



SE MINNESOTA
DISASTER HEALTH COALITION
Enhancing Regional Preparedness, Response and Recovery

Fatality Management Planning Guide



COMMUNITY

IMFC/AmericaReady

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FATALITY MANAGEMENT: YOUR GUIDE TO PLANNING

Welcome to the planning guide for fatality management. In this document, you will find all the necessary tools to develop and/or update your fatality management plan.

Each guide is designed with a basic set of planning elements and a planning template. These planning elements include items such as an Introduction, Scope, Situation and Assumptions all the way through a Concept of Operations and how to activate and deactivate your plan and much more. Each planning element includes a short description and, in most cases, a sample section that can be used in your plan development. *The rest of the planning will be up to your planning team and the individual needs of your department, agency, organization or facility!*

The primary objectives to developing a fatality management plan includes the following but is not limited to:

- To ready department, agency, organization, or facility for managing a mass fatalities incident
- To identify decedent operational areas, the stakeholders and organizations responsible for these operational areas, and develop a plan for providing and for coordinating operational activities
- To specify the command and control structure, who will activate the plan, and criteria for levels of activation
- To provide logistics information that enables readiness and scalability
 - Supplies and equipment
 - Staffing requirements
 - Facility requirements
- To provide information on infection and other health and safety threats; fatality management information systems, pandemic influenza considerations, security requirements; family, cultural and religious considerations; and staff and volunteer management
- To describe how the plan will be exercised, updated and maintained

COMMUNITY MASS FATALITIES INCIDENT PLANNING TEAM

The team is responsible for initial organization and plan development. Consider 1: How the list below might be expanded or organized so that specific steps are included, and 2: How the team might organize the tasks.

1. Initial organization, fact-finding, resource evaluation
 - a. Who will need to be involved?
 - b. What are the resources for gathering information?
 - c. What supplies, equipment and staffing from other areas are on hand at this time that will be used during a response to a mass fatalities incident? What supplies, equipment, and staffing are needed?
2. Coordination with other community partners
 - a. Who will be involved?
 - b. What is the best method to communicate with community partners?
3. Fatality management plan development
 - a. Who is responsible?
 - b. What is the timeline?
 - c. Who will the mass fatalities plan/annex be shared with?
4. Develop procedures for:
 - a. Decedent identification and tracking
 - What are the key elements of a tracking system?
 - What is the procedure for next of kin notification?
 - b. Decedent storage
 - What will you include in a decedent storage procedure/SOP?
 - c. Decedent transportation
 - How will remains be transported?
 - How will communications for transportation be coordinated?
 - d. Personal belongings preparation
 - Identified with next of kin
 - Identified without next of kin (or abandoned)
 - Unidentified decedent
 - e. Death certificate processing
 - Is there need for an expedited process?
 - f. Body preparation
 - Sheeting or wrapping
 - Decontamination, if needed

- Identifying documentation
 - Other documentation
 - g. Other procedures that need to be developed?
5. Assessing current morgue capacity
 6. Options for surge capacity
 - a. In the community
 - b. Commercially available secondary systems
 7. Coordination of staff training on mass fatality incidents
 - a. Who is responsible?
 - b. Task: write a training schedule for staff
 8. Coordination of exercises for mass fatality incidents

COMMUNITY FATALITY MANAGEMENT PLANNING QUESTIONS

Planning is all about preparing for an outcome to a given situation. A disaster plan is designed to help us know the **how, who, what, when, and where** if we should have to respond. Plans are written to help provide the answers on how we will respond, who will respond, what will be needed to respond, when will certain activities take place, and where will get the resources we need to respond. Fatality management planning has its own set of questions that also help further refine your plan. Utilize these questions and this information in this guide to help ensure your plan contains all of the necessary information your facility needs to respond to a mass fatalities incident.

1. What are the management priorities of your community for handling remains? What key assumptions are these priorities based upon?
2. Does your community have a written fatality management plan in place? If so, who has the authority to activate these plans and/or procedures, and have you trained to the plan?
3. Do you have staff and resources identified that will be dedicated to mass fatalities incident management?
4. What are the possible bottlenecks in the procedures for processing remains? Have any solutions been developed and/or implemented to mitigate these issues?
5. What is your cold storage capacity in your community? Do you have memoranda of understanding in place to secure additional cold storage space if needed?
6. To what extent can technology assist with the processing of remains? Do you have an electronic data system to help track remains?

7. What legal hurdles, if any, does your community face when executing your fatality management plan? How will your community deal with them to ensure that the processing of remains is not delayed or otherwise stalled by legal matters?
8. What reputation management issues could arise if your community does not adequately manage a mass fatalities incident? Do you have a public information plan in place that can be used in a mass fatalities incident? If so, does that plan have pre-scripted messages for handling a mass fatalities incident?

INTEROPERABLE PLANNING

Fatality management plans cannot be developed without considerations for other existing plans from emergency management, public health, hospitals, and the like. Every department, agency, organization or facility with a role in emergency planning will also have a seat at the planning table for fatality management.

Your fatality management plan should describe the relationship to other emergency plans. Begin by identifying other existing plans. Determine how the fatality management plan relates to the other emergency plans. Then consider creating an organizational chart to illustrate how the plans relate to each other.

Plan Response Time and Managing Expectations

A fatality management plan addresses mass fatalities incidents that occur both with and without warning and during on-duty or off-duty hours. When determining plan performance expectations or expected response time, determine what operations for which you want to specify response time and the many organizations involved in those operations. Some of the organizations may already have specified response times in their existing plans and protocols for their area of responsibility.

FATALITY MANAGEMENT PLANNING ELEMENTS

The Community Fatality Management Plan should be written to include all the necessary elements to support a mass fatalities response. It may be integrated as a part of Emergency Support Function 8 under a county’s emergency operations plan or it can be used as a stand-alone plan.

INTRODUCTIONS

A common introduction should be developed for all fatality management plans that convey a shared message. Additional information should be tailored to fit each individual plan according to the needs of that department, agency, organization, or facility.

Introductions should include basic information as to the definition of a “Mass fatalities Incident” or MFI. It is recommended that all plans in the SE Minnesota region use shared terminology and definitions to avoid confusion.

Include an overview of the plan. Provide a list of participating organizations or agencies, their roles and responsibilities. Community organizations or agencies should include but are not limited to the following:

- Law enforcement
- Fire and Rescue/Hazardous Materials
- Emergency Medical Services
- Hospitals
- Public Health
- Mental Health
- Social Services
- Environmental Health
- General Services Agency/Facilities and Fleet/Public Works
- Procurement
- Public Affairs
- Office(s) of Emergency Services

In addition to these community organizations or agencies, the private sector plays a critical role. Private sector involvement includes:

- Funeral homes, crematories and cemeteries
- Faith-based organizations
- Nonprofit organizations
- Volunteers

NIMS AND ICS

Another component for consideration is the inclusion of the National Incident Management System (NIMS) and the use of the Incident Command System (ICS) in the introduction. The National Incident Management System (NIMS) identifies concepts and principles that answer how to manage emergencies from preparedness to recovery regardless of their cause, size, location or complexity. The Incident Command System (ICS) provides a flexible, yet standardized core mechanism for coordinated and collaborative incident management, whether for incidents where additional resources are required or are provided from different organizations within a single community or outside the community or for complex incidents with national implications. When an incident requires response from multiple local emergency management and response agencies, such as a MFI, effective cross-jurisdictional coordination using common processes and systems is critical.

PLAN MAINTENANCE AND DISTRIBUTION

All fatality management plans should include a detailed section regarding how the plan should be maintained, how it should be distributed, and when these activities should take place. Annual reviews are recommended with periodic updates for resource and contact information.

Fatality management plan maintenance should include:

- A schedule for plan review and updates.
- A description of who is responsible for plan review and updates.
- A list of stakeholders that should be included in the update process.
- A description of the approval process for updates.

RECORD OF CHANGES

All fatality management plans should include a Record of Changes allowing for more efficient tracking of updates, who made the changes, and when.

PURPOSE AND SCOPE

A common message for the purpose and scope should be developed for each fatality management plan. Additional information should be tailored to fit each jurisdiction.

AUTHORITIES AND REFERENCES

All fatality management plans should include all relevant local, state, and federal authorities and references as determined by the department, agency, organization, or facility and other key stakeholders involved in the planning process. The section should include brief information for each authority listed.

SITUATION AND ASSUMPTIONS

Situations and assumptions should be tailored to fit each jurisdiction. Unique planning challenges exist in a number of counties that may require more detailed information.

CONCEPT OF OPERATIONS

Each fatality management plan should include a Concept of Operations or ConOps that is similar in format and structure. Details should vary based on jurisdictional need and capability. The ConOps is a brief overview of how fatality management operations will flow.

All fatality management plans policies and procedures should be integrated to coordinate with surrounding departments, agencies and organizations plans.

DISASTER SITE

Each plan should include information on disaster site management. This is equally important for facilities as the facility itself could be the disaster site. Be sure and include the following sections (each section has a sample in the template):

- Concept of Operations
- Direction, Control, and Coordination
- Notifications
- Resource Requirements
- Resource Coordination
- Incident Command System (ICS)
- Logistics
- Perimeter Security
- Credentialing
- Spontaneous Volunteers and Self-Deployment
- Staff Processing Center (SPC)
- Fatality Management Headquarters (FMH)
- Behavioral Health

- Disaster Site

Victim Identification Center Operations (VIC)

Once the remains, personal effects have been recovered from the Disaster Site, they shall be transported immediately to the designated VIC Site. The VIC Site operations include functions responsible for the processing and identification of remains and personal effects. Every attempt shall be made to provide for the sensitive and respectful care and handling of the remains and personal effects. This section should include logistics, security, VIC operational areas, holding facilities, and demobilization.

DEMOBILIZATION

Every plan should include a documented process for how response operations will be discontinued and demobilized once the response phase has been completed. Be sure to include **who** has the authority to deactivate operations (and under what circumstances), **what** notifications need to be made, and all other steps that need to be taken to ensure that day-to-day operations can resume as normal.

DISPOSITION OF REMAINS, POLICY SETTING, AND SPECIAL CONSIDERATIONS

There may be special situations in which specific policies may need to be included in your planning. These policies should only be used as guidance in creating your own policies that meet the needs of your department, agency, organization, or facility. A sample set of policies has been placed in the appendices of the template.

MULTI-CULTURAL PLANNING

While there are numerous religious and cultural rituals for handling the dead, mass fatalities present difficulties in acknowledging and complying with these rituals. Although responders to these incidents would like to perform all the correct rituals, in reality it is likely impossible to do so. It is unlikely that the search and recovery and Victim Identification Center operations staff will be able to easily discern the religion or culture of the victims, and thus not necessarily handle the victims in accordance with appropriate ritual. Instead, all fatality management operations should make a serious effort at maintaining the personal identity of the victims and consider the concerns of their families. Handling the victims with respect, maintaining their identities, and showing compassion for the religious concerns of the families will deflect many concerns. Releasing the remains as quickly as possible to the families will also allow them to perform their rituals soon after death, which is important in most cultures and religions.

PUBLIC INFORMATION

In a MFI, it is imperative that public information and messaging be timely, accurate, and regularly updated. Doing so will aid response and recovery efforts and bring a sense of security and understanding to the public. Failure to provide timely, accurate, and updated information can result in mixed and inaccurate messages, unreasonable expectations, and an angry constituency.

- Public Information includes providing incident-related information through the media and other sources to individuals, families, businesses, and industries directly or indirectly affected by the incident.
- Community relations activities include identifying and communicating with community leaders (e.g., grassroots, political, religious, business, labor, and ethnic) and neighborhood advocacy groups to ensure a rapid dissemination of information, identify unmet needs, and establish an ongoing dialogue and information exchange
- There will be a strong need for the public to get disaster assistance information. The timely dissemination of accurate, well-coordinated emergency public information will reduce the impact to life and property as well as help to maintain public trust and confidence.
- Jurisdictions and organizations involved in response and recovery will recognize the importance of relaying common emergency messages and will coordinate with other jurisdictions and organizations to ensure consistent information is disseminated.
- PIOs collect and maintain a file of fact sheets, instructions and procedures, and other readily available pre-scripted information on a wide range of topics to support the rapid dissemination of public information. Pre-scripted information is verified on a regular basis to ensure that it is current and accurate.
- Many disasters can occur rapidly, hampering the ability of response organizations and local government to provide comprehensive information to everyone impacted at the onset. For this reason, it is important to ensure the public is aware of potential hazards and know the appropriate protective efforts before a disaster occurs.
- A disaster may have negative impacts on the existing communication infrastructure or systems requiring the use of alternative methods to provide information to the public.

- Disasters may impact individuals' ability to receive public information due to displacement, or limited access to television, phone, newspaper, the internet, social networks, etc.
- A disaster may create a significant demand for information from a wide variety of sources which may exceed local capabilities. Some situations may require the provision of enhanced or supplemental public information resources.
- Rumors or misinformation may be spread before, during, and after a disaster. This can cause unnecessary distress among the public, provoke counter-productive public actions, and impede response and recovery efforts.
- The interest generated by a disaster may lead to requests for information or visits from a variety of public officials, dignitaries, or VIPs. Such requests will require coordination and resources.
- All equipment and systems relied upon to notify/inform the public are operational and tested on a regular basis.

DATA/INFORMATION MANAGEMENT

Vital Records:

- 1) Death certificates issued according to procedures normally in place and as directed by the ME.
- 2) The administrative or judicial issuance of death certificates in situations in which there is an absence of positive physical forensic scientific identification is a responsibility of the ME in conjunction with local legal and public health authorities. (Presumption of death from absence, MN statute **576.141**)
- 3) When circumstances suggest that a death has occurred although a dead body cannot be produced to confirm the fact of death, a death record shall not be registered until a court has adjudicated the fact of death. (**144.221 sub 3**)

TRAINING AND EXERCISES

Multi-year Training and Exercise Plans should include information and guidance for exercise and training recommendations for all personnel and other key stakeholders involved with the fatality management plan.

Exercises provide training and practice for emergency events that test readiness, evaluate the fatality management plan, and provide detailed feedback for your facility. Even though exercises can be costly and time consuming, they are the best way to test a plan prior to an actual mass fatalities incident.

In the multi-year training and exercise plan, present a strategy for training and exercises, including:

- The functions and/or parts of the plan that you will exercise.
- The type of exercises.
- How you will evaluate the exercises.
- A time frame within which each exercise will be done

Information and guidance for developing a fatality management training and exercise plan should be integrated with existing policies and procedures and coordinated with the departments, agencies, organizations, or other facilities that would support your response to a mass fatalities incident. This plan should be established to keep staff up-to-date and orient new employees to the Plan. Remember to train with those departments, agencies, organizations, or other facilities that support your fatality management plan.

ANNEXES/REFERENCES

There are several supporting documents and references you may wish to include in your fatality management plan. The following are some examples:

- Job Action Sheets
- Mutual aid documents
- Mental health/behavioral health information and best practices
- Religions/cultural considerations
- Transportation and Storage Specifications
- Equipment and Supplies
- Key Contacts List
- HIPAA
- Decedent Information Form
- Decedent Tracking Log
- Witness Form
- Internet Resources
- Fact Sheets
- Key Position Checklists

- Glossary of Terms
- Abbreviations