Mass Fatality Planning Considerations

The importance of having a mass fatality plan was highlighted during the April 27, 2011 tornado outbreak which tested mass fatality capabilities in many counties. As emergency managers review and update the county’s emergency operations plan, consideration for a mass fatality event should be included. The state Mass Fatality Management Workgroup has developed a list of considerations to help the mass fatality planning process. This list is not inclusive nor is it mandatory. The intent of this document is to aid planners as they think through important aspects of a mass fatality response and the factors that need to be included in their plan. This document should be used in conjunction with other mass fatality planning tools available.

As the workgroup compiled the information, consideration to specific responsibilities for emergency managers and coroners was given. Duties were grouped accordingly, by emergency manager or coroner, and those responsibilities shared by both entities.

**Joint EMA and Coroner Responsibilities/Considerations** - Does the county mass fatality plan:

- Include input from stakeholders such as the local emergency planning committee, county coroner/medical examiner, local healthcare facilities, public health, etc.?
- Identify roles/responsibilities of local jurisdictions that will respond?
- Determine scope of capability/capacity to respond?
- Identify who will conduct decedent recovery and by what means?
- Address decedent decontamination?
- Give consideration to environmental conditions (heat, cold, rain)?
- Provide responders access to appropriate personal protective equipment?
- Address the difference in response if the event is a single occurrence at one location versus a single event at multiple locations, versus a reoccurring event at multiple locations?
- Include family management considerations (Family Assistance Center)?
- Provide for data collection or dissemination of information (e.g., call center or 1-800 numbers, family reception, family assistance)?
- Establish a formal Health and Safety plan (e.g., recovery operations)?
- Include a mental health/behavioral health component for responders?
- Allow for integration of subject matter experts (chemical/radiological) or outside resources such as state or federal mortuary teams?
Coroner Considerations

Do you have written procedures for a mass fatality event that address:

- Removal, transportation, storage, and temporary burial of human remains?
- Equipment needed for a mass fatality response?
- Mass fatality processing and storage operations?
- Morgue operations?
- Chain of custody/forensic evidence?
- Collection and maintaining personal effects?
- How to handle different conditions of remains (visually identifiable vs. whole bodies, fragmented bodies, human remains that are decomposed, charred, comingled, or mutilated)?
- Mental health/behavioral health for responders and families?
- Antemortem data collection and postmortem data collection for victim identification?
- Death notification procedures?
- Where to report missing person information?
- How to record, report, and track fatalities?
- Contacting the Alabama Department of Public Health (ADPH), Center for Health Statistics (CHS) for special instructions regarding the completion of death certificates for victims of the event.
- Ensuring that specific information related to the event which led to death (date and type of event) is indicated on the death certificate in the appropriate sections, as instructed by ADPH/CHS.
- Training for those who will respond?
- Communication (with media and families)?
- Cultural/religious beliefs and burial practices?
- Who will operate the family assistance center, if needed?

Family Assistance Center (FAC) Considerations

If the State Mortuary Operations Response Team (SMORT) deploys to a mass fatality event and a Family Assistance Center (FAC) is needed, trained workers will be available to help with FAC operations. A FAC is a place that families of victims can go to receive information about the event, the recovery, and the identification process.

- Security is a major factor in FAC operations. Media and those curious about the event may try to enter. Look for facilities where access can be controlled.
- Families may begin arriving immediately after the incident or it may take several hours or even days for their arrival, depending upon the event.
- FAC operations may be as short lived as a few hours but could extend into days depending on the number of victims, travel time for families, type of incident, the number of remains/body parts, etc.
• Announcement of the FAC location may take place in a variety of ways including direct contact or through the media. The announcement should include a specific location, who should report to the FAC, and items the family should bring for antemortem data collection.
• The FAC should be readily accessible to family members once the location is disclosed to them.
• The FAC should be spacious enough to avoid crowding and provide the opportunity for privacy for interviews and for those who need it.
• There facility should have a meeting room if possible, for family briefings.
• For short-term events a local church, community center, etc., would be good.
• For longer-term events (greater than 12-18 hours) an FAC at a hotel is best.
• FAC workers with SMORT will not serve the families in a chaplain role.

If an FAC is needed and SMORT is not deployed, additional local resources should be involved in the response including but not limited to agencies such as:

• Local Red Cross,
• Local mental health providers for families and responders, as needed.

Environmental Health Considerations (should temporary burial be required)

• The Alabama Department of Public Health Bureau of Environmental Services has Procedures/Guidelines for: Cemetery Development (Attachment – Cemetery Guidelines) that set minimum suggested standards for the location, extension, setbacks, and limitation of land wherein human remains are interred.
• The proposed land should be pre-identified and evaluated by a representative of the county health department.
• ADPH county environmental health staff will be available to assist in determining compliance.
• Other state agencies that should be consulted in the event a temporary burial is warranted are:
  > The Alabama Department of Environmental Management, Lands Division, (334) 271-7730,
  > The Alabama Department of Public Health, Bureau of Environmental Services, (334) 206-5375, and
  > The Alabama Department of Public Health, Center for Emergency Preparedness (334) 206-3394.
Alabama Department of Public Health

Procedures / Guidelines for Cemetery Development

Public Health Laws of Alabama, Title 22-20-4.

Application for Location and Extension of Cemeteries, Required Documentation, Soil Testing Requirements, Site Location Setbacks and Limitations.

Steps to Acquire Approval for Location and Extension of Cemeteries:

1. The interested party or parties shall make written application for a proposed location of a cemetery or to extend the boundaries of an existing cemetery to the Judge of Probate and County Commission or to the Mayor and Council of an incorporated city or town, who shall in turn refer the application to the Board of Health of the county for a sanitary investigation.

2. Contact a professional soil classifier, professional surveyor, professional engineer or professional geologist to conduct the required soil testing, and submit the needed documents with approval from the applicant(s) to the local Health Department. Required documentation should include; vicinity map, legal description, or copy deed, and plot plan. A list of licensed professionals is available at the local Health Department. The application must include the name, address, and telephone numbers of the individuals, company, or corporation proposing cemetery development or expansion.

3. The plot plan should incorporate the following:
   - Contour elevations every five feet
   - Any proposed cut or fill areas
   - Any existing or proposed drainage
   - Any existing or proposed surface water impoundments
   - Any existing or proposed wells either on or within 100 ft. of the boundaries of the proposed site
   - A listing of adjacent property owners

4. An overlay of a soils map prepared by the Natural Resource Conservation Service (NRCS - Soil Conservation Service) should be submitted for the site.

5. A sufficient number of soil borings, typically one per acre, must be placed on the proposed site in order to determine the ground water and soil characteristics. The borings should be a minimum of 8 inches in diameter, and a minimum of 6 ft. deep unless restricted by depth to bedrock or other limiting factors. Additional borings may be required by the Health Department.
6. Soils descriptions and depths to actual seasonal groundwater, bedrock or other limiting factors must be provided by the selected professional.

7. If required by local site conditions, a statement confirming the absence of lime sinks or similar geological features must be provided by a geologist.

8. Burial plot locations should adhere to the following setbacks and limits:

   No subsurface plots should be developed:
   - Closer than 35 feet from any property boundary.
   - Closer than 100 feet from a private well.
   - That requires interment closer than 1 foot above seasonal or actual groundwater.
   - That do not allow for a minimum of 18 inches of earth cover.
   - Within 25 feet of surface drainage features.
   - Within 50 feet of surface waters.
   - Within a flood prone area, swamp, marsh or wetland.
   - Within a finished grade / slope greater than 25%.
   - In areas with one or more instances of ground subsidence or settling.

9. Health department officials will review the submitted information and conduct a site visit, usually within ten days after receipt of materials. Incomplete or inaccurate information may delay processing.

10. The Health Department shall submit a report to the Judge of Probate and County Commission, or to the mayor and council, as the case may be, and either approve or disapprove the application.

11. The Judge of Probate and County Commission or the mayor and council, as the case may be, shall issue to the party or parties making the application, in such form as they may prescribe, a license to establish or extend the cemetery in question.

12. The license shall be recorded by the party or parties making application in the office of the Judge of probate.

§8-30-1. Definitions:
The following terms shall have the following meanings:

(4) CEMETERY. Any land or structure in this state dedicated to and used, or intended to be used, for interment of human remains. It may be either a burial park for earth interments, or a mausoleum for vault or crypt interments, or a combination of one or more thereof. The term shall not include governmentally owned cemeteries, fraternal cemeteries, church and synagogue cemeteries, or family burial plots.

MISCELLANEOUS HEALTH LAWS

§ 22-20-4. Location and extension of cemeteries.

Whenever it is proposed to locate a cemetery or extend the boundaries of an existing cemetery, the party or parties so proposing shall make written, application to the judge of probate and county commission or to the mayor and council of an incorporated city or town, according to whether said cemetery or extension of a cemetery is to be located in the jurisdiction of one or the other of these authorities, describing accurately the location and boundaries of the proposed cemetery or extension of a cemetery. Before acting upon the application, the judge of probate and county commission or the mayor and council of an incorporated city or town, as the case may be, shall refer the application to the board of health of the county for investigation from a sanitary standpoint. In making such investigation, the county board of health shall take into consideration the proximity of the proposed cemetery or extension of a cemetery to human habitations, the nature of the soil, the drainage of the ground, the danger of pollution of valuable springs and streams of water and such other conditions and surroundings as would bear upon the sanitary aspect of the situation. Having completed its investigation as promptly as can be done, the county board of health shall submit a report to the judge of probate and county commission, or to the mayor and council, as the case may be, and either approve or disapprove the application. If the latter, the board shall set forth at length its reasons for such disapproval. Having received the report from the county board of health, the judge of probate and county commission or the mayor and council, as the case may be shall either grant or deny the application, giving due weight in reaching either conclusion to the views expressed by the County Board of Health. Should the application be granted, the judge of probate and county commission or the mayor and council, as the case may be; shall issue to the party or parties making the application, a license to establish or extend the cemetery in question. The said licensee shall, upon the payment of $.50 by the party or parties making the application, be recorded in the office of the judge of probate of the county. (Code 1907, § 726; Code 1923, § 1149; Code 1940, T.22, § 88.)