

Fatality Management Annex



Approved
Modoc County Disaster Council
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1. Purpose and Scope

1.1 Definitions

1.1.1 Mass Fatalities Incident

For the purposes of this plan, a mass fatalities incident, is defined by Health and Safety Code §103451 as situation in which any of the following conditions exist:

- There are more dead bodies than can be handled using local resources
- Numerous persons are known to have died, but no bodies were recovered from the site of the incident
- Numerous persons are known to have died, but the recovery and identification of the bodies of those persons is impracticable or impossible
- The County Coroner or medical examiner may make the determination that a condition described in the first bullet exists within the jurisdiction

1.1.2 Disaster

For the purposes of this plan, a disaster is any natural disturbance or man-made event, civil disturbance or hostile attack, or any other hazardous occurrence of unusual or severe effect, threatening or causing injury or fatality to multiple individuals.

- **Natural** – severe weather, floods, forest fires, earthquakes, etc.
- **Technological** – nuclear, chemical spills, airline or other form of transportation crash, etc.
- **Biological** – epidemics, contaminated water or food, disinterred bodies, etc.
- **Socio-political** – riots, terrorism, warfare, etc.

1.1.3 Pandemic

- A pandemic influenza event is not a single event but an on-going event that will take place over a period of weeks and months. Local jurisdictions probably will not be able to depend on “outside” resources
- During a pandemic influenza event, nontraditional means of body transportation, body storage, body processing, and body disposition may be necessary

1.2 Purpose

This plan delineates the Modoc County Coroner’s response to incidents of mass fatalities including those caused by infectious disease, natural hazards, human-related hazards, technological hazards and/or terrorist acts which exceed local resources and capabilities. The Coroner’s legal authority is established pursuant to California government Code Section(s) 27471, 27491 et al, 27504.1; California Health and Safety Code Section(s) 7102, 102850 and other statutes as specified by applicable code(s).

In Modoc County the Sheriff is also the Coroner. For this document, the Sheriff/Coroner will be referred to as the Coroner.

The County Coroner will:

- Ensure that death certificates are prepared and facilitate ways for preparing, processing and releasing human remains to the next-of-kin under emergency conditions
- Perform scene documentation
- Complete collection and recovery of the dead, victim's personal effects, and items of evidence
- Ensure decontamination of remains and personal effects as necessary
- Transport, store, document, and recover forensic and physical evidence
- Determine the nature and extent of injury
- Ensure identification of the fatalities and process per coroner procedures for certification of the cause and manner of death
- Process and return human remains and personal effects of the victims to the legally authorized person (if possible)
- Shall coordinate legal, compassionate and culturally competent services to the families of the deceased within the context of a Family Assistance Center

1.3 Scope

- The County Coroner has legal jurisdiction and responsibility to collaborate with the Public Health Officer and affiliated agencies to examine and dispose of human remains from deaths known or suspected to be due to unnatural causes, homicides, and known or suspected contagious diseases that constitute a public health hazard.
- The County Coroner shall consult with the Public Health Officer and Environmental Health to ensure effective disposition of remains that constitute a public health hazard.
- The County Coroner will coordinate resources and collaboration among all mass fatality response partners. Successful management of mass fatalities includes public communication, vital records administration, hospital and death care industry operations and coordination, and decedent operations to include remains recovery, morgue services, and family assistance.

1.4 Goals

- To preserve the dignity of victims
- To protect the health of the general public
- To identify victims
- To provide hospitals with a clear and coordinated process for handling the deceased when decedent operations have exceeded normal hospital capacity
- To effectively, efficiently, and compassionately provide services for the deceased, their families, and the community

2. Situation and Assumptions

2.1 Situation

- Cooperation and collaboration among all mass fatality response partners is critical for effective mass fatality management
- All operations will be conducted utilizing the Incident Command System (ICS), the Standardized Emergency Management System (SEMS), and the National Incident Management System (NIMS) in coordination with the Modoc County Emergency Operations Plan
- This plan will also work in coordination with the State of California Coroners Mutual Aid Plan (2010)

2.2 Assumptions

- A mass fatalities incident is an incident that produces more deaths than a community can manage independently, using local resources
- In all situations the Coroner is the authorized and responsible agency for mass fatality incident response.
- A disaster situation may be created in a short time frame or may be generated over a longer period of time and have no absolute point of origin
- A disaster situation, man-made or natural, will tax the capabilities and/or resources of the operational area including public health and medical resources
- Mass fatalities incidents may require a collaborative effort between local and state agencies to manage an effective response
- Coordination of overall mass fatality operations will be located in the Emergency Operations Center (EOC) using the Incident Command System (ICS) for command and control of the operation
- Supplies for caring for the remains of the deceased (such as embalming fluid, caskets, body bags and areas for storage) may be in very short supply
- Appropriate personal protective equipment (PPE) will be utilized for the evaluation, processing, and transportation of all remains
- It may become necessary to store remains for longer periods of time than normal and appropriate locations must be predetermined
- Remains of a loved one will be treated with care and will be returned to the next of kin for interment when and if possible
- Mass fatality incidents create widespread traumatic stress for families, responders, and often, the community at-large. Attending to health needs of victims and responders is critical

3. Concept of Operations

3.1 Command and Control

The Modoc County Coroner, in collaboration with Modoc County Public Health, Environmental Health, local law enforcement, and other designated emergency response agencies, will coordinate all efforts involving the evaluation, collection, identification, storage and final disposition of all human remains. All operations

will be conducted utilizing ICS in accordance with the Modoc County Emergency Operations Plan (EOP). The County Coroner through the applicable section chief or incident commander will make all requests for resources necessary to respond to the incident.

The Modoc County Emergency Operations Center (EOC) plays a major role in the coordination of local, state and federal resources. Concurrent with EOC activation, the Public Health department shall hold a seat within the EOC as the Medical/Health Branch Director. The Public Health DOC will be activated when directed by the Public Health Officer. Some examples of a mass fatality incident are listed, but not limited to:

- A pandemic influenza and/or infectious disease of similar seriousness is threatening the general population of the County
- A food borne outbreak occurs
- The need for multiple patient management is necessary for the injured survivors
- The County's hospitals and long term care facilities' resources are maximized and assistance is needed

Incident organization will be based on the current and projected needs of the incident. Modoc County Coroner will provide oversight and coordination of resources to meet the needs of the incident. The Operations Section Chief shall activate the position of Mass Fatality Branch Director.

Incidents involving terrorist or "man-made" disasters would be considered crime scenes and would most likely result in a request for a Local Emergency Declaration. Incidents involving biological or chemical agents must be reported to the Federal Bureau of Investigation (FBI). All state and federal mortuary response (Disaster Mortuary Response Team – DMORT) resources may be available during a declared state of emergency.

The County Coroner and the designated Mass Fatality Branch Director will determine whether local resources and capabilities will be exceeded, and if so, determine what additional resources are necessary. This could include:

- The establishment of a Mass Fatality Staging Area
- The establishment of an Evacuation Transportation Staging Area
- The establishment of a temporary Incident Morgue
- The establishment of a Family Assistance Center

3.2 Response

The County Coroner will be requested by the on-scene commander through Modoc County Sheriff dispatch. The IC will provide the approximate number of fatalities or confirmed dead.

The County Coroner or designee will respond to the scene to assess the situation and may establish an incident morgue site and determine the need for a Mass Fatality Branch Director. The County Coroner will provide the location of the temporary morgue to the IC. Remains will be recovered and evacuated to the

temporary morgue site (in collaboration with law enforcement) for identification purposes and safeguarding of the victims' personal effects.

Initial incident support for mass fatality incidents will be provided by local law enforcement, fire, hazmat, public works, environmental health and public health from within Modoc County and from neighboring local counties as requested through the EOC. As warranted, a Security Unit Leader may be requested.

When a mass fatality incident is beyond the resource capability of Modoc County, the coroner will request mutual aid from the Region III Mutual Aid Coordinator. The Regional Mutual aid Coordinator fulfills the mutual aid request from coroner resources within the region first. If the resources within the region are not sufficient, the Region III Mutual Aid Coordinator requests additional mutual aid assistance from CalOES. Other mutual aid regions will be contacted by the State Coordinator for assistance.

Incident site and initial response considerations:

- Leave remains undisturbed
- Establish a security zone
- Determine the safety of the scene
- Determine the scope of the incident
- Evaluate resources and potential short and long term needs
- Brief searchers and establish a chain of custody
- Maintain a written log of all participants
- Mark all remains and fragments
- Plot area and assign grid numbers and locations
- Photograph all remains in place
- Decontaminate remains as necessary
- Determine any public health risk involving the scene

The County Coroner will utilize local funeral resources to assist with the transportation and processing of remains. The County Coroner will assess the scene and will determine the number of individuals and vehicles needed to accomplish the task of recovering and evacuating remains to the temporary morgue site. The County Coroner will request all necessary resources through the EOC. All personnel will report to the incident staging area for credentialing and to sign-in.

The County Coroner will identify refrigeration trucking companies or other services that could provide refrigeration capabilities for the storage of human remains if needed.

The following steps will be taken by the County Coroner to request the activation of the Coroner's Mutual Aid Plan: all requests must be made through the proper chain of command – Operational Area to Region III Coroner's Mutual Aid Coordinator- Shasta County Sheriffs Department; Region to California – CalOES Law Enforcement Branch; State to other mutual aid regions and/or other state resources and the federal government.

3.3 Policies and Procedures for Standard Operating Procedures

Procedures for the following operations will be included in the annex:

- Health and Safety Guidelines for Handling Human Remains
- Recovery of Remains
- Evacuation to the Incident Morgue or Transportation Staging Area
- Notification and Identification of Remains
- Decontamination
- Death Certificate Process

3.4 Public Health Emergency Considerations

The vast majority of resources devoted to a public health emergency (either biological, pandemic influenza or man made) will be devoted to care for the living. It is possible that the presence of a public health emergency will not become apparent until days after its arrival. Fatalities will be inevitable and may occur over an extended period of time. Appropriate and respectful treatment of these fatalities must be managed to assist with psychological reassurance and comfort to both the family members and the community at large.

As these non-acute mass fatalities may occur over a period of days, weeks, and even months, human remains may need to be recovered from multiple sites and processed at a central location until the event subsides to the point that normal operations can accommodate the surge in deaths.

It is possible there will be limited to no mutual aid between communities, counties, the State of California, and the federal government. Critical services may need to be maintained despite a threatened, diminished, and incapacitated workforce. Supplies for caring for the remains of the deceased (such as embalming fluid, caskets, body bags, and areas for storage) may be in short supply during the pandemic influenza period as multiple waves hit the country simultaneously. Many families may not be able to have traditional burials and funeral services within several days of the death of the deceased, and it may become necessary to store bodies for longer periods. If a social distancing/public gathering ban is in effect, funerals will need to be postponed until the ban is lifted. There may also be a shortage of trained funeral directors to perform the necessary preparations.

County Coroners do not normally have jurisdiction over non-acute mass fatalities within their jurisdiction for natural disease outbreaks. The determination of cause and manner of death will be determined by the treating physician. If it is suspected that the outbreak is the result of an intentional or accidental human or technological act or occurrence, the determination of the cause and manner of death as well as the certification of death shall be the County Coroner's responsibility. Specific operational procedures for public health incidents are in the Standard Operating Procedures outlined in Section 7 of the Appendices.

4. Organization and Coordination

4.1 Roles and Responsibilities

4.1.1 All Agencies

- Prepare and maintain Standard Operating Procedures (SOPs) and functional checklists for emergency response, including a system for automatic reporting of pre-designated personnel, to include “Grab & Go” supplies
- Train personnel in Incident Command System and agency specific Standard Operating Procedures; participate in emergency exercises
- Maintain communications with other related response teams as designated in the operational organization

4.1.2 Modoc County Coroner’s Office

- Assesses the situation and activates the Mass Fatalities Annex at the appropriate activation level: may recommend a Local Emergency Declaration
- Delegates a Mass Fatality Branch Director to coordinate response and recovery through the Incident Command System
- As needed, appoints the following units: Human Remains Recovery, Morgue Services, Security, Transportation and Family Assistance Center
- Maintains communications with the City of Alturas, Cal OES and mutual aid partners
- Provides security for all sites involved in the response to the mass fatalities
- Provides safety protocol and on-site education, as well as protective gear, for personnel responding to the incident
- Provides centralized coordination of specific public information and news releases related to the mass fatalities or public health emergency
- Implements the protocol as delineated in the State of California’s Coroners Mutual Aid Plan (2010)
- Provides proactive, ongoing public education on issues related to the emergency
- Coordinates with the County Auditor/Clerk/Recorder for California Electronic Death Registration System (CA-EDRS)

4.1.3 Modoc County Public Health Officer

The Health Officer has authority to take any preventive measures that may be necessary to protect and preserve the public health from any public health hazard during a mass fatality

4.1.4 Modoc County Departments (as applicable)

All departments will respond as requested and follow their standard operating procedures for the type of incident. The below listed departments will be integrally involved in a mass fatality

4.1.4.a Health Services: Behavioral, Environmental and Public Health

Primary response for departments in Health Services will be assessment, technical guidance, and coordinated response, as well as long term planning.

4.1.4.b Public Works and/or Roads

In the event of the establishment of temporary facilities, both public works and roads could be called upon to help establish facilities

4.1.5 City of Alturas

Upon exceeding their resources, the City of Alturas will coordinate with Modoc County EOC through mutual aid agreements

4.1.6 Elected Officials

Public officials, who are known and trusted by their constituents, and are well informed about the situation at hand can be utilized as a powerful source in allaying public fears. An important function for public officials in any major emergency is to dispel disruptive rumors and instill in the general public a sense that everything possible is being done to control the situation.

In order to attain their goal, it will be necessary to fully educate public officials about the emergency. It is critical to include:

- the current situation
- actions that have been taken
- future actions and potential outcomes

Not all of this information may be suitable for dissemination to the general public. Still, it is critical that public officials be aware of possible outcomes.

4.1 Mitigation: Pre-Disaster Planning

- Adoption of the Mass Fatalities annex as an addendum to the current Emergency Operations Plan (EOP)
- Completion of Standard Operating Procedures (SOPs) by participating agencies and departments
- Designation of potential coordinating response teams: scene documentation, recovery of the dead, process and return of human remains, transportation, portable morgue, decontamination, and compassionate services for responders and families

4.3 Preparedness

4.3.1 Completion of Resource and Facility MOUs

- Transportation
- Shelters
- Supplies and equipment

4.3.2 Training and exercises

- Provide basic ICS 100, 200, & 700 and ICS 800/402 for elected officials
- Conduct exercises to assess the effectiveness of the annex
- Develop standard operating procedures for the annex
- Biennial updating of plan based on exercises

4.4 Response

Refer to Section 3.0 Concept of Operations and attached standard operating procedures

4.5 Organization

In accordance with Incident Command System the organizational structure should only activate those functions needed to complete incident objectives. Thus, in practice, one or all positions/teams could be activated depending on the situation.

Modoc County Coroner and/or Public Health Officer

Mass Fatality Branch Director
Human Remains Recovery Unit
Morgue Services Unit
Security Unit
Transportation Unit
Family Assistance Center Unit

4.6 Position Checklists (See Functional Appendix)

4.7 Recovery

Modoc County is responsible for establishing the administrative controls necessary to manage the expenditure of funds and to provide reasonable accountability and justification for expenditures made to support emergency operations. This shall be done in accordance with established fiscal policies and standard cost accounting procedures.

4.7.1 Documentation

All reports and documentation originating from the incident shall be submitted to the EOC.

- Response teams will only function under the direction of the Incident Command System
- Response units will document personnel hours, expenditures, etc. with resource numbers provided by the EOC.
- All forms approved for this annex will be used and submitted at the end of each operational period by responding teams/agencies

4.7.2 After-Action Report (AAR)

Following all major emergencies or disasters, the Mass Fatalities Branch Director will participate in preparation of an After Action Report by the EOC. Individual departments and agencies may also prepare AARs specific to their operations. An AAR shall include:

- NIMS Reports
- A brief description of the event; including the role of the preparing entity
- The impact on department operations
- Lessons learned
- A correction Action Plan including target dates

4.7.3 Recovery Programs

Applicable federal and state programs will be implemented as part of the County's response

5. Administration

All annexes follow protocol as outlined in the Emergency Operations Plan. Gathering of information and analysis of data will be the responsibility of the Emergency Operations Center's Planning Chief. The Logistics Chief will coordinate all resource requests through the EOC. All resource acquisitions and expenditures will be administered by the Finance Chief.

5.1 Planning: Information collection and data analysis

5.2 Logistics: Coordination of resource requests

5.3 Finance: Documentation and processing of costs

6. Development and Maintenance

All plans are dynamic. The Mass Fatalities Annex has been approved by the Modoc County Disaster Council and the Board of Supervisors. It is the intent of the Office of Emergency Services and partner agencies to exercise this plan and review it. No plan can be expected to address every potential problem or prescribe the correct action; therefore modifications as a result of exercising and utilization should be an integral part of an annual process. The Emergency Operations Plan and Annexes is reviewed and modified biennially.

7. Appendices

7.1 References

- California Electronic Death registration System (CA-EDRS)
<http://www.edrs.us>
- CDC Interim Health Recommendations for Workers Who Handle Remains <http://www.bt.cdc.gov/disasters/tsunamis/handlereamins.asp>
- Disaster Mortuary Response Teams; Mass Fatality Assistance
www.dmort.org
- National Association of Medical Examiner's Mass Fatality Plan 11/07
<http://www.dmort.org/Filesfordownload/NAMEMFIplan.pdf>
- OSHA Health and Safety Recommendations for Workers who Handle Human Remains
http://www.osha.gov/OshDoc/data_Hurricane_Facts/mortuary.pdf
- Santa Clara County Public Health Advanced Practice Center: Managing Mass Fatalities – A Toolkit for Planning 5/2008
- State of California Coroners' Mutual Aid Plan
- State of California Office of Emergency Services: the California Mass Fatality Management Guide: A Supplement to the State of California Coroners' Mutual Aid Plan 9/2007

7.2 Legal References

CDC Interim Health Recommendations for Workers Who Handle Human Remains

Statute or Code	Title	Authority
Health & Safety Code § 102850	Coroner; Notification of Death	<p>A physician and surgeon, physician assistant, funeral director, or other person shall immediately notify the coroner when he or she has knowledge of a death that occurred or has charge of a body in which death occurred under any of the following circumstances:</p> <ul style="list-style-type: none"> a) Without medical attendance during the continued absence of the attending physician and surgeon b) Where the attending physician and surgeon or the physician assistant is unable to state the cause of death c) Where suicide is suspected d) Following an injury or an accident

		<p>e) Under circumstances as to afford a reasonable ground to suspect that the death was caused by the criminal act of another</p> <p>Any person who does not notify the coroner as required by this section is guilty of a misdemeanor</p>
H&S, § 102855	Coroner; Duty to Investigate	The coroner whose duty it is to investigate such deaths shall ascertain as many as possible of the facts required by this chapter
H&S, § 102860	Coroner; Duties; RE Certificate	The coroner shall state on the certificate of death the disease or condition directly leading to the death, antecedent causes, other significant conditions contributing to death and other medical and health section data as may be required on the certificate, and the hour and day on which death occurred. The coroner shall specifically indicate the existence of any cancer, as defined in subdivision (e) of Section 103885, of which he or she has actual knowledge. The coroner shall within three (3) days after examining the body deliver the death certificate to the attending funeral director.
H&S, § 102870	Coroner or Medical Examiner; Dental examination	<p>In deaths investigated by the coroner or medical examiner where he or she is unable to establish the identity of the body or human remains by visual means, fingerprints, or other identifying data, the coroner or medical examiner may have a qualified dentist, as determined by the coroner or medical examiner, carry out a dental examination of the body or human remains. If the coroner or medical examiner with the aid of the dental examination and other identifying findings is still unable to establish the identity of the body or human remains, he or she shall prepare and forward the dental examination records to the Department of Justice on forms supplied by the Department of Justice for that purpose.</p> <p>The Department of Justice shall act as a repository or computer center, or both, with respect to dental examination records and the final report of investigation specified in Section 27521 of the Government Code. The Department of Justice shall compare the dental examination records and the final report of investigation, if applicable, to records filed with the Violent Crime Information Center (Title 12 {connecting with Section 14200} of Part 4 of the Penal Code, shall determine which scoring probabilities are the highest for purposes of identification, and shall submit the information to the coroner or medical examiner who submitted the dental examination records and the final report of investigation, if applicable.</p>
Statute or Code	Title	Authority
H&S, § 103450	Court Procedure to establish Fact of Death	<p>(a) A verified petition may be filed by any beneficially interested person with the clerk of the superior court in and for (1) the county in which the birth, death, or marriage is alleged to have occurred, (2) the county of residence of the person whose birth or marriage is sought to establish, or (3) the county in which the person was domiciled at the date of death for an order to judicially establish the fact of, and the time and place of, a birth, death, or marriage that is not registered or for which a certified copy is not obtainable.</p> <p>(b) In the event of a mass fatalities incident, a verified petition may be filed by a coroner, medical examiner, or any beneficially interested person with the clerk of the superior court in and for (1) the county in which the death is alleged to have occurred, or (2) the county in which the person was domiciled at the time of death for an order to judicially establish the fact of, and the time and place of, a death that is not registered or for which certified copy of the death certificate is not obtainable.</p> <p>(c) In the event of a mass fatalities incident, a single verified petition with respect to all persons who died may be filed by a coroner or medical examiner with the</p>

		clerk of the superior court in and for the county in which the mass fatalities occurred for an order to judicially establish the fact of, and the time and place of, each person's death that is not registered or for which a certified copy of the death certificate is not obtainable.
H&S, § 103451	Mass Fatalities Incident; Definition	<p>i. For purposes of this chapter, "mass fatalities incident" means a situation in which any of the following conditions exist:</p> <p>i. There are more dead bodies than can be handled using local resources</p> <p>ii. Numerous persons are known to have died, but no bodies were recovered from the site of the incident</p> <p>iii. Numerous persons are known to have died, but the recovery and identification of the bodies of those persons is impracticable or impossible.</p> <p>(b) The County Coroner or medical examiner may make the determination that a condition described in subdivision (a) exists.</p>
§ 103466	Court Procedures; Mass Fatalities Incident	Notwithstanding Section 103465, upon the filing of a petition for a determination of the fact of death in the event of a mass fatalities incident, the clerk shall set a hearing no later than 15 days from the date the petition was filed. The petitioner shall make a reasonable effort to provide notice of the hearing to the known heirs of the deceased up to the second degree of relationship. Failure to provide the notice specified in this section shall not invalidate the judicial proceedings regarding the determination of the fact of death.
§ 103490	Certified	<p>(a) The State Registrar shall send certified copies of the court order delayed certificate to the local registrar and the county recorder within the area in which the event occurred and in whose offices copies of records of the year of occurrence of the event are on file. However, if the event occurred outside the state, a certified copy shall be sent only to the county recorder of the county in which the petitioner resides.</p> <p>(b) In the event of a mass fatalities incident, the State Registrar, without delay, shall send certified copies of the court order delayed death certificate to the local registrar and the county recorder of the county in which the incident occurred and in whose offices copies of records of the year of occurrence of the incident are on file. The State Registrar, without delay, also shall send a certified copy of the court order delayed death certificate to the spouse or next of kin of the decedent. However, if the incident occurred outside the state, a certified copy shall be sent only to the county recorder of the county in which the decedent was domiciled at the date of death.</p>

Statute or Code	Title	Authority
U.S. Public Law 93-288	Federal Government	Provides authority to respond to emergencies and provide assistance to protect public health; implemented by Federal Emergency Management Act
USC Title 42-264	Federal Government	Provides the U.S. Surgeon General the authority to apprehend and examine any individual(s) reasonably believed to be infected with a communicable disease for purposes of preventing the introduction, transmission, or spread of such communicable disease only: <p>(1) if the person(s) is moving or about to move from state to state</p> <p>(2) if the person, upon examination, is found to be infected, he may be detained for such time and in such manner as may be reasonably necessary.</p>
USC Title 42-	Federal	Liability protection for volunteers – No volunteer of a non-profit

139 Sec. 14503	Government	organization or government entity shall be liable for harm caused by an act of omission of the volunteer on behalf of the organization or entity.
California Government Code § 27491	Coroner Duties	<ul style="list-style-type: none"> • It shall be the duty of the coroner to inquire into and determine the circumstances, manner, and cause of all violent, sudden, or unusual deaths; unattended deaths; deaths wherein the deceased has not been attended by a physician in the 20 days before death; deaths related to or following known or suspected self-induced or criminal abortion; known or suspected homicide, suicide, or accidental poisoning; deaths known or suspected as resulting in whole or part from or related to accident or injury either old or recent; deaths due to drowning, fire, hanging, gunshot, stabbing, cutting, exposure, starvation, acute alcoholism, drug addiction, strangulation, aspiration, or where the suspected cause of death is sudden infant death syndrome; death in whole or in part occasioned by criminal means; deaths associated with a known or alleged rape or crime against nature; deaths in prison or while under sentence; deaths known or suspected as due to contagious disease and constituting a public health hazard; deaths from occupational diseases or occupational hazards; deaths of patients in state mental hospitals servicing the mentally disabled and operated by the State Department of Mental Health; deaths of patients in state hospitals serving the developmentally disabled and operated by the State Department of Developmental Services; deaths under such circumstances as to afford a reasonable ground to suspect that the death was caused by the criminal act of another; and any deaths reported by physicians or other persons having knowledge of death for inquiry by coroner. Inquiry pursuant to this section does not include those investigative functions usually performed by other law enforcement agencies. • In any case in which the coroner conducts an inquiry pursuant to this section, the coroner or a deputy shall personally sign the certificate of death. If the death occurred in a state hospital, the coroner shall forward a copy of his or her report to the state agency responsible for the state hospital. • The coroner shall have discretion to determine the extent of inquiry to be made into any death occurring under natural circumstances and falling within the provisions of this section, and if inquiry determines that the physician of record has sufficient knowledge to reasonably state the cause of a death occurring under natural circumstances, the coroner may authorize that physician to sign the certificate of death. • For the purpose of inquiry, the coroner shall have the right to exhume the body of a deceased person when necessary to discharge the responsibilities set forth in this section. • Any funeral director, physician, or other person who has charge of a deceased person's body, when death occurred as a result of any of the causes or circumstances described in this section shall immediately notify the coroner. Any person who does not notify the coroner as required by this section is guilty of a misdemeanor.

Statute or Code	Title	Authority
California Government Code, § 27491.1	Coroner Duties Continued	In all cases in which a person that has died under circumstances that afford a reasonable ground to suspect that the person's death has been occasioned by the act of another by criminal means, the coroner, upon determination that those reasonable grounds exist, shall immediately notify the law enforcement agency having jurisdiction over the criminal investigation. Notification shall be made by the most direct communication available. The report shall state the name of the deceased person, if known, the location of the remains, and other

		information received by the coroner relating to the death, including any medical information of the decedent that is directly related to the death. The report shall not include any information contained in the decedent's medical records regarding any other person unless that information is relevant and directly related to the decedent's death.
California Government Code, § 27491.2	Examination & Identification of Body; Cause of Death Injury; Removal	<p>(a) The coroner or the coroner's appointed deputy, on being informed of a death and finding it to fall into the classification of deaths requiring his or her inquiry, may immediately proceed to where the body lies, examine the body, make identification, make inquiry into the circumstances, manner, and means of death, and, as circumstances warrant, either order its removal for further investigation or disposition or release the body to the next of kin.</p> <p>(b) For purposes of inquiry, the body of one who is known to be dead from any of the causes or under any of the circumstances described in Section 27401 shall not be disturbed or moved from the position or place of death without permission of the coroner or the coroner's appointed deputy. Any violation of this subdivision is a misdemeanor.</p>
California Government Code, § 27491.3	Control of Premises Where Body Found; Death Due to Traffic accident; Anatomical Donor Card	<p>(a) In any death into which the coroner is to inquire, the coroner may take charge of any and all personal effects, valuables, and property of the deceased at the scene of death or related to the inquiry and hold or safeguard them until lawful disposition thereof can be made. The coroner may lock the premises and apply a seal to the door or doors prohibiting entrance to the premises, pending arrival of a legally authorized representative of the deceased. However, this shall not be done in such a manner as to interfere with the investigation being conducted by other law enforcement agencies.</p> <p>Any costs arising from the premises being locked or sealed while the occupied property of the deceased may be a proper and legal charge against the estate of the deceased. Unless expressly permitted by law, any person who enters any premises or tampers with or removes any lock or seal in violation of this section is guilty of a misdemeanor.</p> <p>(b) Any property or evidence related to the investigation or prosecution of any known or suspected criminal death may, with knowledge of the coroner, be delivered to a law enforcement agency or district attorney, receipt for which shall be acknowledged.</p> <p>(c) Except as otherwise provided in subdivision (d), any person who searches for or removes any papers, moneys, valuable property or weapons constituting the estate of the deceased from the person of the deceased or from the premises, prior to arrival of the coroner or without permission of the coroner, is guilty of a misdemeanor.</p> <p>(d) At the scene of any death, when it is immediately apparent or when it has not been previously recognized and the coroner's examination reveals that police investigation or criminal prosecution may ensue, the coroner shall not further disturb the body or any related evidence until the law enforcement agency has had reasonable opportunity to respond to the scene, if their purposes so require and they so request. Custody and control of the body shall remain with the coroner at all times. Reasonable time at the scene shall be allowed by the coroner for criminal investigation by other law enforcement agencies, with the time and location of removal of the remains to a convenient place to be</p>

		determined at the discretion of the coroner
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Statute or Code	Title	Authority
<p>California Government Code. §27491.55</p>	<p>Delegation of Jurisdiction; Another County; Federal Government Conditions</p>	<p>In any case where a coroner is required to inquire into a death pursuant to Section 27491, the coroner may delegate his or her jurisdiction over the death to an agency of another county or the federal government when all of the following conditions have been met:</p> <ul style="list-style-type: none"> • The other agency has either requested the delegation of jurisdiction, or has agreed to take jurisdiction at the request of the coroner. • The other agency has the authority to perform the functions being delegated • When both the coroner and the other agency have a jurisdictional interest or involvement in the death
<p>Emergency Services Act §8607</p>	<p>Standardized Emergency Management Systems (SEMS)</p>	<p>a) By December 1, 1993, the Office of emergency services, in coordination with all interested state agencies with designated response roles in the state emergency plan and interested local emergency management agencies shall jointly establish by regulation a standardized emergency management system for use by all emergency response agencies. The public water systems identified in section 8607.2 may review and comment on these regulations prior to adoption. This system shall be applicable, but not limited to, those emergencies or disasters referenced in the state emergency plan. The standardized emergency management system shall include all of the following systems as a framework for responding to and managing emergencies and disasters involving multiple jurisdictions or multiple agency responses:</p> <ol style="list-style-type: none"> 1) The Incident Command System adapted from the systems originally developed by the FIRESCOPE Program, including those currently in use by state agencies 2) The multi-agency coordination system as developed by the FIRESCOPE Program 3) The mutual aid agreement, as defined in Section 8561, and related mutual aid systems such as those used in law enforcement, fire service, and coroners operations 4) The operational area concept, as defined in Section 8559 <p>b) Individual agencies' roles and responsibilities agreed upon and contained in existing laws or the state emergency plan are not superseded by this article</p> <p>c) By December 1, 1994, the Office of emergency Services, in coordination with the State fire Marshal's Office, the Department of the California Highway Patrol, the Commission on Peace Officer Standards and Training, the Emergency Medical services Authority, and all other interested state agencies with designated response roles in the state emergency plan, shall jointly develop an approved course of instruction for use in training all emergency response personnel, consisting of the concepts and procedures associated with the standardized emergency management system described in subdivision (a).</p> <p>d) By December 1, 1996, all state agencies shall use the standardized emergency management system as adopted pursuant to subdivision (a), to coordinate multiple jurisdictions or multiple agency emergency and disaster</p>

		<p>operations</p> <p>e) (1) By December 1, 1996, each local agency, in order to be eligible for any funding of response-related costs under disaster assistance programs, shall use the standardized emergency management system as adopted pursuant to subdivision (a) to coordinate multiple jurisdiction or multiple agency operations</p> <p>(1) Notwithstanding paragraph (1), local agencies shall be eligible for repair, renovation, or any other non-personnel costs resulting from an emergency</p> <p>f) the Office shall, in cooperation with involved state and local</p>
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Statute or Code	Title	Authority
Emergency Services Act § 8607	SEMS <i>continued</i>	agencies complete an after-action report within 120 days after each declared disaster. This report shall review public safety response and disaster recovery activities and shall be made available to all interested public safety and emergency management organizations.
California Disaster Assistance Act, §1591(b)		Establishes liability limits for registered disaster volunteers. No political subdivision, municipal corporation, or other public agency under any circumstances, nor the officers, employees, agents, or duly enrolled or registered volunteers thereof, or unregistered persons duly impressed into service during a state of disaster or a state of extreme emergency, acting within the scope of their official duties under this chapter or any local ordinance shall be liable for personal injury or property damage sustained by any duly enrolled or registered volunteer engaged in or training for disaster preparedness or relief activity.
Penal Code §830.35(c)	Coroners and Deputy Coroners; Peace Officer; Limitations	<p>The following persons are peace officers whose authority extends to any place in the state for the purposes of performing their primary duty or when making an arrest pursuant to Section 836 as to any public offense with respect to which there is immediate danger to person or property, or of the escape of the perpetrator of that offense, or pursuant to Section 8597 or 8598 of the Government Code.</p> <p>Those peace officers may carry firearms only if authorized and under terms and conditions specified by their employing agency.</p> <p>(c) the coroner and deputy coroners, regularly employed and paid in that capacity, of a county, if the primary duty of the peace officer are those duties set forth in Section 27469 and 27491 to 27491.4, inclusive, of the Government Code.</p>
Civil Code § 1714.5		No disaster service worker who is performing disaster services ordered by lawful authority during a state of war emergency, a state of emergency, or a local emergency, as such emergencies are defined in section 8558 of the Government Code, shall be liable for civil damages on account of personal injury to or death of any person or damage to property resulting from any act or omission in the line of duty, except one that is willful.
§ 1766		In order to encourage local agencies and other organizations to train people in emergency medical services, no local agency, entity of state or local emergency medical services, no local private organization which sponsors, authorizes, supports, finances or supervises the training of people, ... in emergency medical services shall be liable for any civil

		damages alleged to result from such training programs.
§ 1767		In order to encourage people to participate in emergency medical services training programs and to render emergency medical services to others, no person who in good faith renders emergency care at the scene of an emergency shall be liable for any act or omission.
§ 1799.102		Emergency care at the scene of an emergency. No person who, in GOOD FAITH and not for compensation, renders emergency care at the scene of an emergency shall be liable for any civil damages resulting from any act or omission. The scene of an emergency shall not include emergency departments and other places where medical care is usually offered.
Code of Federal Regulations Title 45 Section 164.512q	HIPAA Privacy Regulations	Standard: Uses and Disclosures about Decedents: allows covered entities to disclose protected health information to a coroner or medical examiner for purpose of identifying a deceased person, determining a cause of death, or other duties as authorized by law. Authorizes a covered entity to disclose protected health information to funeral directors consistent with applicable law as necessary to carry out their duties. If necessary for funeral directors to carry out their duties, disclosure may occur prior to and in reasonable anticipation of the individual's death.

7.3 Functional Checklists for Unit Positions

7.3.1 Mass Fatality Branch Director

The Mass Fatality Branch Director functions as a part of Operations within the Incident Command System and is appointed by the Coroner. The director is responsible for managing personnel, equipment, and resources to affect recovery, identification and disposition of mass fatality victims.

The Director supervises:

- Human Remains Recovery Unit
- Morgue Services Unit
- Security Unit
- Transportation Unit
- Family Assistance Center

Director Checklists:

Activation Phase:

- Identify yourself and locate your functional work area. Put on identification and determine EOC operational status.
- Obtain briefing from available sources; review IAP
- Review Mass Fatality Annex and Job Checklist
- Establish and maintain a Unit Event Log that chronologically describes your actions taken during your shift

Operational Phase:

- Assess the current situation
- Determine status of resources assigned
- Activate Remains Recovery, Morgue Services, Security, Transportation, and Family Assistance operations, assigning personnel as needed
- Conduct staff briefing for activated unit leaders
- Determine locations for the temporary morgue and Family Assistance Center
- Verify communications operability with unit leaders
- Ensure staff understand their work assignments
- Distribute necessary ICS forms and Job Action sheets
- Ensure staff understands safety requirements and procedures are being followed
- Supervise and review the effectiveness of all operations as assigned
- Report directly to the Operations Section Chief and inform the Command Staff about developments, progress and problems related to functional activities within the branch
- Review logistical support and make recommendations as necessary
- Compare current capacity with future requirements and estimate future logistical needs

Demobilization Phase:

- Ensure completion of the Coroner's Service Branch Demobilization Plan
- Debrief your unit
- Deactivate your assigned position and close out logs when authorized
- Complete all required forms, reports, and other documentation. Collect records and documentation from response teams and shelters. All forms should be submitted through your supervisor to the Planning Section, as appropriate, prior to your departure
- Be prepared to provide input to the After Action/Corrective Action report
- If another person is relieving you, ensure they are thoroughly briefed before you leave your workstation
- Clean up your work area before you leave
- Leave a forwarding phone number where you can be reached

7.3.2 Human Remains Recovery Unit Leader

The Human Remains Recovery (HRR) Unit Leader will oversee the collection and documentation of postmortem remains, property and evidence at the incident site.

Human Remains Recovery Unit Leader Checklists:

Activation Phase:

- Identify yourself and locate your functional work area. Put on identification and determine EOC operational status.
- Obtain briefing from Mass Fatality Branch Director; review IAP
- Review Mass Fatality Plan and Job Checklist
- Establish and maintain a Unit Event Log that chronologically describes your actions taken during your shift

Operational Phase:

- Assess the current situation
- Determine status of resources assigned
- Identify task/activities needed, prioritize, and assign to Recovery Team
- Conduct staff briefing
- Verify communications operability with staff
- Ensure staff understand their work assignments
- Distribute necessary ICS forms and Job Action sheets
- Ensure staff understands safety requirements and procedures are being followed
- Determine work schedules
- Supervise and review the effectiveness of all operations as assigned
- Report directly to the Mass Fatality Branch Director and inform him/her about developments, progress and problems related to functional activities within the unit
- Review logistical support and make recommendations as necessary
- Communicate with the Morgue Services Unit Leader to ensure coordination between the recovery site and the morgue
- As needed, request additional resources through established ordering procedures

Demobilization Phase:

- Conduct debriefing
- Deactivate your assigned position and close out logs when authorized
- Complete all required forms, reports, and other documentation. Collect records and documentation from response teams and shelters. All forms should be submitted through your supervisor to the Planning Section, as appropriate, prior to your departure

- Be prepared to provide input to the After Action/Corrective Action report
 - If another person is relieving you, ensure they are thoroughly briefed before you leave your workstation
 - Clean up your work area before you leave
 - Leave a forwarding phone number where you can be reached
-

7.3.3 Morgue Services Unit Leader

The Morgue Services Unit Leader will coordinate and oversee the operations of the morgue. Identification, examination, body processing and release for burial are the primary objectives of the unit.

Morgue Services Unit Leader Checklists:

Activation Phase:

- Identify yourself and locate your functional work area. Put on identification and determine EOC operational status.
- Obtain briefing from Mass Fatality Branch Director; review IAP
- Review Mass Fatality Plan and Job Checklist
- Establish and maintain a Unit Event Log that chronologically describes your actions taken during your shift

Operational Phase:

- If operations warrant, establish a temporary morgue and establish a command post
- Determine staff required to operate the temporary morgue
- Coordinate security needs with Security Unit Leader
- Assign specific duties to support staff and supervise staff
- As needed, request additional resources through established ordering procedures
- Identify tasks/activities needed, prioritize and assign staff
- Determine work schedules and shifts needed
- Ensure staff understands their work assignments
- Ensure staff understands safety requirements and follows procedures
- Ensure personnel have the proper tools and supplies to perform their jobs
- Report directly to the Mass Fatality Director: inform about developments, progress and problems related to the morgue operations
- Be familiar with the equipment used and the protective gear that staff should have
- Communicate with the Human Remains Recovery and Transportation Unit Leaders to ensure coordination between the recovery site and the morgue
- Distribute ICS forms and Job Action sheets; maintain records

Demobilization Phase:

- Conduct debriefing
- Deactivate your assigned position and close out logs when authorized
- Complete all required forms, reports, and other documentation. Collect records and documentation from response teams and shelters. All forms should be submitted through your supervisor to the Planning Section, as appropriate, prior to your departure

- Be prepared to provide input to the After Action/Corrective Action report
- If another person is relieving you, ensure they are thoroughly briefed before you leave your workstation
- Clean up your work area before you leave
- Leave a forwarding phone number where you can be reached

7.3.3.a Incident Morgue Requirements and Locations

The incident morgue should be located as near as possible to the area where the death toll is heaviest. The area should be fenced or locked for security of remains. Personal property should be removed from public view and have sufficient space for separation of functions. Building options should include those with concrete floors; facilities with wooden floors are unacceptable.

Requirements:

- Convenience to scene
- Adequate capacity
- Completely secure – law enforcement to maintain security
- Easy access for vehicular support
- Ventilation
- Hot/cold running water
- Drainage
- Sufficient electrical capabilities, lighting, utilities, etc.
- Communications
- Office space
- Rest/debriefing area
- Restrooms
- Climate control
- Personal protective equipment

In a biological or chemical incident, special care should be taken to ensure there is no contamination of workers. Some biological agents remain virulent after the carrier is deceased. It is essential that if workers are unsure if the agent is virulent, to treat the body as though it is contaminated and wear appropriate PPE. The County Coroner will confer with the Health Officer and the IC to determine the appropriate level of PPE prior to the processing of any remains.

In a chemical incident, an incident morgue provides a way to gather evidence from remains before they undergo decontamination and evidence is lost. Decontamination mitigates cross contamination so that remains are safer to handle.

7.3.3.b Funeral Homes and Mortuaries

The local funeral home is Kerr Mortuary that is part of the Janus Advisors, Inc. which operates three funeral homes: Alturas, Willows and Mt. Shasta. Within that corporation, there is mutual aid response .

Regional Funeral Homes and Capacity

** Local Partners

AREA	Contact Name	Telephone	# of Personnel
	Modoc and Lassen Counties		
Kerr Mortuary (Janus Advisors, Inc.)	Nick Contaxis	530-233-3930	
Walton's, Susanville	Kelly Fink	530-257-4414	
	Siskiyou County		
Mt. Shasta Memorial Chapel (Janus Advisors Inc.) **	Robert Quillin, Director	530-926-2131	4 Plus
Girdner Funeral Chapel **	Chris or Jackie Girdner, Directors 202 S. Oregon St. Yreka, CA 96097	530-842-3434 530-459-1449 530-598-1449	6
Surrounding Areas			
Redding, CA			
Allen & Dahl Funeral Chapel	2655 Eureka Way Redding, CA 96001	530-243-1525	
McDonald's Chapel	1275 Continental St Redding, CA 96001	530-241-1626	
Lawncrest Memorial Chapel	1522 E. Cypress Ave. Redding, CA 96002	530-222-1587	
Medford, OR			
Abbey Funeral Home	2680 N. Pacific Hwy Medford, OR. 97501	541-773-7117	
Conger Morris Funeral Home	715 W. Main Medford, OR 97501	541-772-7111	
Hillcrest Memorial Park	2201 N. Phoenix Rd. Medford, OR. 97504	541-773-6162	
Memorial Gardens Funeral Home	1395 Arnold Medford, OR. 97501	541-773-7338	
Perl Funeral Home	2100 Modoc Medford, OR 97504	541-772-5488	
Ashland, OR			
Litwiller Simonsen	1811 Ashland St. Ashland, OR 97520	541-482-2816	
Klamath Falls, OR			
O'Hair-Riggs Funeral Chapel **	1945 Main St Klamath Falls, OR 97601	541-882-4404	

Davenport's Chapel of the Good Shepard	6420 S. 6 th St. Klamath Falls, OR. 97603	541-883-3458	
Eternal Hills Memorial Gardens **	4711 Hwy 29, Klamath Falls, OR 97603	541-884-3668	

Current County Capacity		
Service	Standard Capacity	Standard Capacity
	Mt. Shasta Memorial Chapel	Girdner Funeral Chapel
Refrigeration	8	15
Transport	2	2 vehicles/ 2 stretchers each
Body Storage	8	15
Embalming Machines	1	2
Embalming Supplies	Min. 3 cases	Enough on hand for 40 cases
Cremation	Single retort on premises	1 unit – 3 cases/day
Examination/Autopsy	3 table prep room	1 table
Funeral Directors/Counselors	1	6
Cremation Technicians	2	2
SAM Unit material	On premises	1 partial role
Body Bags – adult	8	8-10
Body Bags – child	0	0

County Surge Capacity		
Service	Mt. Shasta Memorial Chapel	Girdner's Funeral Chapel
Refrigeration	12	20
Transport	4	4 vehicles (no pickups)
Body Storage	12	20
Embalming Machines	2	2
Embalming Supplies	Unlimited overnight delivery	Ability to reorder quickly
Cremation	Use of Redding crematory very possible	1 every 3 hours
Examination/Autopsy	Same	2 tables
Funeral Directors	3	10
Cremation Technicians	2	3
SAM Unit material		1 partial role
Body Bags – adult	Unlimited overnight delivery	8-10 (needs supplied by the coroner)
Body Bags – child	Unlimited overnight delivery	0
Public Health Surge Capacity		
Service		
SAM Unit material	3 rolls	
SAM system pouches	3 cases of 500	
4 tier cadaver storage	2	
Body Bags – adult	12 cases of 6-10 per case	
Body Bags – child	12 cases of 6-10 per case	

7.3.3.c REFRIGERATION SOURCES

TRUCKING COMPANIES

If there was a request for refrigerated transports, that request would go through the Emergency Operations Center. However, use of commercial vehicles should be a last resort; refrigerated vehicles that transport food cannot be reused for food transportation once the transport has contained bodies.

The following protocol should be used if a commercial vehicle is utilized:

- Exterior markings should be covered
- All bodies should be in body bags or SAM
- Bodies should be arranged carefully
- Bodies may be on metal or plastic shelves, never on wood shelving.
- Loading and unloading of the vehicle should be done in a private, secure area

7.3.3.d Morgue Site Safety Rules

The Modoc County Coroner's Office has established the following mandatory safety practices to protect its employees and volunteers. Failure to comply with these rules could result in serious injury.

- All workers must enter and exit the morgue site through the front door. They must sign in and obtain official badges upon entering and sign out and return badges upon their departure
- No radios or headphones may be used by site workers (except those needed for internal and external communications)
- Eating, drinking and gum chewing will only be permitted in the designated break area and not within work areas
- Staff should wear proper protective gear (gloves, masks, goggles) as applicable and use aseptic technique
- Visually inspect for sharp objects and other hazards before reaching into containers such as garbage cans, boxes, or bags
- All spills must be cleaned up immediately
- Morgue site floors are to be kept free of debris at all times
- Use correct lifting techniques at all times. Do not attempt to lift over 50 pounds without assistance
- Report damaged or malfunctioning equipment to the unit leader immediately. Do not attempt to make any repairs
- Do not block emergency exits, fire extinguishers, or any equipment requiring immediate access
- Report all accidents and injuries immediately to your unit leader
- Report all unsafe conditions or practices to your unit leader

7.3.4 Security Unit Leader

The Security Unit Leader is responsible for the development and recommendation of measures for assuring personnel, material, and facility safety. The checklist and procedural guidelines provide for security of the temporary morgue site, and incident site and staging areas. This position is also responsible for ensuring that morgue personnel comply with security protocols required by the hosting agency for access to, from, and on the hosting agency's property.

Security Unit Leader Checklists:

Activation Phase:

- Identify yourself and locate your functional work area. Put on identification and determine EOC operational status
- Obtain briefing from Mass Fatality Branch Director; review IAP
- Review Mass Fatality Plan and Job Checklist
- Establish and maintain a Unit Event Log that chronologically describes your actions taken during your shift

Operational Phase:

- Assess the current situation
- Determine status of available communications systems for security personnel
- Obtain current level of staffing and anticipate needs for additional personnel
- Establish contacts with state and local law enforcement agencies as required
- Communicate with law enforcement and security staff to discuss any special requirements that may effect operations
- Check with all unit leaders as to their security and safety needs
- Advise other unit leaders of any unsafe, hazardous or security conditions
- Ensure that all staff are qualified to manage security problems; train and supervise staff
- Prepare Security Team briefing to include specific procedures for the different sites: incident site, temporary morgue, and/or Family Assistance Center
- Prepare security plans for each site and coordinate with appropriate unit leaders at each site
- Keep the peace, prevent assaults, and settle disputes through coordination with Agency Representatives
- Prevent theft of all government and personal property
- Develop and implement accountability, safety security measures for personnel and resources
- Participate in EOC planning meetings, as required
- As needed, request additional resources through established ordering procedures
- Maintain unit records to include Unit/Activity Log

Demobilization Phase:

- Debrief security staff
 - Deactivate your assigned position and close out logs when authorized
 - Complete all required forms, reports, and other documentation. Collect records and documentation from response teams and shelters. All forms should be submitted through your supervisor to the Planning Section, as appropriate, prior to your departure
 - Be prepared to provide input to the After Action/Corrective Action report
 - If another person is relieving you, ensure they are thoroughly briefed before you leave your workstation
 - Clean up your work area before you leave
 - Leave a forwarding phone number where you can be reached
-

7.3.4.a Basic Security Plan

All security needs within the operational area become the overall responsibility of the County Sheriff's Department. The County Sheriff or his designee will appoint the Security Unit Leader. This individual will be responsible for the security of vehicle/material transport, equipment, and personnel at the recovery site, all morgue sites and the family assistance center. The Sheriff's Department will be assisted in these efforts by mutual aid agencies. Should the security needs exceed the capability of the local jurisdiction, additional resources can be obtained through the EOC.

The Sheriff's Department may utilize citizen volunteers who are registered Disaster Service Workers as security support.

Search and Recovery Site Security

The primary goal of Recovery Site security is to provide crowd control and direction, worker and general public safety, and protection of the crime scene. The following site security measures are recommended:

- The public will be denied access to the search and recovery site
- Media access will be coordinated through the EOC. A PIO staff member will accompany the media
- Personnel will control access into, within, and outside of the perimeter. This measure entails identification badges for all authorized personnel, and sign-in/out sheets
- If deemed necessary, perimeter fences and personnel gates should be installed to provide an additional physical barrier. Additional exterior lighting can also be added
- The Family Assistance Center will coordinate with the Security Unit Leader all authorized site visits by next of kin
- Personnel will establish traffic patterns for entry and exit to the area and clearly designate parking areas
- Personnel will maintain a Security Post and log all personnel and equipment

7.3.4.b Morgue Site Security

The primary goal of morgue site security is to provide protection for site inventory and personnel. Site security is the responsibility of law enforcement agencies within each morgue site's jurisdiction.

The following Morgue Site security measures are recommended:

- Before activation, the responsible law enforcement agency should perform, in coordination with the operations section, a physical security and facility preparedness assessment of the morgue site(s)

- There should be restrictions on access into, within, and out of the facility. This measure entails identification badges for all authorized personnel, and sign-in/out sheets
- There should not be any media access without coordination through the PIO of the Command Staff
- The initial site assessment should establish traffic patterns for entry and exit to the facility and clearly designate parking areas

7.3.4.c Mitigation of Specific Hazards

Security has been identified as an important objective, which is the responsibility of ALL personnel. Specific concerns and security risks will be identified and mitigated by all members of the Command Staff. The ICS-215, the Safety Plan will be used to document any identified hazards and propose mitigation actions. Any security “lapse” will be reported, investigated, documented, and reviewed for “lessons learned” potential.

7.3.5 Transportation Unit Leader

The Transportation Unit Leader is responsible for:

- Coordination of ground transportation activities that are supporting search and rescue operation
 - Moving bodies from the recovery site to the morgue site
 - Moving bodies from the hospitals to the morgue site
 - Transportation of personnel, supplies, food, and equipment
 - Selection of appropriate vehicles
 - Fueling, service, maintenance, and repair of vehicles and other ground support equipment
 - Developing and implementing traffic plans
-

Transportation Unit Leader Checklists:

Activation Phase:

- Identify yourself and locate your functional work area. Put on identification and determine EOC operational status.
- Obtain briefing from Mass Fatality Branch Director; review IAP
- Review Mass Fatality Plan and Job Checklist
- Establish and maintain a Unit Event Log that chronologically describes your actions taken during your shift

Operational Phase:

- Assess situation
- Determine status of available communications systems
- Participate in EOC planning meetings, as required. Ensure that the transportation portion of the IAP takes into consideration the transportation requirements of assigned units
- Obtain current level of staffing and anticipate needs for additional personnel.
- Develop and implement accountability and safety security measures for personnel and resources
- Provide training and briefings on any special considerations for drivers
- Evaluate conditions for special precautions, such as equipment, drivers, weather, and escorts with personal protective equipment
- Oversee and organize all ground transportation operations
- Develop and implement off site Traffic Plan for the movement of bodies from recovery to morgue site and from hospitals to the morgue site
- Arrange for and activate fueling, maintenance and repair of on-site resources
- Maintain an inventory of all transportation vehicles (ICS Form 218)

- Document usage information on rented equipment assigned to the incident
- Requisition maintenance and repair supplies (e.g., fuel, spare parts)
- Arrange for an accident investigation team when warranted
- Assign specific duties to support staff, train, and supervise staff
- As needed, request additional resources through established ordering procedures
- Maintain unit records

Demobilization Phase:

- Debrief transportation team
- Deactivate your assigned position and close out logs when authorized
- Complete all required forms, reports, and other documentation. Collect records and documentation from response teams and shelters. All forms should be submitted through your supervisor to the Planning Section, as appropriate, prior to your departure
- Be prepared to provide input to the After Action/Corrective Action report
- If another person is relieving you, ensure they are thoroughly briefed before you leave your workstation
- Clean up your work area before you leave
- Leave a forwarding phone number where you can be reached

7.3.6 Family Assistance Center Unit Leader

This position oversees the Family Assistance Center (FAC). The primary objective is to act as a liaison between the Coroner and the families of the incident victims. The services provided include death notification, information briefings, grief counseling and ante mortem data collection.

Family Assistance Center Unit Leader Checklists:

Activation Phase:

- Identify yourself and locate your functional work area. Put on identification and determine EOC operational status.
- Obtain briefing from Mass Fatality Branch Director; review IAP
- Review Mass Fatality Plan and Job Action Checklist
- Check in with Morgue Services and Human Remains Unit Leaders
- Establish and maintain a Unit Event Log that chronologically describes your actions taken during your shift

Operational Phase:

- Assess situation
- Determine status of available communications systems
- Communicate with the Morgue Services and Human Remains Recovery Unit Leaders to ensure coordination between the recovery site, the morgue, and the FAC
- Participate in EOC planning meetings, as required
- Obtain current level of staffing and anticipate needs for additional personnel.
- Establish a location for the Family Assistance Center (if not already done)
- Evaluate the number of victims and estimate the number of family members expected (8-10 per victim) and report findings to command staff
- Identify tasks/activities and prioritize
- Assign specific duties to support staff, and supervise staff
- Determine work schedules and shifts as needed
- Ensure staff understand their work assignments and train as necessary
- Distribute necessary ICS forms
- Ensure that adequate safety measures are in place and being followed
- Ensure personnel have the proper tools and supplies they will need
- Report directly to the Mass Fatality Director: inform about developments, progress and problems related to functional activities at the FAC
- Establish and supervise family briefing procedures
- Conduct family briefings, assuring them of the release of accurate and timely information

- Establish and supervise ante mortem data collection procedures and ensure efficient transfer of data to the Morgue Services Unit
- Assist in the collection of DNA sampling from family members in support of the DNA lab
- Establish and supervise death notification procedures and assign staff members and/or law enforcement personnel to the death notifications teams
- Serve as a liaison with outside agencies
- As needed, request additional resources through established ordering procedures

Demobilization Phase:

- Conduct FAC team debriefing
 - Deactivate your assigned position and close out logs when authorized
 - Complete all required forms, reports, and other documentation. Collect records and documentation from response teams and shelters. All forms should be submitted through your supervisor to the Planning Section, as appropriate, prior to your departure
 - Be prepared to provide input to the After Action/Corrective Action report
 - If another person is relieving you, ensure they are thoroughly briefed before you leave your workstation
 - Clean up your work area before you leave
 - Leave a forwarding phone number where you can be reached
-

7.4 Standard Operation Procedures

7.4.1 Public Information Plan

7.4.1.a Purpose

The purpose of the Information Plan is to provide for the timely and accurate dissemination of public health information during a Mass Fatality Incident in order to minimize the suffering of decedent's family members and loved ones.

A Mass Fatality Incident is seldom a stand alone event. During and after the incident, the need for public information is critical. A consistent, confident message must be provided to maintain smooth operations and credibility. It is very important that timely and accurate information be provided to minimize fear and educate the public regarding any safety precautions that should be taken.

Should the incident be a result of a communicable disease outbreak, hazardous material release, or other public health crisis, the Modoc County Public Health Crisis and Emergency Risk Communication Plan (CERC) should be concurrently utilized.

7.4.1.b Roles and Responsibilities

Coroner and/or Incident Commander – establishes policies and approves of all public information and news releases as prepared by the Public Information Officer (PIO)

- Public Information Officer – implements Public Information Plan and develops and presents public information.
- Operations Section Personnel – assure that public information considerations are included in all tactical and strategic decisions and that public information concerns are referred to the PIO.

7.4.1.c Communications Duties

Preparation for communication to all potential recipients of information should include generalized fact sheets, health alerts, and press releases that can be customized to the particulars of the emergency. These resources will help answer questions from law enforcement, fire departments, medical personnel, the public, and the media. Messages need to be tailored to the intended audiences so that they are relevant and easy to understand by diverse audiences.

Messages should include statements that:

- Recognize and empathize with public concerns
- Acknowledge that reports from the media may be confusing
- Avoid comparing the present risk to other risks that are not part of the present fears
- Provide frequent updates of information based on medical and scientific data

- Give the public suggestions for actions that will help safeguard health if a threat exists
- Assure the public that the Coroner and the Health Officer are working actively to minimize health risks

The PIO will:

- Assure timely dissemination of essential information that will increase survivability and reduce human suffering at the onset, during, and after the event
- Supply the media with accurate and timely news information from a central source so that rumors are minimized and disruption of the response to the event is avoided
- Provide the Modoc County Board of Supervisors, State of California officials, local government and tribal officials within Modoc County with accurate information so that these agencies may assist in keeping the public informed in a consistent manner

To attain these elements, the PIO will;

Act as a liaison to the direct media by:

- Assessing media needs and organizing mechanisms to fulfill those needs during the crisis
- Triage the response to media requests and inquiries
- Support spokespersons, including field staff PIOs
- Develop and maintain media contact lists and call logs
- Produce and distribute media advisories and news releases
- Produce and distribute materials, such as fact sheets and audio/video releases
- Review news and video clips to correct inaccurate information and to identify ways to improve future releases
- Develop trust and credibility
- Maintain records of all information released to the media utilizing the Unit Log 214

Inform and educate the public by:

- Providing accurate information to the Logistics Chief for use by the Family Assistance Center and any hot lines that may be activated
- Providing releases to the Dispatch Center for the Emergency Alert System
- Providing updates to the Modoc Sheriff's website and Modoc County website for staff to produce information for dissemination on Twitter, Facebook, and the websites
- Provide current information to the public information hot line

Coordinate information from the Incident Commander and EOC to responders:

- Develop and establish mechanisms to rapidly receive information from the Modoc County EOC regarding the incident
- Translate EOC situation reports and meeting notes into information appropriate for public and partner needs
- Work with subject matter experts to create situation specific fact sheets, Q/A sheets, and updates
- In consultation with appropriate staff, test messages and materials for cultural and language requirements of special populations
- Receive input from other communication team members regarding content and message needs

7.4.2 Health and Safety Guidelines for Handling Human Remains

Response personnel will face a variety of health hazards when handling or working near human remains. The Safety Officer will develop a safety plan that addresses the hazards associated with a mass fatality incident. The following concerns have been identified as being significant hazard potentials:

- Public safety and security issues at the morgue and recovery sites
- Public Health issues at the morgue and recovery sites
- Worker safety at all sites
- Bio-hazard exposure for all workers

These concerns will be mitigated by taking the following actions:

- Control operations to limit unnecessary exposure of personnel
- Consider a risk-to-benefit ratio when considering strategy and tactics
- Maintain constant contact and communications with ALL field personnel
- Document operational period briefings and safety sessions on Unit Log 214
- Using a safety analysis (ICS 215) for each operational period
- List appropriate health and safety information on the ICS 215 and include in the IAP

General Precautions: the following precautionary measures can help responders remain safe while handling human remains.

7.4.2.a Personal Protective Equipment

- Hand Protection – when handling potentially infectious materials, use appropriate barrier protection including latex or nitrile gloves. These gloves can be worn under heavy duty work gloves which will, in turn, protect the responder from cuts, puncture wounds, or other injuries that break the skin
- Foot Protection – footwear should protect against sharp objects
- Eye and Face Protection – to protect from splashes of body fluids and fecal material, use at least a plastic face shield or a combination of eye protection and a surgical mask

7.4.2.b Hygiene

- Maintain hand hygiene to prevent transmission of diarrhea and other diseases from fecal materials on your hands. Wash hands with soap and water or hand sanitizer immediately after glove removal
- Give prompt care to any wounds sustained during work with human remains, including immediate cleansing with soap and clean water. Responders should be vaccinated against hepatitis B and get a tetanus booster if indicated

- Never wear PPE and underlying clothing if it is damaged or penetrated by body fluids
- Ensure all vehicles and equipment are disinfected after use.

7.4.2.c Ergonomic Considerations

Lifting or moving heavy objects, particularly when done repetitively, can result in injuries. Human remains that have been in water for some time are likely to be heavier than normal. Having more than one person involved in lifting the human remains will help reduce the potential for injury. Staff should be informed of appropriate lifting technique and/or use mechanical lifts.

7.4.3 Recovery of Remains

The County Coroner is responsible to ensure these procedures are followed:

- The County Coroner, in collaboration with local law enforcement will utilize suitable markings, photography, GPS positioning, etc. that will be placed at the location and/or used to identify each body at the scene
- Remains or remain parts, will be tagged, with a case number assigned, and records kept as to the location and/or surroundings in which the remains were found
- Unattached personal effects found on or near the body will be placed in a container, tagged with the above-identified corresponding number, which should reflect the location, and/or surroundings where the item was found
- To ensure an accurate and reliable numbering system is used, all remains must be identified with a number:
 - Complete bodies should be prefixed with the letter “B”
 - Body parts should be prefixed with the letter “P”
 - Personal effects should be prefixed with the letter “E”
- If victims are admitted to the temporary morgue through hospital admissions, the medical records number will be used instead of a case number to identify the victim
- When practical, remains and/or remain parts will be containerized and tagged with the corresponding number on each container
- Valuables, such as wallets or jewelry that are attached to the body shall not be removed. Such valuables found on or near the body have a potential identification value and should be placed in a container and charted as to the exact location they were recovered. Items should be placed in clear plastic bags for easier identification and described using basic description with details (i.e. ring- yellow in color with clear stone)
- Remains will then be removed, as authorized, from the initial discovery site to the assigned morgue location as determined by the County Coroner. This initial movement may require outside resources (vehicles, litters, stretchers and personnel), which will be requested by the County Coroner through and the EOC
- Throughout the evaluation, processing and transportation of all remains, personal protective equipment (PPE) will be utilized by all involved personnel as necessary. Standard precautions are essential for those handling remains and universal precautions should be maintained to prevent exposure to all blood, body and enteric fluids.

Surge PPE, over and above what is normally in use, will be requested through the EOC

7.4.4 Evacuation to the Incident Morgue or Transportation Staging Area

Prior to the evacuation of any remains, the County Coroner will brief the Mass Fatality Branch Director and Operations Section Chief on the situation, number of fatalities to be transported, pick up area, and route of travel to the morgue site.

Evacuation operations from the disaster site will be coordinated by the County Coroner, the Operations Section Chief, and the Mass Fatality Branch Director through the EOC. Prior to transport, staff will verify proper recovery documentation has been completed.

Transport of Remains Log: will be completed to include the signature of person authorizing transport. In addition, the following information will be included in the report:

- Bag number(s)
- Vehicle license number
- Transporting personnel
- Time and date of transport
- On scene fatalities management signature
- Driver signature
- Signature of Funeral Director or designee accepting delivery of remains

Mortuary staff with the assistance of EMS and emergency personnel will be utilized to transport all remains.

The County Coroner (or designee) will direct further processing of remains at the temporary morgue location. The Mass Fatality Branch Director will oversee all on site morgue operations including body processing, examination, positive identification, receiving and release.

The Victim Identification Program (VIP) is a computer program designed and used by federal DMORT teams for the handling of remains and victims identities. This system will be used for local responses as well and the version available at www.dmort.org will allow for the initiation of recovery and identification efforts.

The Department of Health and Human Services has organized Disaster Mortuary Operational Response Teams (DMORT). Under this system, Modoc County is served by the FEMA Region IX team. DMORT members work under the local authorities of the disaster and their professional licenses are recognized by all states.

FEMA maintains two Disaster Portable Morgue Units (DPMU) with the closest being located in San Jose, CA at the FEMA Logistics Center. Each DPMU is a cache of equipment and supplies for a complete morgue with designated workstations for each process the DMORT team is required to complete.

7.4.5 Notification and Identification of Remains

The County Coroner, in collaboration and assistance from law enforcement, will notify all next-of-kin by a direct face to face meeting if the time and situation permits. In cases of mass fatalities where the resources do not exist to allow for a face-to-face meeting, the County Coroner will identify the methods that will be followed to notify next-of-kin.

The County Coroner will request the Operations Section Chief to interact with the American Red Cross (ARC), the Modoc Chaplaincy group, and Modoc County Behavioral Health for the purposes of establishing a Family Assistance Center (FAC), whose job it will be to:

- Provide information and access to services
- Provide news and the sharing of information to those within the FAC, while at the same time protecting relatives from the media
- Allow investigators access to the family
- Register and gather ante-mortem data
- Provide counseling/clergy services through Modoc County Behavioral Health and Sheriff's Chaplains for both staff and family members
- Provide transportation and food services

The FAC should be established close enough to the site of the disaster to allow the coroner and others to travel easily between the site, incident morgue and FAC, but far enough from the site that families are not continually exposed to the scene.

The Modoc County Sheriff's Department (or other law enforcement designee) will ensure security at the FAC and also determine the process for identifying legal next-of-kin. All FAC staff should have a secured entrance to the facility where credentials will be verified.

Families will be requested to provide physical identification of the remains. The Sheriff/County Coroner will make arrangements for identification to be made, to include an appropriate location and time. If identification cannot be made, families will be requested to provide forensic items (hairbrush, toothbrush) or to provide the name and phone number of the victims' dentist. The County Coroner will coordinate with appropriate agencies any assistance necessary to identify remains above and beyond the physical identification by family members (e.g. DNA, dental exams, fingerprints, serial number on prosthetic devices, implants, and surgical pins). Remains will not be released until positive identification is made.

Disposition of unidentified remains and/or "common tissue" will be the responsibility of the County Coroner. The guidelines to handle such situations are:

- Under no circumstances should unidentified or unassociated remains or tissue be commingled with identified remains
- At the discretion of the County Coroner, interment in a local cemetery will be considered and a grave marker will be placed at the

site to identify it. Cremation should be avoided for religious reasons and availability for identification at a later date.

The Sheriff/County Coroner, in collaboration with appropriate parties, will complete the required death certificate as prescribed by law. Once the remains have been positively identified, the next-of-kin will be contacted. The County Coroner will coordinate the release of the remains and personal effects to the next-of-kin or their designated representative.

If there is a contagious disease involved, the use of a FAC will not be feasible. The need for social distancing will prohibit the establishment of a central facility. Response operations will need to establish “virtual” FACs for information and support.

In the event of a transportation incident, the National Transportation Safety Board (NTSB) will coordinate federal assistance with local and state authorities; coordinate and conduct briefings for the victims’ families to provide information about available resources for recovery, progress of the investigation, and identification of the victims and their personal effects and belongings; and coordinate with the investigator in charge of the accident and local and state officials to try to arrange a family visit to the crash site or to an appropriate alternative site. The American Red Cross has an Aviation Incident Response Team that can mobilize within 4 hours, travel to the site, and help to provide the ARC response to aviation disasters in cooperation with the NTSB and the airlines.

7.4.6 Decontamination

The decontamination of refrigerated trucks that have been used to preserve human remains needs to be carried out by a contractor qualified to provide such services. Supervision of the decontamination process will be by Modoc County Public Health – Environmental Health Division. All vehicles used for this purpose will be decontaminated whether being placed back in service to transport food, used for other purposes, or decommissioned and placed in salvage. Special attention should be given to the decontamination of the refrigeration units and all filters must be replaced if decontamination cannot be accomplished.

Decontamination procedures for handling medical and/or infectious waste and antimicrobial pesticides (disinfectants and sanitizers) must adhere to all applicable requirements established by the Occupational Safety and Health Administration (OSHA), the Environmental Protection Agency (EPA), and the Department of Transportation (DOT). This includes adherence to procedures for both sanitation and worker protection. All state and local standards must also be followed.

The decontamination must be accomplished in a manner which destroys or inactivates any human pathogen that may be present and removes chemical and/or any other incidental environmental contaminant. The decontamination must also remove all offensive odors.

Upon completion of the decontamination process, written documentation must be provided to the owner of the vehicle identifying the procedure used and giving assurance that effective decontamination has been carried out. Documentation listing the properties of various disinfectants that may be used can be found at

<http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5404a2.htm>.

7.4.7 Death Certificate Process

A mass fatality incident within Modoc County will generate a surge in requests to register deaths, obtain permits for disposition of human remains, and obtain certified death certificates. All deaths must be registered in the jurisdiction in which they occur.

In accordance with California law, each death must be registered with the local registrar in the county in which the death was officially pronounced or the body was found. Registration must occur within eight days of the death and before disposition. However, Section 103450 of the Health and Safety Code establishes court allowances and procedures for mass fatality deaths and death certificates.

A certified death certificate serves the following purposes:

- It is the legal record of death
- It allows the subsequent issuance of a permit for disposition of remains
- Settling the decedent's estate
- Settling pension claims
- Applying for insurance benefits
- Verifying the transfer of property

A permit for disposition can only be given after a certified death certificate has been issued. This permit allows for the disposition of human remains and specifies the type (burial or cremation) and location of disposition.

California Electronic Death Registration System (CA-EDRS)

The California Electronic Death Registration System was implemented for the purpose of making the creation, processing and storage of death certificates in California an electronic process.

- EDRS is a web based system that is available to mortuaries, coroners, physicians, hospitals, and local county recorders. The cause of death can also be certified by FAX or voice through the EDRS system.
- When no human remains are recovered, or scientific efforts for identification prove insufficient, the Coroner will file a single verified petition with the Superior Court to judicially establish the fact, time, and place of death for individuals who die in a mass fatality incident. By California law, a hearing will be set no later than 15 days from the date the petition was filed.

If remains are later located and identified for an individual where a court ordered delayed certificate was prepared, a new standard death certificate is **not** prepared. Each decedent must have only one death certificate. However, the court ordered delayed certificate may be amended to reflect the disposition of human remains.

7.4.8 Public Health Mass Fatalities Incidents

In the event of a public health emergency, if it becomes evident that there are not enough available critical staff members to perform necessary functions, under an Emergency Declaration, it may be necessary to redirect staff to assist with mortuary functions. The Health Officer in coordination with the County Coroner and Mass Fatality Branch Director will determine the appropriate staff to be redirected to these activities. If a severe pandemic were to occur, mortuary capacity will be overwhelmed. The County EOC may request through the Regional EOC (REOC) that statutory requirements relating to mortuary response are suspended or amended. This would include the 8 day filing requirement for death certificates.

It will be necessary to designate sites for fatality collection and inform EMS, other designated transport agencies, and the public where they can bring the deceased. For those who die at home, families will need to be provided with information on how to maintain the remains until removed by EMS, mortuary personnel, or delivered by the family to the fatality collection site.

In the event of a public health emergency that necessitates activation of the Mass Fatality Annex; all bodies will be transported to the fatality collection site. Bodies responded to, and processed by first responders will need to be referred through Dispatch to the Transportation Unit. Hospitals will need to make arrangements for the transportation of bodies to the fatality collection site by coordinating with the Transportation Unit.

During a declared public health emergency, no body should be sent directly to a funeral home without first being referred to the Morgue Services Unit. Staff assigned to complete the Electronic Death Registration System (EDRS) entries will be stationed at the site to facilitate the issuance of death certificates.

The following information needs to accompany all remains received at the fatality collection site:

- Name
- Probable Cause of Death
- Age
- Address
- Social Security Number
- Date of Death
- Date of Birth
- Place of Birth
- Race
- Religious Affiliation
- Sex
- Mother's Maiden Name
- Next of Kin

Security at the fatality collection site should include armed personnel under the jurisdiction and direction of the Modoc County Sheriff. One access area should be provided for family members or friends to drop off bodies and one access area for first responders, hospitals and care facilities. All other areas will need to have restricted access and be managed through a master list of allowed personnel.

Special infection control measures may be required for the handling of persons who die as a result of a public health emergency. Funeral homes should use standard precautions when handling remains unless provided with more specific recommendations from the Health Officer. In general, CDC standard precautions call for hand hygiene before and after all contact with bodies or items potentially contaminated with secretions. The use of gloves and gowns are recommended, as is eye protection. Use of a fit-tested respirator, such as an N-95 filtering respirator, is recommended for personnel removing the body from storage bags or conducting examinations. Additionally, family members viewing bodies should be issued disposable gloves and gowns during the viewing.

The contagious aspect of a biological/pandemic public health emergency will prohibit the establishment of a Family Assistance Center (FAC). It is advisable to establish a “virtual” family information center to provide information via newspaper, television, radio, telephone hot lines, social media, and the Internet. It will be vital to provide the public with accurate information regarding mortuary affairs, public health issues, death certificates, and transporting the body to an incident morgue.

8.0 Forms

8.1 Transport of Remains

Transport of Remains

ALL of the following fields must be completed before the transfer vehicle is released to the morgue. The driver of the transfer vehicle is responsible for the log sheet until he/she releases it to the Funeral Director or designee at the morgue. Additional sheets may be added depending on the number of body bags that are being transferred.

Each Body Bag Number Being Transported

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Number of Body Bags: _____

License Number of the Vehicle: _____

Driver's Name (PRINTED)

Driver's SIGNATURE

On-Scene Fatalities Management (PRINT)

On-Scene Fatalities Management (SIGNATURE)

Admitting Funeral Director or Designee (PRINT)

Funeral Director or Designee SIGNATURE

Date and Time Leaving Crash Site

Date and Time Vehicle Arrived at the Morgue

8.2 Release Log

Release Authorization

Name of Deceased _____ ID# _____

Please be advised unidentified human tissue will be buried in an appropriate manner.

In the event any additional tissue(s) are recovered in the future, and are identified as belonging to the above named deceased, I/We request the following:

- () I/We do not wish to be notified. I/We are authorizing the appropriate officials to dispose of said tissue(s) by methods deemed appropriate by said officials.
- () I/We wish to be notified and will make a decision regarding disposition at that time.

I/We the undersigned hereby authorize the _____ Office to release the Remains of _____ to the designated Disaster Mortuary Team or other authorized agent.
(Name of ME/Coroner)
(Name of Deceased)

I/We further authorize the designated agent to embalm, and perform post mortem reconstructive surgery techniques, and otherwise prepare, as they deem necessary and upon completion to release said remains to:

(Name, address & phone of Funeral Home or Agent)

I/We certify that I/We have read and understand this document. I/We further state that I/We are all the next of kin, or represent all of the next of kin and am/are legally authorized, and/or charged with the responsibility of burial and/or final disposition of above said deceased.

Signed: _____ Relationship to Deceased: _____

Print Name: _____ Date Signed: _____ Time: _____

Complete Address: _____

Telephone Number: _____

Signed: _____ Relationship to Deceased: _____

Print Name: _____ Date Signed: _____ Time: _____

Complete Address: _____

Telephone Number: _____

Witness: _____

Printed Name of Witness

Signature of Witness