



FEMORS NewsGram

Vol. 4, No. 3

Fall 2006



COMMANDER'S MESSAGE



Since the last NewsGram in June we have all been holding our collective breath for this year's Hurricane Season. So far, so good; so keep fishing! (Yes, those are Canadian Pike and Bass.)

We are making best use of the slack time to continue development of the DPMU, FOG and future budgets.

The DPMU Team has come together very well as a cohesive team and we have all learned by trial and error that assembling the myriad items into kits is a lot easier said than done. More on that later.

Let's keep our fingers crossed that things stay quiet.

Be proud of your patience and remember: They also serve who stand and wait.

Larry

DPMU DEVELOPMENT

Logistics Chief, Jonathan Scott has completed virtually all the ordering for the portable morgue equipment. The Command Trailer will be delivered in November and a few other items are on back order but the vast majority of them are present and accounted for. This was a significant feat of managing nearly a thousand items from dozens of vendors while maneuvering state and University purchasing rules.

The DPMU Team held workshops in August and September to begin the process of assembling the equipment into the many kits required. Two members have been added to the team, Caryn Chasteen (Mortuary Officer) and Angel Casares (IR Computer Specialist).

Finding out what fits, and what does not fit, into the 36 inch tote boxes was a learning experience.



DPMU Team organizing kits

Working in the heat was also a learning experience but that's what the Team will face in a real event.



Staying hydrated a priority

For many reasons, a color code has been developed to label containers for the various elements of the portable morgue. The color scheme is:

- | | |
|--------|-----------------------|
| Green | Morgue |
| Yellow | FAC |
| Blue | Disaster Site |
| Tan | Information Resources |
| Orange | Logistics |
| White | Command |



This will make it easier for the DPMU Team to arrange equipment kits in groups distinguished by function and rapidly meet the needs for any request for additional supplies or equipment during a deployment.

The process for requesting supplies and equipment will be spelled out in greater detail in the (under revision) Field Operations Guide (FOG) but the gist of it is that requests go to the Section Leader who creates a requisition. The Section Leader passes it up through the Branch Director and Operation Chief for approval and delivery to the Logistics Section for filling the order. The need for this process will become self-evident as tracking of supplies consumed is what generates all reordering actions.

Transporting the Ferno autopsy tables and Mity-Lite utility tables required the building of custom containers not commercially available. Using 3/4" plywood, aluminum structural angles, and lots of nuts, bolts, and screws, Jonathan Scott and Larry Bedore spent several weekends building boxes to hold multiple tables.



Dueling Drills!



Ferno Tables

The Ferno boxes hold 8 tables while the Mity-Lite boxes hold 15 tables each. Each loaded container weighs

over 1,000 lbs but is easily maneuvered with the forklift or pallet jack.



Mity-Lite Tables

The command trailer has been delivered to the company that will install the radio, computer server, work counters, galley, bathroom and bunk bed equipment.



After signage is applied, completion date should be near Thanksgiving

The next DPMU Team workshop in December will focus on actually setting up the morgue processing stations including the PVC partitions and equipment used in each section. This will be a dry run for the annual training session that will use the DPMU for the morgue processing exercise. Hopefully, this can be scheduled during cooler months.



Palletized kits for transport

The target date of January 2007 for being ready to deploy the DPMU if

needed is still on track although there is still much to learn about how specialized equipment is set up and put to use.

MEDICAL EXAMINER FORUM

In July, a first of its kind planning forum was conducted for the 4 southernmost Medical Examiner Districts. Earlier, member Norm Kassoff had made personal visits to each of the Medical Examiners in Monroe, Dade, Broward and Collier counties to explain FEMORS in greater detail. Common themes came to light from the individual office questions that arose and included recognition of the need to understand how adjoining Districts could aid each other in less than declared disaster situations.

FEMORS Go Team hosted the regional meeting in Miami for the four ME offices and related disaster planners from those counties. In-depth examination of capabilities and limitations was made to illustrate how Medical Examiners could be supported by FEMORS personnel and equipment resources to augment their normal operations.



The positive and well received results of that collaborative effort indicate that additional regional meetings with groups of Medical Examiner Districts will be beneficial. More such meetings will be facilitated in the future.

DIRTY-BOMB EXERCISE

Following the multi-District forum, Dr. Joshua Perper, District 17 Medical Examiner in F. Lauderdale, requested that FEMORS host a table-top/workshop exercise for ME staff and related agencies such as HazMat, law enforcement and Broward County EOC staff.

That session was arranged by Go Team members Norm Kassoff, Tommy Ralph and Russ Chisholm.



Tommy Ralph (left) and Norm Kassoff (right)

It took place on October 9th at the ME office. Attendees were not informed of the nature of the exercise (radiological) ahead of time so many challenging issues were discovered and explored.

Although the workshop was initially focused on fatality management issues, even a County as well prepared for disaster response as Broward will have challenges of unprecedented nature. For example, with a radioactive plume being driven by prevailing winds, how is the community warned and evacuated in such a densely populated county.



Dr. Perper (left), Staff and attendees

Beyond that, no easy answers were found for issues such as can remains be decontaminated to a point of being safely handled by Medical Examiner staff? If not, what level of identification is acceptable and how would final disposition be managed? Throughout the exercise, responder safety remained the prime consideration but it became evident that a great deal more planning, at all levels of government, will be needed to prepare better for a true radiological event.

As an aside, a fortuitous Rotary Club lunch for Norm Kassoff resulted in meeting freshly retired (sort of!) Lt. Col. John Carroll (Marines).

John became interested in the exercise Norm was putting together and, with his extensive military background, including planning and development of numerous response plans, volunteered to assist. John's experience with radiological planning was of particular benefit to all the attendees.



Norm Kassoff introducing John Carroll

Following the session, John took advantage of the offer to become a FEMORS member and completed the application process in less than a week.

FEMORS is indeed fortunate that Norm has such a lucky hand in finding such gems in the rough.

DOH FY 06-07 CONTRACT

The continuing operations contract has been developed for FY 06-07 and will go into effect when CDC releases its final approval.

Unfortunately, because CDC had less funding to share this time around, they had requested an 11% reduction in all program components for DOH. Because of the fine track record FEMORS has developed, DOH maintained the previous funding level of \$250,000 as an exception to the across-the-board reduction.

However, with the DPMU coming on line and the need for training and

exercising of the DPMU, Family Assistance, and Odontology teams as high priorities, the total funding needed is \$300,000 to ensure that FEMORS can continue to provide lodging for members at training sessions (to minimize member's out-of-pocket expenses). There is a possibility that the shortfall of \$50,000 may be made available from "redirected funds". These are monies that went unspent for any number of reasons during the past cycle and may be redistributed to other DOH programs. FEMORS is hopeful that its progress merits consideration of being allocated additional funding.

The bad news about that is that without the supplemental \$50,000, training sessions may be unable to provide lodging as in the past so attendance may depend on each member's ability to cover their own lodging costs.

As in past years, the release date of CDC funds determines when FEMORS can begin to negotiate contracts with potential meeting hotels. For that reason, training dates cannot yet be locked in.

This year's contract will be different in one respect. The deliverable FEMORS must provide to DOH to release the finding is now limited to one event - a meeting with DOH, 30 days after the contract becomes active, to deliver a report containing the following:

- Inventory of DPMU cache
- Training summary of prior year
- Current revision of FOG
- Current FEMORS Membership Roster
- A list of FEMORS members who have satisfactorily completed the core ICS training courses in IS-100, IS-200, IS-700 and IS-800
- Program Sustainment Plan to include
 - A review of Office of Public Health Preparedness Strategic Goal 5, Objective 5.6, Strategies 5.6A through 5.6D
 - Continuing Operations and Development budget proposal for FY 07-08
 - A written list of equipment necessary to complete the

DPMU for the attainment of full readiness (self-sufficient for 72 hours) status (Type I).

- A written estimate of costs for transportation, team activation work time, and replenishment of expendable equipment and supplies necessary to activate the DPMU for training exercises
- Training syllabus, potential instructors, location and proposed dates for FEMORS training offerings for the upcoming fiscal year.
- ICS-300 Level training for the Incident Management Team (IMT, formerly known as "Go Team")
- A list of potential exercises other than that of the Annual Training Exercise
- A statement by the FEMORS Commander as to the ability of the FEMORS membership and organization to meet the FEMORS' Mission with recommendations for improvement as applicable.

Provisions are also included to make this contract renewable for 2 additional years.

DSOC FUNDING FY 07-08

Florida's Domestic Security Oversight Committee (DSOC) will conduct its grant funding conference for FY 07-08 in January 2007.

FEMORS has been invited this year to participate in the process by serving as a member of the Community Health Surge Committee. This committee conducts gap analysis and reviews all proposed projects for health surge issues (including fatality management). Projects that make it through the Committee process are then forwarded to a peer review panel where they are subjected to criteria assessment that will result in 30% of the ranking score. The final 70% of scoring will be done by voting delegates at the January meeting.

With all funding streams decreasing each year, no new projects are permitted. Instead, existing programs are examined for gaps in achieving or sustaining full preparedness.

FEMORS has proposed 2 projects to address identified gaps: body X-ray and sheltering equipment. (These gaps are part of the contract requirements listed earlier.)

Digital Body X-Ray System

A digital body X-ray system is needed to complete the DPMU basic cache so processing of remains can be managed on site. Current field-ready systems for this equipment cost \$175,000.



Complete Digital Body X-Ray System

(This was FEMORS only proposed project at the 2006 Funding Conference but its ranking on the final approved list was not high enough to make the cut when available funding was released by federal programs.)

Without the X-ray unit in the cache, field response will force Logistics to secure x-ray services upon deployment creating probable time delays in starting remains processing.

Additionally, a digital unit will eliminate the traditional time backlog in the radiology section of waiting for images to be developed for review. With digital, the operator sees instantly if the exposure was correct or if another exposure needs to be made.

This might well double processing capacity.

Responder Sheltering

The second identified gap is sheltering equipment needed to make FEMORS a Type I resource asset. This means the team is self-sufficient for the first 72-hour period.

Typical sheltering equipment for DMAT teams consists of Western Shelter brand tent structures.

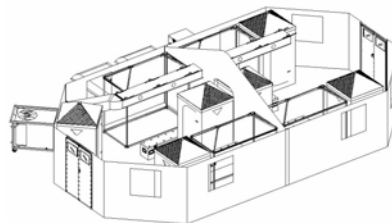


DMAT Field Hospital Exercise-Ohio

DMAT uses these to set up field hospital/treatment tents as well as sleeping quarters for its responders.

FEMORS proposed project is for 6 sleeping tents with bunk beds housing 16 personnel each for a total of 96. These have air conditioning and heating units, generators, connection bridges, and are insulated.

Two additional tents are also planned. One is for a break room/ utility area and the other is a hygiene tent. The hygiene tent includes male/female division and 2 showers, 3 commodes, and 1 triple section hand washing unit on each side. All HVAC, plumbing and hot water heaters are included.



FEMORS Hygiene Tent

Unfortunately, the cost of the full 8-tent set up is \$420,000 so success at the funding conference is not likely.

With the trend toward decreasing funding options, DOH will have to reassess whether or not FEMORS should continue to work toward 72-hour self-sufficiency. If nothing else, the cost of achieving this level of preparedness is now known should other funding streams become available.

ERNESTO NEAR MISS

Although Hurricane Ernesto turned out to be little more than a wake up call for Florida in 2006, FEMORS had 59 members respond to a request for readiness. If the need arose, FEMORS could have mustered a team to support any Medical Examiner district requesting fatality management assistance.

Thankfully, it was just practice.

WEBSITE UPDATE

During the Summer, the FEMORS website moved to a new Internet Service Provider (ISP) in Orlando because the former ISP host sold the internet business and the new owners were not technically capable to manage the site.

It took a while for the red tape to clear but the site is now back on line (except for member services) and will be maintained by Logistics Chief Jonathan Scott.

New software had to be obtained and some work is still in process to get the membership functions back in operation. When the site is fully back in operation a notice will be sent to all members.

For those entering the members only area, the web site will eventually be linked directly to FRED. This should make it easier for members to update

their contact information changes and for admin to maintain the total member list, track training attendance, and record Ready List responses for event alerts.

Until that change happens, if any member is approached by a potential new member, please advise him/her to send a contact e-mail to Admin Chief Tammy Grosskopf or Commander Larry Bedore to obtain the application forms package.

ICS CHANGE REVERSED

In the last NewsGram (Vol. 4, No. 2) a major change in FEMORS organization of ICS sections was described regarding the realignment of computer related functions into a new "Section".

But, as they say in football, "upon further review..." that change has been rescinded.

The traditional model of ICS calls for one Incident Commander with 4 Section Chiefs reporting to the Commander: Operations, Logistics, Planning and Administration/Finance. That will remain.

Technical work of establishing the network of computer systems will remain a function of the Logistics Section. Details will be provided in the Field Operations Guide (FOG) now in revision.

ICS ON-LINE CERTIFICATION

Although this topic has been brought up repeatedly since last year, many members are still in default and have failed to complete the minimum training baseline for all responders. This requires completion of:

- NIMS Introduction IS700
- Introduction to ICS-IS100
- Basic ICS-IS200
- Introduction to National Response Plan IS800/A

On-line training for the baseline courses is offered at a FEMA web site (one that has changed during the past year): FEMA Independent Study Program at <http://www.learningservices.us/FEMA/LMS/>

Members who have not previously registered must first register in order to take the courses.



For on line training in IS-100, <http://www.training.fema.gov/emiweb/IS/is100.asp>

For on line training in IS-200, <http://www.training.fema.gov/emiweb/IS/is200.asp>

For on line training in IS-700 NIMS, <http://www.training.fema.gov/emiweb/IS/is700.asp>

For on line training in IS-800/A NRP, <http://www.training.fema.gov/emiweb/IS/is800a.asp>

Upon completion, a printed certificate of completion will **no longer** be mailed to the student. Please note the change in policy for FEMA certificates when submitting answers to independent study (IS) courses on-line. Members who submit answers on-line, will NOT be sent a certificate...they will receive an email providing a link how to download/print the certificate.

This is the certificate that must be copied and mailed to Tammy Grosskopf for each member's file.

The Department of Health has not yet set a date beyond which responders will be denied permission to deploy unless these 4 courses are complete. However, it is only a matter of time before that happens

so any member who has not completed these courses is strongly encouraged to get it done NOW!

FEMORS INTERACTIONS

2006 IFDA CONFERENCE

In June, Deputy Commander Paul Taylor presented the FEMORS program at the annual meeting of the Independent Funeral Directors Association.

2006 FFDA CONFERENCE

In July, Deputy Commander Paul Taylor and Commander Larry Bedore presented the FEMORS program to the annual meeting of the Florida Funeral Directors Association.

SMORT PLANNING

In August, Commander Larry Bedore (along with DMORT IV Commander Cotton Howell) was invited to participate on a State and Regional Mortuary Advisory Committee to explore developing State Mortuary Operations Taskforces (SMORT).

The states of Mississippi, North Carolina, South Carolina and Georgia are seeking strategies for local and regional response among states in FEMA's Region IV (southeast states) for events that do not generate federal declarations.

Some of these states lack the resources to create a full spectrum state team like FEMORS. The committee is exploring ways states can share specialized team resources to assemble a larger team if needed. Georgia and Kentucky, for example, have well developed Search and Recovery teams but lack full supplemental forensic processing teams. Other states have dental or funeral service teams only.

Assistance would likely be requested through an EMAC (Emergency Management Assistance Compact). Through EMAC, a disaster impacted state can request and receive assistance

from other member states quickly and efficiently, resolving two key issues upfront: liability and reimbursement. EMACs are agreements entered into directly between state Governors.

Thus, it is possible that Florida could provide its FEMORS team, in part or in total, to a requesting state should the need arise.

SMART meetings will continue to explore these issues.

2006 ME CONFERENCE

In August, FEMORS participated in a panel discussion on Pan Flu at the annual Florida Medical Examiner's Conference in Palm Beach County.

The global view (with SARS as the example) was presented by Dr. James Young, Special Advisor to the Deputy Minister, Public Safety and Emergency Preparedness Canada (head of Canada's version of FEMA) and President of the American Academy of Forensic Sciences.

The State DOH view was presented by Timothy E. O'Connor, Public Information Director, Palm Beach County Health Department.

The local view, including the reality that every community may have to manage on its own without much outside help, was presented by Commander Larry Bedore.

UNIFIED REGION IV PLANNING

In September, Commander Larry Bedore was invited to participate with DOH in a 2 day planning session in Gulfport, MS. The Unified Planning Coalition is a gathering of State ESF-8 teams plus FEMA Emergency Coordinators from the 8 states in FEMA's Region IV (Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee) to share planning resources and methods.

The SMART concept was presented to all the attendees when fatality management issues were discussed.

Interestingly, the States of Louisiana and Texas (even though in FEMA Region IV) have expressed interest in taking part in the Unified Planning Coalition process.

ESF-8 participants would respond to assist each other under EMACs for many of the public health issues related to serving the medical needs of affected states.

OTHER TRIVIA AND EVENTS

NDMS TO BE MOVED TO DHHS

Recent federal legislation has resulted in a January 2007 move of the National Disaster Medical System (NDMS) that includes the federal DMORT teams, from the Department of Homeland Security (via FEMA) to the Department of Health and Human Services (HHS), the lead Federal agency for ESF-8.

This is a return to the pre-World Trade Center days when NDMS had been under HHS.

VOLUNTEER JOB PROTECTION

Federal teams that activate temporary or "interim" employees for disaster response are covered by the Uniformed Services Employment and Reemployment Rights Act (USERRA). Basically, this says an employer may not retaliate against an employee who responds as part of a federally deployed team. The job is safe.

Florida does not yet have an equivalent statute except for members of the American Red Cross. However, some groups may be lobbying to get that changed to cover teams like FEMORS. If members learn of new developments on this issue they should keep Command Staff advised.

COMMENTS/SUGGESTIONS

Member feedback and suggestions are always welcome and can be delivered to FEMORS staff at the following numbers:

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