

An Interview with NCFDA Disaster Preparedness Chairman Scott Rhodes

I would venture to say that most of us have read or heard about the probable spread of the H1N1 (Swine Flu) this fall. How serious is it? How can we know if it is a real threat to our health and welfare? Could it just be a lot to do about nothing? For answers to these and other questions, NCFDA turned to Scott Rhodes, Chairman of the NCFDA Disaster Preparedness Committee. Scott is a funeral service licensee working at Rich & Thompson Funeral Home and Cremation Service in Burlington. (Larry F. Stegall, NCFDA Executive Director).

1. Do you think all the news about H1N1 is hype or a “Chicken Little” Complex?

Everyday communication with the general public can be difficult. Communicating about preparing for a potential disaster is even harder. The task is to get the information out about a potential disaster or event and its possible effects without causing a panic or chaos, while at the same time, you have to do it in a way that does make the public feel that you are trying to use scare tactics on them. You don't want to burn them out or make them disinterested in your message. I think the CDC and WHO have done a good job with their delivery of information, but I believe the media oversaturated us with information by bombarding us with the same information over and over with different headlines every day. As we all know by now, the first wave of the H1N1 flu associated illnesses were no more severe than the seasonal flu. That being said, there were some unusual characteristics of this virus that we need to pay attention to. First, it reached pandemic stage quickly. It's also a new virus that few of us have any built in immunity to. Almost 98 percent of all flu cases reported this year have been H1N1 associated. Historically, the second wave of a pandemic event is more severe than the first and that is what we must be cautious of.

There will be a resurgence of the H1N1, how severe it will be is not known. The very least a funeral home should be doing is evaluating just how prepared they are for an event, regardless of size.

2. What is H1N1 and how is it spread?

The H1N1 virus or the “swine flu” is a new influenza virus that is causing people to become ill. This virus was first detected in humans in the US in April of 2009. Its symptoms are similar to those of other seasonal flus found in humans. The symptoms include fever, cough, sore throat, body aches, headache, chills and fatigue. Some people have reported diarrhea and vomiting. Younger children, people with underlying health conditions and pregnant women are among those considered high risk for developing more severe forms of the illness. Deaths have occurred in the US in people reported to have an H1N1 infection, usually as a result of pneumonia and respiratory failure, or an exacerbation of existing conditions.

The virus is spread in much the same way as the seasonal flu. Mainly from person to person through coughing or sneezing or coming into contact with contaminate objects, such as telephones, door knobs, etc.

3. What are the things funeral homes can do to negate the spread of the virus?

Funeral homes, like any facility that sees large numbers of people passing through it can help restrict the spread of the H1N1 virus by encouraging employees to practice good preventative measures, such as hand washing and coughing into the bend of their arms instead of their hands. Antiseptic gels or lotions should be readily available for both employees and visitors. While difficult to do because of the nature of a funeral home, social distancing should be practiced when an employee interacts with visitors or families. This would require one to limit the amount of physical contact (hugging, comforting) they have with someone. After shaking someone's hand, the employee should disinfect as soon as possible with antiseptic gels. Work surfaces such as telephones, desk tops and door knobs should be frequently disinfected.

4. What direct impact might the virus have on the operations of a funeral home?

In the event of a second wave of H1N1 related illness, it is possible that the effects of the illness could be more severe than we experienced in the first wave. If that happens, funeral homes may see an increase in employee absence due to illness or family related illnesses. They may also see an increase in their call volume. It is also possible that the event could cause disruptions in a funeral homes supply chain.

5. How might the daily business routine of a funeral home and funerals ceremony be impacted?

If the second wave of H1N1 illnesses is much more pronounced than the first, the funeral home may be faced with an escalation of the issues mentioned in question 3. It's estimated that in the event of a severe pandemic event, around one third of the work force in the US will be stricken and unable to function. The trickle down effects of such a workforce reduction could result in a loss of manpower for responding to death calls, embalming, waiting on families, going on funerals and manufacturing and delivering funeral supplies. This workforce reduction could also result in a shortage of people to open and close graves. Some issues not directly affecting funeral service but affecting our everyday lives would be a reduction in food supplies and fuel.

6. I have read of possible quarantine or isolation as in the 1918 pandemic. Do you think it possible in this day and time?

Quarantines and social isolation of infected individuals is still practiced today as a means of restricting the spread of communicable illnesses. We have already seen it practiced in school closures and the boarding of infected college students in designated dorms. Hospitals practice this all the time by utilizing isolation wards. In the event of a more severe second wave in the US, there could possibly be a moratorium placed on public assemblies, such as visitations or funerals. While these are sometimes considered severe measures, they have historically proven to be very effective in restricting the spread of disease outside the isolated area.

7. A moment ago I asked what a funeral home can do to mitigate the spread of the flu. Is there a role for the North Carolina Funeral Directors Association?

The NCFDA should strive to provide real-time and accurate information about the potential H1N1 event and it's development that will allow its membership to make sound decisions, both for their business continuity and for their communities well being.

8. In the event of a severe outbreak of flu resulting in high mortality, where do funeral homes turn for resources like vehicles, personnel, fluid, body bags, refrigeration, transportation, etc.?

Funeral homes should understand that in the event there is a severe flu event with high mortality numbers that everyone is going to want the same limited supplies. Funeral homes will be in competition with hospitals and local communities for items such as disaster pouches and refrigerated trailers. There may be competition with other funeral homes for preparation room supplies and caskets. Real time inventory management is most likely not going to be available due the trickledown effect I mentioned earlier. It's hard for suppliers to ramp up manufacturing and delivery of supplies if they are experiencing a work force reduction themselves. Funeral homes should consider stocking extra PPE, especially N95 masks, embalming supplies and disaster pouches, even those made out of lighter materials. It's also a good idea to communicate with your local emergency managers about your capabilities during a severe event. Historically, local governments have assumed that the private sector will operate "business as usual" without any real understanding as to what your limitations are. Should supplies become exhausted, funeral homes may have to resort to creative thinking to help solve some of your issues.

9. Who does funeral service reach out to in a crisis situation? Is there a state plan for response?

Every state and in NC, every county, is required to have an Emergency Operations Plan and a Pandemic Flu plan. One portion of these is a Mass Fatality Plan. These plans list agencies and assets available for a response effort and designates the role of each. In NC, the OCME is responsible for mass fatality response. The NCFDA is listed in NC's plans as an available asset, but its role is not clearly defined. In short, we generally have ourselves to rely upon; most disaster response is geared to aiding the living. In an isolated incident that is affecting one area and does not tax resources all over a geographical region or the nation, there are federal assets that can be requested such as DMORT. However, in a pan flu event, they most likely will not be available.

10. What is the role of the NCFDA Disaster Preparedness committee in the event of a full pandemic?

The most important thing the NCFDA Disaster Preparedness Committee can do is to develop guidelines and gather information that the membership can have access to that will help them understand and deal with the potential issues they may confront in the face of a major pandemic event. The committee is also evaluating ways to train the membership on mass fatality response, so that in the event the NCFDA is ever called upon to assist the state or local communities, they will have a trained group of people ready to smoothly integrate into a response effort. This response effort would not be limited to governmental entities, but would also make a response available for any member firm faced with unusual circumstances due to disaster related events.

11. What are your thoughts about business continuation in the event of a crisis situation

I am a firm believer that funeral service itself is a key stakeholder in disaster response, regardless of the cause. While we may not always be looked upon as a valuable community asset, we are. As such, I feel that funeral homes should make every effort to investigate and plan for events that could result in a disruption of day to day operations. This includes identifying and training secondary sources of manpower, identifying alternative ways of conducting business and if necessary preparing to educate a scared and confused general public in the event that the authorities restrict your operations. I would also suggest that business owners investigate business continuity insurance to help you get over those periods where you are not receiving payment for your services or merchandise.