ANNEX 4

MASS FATALITY PLAN CHECKLIST

Mass fatality plan checklist – an annex to a National Disaster Management Plan

The Pan American Health Organization has developed a checklist on mass fatalities that can serve as the elements to be included in an annex to any National Disaster Management Plan. The checklist is based on the London Resilience Mass Fatality Plan 2006 and on this manual.

The checklist contains the essential elements that should be addressed by ministries of health or disaster management offices as they develop a mass fatality plan. The mass fatality plan does not need to be stand-alone; it can be an annex to the National Disaster Management Plan. As such, the mass fatality annex needs only to focus on elements unique to a mass fatality.

It is important that countries conduct regular exercises based on their plans to evaluate organizational capability to implement the plan (or part of it) and to promote preparedness.

Essential elements of the mass fatality plan

I. Introduction and purpose
♦ Outline the purpose of the mass fatality plan.
♦ List the assumptions of the plan.
♦ Define the scope of the plan and local hazards that can create mass fatalities – i.e. type, frequency, level of impact, etc.
♦ List members of mass fatality coordination committee/key partners, stakeholders in the planning and implementation process.

II. Activation
♦ Describe the activation process and identify who, or which agency, will be responsible for activating the mass fatality plan. (Make sure this is the same authority that is listed in the National Disaster Management Plan.)
♦ Include a call-out chart and attach roles and responsibilities to each individual for this phase of the plan.

III. Command and control
♦ Discuss with local health, law enforcement and disaster management officials where/how the mass fatality plan fits in with national plans.
♦ Discuss the role of health authorities, NGOs and national disaster offices during mass fatalities.
♦ Discuss the legal authority for handling of dead bodies from the point of examination by a physician/pathologist to the actual burial process. Consider the investigative needs of law enforcement agencies.
♦ Outline the local incident command structure
♦ Provide an organizational chart for chain of command, including operations, logistics, planning and finance/administration.
♦ Reference all hazards/emergency operations plans as appropriate.

IV. Logistics
♦ Outline arrangements for transporting the dead bodies and related personal effects.
♦ Outline arrangements for temporary body storage; this may involve the commandeering of 20/40 ft refrigerated containers. Remember that each container has limited capacity and requires considerable quantities of electricity/fuel.
♦ Describe the means for emergency communications between all relevant parties; this must involve secure channels that are not easily accessible by the media and general public.
Identify where and how required resources can be obtained – e.g. national/regional stocks of body bags, waterproof labels, etc.

Identify how portable electrical supply and water can be obtained and provided to field sites.

Designate a trained individual and supporting team members to manage and oversee logistical arrangements.

Identify local and regional technical specialists/resources and arrangements for obtaining their services through previously made agreements.

V. Welfare

♦ Identify the provisions that will be made for handling the welfare needs of family and friends, including a designated area for viewing bodies (consider cases where bodies have to be isolated as in the case of some epidemics).

♦ Outline the process involved in releasing or allowing for burial of the dead and the recognized forms of burial in the country. This needs to be agreed in advance with the relevant forensic pathology/medical examiner/coroner/police/judicial agency responsible for death investigation in the country. Ensure that provisions are made in the plan for addressing local cultural and religious needs of the community.

♦ Include linkages with local crisis intervention teams or psychosocial support teams and define procedures for their activation based on the level of assistance that they can provide.

VI. Identification and notification

Identify a team of persons from law enforcement, health authority, social services, etc. who can serve to identify the deceased (with use of forensic procedures), securing the remains and reuniting them with family/friends. Consider the local rescue and recovery procedures in place and how these will be linked to the work of this team. A physician or pathologist should determine how body parts should be handled and these decisions should be included in the plan.

♦ Include information regarding the legal rights of the deceased – e.g. Law Enforcement Acts, Interpol Resolution AGN/65/res/13 (1996), humanitarian laws and other ethical and social norms.

♦ Arrangements for viewing of bodies should be included. Facilities for this should be identified and arrangements made for setting up these facilities. Consider how the bodies will be stored and presented and who will be responsible for these activities.

♦ The matter of investigation should be carefully considered and the relevant information included. Review legislation relevant to inquests, registration of death, insurance procedures and criminal actions, etc.

♦ The plan should consider disaster situations in which specialist identification teams are not available or the scale of the disaster exceeds local capacity. Arrangements for external assistance and/or local arrangements to facilitate identification at the local level should be considered.

VII. International dimensions

♦ Mass fatality incidents may involve foreign nationals: foreign workers, tourists, immigrants or visiting relatives of affected families.

♦ The mass fatality plan should be shared with foreign embassies.

♦ Dealing with immigrants should include provision for repatriation of bodies of victims to their home country. Consult with the Immigration and Attorney General’s Departments.

♦ The Department of Foreign Affairs or Governor’s Offices should be consulted on arrangements for returning victims who are nationals from your country who died in the country where the disaster has occurred. Arrangements for receiving these victims should be included in the plan and provisions for handling the deceased once they have been received.

♦ Consider special arrangements that may be required: embalming, how the death certificates will be issued.
In the event that tourists or high-level officials are involved and their bodies are being shipped, consideration must be given to the sensitivity of the situation and the controlled release of information to the local and international media. Consult the Pan American Health Organization/World Health Organization resolution on the International Transportation of Human Remains (1966).9

Identify the national and regional Interpol counterparts and define arrangements for requesting their assistance when required.

VIII. Site clearance and recovery of deceased victims

a. Clearly define procedures for photographing dead bodies/body parts and placement of proper identification tags, as well as what tagging system will be used (in accordance with police procedures) and who will be responsible for keeping accurate records of the tags. Also consider where these procedures will take place (e.g. collection centre) and provision of adequate security measures.

b. Procedures for photographing, labelling and securing personal effects must also be included in the plan. Who will be responsible for these processes? Most likely they will be assigned to the police. Are resources available, such as digital cameras with sufficient memory?

c. Provisions should be made for a quality audit (it may be advisable to have a group external to the police) to verify that the correct procedures were followed. The plan must define who, where and how this will be performed.

d. In certain situations such as criminal and/or terrorist attacks, the disaster site must be preserved for investigative purposes. Who will be responsible for this and how will it be done? This should be outlined in the plan in a step-by-step format; consult with a law enforcement agency on this matter.

IX. Mortuary

e. For storage and body preparation, local mortuary facilities and funeral homes – location, capacity, resources, etc. – should be listed in the plan with relevant contact details. Transportation to these facilities must be considered. The plan should consider the development of national/regional stocks of coffins, body bags, etc. A memorandum of understanding (MOU) can be developed with private mortuary/funeral homes and included as part of the plan. Consult with the Attorney General’s offices on these arrangements.

f. Ensure that the plan addresses issues such as individuals who die while being transported and those who die in hospitals as a result of injuries sustained from the disaster. In some countries they are passed through the same procedures as those who have died at the disaster site.

g. Consider arrangements for handling the media and for security at these facilities.

h. A general principle should be applied – hospital mortuaries should NOT be used unless numbers are manageable, especially in the case where there is only one hospital available. Temporary mortuary facilities should also be considered.

i. Ensure that law enforcement agencies identify and provide procedures for securing routes for transporting dead bodies to identified mortuary facilities.

X. Disposal: final arrangements

Procedure for returning the deceased to families must be clearly defined – these can be provided by the physician/pathologist. The wishes of the family for returning partial remains must also be considered.

Discussions should take place with the physician/pathologist and social welfare or other relevant local agencies regarding the disposal/burial of unclaimed victims/remains. The legal issues must be considered and discussed with the Attorney General’s chambers. Ensure that these are clearly documented in the plan.
XI. Chemical, biological, radiological, nuclear (CBRN) disasters
♦ Include procedures for handling such events, including how dead bodies should be handled, the training and personal protective equipment requirements, decontamination procedures, and ongoing monitoring of the site and any remains or items removed and where cold storage facilities can be located.
♦ Consider decontamination arrangements for vehicles and other storage equipment and facilities, and environmental impacts along with requirements for evacuation or isolation of surrounding communities.
♦ Arrangements with external agencies may have to provide for risk assessments and advice on viewing, return of bodies, burial, cremation and repatriation. Identify such agencies in the plan and establish MOUs accordingly.

XII. Public information and media policy
♦ Many countries have national public information plans and policies. These can be applied to this element of the plan. Official statements should be channelled through the relevant media centres at either the National Emergency Operations Centre (NEOC) or the incident command post in the field. Information from all sites – i.e. mortuary, hospital, family viewing areas – should be channelled to the NEOC for compilation.
♦ Media should be restricted from entering mortuary facilities or crisis intervention centres/family viewing areas. Include procedures for securing these areas and for channelling information to the media centre.
♦ Procedures for releasing the names of the deceased should be clearly defined in the plan, especially considering large numbers of unidentified deceased victims. Provisions should be made for setting up facilities for the public to enquire about missing/deceased persons, and these sites should be away from the hospital and mortuary.

XIII. Health and safety
♦ Consider provisions for the welfare and psychological needs of responders; the local crisis intervention teams or mental health services can give support in this area. Consider how volunteers from the Red Cross and other similar services can be accommodated to provide such support – once they are trained.
♦ There may be a need to identify and equip rest areas. Responsibility for this and how the resources will be acquired should be established locally.
♦ Provision should also be made to determine how responders who have lost family members and friends will be handled and by whom.

XIV. Disaster mortuary plan
♦ In many countries it is the responsibility of the police to set up and manage the documentation of the deceased at the mortuary and for evidential continuity. Relevant forms, procedures and a layout of the mortuary should be included in the plan.
♦ In the event of a large-scale event involving numerous victims it may be necessary to establish a mortuary management team. The composition of the team should be included in the plan, along with call-out procedures and responsibilities for each individual.
♦ Include, as part of this element, the mortuary procedures to be followed: registration and arrival, storage, examination and photographing, cleaning of body, radiography, fingerprints, odontology, re-bagging, embalming, viewing, release of body, bodies not claimed, repatriated bodies, DNA and toxicology, documentation, securing of property, equipment list, waste disposal, staffing, visitors, health, safety and welfare.