

# NEBRASKA



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**DEPT. OF HEALTH AND HUMAN SERVICES**

## **EMERGENCY SUPPORT FUNCTION-8**

## **MASS FATALITY PLAN AND MATRIX**

*April 2020*

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Nebraska's Emergency Support Function (ESF) 8 –Mass Fatality Plan and Matrix was Revised in 2020 and is hereby approved for implementation. This plan and matrix may be amended by the Nebraska Department of Health and Human Services (DHHS) as needed, or as circumstances dictate. This revision supersedes all previous editions.

Approved: 

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Nebraska Department of Health and Human Services

Date: 4-15-20

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## RECORD OF CHANGES

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4-8-20	Added last sentence to first paragraph	3b) Morgue Operations	Russ Wren
4-8-20	Added first sentence to first paragraph, Added last sentence to second paragraph.	3c) Risk Assessment/Decontamination	Russ Wren
4-10-20	Added first sentence. Added language recommending MOU's agreements be in place.	3d) Family assistance/Notifications	Russ Wren
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4-10-20	Revised DMORT Contact information	7 DMORT	Russ Wren
4-10-20	Updated acronyms, removed references to links/attachments, minor language changes	Mass Fatality Matrix	Russ Wren

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## Emergency Support Function 8 Mass Fatality Plan

4-2020

**Coordinating Agency:** Nebraska Department of Health and Human Services

Primary Agency: Nebraska Department of Health and Human Services, Division of Public Health, Section of Preparedness and Emergency Response

### **Cooperating Agencies/Organizations:**

- Nebraska Department of Health and Human Services Division of Behavioral Health
- Nebraska County Attorneys Association
- Nebraska Board of Funeral Directors
- Nebraska Hospital Association
- Nebraska Emergency Management Agency (NEMA)
- Nebraska Department of Energy and Environment
- Nebraska National Guard
- Nebraska State Patrol (NSP)
- Regional Healthcare Coalitions
- Federal Bureau of Investigation (FBI)
- Federal Department of Homeland Security
- Local Public Health Departments

## **1. INTRODUCTION**

### **a. Background/Purpose**

Mass fatality events may be natural or caused by acts of man, which may in turn be intentional and criminal or purely accidental. The event may be a crime scene. Federal authorities may have jurisdiction in the event of a transportation event, terrorism incident or communicable disease.

Nebraska has not recently experienced a catastrophic mass fatality incident that has required significant state government involvement. The State of Nebraska has considered the consequences and difficult issues resulting in overwhelming loss of life. Recent national and international incidents, including pandemic influenza and COVID-19 responses, have proven the value of mass fatality management preparedness planning.

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Mass fatality planning is a function of ESF#8 under national and state emergency management planning schemes however many responsibilities for fatality management may be assigned to other entities under Nebraska statutes.

The purpose of the Nebraska Mass Fatality Plan is to outline the general responsibilities of state agencies and associations when responding to an incident that has produced mass fatalities affecting the State of Nebraska. The primary concerns of a mass fatality incident response are recovery, identification, and disposition of human remains and assistance to affected families. According to Nebraska statute, the County Attorney functions as the County Coroner and is responsible for deceased persons. The County Attorney will thereby direct all work related to the direct handling of deceased individuals at the scene of the incident. References to the County Attorney includes responsibilities of that office-holder in addition to responsibilities as the *ex-officio* coroner, and includes responsibilities of personnel aiding the coroner such as the Coroner's Physician or Medical Examiner or Pathologist serving in support of that role and any peace officers to whom the County Attorney has delegated duties.

This plan is not a substitute for local, county and regional planning conducted by emergency management and/or local public health departments. These entities should have plans that support a local mass fatality response.

### **b. Scope**

This plan recognizes the need to organize state agencies, organizations and resources to plan for and respond to an incident resulting in loss of life. Fatalities related to an incident may be located at the scene of the incident, at patient/decedent staging areas, medical facilities, or at personal residences. The Nebraska Mass Fatality Plan will be applicable to any incident that results in fatality cases that overwhelm local capabilities. It is also recognized that all mass fatality incidents begin at the local level, therefore planning at the local level for response to a mass fatality incident is essential.

This plan seeks to provide guidance, relevant laws and delineation of organizational responsibilities pertaining to a response to a mass fatality incident. Additionally, this plan is intended to incorporate federal, private and volunteer organizations and resources into a coordinated system for responding to a mass fatality incident.

### **c. Policies**

The Nebraska Department of Health and Human Services (DHHS), Division of Public Health serves as the state coordinating entity for public health and medical response to an emergency resulting in mass fatalities that exceeds the capacity of local/regional resources. All incidents reaching the level of a state response will be managed by the Nebraska Emergency Management Agency. It is the responsibility of the Nebraska Emergency Support Function (ESF) #8 to coordinate the state-level planning and response to incidents resulting in mass fatalities that require state assistance. To facilitate a coordinated planning effort, the following agencies/organizations may be called upon to support a mass fatality response:

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- Nebraska Department of Health and Human Services Division of Public Health
- Nebraska Department of Health and Human Services Division of Behavioral Health
- Nebraska Funeral Directors and Embalmers Association
- Nebraska Board of Funeral Directors and Embalmers
- County Attorneys
- Nebraska Emergency Management Agency
- Nebraska State Patrol
- United States Department of Health and Human Services
- Nebraska Hospital Association
- Forensic Pathologists
- Mass Fatality Subject Matter Experts

The incident command system (ICS) will be utilized in response to all incidents, including those involving mass fatalities.

### **d. Planning Assumptions**

The following assumptions are made in this plan:

- Each county of the state has an identified County Attorney
- The County Attorney is the responsible local authority for managing fatalities in an incident where an individual dies in any suspicious or unusual manner or when the determination of the cause of death is held to be in the public interest.
- Any mass fatality incident would result in the County Attorney being responsible for all deceased resulting from the incident.
- A natural or man-made incident that results in the catastrophic loss of life will, in most cases, generate a state emergency declaration.
- Mass fatality incidents due to explosions, chemical, biological, radiological or nuclear factors will present an added dimension to the response, recovery, identification and final disposition of the deceased victims.
- Personal Protective Equipment (PPE) may be needed to protect individuals handling remains.
- Overwhelming damage to the infrastructure system of Nebraska may occur along with a mass fatality incident. Major utilities, other essential services and resources may therefore be non-existent.
- Response to an event must be scalable to match the circumstances of the event.
- All mass fatality incidents begin at the local level.
- Mass fatality resources beyond local resources may not be available in a pandemic event.



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## 2. Concept of Operations

### a. General

Where local resources/personnel are overwhelmed in response to a mass fatality event the Emergency Support Function (ESF) #8 -- when activated by the State Emergency Operations Center in coordination with its partner organizations -- will assist county attorneys, county emergency managers, medical professionals, and law enforcement agencies in:

- securing the area;
- reducing the hazard presented by chemically, biologically, or radiologically contaminated human remains (when indicated and possible);
- notification and assistance to families of victims;
- body/remains retrieval including tracking and documenting of human remains and associated personal effects;
- body/remains transportation;
- body/remains storage including establishing temporary morgue facilities as needed; collecting ante mortem data;
- performing postmortem data collection and documentation;
- determining the cause and manner of death;
- identifying human remains as needed using scientific means (e.g., dental, pathology, fingerprints, and DNA samples);
- preparing, processing and returning human remains and personal effects to the authorized person(s) when possible;
- providing technical assistance and consultation on fatality management and mortuary affairs to local officials; and
- request federal Disaster Mortuary Operational Response Team (DMORT) assistance as appropriate.

A matrix is included as ATTACHMENT 2 of this plan. The matrix identifies functions and considerations during a mass fatality event and the responsibilities of local, state, and federal entities.

### b. Organization

To ensure a coordinated incident response, ESF #8 functions have been incorporated into the Nebraska State Emergency Operations Plan. With assistance/coordination from NEMA, the DHHS Emergency Coordination Center will coordinate mass fatality related response and recovery issues at the state level. DHHS will work through the ESF #8 coordinator in communicating information, coordinating resources, and providing guidance to local officials and responders.

### c. Notifications

The state ESF #8 Coordinator may be notified of an incident involving multiple deaths by NEMA. Upon notification of an incident involving mass fatalities, the ESF #8

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Coordinator or designee will, in coordination with the NEMA State Emergency Operations Center (SEOC), activate the Nebraska Mass Fatality Plan.

The ESF #8 Coordinator or designee will contact appropriate entities identified in this plan of the decision to activate this plan and assign response roles based upon the needs of the event.

## **d. Activation**

This plan may be activated in response to any incident that results in mass human fatalities that overwhelm local capabilities. This plan is not a substitute for local/regional planning. The plan may be activated stand-alone or in concert with the complete or partial activation of the State Emergency Operations Plan.

## **3. Recovery, Handling, Disposition of Remains, and Family Issues**

### **a. Recovery/Identification of Remains**

When it is safe to do so, and the scene has been released by investigating authorities, recovery of human remains will commence. Where local resources are inadequate to recover human remains due to the nature of the event, risk/hazards, weather, etc. a request can be made through local emergency management to NEMA to determine resource needs and availability of state resources to assist in recovery efforts. Recovery efforts shall commence as soon as it is practical to do so. Local fire/rescue personnel will be primarily responsible for initial recovery and transportation of remains. Additional assistance/resources may be requested through NEMA.

### **b. Morgue Operations**

The County Attorney must determine if remains should be processed at the pathologist facility in which the deaths occurred (if applicable), or within another location which does not overwhelm local capabilities. Such a decision is based on the magnitude of the incident, and the space, facilities, and personnel needed to accommodate the additional case load. A suitable cold storage area of between 32 and 40 °F degrees with an industrial air conditioning will be required. The use of refrigerated trucks will likely be needed for morgue operations. It is recommended that local/regional authorities identify facilities/equipment and secure agreements/MOU's with local providers for these resources prior to an event occurring.

The purpose of morgue operations is to provide positive identification of the decedent, cause manner and time of death, and return of remains to affected families. Unlike routine casework where human remains are processed at one station, mass fatality incident remains are most often processed in a multiple-station system which generally entails: intake/admitting, photography, criminalist, personal effects, pathology, radiology, finger printing, dental odontology, anthropology, funeral directors and DNA sampling.

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

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personal effects, photography, radiographs, anthropology, fingerprints, dental and pathology reports. The post mortem records will be compared to the ante mortem (pre-death) records which are obtained at the Family Assistance Center to obtain a positive identification. Family assistance center is discussed in section 3d.

### **c. Risk Assessment/Decontamination**

Health and safety of responders is the highest priority. A risk assessment will be conducted to determine the need for decontamination or other measures for the safety of responders conducting recovery operations. Deceased individuals may need to be decontaminated prior to being admitted to the morgue area. Specialized expertise from the Nebraska National Guard Civil Support Team, federal DMORT or other teams (e.g., DHHS Radiological Health, Federal Department of Energy for radiological contamination) should be sought to provide direction and guidance in fatality decontamination operations.

Decontamination of deceased individuals and remains should be conducted by properly trained and equipped personnel in accordance with the decorum expected when handling human remains. Where decontamination is not required, however responder safety is a concern, proper PPE shall be worn by responders handling remains.

### **d. Family Assistance/Notification**

If needed to collect/communicate decedent information, a facility should be set up in a suitable, secure location convenient to the site but removed from the majority of on-scene activities. The local Chapter of the American Red Cross will establish a Family Assistance Center. A staff of funeral service and clergy will be organized to assist appropriate agencies and families with family notification, service preparation, behavioral health support, spiritual care, and other end-of-life documentation. It is recommended that agreements/MOU's with these organizations be in place by local/regional authorities to provide these services. Only selected individuals assigned to the Family Assistance Center shall have access to the center due to the sensitive and personal nature of the work being done. Proper decorum shall be dictated and established by the coordinator of the center.

Information should be gathered to assist in the identification of remains. Decedent information may come from relatives, or persons having a relationship with the decedent. It is recommended that clergy and/or funeral directors (if available) conduct identification interviews using appropriate documents.

The Family Assistance Center personnel shall assist the family in preparation of all necessary paperwork for the final disposition of the remains. This paperwork will be maintained with the victim's records and individual victim files will be maintained. Family Assistance Center personnel will also coordinate the return of the remains to the funeral director who has been chosen by the family.

### **e. Personal Effects and Property Disposition**

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Recovery of personal effects and property should be handled by search and recovery personnel concurrently with recovery of remains. Careful collection and location plotting of personal effects found at a disaster site is critical to preserving clues of ownership. For example, property found on remains (wallets, jewelry, etc.) must stay with recovered remains. When property is found close to remains, it must be tagged to identify its location in relationship to the remains (Property found near remains does not necessarily associate ownership or relationship with nearest remains) Photographs of personal effects should be taken prior to removal.

Items should be placed in clear plastic bags for easier identification; wet items should be placed in proper bags. An identification (recovery) number should be placed on each bag as well as each item. A special secure area is needed for processing unidentified (as to ownership) personal effects. When recovery or mortuary teams are recording items, the most basic descriptions will be used. For example, a ring would be described as “gold in color with clear stone,” not “gold band with diamond.”

If possible, all identified personal effects will be released to the next of kin. A receipt listing all items released to the next of kin will need to be signed by the next of kin and filed. All unidentified personal effects will remain under the control of the County Attorney. The Nebraska office of the Attorney General may be utilized as a source of advice and legal interpretation on issues relating to the disposition of personal effects and property.

### **f. Remains Not Recovered**

Conditions and circumstances sometimes preclude the recovery of remains in spite of exhaustive efforts. Once the determination has been made that remains are unrecoverable, memorial services may be arranged by local entities at their discretion.

All efforts should be made to notify and include the surviving family members in any planned memorial services. Assistance in post-death activities should be extended to the surviving friends and family members.

In cases where remains are not recovered but an individual is presumed dead as the result of a catastrophic event, disaster, or state of emergency, Nebraska statutes provide for the issuance of a death certificate without the identification or recovery of a body.

## **4. Disposition of Remains**

### **a. Temporary Storage, Identification, and Burial**

Temporary storage of remains or tissue may be a better option than immediate burial depending on the nature of the incident. Consideration in the decision would include: time between death and the identification and return of the remains to the family, existence of infectious or contagious disease, possibility of identification, ability to locate or determine next of kin, overwhelming number of decedents, and legal considerations.

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The decision to temporarily store remains is the responsibility of the County Attorney. Preparation should be done in accordance with accepted practices unless otherwise directed. It is recommended that county/local and local health department entities responsible for mass fatality management develop agreements/MOU's with entities to provide temporary storage of remains.

Remains shall be placed in body bags/pouches and/or casketed, and placed in temporary storage as directed by the County Attorney. Records of deceased being placed in temporary storage or burial shall include the following:

- Morgue number, sex, age, race, height, weight, hair color, eye color, scars, tattoos, teeth (natural, false, or both), missing or artificial limbs
- Date of death and/or date of recovery
- Details about clothing: size, color, manufacturer, etc.
- Personal effect and items found in pockets
- Fingerprints
- Name, address, phone number, funeral director/embalmer number, and signature.

### **b. Issuance of Certificate of Death**

The Office of Vital Records within DHHS is responsible for the issuance of death certificates. Personnel from Vital Records will work in coordination with the County Attorney and funeral directors for the rapid and efficient processing of death certificates for victims of a mass fatality incident.

### **c. Return of Remains to Family Members**

Once the remains have been positively identified and released by the County Attorney, the next of kin will be contacted. The County Attorney, funeral director clergy, or partner agencies will work with the family to assist them in making final decisions regarding the disposition of their loved one and coordinate the release of the personal effects to the next of kin or their representative. In situations where there are unidentified remains, the County Attorney shall make the decision and provide direction regarding disposition of remains.

Where embalming or preparation is authorized, the procedure will be performed under the direction of a licensed funeral director or embalmer for later transportation to the family's designated funeral home, crematory, or other destination.

During a pandemic event, local capabilities to inter/cremate bodies may be exceeded. Local entities and the state should identify locally and state owned public land to inter remains either temporary or permanently at local/state discretion. Coordination local jurisdictions and local cemeteries is recommended to discuss a large number of interments that may occur.

## **5. Additional Resources**

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When local and state resources have been exhausted or exceeded resulting from a mass fatality event, federal Disaster Mortuary (DMORT) assistance may be requested. The request process is included as ATTACHMENT 1 of this plan. Additionally, equipment and supplies may be requested through the Emergency Management Assistance Compact (EMAC) through NEMA. It is acknowledged that during a pandemic event mass fatality resources may not be immediately available. This underscores the importance of local and regional planning for a mass fatality event.

## 6. Responsibilities



It is the responsibility of DHHS to review and revise this plan. DHHS will provide the updated version of this plan to NEMA for inclusion as an annex to ESF#8 within the revised SEOP.

## 7. Acronyms

DAS-Nebraska Department of Administrative Services  
DHHS-Nebraska Department of Health and Human Services  
DMORT-- Disaster Mortuary Operational Response Team  
ESF-Emergency Support Function  
HCC-Healthcare Coalition  
ICS-- Incident Command System  
LPHD-Local Public Health Department  
NEMA-Nebraska Emergency Management Agency  
NSP--Nebraska State Patrol  
SEOC-- State Emergency Operations Center  
SEOP-State Emergency Operations Plan

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**Federal Disaster Mortuary Request Process**  
**And Contact Information**  
**4-2020**

**Purpose:** The purpose of this document is to outline the procedure for requesting Disaster Mortuary assistance (DMORT) teams in response to an event that overwhelms state capacity to respond to a mass fatality or cemetery related event.

1. DMORT is a Federal Level Response team designed to provide mortuary assistance in the case of a mass fatality incident or cemetery related incident. DMORT personnel work under the local jurisdictional authorities such as County Attorneys, Law Enforcement and Emergency Managers.
2. The National Response Plan assigns the National Disaster Medical System (NDMS) Section under Emergency Support Function #8 (ESF8) to provide victim identification and mortuary services.
3. Upon the decision that state resources are overwhelmed in response to a mass fatality or cemetery related incident a governor's proclamation may be needed to request assets. If there is no Stafford Act Declaration, the state will be responsible for all expenses of deploying a DMORT team.
4. **Once the decision is made to request DMORT assets, the governor or representative will contact the Secretary of the Federal Department of Health and Human Services (HHS) Operation Center at: 866-447-7362 or 202-619-7800.**
5. HHS Region VII staff will confer with state officials regarding the request to clarify any issues (such as funding, logistics etc.) prior to authorizing a DMORT team deployment.
6. Region VII contacts for DMORT assistance:
  - a. CAPT Dana Hall  
US Public Health Service  
DHHS Region VII Emergency Coordinator  

  - b. Richard R. Garner  
OS  


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**Nebraska Mass Fatality Response Matrix**

<b>Function</b>	<b>Legal Authority</b>	<b>Local Response First Local Emergency Mgr/LEOP</b>	<b>When local resource exhausted, ESF 8 takes lead as follows</b>	<b>When local resources exhausted/unavailable, NEMA and other ESF's take the lead as follows</b>
Secure Area		County Attorney decides Local law enforcement to enforce County/City Roads Dept place road barriers Hazmat as needed for decontamination MOUs used as needed		State Patrol State Dept of Roads Fire Marshall Game & Parks National Guard (Air & Army)
Risk Assessment		Local Health for disease and exposure assessment Law Enforcement	Epi/Surveillance staff Radiological Health staff	Department of Environmental Quality State Patrol National Guard
Family Assistance/ Notification		Law Enforcement Local Red Cross to arrange family assistance center Local clergy/funeral directors	Division of Behavioral Health to activate and coordinate regional BH response teams	State Patrol ESF 6 – Red Cross to arrange facility
Body Retrieval		County Attorney - decision on removal, cause of death for death certificate Fire & Rescue – retrieval Community Emergency Response Teams - retrieval City/County - heavy equipment Hazmat as needed MOUs as needed	Local fire/rescue Mutual aid resources	ESF 15 National Guard – CERFP for decontamination of disaster pouches (body bags)*. Coordinate with military Fatality Search and Recovery Teams (FSRT) ** if requested. ESF1 State Dept of Roads - heavy equipment Construction companies - heavy equipment Civil engineer to determine safety of scene and techniques for clearing debris Urban Search & Rescue Nebraska Task Force 1 (sponsored by Lincoln Fire & Rescue)
Body Transportation		County Attorney determines where and how bodies are to be transported LPHDs & HCC for body bags Funeral Directors – hearses/vans/morgue trailers Ambulances City/County Depts. – vans, trucks MOUs/mutual aid agreements	LPHDs & HCC for body bags Contact local funeral directors Contact EMS/Ambulance services	Nebraska Administrative Services TSB for vans, trucks Dept of Roads for vans, trucks Companies selling or renting vans, trucks



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**Nebraska Mass Fatality Response Matrix**

Body Storage		Hospitals Funeral Homes Emergency Mgr. – arrange alternate storage, possibly refrigerated semi-trucks. Local morgue trailers. (need to identify) Body Bags	Contact funeral homes in area	NEMA/DHHS/DAS to locate alternate storage and coordinate storage resources Request DMORT as needed
ID Cause of death	County Attorney Statutes	County attorney as <i>ex officio</i> coroner (often delegated to Law Enforcement), attending physician	Facilitate coroner resources: Douglas County Coroner, pathologists	State Patrol Request DMORT as needed
Body Identification		County Attorney & local law enforcement to contact next of kin, use identification on body, request dental records and/or DNA analysis	Facilitate coroner resources: Douglas County Coroner, pathologists	State Patrol Request DMORT as needed
Critical Incident Stress Management for responders		Local law enforcement, fire and rescue and EMS	Division of Public Health – EMS Office to coordinate	State Patrol
Final Disposition Death Certificates Burial/ Cremation	County Attorney Statutes	Family Funeral Directors County Attorney Attending Physician	Division of Public Health Vital Stats - Death Certificate assistance Public Health Division Licensure Office for information on burial/cremation	NEMA/DAS/DHHS to find resources and coordinate if mass burial is needed.

*Note: Aviation, terrorism or communicable disease events will be overseen by federal authorities. However immediate response may fall on local authorities.*

\* CERFP will not decontaminate deceased remains.

\*\*FSRT is a component of CERFP and attached to the Iowa National Guard.