

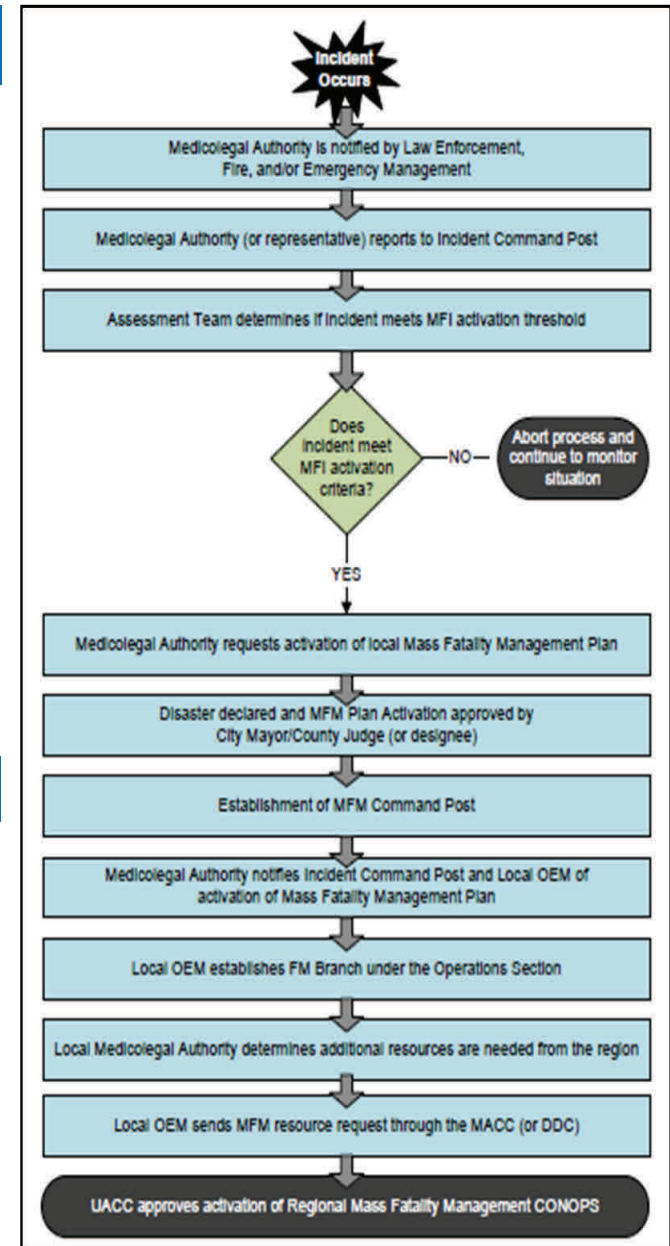
Activation Triggers

- Any situation when a known catastrophic event (i.e., pandemic influenza or hurricane) is likely to occur, resulting in large numbers of fatalities.
- Any incident involving a protracted or complex decedent recovery operation.
- Any situation in which there are remains contaminated by Chemical, Biological, Radiological, Nuclear, and Explosives (CBRNE) agents or materials .
- Any situation in which there are more decedents than can be recovered and examined by the local Medical Examiner's Office, contracted pathology services, or their associated resources.
- When a mass fatality incident (MFI) has affected multiple medical examiner (ME)/justice of the peace (JP) jurisdictions or presents regional implications requiring the involvement of multiple ME/JPs .
- Any incident whereby the jurisdictional or the affected ME/JP's infrastructure is significantly compromised and is not able to function at its primary or backup locations.
- Any incident or other special circumstance requiring a multi-agency or regional response to support mass fatality management (MFM) operations .
- Any situation whereby the affected ME/JP requests assistance from one or more of its regional ME/JP partners, even in the absence of a state or federally declared disaster.

How to Activate this CONOPS

Reference Activation Flowchart at right:

- Incident Command (IC)/Unified Command (UC) or first response agencies on scene notify the local medico legal authority.
- When local mutual aid assistance is not sufficient to sustain incident response, the local medicolegal authority should request the activation of this Regional MFM Concept of Operations (CONOPS).
- The local medicolegal authority convenes the assessment team to consider the situation and the need for additional support and to activate MFM functions (see p2).
- If the assessment team determines that the incident meets the activation criteria above, the local medicolegal authority requests activation of the CONOPS.



Operational Considerations

- Each position on the organizational chart has a corresponding field operating guide
- Plan and position-specific guide are located at <https://www.piersystem.com/go/doctype/1532/117587/Mass-Fatality-Management-Plans-and-Tools> .
- Select the family assistance center (FAC) site carefully; it will be difficult to move it later.
- The FAC must be Americans With Disabilities Act (ADA)-compliant, meet Texas Accessibility Standards, and not be located close to the incident site or the morgue.
- Make sure that the IC/FAC provides information to family members before releasing information to the media.
- The ME or designated representative leads family briefings and has available spokespersons from other agencies/operations.

Activate 9 operational components as needed:

- Safety (ESF#8,10)
- Security (ESF#13,
- Call Ctr (ESF#2,6)
- Site Management (ESF#13,4,8,10)
- Human Remains and Personal Effects Recovery (ESF#8,13,10)
- Transportation of Human Remains (ESF#8)
- Morgue Operations (ESF#8)
- Family Assistance Ctr (ESF#6)
- Victim Identification Ctr (ESF#8)

RCPI Plan Integration

MACC	X
CMIS	X
HURR-SAR	X
IED-SAR	X
AMOPS	
CMOC	X
RNEMR	X
PHCF	X
RECP	
TMC-FLU	X
SWI	X

Communications Considerations

- Telephonic and computer connectivity to support MFM operations
- Technical component operators of MFI-related call centers
- Computer servers support at MFI locations
- IT infrastructure to support antemortem and postmortem data collection systems
- Interoperability between MFI branches and law enforcement agencies, fire departments, search and rescue teams, etc.
- Information must be shared in this order:
 - Fatality management responders
 - Victim family members and friends (referred to as “FAC patrons”) at briefings
 - General public and media
- Families must receive information from responders prior to the media and public