



Fatality Management Plan

Attestation:

Approved by CFDMC Board on June 21, 2022

A handwritten signature in black ink, appearing to read "Eric Alberts", is written over a horizontal line.

Eric Alberts
2022 CFDMC Board Chair

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**CENTRAL FLORIDA DISASTER MEDICAL COALITION
FATALITY MANAGEMENT PLAN**

RECORD OF CHANGES & DISTRIBUTION

Changes	Distribution
In 2016, the region’s medical examiners adopted the State of Florida Fatality Management Plan prepared by the State Medical Examiners Commission as the regional plan.	Region 5 Medical Examiners
Draft Update Developed May 2020	Distributed to Medical Examiners and Other Stakeholders for Comment 5/16/20 Presented to Board for Approval on 6/16/20 Posted to Website 6/30/20
Draft Update Developed December 2021 (remove outdated information, clarify roles)	By Region 5 Medical Examiners
Provided supporting documentation for Memorandum of Understanding	CFDMC; sent to Hospitals, Emergency Management and ESF8 for review Approved by CFDMC Board 6/21/22 Poste to website 6/30/22

Introduction

Purpose: Mass fatality management involves emergency management organizations, public health agencies, medical examiners, funeral homes, hospitals, and other stakeholders, depending on the nature of the emergency. The CFDMC Fatality Management Plan outlines the roles and responsibilities of partners within Region 5 in managing mass fatalities. This plan aligns to and supports the State of Florida Fatality Management Response Plan of the Florida Medical Examiners Commission (See Appendix A).

Scope: This plan applies to medical examiners, funeral homes, emergency management, public health, hospitals, and other mass fatality partners within RDSTF Region 5, comprised of Brevard, Indian River, Lake, Martin, Orange, Osceola, Seminole, St. Lucie, and Volusia Counties.

Background: The region began mass fatality planning in December 2015, with the Coalition sponsoring a G-386 Mass Fatalities Response training. In early 2016, the Coalition facilitated an initial meeting of the Region 5 Medical Examiners, who agreed to adopt the State of Florida Fatality Management Response Plan of the Florida Medical Examiners Commission as the region's mass fatality plan. During 2016 and 2017, the Coalition worked with the medical examiners to increase the levels of equipment and supplies needed for local medical examiner response through the purchase of additional necessary equipment/supplies to better prepare the local medical examiner staff for their response in the event of a mass fatality incident where human remains recovery is necessary. In March 2016, a draft Memorandum of Agreement was distributed to all Region 5 medical examiners; to date, no agreements have been signed. During 2017, the Coalition sponsored training provided by FEMORS (Florida Emergency Mortuary Operations System), including both on-line sessions and an in-person training on the FEMORS Victim Identification Program database and technical support visit for each of the Region's ME offices.

In December 2018, the Coalition facilitated a mass fatality tabletop including representatives from all Region 5 Medical Examiner Offices, FEMORS, the Department of Health (DOH), Emergency Management, ESF8, hospitals, Consulate authority, County Unclaimed Decedent Program, Florida Air National Guard, and Florida Funeral Home Directors Association. The tabletop objectives were to identify and assess local and regional strengths, identify local and regional response gaps, and begin development of a regional response plan.

Roles and Responsibilities in Mass Fatality Management:

Specific roles and responsibilities in a mass fatality event include:

Medical Examiners have the lead in managing mass fatalities, including command and control, recovery, postmortem processing, victim information and identification. Once notification is made of an event with a potential for significant loss of life, a medical examiner should attempt to assess the scope of the event and anticipate levels of additional resources that might be needed, including:

- Modification of routine workflow within the facility to permit processing and segregation of daily casework from disaster-related victims.
- Possible supplemental space and equipment requirements for refrigerated storage.
- Temporary staff and supply increases to respond to the surge event; and,
- Implementation of a continuity of operations plan (COOP) in case of ME facility damage.
- Determine triggers for activating mutual aid agreements and requesting resources such as FEMORS and DMORT.

The Medical Examiners in Region 5 are negotiating a Memorandum of Understanding to provide support to each other in a mass fatality event (See Appendix C).

Hospitals should:

- Prepare for a surge in initial storage of decedents, including those who will not become medical examiner cases (e.g., non-medical examiner cases not claimed during a pandemic or during a manmade or natural disaster)
- Manage large numbers of family members and friends of decedents who may come to the hospital
- Facilitate the identification of potential temporary, ad hoc mass fatality storage sites on campus and prepare for the need of expanded decedent storage capacity by adding additional body storage racks or refrigerated storage system(s).
- Manage contagious, chemically, or radiologically contaminated remains
- Provide information to Medical Examiners using the regional form (see Appendix B)

Emergency Management should:

- Provide requested support and assets through the county and state ESF8, including activation of the FEMORS and DMORT teams and may share command and control through a Multi-Agency Command.
- Facilitate the identification of potential temporary, ad hoc mass fatality storage sites or body collection points in the community (e.g., parking decks, ice rinks) in the event refrigerated trailers and other conventional storage means are not immediately available or the death totals exceed conventional storage avenues.

- Secure and utilize a call center (such as Orange County 311 system staff) to manage incoming calls for victim information post-event.

Public Health should:

- Provide clinical guidance for protecting the health and safety of Medical Examiner and funeral home staff, and safe handling of remains. In Florida, the Florida Department of Health is the lead ESF8 agency, and in most counties, the local health department is the lead for county ESF8.
- Facilitate collecting contact information on each funeral home/crematorium within the region (which is already captured in the FDOH, EDRS system) to be able to communicate with them if needed during a disaster on behalf of the CDC and/or medical examiner community.
- Facilitate collecting storage capacity limitations at funeral homes/crematoriums and medical examiner offices within the region to have an established benchmark of its regional body storage capacity.
- Facilitate collecting from all the crematoriums within our region the normal range of cremations that can be conducted during a regular workday at their facility to have an established benchmark of its regional throughput during normal times.
- Facilitate distributing messaging to all hospitals, health departments, or other healthcare facilities if needed during a disaster on behalf of the CDC and/or medical examiner community.
- Once developed, facilitate providing test kits and coordination of processing of kits at state laboratories for medical examiner offices in the region during a pandemic to identify a new virus.
- Ensure medical examiner, funeral home/crematorium personnel, and body transport personnel are all listed as “medically essential personnel” during a pandemic/disaster situation.

Funeral Homes should:

- Funeral homes and crematories selected by families will be notified by the medical examiner staff or hospital when remains are ready for release. Funeral homes and crematories will respond to transport the remains and assist in the filing of the death certificate under procedures established by the Bureau of Vital Statistics.
- Work with community leaders and FDOH to prepare a plan in the event a pandemic/disaster situation necessitates increasing processing potential at crematories in the region, as well as, identifying funeral homes/crematoriums who would commit to possibly storing decedents for other funeral homes/crematoriums temporarily during certain circumstances.
- Consider having language ready to request waiving the statutory requirement of waiting 48 hours after death to cremate during a pandemic and getting a

commitment from the crematoriums to extend their regular work hours under certain circumstances.

The Central Florida Disaster Medical Coalition should facilitate and support mass facility planning, equipping, training and exercise needs of the Medical Examiners and other stakeholders.

Priorities for 2022:

The following are the Mass Fatality Management priorities for the coming year:

- Secure Medical Examiner engagement in the plan through signing of Memo of Understanding

Appendices

Appendix A: Florida Fatality Management Response Plan of the Florida Medical Examiners Commission

Appendix B: Hospital Form for Reporting Mass Fatalities

Appendix C: Memorandum of Understanding