

Comprehensive Emergency Management Plan



Section 6-Mass Fatality Annex

January 2019

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Annex 6 – 7 Mass Fatality Annex

I. PURPOSE

This plan outlines the procedures to be followed when a disaster results in mass fatalities to the extent that the number of dead exceeds the resources of the local Coroner's Office. This plan has been developed as a guideline for responding to incidents that result in a significant number of deaths. Ten or more fatalities in a single incident will severely tax available resources of the Horry County Coroner's Office and may require implementation of this procedure. A declaration of an emergency and activation of the Horry County Emergency Operations Center may be required. This plan is subordinate to the Horry County Comprehensive Emergency Management Plan and is to be used in conjunction with each relative section.

II. SITUATION AND ASSUMPTIONS

The Horry County Coroner is responsible for investigating the cause and manner of any death unattended by a physician.

- A. During a mass fatality incident, Horry County may have insufficient personnel, equipment, and storage capacity to handle significant numbers of deceased victims. A local State of Emergency may need to be declared by the Horry County Administrator to enable the use of all available county resources and financial support.
- B. Assistance from other public and private agencies may be required to respond to an incident to assist in tagging, removing, and identifying victims and determining final disposition of remains.
- C. Additional investigative resources may also be required to supplement those available within the County.
- D. Mass fatality incidents may be the result of criminal acts, transportation, or industrial accidents. Such incidents will require further investigation to determine the cause of the incident and/or the perpetrator. This investigation is conducted by local, state or federal law enforcement or safety officials and is not the responsibility of the Coroner's Office.

III. CONCEPT OF OPERATIONS

A. General

- 1. The Horry County Coroner's Office is responsible for establishing the cause and manner of death and for the purposes of identifying the deceased and issuing death certificates. State and local statutes specifically define the Coroner's responsibilities. The Coroner will provide oversight and coordination of resources to accomplish the recovery and identification of the deceased. The Coroner may request assistance from the Horry County Emergency Management Director to activate the Emergency Operations Center (EOC) for coordination and resource support.
- 2. When a mass fatality incident occurs, emergency responders will take appropriate actions to save lives, assure prompt notification of the Coroner's Office, and secure the scene. First responders will treat the mass fatality site as a crime scene and once viable patients are removed, will prohibit entry until the

Coroner arrives. Care should be taken to limit disturbance of the scene to those activities critical to the removal of living victims for transport to medical facilities.

3. In emergencies where multiple deaths occur in a number of locations within the County, the resources available to the Coroner’s Office will be inadequate to respond to all death scenes. In such instances, law enforcement personnel will be dispatched to each location and begin any necessary investigative actions.
4. Mass fatality incidents require that a number of activities, both on-scene and off-scene be considered. For purposes of this plan, these activities are divided functionally into:
 - Search and Recovery
 - Morgue Operations
 - Family Assistance
5. This plan establishes the means and methods for the sensitive respectful care and handling of deceased human remains in multi-death disaster situations.

B. Specific

1. Search and Recovery:

a. Search

The search and recovery team(s) will document everything found at the disaster site, as it may help in the investigation and morgue operations. Every site will be treated as a crime scene until the Coroner’s Office says differently. As a rule of thumb, search teams systematically search and mark bodies, body parts, and personal effects where they are located with pin flags, stakes, etc. A team member will assign a number to that particular finding. They will log each finding on a grid chart, photograph it and move on until the search is completed.

b. Recovery

Recovery starts after the Coroner and Incident Commander have determined the search of an area is complete. Bodies and body parts must be treated with dignity and respect at all times. Each finding should be tagged with the number assigned by the search team. Bodies and body parts should be placed into a body bag or acceptable substitute. A tag, with the same number as the number inside the bag, will be placed on the outside of the bag. The body bag should be removed from the scene and taken to a location designated by the Coroner’s Office. Personal effects found on the body should not be removed from the victims at the scene. Victim identification is a function of morgue operations, not the search and recovery team.

2. Morgue Operations

Depending on the size and nature of the incident, the Coroner will determine where to establish an incident morgue site. The site may be the current morgue location or a temporary morgue site in another location such as a warehouse, airplane hangar, etc. The Coroner will lay-out the morgue operation site considering the physical condition of the victims, the number of victims, and the number of personnel needed to perform such morgue functions as administration, logistics, refrigeration, and operations. The operational areas can include areas for the following: receiving, photography, X-ray, personal effects, anthropology, dental, fingerprinting, pathology, storage, and shipping. In some cases, an area for embalming may be needed.

The morgue has the responsibility to determine the cause of death and identify victims. The use of highly skilled professionals for each of the morgue operational areas is important. Post mortem records will be completed for every body and body part as they are processed through each of the operational stations. Post mortem records include personal effects, photography, X-rays, anthropology, fingerprints, dental and pathology reports. The post mortem records will be compared to the ante mortem (pre-death) records obtained from the victim's family and other sources such as fingerprint repositories and hospitals. Personal effects, such as driver's licenses found on the victim or statements of recognition, should not be used as positive identification, but rather tentative identification. Positive identification is the responsibility of the coroner. After identification is established, the coroner can release the body and/or body parts based on the wishes of the next of kin.

3. Family Assistance Center (FAC)

The family assistance center is one of the most sensitive operations in a mass fatalities event. Its purposes are listed below:

- To provide relatives of victims with information and access to services they may need in the days following the incident.
- To protect families from the media and spectators.
- To allow investigators and the coroner access to families so they can obtain information more easily.

The Family Assistance Center will quickly be established in an area such as a hotel, conference center, or church. The area selected should be secured in order to give privacy to the families. Regular briefings by the coroner or staff twice daily are vital to keep the families informed. Meeting with the families on an individual basis early on makes it possible to start the process of collecting ante mortem records for use in the morgue operations.

4. Scene Security

A death scene should always be treated as a crime scene. The scene should be maintained and minimally disturbed during the removal of survivors. No property, body parts, or other items will be removed unless they can be positively identified and/or are critical to the full recovery of a survivor in which case they may be transported to the hospital with the victim. Once all survivors have been removed, the incident scene will be secured and access restricted to facilitate further investigation and removal of the deceased.

A two-zone perimeter will be established with the inner perimeter designated to include all areas in which victims, evidence or property may be found. Entry into the inner perimeter must be strictly controlled, documented, and limited to those personnel authorized by the Coroner. An outer perimeter will be immediately established at the maximum distance from the incident that can be secured. No one other than assigned emergency workers will be allowed within the outer perimeter.

5. Biohazard Protection

Because of the possibility of contact with body fluids, all mass fatality scenes will be treated as biohazard sites. The Incident Commander must take all precautions for infectious disease control. This must include the requirement for the proper personal protection equipment for all personnel working within the inner perimeter and establishment of a system for decontamination of workers, equipment and suppliers.

6. Extrication/Evacuation of Deceased Victims

The removal of the deceased must be handled in accordance with investigative needs for identification of the victim, determination of cause and manner of death, notification of next of kin, and further investigation into the cause of the incident. Bodies or body parts should not be moved until photographed, diagrammed, and videotaped as found to assist in the identification process. The incident location will not be altered to perform recovery operations unless approved by the Coroner and on scene investigative agencies.

7. Staging and Transport

- a. The Incident Commander will designate a Staging Area to control the resources necessary to respond to a mass casualty incident. Vehicles used in the transportation of bodies will also report to the staging area.
- b. The Coroner will establish a Transport Area where bodies are placed for loading into vehicles once all on-scene investigative actions pertinent to that victim are completed. An evidence collection point will also be set up in the transport area to assure that all property and evidence are properly tagged and transported for safekeeping.

8. Disposition of Remains

a. Identified and Unidentified

Identified and unidentified remains will be handled in accordance with the Horry County Coroner's Office established procedures.

b. Mass Burial

Mass burial may become necessary when the number of remains cannot be managed and become a public health concern, or when remains cannot be adequately refrigerated or embalmed, identified, or processed in an acceptable manner.

The decision to begin mass burial and the location must be agreed upon by the responsible agencies. The number of remains to be buried, distance, and transportation requirements must be taken into consideration. Plans should include the probability of exhumation at a later time.

c. Cremations

Cremations should not take place for a minimum of seven days after the last body has been processed. Cremation should never be used as a form of disposition for unidentified remains or tissue. Religious considerations as well as the possibility for future identification affect this decision.

d. Remains Not Recovered

Conditions and circumstances sometimes preclude the recovery of remains in spite of exhaustive efforts and resources expended by those involved. Once the determination has been made that one or more remains are unrecoverable, non-denominational memorial services should be arranged. All efforts should be made to notify and include the surviving family members. The family should be given the opportunity to select the locale of the non-denominational service if so desired.

9. Media

Media issues will be handled through the Horry County Public Information Officer.

10. Critical Incident Stress Debriefing

Critical incident stress debriefing sessions will be conducted for all County personnel involved in the response to a mass fatalities incident. This will include personnel working on-scene, at an incident morgue, at the Family Assistance Center, other locations, and/or those working within the Public Safety environment that are in need of debriefing.

11. Emergency Operations Center Support

Mass fatality incidents will require the activation of the EOC. While this plan focuses on the Operations Section, it will be critical that the Planning, Logistics, and Finance Sections are staffed. Because a mass fatality incident may require operations at a number of separate locations, assignment of personnel may be required to coordinate activities at each location. Branch Support Groups should be established for On-scene Operations, Morgue Operations, and Family Assistance Center Operations. Common functions to be centralized may include:

- a. Staging
- b. Rehabilitation
- c. Decontamination
- d. Records
- e. Ordering

12. Resource Management

The magnitude of a mass fatality incident may exceed the local capabilities and resources. If this happens, the EOC will request additional resources from local, state, and federal agencies.

IV. Plan Development and Maintenance

- A. Agencies assigned responsibility for activities in a mass fatality incident are responsible for the identification of shortfalls and capabilities, and the evaluation of abilities related to a response to a mass fatality incident. When feasible, strategies may be developed to overcome shortfalls and to enhance capabilities.
- B. The Emergency Management Director is responsible for assessing overall capabilities and shortfalls of a mass fatality response in Horry County; as well as the review and maintenance of the mass fatality plan. When feasible, strategies may be recommended to overcome shortfalls and to enhance capabilities.