



Healthcare Mass Fatality Planning Tip Sheet

January 2022

The Northwest Healthcare Response Network (NWHRN) continues to work with local and state response partners to prepare and monitor for surges that may threaten to overwhelm regional healthcare system and facility-level morgue capacity. This Healthcare Mass Fatality Planning Tip Sheet is designed to support facilities and organizations in their planning efforts and as a reference if a surge in fatalities is anticipated. State and regional responses to a variety of man-made and natural hazards continues prove that organizations are most resilient and effective when partners are pro-active in their planning efforts, share and learn from each other, and most importantly, work together.

Planning for a Surge in Fatalities

Fatality surges that may impact healthcare could be caused by a variety of scenarios: mass casualty incidents; regional disruption to transportation, communications, or energy infrastructure; impacts to body storage vendors; high consequence infectious disease outbreaks and others. Western Washington is unlikely to be significantly impacted by local surges, however; regional impacts to critical infrastructure or catastrophic incidents could overwhelm healthcare and morgue operations. The NWHRN will monitor healthcare morgue capacity when surges are probable. However, individual facilities and health systems should incorporate mass fatality scenarios into their ongoing planning efforts.

Hospitals should reference the following documents and consider the following facility-level assumptions, vulnerabilities, limitations, and strategies in their planning efforts:

- Guidelines & Reference Documents:
 - [Comprehensive Emergency Management Plan, Emergency Support Function 8 Appendix 3, Fatality Management Plan](#)
 - [Local health jurisdiction \(LHJ\)](#) and/or emergency management (EM) mass fatality plan
 - [California Hospital Mass Fatality Planning Checklist](#)
 - [King County FAQ for Hospitals Regarding Fatality Surge Management](#)
- Understand morgue surge capacity. Consider ways to increase capacity, [such as creating shelving](#) and/or converting non-morgue spaces into additional decedent storage, etc. Identify vendors to rent/purchase refrigerator trailers or other temporary storage spaces.
- Identify multiple areas for staging or holding body collection points (refrigerated trailers) to increase capacity. Consideration include security, privacy, maintenance, refueling, and additional logistical/resource needs.
- Source and store ruggedized [disaster body bags](#) to build an internal stockpile. Disaster body bags allow facilities to store bodies for longer durations and in less-than-optimal conditions.
 - Consider lifecycle of stored disaster body bags and other related supplies to establish a replacement schedule or evaluation period.
- Surge staffing plans (create a pool of trained staff and/or volunteers)
 - Create/update job action sheets. Train staff/volunteers to fulfill following tasks: family notification, paperwork, and moving decedents.
- Logistical considerations for integrating outside resources (such as DMORT or strike teams).
- Identify internal triggers to request external morgue assistance (ex: refrigerated trailers and surge morgue staff). Consider forming a facility interdepartmental fatality management team to review plans.

- Work with the NWHRN, your LHJ and EM agencies, and Medical Examiner/Coroner office to identify decompression strategies and share organization-specific internal thresholds. This will allow for greater integration of facility, local, and regional fatality management planning efforts.

Non-hospital healthcare should consider the following facility-level assumptions, vulnerabilities, limitations, and strategies in their planning efforts:

- Understand how impacts to critical infrastructure and mass fatality incidents (such as a pandemic) could affect decedent retrieval from your facility. Notify EM / LHJ, NWHRN, law enforcement, and DSHS Residential Care Services if your facility requires decedent decompression.
- If your facility may need to temporarily store bodies, consider pre-identifying staff/volunteers to oversee decedent operations.

During a Fatality Surge

Healthcare organizations experiencing a surge in fatalities that may overwhelm morgue operations should consider steps to prepare for direct and indirect impacts:

- Ensure continued communication with the NWHRN and local response partners throughout the incident. Notify the **NWHRN Duty Officer at 425-988-2897** at the first indication of anticipated or immediate need for decedent decompression.
- Reach out to local funeral homes about supporting decedent transportation and storage.
- Anticipate that there could be a delay when renting refrigerator trailers or other temporary storage spaces.
- Ensure continued communication with any decedent storage vendor(s) to understand the scale and scope of the incident.
- Families may be unable to retrieve decedents for some time, especially those displaced by the incident. Coordinate with local response agencies to support families claiming decedents.
- Activate your interdepartmental fatality management team. Ensure close communication and coordination with regional response agencies.
- Participate in NWHRN-hosted response calls with healthcare systems and response agencies. Ensure provision of mortuary capacity data is shared with WA DOH, NWHRN, and LHJs/emergency management agencies when requested.
- If a hospital has exhausted their morgue space, and local funeral homes and body storage facilities, such as First Call Plus are unable to store decedents, hospitals may contact the Kitsap Coroner's office at 360-337-7077 to coordinate decedent storage at the Kitsap facility. Hospitals will need to provide transportation and will remain responsible for the decedent. The decedent's name and hospital responsible for the decedent must be clearly indicated on the outside of the body bag. To conserve regional capacity, hospitals are asked to store bodies at the facility for as short a time as possible.

Considerations of Regional Vulnerabilities and Strengths

Regional hazards, such as a large earthquake, could result in an overwhelming number of decedents and significant disruption to decedent processing. Looking toward the future, healthcare systems should consider regional vulnerabilities and strengths in their planning efforts, especially in how they could impact system-level morgue operations:

- Healthcare organizations, medical examiners, coroners, and various response agencies relying on the same vendor to support decedent storage and decompression.
- This single statewide vendor operates large storage facilities, often located far distances from hospitals.
- A region-wide or state surge in decedents would likely tax the vendor's ability to pick up and transport bodies fast enough to meet demand.

- Hospitals have limited morgue capacity, which means a regional incident could rapidly overwhelm morgue operations.
- The WATrac system, administered by the NWHRN, can support decedent tracking during MCI incidents.
- In response to COVID-19, statewide medical examiners, coroners, public health, and healthcare representatives developed surveillance processes to better understand healthcare morgue and refrigeration capacity.
- The NWHRN maintains strong local, regional, and statewide coordination and collaboration.

How to reach NWHRN

If you anticipate or are currently experiencing impacts from a surge in fatalities, do not hesitate to reach out to the NWHRN team so we can support you.

Support from NWHRN

- 24/7 duty officer line - **Duty Officer at 425-988-2897**
- Regular NWHRN Coalition coordination calls
- District coordination meetings. These are held generally every month and are a good opportunity to discuss plans and concerns outside an immediate response. [Check the calendar](#) for the next district meeting or [contact your district coordinator](#)