

## DVI

### INITIAL ACTIONS/CONSIDERATIONS FOR SIM

As a SIM you may be deployed to any incident involving deceased people, from a single death with complicated circumstances to a fast-moving large-scale Terrorism incident.

This aide memoire contains a number of points for consideration during the initial phase of an incident involving fatalities. Many of the points for consideration are dependent on the type and scale of the incident. For example the Command and Control structure will vary as not all incidents will require the setting up of an SCG or Casualty Bureau. The order of priority for consideration of each action will vary and be influenced by a number of factors. These aspects may include the scale and type of incident, whether it is clearly an open or closed incident, the numbers of people involved and the condition of bodies. Therefore, this should not necessarily be treated as a chronological list. In Scotland, reference to HM Coroner should be read as Procurator Fiscal.

#### DVI: Key Responsibilities

SIO, Coroner, Strategic and Tactical Commander, CB Manager, SERM, FLC, PMOC, Reconciliation Coordinator and Investigative Agencies (where appropriate)

A verbal contract should be made between the SIM and the SIO to determine a timeline of actions as appropriate to the scale and nature of the mass fatality incident. This must take account of the overall strategy set by the Gold Commander and the investigative strategy set by the SIO. This verbal contract should then be signed off in written format.

- On appointment, establish the command structure and clarify the SIM's roles and responsibilities with the Strategic (Gold) Commander, SIO and Tactical (Silver) Commander(s);
- Liaise with the SIO, be aware of the investigation strategy and agree delineation of responsibilities or joint responsibilities where appropriate;
- Liaise with HM Coroner, agree terms of reference, recovery and identification strategy;
- Ensure a suitably qualified SERM is appointed, agree terms of reference with the SIO and SERM, and determine the recovery strategy (following a terrorist or suspected terrorist incident the relevant Counter Terrorism Unit (CTU) or in London, Counter Terrorism Command (CTC) will be engaged. A Scene management including body recovery aspects will fall to the designated Forensic Management Team Forensic Co-ordinator whom may or may not be a SERM, in complex cases it maybe appropriate to appoint a SERM to aide the FMT Forensic Co-ordinator.

- Discussion with Forensic Co-ordinator, Crime Scene Manager and/or SERM to set a strategy for recovery and management of personal effects, In particular items from the scene that may aid identification of victims and tasking of Family Liaison Officers. Establish process for communicating this information from scene to Casualty Bureau without delay.
- Liaise with the Tactical/Silver Commander regarding current activity at the scene, explain the SIM/SIO retrieval strategy, and establish if a Holding Audit Area (HAA) has been established, or is required;
- Ensure an initial health, safety and welfare policy is in place for the responders at the scene under command of the SERM. Likewise for other key DVI managers such as Family Liaison, Casualty Bureau, Mortuary Operations and, if required, Reconciliation. Include other agencies and external contractors if appropriate;
- Consider activation of Casualty Bureau Incident Room facets for management of information for the incident. This includes staff to triage casualty and survivor details obtained via Investigative Triage Form. (ITF) on Major Incident Public Portal
- Consider opening public facing element of Casualty Bureau. This can be either using online reporting via Major Incident Public Portal (MIPP) or via National Mutual Aid Telephony (NMAT) line to the public, or both MIPP and NMAT with a phased approach. This decision will depend on scale of incident and will be demand driven by the public. Prior to activation of the public-facing Casualty Bureau, SIM's questions, grading policy, cancellation policy, opening times, single point of contact (for the public and police officers), and a call avoidance strategy has to be decided with the Casualty Bureau Manager.
- Ascertain (or contribute to) the strategy for dealing with the media. This may require consultation with the SIO, HM Coroner, Gold Commander and responding agencies in order to set a media plan relating to the retrieval and identification of the deceased and the care for the bereaved. This will include social media such as Facebook and Twitter;
- Ensure a Family Liaison Coordinator (FLC) is appointed, consult the SIO and agree a family liaison strategy with the FLC, determine an ante-mortem data collection strategy and ensure appropriately trained personnel are available for deployment in line with the family liaison strategy and ensure appropriate support is in place for the bereaved;
- If a Survivors Reception Centre (SuRC) has been opened, ensure a SuRC Manager has been appointed, and the correct documentation processes are in place for supplying information to the Casualty Bureau, including access to the Major Incident Public Portal in order to access Police Forms.
- If survivors are attending, or being taken to a hospital or hospitals, ensure a Police Documentation team is in place at each receiving hospital, a team leader has been appointed, and the correct documentation processes are in place for supplying information to the Casualty Bureau via MIPP if available;

- Ensure a Family and Friends Reception Centre (FFRC) has been established, appoint an FFRC Manager (if required), ensure that Family Liaison Officers are deployed to the FFRC, appropriate support for families and friends is in place, and the correct documentation processes are in place for supplying information to the Casualty Bureau, via MIPP if available;
- Liaise with HM Coroner about the establishment of a Mass Fatality Coordination Group (MFCG), and support the Coroner as requested in determining the agenda, frequency of meetings, location of meetings, attendance, secretariat functions and links to the Strategic Coordinating Group (SCG) and Tasking and Co Coordinating Group (TCG) meetings;
- Consider the requirement for the activation of mutual aid through NPOCC for DVI (including CB) assets and support from UK DVI;
- Liaise with the Coroner to ensure appropriate mortuary arrangements are in place, consult the local authority if a resilience mortuary is required, appoint a Police Mortuary Operations Coordinator (PMOC), and ensure a Mortuary Facilities Manager is appointed (usually by the local authority);
- Ensure the provisions of the Human Tissue Act 2004 are complied with and a Designated Individual (DI) is in place or appointed under the terms of the Act;
- Agree with HM Coroner the identification criteria, ensure the ante-mortem data collection strategy accurately reflects these parameters, and agree their priority for assessment.
- Agree with HM Coroner the matching and reconciliation parameters in respect of the deceased, consider appointing a Reconciliation Coordinator and consider establishing a Reconciliation Unit;
- Agree with HM Coroner the establishment of the Identification (ID) Commission under the chair of the Coroner, agree the location and timings of meetings, the processes for presentation of identification evidence, attendance at ID Commission meetings, secretariat functions and audit arrangements;
- Agree with HM Coroner the viewing arrangements for the family and friends of the deceased, liaise with appointed PMOC and FLC to agree a form of words regarding arrangements, so that this can be consistently shared with each victims family/interested parties.
- Agree with HM Coroner the release and repatriation arrangements for the deceased;

- Agree with the MFCG the exit strategy for the group, memorial services and ongoing support arrangements for the survivors and bereaved, e.g. establishment of a Humanitarian Assistance Centre.

**NOTE:** – *aspects of the investigation will apply where potential ‘suspects’ have died as a result of same incident and liaison maybe required with both Professional Standards Units and IOPC.*

The SIM should maintain a policy file or logbook, throughout their involvement in the incident. This document is subject to disclosure.