



UNITED STATES MARINE CORPS
1ST MARINE DIVISION
BOX 555380
CAMP PENDLETON, CALIFORNIA 92055-5380

DivO 3040.1
1ADJ

DEC 2 2015

DIVISION ORDER 3040.1

From: Commanding General
To: Distribution List

Subj: MASS CASUALTY RESPONSE PLAN

Ref: (a) MCO 3040.4 Marine Corps Casualty Assistance Program
(b) BO 3040.2F Casualty Reporting Procedures
(c) BO 3006.1A MCIWEST-MCB CAMPEN Mission Assurance
(d) DivO 3040.7C Casualty Reporting Procedures
(e) DivO 3504.2 Serious Incident Reporting Procedures
(f) DivO 3120.1 Crisis Action Team Response Plan

Encl: (1) Flow Chart
(2) Critical Points of Contact

1. Situation. The proper handling of a mass casualty incident will reflect the time-honored professionalism and diligent responsiveness for which 1st Marine Division has become known. The Commanding General has assigned the Chief of Staff cognizance over contingency responses. The responsibility for timely and effective reaction to a Multi-Casualty Incident (MCI) will rest primarily with the Division staff and their close working relationships with Marine Corps Base Camp Pendleton and the affected command, in accordance with references (a) through (f). Upon notification of a MCI, 1st Marine Division will activate the Crisis Action Team (CAT) to serve as the single Command and Control (C2) node to ensure the seamless integration of all required assets/agencies per reference (f).

2. Mission. 1st Marine Division will provide timely and accurate information during a MCI while coordinating closely with the affected unit and outside agencies in order to facilitate the efficient operation of the Division. We will establish and maintain a scalable Division CAT to coordinate a wide variety of actions which require 24-hour oversight over an extended duration. The severity of the MCI will determine the mobilization level of Division personnel and resources. We will establish and maintain a uniform system for managing MCIs, which will differ from responses to situations less severe.

3. Execution

a. Commander's Intent and Concept of Operations

(1) Commander's Intent. We must ensure that personnel involved in the administration and preparation of mass casualty emergency responses are provided adequate information pertaining to tactics, techniques, and procedures. As defined in reference (a), a MCI is a minimum of five casualties produced from a single incident. Mass casualty incidents are most likely to occur as a result of major vehicle accidents, fires or indirect fires, terrorism, or environmental disasters. These incidents occur without warning, yet require major response efforts within and outside the Division.

(2) Tasks

(a) Division Command Duty Officer (CDO)

1. In the event the CAT has yet to be established and a MCI takes place, the CDO will serve as the Commanding General's representative until properly relieved by the CAT Senior Watch Officer (SWO).

2. Once the CAT has been established, the CDO will direct all calls pertaining to the incident to the CAT SWO on duty.

(b) Division Crisis Action Team (CAT)

1. Upon notification of the MCI, 1st Marine Division will stand up the CAT per reference (f) within the G-3 Current Operations (COPS) office space to ensure all efforts are coordinated fluidly and that information is vetted and passed through the appropriate channels.

2. The CAT is comprised of representatives from all staff sections and is capable of conducting 24-hour operations. Upon notification, the CAT will stand up and immediately notify the Base SWO to gather pertinent facts (what hospitals the Marines are being transported to, severity of injury, names of Marines transported, etc.).

3. The CAT will track accountability, information flow, medical statuses, reports, and maintain cognizance of casualties.

(c) Division Adjutant/Casualty Operations Center (CASOC)

1. Upon notification of a MCI, report to the Division CAT. The CASOC will make contact with the unit's Adjutant during working hours or the Officer of the Day (OOD) after hours to gather Personnel Casualty Report (PCR) information. CASOC will confirm that the voice report was made by the unit to HQMC Casualty Branch and begin preparing the PCR with immediate information received.

2. Upon receiving a roster of personnel involved in the MCI, CASOC will begin preparing the mass casualty PCR in the Defense Casualty Information Processing System (DCIPS). CASOC will call HQMC to request a mass casualty PCR code and description.

3. Before sending the PCR to HQMC, the CASOC will email its draft to the Division Adjutant and Chief of Staff for review and approval. The Division Adjutant will follow-up with a phone call to HQMC to confirm any further requirements.

4. The Division Adjutant will contact and prepare additional Casualty Assistance Calls Officers (CACOs) from within the Division to assist the affected unit if required. The Division Adjutant will maintain the annual training roster of all Staff Noncommissioned Officers (SNCOs) and officers who have completed the base CACO training.

(d) Division Surgeon

1. Upon notification of a MCI, report to the Division CAT and contact the unit surgeon to establish communication in anticipation of follow-on requests for information. Consider contacting the Military Treatment Facility (MTF) OOD or Emergency Department to offer medical support from the Division to augment the MTF / base response.

2. If necessary, assign additional medical officers and/or physicians' assistants to augment the unit's organic medical staff and enable provider-to-provider communications at civilian medical facilities. Contact the MTF Patient Administration Department to ensure that they are aware of the incident and to solicit their assistance maintaining cognizance of hospitalized Marines.

3. Ensure Division Mental Health Providers (MHPs) are present to support unit leadership, Chaplains, and medical staff. Even though critical incident debriefing and formal mental health services are normally not required in the initial hours or days after such an incident, the MHP is a vital member of the Division's OSCAR team and can provide the unit with advice, guidance, reassurance, and planning.

(e) Division Chaplain

1. Upon notification of a MCI, report to the Division CAT and stand by to assist the injured and their families at nearby hospitals. Chaplains will meet each family member upon their arrival to the hospitals and minister to the injured while they are being treated.

2. Chaplains' visits will be determined based on the geographic locations of their homes versus distances to concerned hospitals. While the importance of their support cannot be understated, they are not expected to travel extreme distances to minister to a service member who is a part of their unit. Additional chaplains may be assigned to assist at the incident site to pray over the deceased and minister to those on scene and to assist CACOs in making notification to the NOK. Chaplains assigned hospital duty will ensure the affected unit will have their contact information.

3. Pastoral care status reports will be sent to the affected unit chaplain and the Division Chaplain daily.

(f) Division Public Affairs (PAO)

1. Upon notification of the MCI report to the Division CAT, immediately notify the Commanding General and Chief of Staff of estimated media interest then contact I Marine Expeditionary Force (MEF) Public Affairs (PA) and HQMC PA for situational awareness. Media interest updates will continue throughout the duration of the media crisis communication response. Following this contact, develop a crisis communication plan to include background, PA stance, recommended spokespersons, timeline of releases, talking points/messages and potential media questions/answers.

2. To ensure the command controls the media narrative, an initial release will be developed immediately with appropriate information in accordance with PA Consolidated Guidelines for Release. This release will be vetted through the Division Commanding General, Chief of Staff and I MEF PA prior to distribution. Coordination will be made with respective unit(s) point(s) of contact to ensure accuracy. The timeliness of this initial

release shows the command is in control of the situation and is capable of responding rapidly to serious incidents. It also reinforces the command's reputation for openness. Send initial release and all follow-on releases to Defense Video and Imagery Distribution System (DVIDS) for upload.

3. Contact respective unit POCs to ensure Marines/Sailors are aware of protocols for public release of information, which will allow the Marine Corps' process of notification to family members to go uninterrupted. The Division PA holds release authority on all information surrounding the incident (*unless delegated by CG to a different entity) in order to maintain one voice for the command. Ensure unit(s) social media site(s) are monitored for the protection of the NOK's family during initial notification.

4. All updates on the status of Marines'/Sailors' conditions will come directly from the Chief of Staff. Contact PAO/Public Relations representatives at respective hospitals/medical facilities to ensure the same messages are being released and to track which media outlets have contacted them.

5. All NOK should have been notified by the HQMC Casualty Branch. Following these notifications, disseminate Press Releases (PRs) with all updates/releasable information. Follow the same protocol and approval chain as with the initial release. Continue with PRs if media interest continues.

6. Upon distribution of a second press release and follow-on media outlet updates, build a 48-hour media assessment for the Commanding General, Chief of Staff, and respective unit POCs. Continuously update this if media interest continues.

7. If the unit spokesperson is someone other than the Division PAO is needed, ensure proper PA training is provided prior to their interaction with media.

8. If necessary, contact I MEF PA for additional personnel support.

(g) Division Safety

1. Upon notification of the MCI report to the Division CAT. Obtain an initial assessment of the situation and arrange for transportation to the incident site. Coordinate with a unit liaison for escort to preclude any friction with law enforcement or first responders.

2. Upon arrival at the incident site, obtain a list of the names and medical statuses of all involved. Begin taking photographs of the site from a 360-degree perspective. If possible get photographs of any evidence that may be removed during recovery efforts, which may provide insight into the cause of the incident. There is no need to take photographs of the injured or deceased personnel. However, the locations of where they were found may prove useful during the investigation process.

3. After photographs have been taken, sketch a diagram of the incident site. Ensure to add the location of vehicles, weapons systems, etc. If possible, add positions of the injured or deceased in proximity to incidental center point or a point of reference. Add a geographical view of

the terrain, such as trees, hills, roads, large boulders or any other landmarks relevant to the incident.

4. Record environmental aspects such as weather, road conditions, soil conditions, estimated temperature, and any impact on visibility.

5. Annotate any hazardous material spills. Identify each material; estimate how much is on the ground, where it came from, and the location of the spill. First responders may also know if any hazardous material noted contributed to the cause of or added to the injuries of personnel involved.

6. All evidence gathered will be turned over to the senior member of the Safety Investigation Board and will assist in preventing recurrence of further incidents.

(h) Affected Unit Command Operations Center (COC) Response. The following are recommended actions for the affected command when a MCI occurs:

1. Upon notification, designate a command representative to be immediately dispatched to the scene of the accident for situational awareness and accountability of unit personnel and gear. He or she will collect contact information for Provost Marshall Office (PMO) and medical personnel on scene as well as other pertinent facts required for personnel casualty reporting.

2. Identify the manifest/mission card for the movement/operation with all names of the Marines involved in the MCI. This will ensure accountability and set a starting point for adding personnel data to incident reports. The unit will also contact Camp Pendleton Range Control to verify incoming life flights and to which hospitals the Marines are travelling.

3. Once injured personnel arrive at hospitals, dispatch unit medical personnel and command representatives (senior enlisted or officers) to each to confirm patient arrival and to track treatment progress and updates to medical status.

4. The affected unit is encouraged to establish a COC to coordinate reporting and response efforts. The COC should be manned by a watch officer at all times with a work issued cell phone until relieved by a subsequent watch stander. A watch schedule should be established within the COC to dictate hours that command representatives and medical personnel will be available at attending hospitals. Command representatives at each hospital will report directly to the watch officer with updates on medical status, family contact info, family needs, etc.

5. The Watch Officer will maintain a spreadsheet with the following tabs:

a. Marine Data - each Marine involved, current location, current medical status

b. Diary logbook - every piece of information that gathered is to be logged before updating any other tab

c. Family Readiness - names, relationships, cell phone numbers, Invitational Travel Orders (ITO) data, family member requests for support (chow, toiletries, hotel room, rental car, etc.)

6. Once initial reporting is complete, the watch officer will email a daily status update on all members involved in the incident to identified unit staff members and higher headquarters' staff members.

(i) Affected Unit Administrative Actions (S-1)

1. Upon notification of the MCI, call the HQMC Casualty Branch immediately to submit a voice report. Following the call to HQMC, notify the Division Casualty Operation Center (CASOC) of the incident.

2. Other personnel within the command may be aware of the incident, so the importance of discretion must be communicated thoroughly via the chain of command. The Marine Corps' process of notifying victims' families is in place to ensure they are informed in the most respectful manner possible. Marines who circumvent this process are endangering the honorable reputation of the Corps and will exacerbate an already sensitive situation. Commands may only have contact with the Next of Kin (NOK) after official notification has been completed. The Casualty Assistance Calls Officer (CACO) is the designated Marine Corps representative dedicated to assisting affected families in all matters.

3. CACOs are assigned by the HQMC Casualty Branch. If it is determined that the Primary Next of Kin (PNOK) are local, the unit will have the responsibility of notification and will have CACOs identified. Ensure the names and ranks of these individuals are communicated to the HQMC Casualty Branch. CACOs must be a SNCO or Officer senior in rank to the deceased Marine and will be accompanied by a Chaplain or another Marine. The HQMC Casualty Branch will provide each CACO with a Casualty Assistance Calls Package to give to the PNOK with pertinent entitlement and burial information.

4. As soon as possible, provide the Division Casualty Operations Center (CASOC) with a roster of the Marines involved. This should include at a minimum: name, rank, EDIPI, SSN, and race code. This roster will be used to prepare the mass casualty PCR in DCIPS.

5. The hasty/initial PCR must be submitted within an hour of the MCI occurrence. Prepare the 5 W's so the CASOC can draft the Mass Casualty Personnel Casualty Report (PCR).

6. For deceased Marines or those classified as Very Seriously Injured (VSI), provide HQMC with a copy of the last signed Record of Emergency Data (RED), the latest verified Serviceman's Group Life Insurance Form (SGLV 8286), DD Form 1966/1, DD Form 4/1, and NAVMC 763 (for officers). Documents can be submitted via email to casualty.section@usmc.mil or fax at 703-784-4134.

7. For SI and VSI cases, communicate with the HQMC Travel Section regarding Invitational Travel Orders (ITOs) and potential eligibility.

8. Provide the Installation Personnel Administration Center (IPAC) with a copy of the PCR for any deceased Marines to be recorded as such in the Marine Corps Total Force System (MCTFS). Ensure to print or retain copies of the Marine's Official Military Personnel File (OMPF), Medical/Dental records, Basic Individual Record (BIR), Basic Training Record (BTR), and all MCTFS records. Once IPAC drops the Marine from the rolls, the unit will no longer have access to his or her records. This information will also be provided to the command's investigating officer, for preparation of the 8-day brief. Deceased Marines will require positive identification from command leadership (i.e., Company Commander, OOD, Company First Sergeant).

9. Designate an officer to inventory the Marine's Personal Effects (PE). Ensure PE is shipped to the NOK designated as Person Eligible to Receive Effects (PERE).

10. If the unit is providing an escort to accompany the deceased Marine to the Home of Record (HOR), he or she must be senior to the rank of the Marine. Since the escort is representing the unit and the Corps, he or she must be proven trustworthy and of impeccable bearing and professional demeanor.

11. Upon any changes in injury status (up/downgrade to NSI/SI/VSI) or location of the Marine, notify the CASOC who will send HQMC the supplemental PCR. Supplemental PCRs will be sent every seven days regardless of status or location changes.

b. Concept of Operations. This Order shall be used in conjunction with the references and other current regulations and directives to ensure compliance with established policies and procedures.

4. Administration and Logistics. Recommendations for changes to this order are encouraged and should be submitted to the Commanding General, 1st Marine Division, Attn: Chief of Staff.

5. Command and Signal

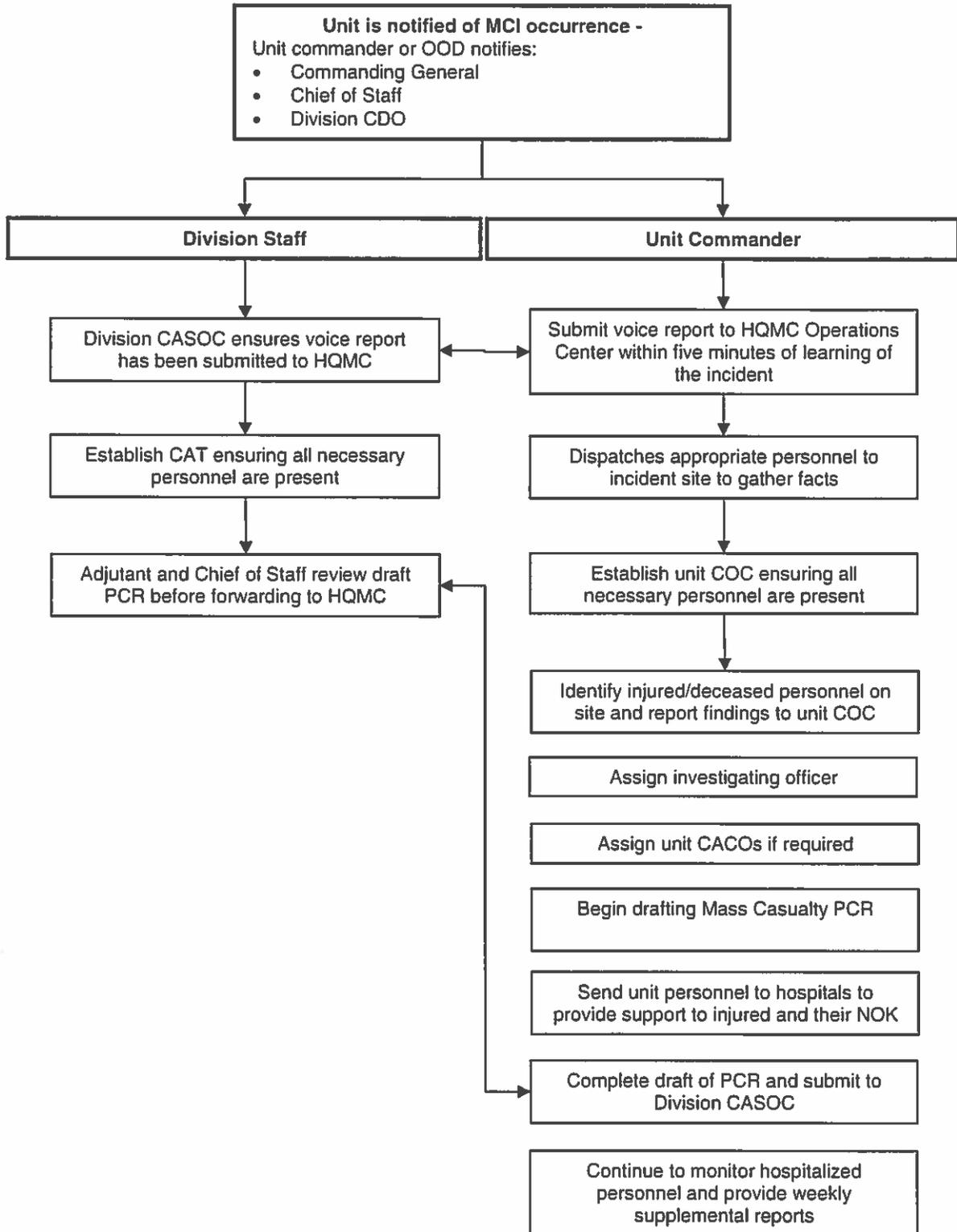
a. Command. This Order is applicable to all 1st Marine Division subordinate commands.

b. Signal. This Order is effective the date signed.


D. J. O'DONOHUE

DISTRIBUTION: III

Copy to: MCIWEST-MCB CAMPEN (SWO)
I MEF (SWO)



Enclosure (1)

Critical Points of Contact**Headquarters Marine Corps (HQMC) Operations Center Watch Officer**

Email: HQMC.MCC3@usmc.mil (703) 695-5454
 DSN: 225-5454

Headquarters Marine Corps Casualty Branch

Email: casualty.section@usmc.mil (702) 784-9512
 Toll free: (800) 847-1597

1st Marine Division

Command Duty Officer (CDO) (760) 725-5201
 G3 Current Operations (COPS)/CAT SWO (760) 725-6856
 Casualty Operations Center (CASOC) (760) 725-5515/3726
 Surgeon (760) 725-5209
 Chaplain (760) 725-6692
 PAO (760) 725-8766
 G7 (Safety) (760) 725-0035
 Family Readiness Officer (FRO) (760) 725-8816
 Comptroller (760) 763-2099
 SJA (760) 725-5972

Marine Corps Installations - West (MCI-WEST) Camp Pendleton

Range Control (760) 725-0355
 Provost Marshall Office (PMO) (760) 763-3888/2077
 Fire and Emergency Services (760) 725-4321
 Naval Hospital LNO (760) 725-1369
 MCI-WEST Senior Watch Officer (SWO) (760) 725-5061
 I MEF Senior Watch Officer (SWO) (760) 725-3047

Enclosure (2)