



State of Ohio

Victim Identification Center

Field Operations Guide

This document was developed by the Ohio State Coroners Association

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4. Overview / Purpose

The mission of the mass fatality human identification effort is the identification of human remains so that they can be repatriated to the family. The postmortem data documented at the disaster morgue will be compared with antemortem data, collected in the Victim Identification Center (VIC), in order to facilitate the identification of each decedent; the data will also help the Coroner/Medical Examiner (C/ME) determine the cause, manner, and time of the decedent's death.

It is the responsibility of the medico-legal jurisdiction overseeing disaster victim identification and death certification to conduct its medico-legal operations in a manner that best facilitates the scientific process of human identification; the exchange of factual and timely information; and the rapid return of all human remains to their legal next of kin.

The VIC is a location that houses the victim identification operation that is run by the C/ME. This operation directly interfaces with the family and friends of the deceased to collect antemortem data. The operation also includes keeping the family and friends informed about the identification efforts, notifying the next of kin that the human remains have been identified and coordinating the release of the remains.

This Field Operating Guide (FOG) provides an overview of definitions and guidelines for the establishment and management of victim identification operations, including (but not limited to) the coordination with partner agencies regarding missing persons reporting and manifest development.

5. How to Use this FOG

5.1 Mass Fatality Incident Orientation Map

The orientation map (Figure 1) on the following page (or below) outlines the milestones in the response to a Mass Fatality Incident.

ORIENTATION MAP

Command and Control	On-Scene	Disaster Morgue	VIC
Incident Occurs			
Receives notification of Potential MFI Deploy Assessment Team			
	Assessment Team Response Initial Incident Orientation		
Notify Coroner/Initial Brief Activate MFM Plan			
Establish the FM Branch Confirm Jurisdiction/Authority	Coordinate with other agencies Relay FM priorities to IC		
Activate AOC ME/Coroner Rep. to EOC	Assign Deputy FM Branch Director - Scene	Notification of Deputy Branch Director - FM	Notification of Deputy Branch Director - AM
	Joint Agency Fatality Execution Team	Decision regarding Morgue Type	Participate in FAC Planning
	Determine Scene Processing Protocols	Establish Morgue Site Security	Determine FAC location and VIC operations
	Search for potential human remains	Deploy Assets to morgue	Deploy assets and IT to the VIC
	Investigate and inspect human remains		Set up VIC based on determined layout
	Remains Recovery		Participate in Family Briefings
Interagency Coordination	Collection of remains and storage in BCP	Set up morgue based on workflow	Coordinate with investigative agencies
	OA/OC review of scene		
Incident Specific Planning	Transport remains to morgue		
	Demobilize scene personnel and assets	Receive Remains at morgue	Conduct antemortm interviews
		Process Remains	
		Review of cases/documentation	Make identifications
			Notify Next of Kin
Demobilize personnel and assets		Release of remains for final disposition	
		Demobilize morgue personnel and assets	Demobilize VIC personnel and assets

FIGURE 1: Mass Facility Incident Orientation Map

5.2 Defining a Mass Facility Incident (MFI) and the Role of the Coroner/Medical Examiner

See Mass Facility Incident Criteria Section 13.1

5.3 Introduction to a Family Assistance Center (FAC) and the Victim Information Center (VIC)

Family Assistance Center

The traditional FAC is a secure facility established as a centralized location to provide information about missing persons who may be victims of the disaster; a gathering point where information is exchanged in order to facilitate the body identification process and the reunification of next of kin; a location for the collection of antemortem data supporting victim identification efforts; and where spiritual and emotional support is provided for those awaiting information about their loved ones. Also, given the circumstances, additional supportive services such as housing information/referral, insurance, and legal assistance may be provided.

Family Assistance Center (FAC) Functions
Family briefings
Collection of antemortem data for identification of human remains (VIC function)
Death notification to next of kin (VIC function)
Management/coordination of all family assistance operations, including all involved organizations and personnel
<p>Family support services:</p> <ul style="list-style-type: none"> • Call center • Reception and information desk • Spiritual care • Mental health services • First aid/medication • Translation/interpreter services • Child care • Food services/mass care • Web Search/Lead Investigation Center (if the mass fatality involves large numbers of missing persons). • A wide range of additional services that are based on the incident. These may include: lodging, clothing, transportation, financial assistance, financial services, legal services, crime victims services, etc.

Joint Family Support Operations Center (JFSOC)

The JFSOC is the command center for the FAC – it is the location where all the agencies present at the FAC can coordinate efforts, meet and make decisions regarding the FAC operations.

Victim Information Center (VIC) Located within the FAC

The VIC provides a secure and centralized location within the FAC that facilitates the exchange of timely and accurate antemortem information between the Coroner/Medical Examiner (C/ME), investigative authorities, and family and friends of the deceased. The C/ME is responsible for establishing the VIC, coordinating the collection of antemortem and postmortem data, overseeing the data management process, providing identification of deceased victims and liaising with mortuary affairs.

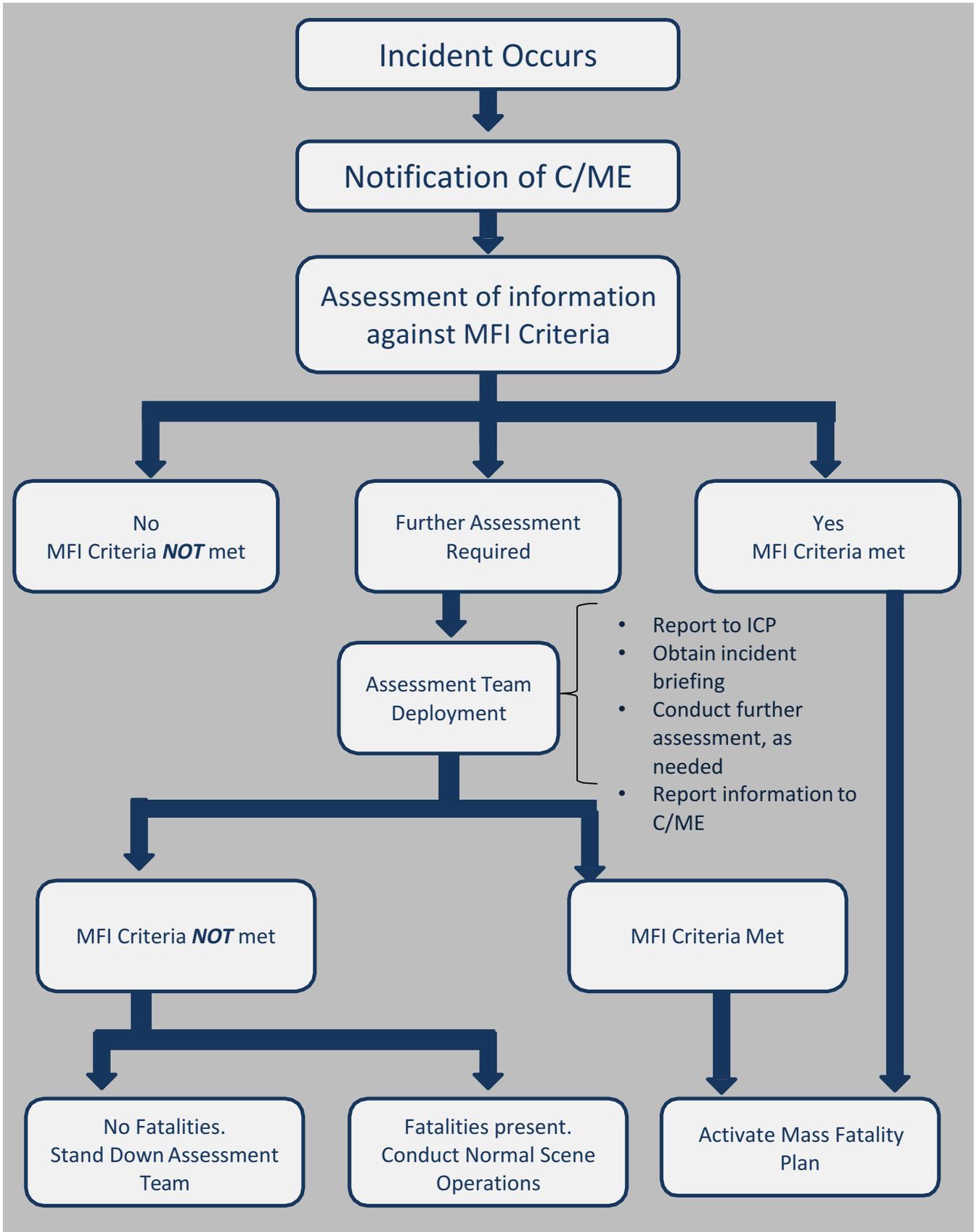
VIC Functions

Collecting antemortem data	Collect data from decedent family and friends that will be used to identify decedents. (i.e. physical description, clothing description, personal and medical history).
Collecting DNA samples	Obtain and manage DNA samples gathered for decedent identification purposes.
Collecting medical records	Obtain and manage decedent medical records such as dental records, x-rays, fingerprints, blood reports, which can be used to support decedent identification.
Conducting family notification	Depending on the scope of the event and the condition of the remains, notification of identifications may be done at the VIC. After positive identification of the deceased is achieved by the C/ME, law enforcement will notify next-of-kin (NOK).
Participating in FAC family briefings	FAC briefings are a function of all the investigative agencies providing updated information to the families collectively. The C/ME provides regular updates to families during regularly scheduled FAC family briefings regarding the decedent identification process and progress, and how family members will be notified if a positive identification is made.

6. Incident Notification and Confirmation of a Mass Fatality Incident (MFI)

6.1 Initial Actions by the C/ME when Notified of a Mass Fatality Incident (MFI)

Initial Notification and Confirmation of MFI



When the C/ME's office has been notified of a potential mass fatality incident (MFI), an initial assessment of the incident must be performed. Based upon this information, the C/ME will decide whether or not to activate the local mass fatality management (MFM) plan. Based upon a briefing from the local field response team on the characterization of the incident, the C/ME executive leadership will provide direction regarding fatality management objectives for the incident.

C/ME Initial Notification Actions	
<i>NOTE: Many of these tasks are concurrent actions</i>	
C/ME CRITICAL TASKS	DESCRIPTION
<input type="checkbox"/> Initial MFI assessment	<ul style="list-style-type: none"> When the C/ME's office has been notified of a potential MFI, an initial assessment of the incident must be performed (see Section 6.2 below).
<input type="checkbox"/> Assessment Team deployed to scene	<ul style="list-style-type: none"> An Assessment Team is sent to scene to confirm MFI and conduct initial incident characterization. (See Section 6.2 below).
<input type="checkbox"/> Development of Incident Characterization	<ul style="list-style-type: none"> The Incident Characterization Form (ICF) is populated and briefed back to the C/ME (see Section 14.1 Incident Characterization Form).
<input type="checkbox"/> MFM Plan activation	<ul style="list-style-type: none"> Based on operational briefings from the scene the C/ME will decide whether or not to activate the local mass fatality management (MFM) plan. (See Section 14.1 Criteria for a Mass Fatality Incident). <p>NOTE: If the MFM Plan is activated then a VIC operation is activated.</p>
<input type="checkbox"/> FM Branch Director assigned <input type="checkbox"/> Deputy FM Branch Director – Antemortem (AM) assigned	<ul style="list-style-type: none"> The C/ME assigns a Fatality Management (FM) Branch Director who then assigns a Deputy FM Branch Director – Antemortem (AM) to manage all aspects of operations pertaining to all postmortem processing (including postmortem data collection and analysis, DVI, and remains storage and disposition). The Deputy FM Branch Director – AM will represent the C/ME on the interagency FAC activation decision making call.
<input type="checkbox"/> MFI objectives established	<ul style="list-style-type: none"> Based upon a briefing from the scene on the characterization of the incident, the C/ME executive leadership will provide direction regarding fatality management objectives for the incident.
<input type="checkbox"/> Executive leadership	<ul style="list-style-type: none"> A Decision-Making meeting will be held with the C/ME and executive

C/ME Initial Notification Actions

NOTE: Many of these tasks are concurrent actions

C/ME CRITICAL TASKS	DESCRIPTION
decision making conducted	<p>leadership to determine the type of VIC to be activated, the workflow that will be utilized and other critical operational policies.</p> <ul style="list-style-type: none"> To support executive decision making the Deputy FM Branch Director – AM will develop the discussion items and recommendations (See Section 7.1).

6.2 Information from Scene / Operational Briefing

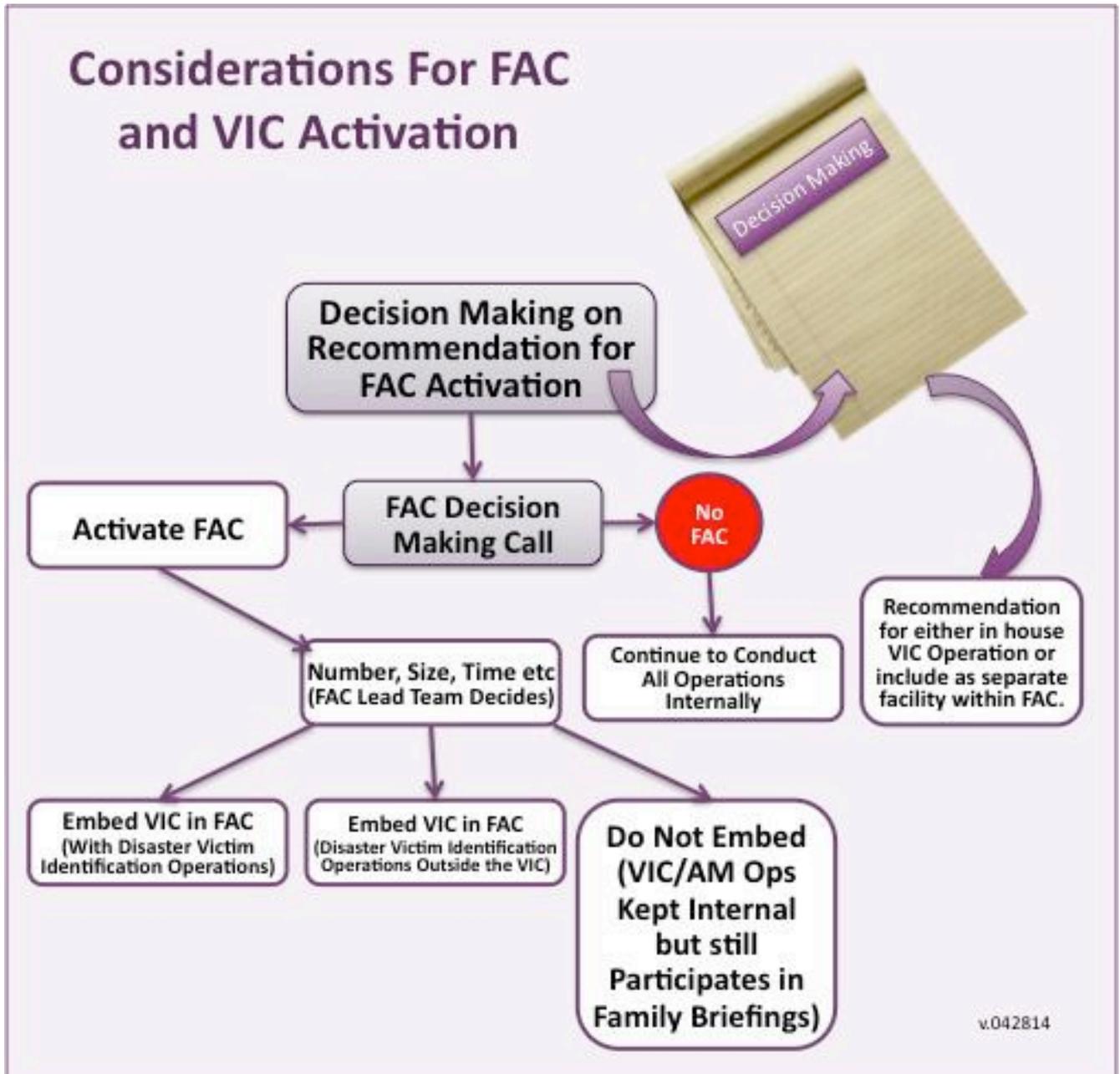
REFERENCE: Incident Characterization Form, see Section 14.1

The following information should be provided. If it is not provided, the information should be requested.

Briefing from Scene / Operations Center	
The initial assessment includes, but is not limited to:	
Type of Incident	<input type="checkbox"/> Natural <input type="checkbox"/> Criminal/terrorist <input type="checkbox"/> Accident
Contamination or Infectious/ Transmissible Disease	<input type="checkbox"/> Present <input type="checkbox"/> Type of contamination (e.g. chemical, biological): _____ <input type="checkbox"/> Not present
Magnitude/Number	<input type="checkbox"/> Fragmentary remains <input type="checkbox"/> Whole bodies <input type="checkbox"/> # estimated casualties vs. # of estimated fatalities
Manifest	<input type="checkbox"/> Closed population and manifest exists or can easily be determined <input type="checkbox"/> Open population and no/incomplete manifest exists <input type="checkbox"/> Unknown
Condition of Remains	<input type="checkbox"/> Visually Identifiable

Briefing from Scene / Operations Center
The initial assessment includes, but is not limited to:

(Ability to Identify)	<input type="checkbox"/> Whole bodies <input type="checkbox"/> Fragmented/co-mingled <input type="checkbox"/> Decomposed <input type="checkbox"/> Charred <input type="checkbox"/> Mutilated
Rate of Recovery	<input type="checkbox"/> Rapid (hours to days) <input type="checkbox"/> Moderate (days to weeks) <input type="checkbox"/> Slow (weeks to months)
C/ME Office / Jurisdiction infrastructure	<input type="checkbox"/> Operational <input type="checkbox"/> Not fully operational <input type="checkbox"/> No longer operational
Disaster Site location characteristics	<input type="checkbox"/> Fixed or distributive location (distributive may introduce the decision to establish disaster morgue ops at multiple locations) <input type="checkbox"/> Building materials present (Introduces HAZMAT consideration) <input type="checkbox"/> Water/tides present <input type="checkbox"/> Types of buildings close by <input type="checkbox"/> Need for excavation (Impacts rate of recovery which will impact morgue operational response) <input type="checkbox"/> Burning/smoldering



Note: Depending on the size of the FAC/VIC, a choice has to be made whether the Disaster Victim Identification Operations will be located inside the VIC or at another location that has direct communications with the VIC. See progression illustration above.

The VIC activation process includes:

1. The Deputy FM Branch Director – AM assesses the information he/she has received to determine the recommendation to activate a VIC operation
2. The Deputy FM Branch Director – AM participate in an interagency FAC conference call to determine the activation of the FAC operation. (Other participants on the FAC call may include but are not limited to: Office of Emergency Management, Law Enforcement – Missing Persons, Human/Social Services Agency, American Red Cross, etc.)
3. On the interagency FAC call the Deputy FM Branch Director – AM makes a recommendation to open or not to open a VIC operation. (Other agencies will make their recommendations regarding the portions of the FAC that they are responsible for.)
 - The Deputy FM Branch Director-AM reports to FM Branch Director the interagency decision regarding FAC activation.
4. After the FAC call the Deputy FM Branch Director – AM will take actions based on the following scenarios:
 - a. FAC is activated and VIC will open within the FAC with DVI Operations occurring in the VIC.
 - b. FAC is activated and VIC will open within the FAC with DVI Operations occurring outside the VIC.
 - c. FAC is not activated and VIC will open stand alone.
 - d. FAC is not activated and VIC operations will be handled by normal operations.

7.1 FAC / VIC Activation Decision Making

Within two hours of the incident, an interagency conference call will be initiated by the FAC coordinating agency (typically the local Emergency Management or Human Services Agency). This interagency call is convened amongst the agencies responsible for FAC operations: Human and Social Services Agencies, Law Enforcement – Missing Persons, Emergency Management Agency, Coroner/Medical Examiner Agency, American Red Cross and/or other mental health agencies, and other agencies as needed. The interagency call provides an opportunity for these agencies to make recommendations for the activation of a FAC.

The Deputy FM Branch Director – AM will assess the incident characteristics and the agency’s capabilities, and will make a recommendation for a FAC based on need to activate a VIC. The Deputy FM Branch Director – AM does not make the decision to activate the FAC, but based on this need – the FAC coordinating agency will make the decision to activate a FAC.

In the table below are the items that the Deputy FM Branch Director – AM should consider in determining the need to activate a VIC, i.e. how many, where and when the VIC must activate

These are the decision points to be reported to the C/ME and discussed on the interagency call.

Note: The C/ME is ultimately responsible for the decision regarding the VIC activation. They are working off of the recommendation from the Deputy FM Branch Director-AM based on their assessment/analysis of the information from the scene.

The FAC coordinating agency will consider the following when deciding whether or not to activate a FAC.

To determine if a VIC Activation is needed, the Deputy FM Branch Director-AM must consider the following items:		
Item	Considerations	References
VIC Activation	<ul style="list-style-type: none"> • Consider the ability for the C/ME to handle the Antemortem data collection process with routine operations. • Consider the following characteristics of the incident: <ul style="list-style-type: none"> – Open vs. Close Manifest 	Incident Characterization Form, see Section 14.1 Identification Policy

**To determine if a VIC Activation is needed,
the Deputy FM Branch Director-AM must consider the following items:**

Item	Considerations	References
	<ul style="list-style-type: none"> – Minimum number of fatalities – Condition of remains – Demographics of victims – Potential identification modalities • Required coordination with other investigative agencies to determine identifications of deceased victims • Type of incident (legislated transportation incident requirements) 	
<i>If a VIC is activated...</i>		
VIC Location	<ul style="list-style-type: none"> • Identify required infrastructure for: <ul style="list-style-type: none"> – Private and secure Antemortem Interviews – Ability to utilize data management system based on Information Technology (IT) infrastructure • Demographics of victims / number of family members per report • Transportation / Access to the VIC/parking • Would any other assistance be needed? Decision to collocate with other support services (sensitivity/sensibility considerations) • Number of rooms / space available for briefings, Disaster Victim Identification (DVI) operations, etc. 	VIC Layout and infrastructure Incident Characterization Form, see Section 14.1
Number of VICs	<ul style="list-style-type: none"> • Type of incident: consider the need to set up Antemortem data collection at the departure location, the destination location, and the incident location. 	Incident Characterization Form 14.1

**To determine if a VIC Activation is needed,
the Deputy FM Branch Director-AM must consider the following items:**

Item	Considerations	References
	<ul style="list-style-type: none"> • Location of families • Virtual • Ability to coordinate with other jurisdictions 	
Time to Initiate Operations	<ul style="list-style-type: none"> • Set up requirements (existing IT infrastructure, delivery/mobilization of the equipment) • Time and date of incident (consider availability of staff and resources based on time of day, holidays, etc.) 	
Co-location of DVI Operations	<ul style="list-style-type: none"> • Is the space available? • Do you have the resources to perform DVI operations at the VIC? • Is it beneficial to move the resources (efficiency)? • Availability to mobilize and set up equipment? 	
Co-location of Family Notifications?	<ul style="list-style-type: none"> • Are the proper agencies available to make notifications? 	

7.2 Deputy FM Branch Director – AM VIC Activation Responsibilities

If the decision is made to activate a VIC, the Deputy FM Branch Director-AM must the following responsibilities:

VIC Activation Responsibilities by Deputy FM Branch Director - AM	
RESPONSIBILITY	DESCRIPTION
<input type="checkbox"/> Determine location of VIC	<p>Possible scenarios:</p> <ul style="list-style-type: none"> • FAC is activated and VIC will open within the FAC with DVI Operations occurring inside the VIC • FAC is activated and VIC will open within the FAC with DVI Operations occurring outside the VIC • FAC is not activated and VIC will open stand alone • FAC is not activated and VIC operations will be handled by normal operations
<input type="checkbox"/> Establish time for an initial walk-through with VIC Leadership to discuss the setup of the VIC	<ul style="list-style-type: none"> • The initial walk-through may determine when operations can begin • VIC Leadership should include: Deputy FM Branch Director – AM, Interview Group Supervisor, DVI Group Supervisor, VIC Support Group Supervisor, VIC IT Support Team
<input type="checkbox"/> Determine date/time that VIC must be operational	<p>This will depend on:</p> <ul style="list-style-type: none"> • The current time of day (will VIC operations commence the next morning?) • Expectations of the families • How soon the list of presumed dead can begin to be established • The operational hours of the FAC (if the VIC is within the FAC) • How long it will take to establish the minimum equipment, supplies and trained staffing for operations
<input type="checkbox"/> Notify key set up staff to report immediately to begin critical actions	<ul style="list-style-type: none"> • See Section 7.3 below: VIC Staff Key Contacts
<input type="checkbox"/> Identify appropriate operational periods for the VIC operation	<ul style="list-style-type: none"> • Consider the number of family interviews per operational period • Consider the : <ul style="list-style-type: none"> – The number of cases that need to be processed in relation to the resources available

VIC Activation Responsibilities by Deputy FM Branch Director - AM	
RESPONSIBILITY	DESCRIPTION
	<ul style="list-style-type: none"> - Operational hours of the FAC - Availability and needs of the family members
<input type="checkbox"/> Identify entry credential requirements	<ul style="list-style-type: none"> • Consult with the FAC Security Officer to decide the proper credentials for access to the FAC (and into the VIC).

7.3 Deputy FM Branch Director – AM Notifies VIC Personnel to Begin Activation

Following the Interagency FAC conference call and decision to activate a VIC, the Deputy FM Branch Director – AM assigns and notifies key VIC staff to begin activation of the VIC.

Notify Key VIC Staff	
CRITICAL TASKS	DESCRIPTION
<input type="checkbox"/> Notify key set up staff to report immediately to begin critical actions	<ul style="list-style-type: none"> • See Section 7.3.1 below: VIC Staff Key Contacts
<input type="checkbox"/> Brief key VIC staff	<p>Provide the following Briefing to each individual:</p> <ul style="list-style-type: none"> • Situation update • VIC location (address) • What operations are going to take place at the VIC • Instruction to activate subsequent VIC personnel • Instruct personnel on the time to report to the VIC • Identify necessary credentials to enter the VIC • Instruct personnel on the time the VIC must be operational and expected operational periods • Time for initial set up walk through • Credentials required • Direct personnel to consult the FOG to provide guidance • Request a report back on any mobilization issues that he/she may be experiencing

Notify Key VIC Staff

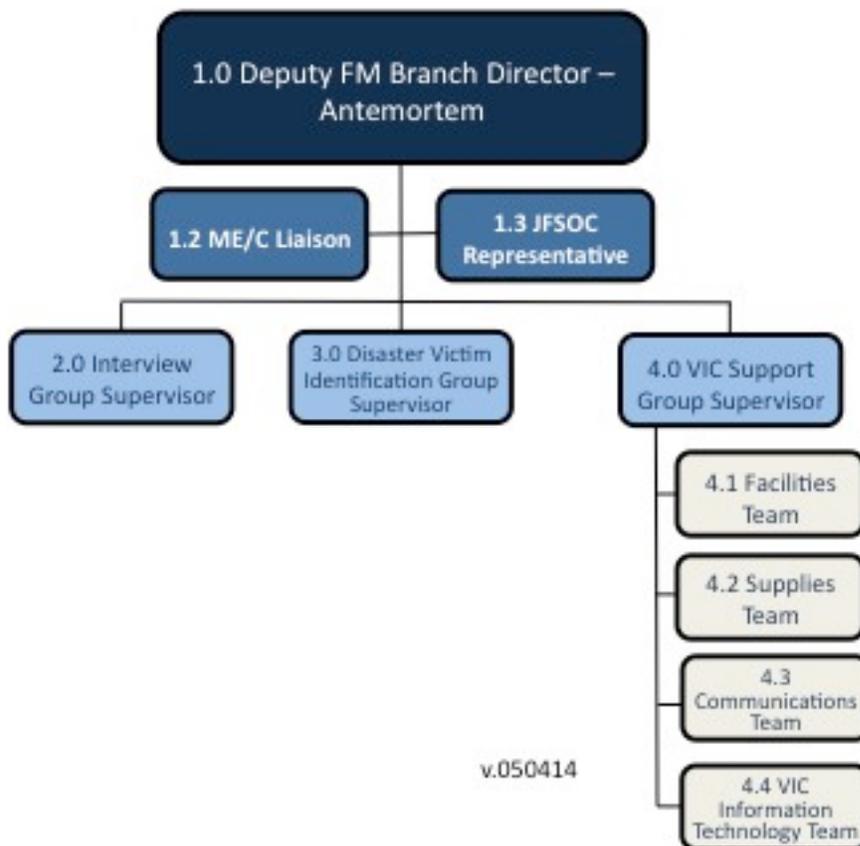
CRITICAL TASKS	DESCRIPTION
	<ul style="list-style-type: none">• Emphasize that any initial resource needs not immediately available should be pushed to the Agency Operations Center for resource sourcing.

7.3.1 VIC Key Position Contacts

These are the individuals that will need to be notified specifically for the VIC activation and set up.

Note: Some of these staff may already be activated by the C/ME as a general notification of the incident.

VIC Key Position Contacts



Position	Contact	Documentation of Contact: Date/Time /Comments
Deputy FM Branch Director – AM	Name: Contact #: E-mail:	
C/ME Liaison	Name: Contact #: E-mail:	
Joint Family Support Operations Center (JFSOC) Representative	Name: Contact #: E-mail:	

Position	Contact	Documentation of Contact: Date/Time /Comments
Interview Group Supervisor	Name: Contact #: E-mail:	
DVI Group Supervisor	Name: Contact #: E-mail:	
VIC Support Group Supervisor	Name: Contact #: E-mail:	
Facilities Team	Name: Phone Number: Email:	
Supply Team	Name: Phone Number: Email:	
Communications Team	Name: Phone Number: Email:	
VIC IT Support Team	Name: Phone Number: Email:	

7.3.2 Interagency Coordination Considerations

Law Enforcement/Missing Persons Unit/Investigative Agencies	The antemortem interviews should be conducted in concert with agencies requiring information for missing person’s investigations. The purpose of the joint agency interviews is to prevent the families from enduring multiple rounds of questioning.
Mental Health Services	Whether provided by NGO’s (American Red Cross or a local health agency, mental health representatives) will be present in the VIC to provide support for both families and, separately for the staff.
Chaplaincy Services	Often in addition to the presence of mental health personnel, the support of chaplaincy representatives are recommended to support families during the interview process. Chaplaincy services should be requested by the coordinated agency based on the demographics of the families and victims (if known).

Language Services	Occasionally the interviewer may request a translator to assist in conducting the interview. The coordinating agency will assist with the identification of appropriate translators based on the identified needs of the family(ies).
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7.3.3 VIC Support Agencies and Organizations

VIC SUPPORT AGENCIES AND ORGANIZATIONS	
Agency	Responsibilities
Coroner/Medical Examiner	<ul style="list-style-type: none"> Identifies requirements associated with VIC operations and coordinates these needs through appropriate agencies. Staffs C/ME positions within the VIC. Gathers antemortem data necessary to facilitate decedent identification. Works with law enforcement to create an accurate Decedent Manifest report from which decedent identifications can be verified. Uses the DMORT VIP system to cross link vital information between Missing Person Reports and antemortem and postmortem data collected to positively identify decedents. Prepares and conducts daily FAC Family Briefings. Forensically analyzes antemortem and postmortem data to positively identify decedents.
Law Enforcement	<ul style="list-style-type: none"> Supports VIC operations by conducting missing persons interviews. Supports VIC operations by notifying the NOK of their loved ones death. Investigates Missing Persons Reports. Coordinates their investigative efforts with the C/ME, Office of Vital Records, and other appropriate agencies. Develops accurate missing persons manifest.
211/Call Center	<ul style="list-style-type: none"> Enters caller information regarding Missing Persons Reports into Data Management System (those communities which have 211 capability).
Emergency Management	<ul style="list-style-type: none"> Supports VIC operations by coordinating with local agencies and organizations to obtain specific assets and resources.
Information Technology	<ul style="list-style-type: none"> Supports VIC operations by providing network connectivity so that all antemortem data can be controlled and distributed through a central network. This is coordinated through the Emergency Management Agency.
Local Office of Vital Records	<ul style="list-style-type: none"> Supports decedent and missing person manifest efforts by determining if those persons have been previously granted death certificates through the EDRS system.
NGO	<ul style="list-style-type: none"> Provides behavioral health, reception center services to families & friends of

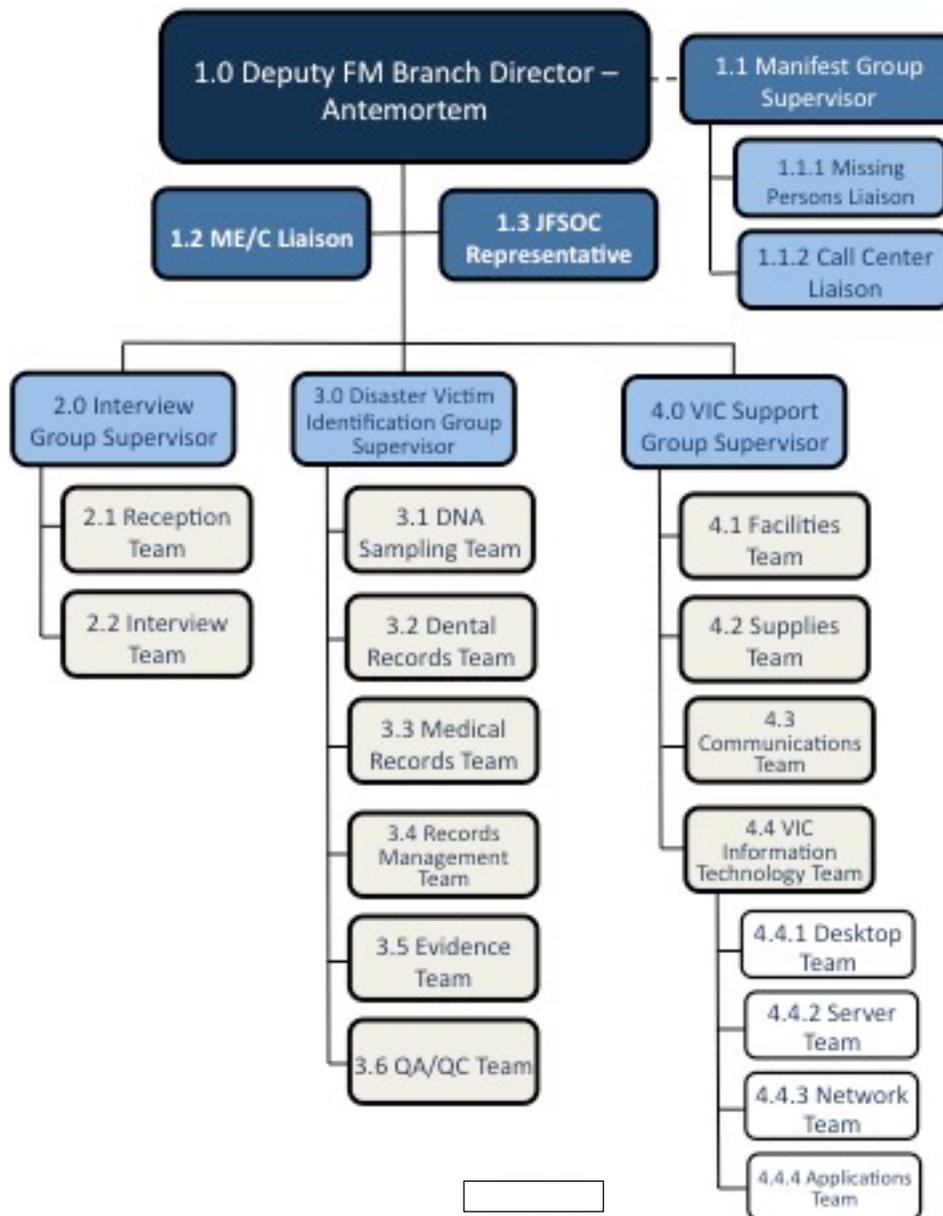
VIC SUPPORT AGENCIES AND ORGANIZATIONS	
Agency	Responsibilities
	victims (American Red, ADAMH, etc.) Cross/ at the FAC. <ul style="list-style-type: none"> • Provides mental health services to VIC staff. • Provides mental health support during VIC interviews if needed.
Local, State and Federal Investigative Agencies	<ul style="list-style-type: none"> • Supports VIC operations as they are responsible for identifying investigative requirements pertaining to decedent management.
Airline Reps	<ul style="list-style-type: none"> • Provide manifest of persons on board airliner transportation assets during the time of the accident.
Railway Reps	<ul style="list-style-type: none"> • Provide manifest of persons on board railroad transportation assets during the time of the accident.
Employer Rep	<ul style="list-style-type: none"> • Provides manifest of persons physically at work during the time of the accident.

8. VIC Organization, Functions/Staffing, Layout, and Infrastructure/Resource Requirements

8.1 VIC Organization

The following chart depicts the command structure within the VIC and identifies the positions required to support VIC operations. Additional positions or agencies may be required based on the magnitude of the mass fatality incident.

The Deputy FM Branch Director - AM is required at all stages of activation and activates support positions as needed. The nature and number of fatalities associated with the incident will influence the structure and size of VIC operations.



8.2 VIC Functions Overview and Staffing

VIC Functions and Staffing		
Function	Description	Staffing
Reception	<ul style="list-style-type: none"> Confirm families have registered and all necessary information has been gathered Coordinate with FAC Registration Schedule antemortem interview Client flow management 	<ul style="list-style-type: none"> Group Supervisor Reception Team
Antemortem Interview	<ul style="list-style-type: none"> Antemortem data collection (medical records, photos, dental x-rays) Draw family pedigrees and collect DNA samples for subsequent DNA testing 	<ul style="list-style-type: none"> Group Supervisor Interview Team
Disaster Victim Identification	<ul style="list-style-type: none"> Coordinate with victim's medical providers to obtain medical records Record management DNA / kinship analysis performed Dental records obtained / reviewed Antemortem and postmortem data comparison Reports Administration 	<ul style="list-style-type: none"> Group Supervisor DNA Sampling Team Dental Records Team Medical Records Team Records Management Team Evidence Team QA/QC Team
VIC Support	<ul style="list-style-type: none"> Facility set up Data management system Equipment and supplies 	<ul style="list-style-type: none"> Group Supervisor Facilities Team Supplies Team VIC Information Technology Support Team

8.3 VIC Interview Scaling Scenarios

As you receive information from the Scene and/or FM Branch Director and/or Agency Operations Center – use this information (based on the scale of the incident) to determine the necessary capacity of the VIC, the estimated number of family and friends that will likely come to the facility and the estimated number of days it will take to complete the interviews.

VIC Interview Scaling Scenarios				
Potential Fatalities	<50 fatalities	50-300 fatalities	300-1000 fatalities	5,000 fatalities
Daily Capacity for VIC Operations <i>(Assumes each interviewer does 4 interviews per day at a rate of 2.5 hours/interview (plus break time))</i>	8 interviewers per 12 hrs. a day = 32 interviews a day	25 interviewers per 12 hrs. a day = 100 interviews a day	50 interviewers per 12 hrs. a day = 200 interviews a day	375 interviewers per 12 hrs. a day = min. 1500 interviews a day
** Estimated Number of Family and Friends	400	400 – 2,400	2,400 – 8,000	40,000
Estimated Number of Maximum Days to Complete Interviews	12.5 Days	24 Days	40 Days	26.5 days

For most mass fatalities, expect the FAC to operate 24 hours/seven days a week in the beginning. While some services will be needed during all open hours, many of the direct services can be provided between 8 a.m. and 5 to 9 p.m. Operations will anticipate interviews lasting 2.5 hours. Standard practice should be to allow interviewers 30 minutes mental health breaks between every interview.

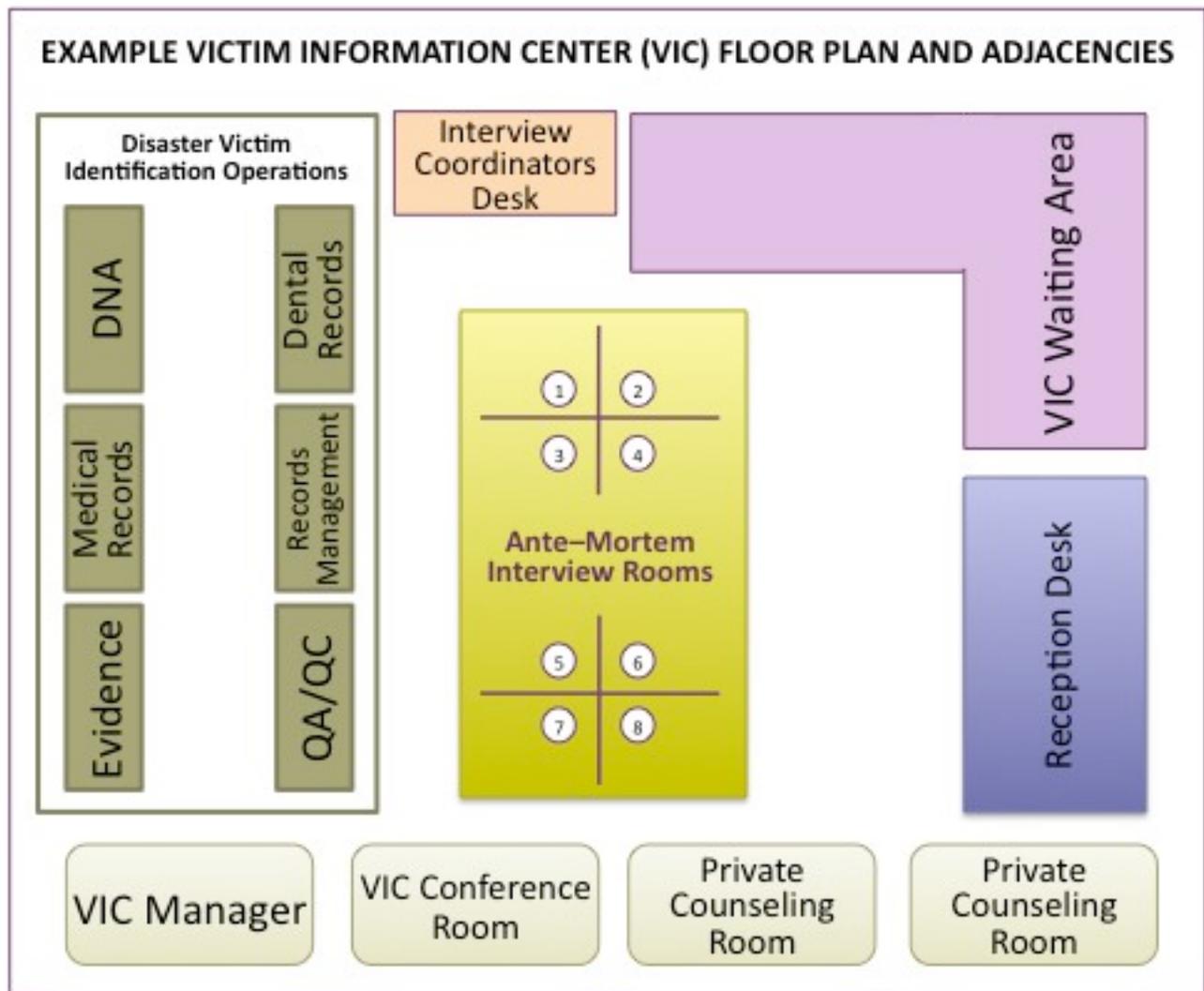
This should be a consideration based on the NEED to run 24 hour operations, the arrival times of the families, the investigative needs, the immediate ability to make identifications and need for AM data, etc.

The decision to keep the FAC open 24 hours will be the decision of the FAC coordinating agency. The decision to continue with AM interviews 24 hours will be the decision of the C/ME in consultation with the FM Branch Director and Deputy FM Branch Director-AM.

** For every fatality it is estimated that approximately 10 individuals will come to the FAC (VIC) to seek and provide information about their missing loved one. It is likely that not all of these individuals will require separate interviews. The C/ME personnel must coordinate with law enforcement to identify which individuals at the FAC should participate in an antemortem interview.

8.4 Example Floor Plan and Adjacencies

The following notional illustration depicts VIC functional areas and adjacencies. Consult this example floor plan during the VIC set up walk through.



v043014

8.5 VIC Infrastructure / Resource Requirements

A VIC Requires:		
<input type="checkbox"/> Facility space (located within FAC)	<input type="checkbox"/> Equipment (Sec. 15.2)	<input type="checkbox"/> Heating, Ventilating, and Air Conditioning (HVAC)
<input type="checkbox"/> ADA access and requirements	<input type="checkbox"/> Supplies (Sec. 15.2)	<input type="checkbox"/> Restrooms
<input type="checkbox"/> Staff	<input type="checkbox"/> Utilities (Sec. 15.2)	<input type="checkbox"/> Janitorial
<input type="checkbox"/> Furnishings	<input type="checkbox"/> IT (Sec. 15.2)	<input type="checkbox"/> Parking
	<input type="checkbox"/> Communications (Sec. 15.2)	

9. Setting Up the VIC

Whether or not the VIC is collocated in the FAC or is established as a standalone operation – there are significant set up requirements to establish a VIC operation.

Of particular concern are the security requirements, IT set up and room set up to ensure that families are protected, the data management system is operational and that the flow of people is efficient and effective.

Establishing (Setting Up) the VIC	
The Deputy FM Branch Director – Antemortem arrives at the VIC site to initiate and direct VIC set up	
<i>NOTE: Many of these tasks are first operational period concurrent actions</i>	
CRITICAL TASKS	DESCRIPTION
<input type="checkbox"/> Establish Contact With JFSOC	<ul style="list-style-type: none"> Meet and coordinate with Joint Family Support Operations Center (JFSOC). Appoint a VIC JFSOC. <p>Note: When the JFSOC is activated by the FAC coordinating agency, it should be staffed by representatives from each FAC Agency, including the C/ME.</p>
<input type="checkbox"/> Ensure Security Established	<p>When the VIC is collocated within a FAC:</p> <ul style="list-style-type: none"> Ensure the agency responsible for security has been identified and notified of the FAC site. Ensure the security team is aware of the VIC area and communicate any security concerns. Ensure security protocols will: <ul style="list-style-type: none"> Allow access to escorted individuals with scheduled antemortem interviews;

Establishing (Setting Up) the VIC

The Deputy FM Branch Director – Antemortem arrives at the VIC site to initiate and direct VIC set up

NOTE: Many of these tasks are first operational period concurrent actions

CRITICAL TASKS	DESCRIPTION
	<ul style="list-style-type: none"> – Allow access to properly credentialed VIC support personnel from the C/ME, law enforcement and mental health services. (include any supporting agencies that may require access); – Restricted access to members of the press, legal solicitors and the general public. <p>When the VIC is opened without a FAC activation (within the C/ME facility or as an augmentation to normal operations):</p> <ul style="list-style-type: none"> • Identify the security personnel needed to secure the facility – this may be achieved by coordinating with the local law enforcement agency(ies) or utilizing agency security personnel on hand.
<p><input type="checkbox"/> Identify Minimum Requirements To Open VIC</p>	<ul style="list-style-type: none"> • Identify the minimal requirements needed to open the VIC facility to families (interviews may begin prior to the full outfit of the site, be sure to explain to staff what the minimal requirements are and to prioritize those areas). • See Appendix 13.1 VIC and Space Requirements by Function.
<p><input type="checkbox"/> Conduct A Set Up Meeting With The VIC Group Supervisors</p>	<ul style="list-style-type: none"> • Discuss VIC set up protocols (customize dependent on VIC location). • Identify additional personnel needed for support of VIC set up • Define expectations. • Ensure VIC Group Supervisors directs staff to use their position checklists to complete their set up tasks. <p>Considerations</p> <ul style="list-style-type: none"> • The VIC Support Group Supervisor must coordinate with the Interview Group and the DVI Group to deploy and stage equipment in an appropriate location for a systematic set up by the station staff. • The Interview and DVI Groups will instruct their staff to identify gaps and/or specific needs for their area. Those requests will be reported to the Group Supervisor, and sent to the VIC support group supervisor. If the request can be fulfilled by the Supplies, Equipment and/or Facility unit then they do –if

Establishing (Setting Up) the VIC

The Deputy FM Branch Director – Antemortem arrives at the VIC site to initiate and direct VIC set up

NOTE: Many of these tasks are first operational period concurrent actions

CRITICAL TASKS	DESCRIPTION
	not, then it is sent to the Agency Operations Center for sourcing.
<p><input type="checkbox"/> Meet With The VIC Support Group Supervisor</p> <p><i>The setup of the VIC is the responsibility of the VIC Support Group</i></p>	<ul style="list-style-type: none"> • Review VIC logistics, infrastructure and resource requirements(See Section 15.1). • Review VIC equipment and supply requirements (See Section 15.2). • Determine the necessary equipment, the schedule of deployment and the stations that will require setting up. • Request that the Facilities Unit ensures the area is clean and clear and ready to receive equipment. • Determine resource request process.
<p><input type="checkbox"/> Conduct Initial Walk-Through With Key Staff To Determine Set Up Requirements, Space Requirements, Layout, Etc.</p>	<ul style="list-style-type: none"> • Determine set up requirements, space requirements, layout, etc. • Include: FAC Security Officer, the FAC Health and Safety Officer, VICGroup Supervisors. • During the walk-through: <ul style="list-style-type: none"> – Identify the flow of families from FAC registration, to the various services needed, and to the VIC based on the need for the family to participate in an Antemortem interview; – Identify rooms to be used for Antemortem interviews. Rooms should be private and comfortable with space for a work station and chairs for several family members; – Assess the current infrastructure and consider augmentations, if needed; – Identify security check-in and check-out points at the FAC/VIC; – Determine IT and communication needs; – Identify DVI operation location; – Identify space for VIC command center; – Identify signage needs; – Identify cleaning/clearing needs prior to set up; – Identify staff respite area.

Establishing (Setting Up) the VIC

The Deputy FM Branch Director – Antemortem arrives at the VIC site to initiate and direct VIC set up

NOTE: Many of these tasks are first operational period concurrent actions

CRITICAL TASKS	DESCRIPTION
	<ul style="list-style-type: none"> • Develop layout sketch and establish timeline for the deployment and set up of equipment. • Identify resource gaps.
<p><input type="checkbox"/> Ensure Set Up Of Case Management System</p>	<ul style="list-style-type: none"> • Ensure VIC Support establishes the C/ME's case management system to gather and manage all case-related information. • Ensure the IT Support Team sets up required numbers of data entry stations at interview stations and DVI work areas. • Ensure DVI Group oversees the system and coordinates with IT to ensure the system is working properly. • Ensure paper back system in place. <p>Consider:</p> <ul style="list-style-type: none"> • The VIC Support Unit Leader should be present for the decision to activate the VIC operation. The number of interview stations will be partly dependent on the IT infrastructure available to handle the interview needs. • If the infrastructure is not available to efficiently and effectively operate the data management system considers the use of paper AM interview forms. The data can carefully be entered into the data management system separately.
<p><input type="checkbox"/> Establish A Command Center From Which To Manage VIC Operations</p>	<ul style="list-style-type: none"> • Consider space needed for VIC leadership for planning, decision making, meetings, conference calls, etc. • The command center should have: <ul style="list-style-type: none"> – Computers, internet, and network access; – Sufficient telecommunications; – Desk space for VIC management staff to operate; – Office equipment (copiers/printer) and supplies. <p>When the VIC is collocated within a FAC:</p> <ul style="list-style-type: none"> • Co-locate in the Joint Family Support Operations Center (FSOC) (the FAC command center).

Establishing (Setting Up) the VIC

The Deputy FM Branch Director – Antemortem arrives at the VIC site to initiate and direct VIC set up

NOTE: Many of these tasks are first operational period concurrent actions

CRITICAL TASKS	DESCRIPTION
	<p>When the VIC is opened without a FAC activation:</p> <ul style="list-style-type: none"> • Co-locate in the VIC.
<input type="checkbox"/> Develop Layout Sketch And Timeline	<ul style="list-style-type: none"> • Include timeline for the deployment and set up of equipment.
<input type="checkbox"/> Monitor Establishment Of VIC Work Areas	<ul style="list-style-type: none"> • Use walk through layout sketch and set up timeline to supervise establishment of the work area set ups. • Coordinate with VIC Support Group Supervisor: <ul style="list-style-type: none"> – Ensure personnel begin and follow set up responsibilities; – Ensure Unit and team leaders are present and are using their position checklists to establish their station or work area. • Team leaders should identify additional staff necessary to set up their respective station. • The setup of work stations and other activation tasks are found in the VIC Position Checklists. (See Section 12) • Large equipment and site set up efforts should be confined to discrete areas so as to not disturb or disrespect the families. (Set up can still be taking place in closed rooms, but not in general areas that the families will see as they are coming in and being escorted around)
<input type="checkbox"/> Ensure Signage Placement	<p>If the VIC is collocated within a FAC:</p> <ul style="list-style-type: none"> • Signage for the FAC is the responsibility of the FAC Coordinating agency. <p>If the VIC is established as a standalone facility:</p> <ul style="list-style-type: none"> • Signage is the responsibility of the Deputy FM Branch Director –AM. (See Section 15.3 Signage)
<input type="checkbox"/> Determine Deployment Schedule For Additional Equipment / Supplies To The VIC	<ul style="list-style-type: none"> • Situation dependent. • Support Group responsibility: communicate with VIC personnel to understand the gaps and needs; Identify equipment/supplies that will fill those needs.

Establishing (Setting Up) the VIC

The Deputy FM Branch Director – Antemortem arrives at the VIC site to initiate and direct VIC set up

NOTE: Many of these tasks are first operational period concurrent actions

CRITICAL TASKS	DESCRIPTION
<input type="checkbox"/> Identify Staging Locations For Equipment And Supplies	<ul style="list-style-type: none"> • Situation dependent. If VIC operations have been expanded there may not be space to stockpile incoming equipment and supplies; Source/obtain the identified assets.
<input type="checkbox"/> Develop Staffing Schedule And Shifts	<ul style="list-style-type: none"> • See VIC Organization Chart (Section 8.1). • See VIC Key Personnel Contact List (Section 7.3.1). • Numbers of VIC personnel needed is based on the VIC space and workflow. • See VIC Interview Scaling Scenarios (Section 8.3).
<input type="checkbox"/> Ensure Communications Both Internal And External	<ul style="list-style-type: none"> • Use of ICS Form 205 • Determine and ensure interoperability with other agencies.
<input type="checkbox"/> Ensure Health And Safety Plan Prior To The Commencement Of Operations	<p>If the VIC is collocated within a FAC:</p> <ul style="list-style-type: none"> • The HASP is the responsibility of the FAC coordinating agency. If the VIC is established as a standalone facility: <ul style="list-style-type: none"> • Consider the need for a HASP to ensure the safety of the personnel supporting the VIC operations; • Ensure monitoring of VIC personnel and work-rest cycles.
<input type="checkbox"/> Identify Appropriate External Agencies That Need To Be Present To Ensure Proper Functioning Of The VIC Based On The Specific Incident	<p>For example:</p> <ul style="list-style-type: none"> • Law Enforcement and other investigative entities: <ul style="list-style-type: none"> • Mental health agencies (American Red Cross, Disaster Chaplaincy Services, etc.) for families and for staff.
<input type="checkbox"/> Establish Positive	<ul style="list-style-type: none"> • Identify the time for interagency staff to report to the VIC.

Establishing (Setting Up) the VIC

The Deputy FM Branch Director – Antemortem arrives at the VIC site to initiate and direct VIC set up

NOTE: Many of these tasks are first operational period concurrent actions

CRITICAL TASKS	DESCRIPTION
<p>Contact With Interagency Liaisons To Identify External Agency Role And Confirm Reporting Instructions</p>	<ul style="list-style-type: none"> • Identify operational periods for VIC operations. • Identify agency point-of-contact and their information (phone, email). • Identify the number of staff that will be reporting to the VIC from the agency. • Specify any security measures they need to be aware of (parking limitations, access issues, credentialing, check in station) • Identify time of initial walk-through for the setup of the VIC operation
<p><input type="checkbox"/> Conduct VIC Operations</p>	<ul style="list-style-type: none"> • See Section 10.
<p><input type="checkbox"/> Establish Briefing Schedule</p>	<p>Information includes:</p> <ul style="list-style-type: none"> • Situation updates; • Safety; • Security; • Staffing, schedules.
<p><input type="checkbox"/> Establish Communications With EOC</p>	<ul style="list-style-type: none"> • Provide set up situation updates. • Communicate any issues, delays, blockages. • Set up resource requesting (by VIC Support Group). • Identify resource gaps (if known).
<p><input type="checkbox"/> Develop Demobilization Criteria</p>	<ul style="list-style-type: none"> • Criteria should be developed at the beginning of VIC operations and discussed with VIC leadership.
<p><input type="checkbox"/> Conduct Final Set Up Walk Through</p>	<ul style="list-style-type: none"> • Final set up walkthrough should be conducted to determine that each VIC work area has sufficient staff, resources and equipment to conduct operations. • Confirm the Data Management System is accessible and operational. • Walkthroughs may also be conducted at the start of each operational period to determine continued readiness, and to familiarize incoming staff with the flow of operations.

10. Conduct VIC Operations - Overview

10.1 Operational Period Tasks

FM Branch Director – AM VIC Operational Period Tasks	
<i>NOTE: Many of these tasks are operational period concurrent actions</i>	
CRITICAL TASKS	DESCRIPTION
<input type="checkbox"/> Oversee VIC Operations	<ul style="list-style-type: none"> • Establish operational period(s), maintain schedule and staffing patterns. • Collect agency and personnel input, identify planning concerns, monitor work flow and staffing, define resource requirements. • Continually monitor incident needs and the activities of the VIC to determine whether staffing levels and workspace are sufficient.
<input type="checkbox"/> Ensure Constant VIC Representation In The Joint Family Support Operations Center (JFSOC)	<ul style="list-style-type: none"> • When the VIC is collocated within a FAC: <ul style="list-style-type: none"> • Co-locate in the Joint Family Support Operations Center (JFSOC) (the FAC command center); • Provide a JFSOC liaison to represent the C/ME for the duration of the activation. The VIC JFSOC representative should serve to relay information to the FAC command personnel regarding the VIC operation.
<input type="checkbox"/> Coordinate With Agency Providing Family Representatives	<ul style="list-style-type: none"> • Ensure family/friends are being attended to by Family Representatives as needed and any issues identified are addressed.
<input type="checkbox"/> Liaise With Law Enforcement Personnel To Conduct Antemortem Interviews	<ul style="list-style-type: none"> • Consider having the Missing Persons Department of the Law Enforcement Agency present for the antemortem interviews in order to gather investigative information (recommendation). • Consider conducting dual-agency interviews with the families in order to prevent the need to repeat questions and/or to require families to

FM Branch Director – AM VIC Operational Period Tasks

NOTE: Many of these tasks are operational period concurrent actions

CRITICAL TASKS	DESCRIPTION
	endure a second interview process (recommendation).
<input type="checkbox"/> Liaise With Mental Health Or Chaplaincy Agencies/Organizations	<ul style="list-style-type: none"> • Ensure that families receive appropriate and adequate grief care based on identified needs. • Mental Health and/or chaplaincy personnel may be present during the interview if requested by the family (should be coordinated by the family representative).
<input type="checkbox"/> Liaise with human services agencies/organizations	<ul style="list-style-type: none"> • Ensure that families receive the appropriate and adequate services they may need as a result of the incident and/or their potential loss. (For some families this may be financial, others may require housing, clothing, food assistance, etc.)
<input type="checkbox"/> Conduct beginning of shift briefing (all staff) <i>Consider a facility walkthrough with incoming staff at the start of each operational period to determine continued readiness, and to familiarize incoming staff with the flow of operations.</i>	<p>Topics may include:</p> <ul style="list-style-type: none"> • Update of Characterization of the incident; • Overall VIC objectives; • Chain of command and staff scheduling; • Status and/or progress on processing disaster-related cases; • Work flow changes, if any; • Physical layout changes, if any; • Staff etiquette and dress code; • Emphasize physical readiness through proper nutrition, water intake, rest, and stress management techniques; • Discuss shift change. Stress that staff should be prepared to brief their replacement(s) on the status of all ongoing operations, issues, and other relevant incident information; • Time of next briefing (end of shift);
<input type="checkbox"/> Just-in-time training	<p>As needed:</p> <ul style="list-style-type: none"> • At the beginning of each operational period, ensure that all incoming VIC staff have been given just-in-time training for their respective roles.
<input type="checkbox"/> Conduct Operational Briefings with Leadership	<p>Discuss:</p> <ul style="list-style-type: none"> • Incident Characterization updates or changes;

FM Branch Director – AM VIC Operational Period Tasks

NOTE: Many of these tasks are operational period concurrent actions

CRITICAL TASKS	DESCRIPTION
<p>personnel (Group Supervisors, Team Leaders</p> <p><i>Regular briefings are important to set forth situation and progress reports, define specific tasks, establish reporting relationships and expectations, and build team spirit.</i></p>	<ul style="list-style-type: none"> • VIC workflow and sustainment considerations.
<p><input type="checkbox"/> Participate In FAC Family Briefings</p>	<ul style="list-style-type: none"> • Ensure a C/ME Liaison to participate in the FAC family briefings. • See Family Briefing / Information Distribution Protocol (Section 13.3).
<p><input type="checkbox"/> Provide Family Notifications</p>	<ul style="list-style-type: none"> • Depending on the scope of the event and the condition of the remains, notification of identifications may be done at the VIC. • In most jurisdictions it is the law enforcement that makes death notifications – it should be indicated that this is the appropriate agency with jurisdiction to make notifications. • See Family Notification Policies (Section 13.5).
<p><input type="checkbox"/> Maintain The Status Of All Assigned Resources (Primary And Support)</p>	<ul style="list-style-type: none"> • Oversee the check-in/ check-out of all resources, • Maintain a status-keeping system indicating current location and status of all resources. • Maintain a master list of all resources (e.g., key supervisory personnel, primary and support resources, etc.).
<p><input type="checkbox"/> Conduct End Of Shift Briefing (All Staff)</p>	<p>Topics may include:</p> <ul style="list-style-type: none"> • Document any issues related to operations with direct supervisor; • Note deficiencies in facility / equipment immediately;

FM Branch Director – AM VIC Operational Period Tasks

NOTE: Many of these tasks are operational period concurrent actions

CRITICAL TASKS	DESCRIPTION
	<ul style="list-style-type: none"> • Note deficiencies in supply at end of shift; • Ensure station is prepped and ready for next operational period; • Time to report in for next shift.
<input type="checkbox"/> Health And Safety Monitoring	<ul style="list-style-type: none"> • Monitor for facility and personnel health, stress and safety issues. • Ensure that all PPE and other supplies necessary to promote personnel health and safety are available at all times to all staff.
<input type="checkbox"/> Maintain Communications With AOC	<ul style="list-style-type: none"> • Provide situation updates. • Communicate any operational issues, delays, blockages. • Resource requesting (by VIC Support Group). • Personnel scheduling. • Summit daily timesheets and procurement records.

10.1.1 Briefings

Regular briefings are important to set forth situation and progress reports, define specific tasks, establish reporting relationships and expectations, and maintain staff morale. A briefing schedule should be developed for each operational period and distributed/displayed to staff.

Start of Shift Operational Briefing		
<input checked="" type="checkbox"/>	Briefing Item	Considerations
<input type="checkbox"/>	Updates/Changes To Incident Characterization	<ul style="list-style-type: none"> Emphasize information that is critical to the VIC operation (i.e. identification modalities being utilized in the morgue operations which will determine the depth of questions during the interviews).
<input type="checkbox"/>	Overview Of VIC Objectives	<ul style="list-style-type: none"> Identify any changes from previous objectives
<input type="checkbox"/>	Overview Of VIC Workflow	<ul style="list-style-type: none"> Provide an overview of the flow of families from registration to the interviews. Provide an overview of the scheduling process if needed. Identify any changes from previous workflow.
<input type="checkbox"/>	Overview Of Communications Plan	<ul style="list-style-type: none"> Distribute radios and/or other communication tools as needed. Emphasize the sensitivity of the VIC and proper communications protocols around family members.
<input type="checkbox"/>	Overview Of Briefing Schedule	<ul style="list-style-type: none"> Emphasize the time and location of the next operational briefing for VIC staff.
<input type="checkbox"/>	Overview Of Staff Etiquette	<ul style="list-style-type: none"> Provide an overview of the expected behavior of VIC staff. Do not talk about confidential information in the public areas of the VIC. Keep all conversations to a low volume. Maintain appropriate behavior (no laughing, joking around, etc.). Do not discuss details of the incident that have not been released to families yet.
<input type="checkbox"/>	Staff Self-Care	<ul style="list-style-type: none"> Emphasize physical readiness through proper nutrition, water intake, rest, and stress management techniques.

End of Shift Operational Briefing		
<input checked="" type="checkbox"/>	Briefing Item	Considerations
<input type="checkbox"/>	Document Any Issues Related To Operations With Direct Supervisor	
<input type="checkbox"/>	Note Deficiencies In Facility / Equipment Immediately	
<input type="checkbox"/>	Note Deficiencies In Supply At End Of Shift	
<input type="checkbox"/>	Ensure Station Is Prepped And Ready For Next Operational Period	
<input type="checkbox"/>	Time To Report In For Next Shift	
<input type="checkbox"/>	Continue Staff Self-Care	<ul style="list-style-type: none"> Emphasize physical readiness through proper nutrition, water intake, rest, and stress management techniques.

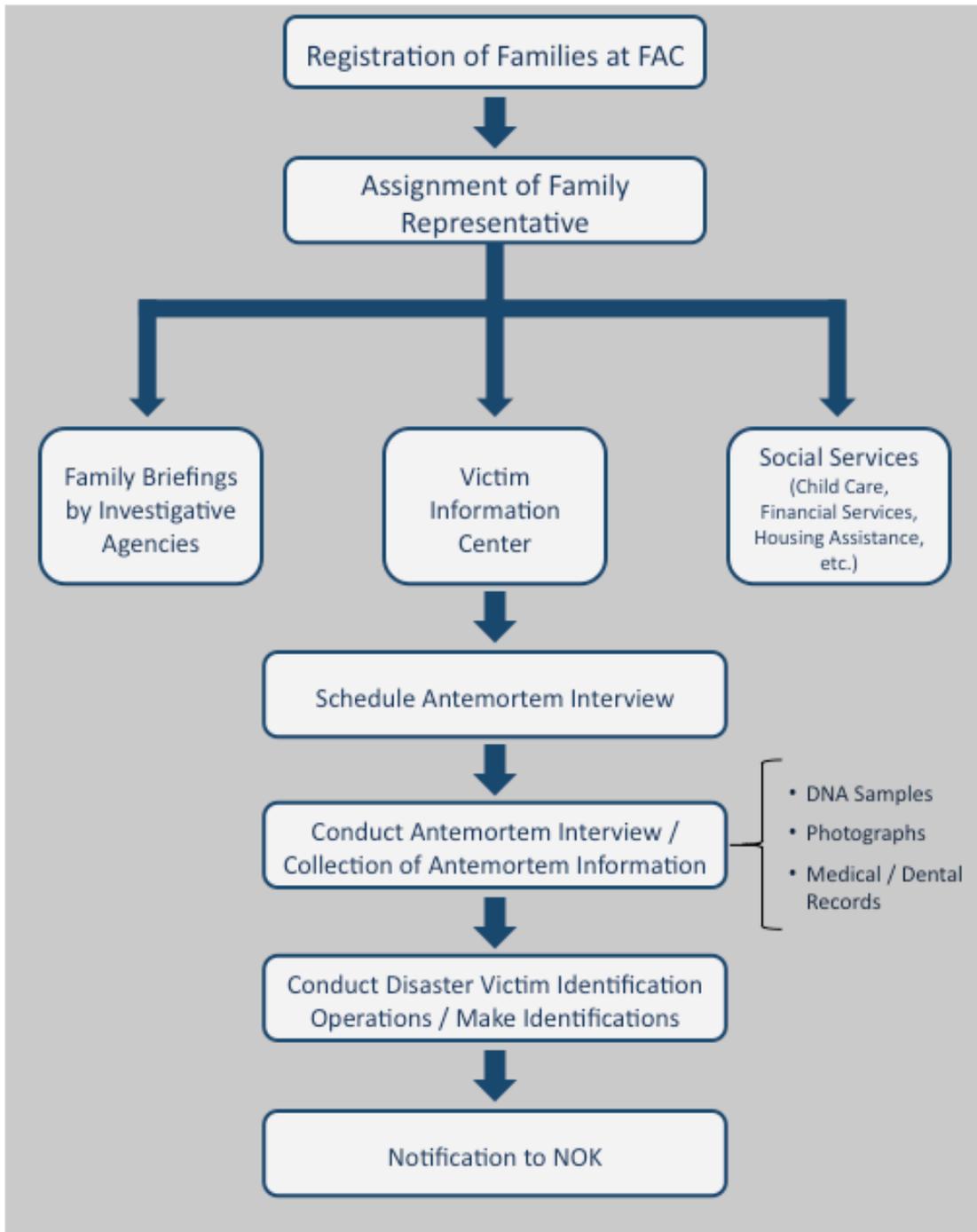
10.2 VIC Workflow

The following diagram depicts how clients flow through the Victim Identification Center within the FAC

- Families will be registered upon entering the FAC (or VIC).
- Registration is typically the responsibility of the FAC coordinating agency; however, in the case of a standalone VIC facility, the C/ME should consider providing staff to register families.
- Depending on the local policy, the families will receive IDs and/or credentials identifying them as families present in the FAC.
- Families are escorted through the FAC and/or VIC by a Family Representative. These Family Representatives are trained mental health personnel who will be assigned to the family to assist with any needs the family may have and to ensure they receive the information and services required at the FAC. The Family Representative may assist with the relay of information, the scheduling of Antemortem interviews, and ensuring the family participates in the family briefings. The Family Representative is also responsible for recognizing cues from the family and coordinating with / reporting to the appropriate agencies to ensure they receive the necessary services. The family representative serves as a liaison with the investigative agency – if the law enforcement/missing persons identifies the need to interview the family based on their missing person’s investigative work they will assist with the scheduling of that interview. The Family Representative does not participate in the Antemortem interview unless requested

by the family. The Family Representatives are usually provided by volunteer agencies (State and Local Behavioral Health agencies, Red Cross, Southern Baptist, OMORT, etc.) specifically trained in mental health/behavioral health, and are matched with a family at the registration area of the FAC.

FAC Workflow / Progression



The following provides a high level overview of the key VIC functions and operations. Further details are found in the Job Action Sheets, See Section 12.

10.2.1 VIC Reception Area
Purpose
<p>The interview coordinator works with the registration function and the law enforcement (missing persons) agency to identify the families/groups/individuals that must be scheduled to participate in an antemortem interview.</p>
Staffing
<ul style="list-style-type: none"> • Interview Group Supervisor • Reception Team Leader • Reception Specialists
Operations Overview
<ul style="list-style-type: none"> • The Reception Station of the VIC is dependent on the status of the VIC as a part of the FAC or if it is a standalone operation. • If the VIC is in the FAC then the agency responsible for initial registration of the families upon entrance into the FAC will gather the following information: <ul style="list-style-type: none"> – Personal Information (name, address, contact info, etc.); – Missing Person / Family Member potentially involved in the MFI. • At FAC entry, families should: <ul style="list-style-type: none"> – Receive a credential or ID; – Be matched with a Family Representative; – Be briefed on the purpose and flow of the FAC. <p>Note: The above function/tasks may be the responsibility of the VIC reception team should the VIC be a standalone facility.</p> <ul style="list-style-type: none"> • At the VIC Reception (if it is a part of the FAC) the reception team is responsible for the confirmation that the family should participate in an antemortem interview at the request of the Manifest Development Team (law enforcement/investigation/missing persons). • Staff at the VIC Reception will: <ul style="list-style-type: none"> – Schedule an interview; - Provide any information/answer questions that the family may have regarding the interview process

<ul style="list-style-type: none"> - Direct the family to a waiting room where they will be provided with comfort and support by the American Red Cross and/or any other mental health support services.
Considerations
<ul style="list-style-type: none"> • Considerations for scheduling: <ul style="list-style-type: none"> - Consider the capacity of the facility and the number of staff present to conduct the interviews; - Interviews should be allotted at least 2 hours with an additional 30 minutes between interviews for interview specialist breaks; - Consider the needs of investigative agencies when scheduling the interviews; - Consider additional needs that may need to be requested in order to conduct the interview (i.e. translators); - Consider the wait time for each family.

10.2.2 VIC Waiting Area
Purpose
Provide comfort and wellbeing for family/friends while they wait for interview.
Staffing
<ul style="list-style-type: none"> • Family Representatives assigned to waiting families. • Chaplaincy agency representatives. • Mental Health personnel.
Operations Overview
<ul style="list-style-type: none"> • Ensure private area where families wait to meet with interviewers. • Coordinate with Family Representatives to monitor and ensure family comfort and well-being.
Considerations
<p>Family Representatives provide family support as it relates to ante-mortem data collection and decedent identification. The family representative (with mental health and sensitivity training) ensures the families receive the services they need and attend the family briefings and attend their scheduled antemortem interview. Duties include:</p> <ul style="list-style-type: none"> • Provide friends and family members timely information regarding those who may have perished; • Obtain decedent Antemortem data to assist with decedent identification; • Provide a caring environment to support friends and family members of decedents; <p>Note: The C/ME is not responsible for providing the family representatives but VIC staff they are likely to</p>

interact with the family representatives in some form – whether through the registration/scheduling of a family interview, answering any questions, relaying information, and the family may request that the family representative is present for the interview (though it is not standard practice).

10.2.3 Conduct Antemortem Interviews / Data Collection / DNA Samples
Purpose
Gather information to be used in the identification of victims. The information being collected should be done at the FAC/VIC whenever possible.
Staffing
<ul style="list-style-type: none"> • Interview Team Leader • Interview Specialists • Law Enforcement Missing Persons Detectives • Other Investigative Agency representatives (As needed) • Mental Health Support (As needed) • Translators (As needed)
Operations Overview
<p>Interviews</p> <ul style="list-style-type: none"> • Antemortem Interviews should be conducted in a manner that the information is directly entered into the local data management system. • Ensure this area has private spaces in which families will meet with interviewers and collection specialists to give information that may be useful in identifying victims. • Maintain the highest degree of confidentiality at all times. • Collect antemortem data from decedent family and friends. <ul style="list-style-type: none"> – Based on the Antemortem interview form (reference form), Gather information that will be used to identify decedents. Such information includes but is not limited to physical description, clothing description, personal information such as family members and friends, and medical history. <p>Collect DNA samples</p> <ul style="list-style-type: none"> • Depending on the identification policy determined by the C/ME and FM Branch Director, obtain and manage DNA samples gathered for decedent identification purposes. • The Interview Specialist will receive/obtain and inventory DNA exemplars (e.g., toothbrushes, razors) brought in by families as well as determine the need to obtain family member DNA samples, which can be

accomplished via obtaining a buccal (cheek) swab at the time of the interview.

Collect medical records

- Obtain and manage decedent medical records such as dental records, x-rays, fingerprints, blood reports, which can be used to support decedent identification.

Considerations

Infrastructure

- The VIC Support Unit Leader should be present for the decision to activate the VIC operation. The number of interview stations will be partly dependent on the IT infrastructure available to handle the interview needs.
- If the infrastructure is not available to efficiently and effectively operate the data management system consider the use of paper AM interview forms. The data can carefully be entered into the data management system separately.

Interviews

- There must be a discussion regarding the coordination of identifying families that actually need to participate in the antemortem interviews. This is a function of law enforcement, likely the missing persons division of the local/state/federal agency in charge of the investigation. They must utilize the information from missing persons reports, any available manifest, etc. which families must participate in the AM interviews because it is likely that their loved one was involved, and potentially killed in the incident. This process includes: receiving missing persons reports, verifying the information provided with the caller(s), identifying persons that have been transported to hospitals (and connecting them with loved ones that reported them missing) and developing the potential decedent manifest. Based on that manifest, the law enforcement agency will coordinate with the C/ME to schedule interviews with the appropriate families. This process is important because the interviews are long (potentially 2.5 hours) and stressful – It is important to not put a family through the undue stress of this process if their loved one is not likely involved in the incident.
- Operations will anticipate interviews lasting 2.5 hours. Standard practice should be to allow interviewers a 30 minute mental health break between every interview. Interview time includes post-interview wrap-up for the interview specialist. This is time to finish entering any information (data management system or paper), possibly go over notes with MP detective, and labeling and securing of any samples/records/effects collected. The space should also be cleared and reset for the next interview.
- Interview Group Supervisor: Monitor to ensure that the interviews run smoothly, that the interviewers are healthy and ensuring a good pace for the interviews.

- It is best to schedule all the family and friends to be at the same interview where appropriate. There may be scenarios where certain individuals should be interviewed separately. Reception and/or Interview Team Leader may be used to identify situations where separate interviews should occur.
- It will take significant personnel resources to support the interviewer specialists, entering all data, coordinating family interviews, and moving people to appropriate rooms. In some instances, it may be necessary to schedule follow up interviews to complete the interview and/or for the family to bring in the necessary items for DNA samples or medical records.

Collecting DNA Samples

- Stress importance of proper sterile technique when collecting DNA samples. Individuals should be trained in the collection of DNA samples, **including personal effects.**
 - Use gloves and change them between samples and effects;
 - Package all samples and effects separately (no comingling);
 - Maintain chain of custody starting at time of collection.

10.2.4 Disaster Victim Identification (DVI) Operations

Purpose

Forensic specialists document and perform kinship analysis, process DNA, dental and evidentiary items provided by families to assist in victim identification. Separate stations will be required for these forensic disciplines.

Staffing

- Disaster Victim Identification Group Supervisor
- DNA Sampling Team
- Dental Records Team
- Medical Records Team
- Records Management Team
- Evidence Team
- QA/QC Team

Operations Overview

- Manage the collection and processing of antemortem samples (DNA, Dental Records, Medical Records, etc.) and evidence.
- Evaluate antemortem and postmortem data specimens in the Data Management System to determine victim identifications.

- Directs, evaluates, and determines the use of antemortem DNA Specimens (DNA Sampling Team Leader)
 - Liaise/coordinate with the lab to ensure resources/personnel are available for testing of samples and to prepare them for the number and type (buccal vs. other) which will need testing.
 - Ensure, along with evidence team, that appropriate samples are delivered to the lab.
 - Coordinate the return of completed reports of analysts to the DVI (or other appropriate location) where results will be married with other ante/postmortem data and used in identifications.
 - Serve as DNA subject matter expert for the DVI at large, including family briefings.
- Acquire and analyze dental records.
- Storage of antemortem files.
- Manage antemortem data provided by families and friends of victims.
- Collect and track antemortem reference samples provided by families and friends of victims.
- Ensure a Quality Assurance and Quality Control process is in place.
- Coordinate with the lab including assessing what lab testing/resources will be necessary based on the number and type of samples (buccal vs. personal effects) that are coming in and will be tested.

Considerations

11. VIC Demobilization

Demobilization of the VIC is at the discretion of the Deputy FM Director - AM and is based on the deactivation criteria below.

11.1 Demobilization Criteria

Demobilization criteria should be developed at the beginning of VIC activation.

Demobilization criteria includes:

- FAC operations have ceased.
- Antemortem interviews are completed.
- Record filing is organized and completed.
- Medical/dental records have been accounted for and forwarded to forensic specialists.

11.2 Demobilization Operations / Actions

VIC Demobilization Checklist		
Task	Qualification	Completed
Breakdown of stations and facility put back to original condition and thoroughly cleaned.	All areas must be cleaned and janitorial services completed. Furnishings returned to original location(s).	<input type="checkbox"/>
Inventory all equipment and supplies, and documentation of damaged equipment.	Each component of the VIC facility should compile an inventory to be reported to Logistics. This inventory should also include recommendations for equipment/supplies needed in the future, items that need to be restocked (and in what numbers or amounts), and any damaged items.	<input type="checkbox"/>
Return supplies and equipment.	Supplies should be returned to inventory. Equipment should be returned to its home location and accounted for. Service and maintain equipment to prepare for next deployment.	<input type="checkbox"/>
Final facility walk-through.	If the VIC was a non C/ME facility, as a final step, once all cleaning is complete, a walk-through should be conducted with the facility owner/manager of the facility to confirm that the facility has been returned to its normal, pre-MFI condition.	<input type="checkbox"/>
Any personnel paperwork must be completed.	All agencies and contractors must ensure that all required paperwork has been completed and properly submitted.	<input type="checkbox"/>
All case management system data and VIC reporting should be backed up and given to the C/ME and to any other agencies requiring this information.	Data should exist in several regulated locations to prevent data loss. A copy of all data should be given to the C/ME for future reference and archival. Other agencies (e.g., HHS, NTSB, and FBI) may need copies of this data, as well. All documentation (both of analyses performed and of all actions taken by each VIV component) must be properly submitted to the C/ME's office.	<input type="checkbox"/>

<p>Original records should be provided to the C/ME.</p>	<p>All original documentation and records must be rendered to the C/ME for future reference and archival. These include all antemortem records and any postmortem and DVI documentation not included in the record.</p>	<p><input type="checkbox"/></p>
<p>An after-action report will be prepared.</p>	<p>An after-action report, detailing accomplishments, issues, and future recommendations, will be prepared by the FM Branch Director in consultation with VIC management and personnel.</p>	<p><input type="checkbox"/></p>

11.3 Post Incident Staff Debriefing

As personnel near the end of their deployment, it is important that a post-activation briefing be conducted at the VIC. Many times, incident response efforts go unnoticed and unappreciated. This lack of appreciation or fulfillment will often trigger or heighten post-incident stress syndromes. To prevent such effects, all members of each team within the VIC should meet as soon as possible after most tasks are completed to discuss the successes and difficulties of the incident. Similarly, emotional reactions to the incident should be considered in stress briefings designed to aid incident responders who may experience emotional disturbance in the aftermath of the event.

Post incident briefing topics can include:

- Gratitude for a job well done.
- Remind about confidentiality agreement –re-sign.
- Schedule an exit interview for every staff member w/ mental health professional (immediate) upon last shift.
- Provide contact information/ resources for support.
- Psychological first aid (see Section 13.12).
- Check in with staff at scheduled times (one, three and six months post departure from operations).
- One year anniversary mental health questionnaire.

Staff Debrief Considerations

- VIC personnel are encouraged to talk about their incident experiences with other VIC personnel, their supervisors, and their families when they return home. All personnel should be cautioned, however, to be aware of their surroundings when talking about the incident; not all venues are appropriate for such discussion, and not all information is appropriate to share. It is not appropriate, for example, to share

Mass Fatality Incident Criteria

- Any incident having the potential to yield 10 or more fatalities. details of VIC operations with family and other non-personnel.
- Any incident involving a protracted or complex decedent recovery operation.
- Any situation in which there are more decedents than can be recovered and examined by the local

12. JOB ACTION SHEETS

C/ME or the C/ME's associated resources.

See Job Action Sheet for when there are decedents who are contaminated by Chemical, Biological, Radiological, Nuclear or high-yield Explosive (CBRNE) agents or materials.

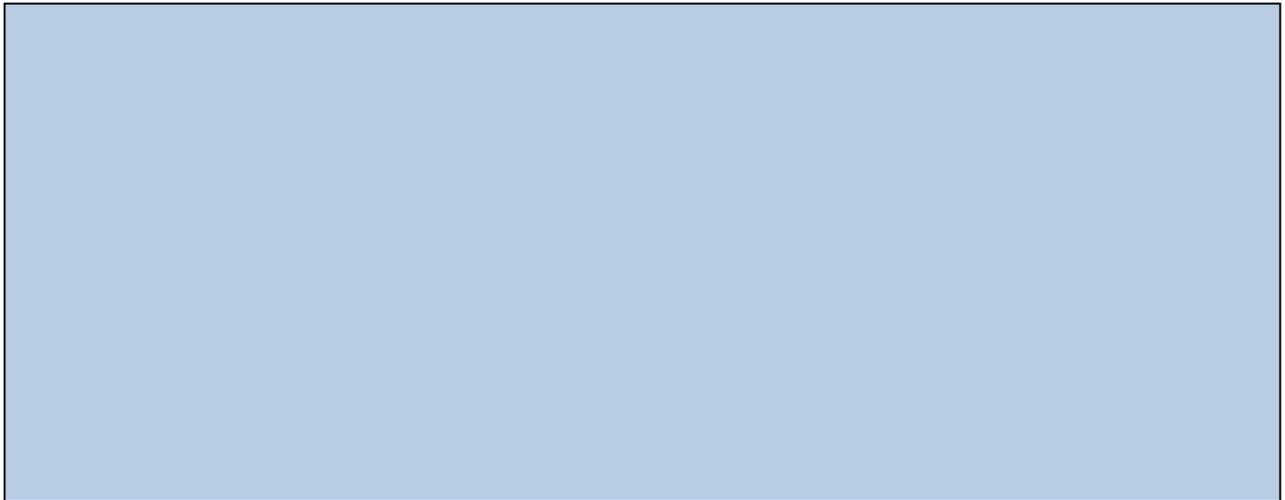
- Any incident or other special circumstance that require a multiagency or regional response to

13. Policies / Considerations

Support Mass Fatality Management (MFM) Operations.

13.1 Mass Fatality Incident Criteria

Prior to activating local plans and dedicating resources the C/ME should confirm that the incident at hand meets the criteria for a Mass Fatality Incident.



Some incidents may be confirmed as mass fatality incidents upon notification (i.e. all fatal plane crash); however, some incidents may not obviously meet the criteria and require further information gathering before a decision can be made.

13.2 Overview of Agency FAC Involvement Based on incident Type

Agencies staffing the FAC function as a collective body but will be responsible for managing, resourcing and providing administrative, operational, and other support for its own personnel.

All FACs will contain similar VIC operations, regardless of FAC type. Ultimately, responsibility for Disaster Victim Identification remains with the local medicolegal authority (C/ME).

Agency involvement in the FAC varies depending on the type of disaster event. In particular case legislation specifies the lead agency or the required involvement of specific agencies. For example:

INCIDENT TYPE	AGENCY INVOLVEMENT
Legislative aviation and transportation incidents	The NTSB will activate its FAC operation and notify the local Emergency Operations Center (EOC) of the FAC location as determined by the air carrier. Taking the lead role, the NTSB will establish a JFSOC, which will include the FLT organized by the local government
Maritime incidents	The NTSB, FBI, Department of Homeland Security (DHS), and/or the United States Coast Guard (USCG) may be involved
Criminal incidents	The FBI will take the lead role and establish a JFSOC, which will include the FMT organized by the local government. In some instances, DHS may be involved

13.3 Family Briefing / Information Distribution Protocol

FAC Family Briefing

Purpose/Goal: Family Briefings are a core component of FAC operations; they offer a structured and routine mechanism for providing informational updates to families and addressing their questions. All agencies/parties active in the investigation of the incident will provide updates during the family briefings.

The family briefings will likely be scheduled at regular intervals throughout the day – and when significant new information is available.

Who Should Give the C/ME Briefing: Briefings should be conducted by individuals in charge of key areas of

Example Script: *"I am the [position] for the [Jurisdiction] Office of Chief Medical Examiner / Coroner.*

On behalf of all of us with the Coroner/Medical Examiner, I want to tell you how truly sorry we are for your tragic loss. It is the job of the Coroner/Medical Examiner to identify your loved one and return them to your family as quickly as possible. We will work non-stop and use every means necessary. It is also our job to answer all of your questions.

The individual providing the C/ME portion of the Family Briefing should be knowledgeable about the disaster response, such as the FAC director or incident commander, Chief Coroner/Medical Examiner, Chief of Police, etc. or the individual is well versed/trained in public speaking in stressful situations. This individual must be a high-level C/ME representative with the ability to provide family and friends with information regarding the victim identification process and answer any general questions.

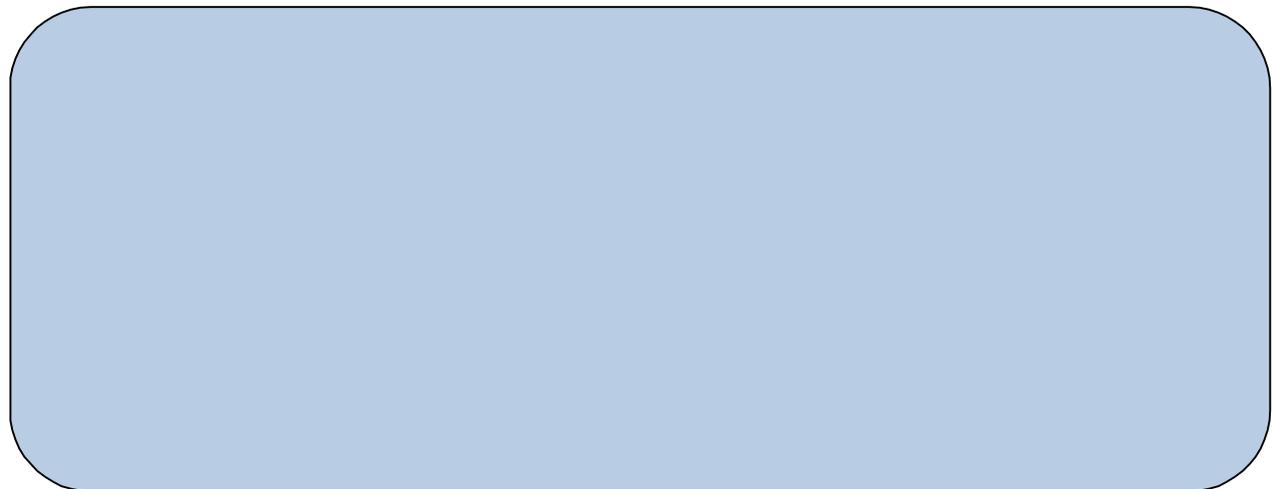
Ladies and gentlemen, I realize we have covered a lot of information during this briefing, we are grateful for your patience. If you have any need please let us know."

Consistency among the individuals conducting briefings should be maintained when possible

Identify Medical Examiner / Representative to provide the Family Briefings.

What should be included? The briefings will include information on the progress of recovery efforts (human remains recovery), the identification of victims, the investigation, and other areas of concern.

Emphasize that the FAC is the best source of current information for the families.



Considerations

- A regular schedule should be established for briefings and the schedule should be communicated to families – generally, briefings should occur at least twice daily, but can be held as frequently as needed.
- It may be preferred to maintain consistency regarding the individual providing information to the families regarding the process of identifying their loved ones. Consider limiting the number of individuals to a small number to rotate.
- Briefings should be provided to families present at the FAC as well as those away from the FAC (perhaps via a conference call).
- All information must be communicated to families before any statements are made to the press.

- Briefing messages should be coordinated with other investigative agencies and the Public Information Officer to ensure consistency of information.
- Present information in terms family members can understand.
- Include a questions and answer period after each briefing.
- Provide copies of transcripts and any related information sheets/handouts for families.
- A physical study of the briefing room should be performed prior to the family's presence in the room. This includes: testing of acoustics, equipment and layout of seating.
- The briefing should be designed, practiced and memorized. Try not to read this briefing from a script, this may create difficulties with eye contact, voice and sincerity.
- All information must be general – no information specific to individual cases will be released during the family briefings.
 - If questions are asked by family members during the briefing regarding a specific case, the question should be noted and handed to the C/ME Liaison– who can intelligently answer the question in a private area.
- Briefings should address how family members will be notified if a positive identification is made and the general progress made regarding all decedent identification efforts.

13.4 Call Center / Missing Persons Reporting Overview

Purpose: Following an MFI with an open manifest, it is critical that the jurisdiction establish a central mechanism for gathering missing person's reports. The call center reports will be utilized by the law enforcement agency to develop a manifest and assist in the identification of victims.

Staff: The call center will be staffed by call takers trained to complete missing persons reports from concerned public who think their loved one(s) may have been involved in the incident.

Operations:

- The Call Center will be activated by the designated individual (dependent on the jurisdiction's plan).
- The Call Center will gather missing persons reports related to the incident.
- Missing Persons reports are provided to the Law Enforcement Missing Persons Unit for investigation and development of the manifest.

Considerations:

- The jurisdiction's call center should be identified prior to an incident.
- Call Center staff should be specially trained to handle missing person's report calls.
- The jurisdiction should clearly define the activation mechanism for the Call Center.
- Public Messaging is critical to ensuring that families and friends of potential victims are aware of the Call Center activation and have the appropriate contact numbers.
- The C/ME will coordinate with the Missing Persons Unit

13.5 Manifest Development Overview**Developing the Decedent Manifest**

Establishing an accurate decedent manifest is critical for the C/ME to positively identify decedents during a mass fatality incident. A mass fatality incident is likely to result in one of two situations with regard to the decedent manifest- either the population of those who perished is known (closed manifest), as is the case in most airliner jet crashes or the population is unknown (open manifest) because of the location where the incident occurred and/or the type of disaster.

- Unknown population/open manifest—When a mass fatality incident involves an open manifest, the C/ME in association with local law enforcement, must coordinate their activities to assemble a manifest of potentially deceased persons. This system establishes a central repository for the collection of missing person reports, and the ante and post mortem data necessary to affect the identification of these missing persons. Day-to-day missing person reports are not managed in this manner. Activation of missing persons protocols allows law enforcement officials the ability to more quickly define the population of individuals actually involved in the incident; thereby setting the stage for C/ME to create a decedent manifest and begin the work of making identifications. Once activated, 911 or other call takers will gather missing person's information in a database, which will prioritize reports and identify those cases having the greatest potential of being involved in the mass fatality incident. C/ME uses this working manifest as a basis for compiling a decedent manifest and identifying NOK with whom to coordinate gathering antemortem data.
- Known population/ closed manifest-- When a mass fatality incident involves a closed manifest, such as airliner jet or sea vessel crash, the C/ME working in association with law enforcement and specific transportation agencies will obtain the manifest and work with family members to collect antemortem data from which postmortem data can be compared. The manifest will be used by the C/ME to authenticate decedents' identifications. Since closed populations are usually smaller than open manifest populations,

gathering antemortem data and processing it is usually not prolonged.

13.6 Family Notification Policies

There will be incidents where the antemortem interviews will be completed and the identification of remains will be a protracted operation.

In addition, there will be incidents when the remains are highly fragmented. Following such incidents – families should be given the choice of how to receive notifications subsequent to the initial notification of identification.

NOK may be given the following options depending on the incident specifics:

- After the initial notification, the NOK may choose to receive notification of each subsequent identification of remains.
- After initial notification, the NOK may choose to receive notification only when all remains have been identified and the incident is finalized.
- After initial notification, the NOK may choose to forego further notifications upon identification of additional remains.

13.7 VIC DNA Family Reference Collection Policies / Protocols

Coroner/Medical Examiner specific.

13.8 Records Management Policy

Coroner/Medical Examiner specific.

13.9 Self-Care / Psychological First Aid

Interaction with family members and loved ones of potential decedents is extremely stressful, and care should be taken to ensure the wellbeing of VIC staff. The antemortem data collection process can be extremely protracted, and it is critical that VIC staff take steps to maintain their own physical and mental health over the course of extended operations. They should be made aware of the availability of mental health and chaplaincy services, and should be allowed to access such services whenever they are required. Management should monitor their staff for evidence of distress, and should allow for extra breaks or staff replacement as needed.

13.10 Confidentiality Standards

- All staff shall respect the rights of survivors, family members, and staff to privacy.
- Confidentiality of medical information is covered under HIPAA and should be adhered to.
- Private, confidential information shall not be solicited from survivors, family members, or staff unless it is essential for the provision of services.
- Confidentiality will be strictly maintained except for compelling professional reasons. This exception allows the disclosure of information to prevent serious, foreseeable and imminent harm to an identifiable person, or when laws require disclosure of confidential information without an individual's consent.
- When feasible, individuals will be informed of the disclosure of their confidential information and of the consequences of the disclosure.
- Confidential information shall be discussed only in private settings, not in hallways, waiting rooms, elevators, restaurants, or other public/semi-public areas.
- Staff shall ensure that all confidential and electronic information is stored in a secure manner and is not available to unauthorized individuals.
- Staff will continue to protect confidential information following the close of the mass fatalities operation, restraining from the disclosure of any identifying information when sharing their experiences with family, friends, and/or co-workers.
- Identifying information about anyone involved in the mass fatalities incident or response operation will be deleted from all public or educational presentations.
- Licensed, professional staff will comply with professional standards of conduct and ethics, following accepted operating principles for licensed professionals.
- Staff will not speak to representatives of the media without prior approval from the Public Information Officer or designee.
- Photography and recording of any kind is prohibited unless written approval has been obtained from the Director of Operations.
- Staff in possession of unauthorized photographic or recording equipment or film will be removed from the operation by Security.
- Unauthorized photographic equipment, recordings or film will be seized by Security and will remain the property of the Medical Examiner.
- The use of cell phones for photographic means is prohibited unless written approval has been obtained from the Director of Operations.

13.11 Self-Care / Psychological First Aid Considerations

The antemortem data collection process can be extremely protracted, and it is critical that VIC staff take steps to maintain their own physical and mental health over the course of extended operations. VIC staff should be made aware of the availability of mental health and chaplaincy services, and should be allowed to access such services whenever they are required. Management should monitor their staff for evidence of distress, and should allow for extra breaks or staff replacement as needed.

Incident Characterization Form (ICF)

Purpose: To understand the breadth and scope of a disaster from the standpoint of a MFM

14. Form: In response, the C/ME must initially assess the incident based on the incident quantitative and qualitative characteristics. The data collected and reported by the Assessment Team will shape the planning effort and the mobilization of personnel and resources for human remains recovery

14.1 Incident Characterization Form: and identification, personal effects management, and other evidence collection and investigation activities.

This information gathered and recorded by the Assessment Team will also form the basis for the initial Mass Fatality Incident Action Plan.

General MFM Characterization and Situation Report		
This form is to be filled out in preparation for a conference call between the C/ME Disaster Response Coordinator and C/ME executive leadership.		
Criteria	Qualification	Notes
General Disaster Description (to be provided by Command Staff or Operations Section Chief):	<input type="checkbox"/> What happened and where. Verify that the reported location of the disaster incident is indeed within the legal boundaries of its jurisdiction.	
Who has Jurisdiction	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Magnitude (Numbers)	<input type="checkbox"/> Estimated Number of Fragmentary Remains: <input type="checkbox"/> Estimated Number of Whole Bodies:	
Type of Incident	<input type="checkbox"/> Natural <input type="checkbox"/> Criminal/Terrorist <input type="checkbox"/> Accidental	
Manifest	<input type="checkbox"/> Closed population and manifest <input type="checkbox"/> Open population and manifest <input type="checkbox"/> Mixed (open and closed population)	
Condition of Remains	<input type="checkbox"/> Visually intact <input type="checkbox"/> Whole Bodies <input type="checkbox"/> Fragmented/Commingled <input type="checkbox"/> Decomposition present	

General MFM Characterization and Situation Report

This form is to be filled out in preparation for a conference call between the C/ME Disaster Response Coordinator and C/ME executive leadership.

Criteria	Qualification	Notes
	<input type="checkbox"/> Charring present <input type="checkbox"/> Mutated <input type="checkbox"/> Decasketed	
Debris Field	<input type="checkbox"/> Size and scale <input type="checkbox"/> Terrain <input type="checkbox"/> Topography <input type="checkbox"/> Environmental setting (urban, rural, field and forest) of the scene	
Rate of Recovery	<input type="checkbox"/> Rapid (i.e., hours to days) <input type="checkbox"/> Moderate (i.e., days to weeks) <input type="checkbox"/> Slow (i.e., weeks to months)	
C/ME and City Infrastructure	<input type="checkbox"/> Operational <input type="checkbox"/> Not fully operational <input type="checkbox"/> No longer operational	
Contamination or Infectious/ Transmissible Disease	<input type="checkbox"/> Present <input type="checkbox"/> Type of contamination (e.g., chemical, biological): <input type="checkbox"/> Not present	
Decedent Identification	<input type="checkbox"/> Types of antemortem data to be collected: <input type="checkbox"/> Types of postmortem data to be collected:	
Religious Considerations	<input type="checkbox"/> List special considerations for handling remains: <input type="checkbox"/> List special considerations for disposition of remains:	
Final Disposition Entities	<input type="checkbox"/> Funeral directors compromised <input type="checkbox"/> Cemetery and crematorium owners compromised	
Postmortem Processing	<input type="checkbox"/> Expansion of local C/ME office (establishment of Fixed Facility Disaster Morgue [FFDM]) <input type="checkbox"/> Establishment of Off-site Morgue (OSM) <input type="checkbox"/> Multiple OSMs required	
Weather and other environmental factors for	<input type="checkbox"/> <input type="checkbox"/>	

General MFM Characterization and Situation Report

This form is to be filled out in preparation for a conference call between the C/ME Disaster Response Coordinator and C/ME executive leadership.

Criteria	Qualification	Notes
the next few days	<input type="checkbox"/>	
Potential health and safety hazards	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	
Any immediate security issues	<input type="checkbox"/>	
	<input type="checkbox"/>	
	<input type="checkbox"/>	

14.2 Antemortem Processing Forms

See the VIP Antemortem Form.

14.2.1 Data Management System Forms

See the VIP Antemortem Form.

14.2.2 DMORT Forms - VIP

These forms are available for free online.

14.3 DNA-Testing Related Forms?

14.4 Communications Plan Form

15. Logistics

15.1 Overview of VIC Space and Logistics Requirements by Function

Following is an overview of space and logistics requirements for VIC operations.

VIC Space and Logistics Requirements by Function	
Function	Space / Logistics
VIC Management	<ul style="list-style-type: none"> Office with office equipment and supplies
VIC Conference Room (for staff meetings, Leadership meetings, VIP briefings)	<ul style="list-style-type: none"> Tables Chairs White boards Flip charts
VIC Reception Area	<ul style="list-style-type: none"> Two tables (L-shaped) Chairs (adequate for anticipated needs) Comfort items (water, tissues) Administrative supplies (pads, pens, printer ink/cards) Phone, computer/lap top, supplies
Interview Waiting Room Area	<ul style="list-style-type: none"> Chairs (adequate for anticipated needs) Comfort items (water, tissues) Phone bank (landline telephones at a rate of three lines per 50 victims)
Interview Coordinator Desk	<ul style="list-style-type: none"> Table Chair Phone Computer/lap top Supplies
Interview Rooms	<p>Suggested Number of C/ME Interview Rooms:</p> <ul style="list-style-type: none"> 6 rooms if estimation of decedents and injured is <100. 12 rooms if estimation of decedents and injured is 101 to 200. 15 rooms if estimation of decedents and injured is >201. <p>Each interview station requires:</p> <ul style="list-style-type: none"> Two tables (L-shaped) Seven chairs (may need more or less depending on family members in

VIC Space and Logistics Requirements by Function	
Function	Space / Logistics
	<p>attendance for the interview).</p> <ul style="list-style-type: none"> • Computer/lap top with access to data management system. • Antemortem Interview paper forms (backup). • Comfort items (water, tissues). • Administrative supplies (pads, pens, printer ink/cards). • Forensic supplies (DNA kits, preprinted interview forms & DNA consent forms, gloves, swabs, evidence tape, label printers, envelopes, and DNA info brochures).
<p>Disaster Victim Identification Operations (Includes DNA Sampling, Dental Records, Medical Records, Evidence, Records Management, QA/QC)</p>	<ul style="list-style-type: none"> • Can be at VIC or outside of VIC. • Separate stations will be required for these forensic disciplines. • Each area requires: <ul style="list-style-type: none"> – One 6' table per station – Chairs (adequate number for staffing) – Phone, computer/lap top, supplies – Administrative supplies (pads, pens, manila folders, etc.)
<p>Private Counseling Rooms</p>	<p>Suggested Number of Rooms for Counseling/Emotional Support:</p> <ul style="list-style-type: none"> • < 100 fatalities: 3-5 rooms • 101-200 fatalities: 10-12 rooms • > 200 fatalities: 15-25 rooms <p>Each room requires:</p> <ul style="list-style-type: none"> • Two 6' tables (L-shaped) • Seven chairs • Comfort items (water, tissues) • Administrative supplies (pads, pens)
<p>VIC Staff Break / Quiet Area</p>	<ul style="list-style-type: none"> • Tables • Chairs • Comfort items

15.2 VIC Operations Suggested Equipment / Supply List

Function	List of Space Equipment Needs	List of Supplies
<p>VIC Management</p>	<ul style="list-style-type: none"> • Desk • Phone with Multiple Lines; Intercom Capabilities • Waste Receptacle • Shredder • File Cabinets • Computer Station • Ergonomic Chair • Extra Guest(S) Chair(S) • Printer/Copier/Fax • Computer, Internet Connections • 6' Table • White Boards,(Erasable) • Storage Cabinets • Refreshment Bar for VIC staff 	<ul style="list-style-type: none"> – Notepads – Pens – Erasable Marker – Highlighters – Staplers/Staples – Clips – Post-It-Pads – Scissors – Three Hole Paper Punch – Tape (Duct, Masking, Shipping, Scotch) – File Folders – Envelopes (Various Sizes) – Marking Pens; Wet and Dry Erase, and Permanent. – Printer Ink/Toner – Copier Paper – Refreshment Supplies
<p>VIC Reception</p>	<p>RECEPTION WORKSTATION</p> <ul style="list-style-type: none"> • Ergonomic Chair • Network • Server • Desktop PC, Networked To All Spaces • Phones with Connectivity To All VIC Functions • Multiple Hard Telephone Lines for Phone (Call Center), Fax, and Internet Access. • Telephone Lines (Including Toll-Free) • Printer/Copier/Fax, Networked To All Spaces • Waste Basket • Paper Shredder <p>OTHER</p> <ul style="list-style-type: none"> • Two 6 Ft Tables (L-Shaped) • Chairs (# To Be Determined) • Comfort Items <ul style="list-style-type: none"> – Water Cooler – Tissues • File Cabinets • Supply Storage Cabinets • In/Out Status Tracking Erasable White Boards 	<ul style="list-style-type: none"> – Pads – Pens/Highlighters – Staplers/Staples – Clips – Post-It-Pads – Scissors – Three Hole Paper Punch – Tape (Duct, Masking, Shipping, Scotch) – File Folders – Envelopes (Various Sizes) – Marking Pens; Wet and Dry Erase, and Permanent. – Printer Ink/Toner – Copier Paper – Supply of Tissues – VIC Sign-In Sheets – 3-Ring Binders – Batteries (Appropriate Sizes) – Binder Clips – Clipboards – Dry Erase Board – Cleaning Supplies; <p>FORMS/DIRECTORIES</p> <p>Note: Instructions and Forms printed in various languages.</p> <ul style="list-style-type: none"> – VIC Message and Memo Forms – Parking Passes

Function	List of Space Equipment Needs	List of Supplies
	<ul style="list-style-type: none"> • Directional Signs(Printed In Various Languages) • Camera and Laminating System for Photo ID's and Creating ID Badges • Pagers • Radio (Portable) • Two-Way Communication Equipment • Clocks • Fire Extinguishers • Surge Protectors 	<ul style="list-style-type: none"> – Sign-In Sheets – On Duty-off-Duty Log Books – Signature Cards – Name Tags (Staff and Visitors) of Various Colors – Telephone Memo Call Pads – Local Commercial and Residential Phone – VIC Personnel Phone Directory VIC SME Directory
<p>Interview Waiting Areas</p>	<ul style="list-style-type: none"> • Couches • Chairs To Accommodate Each Family • Phone Bank (Landline Telephones At A Rate of Three Lines Per 50 Victims) • Water Cooler • Coffee Service • Computer(S) with Internet Connections for Victim Friends/ Family Use • Printer/Copier • Signage (Directional, Cell Phone Use, Etc.) • Cell Phone Charger Bank • TV/DVD Unit • Tables for Displaying Victim Biographical Information and Bereavement and Condolence Information. • Vending Machines/Refreshment Bar • Public Address System • Storage Cabinets for Supplies • Question/Comment Box for VIC Staff 	<ul style="list-style-type: none"> – Water – Tissues – Toys for Assorted Age Groups (Including Stuffed Teddy Bears) – Coffee and Condiments – Teas and Condiments – Informational Packets On Interview Procedures – Lists of Available Resources for Grief Counseling Clergy, Mental Health, Other) Printed In Various Languages) – Printer Supplies – Area Phone Directories – Infant Supplies (Diapers, Wipes, Etc.)
<p>Interview Rooms (Antemortem Interview/Data Collection)</p>	<p>EACH INTERVIEW STATION REQUIRES:</p> <ul style="list-style-type: none"> • Two 6 Ft Tables (L-Shaped) • Six-Seven Chairs • PC W/Internet and VIC Space Linkages <ul style="list-style-type: none"> – PC with dual screens so that the family can observe one as info is being entered 	<ul style="list-style-type: none"> – Pads – Pens – Printer Ink – Pens/Highlighters – Staplers/Staples – Clips – Post-It-Pads – Scissors – Three Hole Paper Punch – Tape (Duct, Masking, Shipping, Scotch)

Function	List of Space Equipment Needs	List of Supplies
	<ul style="list-style-type: none"> • Waste Basket • Storage Cabinets (General) • Storage Cabinets (for Personal Interview Files) • Storage Cabinets (Decedent Medical Files, Dental Records, X-Rays, and Medical) • Supply Closet • Filing Cabinets • Printer/Copier • Label printer • Sign In/Out Boards • Fax • Clock • Phone (Multi-Lines) • Portable Radios 	<ul style="list-style-type: none"> – Evidence tape for sealing envelopes and bags – File Folders – Index/Filing Tabs – Envelopes (Various sizes) – Copier/Fax Paper – Toner/Ink – Comfort Items (Water, Tissues) – DNA Collection Kits (obtain as needed from DNA section) – Gloves: both nitrile and latex to account for possible allergies – DNA informational brochure – Missing Persons DNA Personal Effects Kit – Logs for all Files FORMS (PRINTED IN VARIOUS LANGUAGES) – Pre-Printed Interview Forms – DNA Consent Forms – Reference Material Custody Forms – Property Receipt Forms – Medical Records Receipt Forms – Family Member Medical Record Release Forms – Personal Items Submission and Consent Forms – HIPAA Exemption for Medical Examiners and Coroners Forms
<p>Disaster Victim Identification Operations (Including DNA, Dental, Medical Records, Records Management, Evidence and QA/QC)</p>	<p>EACH AREA REQUIRES:</p> <ul style="list-style-type: none"> • One 6 Ft. Table for the following work areas: <ul style="list-style-type: none"> – DNA Sampling – Dental Records – Medical Records – Records Management – Evidence – QA/QC • Chairs • Computers for Each Station W/Internet Capabilities. • Software Appropriate for Ante-Mortem Data Collection • Phones • Portable Radios • Waste Baskets • Sign In/Out Boards • Storage Cabinets (General) • Storage Cabinets for Each Operational Function • Supply Closet 	<ul style="list-style-type: none"> – Pads – Pens, – Printer Ink – Pens/Highlighters – Staplers/Staples – Clips – Post-It-Pads – Scissors – Three Hole Paper Punch – Tape (Duct, Masking, Shipping, Scotch) – File Folders – Index/Filing Tabs – Envelopes (Various Sizes) – Copier/Fax Paper – Toner – Logs for Managing and Acquiring Dental and Medical Records – Logs for Tracking Biological Samples – Logs for DNA Shipping/Transit Forms – Personal Information Questionnaire Forms – Evidence; Chain of Custody Forms

Function	List of Space Equipment Needs	List of Supplies
	<ul style="list-style-type: none"> • Filing Cabinets for Each Operational Function • Printer/Copier • Fax/Scanner • Clock 	<ul style="list-style-type: none"> – Personal File Checklists Forms (Tracking Changes and “To Do” Information) – Case File Inventory Forms – Official Notification to Next of Kin (NOK) Forms – Remains Release Forms – DNA Collection Kits – Gloves: both nitrile and latex to account for possible allergies
VIC Staff Break / Quiet Area	<ul style="list-style-type: none"> • Comfortable Chairs • Couches • Subdued Lighting • Refreshments • TV/DVD • Areas with Comfortable Cots (optional) • Refreshment Bar • Phone(s) • Signs “Quiet Zone, etc.” 	<ul style="list-style-type: none"> – Reading material – Lists of counseling resources – Phone directories – Refreshment supplies

15.3 Signage

Outside Signage

VIC specific packet of signs (including replacements) includes informational and directional signs. The locations of where each sign goes posted on the back of the sign.

On Building: Direction to VIC entrance / all must check in with security and display credentials on demand.

At Entrance to Parking: Lot rules for parking (nose in; hours of operation; responsibility for personal property); directions to VIC entrance; all must check in with VIC security and display credentials on demand (if parking is allowed in lot).

At Entrance to Parking Lot: Parking for xx staff only; directions; all must check in with VIC security and display credentials on demand (if parking is NOT allowed in lot).

At Entrance to Auxiliary Parking Lot: Directions to entrance; all must check in with VIC security and display credentials on demand.

At Outside, Designated Smoking Area: smoking in this area only.

Parking Lot

If parking is allowed in the lot, set up barricades with signs that designate:

Inside Signage

Inside Signage

Post a site layout map so people know where things are located. Post Do Not Enter and Authorized Staff ONLY sign in the appropriate areas.

Post signs indicating where rest rooms – staff respite and security are located.

If a bulletin board, white board or electronic reader board is located in the public area, remove other flyers and information and post a VIC Information and Update sign. To include hours of operations; display credentials at all times; trespassers will be escorted out and prosecuted.

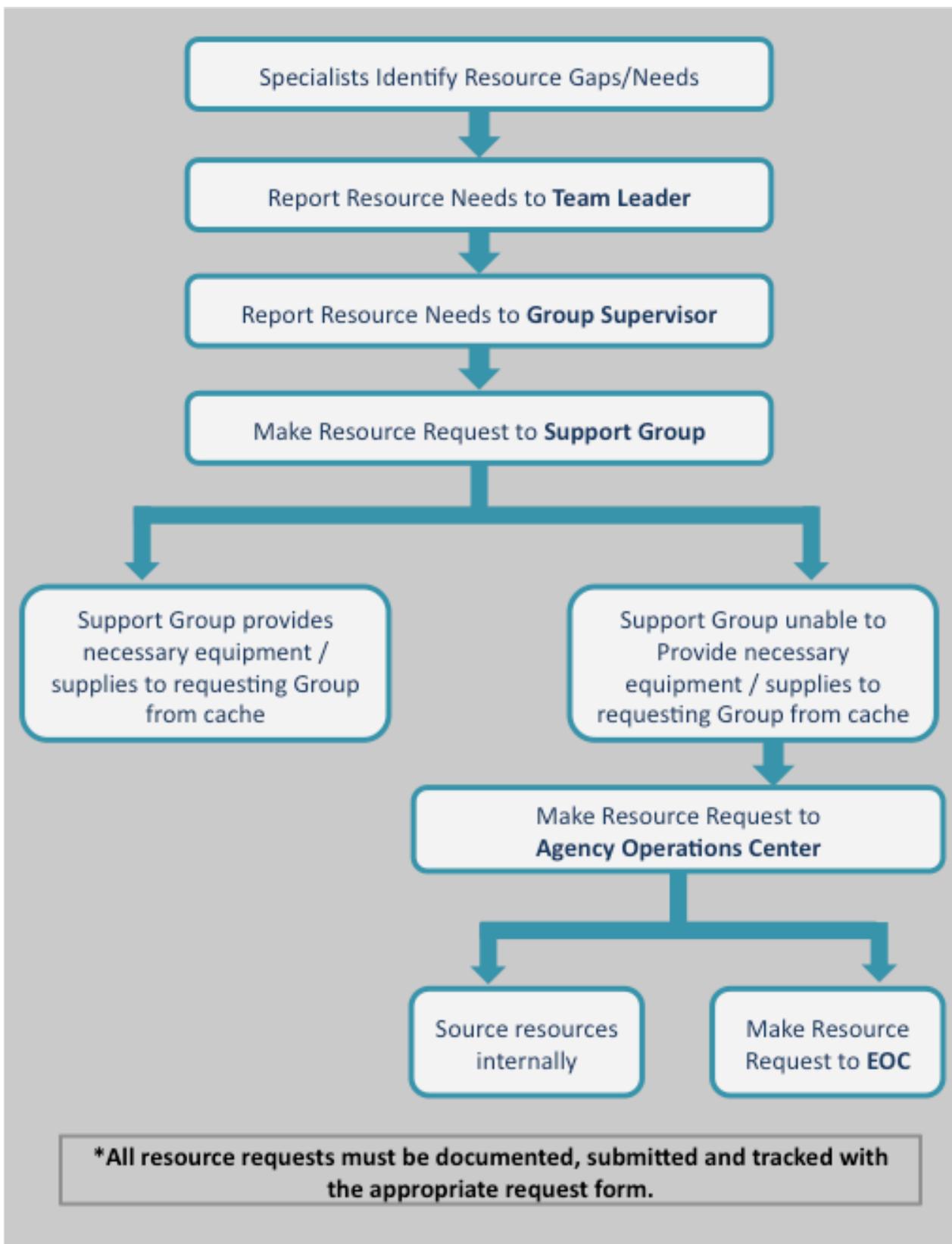
Location Signs:

-
-
-
-

15.4 Resource Request Process

Equipment and Supply Requisitions

1. Team Leaders are responsible for requisitioning materials needed for their respective sections.
2. Team Leaders complete an Equipment or Supply Requisition Form (need source).
3. The requisition is passed up through the Chain of Command to the Group Leader level where it is delivered to the Supply Unit of the Logistics Group. (This is to keep all parties informed of the request so duplicate requests can be avoided.)
4. The Supply Unit will either
 - a. Fill the request with materials from the cache, or
 - b. Place the orders to obtain the requested materials.
5. Delivery of the materials will be made to the Team Leader as soon as possible.



15.5 Federal Assistance / Resources

Federal Agency	Support/Assistance
<p>U.S Department of Health and Human Services, NDMS, Disaster Mortuary Operational Response Team (DMORT)</p>	<ul style="list-style-type: none"> • Regional teams of 30 specialized personnel for establishing on-scene management operations and data collection centers • Mobile morgue operations, embalming, and casketing decedents • Autopsies • Support to forensics /DNA acquisition/personal effects/tracking of remains • Collect Ante-mortem data • Family assistance and support • Scene documentation and records support • Provide Post-Mortem Form Packets
<p>Health and Human Services, Center for Disease Control and Prevention (CDC)</p>	<ul style="list-style-type: none"> • Consultation on disease epidemiology//biologically contaminated remains • Bio-safety and infection control information • Guidance on health concerns, specific to disease outbreaks and safe handling of biologically contaminated decedents • Laboratory assistance • Medical Examiner and Coroner Information Sharing Program (MECISP) for death investigators
<p>U.S. Department of Homeland Security FEMA</p>	<ul style="list-style-type: none"> • Coordinates the deployment of federal resources for nuclear Incidents, Urban Search and Rescue Teams • Technical expertise on nuclear and radiological incidents • Major disaster assistance as per state Governor request
<p>U.S. Department of Homeland Security FEMA Urban Search and Rescue Response System (US&R); Task Forces</p>	<ul style="list-style-type: none"> • 24 hour search and recovery operations, both living and deceased • Provide expertise on environmental hazards of disaster sites
<p>U.S. Department of Homeland Security National Disaster Medical System, Disaster Medical Assistance Teams (DMAT) <i>(40 teams capable of deploying to disaster sites with 72 hrs. of sustaining supplies)</i></p>	<ul style="list-style-type: none"> • Victim triage assistance • Basic health care and health resource when needed • Support for patient reception and disposition of patients to hospitals • C/ME security control assistance for disaster site(s) • Decontamination equipment for C/ME
<p>U.S. Department of Justice, Federal Bureau of Investigation (FBI)</p>	<ul style="list-style-type: none"> • FBI Disaster Squad and Evidence Response Teams to assist in Identifying victims, including ante-mortem fingerprinting
<p>U.S Department of Justice, National Center for Forensic Science</p>	<ul style="list-style-type: none"> • Expertise on advanced forensic methods
<p>U.S Department of Justice</p>	<ul style="list-style-type: none"> • Specially trained Victim Specialists for coordinating/assisting victims

Federal Agency	Support/Assistance
Office of Justice Programs, Office for Victim Assistance (OVA)	of terrorism and other mass casualty federal crimes
Emergency Management Assistance Compact (EMAC), National Emergency Management Association (NEMA)	<ul style="list-style-type: none"> • Interstate mutual aid for other member states
Air National Guard Fatality Search and Recovery Team (ANG FSRT)	<ul style="list-style-type: none"> • Self-sustaining teams for use in recovering decedents from contaminated field environments • Support for DOD incidents and mass casualty operations • Transport of decedents with appropriate tracking methods from field setting to collection points
Department of Defense (DOD); Joint Task Force-Civil Support (JTF-CS)	<ul style="list-style-type: none"> • Supports Lead Federal agencies (LFA's) in managing human remains • Military assistance to civil authorities, with focus on chemical, biological, radiological, explosive (CBRNE) incidents
DOD Quartermaster Companies -54th, 246th, 311th	<ul style="list-style-type: none"> • Support to mass fatality operations
DOD, Armed Forces Institute of Pathology (AFIP)	<ul style="list-style-type: none"> • Staff resources from 22 specialty departments covering pathology and odontology
DOD, Armed Forces DNA Identification Laboratory (AFDIL)	<ul style="list-style-type: none"> • Expertise in the identification of remains
DOD, Office of the Armed Forces Medical Examiner (OAFME)	<ul style="list-style-type: none"> • Mobile teams, capable of processing 1,000 remains on-site • Dover AFB for processing large numbers of remains, with additional surge capacity • May require an MOU
DOD, U.S. Army Medical Research Institute of Infectious Diseases (USAMRIID)	<ul style="list-style-type: none"> • Laboratory resources for providing autopsy expertise in cases involving biological threats • Consultation services to agencies for biological warfare incidents
DOD, U.S. Army Medical Research Institute of Chemical Defense (USAMRICD)	<ul style="list-style-type: none"> • Information regarding chemical agents and medical management of chemical casualties
DOD, U.S. Marine Corps' Chemical Biological Incident Response Force (CBIRF)	<ul style="list-style-type: none"> • Self-sustaining unit providing chemical/biological agent detection • Support to local Coroner/ME tasks • Resources for Incident site management and security activities
U.S. Department of State (DOS)	<ul style="list-style-type: none"> • Assistance in gathering relevant ante-mortem data to identify foreign international decedents • Coordinate the return of foreign national decedents to their home country

Federal Agency	Support/Assistance
U.S. Environmental Protection Agency (EPA)	<ul style="list-style-type: none"> • Technical assistance on environmental issues and information on health and medical response operations • Technical assistance for incidents involving chemical agents. • Federal Radiological Monitoring and Assessment Center (FRMAC), advisory team resources • Air monitoring analysis
U.S Department of Transportation	<ul style="list-style-type: none"> • Refrigerated storage and transport assets for decedent movement • Temporary remains storage facilities (BCP's) • Coordinate movement of mass fatality technical equipment and supplies
U.S. Department of Transportation National Transportation Safety Board (NTSB)	<ul style="list-style-type: none"> • Family assistance support for accident victims and survivors during large-scale disasters • Assistance for establishing Family Assistance Centers (FAC's) • Disaster crisis counseling • Short-term disaster mental health services for family members, friends, and survivors • Victim identification • Personal effects management • Communication resources and translation services
U.S. Department of Transportation Transportation Disaster Assistance Division (TDA)	<ul style="list-style-type: none"> • Conduct briefings and provide updates to family members during investigation process
Department of Veteran Affairs	<ul style="list-style-type: none"> • Limited numbers of dental and radiological technicians and medical supplies and resources from existing medical centers • Mortuary/cemetery assistance
U.S Department of Labor	<ul style="list-style-type: none"> • Worker exposure assessments • Responder and worker risk management
U.S. Department of Agriculture	<ul style="list-style-type: none"> • Set-up and management of base camps to support MFM workers • Trained Planning Task Force leaders to assist in developing MFM missions
Interpol	<ul style="list-style-type: none"> • Identification of foreign national decedents and coordination with family members • Maintains international databases, including fingerprints • Disaster Victim Identification (DVI) support when requested • Downloadable DVI Guide that defines identification standards, providing forms, and information-gathering standards and techniques • Multi-lingual message service • Incident Response Teams got on-site investigative support
American Red Cross	<ul style="list-style-type: none"> • Coordination of federal resources in support of mass care activities • Counseling to victims, families, and emergency responders
Agency for International Development	<ul style="list-style-type: none"> • Assistance in processing foreign nationals

Federal Agency	Support/Assistance
Office of Foreign Disaster Assistance	
International Critical Incident Stress Foundation, Inc. (ICISF)	<ul style="list-style-type: none"> • First responder critical incident stress management • Mental health professional assistance