



SUFFOLK MASS FATALITIES PLAN

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FREEDOM OF INFORMATION ACT 2000

This document will be made publicly available through the SRF website. Where content has been redacted under the freedom of Information Act 2000 (FOI) in the publicly available version, the paragraph number will be highlighted to show there has been a redaction and the relevant section of FOI referenced.

ENVIRONMENTAL INFORMATION REGULATIONS 2004

This plan presumes disclosure of all environmental information, under Environment Information Regulations. Where exemptions are claimed under Environment Information Regulation 12 (5)a, this will only be where one of the responder agencies has judged that the information may adversely affect either international relations, defence, national security or public safety. Where such content has been identified, the paragraph number will be highlighted and the paragraph text removed from public versions of the plan.

DATA PROTECTION ACT 1998

This plan does not include personal data that has been shared under the Data Protection Act 1998. It does include data relevant to achieve planning arrangements and identifies how more specific personal data will be used during any emergency.

REVIEW

This plan will be reviewed by the Suffolk Joint Emergency Planning Unit on behalf of Suffolk Resilience Forum at least every 3 years. Earlier reviews will take place if there is a change in the working practices carried out if there is a change in legislation or if information from incidents and exercises where lessons are identified.

CONTENTS

This contents list is hyperlinked for ease of navigation.

FREEDOM OF INFORMATION ACT 2000	ii
ENVIRONMENTAL INFORMATION REGULATIONS 2004	ii
DATA PROTECTION ACT 1998	ii
REVIEW	ii
CONTENTS	iii
DISTRIBUTION LIST	iv
RECORD OF AMENDMENTS	v
1 INTRODUCTION	1
2 AIM	1
3 OBJECTIVES	1
4 RISK	2
5 PLAN ACTIVATION AND LOCATION	2
6 GENERAL CONCEPT OF OPERATIONS.....	6
7 WARNING AND INFORMING	16
8 LEGAL ROLES AND RESPONSIBILITIES	17
9 COMMUNICATIONS (ICT).....	17
10 RECOVERY	17
ANNEX A MORTUARY ACTIVATION ACTION CARD	19
ANNEX B KENYON INCIDENT INFORMATION FORMS	20
ANNEX C LOCAL EMERGENCY MORTUARY SITES	32
ANNEX D MASS FATALITIES PROCESS OVERVIEW	38
ANNEX E SUGGESTED LAYOUT FOR A LOCAL MORTUARY	40
ANNEX F CULTURAL AND FAITH GUIDANCE	41
ANNEX G EMERGENCY MORTUARY ADDITIONAL RESOURCES	43
ANNEX H RISK ASSESSEMENT (GENERIC)	44
ANNEX I LIST OF LOCAL HOTELS	51
ANNEX J GLOSSARY	52

DISTRIBUTION LIST

Department / Organisation
Suffolk County Council
Ipswich Borough Council
Mid-Suffolk & Babergh District Council
West Suffolk Council
East Suffolk Council
Department for Levelling Up, Housing and Communities(DLUH)
Suffolk Constabulary
British Transport Police
Suffolk Fire & Rescue Service
NHS England
NHS CCGs
West Suffolk Hospital
Ipswich Hospital
East of England Ambulance NHS Trust
Environment Agency
Maritime & Coastguard Agency
UK Health Security Agency
Suffolk Resilience Website
Kenyon International Emergency Services (Annex C only)
National Highways

RECORD OF AMENDMENTS

This manual will be amended annually or at such other times as necessary.

Amd No.	Date Issued	Details of Amendment	Initials

1 INTRODUCTION

1.1 This plan is not intended for use in the response to a flu pandemic or infectious disease outbreak, however elements of the Kenyon contract can be requested to support such an event.

1.2 Who the plan is for:

HM Coroner & Coroners Officers
Local Authorities
Suffolk Constabulary/British Transport Police
Identification Commission
NHS England & CCGs
Suffolk Fire & Rescue Service
East of England Ambulance Service NHS Trust
Kenyon International Emergency Services (**ANNEX C only**)

1.3 Legal requirements for the plan

Following a fatality, it is the sole legal responsibility of HM Coroner in England and Wales, to establish the identity of the deceased, the cause, location and time of death. It is also their responsibility to authorise all procedures pertaining to the handling of the deceased and human remains from the time of death to the time they are released to the next of kin. They are required to make decisions in relation to the movement of bodies to a mortuary and their examination by a Pathologist.

2 AIM

This document sets out the Suffolk strategic management arrangements for dealing with the mass fatality identification process. It provides guidance on the initial strategic actions to be taken during such an incident. It will describe the tactical actions to be taken for specific incidents and may refer to other plans for meeting particular needs such as the Humanitarian Assistance, individual agency emergency response plans etc.

3 OBJECTIVES

This plan is designed to provide guidance, as far as possible for:

- The efficient and timely recovery and identification of deceased victims, reuniting them with next of kin / family members and facilitating police and coronial investigations.
- Care of the deceased in a dignified and respectful way, paying due regard to cultural and faith issues.
- Providing for the needs of family and friends and the support structures necessary for their welfare.
- Arrangements for the return of the remains and personal effects.

4 RISK

The Mass Fatalities plan is a 'supporting' plan which can be activated following any incident which results in multiple fatalities.

The risk is therefore not a risk in the conventional sense but is one of reputational damage to all the organisations involved in dealing with a mass fatalities incident. A mass fatalities event must be managed in a competent and compassionate way in the eyes of relatives and the public.

5 PLAN ACTIVATION AND LOCATION

PLAN ACTIVATION

5.1 Assessment and alert. The SRF Mass Fatalities Plan may be activated when an incident occurs involving more dead bodies and/or body parts than can be located, identified and processed for repatriation by available response resources.

There is no widely accepted number of fatalities that define a mass fatality incident, it is generally accepted that if the number of fatalities exceeds the local resource capabilities causing them to require mutual aid or assistance the term applies.

The response will need to consider the location of the fatalities, whether the deceased victims have been disrupted, whether the victims died simultaneously, and whether contamination is involved.

Suffolk County Council (SCC) maintains an agreement with Kenyon International Emergency Services for the provision of the necessary resources to respond to a mass fatality incident. This agreement will support a local Emergency Mortuary solution, (including a demountable Emergency Mortuary structure option), and support a Humanitarian Assistance Centre (HAC) if required.

5.2 Who will activate the plan HM Coroner in consultation with Suffolk Constabulary/British Transport Police (BTP) (if applicable) SIM (Senior Identification Manager) will activate the Mass Fatalities Plan. If the incident is on BTP jurisdiction command, control, and coordination to be discussed with Suffolk constabulary to allow for agreed process.

5.3 Additional support Depending on the scale and nature of the incident, there may be a requirement for Regional Emergency Mortuary Arrangements (REMA) resources to support this plan.

5.3.1 Decisions should consider the possibility that multiple fatalities may occur in several locations simultaneously. Single or multi-agency mutual aid may be required in this situation.

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5.3.2 Suffolk constabulary forms part of the Eastern Region Disaster Victim Identification (DVI) and UK DVI network and the relevant Senior Identification Manager will take early steps to activate relevant support as required through these networks.

5.3.3 British Transport Police (BTP)/Rail Accident Investigation Branch (RAIB) will lead the response and investigation for mass fatality incidents occurring on the rail network. BTP maintain a Disaster Victim Identification (DVI) cadre. BTP are part of the London Region Disaster Victim Identification as well as the UK DVI network.

5.3.4 The Rail Accident Investigation Branch must by law investigate all rail accidents involving derailment or collision which result in, or could result in:

- The death of at least one person
- Serious injury to five or more people; or
- Extensive damage to rolling stock

5.4 How will the plan be activated

5.4.1 Call Out Procedure/Notification

On receiving confirmation of the plan activation, the Police Contact and Control Room (CCR) will notify:

- Senior Identification Manager (SIM) and on call Senior Investigating Officer (SIO) Suffolk Constabulary
- On Call Press Officer
- Joint Emergency Planning Unit Emergency Planning Duty Officer (EPDO)
- British Transport Police if applicable.

Senior identification Manager will notify:

- HM Coroner / Coroners officers
- Eastern Region DVI co-ordinator
- Relevant specialist DVI leads notably PMOC, SERM, Casualty Bureau Manager
- NPCC duty gold commander
- UK DVI lead

5.4.2 Suffolk Joint Emergency Planning Unit (JEPU) EPDO will notify:

- Suffolk County Council (SCC) Corporate Leadership Team (CLT) Duty Director
- The affected District or Borough Council(s)
- Relevant local authority Duty Communications Officer(s)

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5.4.3 A Mass Fatalities Coordination Group (MFCG) led by HM Coroner, should be established at early stage to determine the Emergency Mortuary detailed requirements. This group should consist of:

- HM Coroner and Coroners Officer
- Senior Identification Manager (SIM) and/or Senior Investigating Officer, (SIO) Suffolk Constabulary/British Transport Police (if applicable).
- Police Mortuary Operations Manager
- Suffolk County Council and /or a JEPU representative
- District Council representative
- NHS representative (Supervising Pathologist)
- A Maritime Coastguard Agency (MCA) representative (if appropriate)
- Human Tissue Authority (HTA) Regulation Manager (on arrival)
- Kenyon representative (if appropriate)

5.4.4 HM Coroner(s) in consultation with Suffolk Constabulary SIM/SIO, Supervising Pathologist, and MFCG will decide on one of the following options:

- utilise existing NHS mortuary arrangements (with additional Kenyon support if required).
- utilise existing NHS mortuary, enhanced with additional body storage (with additional Kenyon support if required).
- activate the Kenyon Emergency Mortuary agreement to provide a demountable Emergency Mortuary (with Kenyon personnel support if required).

5.4.5 Suffolk NHS Mortuary Capacities:

Ipswich Hospital – 168 persons + 132 contingency

West Suffolk Hospital – 86 persons

(See Mortuary Activation Action Card at [ANNEX A](#))

5.4.6 If activation of the Kenyon contract is required, the Suffolk JEPU Emergency Planning Duty Officer (EPDO) should be informed of the decision. The Kenyon agreement activation will incur considerable expense therefore, the EPDO is to inform the SCC CLT Duty Director of the Coroners decision and seek authority to activate the Kenyon agreement.

With the authority of the SCC CLT Duty Director the EPDO is to:

- Contact Kenyon International Emergency Services
- Provide Kenyon initial details of the incident using the proforma at [ANNEX B](#).

CHOICE OF LOCATION

5.5 Locations. Locations have been selected and confirmed with landowners and Kenyon as suitable Suffolk Emergency Mortuary sites.

5.6 MoD Sites. MoD sites have been selected as Emergency Mortuary sites of 'last resort'.

In accordance with current MOD policy, these sites are only to be considered if other sites are totally untenable.

Should one of these sites be required, the military Joint Regional Liaison Officer (JRLO) and / or Royal Air Force Regional Liaison Officer (RAFRLO) must be contacted to obtain the necessary Ministerial authority. The JRLO/RAFRLO will inform RAF Honington or Rock Barracks Woodbridge as appropriate.

Detailed maps and site layout schematics/images are at **ANNEX C**.

5.7 Emergency Mortuary Site Occupation. Consultation between the Suffolk Coroner, Suffolk Constabulary, JEPu & the Local Authority will be required prior to selection of the proposed Emergency Mortuary Site.

Once the site is selected, assistance from Suffolk County Council and Suffolk Constabulary may be required in removing vehicles from the proposed site and securing it until the arrival of Kenyon resources. It is considered that initial occupation of the site will be at least 6+ hours after activation of the Kenyon agreement and take up to 48hrs to be fully operational.

Suffolk County Council the Martlesham Heath P&R site and West Suffolk Council manages the Hardwick Heath site. Access to sites in an emergency has been agreed, however the Mass Fatalities Coordination Group will need to contact the relevant authority to confirm consent to use the site prior to the deployment of any assets. Out of hours contact details are available within the SRF Alerting Directory.

5.8 Planning Permission. Early consideration should be given to the requirement for planning permission from the local planning authority. A temporary structure will need an urgent application submission during the initial 28-day period of occupation. Structures on Crown property will need a planning application within 6 months of occupation.

5.9 Human Tissue Authority (HTA) Mortuary Licensing. Prior to activation of any Mortuary and in accordance with the Human Tissue Act 2004 a licence to operate will be required. A licence [application](#) and [completion guide](#) can be found at <https://www.hta.gov.uk/policies/hta-licensing-emergency-mortuary-facilities> After notification of an incident resulting in the activation of this mass fatality plan, a site inspection team comprising a Head of Regulation and Regulation Manager(s) will join the Mass Fatalities Coordination Group (or SCG). The HTA will review the information provided in the licence application and provide direct advice and guidance on the requirements of the Human Tissue Act and compliance with the HTA standards.

The intention is to issue the relevant licenses at this meeting (and therefore within the first few hours of the incident occurring) prior to the facility becoming operational for post-mortem activity, but without delaying non-invasive identification. Only where there is evidence of poor or non-compliance with the standards will the HTA conduct a visual inspection. The licence holder for a local incident demountable mortuary, will be Suffolk County Council on behalf of Kenyon and the Designated Individual (DI), a Suffolk Constabulary Senior Identification Manager (SIM).

5.10 Rendezvous points (RVP). Dependant on the situation, consideration should be given to provision of police/Kenyon rendezvous points (RVP) for individual sites to enable unrestricted movement or police escort of Kenyon vehicles to the selected site.

6 GENERAL CONCEPT OF OPERATIONS

6.1 Overview of process

A schematic and detailed overview of the process employed for a mass fatality incident is given in **ANNEX D**.

6.2 Body Handling

6.2.1 Bodies at the site of the disaster(s) will not be moved (other than for saving life or minimising injury) until authority for their removal has been given by HM Coroner. Following such authority, bodies may be transported to victim audit areas adjacent to the scene of the incident, prior to transportation to the Emergency Mortuary.

6.2.2 The Emergency Services will identify suitable facilities, which can be used as temporary victim audit areas. Local Authorities may be asked to assist the Emergency Services with this.

6.2.3 Interpol recognises that the responsibility for co-ordinating the investigation, recovery and identification of victims will always rest with the "host nation".

6.2.4 The police are also responsible for the collation of identification data and the management of the Emergency Mortuary.

6.2.5 Regardless of the scale of the incident(s) and/or number of fatalities, the organisations involved in the recovery, identification and management of the bodies must always maintain the dignity of the deceased in terms of religious, ethnic, or cultural considerations. The Local Authority must endeavour to seek support and advice from professionals in the field of race, equality and diversity.

6.2.6 Due regard must be paid to the management of personal effects to ensure that they are available to assist in identification and evidence collection

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and, above all, so that they can be returned in an appropriate condition, to relatives of the victims.

6.2.7 Both pre and post Emergency Mortuary phase, the Coroner in consultation with the Police and Local Authority may be responsible for making arrangements with funeral companies, in terms of body transport. Mutual aid/co-operation may be needed.

6.2.8 Terrorist Related Incidents. In terrorist or suspected terrorist incidents, the forensic aspects of the recovery and identification of victims is important and forms part of the investigative process.

The Police SIO has responsibility for the victim or human remains and evidence recovery process, ensuring that forensic procedures are adhered to. The Metropolitan Police Service Anti -Terrorist Branch, through the National Co-ordinator provides support.

6.3 Decontamination of the Deceased

6.3.1 Decontamination of deceased victims should be considered prior to and following body recovery from the incident site.

6.3.2 The decision on whether to decontaminate the deceased, will be influenced by the police investigation process, such as preventing washing of the body which may lead to the loss of evidence.

6.3.3 It should be noted that decontamination will only wash contaminants from the skin; it will not counteract or make safe any contamination of internal organs. Advice from the local Scientific and Technical Advice Cell (STAC)/UK Health & Security Agency(UK HAS) should be sought ahead of any decisions being made.

6.3.4 Effectiveness of decontamination will need to be determined according to the nature of the contaminant and facilities available in the event of an emergency. All decisions on whether to decontaminate or not, and action taken as a result, should be recorded in relevant policy logs.

6.3.5 In cases where the body has been contaminated through a Chemical, Biological, Radiological or Nuclear (CBRN) release, guidance is available in the Home Office, Safe Handling of Contaminated Fatalities document and/or advice should be sought from the STAC/ UK HSA on any required precautionary measures prior to handling.

6.3.6 To safeguard the health of responders it is recommended that gas tight chemical body bags are used (these may need to be requested by Ambulance or Fire & Rescue Service from National assets) to remove deceased victims. Appropriate Personal Protective Equipment (PPE) should be worn by all persons working in close proximity. On arrival at the Emergency Mortuary site contaminated bodies should be clearly marked or stored separately.

6.4 Operation of the Emergency Mortuary

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6.4.1 At the Emergency Mortuary, teams of Police Officers fulfil pre-determined roles to manage the Mortuary procedures, assist the pathologists and forensic specialists, deal with property, obtain, and preserve evidential material and supervise visual identifications.

6.4.2 Suffolk Constabulary and the Regional UK DVI Team will be in overall charge of the administration and security of the Mortuary, while the professional aspects of pathology will remain the responsibility of the Supervising Pathologist.

6.4.3 In consultation with the selected Security Industry Accredited private security provider, Suffolk Constabulary will be responsible for the prevention of unauthorised access to, and exit from, the mortuary.

6.4.4 The mortuary internal layout will be determined by the Supervising Pathologist, Regional UK DVI Team / Kenyon, and will be managed and controlled by the Supervising Pathologist or their nominated deputy for all matters relating to pathology and health. A suggested external layout for the Mortuary at both pre-determined locations is shown at [ANNEX E](#).

6.4.5 A Resource Management / Facilities Officer from the Local Authority may be required to coordinate the routine, non-medical and non-police aspects of the Mortuary. This officer will be responsible for administering the mortuary in consultation with Kenyon (if activated) reporting regularly to the Police Mortuary Operations Coordinator and the Supervising Pathologist. All demands for goods and services may be directed through the Local Authority if not provided by the Kenyon agreement. These could include, Registration Service, Social Services, Press Communications Officers and any affected District or Borough Council service area.

6.4.6 All multi-agency partners should possess insurance cover for personnel working in the mortuary. Suffolk Constabulary will provide the means of identification for all Mortuary staff and be responsible for the initial and inner security of the site.

6.4.7 The non-affected Local Authorities recognise the need to provide assistance to Suffolk County Council (SCC), particularly if the event is of a protracted nature. SCC should seek to notify and continuously update the District and Borough Councils, in case mutual aid is required. If this becomes necessary, this assistance will be sought through the County Council Emergency Control Centre or Suffolk Joint Emergency Planning Unit.

6.4.8 As a minimum requirement, briefing and discussions will be held for all mortuary staff daily, at the direction of the Mortuary Manager.

6.5 Cultural and Faith Issues

6.5.1 The faith and cultural requirements of victims and responders needs particular consideration. Contact with appropriate faith representatives is advisable for professional support.

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6.5.2 There may be special religious requirements that should be observed in the handling of bodies. In order not to offend any member of a faith community, any area provided for relatives and friends to view bodies should be constructed without religious symbols. The SIM should seek to establish the religion of the deceased as soon as practicably possible and prior to viewing of the body by relatives.

6.5.3 **ANNEX F** shows the ethical considerations for a few of the religious faiths, it is intended to indicate some problem areas which personnel should be aware of when dealing with the deceased of various faiths. These important considerations only come into effect once the examination and identification has been completed.

6.5.4 There may be a need for interpreters when dealing with relatives and friends of the deceased.

6.6 Viewing

6.6.1 Families must be allowed to have access to the deceased for grieving purposes, if requested. They should not be prevented from seeing the body but must be given appropriate advice and assistance, particularly if the body is disrupted. The exception being if the body has been contaminated in some way and the nature of the contaminant or infection is unknown.

6.6.2 It may be necessary to limit viewing to close family members only. This can be difficult to explain to a grieving family and care and tact should be used. After the Coroner has released the body, further private viewing may be possible for family and friends.

6.6.3 It will be the responsibility of the Police Family Liaison Officers (FLO) to arrange viewing through the Coroner's Officer. The FLO should accompany the family and remain with them during the viewing process. Access to Social Care workers, faith, religious or cultural leaders is also appropriate. Issues regarding culture and faith are covered in 6.5 and **ANNEX F**.

6.6.4 A body viewing area should, where possible, be co-located with the mortuary. If a demountable structure is used/available, it should be sited an adequate distance to avoid disruption to procedures and have the appropriate ambiance.

6.6.5 The British Red Cross (BRC) and other voluntary organisations, have trained Suffolk based volunteers, able to provide practical and emotional support following bereavement. To access this assistance, the BRC and others can be contacted using the SRF Alerting Directory maintained on Resilience Direct.

6.6.6 In the event of a transport incident, Rail Incident Care Teams, (RICTs) or Airline Incident Care Teams may be able to assist in the provision of support to survivors, family & friends.

6.7 Welfare

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It is essential to make proper provision for family members and friends, as quickly as is practical, this should include:

- The provision of Family & Friends Reception Centre (FFRC)
- The provision of a Humanitarian Assistance Centre (HAC) and/or information on a virtual SRF Humanitarian Assistance website.
- Accommodation for those travelling to the area
- A suitable welfare support system

Family members and friends of the deceased are likely to be in a state of shock and this will vary considerably the way in which they respond. They will have an urgent need for information about their loved ones and will need to be kept fully informed concerning the progress of identification.

HM Coroner is responsible for all issues relating to the deceased, until they are released for burial or cremation. Family members will need to have information about the role of the Coroner and the process of identification and why certain procedures are being carried out.

It is important that those dealing with the deceased, ensure that family members feel that time and care has been spent dealing with their loved ones as people, as opposed to “anonymous deceased victims”.

The way family members are dealt with in the immediate aftermath of the disaster will have a direct bearing on their ability to cope with their bereavement in such traumatic circumstances, both in the short and longer term.

Family support involves a multiplicity of statutory bodies and voluntary organisations. The following may all have a role in providing professional, practical emotional or spiritual support to the families:

- Local Authority (Social Care Services)
- Voluntary Organisations i.e. British Red Cross, [Disaster Action](#)
- Faith Communities
- NHS
- Bereavement Counsellors
- Interpreters
- Police Family Liaison Officers
- The local authorities will co-ordinate voluntary organisations, faith community leaders and bereavement counsellors in offering immediate and long-term support to the bereaved.

The bereaved will need support through several different potentially traumatic processes including:

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- Providing items for identification
- Viewing of property, if required
- Viewing of deceased victims, if required
- Return of victims to family members
- Issue of death certificates
- Return of personal property
- The inquest
- Other judicial or public inquiries
- Memorial services
- Ongoing support

This [leaflet](#) should be used to signpost psychosocial support of those affected by a mass fatalities incident.

6.8 The Humanitarian Assistance Centre

The Humanitarian Assistance Centre (HAC) will provide a carefully co-ordinated support system and a place where information can be communicated to the bereaved.

Appropriate leaflets explaining the mortuary process and the legal framework of the inquiry and eventual disposal of human remains will also be available.

Further detailed information on the HAC activation / operation is contained within the local authority [Joint Emergency Response Plan Pt 3](#).

6.9 Disposal

6.9.1 Return of Remains

HM Coroner will determine if the deceased can be returned to family members following examination and once the identity and cause of death have been established. The inquest will be opened, and the Coroner will provide documentation allowing the release and burial/cremation of the deceased.

If a body is disrupted and it is likely that further remains may be recovered at a later stage, arrangements for release will be made in accordance with the wishes of the family concerned, as documented by their FLO.

Early consultation between the pathologist, FLO and family members will assist the understanding of the process.

6.9.2 No Remains

It may be that no body or identifiable human remains are found, (e.g. after some kinds of explosions or destruction by fire) or where a body cannot be released for disposal (e.g. as the result of CBRN contamination.)

In this case the Coroner may apply to the Home Office for an order under s.15 Coroners Act 1988.

6.9.3 Unclaimed Remains

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HM Coroner will decide the procedures in relation to deceased victims that are unclaimed. This may be the case if the family members cannot be identified or where they do not wish to claim the body.

The Local Authorities have duties under the Public Health Act 1936 to bury the deceased where there is no relative to claim them. This is known as a Paupers Funeral.

If the next of kin is identified, but does not wish to claim the deceased, they will still be advised of the time, date, and location of the funeral.

6.9.4 Foreign nationals

Foreign nationals killed in the county may need to be repatriated to their home country. If a deceased victim requires repatriation, HM Coroner will need to sign an 'Out of England' form.

The Foreign and Commonwealth Office (FCO) can respond and assist in fatality incidents involving foreign nationals who have been killed in the UK.

6.10 Property

Property will be dealt with by an exhibits officer following Police Disaster Victim Identification procedures.

6.11 Facilities Management and Resources

6.11.1 Water Supply and Effluent Disposal

All water supply arrangements must be agreed with water providers as the washing, post-mortem and embalming areas of the mortuary all require a water supply as part of the process. Wastewater from a mortuary area (except for domestic use, tea making, toilets, showers etc.) would, under the requirements of the water bylaws, be considered a Class 1 risk posing a major threat of contamination to the domestic water supply system.

6.11.2 Waste Disposal

Waste arising in the post-mortem room and mortuary will fall into five categories:

- a) Disposable, generally single use items such as paper shrouds, swabs, dressings, disposable protective clothing, and gloves.
- b) Human tissue and body fluids.
- c) Discarded syringes, needles, and other sharps.
- d) Discarded chemicals such as used fixative solutions.
- e) Clean waste arising from office activity.

Waste in categories a) to d) are a potential risk to health and offensive to those who are required to deal with it prior to final disposal. For safe waste disposal, arrangements for clear segregation and appropriate containment of the different types of waste, from source to final disposal point are essential.

Most items to be discarded come under the classification of clinical waste. Clinical waste is to be disposed of in accordance with current legislation and guidance.

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For operational detail and categorisation using colour coded containers, reference should be made to “The Safe Disposal of Clinical Waste” – Health Services Advisory Committee and Health and Safety Commission 1999.

Waste organic solvents will need to be stored to await disposal in accordance with current legislation.

All the above wastes are subject to control under the Environmental Protection Act 1990 by the Environment Agency.

Waste in categories a) to d) are a potential risk to health and offensive to those who are required to deal with it prior to final disposal. For safe waste disposal, arrangements for clear segregation and appropriate containment of the different types of waste, from source to final disposal point are essential.

Most items to be discarded come under the classification of clinical waste. For operational detail and categorisation using colour coded containers, reference should be made to “The Safe Disposal of Clinical Waste” – Health Services Advisory Committee and Health and Safety Commission 1999.

Waste organic solvents will need to be stored to await disposal in accordance with current legislation.

All the above wastes are subject to control under the Environmental Protection Act 1990 by the Environment Agency.

In effect two basic provisions are necessary to enable the safe management of waste. These are:

A sluice or sluices for material suitable for direct discharge to the foul water sewer (subject to the consent of the appropriate water authority);
Adequate secure storage space for material in bags, packages drums; or
Skips awaiting removal for incineration or deep landfill (subject to the consent of the waste regulation authority).

Waste management & cleaning services will be provided through the Kenyon International contract or a local authority contractor.

The requirements for water supply, effluent disposal and waste disposal will be provided by a portable tanking system as a part of the deployed demountable infrastructure.

6.11.3 Furniture

A comprehensive list of furniture requirements for the Emergency Mortuary will need to be compiled at an early stage.

If furniture is not supplied as part of the Kenyon agreement, it will be provided by Suffolk Constabulary/SCC. Any shortfall in requirements may be provided by a commercial supplier, see [ANNEX G](#).

6.11.4 Individual agency IT/Telecommunications & Office Equipment

Individual agencies will be responsible for provision of their telecommunications & IT equipment (hardware) for use within the facility. Consideration should be given to the following requirements:

- Mobile Telephones/chargers
- Laptops
- Access to secure networks
- Mobile Telecommunications Privileged Access Scheme (MTPAS) enabled mobile phones for initial use.
- Radios

6.11.5 Screening

To prevent media & public observation/intrusion the mortuary site will require screening to an appropriate height. This screening will be provided by Kenyon as part of the Suffolk County Council agreement. Consideration should be given to the potential intrusion of Unmanned Aerial Vehicles (UAV) including flying restrictions over the site.

6.12 Staff Health and Safety

The responsibility for the facility/structure health & safety aspects rests with Suffolk County Council, Kenyon and Suffolk Constabulary. Agencies working within the Emergency Mortuary are responsible for ensuring all procedures/processes are carried out in accordance with their agency's safe systems of work. A generic mortuary risk assessment is at [ANNEX H](#)

6.12.1 Radiation Safety

Providers and operators of radiography equipment are to ensure compliance with The Ionising Radiations Regulations 2017 and a safe system of work.

6.12.2 Security

The Police Mortuary Operations Manager will be responsible for security arrangements. Suffolk Constabulary or SIA accredited private sector security services may be used for security tasks.

6.12.3 Fire Safety

Following erection of a Kenyon demountable mortuary, Suffolk Fire & Rescue Service (SFRS) may be requested to provide support to Kenyon and Suffolk County Council. SFRS may assess and advise on the Fire Risk Assessment to provide partner organisations adequate means of escape, fire precautions and an emergency plan in case of fire. SFRS would be acting in an advisory capacity in respect of this request.

In operational use, the Mortuary Managers will ensure that fire precautions/first aid fire appliances are maintained.

All staff at the mortuary will be informed of the correct procedures in the event of a fire.

6.13 Staff Welfare

6.13.1 Accommodation

As part of the Kenyon contract, Suffolk County Council is required to make available hotel accommodation for the Kenyon team, so that they are located together throughout the period of deployment. Personnel will not be permitted to sleep within the mortuary.

Details of suitable hotels are shown at [ANNEX I](#).

6.13.2 Transport

The mortuary manager may need to arrange regular transport between accommodation and transport hubs/hotels to convey staff to the mortuary.

6.13.3 Staff Facilities at the Mortuary

The following facilities should be made available to staff:

- Changing facilities
- Lockable storage for clothing and personal property
- Showers and toilets
- Water fountains
- Rest area
- Smoking area (Outdoors)

Working areas will have heating and air conditioning in place to ensure the optimum temperature for working.

6.13.4 Catering

A facility to produce hot/cold meals and refreshments will be required in a separate structure on site. Suffolk Constabulary contract catering, the voluntary sector, or other commercial caterers will provide this service dependent on the scale of the incident.

There will be an area for staff to eat their food. Under no circumstances will food or drinks be consumed in the "wet area" of the Mortuary.

6.13.5 Staff Mental Welfare

Mental welfare is of paramount importance individual agencies will need to ensure the welfare of their personnel.

All staff should be made aware of the stress that can be caused by working in the mortuary and should report any concerns either experienced by themselves or apparent in others to a manager. The mortuary managers (facility) and (operational) will monitor sickness levels amongst staff which can be an indicator of stress.

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The mortuary managers (Facility) and (Operational) will ensure that all their staff take regular breaks away from the "wet area" of the mortuary. Such breaks will be compulsory.

All staff must be given the opportunity to be regularly briefed, de-briefed and receive psychological support at the end of each working period. This [leaflet](#) provides guidance for those that may be affected and requiring support.

Due to radiography equipment being used within the mortuary facility, special care should be taken in respect of vulnerable groups (e.g. pregnant women) working on site.

A Radiological Protection Advisor can advise on the use and location of radiological equipment.

6.13.6 First Aid

First-aid facilities will be provided for the Emergency Mortuary. The first-aid room will be in the 'neutral' area of the Mortuary site, so it is accessible both to Mortuary staff and visitors (such as grieving family members).

The mortuary managers (facility and operational) will liaise to ensure there is a qualified first aider available when the Mortuary is in operation.

6.14 VIP Visits

Requests may be made for visitors to inspect the Mortuary. The Mortuary management team will consider requests to visit the facility. Visits must not be made which affect the operational ability of the Mortuary or compromise the gathering and storage of evidence.

The Mortuary Facilities Manager will ensure that a log of all visitors is maintained.

Visitors will be given Health and Safety and fire evacuation advice. They will not be permitted to take photographs or other recordings whilst in the Mortuary.

7 WARNING AND INFORMING

Enquiries from all media sources relating to possible casualties or fatalities will be dealt with by the Suffolk Constabulary. As the Registrars and Coroners Services will be under considerable public pressure when a mortuary is opened, there will be a need for effective implementation of the Suffolk Resilience Forum Communications Plan.

There will be media interest in the procedures within the mortuary. No member of the mortuary team should be required personally to brief the media; the responsibility for this task should be handled exclusively by Suffolk Constabulary with appropriate consultation with multi-agency partners and the Media & Communications Cell (MCC) at the Strategic Coordinating Centre (StratCC). Nominating a Spokesperson will be in accordance with the SRF Communications Plan.

8 LEGAL ROLES AND RESPONSIBILITIES

8.1 HM Coroner

HM Coroner has a statutory duty to hold an inquest and must authorise all procedures relating to bodies and remains. HM Coroner has responsibility for the identification of deceased victims and chairs the Identification Commission

8.2 Local Authority

The local authority is responsible for establishing and equipping the mortuary, where necessary using mutual aid arrangements. It is responsible for alerting Social Services, the Environment Agency and calling on support from faith leaders and the voluntary sector to assist in the welfare provision for family and friends of the deceased.

8.3 Police Service

The police service is responsible for tracing missing persons, victim recovery, identification and investigating the incident. It will also manage the reception and the documentation of the deceased at the mortuary, initial security of the premises and provide Family Liaison Officers for investigative purposes, liaising as necessary with HM Coroners officers and mortuary managers.

8.4 National Health Service

Provision of support, staff and equipment if required.

8.5 Private Sector

Provide specific advice and support on request

8.6 Identification Commission

The purpose of the identification commission is to identify all bodies and remains and directs procedures.

9 COMMUNICATIONS (ICT)

9.1 A communications system will be required for the Emergency Mortuary upon activation. This will need to include a quantity of broadband & telephone access points.

9.2 Equipment capable of providing access to broadband/Wi-Fi /mobile phones will be arranged by Suffolk Constabulary IT department during establishment of the mortuary.

9.3 Telephone handsets, printer/scanner copiers all form part of the non-specialist equipment that will be supplied by the relevant partners or commercial lease once this plan has been activated, see **ANNEX G)**

9.4 With regards to police communications, any variances or additional requirements will be the responsibility of Suffolk Constabulary.

10 RECOVERY

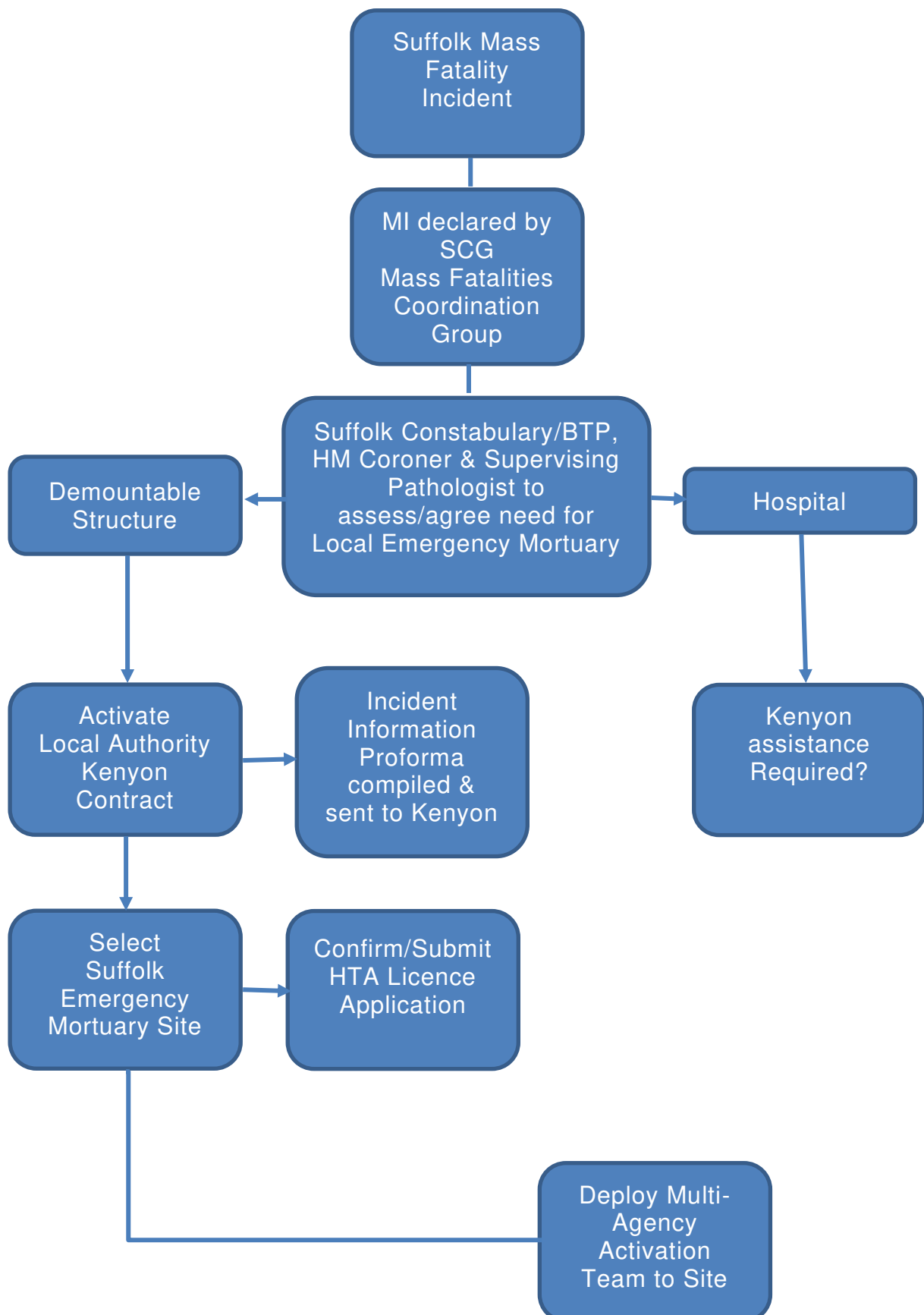
10.1 Deactivation of the Emergency Mortuary and hand back of the site, is a joint decision by HM Coroner, Suffolk Constabulary and the Supervising Pathologist.

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10.2 Once the decision is taken SCC and the local council will arrange for the appropriate actions to be taken. Particular emphasis must be paid to environmental health aspects and an Environmental Health Officer from the relevant district or borough local authority should be consulted before the local mortuary building or area is handed back.

10.3 A hand-over certificate should be signed by HM Coroner representatives, Suffolk County Council, District or Borough Council, Suffolk Constabulary, and Kenyon, prior to the owner accepting the return of the building or area. The deactivation and hand back process will be final and completed once all expenses have been agreed and paid by Suffolk County Council and relevant partner agencies.

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MORTUARY ACTIVATION ACTION CARD

***Client**

Disaster Recovery Services Activation Manual

Presented by:



PURPOSE:

The purpose of this Manual is to establish standard operating procedures and actions to be taken in the event of an Incident requiring activation of the Kenyon International Disaster Recovery Services (DRS). It includes actions to be taken by both your organisation and Kenyon, background information on Kenyon and DRS, and the tools to assist you during an Incident.

Emergency personnel should read, understand and provide training for all procedures in the manual to ensure everyone is properly prepared to appropriately respond during an incident. Performing exercises and training on these procedures will minimise confusion and keep all contact information current.

TABLE OF CONTENTS:

PROCEDURES FOR ACTIVATION AND OPERATION OF KENYON'S DISASTER RECOVERY SERVICES:

- | | | |
|----|------------------------------------|---|
| 1. | Actions Taken by Your Organisation | 4 |
| 2. | Actions Taken by Kenyon | 5 |

BACKGROUND INFORMATION ON KENYON INTERNATIONAL EMERGENCY SERVICES:

- | | | |
|----|----------------------------|---|
| 3. | Disaster Recovery Services | 5 |
|----|----------------------------|---|

APPENDIXES:

- | | | |
|----|---|----|
| 4. | Appendix A - Work Authorisation Agreement | 7 |
| 5. | Appendix B - Incident Information Form | 8 |
| 6. | Appendix C - Notes | 12 |

1. **ACTIONS TAKEN BY YOUR ORGANISATION:**

Immediate:

- Contact your 24-hour Regional Kenyon office to activate Disaster Recovery Services, which may or may not include the activation of the Family Assistance Centre (FAC):

Europe:

Phone: **+44 (0) 1344 316 650**

Fax: **+44 (0) 1344 316 699**

USA:

Phone: **+1 (281) 872 6074**

Fax: **+1 (281) 872 6086**

- Provide initial incident information to Kenyon (Appendix B).
- Your name and position with the company (this is generally a nominated person with authority to initiate activation).
- Company name.
- Your phone number along with other important contact names & phone numbers.
- Any known details regarding the incident, e.g. location and time of the incident, flight number, type of aircraft, number of pax/crew on board, route etc.
- Sign and fax back to Kenyon the "Work Authorisation Agreement" (Appendix A). Ensure this Authorisation contains adequate and relevant information to facilitate the required response
- Initiate and sustain a continuous open line of communication.

Ongoing:

- Ensure Kenyon is given the answers to the questions found on the Incident Activation Information form (Section 6 (Appendix B)) - note: do not duplicate this form if your company has already provided this information to Kenyon in activating other Kenyon Response Services.
- Coordinate with the Kenyon Site Coordinator at the incident site to determine the requirements for any follow up support.
- Identify a family point of contact for disposition of human remains and personal effects.
- Provide updated information on the incident to Kenyon as it becomes available.

2. ACTIONS TAKEN BY KENYON:

Immediate:

- Upon your call to Kenyon's 24-hour emergency number, Kenyon will react immediately to an incident by sending four (4) Site Coordinators to a location determined by your company; for example: to a location at/or near the incident site or the company headquarters. The Site Coordinators are there to guide, support, and coordinate immediate response.
- Activate personnel and systems as required to conduct specific emergency services on your behalf.
- Kenyon will send you a "Work Authorisation Agreement" (Appendix A).
- Activate Kenyon's home base Crisis Management Centre (CMC), which will act as an incident point of contact between you and Kenyon; sustaining a consistent open line of communication. The Kenyon home base CMC will stay activated until Kenyon operations are up and running at/or near the incident site or as long as deemed necessary. Depending on the magnitude of the incident and response, Kenyon may set up an Incident Management Centre (IMC) at/or near the incident site.

Ongoing:

- Kenyon will make all necessary arrangements to transport the Kenyon Disaster Response Team (DRT) and its equipment to the scene of the incident and other locations as per your authorisation.
- Coordinate with local authorities, medical examiner/coroner, and various government and local agencies of the countries involved in the incident (e.g. in the United States the National Transportation Safety Board (NTSB) would be involved in the investigation of any transportation incident).
- Liaise with the Family Assistance Centre for essential victim and family information
- Liaise with the Call Centre for updated information in regard to family reactions and travel.

3. DISASTER RECOVERY SERVICES:

Service Overview:

This service is actually several services that encompass the support of all the operational response and functional requirements at/or near the incident location. As every incident, even those that have similar characteristics, have unique challenges, the services are provided "on request" based on the demands of the incident and your requirements. Working closely with you, pre-incident, we quickly determine what initial services may be needed and then decide to add or reduce services as the response matures.

The full spectrum of services needed to address these issues includes the following:

- a. Incident management assistance: includes a senior Kenyon, who is one of the four Site Coordinators that are immediately deployed to assist using recent and various incident experiences, who will be on location with your Emergency Response Coordinator to advise and suggest course of action regarding conduct of operations and potential concerns. Can act as a liaison with other responding agencies at the local, state, and/or federal level

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- b. Search for and recovery of human remains.
- c. Establish, operate, and maintain a mass fatality incident morgue (including identification and processing of remains).
- d. Preparation, repatriation, shipping and final disposition of human remains (including the provision of caskets/coffins/urns).
- e. Search for and recovery of personal effects.
- f. Receipt, processing, association, and disposition of personal effects.
- g. Crisis Intervention Support Services - this programme provides specialists trained in crisis support that can work with our member's own specialists or act separately as a full crisis support team for your staff.
- h. Liaison with local and national agencies, embassies and foreign governments on behalf of members or families.
- i. Designing, planning and management of memorials.
- j. Critical Incident Stress Management - The silent victims of a crisis or emergency are often the responders and disaster workers. Our team of specialists understands that the key to appropriately assessing the impact of a critical incident is the identification of significant emotional or behavioural change.

5. **APPENDIX A - WORK AUTHORISATION AGREEMENT:**

KENYON INTERNATIONAL EMERGENCY SERVICES

WORK AUTHORISATION AGREEMENT

Serial Number: #####.1

In accordance with the Service Agreement between **CLIENT/AUTHORITY (Client)** and KENYON INTERNATIONAL EMERGENCY SERVICES, LTD. (Kenyon) effective **DD Mmmm YYYY**

Client/Authority hereby authorises Kenyon to commence:

1. Disaster Recovery Services
2. Disaster Human Services
3. Crisis Communications Services
4. The Kenyon International Call Centre
5. The Media Call Centre

The arrangements will include the provision of:

1. A Senior Incident Director
2. A Base Support Director
3. A/X First Responder(s)
4. The Kenyon-based Crisis Management Centre to support the administration and logistics of the incident

All associated expenses for Services rendered, supplies and equipment supplied by Kenyon will be billed in accordance with the Service Agreement as well as the current Kenyon Rate Schedule

Staffing levels and positions may change in the delivery of Services as required by the Senior Incident Director and in consultation with the Client

Any change in the scope of work specified in this Agreement may be mutually agreed to by an E-mail from the Client's authorised representative, written amendment or additional Agreement(s) signed by both parties without invalidating this Agreement

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Client/Authority Authorisation:

Kenyon Authorisation:

Signed: _____

Signed: _____

Name: _____

Name: _____

Position: _____

Position: _____

Date: _____

Date: _____

Return the signed Agreement as soon as possible to Kenyon by:

E-mail to: CMCX@kenyoninternational.com

or

Fax to: +44 (0)1344 316 666

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6. APPENDIX B - INCIDENT INFORMATION FORM:

This Form is normally completed by the Kenyon International full-time staff member who receives your activation call from your organisation; it may be used to activate one, two or all contracted Kenyon services.

The Form requests specific details relevant to the incident known at the time of activation such as: time of the incident/accident; departure airport; scheduled stops or connecting information; arrival airport; flight number; number of passengers/crew; survivors; fatalities; etc. All immediate known information about the incident should be noted and provided to Kenyon.

As additional information has been confirmed, updates to the initially provided report should be noted and faxed or E-mailed to Kenyon.

GENERAL INCIDENT ACTIVATION INFORMATION

Person Reporting the Incident:

Company/Authority Name:

Parent Company:

First Name:

Last Name:

Title/Position:

E-mail Address:

Country Code: +

Landline Phone:

Mobile Phone:

Will you be the point of contact for incident related questions: Yes ☐ Same contact as above

If No, who will be the contact for the incident:

New Contact information:

First Name:

Last Name:

Title/Position:

E-mail Address:

Country Code: +

Landline Phone:

Mobile Phone:

Are you calling to:☐ **Drill/Exercise with Kenyon**

If this is a drill/exercise, confirm it is a drill/exercise and complete the form as part of the training

☐ **ALERT Kenyon**

☐ **ACTIVATE Kenyon**

Which services are you requesting to have ACTIVATED?:

- ☐ Call Centre
☐ Media Call Centre
☐ Disaster Recovery Services (Family Assistance Centre, Special Assistance Team, Mental Health)
☐ Disaster Recovery Services (Search & Recovery, Morgue, ID, Repatriation, Personal Effects)
☐ Crisis Communications
☐ Disaster Services (Advisory Service)
☐ Emergency Operations Support Centre (EOSC)
☐ Repatriation
☐ On Demand Services (circle each service requested):

**Incident Coordination Team
Missing Persons Centre**

**Personal Property and Evidence Services
Legal Services**

☐ **Other (please describe what you want:**

CONTINUE TO COMPLETE THE AVIATION-SPECIFIC ACTIVATION INFORMATION BELOW

AVIATION-SPECIFIC INCIDENT INFORMATION

Time of Incident at Location:

Date: _____ Time: _____ ☐ Local Time ☐ UTC

Location of Incident:

City: _____

Airport Code: _____ (IATA/ICAO if applicable)

State: _____ County: _____

Brief Description of Incident:

Routing of Flight (Origin, Scheduled Stops, Destination)

What is the Flight Number:

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Flight Departure Airport:

Scheduled Departure Time:

Flight Intended Arrival Airport:

Scheduled Arrival Time:

Any Connection Stops?: Yes or No (circle)

Did Flight Number change?: If Yes, New Flight Number:

If Connection Stop:

Flight Connection Airport:

Other Particulars:

Number of Passengers?:

Number of Crew/Employees?:

If they are KICC Member and activating the KICC ask:

Do you have a Preliminary Unconfirmed Passenger List?: Yes or No (circle)

If Yes, please send immediately to: kicc@kenyoninternational.com

Any Known	Passengers	Crew	Other
Survivors			
Injured			
Fatalities			

What is the Company's Contact Name and Telephone Number for Media calls?

Name:

Country Code:

Telephone Number:

ANYTHING ELSE KNOWN

Is there any additional information about the incident or circumstances you can provide?

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Kenyon Person Receiving the Incident Report:

First Name:

Last Name:

Title/Position:

E-mail Address:

Country Code: +

Landline Phone:

Mobile Phone:

7. APPENDIX C - NOTES:

[illegible]

LOCAL EMERGENCY MORTUARY SITES

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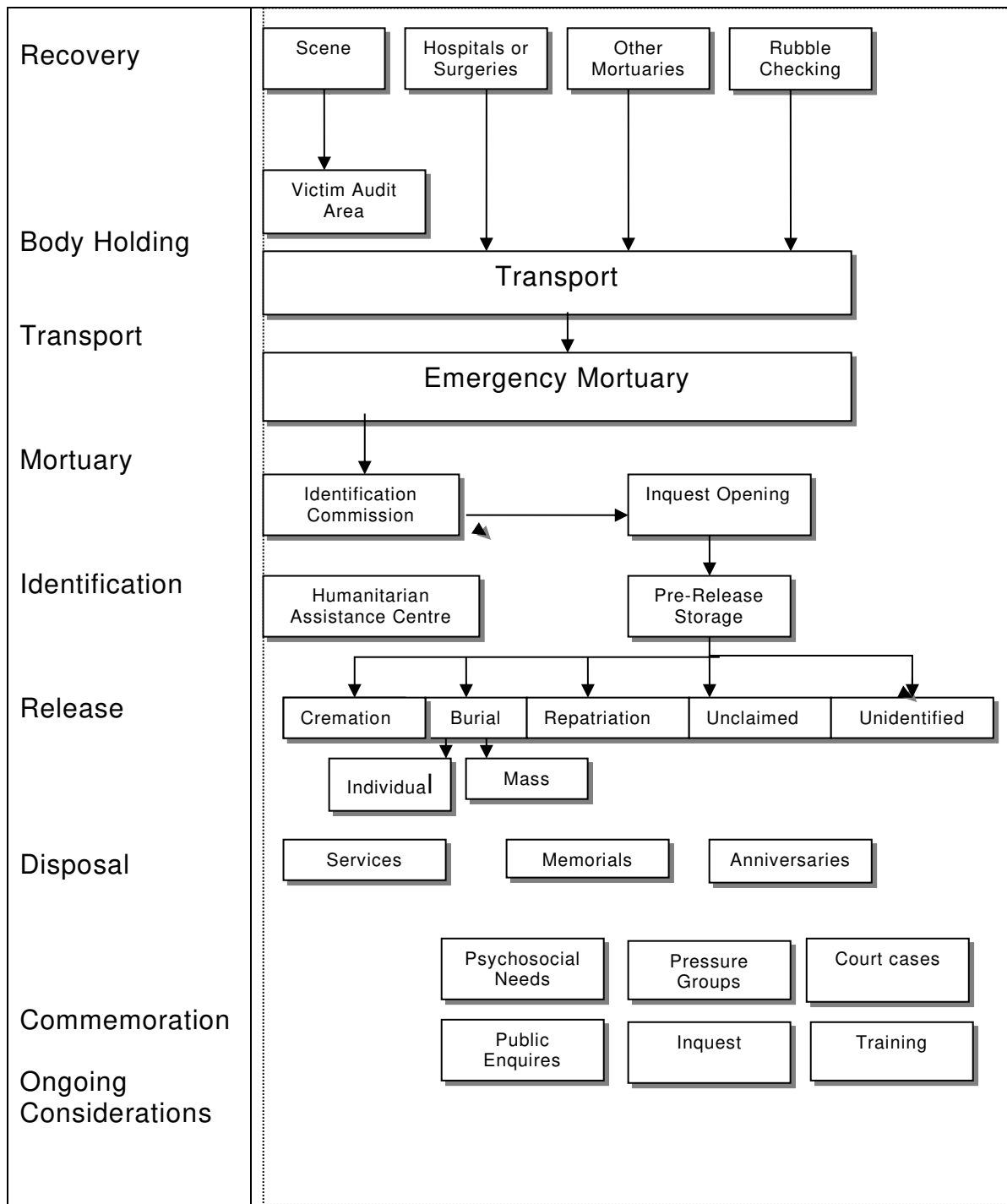
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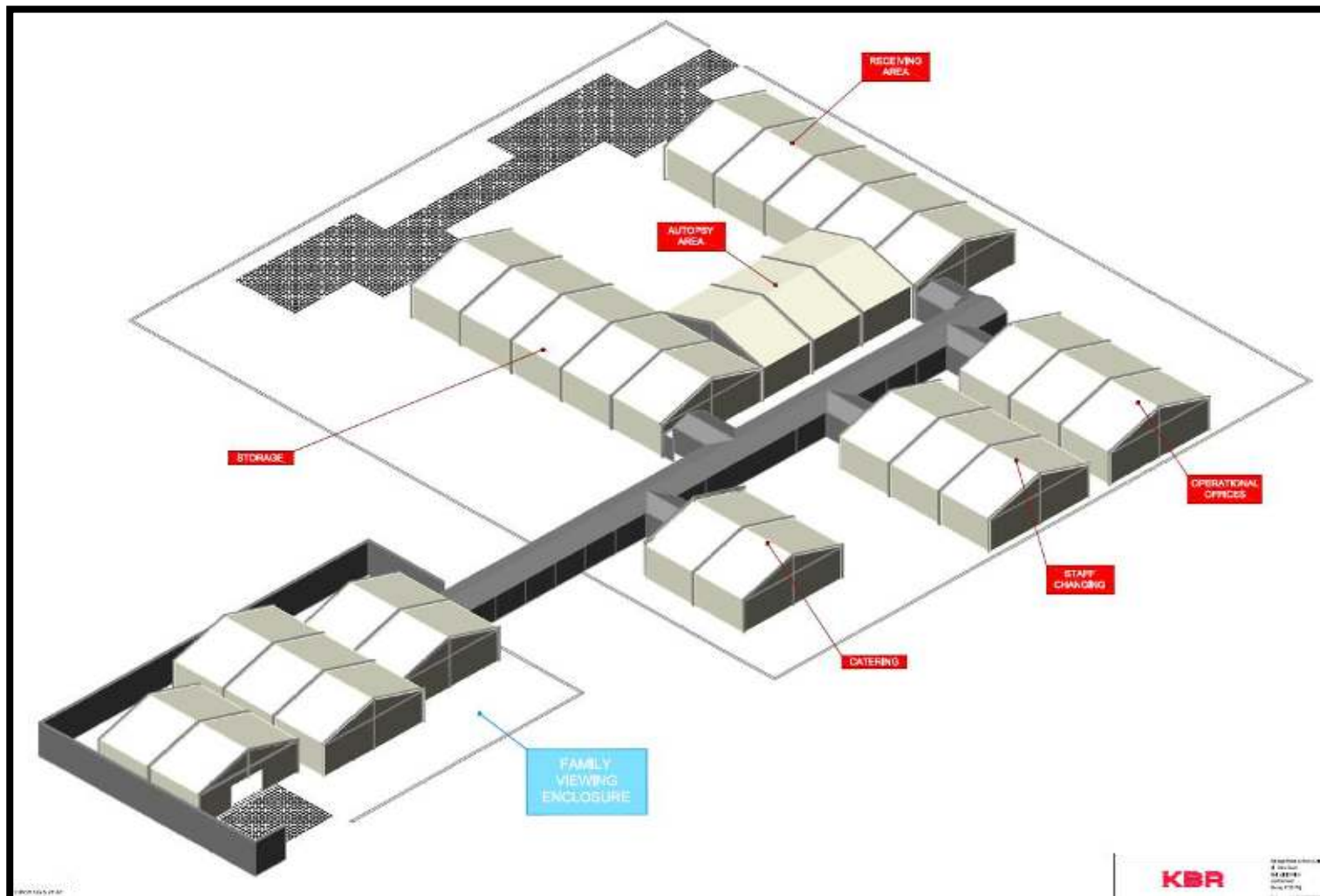
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MASS FATALITIES PROCESS OVERVIEW

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1. The overview above identifies the processes that are required in dealing with a Mass Fatality Incident.
2. Victims and remains may be recovered from places other than the scene of the incident, for example hospitals and other mortuaries. They should be transferred to a single mortuary where the process of identification and examination will take place. Care should be taken to ensure there is no cross contamination of forensic evidence in the event of multiple crime scenes. The methodical recovery of human remains from the disaster site is vital to the mortuary process.
3. Rubble checking may be an important function in searching for human remains; this will be carried out at the scene and at identified site clearance locations.
4. The victim audit area is an area designated for retaining the deceased victims in one location prior to transportation to the mortuary (no post-mortem procedures or examinations are undertaken at the site). If necessary Kenyon can provide refrigerated storage for this capability.
5. The mortuary provides a suitable facility where careful examination of the body can identify victims, obtaining evidence that can be matched with the data obtained by the ante-mortem team and casualty bureau. The pathologist will establish the precise cause of death.
6. The Identification Commission establishes the identity of all recovered bodies and any human remains. The Coroner will decide whether there is sufficient certainty to allow the release of the body.
7. Each body will normally be released to the next of kin as soon as identity is certain: it is unlikely that there will be any need to wait until the end of the whole identification process. However, the process may be delayed if the bodies are disrupted and the remains are to be separately identified and reunited. In this case families should be given three options:
 - To wait until all remains are recovered and identified
 - To hold the funeral and be informed when further remains are identified
 - For a funeral to take place but no further contact made after that
8. The purpose of the inquest is to establish the identification of the deceased and to ascertain when, where and how they died. It is not about apportioning blame or making findings of criminal liability against individuals. There may be a long interval between the incident and the inquest depending on the nature of the enquiries. There may be no inquest if the Lord Chancellor institutes a public judicial inquiry (s. 17A Coroners Act 1988, as amended).

SUGGESTED LAYOUT FOR A LOCAL DEMOUNTABLE MORTUARY



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CULTURAL AND FAITH GUIDANCE

Guidance on faith and cultural practices is given below, this should be adhered to wherever possible so as not to offend different groups.

Christianity:

There are no prescribed requirements concerning the treatment of Christian bodies although family and friends of the Roman Catholic faith would require the Sacrament to be administered to their loved one by a priest.

Judaism:

Correct identification of the body of a husband is very important for the widow in Jewish law. Parts of a body must be treated with the same reverence accorded to a whole body. If it is possible, they should remain with the corpse. Jews believe that all parts of a body should be buried. Orthodox Jewish law forbids cremation.

Before the body is viewed the eyes should be closed and the jaw tied. Arms should be placed at the sides of the body with the fingers straight. Where possible the body should be placed with its feet towards the door. A body should be covered with a plain sheet and not a Christian shroud or in a coffin with a cross. The body should be attended at the time a relative or friend arrives to view.

Jews wish to bury their deceased with 24 hours of death. Family members who do not understand the complexity of Coroners and Police enquiries may be distressed at any delay.

Islam:

Where possible, deceased Muslims should be kept separate from other religions especially when body viewing is carried out. Bodies should be on clean surfaces covered with a plain sheet. The head of the deceased should be turned to the right shoulder, then position the face pointing to Mecca (south-east). Any body parts must be treated with the same respect as if it were a complete body. Mortuary personnel attending with relatives and friends should wear gloves if they must touch the body in their presence.

Comforting friends and relations by way of touching or hugging the opposite sex is not allowed, except for blood relations. Post-mortems are not allowed in Islam except where law demands it.

Muslims always bury deceased persons, cremation is forbidden.

Hindu:

Deceased body should be straightened. Mortuary personnel attending with relatives and friends should wear gloves if they must touch the body in their presence. It should be noted that any jewellery on the deceased will be of religious significance and should not be removed without consent. Where it is removed the family may require it to be re-instated before the body is moved. The widow and the eldest son may shave their heads in mourning. As a rule, the dead are cremated (although small children and low castes are usually buried).

Sikh:

Deceased body should be straightened. Mortuary personnel attending with relatives and friends should wear gloves if they must touch the body in their presence. It should be noted that any jewellery on the deceased will be of religious significance and should not be removed without consent. Where it is removed the family may require it to be re-instated before the body is moved. Cremation is the preferred method of the disposal of the body.

Buddhism:

The most important consideration when a Buddhist dies is that a Buddhist priest is informed as soon as possible and should preferably be of the same school of Buddhism as the deceased.

EMERGENCY MORTUARY ADDITIONAL RESOURCES

Requirement	Potential Provider
On site emergency mortuary catering	Sodexo - https://uk.sodexo.com/food-services--catering/business-industry.html Compass Group - https://www.compass-group.co.uk/meet-the-family/defence-government-services
Office Equipment i.e. photocopier/printer	Paragon - https://www.paragon-ds.co.uk/#sthash.Lltcb7m9.dpbs
Furniture provision i.e. desks, chairs cabinets/lockers	- CMS - https://cmscambridge.co.uk - Online Furniture Hire https://www.onlinefurniturehire.com/
Telecommunications I,e, landline/satellite leasing provision inc Broadband/router/ WiFi	- Satphone - http://www.satphone.co.uk/inmarsat-isathub-rental - Ashbury Satcom https://www.ashburysatcom.co.uk/product-category/satellite-rentals/ - Applied Satellite Communications - https://www.theastgroup.com/uk
First Aid Fire Appliances/health & safety signage/FAKs	http://www.skfireprotection.co.uk/?gclid=CN-Ay7H94M0CFYdAGwodxLoNpw#!event-fire-safety/cgr0 - Safety Signs for Less https://www.safetysigns4less.co.uk/Safety-Signs

RISK ASSESSEMENT (GENERIC)

Ref No	Work Activity	Hazards Identified	Control Measures Required	In Place Y/N	Risk H-M-L	Further Required? When/Who
1.1	Establishing a disaster mortuary.	All employees at potential risk of all hazards associated with a disaster mortuary environment and level of risk increased through unclear chain of command and unclear health and safety responsibilities etc.	1. Areas of responsibility to be established and clearly allocated within the local emergency plan to ensure when disaster mortuary is requested all roles/responsibilities and reporting lines are in place. The risk assessment applies only to police employees within a disaster mortuary. 2. All other employers (Local Authority, Council, Funeral Directors etc.) to undertake a risk assessment for their employees' work activities within the disaster mortuary environment. 3.		M	
1.2	Potential injury to Mortuary staff from unknown sources of contamination.	Potential for injury to persons from handling bodies, which have been subject to CBRN contamination.	1. Mortuary Operations Manager to establish if there is any suspicion of bodies or body parts being subject to CBRN contamination before proceeding with Mortuary operations.		M	
			2. If victims have been subjected to CBRN attack, Police			

Ref No	Work Activity	Hazards Identified	Control Measures Required	In Place Y/N	Risk H-M-L	Further Required? When/Who
			Mortuary Manager would withdraw Police Mortuary Operatives and seek specialist advice before proceeding further.			
2.1	Access to Disaster Mortuary	Potential for injury to officers from infection. Potential for injury to officers from moving vehicles.	1. Police Mortuary Manager to establish effective infection control with identified infection control team. 1. Designated area for vehicles is clearly identified. Vehicles do not operate outside this area. 2. All officers aware of vehicle operating area. 3.		L	
2.2		Exposure to traumatic conditions	1. Security measures imposed to control access to mortuary. 2. Accredited personnel only to be allowed access. Police officer to log and control personnel entering or leaving premises. 3. All Police Mortuary Operatives will be briefed on risk identification categories and necessary control measures prior to deployment. 4.		M	
3.1	Exposure to environment in Disaster Mortuary Exposure to environment in Disaster Mortuary (cont'd)	Inappropriate facilities and building accommodation for disaster mortuary. Trauma/stress through exposure to bodies and body parts.	1. Police Mortuary Manager to agree suitable premises for disaster mortuary facilities with Local Authority Emergency Planning Officer, and venues to be documented in Local Emergency Plan. 1. Suitability of officers assessed prior to officers receiving training as Police mortuary operatives and immediately prior to deployment via medical questionnaire – Appendix B, subject to medical diagnosis by OHU. 2. Specific training package delivered to all officers undertaking body recovery work.		L H	 Constant checks to be made during running of Disaster Mortuary/Disaster Police

Ref No	Work Activity	Hazards Identified	Control Measures Required	In Place Y/N	Risk H-M-L	Further Required? When/Who
	Stripping and searching bodies (cont'd)	Infection as a result of poor personal hygiene standards/practices.	1. Smoking, drinking, eating, chewing and applying cosmetics is forbidden anywhere in the mortuary or post mortem areas. 2. Personal belongings other than spectacles and hearing aids etc. must not be taken into the post mortem area. Dedicated first aid box available in post mortem area. On leaving post mortem area, all unprotected skin surfaces will be washed. 3. Spectacles worn for work to be thoroughly cleaned by officer prior to leaving post mortem area. 4. Reusable clothing to be placed in dissolvable bag and securely sealed and the collected and cleaned by the contract cleaning company. 5. Reusable protective equipment to be cleansed and disinfected prior to reuse. 6. Disposable protective equipment to be sealed in correct colour coded bag before inserting into bins/skips prior to incineration. 7. Personal hygiene consumables freely available in sufficient quantities in allocated rest/washrooms.		M	
	Stripping and searching bodies (cont'd)	Infection as a result of poor workplace hygiene standards/practices.	1. Supervising Pathologist to brief Mortuary Team on health and hygiene issues. 2. Good housekeeping standards observed throughout the mortuary. 3. Spillage of fluids likely to cause infection cleansed with detergent and area then disinfected. Adequate quantities of suitable disinfectants and		M	

Ref No	Work Activity	Hazards Identified	Control Measures Required	In Place Y/N	Risk H-M-L	Further Required? When/Who
			4. cleaning materials available and provided by Sheffield City Council – Medico Legal Centre. 5. Cleaning regime will be implemented following consultation with Environmental Health Officer and Supervising Pathologist. 6. Procedures supported by appropriate documentation relating to storage/disposal of contaminated waste and clinical sharps will be implemented following consultation with Environmental Health Officer and Supervising Pathologist.			
	Stripping and searching bodies (cont'd)		1. Clean activity areas, transition areas and dirty activity areas clearly identified to reduce/limit infection control. 2. Workflow organised to minimise or avoid unnecessary movement. 3. Changing/shower facilities located in transition area between post mortem and clean activity areas. 4. Operational practice to ensure all work with bodies, organs and unfixed specimens is strictly limited to the dirty activity areas. 5. Specimens will be brought out of the post mortem room in suitable containers and have had sufficient surface cleaning and decontamination.	M		
		Ill health relating to the use of chemicals necessary for infection control and body preserving	1. Embalming and body preserving methods only undertaken by appointed Funeral Directors. All other chemicals used within the mortuary		L	

Ref No	Work Activity	Hazards Identified	Control Measures Required	In Place Y/N	Risk H-M-L	Further Required? When/Who
		processes.	2. environment must be used in accordance with manufacturers' instructions. COSHH assessment undertaken and information sheets available for chemicals used by Police personnel. 3.			Supervising pathologist will provide chemical safety data sheets and police force will prepare COSHH assessment.
4.3	Body Identification	Accidental exposure to X-Ray radiation. Slips, trips as a result of cables etc. trailing across floor. Falls as a result of the use of stepladders by photographer. Slips as a result of wet floors in dirty area.	1. Radiologists operate X-Ray equipment and provide appropriate on-site advice to SYP employees. X-Ray equipment located at safe distance from other activities. 2. Protective screens erected around equipment whilst it is in use. 3. Additional risk assessment programme to be undertaken on X-Ray screening in potential terrorist attacks to ensure adequate control measures are in place. 4. Temporary cables etc. are covered with gaffer tape. 1. Stepladders will be wide based and will be held by an assistant. 1. Fluid spills cleared immediately as detailed previously. 1.		L L L L L	
		Electrocution as a result of utilising equipment necessary for body identification.	1. Residual Current Device is used on all temporary supplies.		L	

Ref No	Work Activity	Hazards Identified	Control Measures Required	In Place Y/N	Risk H-M-L	Further Required? When/Who
4.4	General/all related activities associated with Temporary Mortuary.	Physical ill health and stress due to rigours and pressures of work.	1. Police Mortuary Manager to monitor sickness levels. 2. Police Mortuary Manager to measure working time and, as appropriate, ensures compliance with working time directive. 3. Welfare support and counselling available through Occupational Health Unit. 4. Accidents/ill health reported in line with SYP policy.		M	
		Inability to administer first aid to injured persons before medical assistance is available.	1. Police Mortuary Manager to ensure suitably trained persons are available for rendering first aid. 2. Police Mortuary Manager to ensure sufficient first aid equipment is available.		L	
		Injuries sustained as a result of being in temporary mortuary environments.	1. All injuries to be reported to Police Mortuary Manager and appropriate SYP documentation on accident reporting to be completed.		L	
5.1	Identifications/viewing of a body by family/friends of deceased.	Potential infection risk for Police Personnel and family/friend of deceased.	1. Prior to any viewing taking place, the Police Mortuary Manager will make an assessment of the hazard classification state of the victim and instigate appropriate control measures – i.e. hazard Cat. 4 risk group can only be viewed only in containment area.		L	
		Violent reaction to experience, which may be directed against officers.	1. The Police Family Liaison Officer will be present at all viewings/identifications. The Police mortuary operatives will not take part in this process. 2. Police Family Liaison Officer supervising the viewing will advise relatives regarding any possible health risks from touching/kissing the body. Persons coming into physical contact with the body will be encouraged to wash their hands before leaving		L	

Ref No	Work Activity	Hazards Identified	Control Measures Required	In Place Y/N	Risk H-M-L	Further Required? When/Who
			3. the mortuary.			
		Trauma to operatives preparing the body for viewing coming into direct contact with the family.	1. Police Mortuary Operatives to be responsible for transportation of body to and from viewing identifying area only but not involved with the viewing/identification process.		L	

LIST OF LOCAL HOTELS

Bury St Edmunds	Ipswich
Dragonfly Hotel Symonds Road Moreton Hall Estate Bury St Edmunds Suffolk IP32 7DZ Tel: 01284 760884	Belstead Brook Muthu Hotel Belstead Road Ipswich Suffolk IP2 2HB Tel: 01473 684241
All Saints Hotel Fornham St Genieve Bury St Edmunds Suffolk IP331DL Tel: 01284 706777	Holiday Inn The Havens Ransomes Europark Ipswich IP3 9SJ Tel: 01473 272244
Best Western Priory Hotel Mildenhall Road Bury St Edmunds Suffolk IP32 6EH. Tel: 01284 766181/03330 034278	Novotel Greyfriars Road Ipswich IP1 1UP Tel:01473 363800
Ravenwood Hall Country Hotel & Restaurant Roughham Bury St Edmunds Suffolk IP28 9JA Tel: 01359 270345	Ufford Park Woodbridge Hotel Golf & Spa Ufford Park Woodbridge Suffolk IP12 1QW Tel: 01394 383555
The Abbey Hotel 35 Southgate St, Bury St Edmunds, Suffolk IP33 2AZ Tel: 01284 762020	Seckford Hall Great Bealings Woodbridge Suffolk IP13 6NU Tel:01394 385678

GLOSSARY

Abbreviation	Description
BRC	British Red Cross
BTP	British Transport Police
CBRN	Chemical Biological Radiological Nuclear
CCR	Contact and Control Room
CLT	Corporate Leadership Team
DVI	Disaster Victim Identification
EPDO	Emergency Planning Duty Officer (Local Authority)
FCO	Foreign and Commonwealth Office
FFRC	Family & Fiends Reception Centre
FLO	Family Liaison Officer
HAC	Humanitarian Assistance Centre
HTA	Human Tissue Authority
LGV	Large Goods Vehicle
MFCG	Mass Fatalities Coordination Group
MOD	Ministry of Defence
MCC	Media and Communications Cell
DLUHC	Department for Levelling Up Housing & Communities
MTPAS	Mobile Telecommunications Privileged Access Scheme
UK HSA	UK Health & Security Agency
PPE	Personal Protection Equipment
RAIB	Rail Accident Investigation Branch
RICT	Rail Incident Care Team
SCC	Suffolk County Council
SIM	Senior Identification Manager
SIO	Senior Investigating Officer
STAC	Scientific and Technical Advice Cell
wtw	What 3 Words