and structures for environmental decontamination;
  - (v) Promotion of research and development initiatives in the specific sector (biological agents early detection systems, environmental monitoring, new vaccine development, verification of decontaminating products' effectiveness);
  - (vi) Establishment of epidemiological surveillance networks;
  - (vii) Adoption of ordinary measures to ensure safety against BW attacks in public areas;
  - (viii) Development of civilian and military programs for airlift assistance and evacuation;

- (ix) Identification of alternative, adequately protected structures for institutional activities;
- (x) Staff training;
- (xi) Updating of relevant emergency plans (including studies on relevant biological agents and related diagnosis, prophylaxis and decontamination techniques);
- (xii) Primary prophylaxis for operators potentially exposed to biological contamination.

31. *Surveillance measures include:*

- (i) Activation of institutional links between operational centres of ministries (Defence, Interior) directly involved in BW emergency response;
- (ii) Enhanced exchange of information with foreign partners on possible biological attacks;
- (iii) Activation - at the central, regional and local level - of civilian and military health and medical structure of epidemiological surveillance;
- (iv) Enhanced surveillance and protection of potential sensitive targets;
- (v) Definition of specific protocols for intervention in different scenario, including the deployment of epidemiological-laboratory mobile teams;
- (vi) Adoption of measures of post-exposure prophylaxis, containment and screening;
- (vii) Deployment, in key points of the Italian territory, of mobile structures for decontamination of persons exposed to BW attacks;
- (viii) Decontamination interventions on infected materials or environments;
- (ix) Strengthening of hospitalisation capabilities in public or military medical structures;
- (x) Constant flow of detailed meteorological forecasts to assess effects of potential release of biological agents;
- (xi) Intensified staff training;
- (xii) Distribution of equipment for operators' protection.

32. *Assistance measures* include a set of simple or complex/specialist activities aimed at restoring or maintaining vital functions of persons infected by BW attacks; they entail the adoption of prophylaxis measures for containment of biological risks that could involve civilians as well as operators.

33. Assistance operations on the spot are managed by a “Technical Director” - usually the responsible of Ministry of Interior’s “Fire-fighters Brigade” - appointed by the Prefect (the provincial administrative authority), in close coordination, if military assets are required, with the appointed military representative.

34. *Treatment and stabilisation measures* are intended to restore normalcy and entail the treatment of both exposed persons and environment.

35. Treatment of patients is aimed at achieving the best health conditions compatible with the outcome of exposure to biological agents. In particular, exposed patients are hospitalised according to containment standards related to the biological agent identified or allegedly used. Patients died because of exposure to biological agents undergo procedures of decontamination and neutralisation of the residual biological risk.

36. Treatment of contaminated environment - either open or confined - entail decontamination of involved areas, as well as encapsulation, neutralisation and correct alienation of infected materials

## **II. Response to cases of alleged use of biological or toxin weapons or suspicious outbreaks of infectious human diseases outside the Italian territory**

37. The growing risk of uncontrolled proliferation of weapons of mass destruction and their delivery systems, also for terrorist purposes, and the technological/industrial risks that may arise in crisis areas have made CBNR protection of troops - especially those operating outside the national territory - a priority of the Italian defence policy.

38. Italy is therefore focusing on the development of the NBC defence within the framework of a joint point of view.

39. Italy aims at developing both defensive and preventive NBC capabilities. *Defensive measures* are aimed at protecting units operating under the threat of a NBC attack or in a contaminated environment through the development and procurement of early warning and remote detection systems, individual or collective protection equipment, medical measures and widespread staff training.

40. *Preventive measures* are aimed at neutralising delivery systems and NBC weapons and also entails the participation in international counter-proliferation initiatives.

41. The development of national NBC defence capabilities is closely linked to initiatives launched in this same field within military and political alliances Italy belongs to.



42. In that respect, the need for enhanced cooperation between NATO and EU in the field of NBC capabilities was highlighted, in order to avoid duplication of initiatives and seek synergies, in line with the concept of “separable but non separate assets” developed by the “Berlin+” agreement.

43. In this context, Italy makes NBC assets available to both organisations and is actively contributing to the initiatives aimed at developing NATO and UE NBC capabilities, in compliance with the “Prague Capabilities Commitments” (PCC) initiative and for the achievement of the “Helsinki Headline Goals” (HHG).

44. In particular, in PCC framework, Italy is committed to:

- (i) Establish another Italian NBC Battalion;
- (ii) Support the NATO “Senior Defence Group on Proliferation” (DGP) activities related to NBC defence initiatives;
- (iii) Provide contributions to the NATO multinational CBRN battalion;
- (iv) Provide personnel for the NATO “WMD Centre”.

45. In the EU framework, Italy is actively participating to the “NBC Project Group” and provides NBC units to achieve the HHG.

---