

Defense Health Board

Dover Port Mortuary Independent Review Subcommittee Report

General (Ret) John Abizaid, Chair

Defense Health Board Meeting February 21, 2012



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Introduction

- Subcommittee established on December 13, 2011 at Secretary of Defense direction
- Provide an independent assessment of current operations at the Dover Port Mortuary (DPM) and the effectiveness of corrective actions and changes made by Department of the Air Force (AF) to policies, procedures, and practices
- Submit report to Secretary of Defense by February 29, 2012



Introduction (Continued)

- Allegations of wrongdoing submitted by DPM employees ("whistleblowers") to U.S. Office of Special Counsel (OSC)
- OSC referred allegations to Secretary of Defense
- Secretary of Defense delegated responsibility to AF Office of Inspector General (IG) for responding to these matters and investigating Air Force Mortuary Affairs Operations (AFMAO) Port Mortuary Division
- AF Office of Special Investigations and Department of the Army IG also conducted investigations into the allegations
- Corrective actions and changes were instituted by Department of AF
- Conclusions of AF IG, Army IG, and OSC not in full agreement



Membership

- GEN (Ret) John Abizaid: Retired senior military member
- Mr. Caleb Cage: Executive Director, Nevada Office of Veterans Services
- Mr. Vernie Fountain: Embalmer/mortuary professional
- GEN (Ret) Frederick Franks: Retired senior military member
- Mr. Garold Huey: Funeral home/mortuary professional
- Dr. Bruce Parks: Medical examiner professional
- Dr. Victor Snyder: Former U.S. Representative
- Ms. Ruth Stonesifer: Gold Star Mother
- Dr. Jacquelyn Taylor: Funeral home/mortuary professional



Terms of Reference: Mission

- Accomplish independent assessment of:
 - Current operations at Port Mortuary Division of AFMAO at Dover Air Force Base (AFB) (Port Mortuary)
 - Interface between AFMAO, medical examiners, and Services
 - Impact and effectiveness of recent changes in policies and procedures



Terms of Reference: Objectives and Scope

- Address effectiveness and propriety of current policies/ processes/procedures for:
 - Handling and preparation of remains, including chain of custody procedures
 - Interaction between medical examiners and AFMAO personnel regarding chain of custody, coordination, and processing/release of remains
 - Determining viewability and use of restorative art
 - Handling/transportation of remains with possible contagious disease, including adequacy of warnings, precautionary measures and other environmental controls
 - Cremation, including documentary requirements preceding cremation



Terms of Reference: Objectives and Scope (Continued)

- Examine known past concerns raised regarding mortuary operations or functions to ensure they are adequately addressed in current policies/practices/procedures
- Examine consistency and adequacy of policies/procedures to determine whether sufficient to provide appropriate training and references for assigned and attached personnel
- Examine how mortuary operations are periodically re-evaluated to ensure their ongoing effectiveness
- Assess AFMAO compliance with current Department of Defense (DoD)
 Mortuary Affairs policies and determine if DoD policies provide adequate guidance to address and cover DPM requirements and mission



Terms of Reference: Objectives and Scope (Continued)

- Assess role of DoD Executive Agent for Mortuary Affairs and its role in overall operations of DPM
- Assess effectiveness of changes undertaken by AF at DPM and identify other changes that may be appropriate to ensure the operations at this facility are conducted with appropriate reverence, care, dignity and respect
- Develop recommendations and conclusions on the above matters and any others subcommittee deems pertinent to strengthening operations of DPM functions at Dover AFB
- Disciplinary and/or retaliatory personnel actions are outside subcommittee charge and still subject to other authorities' actions



Methodology

- **Developed Guiding Principles**
- Received briefings from Department of AF Office of General Counsel, DoD leaders, OSC, U.S. Department of Veterans Affairs (VA), as well as DPM leadership and personnel
- Conducted site visit to Armed Forces Medical Examiner System (AFMES) and AFMAO
- Met with three whistleblowers
- Interviewed family members
- Reviewed documents, including policies, regulations, reports, and 10 Standard Operating Procedures (SOPs)



Subcommittee Organization

- Subcommittee Work Groups were established at onset of review to examine principal components of Subcommittee's charge:
 - Command, Oversight, and Policy: GEN (Ret) John Abizaid and GEN (Ret) Frederick Franks
 - Air Force Mortuary Affairs Operations (AFMAO): Dr. Jacquelyn Taylor, Mr. Vernie Fountain and Mr. Garold Huey
 - Armed Forces Medical Examiner System (AFMES): Dr. Bruce
 Parks and Dr. Victor Snyder
 - Casualty and Mortuary Affairs Operations Center/Service
 Liaisons: Ms. Ruth Stonesifer and Mr. Caleb Cage



Guiding Principles

- Subcommittee adopted a comprehensive and long-term approach to addressing the systemic issues underlying findings cited by previous investigations of DPM, rather than focusing only on symptoms of most recent events
 - It is imperative that policy, structural, and procedural solutions capture and reflect lessons learned from a decade of war and that these lessons are not lost for next generation of Fallen Warriors
- As an impartial and apolitical body, the subcommittee operated on premise that its deliberations would proceed with no preconceived outcomes or recommendations
 - It focused its review on the Terms of Reference issued by the Secretary of Defense
- It is a DoD duty to continue to compassionately and professionally care for our Fallen and their Families in manner commensurate with their sacrifice

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Guiding Principles (Continued)

The recommendations offered by the subcommittee, when taken as a whole must ensure that:

- The mission of caring for our Fallen is conducted according to the highest standards of professional and technical expertise - perfection is the goal and failure to meet it is unacceptable
- Policies and procedures are transparent and reflect and instill compassion for Families throughout the entirety of the process
- This national mission receives the full support of the Office of Secretary of Defense, the Chairman of the Joint Chiefs of Staff, and the Secretaries and Chiefs of each Armed Service
- Trust is sustained with Service members, their Families and the Nation in this solemn and sacred mission



Command, Oversight and Policy Discussion

GEN (Ret) John Abizaid

GEN (Ret) Frederick Franks

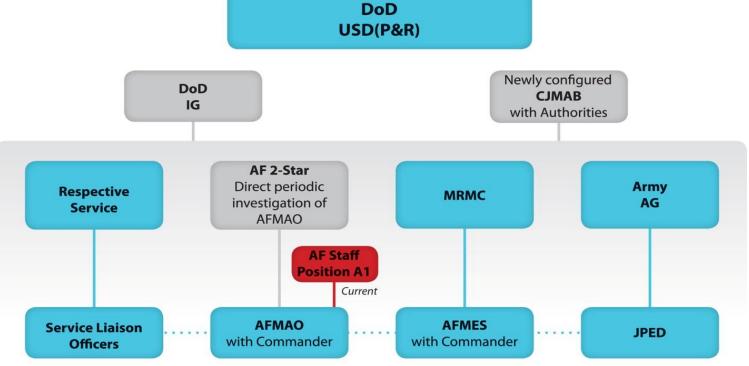


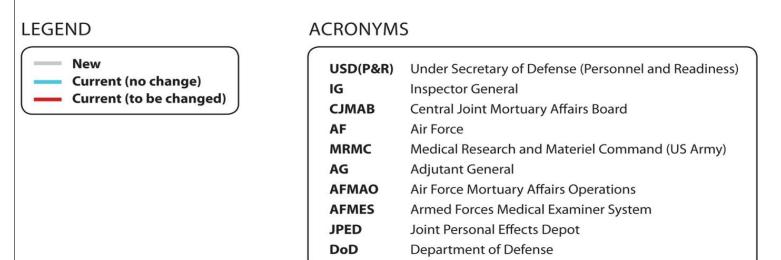
Discussion

- Subcommittee reviewed issues of command, oversight, and policy for AFMAO and the various organizations with which it interfaces: AFMES, the Joint Personal Effects Depot (JPED), and the various Service-specific liaison teams
- Subcommittee also reviewed the role of external and internal oversight mechanisms, coordination among organizations, role of the Army as Executive Agent, the flow of policy from DoD, and the role of the Central Joint Mortuary Affairs Board (CJMAB)



Proposed Command and Oversight Structure



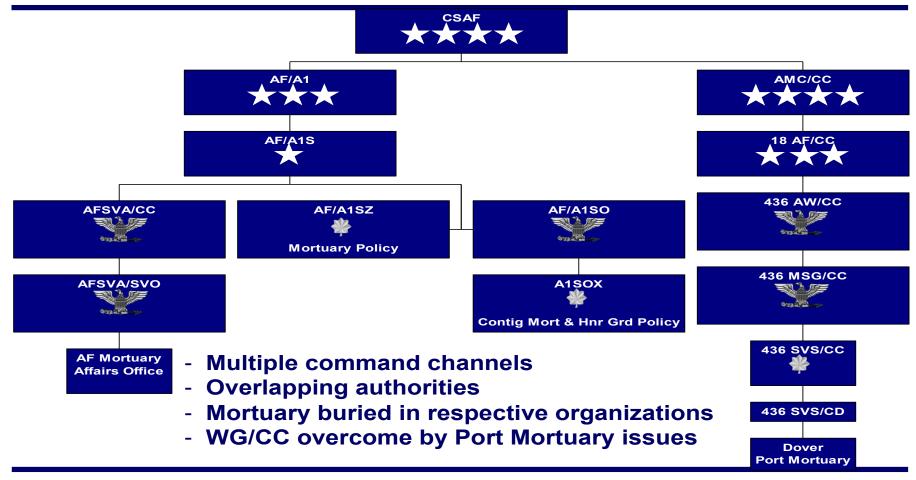


HISTORIC AF MORTUARY CHAIN OF COMMAND

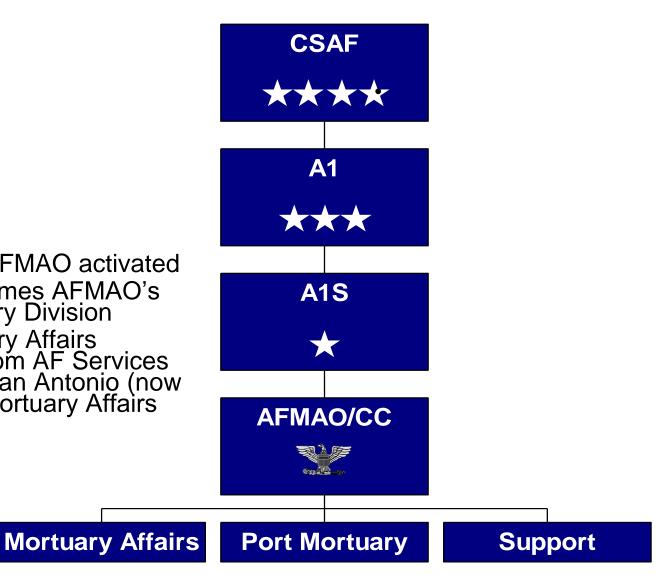


HISTORIC AF MORTUARY CHAIN OF COMMAND





AFMAO CHAIN OF COMMAND



Jan 2009: AFMAO activated

- DPM becomes AFMAO's Port Mortuary Division
- AF Mortuary Affairs realigned from AF Services Agency in San Antonio (now AFMAO's Mortuary Affairs Division)



Findings:

- The commander of AFMAO requires special selection, special training, Uniform Code of Military Justice (UCMJ) authority, and a clear chain of command leading to another commander with the requisite authorities to supervise AFMAO
- In addition, AFMAO lacks sufficient oversight through a routine inspection program



Recommendation 1: The Secretary of the Air Force should direct that:

- a. UCMJ authority be given to the commander, AFMAO;
- b. the AFMAO command be placed on the list of centrally selected Air Force commands; and
- c. the commander should be given special training to deal with the unique nature of the mission.

Recommendation 2: The Secretary of the Air Force should immediately direct either an existing flag officer level command or create a new flag officer level command to oversee AFMAO and require, among other oversight functions, that it develop a stringent command and technical inspection program necessary to accomplish its mission.



Findings:

- Some have suggested to the subcommittee that the two missions of AFMAO and AFMES be combined under one command in a form of Joint Organization or Joint Operating Agency
- However, the two missions are extremely different and the chains of command—AFMES to the Army Medical Research and Materiel Command and AFMAO through Air Force channels to an appropriate Air Force flag level command as proposed in Recommendation 2—can coordinate and competently accomplish their varied missions



Findings:

- AFMES is responsible for the full range of medical examiner tasks for the Armed Forces, which include maintaining DoD's extensive DNA bank, drug testing, toxicology testing, and examining wounds from all sources to optimize protective equipment of all types for troops in the field
- The importance of this mission requires a clear chain of command and supervision
- However, the Director of AFMES, with a large Tri-Service organization and worldwide responsibilities currently lacks the command title, associated responsibilities, and UCMJ authority,

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Recommendation 3: The Secretary of Defense, in conjunction with the Secretary of the Army, should create a command position in the AFMES. The commander should be centrally selected from qualified uniformed officers by a board convened by the Secretary of Defense and given all command and UCMJ authority.



Finding:

 Although the current informal command relationships have worked well over the 10 years of combat, more formal training, manning and command relationships should be established

Recommendation 4: The Secretary of the Army as Executive Agent, should establish minimum standards of manning, training, and tour length of Service liaison teams at AFMAO and direct that such teams be placed TACON to its commander.



Finding:

- Prior to the service of the current AFMAO commander there was no ongoing and systematic internal after action reviews (AARs) that were inclusive of all team members and that could be used as a self-correcting process
- AFMAO and its collaborating organizations require a sustained and systematic inspection regime to focus on both command and technical issues on a regular basis
- These efforts require DoD IG direction and support in addition to the Air Force Command inspection program currently being implemented



Recommendation 5: The Secretary of Defense should direct the DoD IG to conduct an annual inspection of AFMAO and its relationships with the AFMES, the JPED, and the Service liaison units. In addition, the Secretary of Defense should, in collaboration with Congress, direct the formation of a Board of Visitors to conduct command and technical reviews of AFMAO and its interface with these organizations and report its findings through the Defense Health Board.

Department of Defense Issuance (DoDI) Process

•60+ DAYS •(may take \supset DEVELOPMENT > •40 DAYS •77 DAYS •77 DAYS SUBMISSION more than 1 year) Draft the Instruction Revised version Revised and Final document Final package posted in the Instruction with is forwarded to edited version is forwarded to WHS submitted to **Federal Register** input from WHS for detailed forwarded, along for pre-signature USD(P&R) for various Service review and format with a completed review signature **Subject Matter** SD 106 to the **Expérts (SMEs)** USD(P&R) •60 day period for seeking approval comments for formal OGC provides Revised and Approved coordination Legal Sufficiency edited version is package submitted back to Draft is Review then forwarded to informally Office of General WHS for final reviewed by the All comments Counsel (OGC) received are Service SME's actions and Formal for Legal addressed and other known Office of Security posting to **Objection Review** coordination with **Directives Portal** stakeholders at Review provides all known the Action Officer clearance review stakeholders level All comments Revised version received and adiudicated is routed internally to all Office of the **Under Secretary** Smooth document of Defense submitted to OGC Personnel and for Legal Readiness Adjudicătion OUSD(P&R) Review directoràtes for their review and

comment



Finding:

- The source and flow of DoD polices is inadequate
- Offices responsible for policy implementation and oversight are understaffed and under resourced
- III-defined roles of Executive Agency require clarification
- CJMAB has inadequate authority to direct timely and meaningful policy decisions

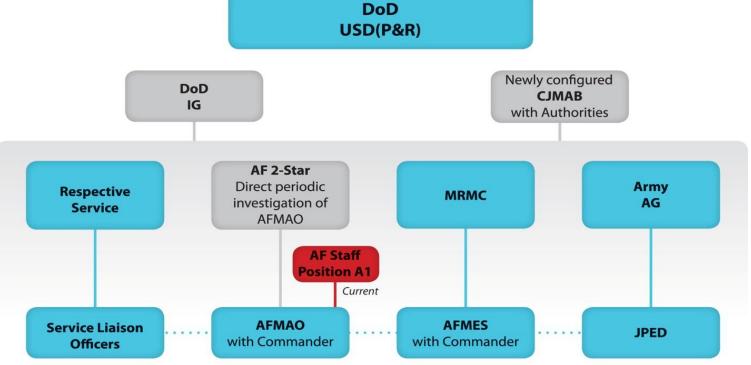


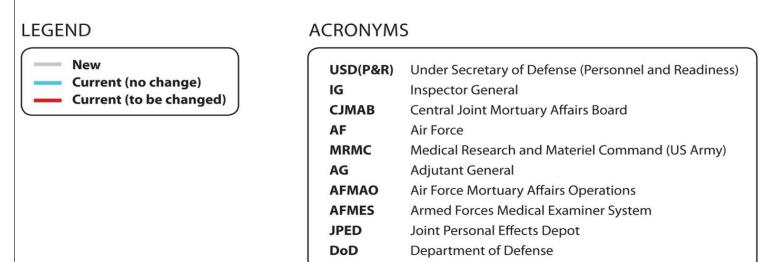
Recommendation 6: The Secretary of Defense should order:

- a. immediate staffing and approval of policy directives concerning mortuary affairs, to be completed within 60 days of issuance of this report;
- b. that offices within the Department of Defense responsible for policy implementation and oversight be adequately manned and resourced;
- c. that the role of Executive Agent be clarified and strengthened with a biannual review by the Department of Defense of the continued role of the Secretary of the Army as Executive Agent; and
- d. that the CJMAB be chaired by the senior uniformed Army officer or Assistant Secretary of the Army, who is empowered to direct implementation of policies and ensure proper oversight of such policies over all components.



Proposed Command and Oversight Structure







AFMES Discussion

Dr. Bruce Parks

Forensic Pathologist, Pima County Forensic Science Center and

Former Chief Medical Examiner, Forensic Science Center
Department Head,
Pima County, Tucson, Arizona

Dr. Victor Snyder

Former U.S. Representative, Second Congressional
District, Arkansas
Former Chair, Subcommittee on Oversight and
Investigations,
House Committee on Armed Services



Discussion

- AFMES leadership believes its missions include positively identifying all
 of the Fallen and establishing identification as rapidly as possible
 - For the first time in any conflict all combat and non-combat fatalities are autopsied
 - Data are also used to assess injury patterns and evaluate forward medical efforts to ultimately improve military and medical tactics, procedures, and equipment
- AFMES holds jurisdiction over remains once sealed and contained in theater but turns physical custody to AFMAO upon arrival at DPM
 - Under the current system, AFMAO personnel assist medical investigators and examine transfer case seals
- Realignment will occur within DPM to increase accountability and align functionality so that it more closely mirrors civilian industry standards of operation and relationships between medico-legal investigations and mortuary affairs



Findings and Recommendations: AFMES

Findings:

- Concerns were raised by AFMAO personnel regarding the transition from the previous system in which AFMAO had greater involvement in the initial processing of remains
- Recognizing the legal issues involved in the medical examiner and death certification process, AFMAO personnel expressed concerns about their lack of visibility in this process and their need to be aware of the nature of the cases that will come before them
- Due to the increased responsibility to be assumed by the medical examiners following this transition, issues regarding the decreased visibility and morale of AFMAO personnel may arise



Findings and Recommendations: AFMES (Continued)

Recommendation 7:

AFMAO and AFMES leadership should ensure that during the transition of responsibilities from AFMAO to AFMES regarding the receipt and cataloguing of remains, morale issues and appropriate lines of communication are properly addressed.



Findings and Recommendations: AFMES (Continued)

Finding:

- Unresolved tension exists between AFMES and AFMAO regarding the handling, mortuary processing, and shipment of remains other than those belonging to the Fallen
- Specifically, AFMES is statutorily required to conduct examinations and process numerous decedents, including DoD contractors and foreign nationals
- However, AFMAO personnel are not statutorily authorized to process remains other than those pertaining to the Fallen
- Currently, AFMES has to arrange for the disposition of all other remains from DPM, including overseas shipment

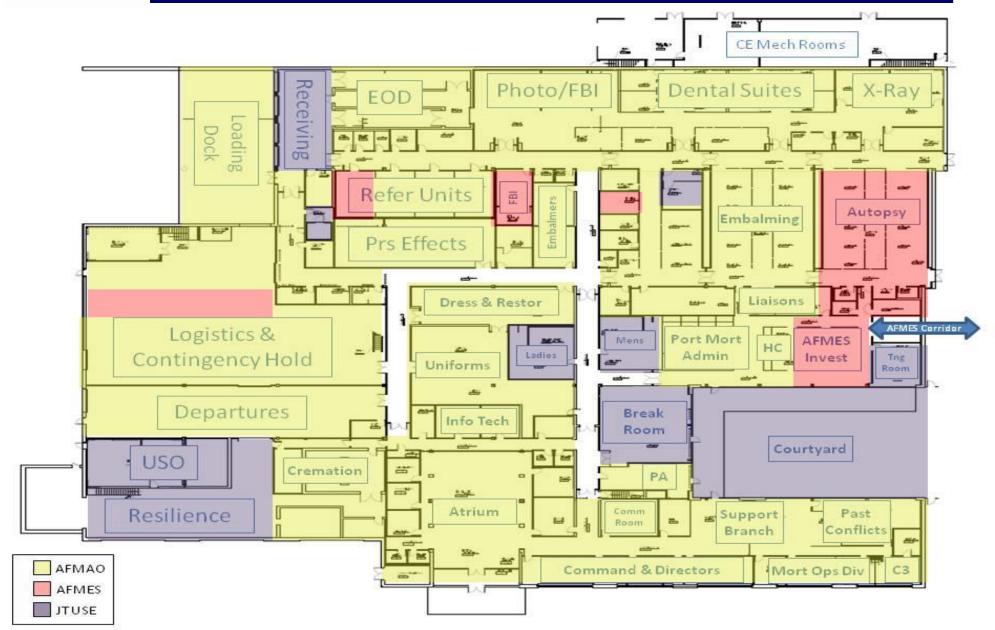


Findings and Recommendations: AFMES (Continued)

Recommendation 8: Because AFMAO and AFMES currently have different authorizations regarding who is entitled to receive their services, the DoD should consider expanding AFMAO authorization to include processing the remains of non-military decedents that AFMES is required to examine.

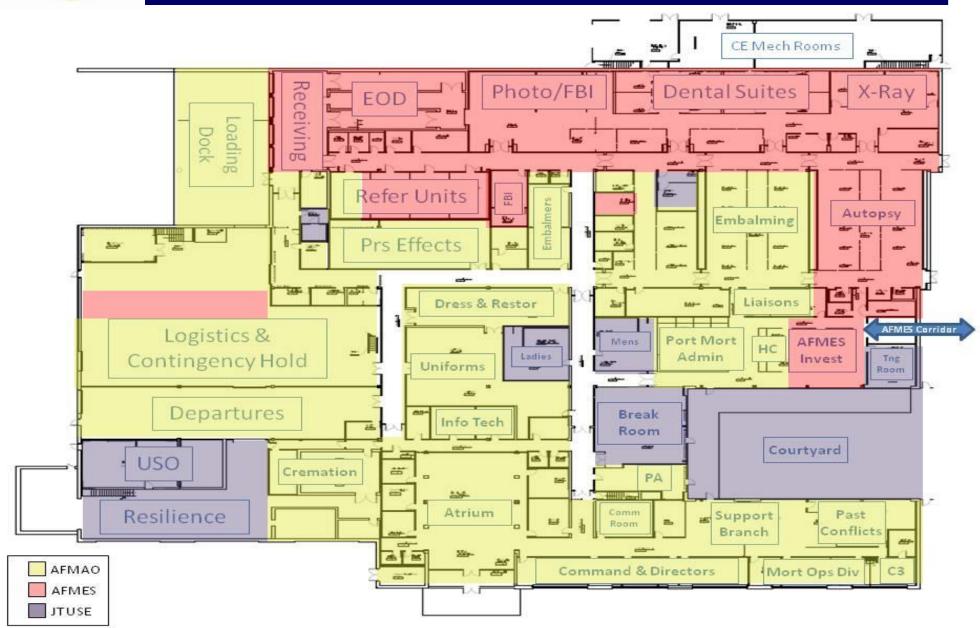


REALIGNMENT UNDERWAY





REALIGNMENT ENDSTATE





- Those taken to ensure proper chain of custody, including the implementation of a bar code system of tracking remains at every handler at every stage in the medical examination process, as well as functional changes such as locked doors, authorized entries to refrigeration units, and a clear separation of the AFMAO and AFMES facilities, seem to be appropriate
- Moreover, the Armed Forces Medical Examiner Tracking System (AFMETS) appears to be a very robust tracking system that includes many checks from multiple personnel to mitigate the possibility of errors that might arise



Recommendation 9: With the realignment not yet complete, it is imperative that the AFMES continue to carefully monitor chain of custody procedures and ensure that appropriate oversight is accomplished as additional improvements are made. In addition, with this custodial realignment, new standard operating procedures should be developed to reflect the significant changes in procedures.



- The implementation of the exposure control plan as a remedy created by the new administration seems adequate
- Universal precautions regarding infectious disease control and exposure control procedures have been developed and applied with regard to the handling of contagious and potentially contagious remains
- Corrective actions taken since the new commander assumed his responsibility seem to be appropriate and ensure suitable interaction between AFMES and AFMAO personnel



- AFMES personnel expressed concern that should large numbers of decedents, whether military or non-military, arrive in short periods of time, particularly if large losses are sustained over time, the ability of AFMES to surge to meet the requirement would be difficult
- Partly because of the command and control issues previously discussed, adequate effort within the chain of command has not gone into planning for the possibility of large numbers of decedents



Recommendation 10: Planning should occur, instituted at high levels within the command and control structure, to prepare for the possibility of large numbers of decedents arriving at DPM, whether from military or non-military causes (such as natural disasters).



- Appropriate practices are in place to ensure appropriate personnel training and certification. Moreover, AFMES has pursued practices to ensure its facility, personnel, and the services provided exceed the professional standard through the accreditation of the toxicology and DNA laboratories, personnel certification and training, as well as the pursuit of National Association of Medical Examiners accreditation for the AFMES facility
- There is no firm rule on the size of portion that will not be tested for identification, but given the operations tempo and other circumstances, the Medical Examiner sometimes elects not to send for testing portions of up to 500 grams
- The subcommittee found no reason to recommend any change to these practices



AFMAO Discussion

Dr. Jacquelyn Taylor

Executive Director, New England Institute at Mount Ida College

Mr. Vernie Fountain

Owner and CEO, Fountain Embalming Services, Fountain National Academy of Professional Embalming Skills and Forensic Investigative Resources of the Midwest

Mr. Garold Huey

Consultant and Trainer, International Mass Fatalities Center



Discussion

- Subcommittee reviewed the corrective actions and new policies and procedures developed to address past concerns
- For the most part, it found these improvements appropriate and sufficient
- In addition to improving these policies and resources, AFMAO personnel have continued to meet their crucial mission through extraordinary effort and innovative thinking
- Addressing needs for grieving families, they formed relationships and partnerships, streamlined processes, and otherwise focused all efforts to comfort the families of the Fallen, regardless of rank.
 They deserve our complete gratitude



Findings and Recommendations: AFMAO

- However, the subcommittee did identify additional areas for improvement. There is an overarching need to enhance and acknowledge the key role played by morticians at AFMAO. Efforts should be made to augment their status and credibility. Thus, several findings focus on personnel and training and the need for oversight and review to achieve this end
- DPM licensed embalmers are understaffed for large-scale events. The mission requires the highest skill levels and extensive embalming and restorative experience. The scope of practice regarding various categories of embalming restoration, and preparation staff is of concern



Recommendation 11: Resourcing of licensed embalming personnel should be carefully reviewed to ensure that it is consistent with the values of the stated DPM mission.

Recommendation 12: AFMAO should establish policies on scope of practice (i.e., who is qualified to perform which functions). Licensed personnel who do not hold the necessary skills to complete complex cases should receive adequate support and/or training.



- Training is insufficient across Mortuary Affairs
- Additional training on health and safety is needed
- Further, communication with the PADD and family about care of their loved one requires the highest skill level and should be performed by experienced funeral service practitioners
- Training and credentials for Service liaisons, case managers and casualty assistance officers vary among Services. Training and background credentials for those directly communicating with families is often inadequate given the gravity and complexity of these issues, and should include sensitivity training, or its equivalent



Recommendation 13: Periodic training should be provided to: a) ensure personnel are up-to-date on health and safety practices and regulations; and b) ensure embalmers are trained in the most advanced techniques available in the embalming and restorative arts. Competency evaluations should be created in consultation with subject matter experts.



Recommendation 14: Training for Service liaisons, case managers, and casualty assistance officers should be increased and standardized across Services. Training must provide skills for effective communication between morticians and the PADD. Competency evaluations should be created in consultation with subject matter experts.



- The lines of communication across the continuum of care are fraught with risks
- The mortuary staff described ongoing supervision and a collegial environment that facilitates communication among licensed embalmers particularly when added expertise is required for difficult cases
- However, this does not appear to be the case as evidenced by at least one contract embalmer assigned a complex and difficult case that resulted in less than optimal results



Recommendation 15: AFMAO should conduct a complete review of authorization/disposition forms utilized in Mortuary Affairs with the goal of creating a standardized form for use by all Services. Forms should employ language regarding necessary embalming and authorizing restorative art procedures in consultation with subject matter experts. Options should be provided to ensure viewability if desired and feasible.

Recommendation 16: During the initial notification, the PADD should be provided with all of the information that is available at that time and an overview of the medical examiner and mortuary processes.



Recommendation 17: Standardized internal communication/collaboration among licensed embalmers should be established to ensure optimal viewability classification is determined, consistent with the wishes of the PADD and the overall mission.



- Current options for disposition of identified portions that the PADD does not wish to receive are limited to retirement at sea
- Conversations between the subcommittee and representatives of the VA involved in memorial affairs raised the possibility of additional options for disposition of cremated remains through VA services and operations
- Such options are comingling of cremains in an ossuary or placement of ashes in a scatter garden in a VA national cemetery



Recommendation 18: The DoD should work with the VA to assess the feasibility of alternatives to retirement at sea, such as interment or inurnment in VA facilities. In addition, DoD should explore alternatives for such disposition in military cemeteries.

Recommendation 19: To ensure ongoing discussions of ways in which the VA might assist in interment or inurnment of portions of remains, the DoD work with VA to create a permanent slot for VA representation on the CJMAB.



Findings:

 The event involving the AFMAO crematory underscores the lack of supervision of the Senior Mortuary Specialist, a knowledge deficit regarding the fundamental approval process that affects junior and senior staff, and a failure to utilize appropriate communication channels between the mortuary specialist and the PADD



Recommendation 20:

Whole body cremations should not be conducted at DPM.



Findings:

- Subcommittee developed additional findings for which there are no recommendations
- One of the past concerns voiced was the allegation that human fetal remains were transported from LRMC to DPM in containers that were inappropriate and did not meet regulatory standards
- Subsequent investigation revealed that although the containers used met regulatory standards they were not containers typically used for this purpose
- The mortuary staff at LRMC had ordered the appropriate transport container but the supply of containers had not arrived in time for these shipments
- LRMC now has the appropriate containers in stock and the issue is resolved

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Way Ahead

- In conclusion, care of the Fallen and their families is a DoD-wide mission and a sacred duty
- Thus, the assurance of proper chain of command, regular oversight, and review of the interactions among the supporting missions must be a DoD priority
- It is imperative that policy, structural, and procedural solutions capture and reflect lessons learned from a decade of war and that these lessons are not lost for the next generation of Fallen Warriors and continue to ensure continuous quality improvement and sustain the sacred trust of families of our Fallen



Discussion