



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

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Prepared By

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New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

*Dedication*

I would like to dedicate this contingency plan to all the firefighters that have made the ultimate sacrifice, and to the Fire Department of New York and all emergency responding personnel that gave their life at the World Trade Center Attacks September 11, 2001.

*You are gone, but you are not forgotten.*

And to all my fellow firefighters in the State of New Hampshire and across the country.

To my wife Sandy for many late sleepless nights I left her alone to complete this contingency plan, while she was pregnant with our daughter Katlyn Marie.

Be Safe and God Bless America



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## *Acknowledgments*

I would like to thank all the firefighters and fire officers that gave me the opportunity to ask questions and receive their valuable opinions and concerns.

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Thanks to you all.

-Mark E. Klose B.S.,  
Firefighter/Paramedic



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Disclaimer

The Line-of-Duty Death or Serious Injury Contingency Plan is to be used as a guideline to assist Public Safety Service Agencies in the State of New Hampshire, in the event of serious injury or death of an agency member.

The views, opinions, and or findings in this Line-of-Duty Death or Serious Injury Contingency Plan are those of the author. The citation of trade name, and names of manufacturers is not to be construed as Official State Government, New Hampshire Department of Safety, and Office of the State Fire Marshal endorsements or approval of products or services referenced herein.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Table of Contents**

Introduction	I
Definitions	Section 1
Department/Personnel Responsibilities	Section 2
Next of Kin Notifications	Section 3
Planning the Services	Section 4
Funeral Arrangements and Funeral Services	Section 5
After Care	Section 6
Death or Serious Injury Investigation	Section 7
References	Section 8
Appendix A Office of the State Medical Examiner	Section 9
Appendix B Notification and Checklists	Section 10
Appendix C State and Local Benefits	Section 11
Appendix D Department Members Pictures	Section 12
Appendix E Transportation	Section 13
Appendix F Lodging	Section 14
Appendix G Miscellaneous Information	Section 15



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Table of Contents**  
(Reserved)



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Introduction

A firefighter's serious injury or death, in the line of duty, will be an extraordinarily traumatic event for both the surviving family and your organization. When this occurs, the tragedy will most likely be a sudden event, without any warning. Serious injuries, and their recuperative periods, present long-term challenges for family members and members of your department. Also the time period from the death to the laying to rest of your firefighter(s) will be extremely short, and require that your department move quickly, with compassion and immediate assistance, to provide a fitting memorial for your firefighter(s).

The purpose of this document is to provide a written, contingency plan to assist the Fire Chief and fire department with the planning and coordination that will become necessary should such an event occur. Provide pertinent information in helping to secure the PSOB benefits for eligible survivors of your fallen firefighter(s).

This plan is devised with structural flexibility and not to overburden any one individual. This plan is generic and gives the Fire Chief flexibility to make changes to the contingency plan to meet the needs of his/her fire department.

The plan assigns responsibility to individuals and teams for the:

- Department/Personnel Responsibilities
- Next of Kin Notifications
- Planning of Services
- Public Safety Officer Benefit Program Notification and Benefits
- Funeral Services and Arrangements
- Family and Department After Care
- Death or Serious Injury Investigation



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Public Safety Officer Benefit Program

The Public Safety Officers' Benefits (PSOB) Act (42 U.S.C. 3796, et seq.) was enacted in 1976 to assist in the recruitment and retention of law-enforcement officers and firefighters. Specifically, Congress was concerned that the hazards inherent in law-enforcement and fire suppression and the low level of state and local death benefits might discourage qualified individuals from seeking careers in these fields, thus hampering the ability of the communities to provide for public safety.

The PSOB Act was designed to offer peace of mind to men and women seeking careers in public safety and to make a strong statement about the value American society places on contributions of those who serve their communities in potentially dangerous circumstances. Each year PSOB Program receives substantial information about line-of-duty deaths that is used to enhance public safety officer training. PSOB Program also encourages public safety agencies to adopt moral policies that can help guide and agency through the tragic event of a line of duty death.

The PSOB Program, a *public safety officer* is a person serving a *public agency* in an official capacity **with or without** compensation, as a law enforcement officer, firefighter, or a member of a public rescue squad or ambulance crew. Law enforcement officers include, but are not limited to, police, corrections, probation, parole, and judicial officers. **Volunteer Firefighters and members of volunteer rescue squads and ambulance crews are covered under the program if they're officially recognized or designated members of legally organized volunteer fire departments, rescue squads, or ambulance crews.**

The PSOB Program provides a one-time financial benefit to the **eligible survivors** of public safety officers whose deaths are the direct and proximate result of a traumatic injury sustained in the line of duty. The PSOB Program provides the same benefit to public safety officers who have been permanently and totally disabled by a catastrophic personal injury sustained in the line of duty if that injury permanently prevents the officer from performing **any** gainful work.





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Definitions

**Advocacy** - Providing for supportive needs of the patient, family, and others involved in an emergency.

**After-Action-Report** - thorough and objective review of an incident to be reviewed by the Fire Chief, fire department, family, media, and media, as deemed appropriate.

**Arson** - The willful or malicious burning of property

**Bureau of Alcohol, Tobacco, and Firearms (ATF)** – Agency of U.S. Department of Treasury created in 1972, which regulates distribution of alcohol, explosives, tobacco, and firearms.

**Career Fire Department** - Firefighters and other personnel are paid for providing services.

**Circumstantial Evidence** - Not drawn from personal knowledge or direct observation and tends to prove other facts via deduction.

**Critical Incident Stress Management (CISM)** - A comprehensive organized approach for the reduction and control of harmful aspects of stress on emergency services.

**Critical Incident Trauma** - An event that is emotionally overwhelming and attacks the ability to cope with the stress.

**Department of Transportation** - Executive department of the U.S. government that works to guarantee safe, economical, and efficient transportation in the United States.

**Direct Evidence** - Immediately prove the existence of the fact or issue.

**Evidence** - Anything that tends to prove or disprove any matter in question, or to influence the belief respecting it.

**Federal Bureau of Investigation (FBI)** - Principal investigative arm of the U.S. Department of Justice.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Fire Department Safety Officer** - Fire department officer that is designated as an expert in safety for all aspects of emergencies.

**Fire Department Family Liaison Officer- (FLO)** - A person to assume the role of liaison between the surviving family(s) and the fire department.

**Fire Department Family Support Team** - Will be responsible for the necessary functions and support before, during and after a serious injury or death.

**Fire Department Funeral Detail Officer- (FDO)** - A person to assume overall responsibility for the uniformed/civilian personnel participation in the funeral proceedings.

**Fire Ground/Incident Commander** - Person that assumes overall command and control of personnel and apparatus at the emergency scene.

**Fire Related** - Responding to, operating at, returning from any actual or reported fire or hazardous materials, or emergency medical scene.

**Incident Command System** - A systematic approach to firefighting activities through the use of sectors/branch management to allow increased safety, communication, task accomplishment and overall control

**Injury** - An Act that damages or hurts

**Line-of-Duty** - PSOB regulations (28 CFR 32) defines line-of-duty as “any action that the public safety officer whose primary function is crime control or reduction, enforcement of criminal law, or suppression of fires is authorized or obligated by law, rule regulation or condition of employment or service to perform.” Other public safety officers-whose primary function is not law enforcement or fire suppression-*must be engaged in their authorized* law enforcement, fire suppression, rescue squad, or ambulance duties when the fatal or disabling injury is sustained.<sup>1</sup>

**Line-of-Duty Death** - Any reasonable or emergency response action firefighters and/or emergency medical services and/or civilian personnel are authorized or obligated to perform.

“Death must be a direct and proximate result of a personal traumatic injury sustained in the line of duty.” (Public Law 90-351)<sup>2</sup>

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<sup>1</sup> Justice, United States Bureau of, Public Safety Officer Benefit Program, 1999

<sup>2</sup> Ellis, Mary, National Fallen Firefighter’s Foundation, Oral Interview, 2001



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Logistics Officer- (LO)** - A person to assume responsibility for preparing (but not limited to) apparatus, vehicles, equipment and facilities for the funeral ceremonies.

**National Fallen Firefighters Foundation** - Nonprofit organization, under authority of the United States Fire Administration created in 1992 to remember fallen firefighters and their families.

**National Institute for Occupational Safety and Health (NIOSH)** - National Institute for Occupational Safety and Health. Established in 1970 an agency of the Federal Department of Health and Human Services; the only federal institute responsible for making recommendations for prevention of work related illnesses and injuries.

**NHOCME** - New Hampshire Office of Chief Medical Examiner

**NHFA** – New Hampshire Fire Academy

**NHSFMO** – New Hampshire State Fire Marshal Office

**NHSP** – New Hampshire State Police

**Occupational Safety and Health Agency (OSHA)** - Occupational Safety and Health Administration. Agency of U.S. Department of Labor created in 1970 to promote safe and healthful working conditions.

**PFFNH** - Professional Firefighters of New Hampshire

**Planning Group Officer (PGO)** - A person that will have overall responsibility and control of coordinating all activities involving the planning and execution of plans for the memorial services.

**Post Traumatic Stress Disorder** - A psychological disorder associated with traumatic events that are general outside the range of usual human experience.

**Public Information Officer- (PIO)** - A person appointed or designated by the Fire Chief or designee to assume the role of liaison between; Elected Official, Law enforcement Agencies and the media.

**Public Safety Officer's Benefits Act (PSOB)** - Public Law 94-430 (42 U.S.C. 3796 et seq.) is intended to pay a monetary value to the survivors of any fire fighter who dies or is permanently disabled in the line-of-duty.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Public Safety Officer**- Is a person serving a public agency in an official capacity, **with or without compensation**, as a law enforcement officer, firefighter, or a member of a public rescue squad or ambulance crew.

**Safety equipment** - Equipment which fire departments use for emergencies. Includes but is not limited to: turnout gear, helmet, gloves, SCBA, hand tools, fire apparatus, etc.....

**Scene** - Location of emergency to which the fire department responds.

**Span of Control** - Limit one person can effectively manage

**Serious Injury** - Any harm to the body which causes severe, permanent or protracted loss of or impairment to the health or to the function of any part of the body.

**Standard Operating Procedure (SOP)** - Set of organizational directives that establish a standard course of action on the fire ground to increase the effectiveness of firefighting team. Provide the method by which specific action is taken.

**Survivors** - Immediate family members including; spouses; all children to include step-children, legally adopted children; parents to include step-parents; siblings; and significant others.

**United States Fire Administration (USFA)** - Created in 1978 after the National Commission on Fire Prevention and Control became part of the Federal Emergency Management Agency.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

# Department/Personnel

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# Responsibilities



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Chief of the Department

Upon the death or serious injury of a firefighter, dispatcher, or civilian employee, the Chief or designee should immediately be notified. In the case of a line-of-duty death, it is imperative that this communication is made without delay.

During notifications, it is imperative that accurate information be passed quickly and discretely. The media and private citizens monitor our radio traffic regularly. Names of dead or injured firefighters **SHALL NEVER** be given over the radio. Telephone or Nextel shall conduct all communications of this sensitive nature.

Upon receipt of this tragic news, the Chief, or designee, (if the Chief is unavailable) should coordinate the following:

1. Notify New Hampshire State Fire Marshal Office
  - a. Weekends/Nights contact New Hampshire State Police **(1-800-852-3411)**
  - b. NHSFMO will make notification to other agency(s) see appendix
2. Order of Fire Department Notifications:
  - a. Assistant, Deputy, Battalion, District Chiefs, Captains, Lieutenants
  - b. Administrative Officers/Secretary/Chaplain
  - c. Safety and Training Officers
  - d. Line Officers
  - e. Line Firefighters
  - f. Mutual Aid Departments for station coverage
3. Assemble a Notification Team:
  - a. Chief or Acting Chief
  - b. Family Liaison Officer (Chief selects individual)
  - c. Fire Department Chaplain/Clergy
  - d. A firefighter friend of the family or close civilian family friend
  - e. Member from the Office of Chief Medical Examiner
4. Contact and advise elected Officials of all pertinent information informing them the fire department is implementing the Line-of-Duty Death or Serious Injury Contingency Plan.
5. Make Next of Kin notifications



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

6. Set up Command Staff meeting upon the completion of notification Process.
7. Command Staff Meeting/Grieving Committee:
  - Appoint Planning Group Officer to oversee and coordinate completion of the plan
  - Appoint Fire Department Funeral Detail Officer
  - Appoint Fire Department Family Liaison Officer
  - Appoint Fire Department Public Information Officer
  - Appoint Fire Department Logistic Officer
  - Appoint Scribe/Documentation position
  - **Contact Funeral Director to be involved in Grieving Committee**
  - Verify that necessary Critical Incident Stress Debriefing (CISD) will be is implemented.
  - Discuss all pertinent issues.
8. Assist the NHSFMO with the fire investigation, and to oversee that all portions of the investigation are documented and completed (see appendix B Injury/Death Investigation Check List).
9. Chief of Department needs to allow outside agencies to assist with planning and coordinating of arrangements.

**CONTACT THE NATIONAL FALLEN FIREFIGHTERS FOUNDATION'S CHIEF-TO-CHIEF NETWORK FOR ASSISTANCE (301) 447-1365**

Public Safety Officers' Benefit Program (see appendix C)  
Bureau of Justice Assistance  
Washington D.C. 20531  
(202) 307-0635 or Toll Free (888) 744-6513 (8:30 – 5:00 Monday – Friday EST)  
Fax # (202) 616-0314

Notify Fire Alarm/Dispatch for formal Department/Public announcement. (See page 16)



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Fire Alarm/Dispatch Notification

When the Chief of the Department or designee is informed of the death of an active or retired member, the chief or designee will instruct fire alarm/dispatch center to notify the members of the death in the following manner:

Alphanumeric Pager system

Telephone

Audible paging system:

“Chief \_\_\_\_\_ of the \_\_\_\_\_ Fire

Department announces with deep regret the passing of: (please circle)

Chief, Assistant Chief, Deputy Chief, Captain, Lieutenant, Engineer,  
Firefighter

(Name) \_\_\_\_\_:

Funeral arrangements are as follows:

Calling hours are from: \_\_\_\_\_ and \_\_\_\_\_ at the  
\_\_\_\_\_ (Funeral Home, \_\_\_\_\_ School,  
\_\_\_\_\_ Church).

\_\_\_\_\_ (Address of location)

Companies please flags at half staff.”

Upon receiving official notification from the Chief of the Department of the death, the station flags will be lowered to half-mast until the day following the funeral.





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Planning Group Officer (PGO)

It is vitally important, to both the immediate family of the deceased, and to the firefighters, that the department provides the best possible tribute to your fallen comrade(s). For this reason it is extremely important that an effective group of planners is gathered to manage all activities. The organizational structure that will become necessary to control and coordinate this effort is patterned after the ICS structure that is utilized to manage major emergency incidents.

A Senior Officer should be designated by the Chief, or designee, and will lead the Planning Group as the Planning Group Officer. This Officer will be appointed as soon as possible and have overall responsibility and control of coordinating all activities involving the planning and execution of the plans that provide an appropriate memorial service for our fallen firefighter.

The Planning Group Officer will supervise and over see the following seven Divisions/Groups:

1. Family Liaison Officer
2. Public Information Group
3. Viewing/Vigil Division
4. Memorial Service Division
5. Cemetery/Graveside Division
6. Reception Division
7. Logistics Group

Once the death occurs or **is imminent**, the Planning Group Officer should assign the Division/Group Leaders to appropriate individuals and a staff meeting should be convened to distribute work assignment and notebooks. It is important that this meeting is called ASAP. The laying to rest of your firefighter will take rapid action. There may be religious reasons that dictate this burial or cremation within three days of death.

The structure provided to the Planning Group Officer is meant to be a guide. It may be altered as the Officer sees fit. As the overall event Officer, the following are considerations that should be followed as planning progresses:



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**THE DESIRES OF THE SURVIVING FAMILY ARE PARAMOUNT AT ALL TIMES.**

Planners should be aware that open and frequent communication between the FLO and within the Grieving Committee is key to successfully coordinating this effort. It is advisable for the Grieving Committee to meet once or twice daily. This allows all Division/Group Leaders to see the overall work in progress.

The earlier the team is activated the better. Lost time can never be made up when dealing with this workload in a three to five day window.

This is a complex event to manage. Bring the best talent to the Grieving Committee that is available.

Give your Division/Group Leaders authority to select the best people to staff their organizations.

Rehearsals of specific events are advisable, if possible, to reduce confusion.

Think big - there is a potential for having hundreds to thousands of individuals participating in a full FD funeral.

Remember there is planning support available from other agencies:

- CHIEF-TO CHIEF NETWORK
- New Hampshire Fire Chiefs Association
- Professional Fire Fighters of New Hampshire
- National Fallen Firefighter Foundation
- International Association of Fire Fighters
- International Association of Fire Chiefs
- Local Unions
- Local Police Department
- New Hampshire State Police Association
- Other major agencies
- NH Funeral Directors



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Family Liaison Officer (FLO)

The Family Liaison Officer is a critical position in a line-of-duty death or serious injury incident. The Family Liaison Officer can make or break the relationship between the fire department and a family. **The Family Liaison Officer should not be a close family friend**; this will allow the FLO to coordinate funeral services for the family and not be in the grieving process.

The Fire Chief or designee will appoint this person as soon as possible after a death or serious injury.

The Family Liaison Officer (FLO) shall, at a minimum complete the following

1. Accompany the Fire Chief or designee during the initial family notification.
2. Conduct a family planning meeting within **24 hours**.
3. Act as fire department's single point of contact to the family.
4. Act as the Liaison Person between Fire Department and Funeral Director
5. Manage the family aftercare program.

This individual should be drawn from the ranks of the fire department. Also look at the **employee's emergency contact information form** (appendix B) for designated persons to be the Family Liaison Officers. Designated individuals should be available by pagers at all times.

Once assigned, the FLO will be available 24 hours a day until after the burial. The FLO should be assigned a Fire Department vehicle. He/she should be issued communication equipment (cell phone, portable radio, and pager) for the entire funeral process.

The FLO should also be provided an assistant to assist with this very important role.

In the event of a multiple death or serious injuries, it will be necessary to have one Family Liaison Officer (FLO) for each fire department member.

**FLO needs to have contact and communications with FUNERAL DIRECTOR(s) in charge of the services.**



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Initial Notification** – It is critical that the FLO is designated as quickly as possible after a death or serious injury. This person shall attend the initial notification of a death or serious injury visit, which will allow the FLO to start building a relationship with the family. The FLO can make or break the relationship between the fire department and the family. If this is not possible, the name, telephone number (cell), and pager numbers should be given to the family prior to leaving the initial notification visit.

As soon as practical after the notifications (earliest as possible), it is important that the **FLO along with the Funeral Director** schedule a **Family and Fire Department Planning Meeting**. The decisions made at this meeting will provide important information to the planning and logistics efforts as the department prepares for an honorable service(s) for your fallen comrade(s). **FLO at this meeting shall complete the family planning checklist (see appendix B).**

The meeting will be difficult for both the family and the fire department personnel, but it will be an important step in the eventual recovery of the family. At this meeting, the family should decide how many people would represent them. (A word of caution, this will most likely be an emotional meeting, **the fewer** members present; the more constructive the meeting. A large group may make the painful process more difficult to manage.)

**Always keep in mind that we are there to facilitate the wishes of the Family.**

It is important that the department explain all options for the family, regarding the PSOB benefits (firefighter(s) autopsy needs to be completed), types of services and fire department involvement, before any decisions are made. The FLO must be prepared to discuss **all** aspects of the funeral process and counsel the family in its decisions.

One of the most important decisions is the site of the memorial/funeral service. Explain to the family that the traditional fire department service could bring hundreds and possibly thousands of mourners, thus requiring a large venue.

Explain that your department is ready to organize such a large service. Let the family know that if a decision is made to proceed with a traditional line-of-duty service, the family will be consulted on every detail, if desired. This decision must be timely if the fire service is to be notified to assist with accommodations.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**BE PREPARED FOR THE POTENTIAL OF BEING BLAMED FOR THE LOSS OF THEIR LOVED ONE. IT IS VERY NATURAL FOR PEOPLE TO FIND SCAPEGOATS IN A TIME OF EXTREME GRIEF. THERE IS ALWAYS A POSSIBILITY THAT THE FAMILY (S) WILL REFUSE ALL FIRE DEPARTMENT ASSISTANCE. IF THIS HAPPENS, CALMLY STATE, "WE RESPECT YOUR WISHES." ALSO, ADVISE THEM THAT IT IS YOUR DEPARTMENT'S INTENT TO MEMORIALIZE YOUR FIREFIGHTER (S) WITH A MEMORIAL SERVICE AND THAT THE FAMILY MEMBERS ARE WELCOME TO ATTEND. EXPLAIN THAT THIS MEMORIAL IS NOT MEANT TO CONFLICT WITH THE FAMILY'S WISHES, BUT THAT IT IS EXTREMELY IMPORTANT FOR GRIEVING FIREFIGHTERS, AND THE FIRE SERVICE, TO PROPERLY PAY TRIBUTE TO ONE OR MORE OF THEIR OWN.**

**Remember, some religions require that the deceased to be buried or cremated within a three-day period of time. If these restraints are present, it becomes even more important that the process moved rapidly.**

FLO should also be prepared to assist the family in the after care once the primary services are completed. The surviving family members may need assistance with, but not limited to:

- Public Safety Officer Benefit Program
- Workers' Compensation
- Pension Plan
- State/Property Taxes
- Life Insurance Policy
- Mowing Lawns
- House chores
- Snow clearing
- Children(s) Education Planning
- Home security detail



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Public Information/Resource Officer (PIO)

The Public Information/Resource Officer is established primarily to coordinate and disseminate all information regarding a line-of-duty death or serious injury sustained to a firefighter(s). The PIO will report directly to the Chief and or Planning Manager during the service preparation phase.

**RULE NUMBER ONE – THE NAME (S) OF INJURED OR DECEASED FIREFIGHTER (S), DISPATCHER (S), OR CIVILIAN EMPLOYEE (S) WILL NOT BE RELEASED, WITHOUT CONSENT FROM THE OFFICE of CHIEF MEDICAL EXAMINER and ONLY AFTER POSITIVE IDENTIFICATION HAS BEEN ESTABLISHED BY THE MEDICAL EXAMINERS OFFICE.**

Think of how tragic it would be if the media informed the family of the loss.

The responsibilities of the PIO include but not limited to:

The coordination and/or presentation concerning all media contacts

- Interviews
- News conferences
- Written news/press releases

Notification of the death and pertinent information to:

- New Hampshire State Police: **(24 hours a day) 1-800-852-3411**
- New Hampshire State Fire Marshal Office: **(603) 271-3294**
- New Hampshire Office of Chief Medical Office: **(603) 271-3636**
- Professional Fire Fighters of New Hampshire and Local Union(s)
- Major State Fire Departments
- U.S. Department of Justice: Line-of-Duty Death **(202) 307- 0635**
- National Fallen Firefighters Foundation:  
Telephone **(301) 447-1365, FAX (301) 447-1645**
- Public Safety Officers Benefit Program:  
Telephone **(888) 744-6513, FAX (202) 307-3373**
- City Official(s)
- Elected Officials
- Mutual Aid Departments

Rapid notification to important State and Federal politicians is very important if you desire their participation. They need as much lead-time as possible to adjust their schedules.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Establish information telephone numbers for:

- Recorded information
- Live contact person

Develop a complete biography of individual(s) and recent pictures to be used:

- By the press, newspapers
- Ceremonies (collage, portraits)

Preparation of a press kit that will include:

- Biography(s)
- Pictures
- Service information
- Maps

Consider the use of pool coverage

- Notify the Radio, Television and News Association

Notification needs to be done ASAP

- Manage media viewing area at service and burial. Media should not be in a position that would detract from the service in any way.
- Work with the media, not against them. Good coverage will help in the tribute to your fallen comrade.

Designate a media staging area away from the scene, but yet near by.

Preparation of printed service programs for:

- Viewing
- Memorial
- "Last Alarm Cards"

Coordinate with FD video section for taping of events.

Manage VIP arrangements:

- Airport pickup
- Transport
- Lodging

Communicate with Family Liaison



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Logistics Group Officer (LGO)

The Logistics Group is established to manage specific areas of responsibility, as outlined in this document, in response to a line-of-duty death, or serious injury, sustained by a firefighter (s), dispatcher (s), or civilian employee (s).

The Logistics Group Officer will be a Chief Officer and shall report directly to the Planning Group Officer

The Logistics Group Officer will need to appoint competent staff members to assist with the Group's responsibilities.

This Officer is responsible for the following but not limited to:

### **All financial accountabilities of cost for services**

Office of Chief Medical Examiner will arrange for deceased's transportation:  
Hospital to New Hampshire Office of Chief Medical Examiner  
From the scene to the NHOCME  
Funeral Home to NHOCME

Office of Chief Medical Examiner may have honor vigil outside autopsy suite.  
Following exam may have honor guard and escort back to funeral home

Contact Local PD/NHSP for police escort from NHOCME to funeral home.

Fire department may provide Dept/American Flag to drape body to and from OCME.

Designate and coordinate the use of all Fire Department apparatus for events:

- Fire Department apparatus to be used as caisson.
- Fire Department apparatus to be used as flower car (if necessary).
- Fire Department units in processions
- Outside agency vehicles
- VIP transport:
  - Surviving family
  - Politicians
  - Union officials
  - City management
  - Clergy
- Antique Fire Apparatus.





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Coordinate with the PIO for having firefighters greeting visiting firefighters at the airports (Manchester, Logan).

Coordinate with school district officials for the use of schools to be utilized as a service hall(s) to accommodate large numbers of guest and firefighters.

Arrange transportation for visiting firefighters

Arrange lodging for visiting firefighters

Designate apparatus order for all processions. Designate route of procession. If possible, the procession should proceed past deceased's station, and as many stations as possible.

If possible, the procession should go through downtown, to allow the public to be involved in the ceremony.

**Procession from Viewing/Vigil site to Service.**

Arrange placement for visiting fire/EMS apparatus in procession

Arrange staging plan at service site for visiting Honor/Color guards and visiting firefighters

**Procession from Service site to Burial.**

**NO SIRENS will be activated during any procession.** Apparatus should have emergency lights activated during any procession.

Fire Department apparatus static displays:

- In-service apparatus standing by on procession routes.
- Ladder truck(s) for arch (large flag for arch).

Coordinate with Planning Officer for mutual aid Fire and EMS coverage to fill Fire Department stations.

Liaison with Police Department:

- Motorcycle escort
- Street closures along route
- Rifle team for gun salute (if desired)



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Organize staging areas:

- Locations:
  - o Viewing/Vigil staging area (officer needed):
    - Liaison with Funeral Director
    - Organizes FD apparatus
    - Obtains casket roller if FD apparatus will be used as caisson
  - o Outside Agency Apparatus Staging Area (officer needed, possibility of over 100 +/- vehicles to control)

Need to provide:

- Restrooms
- Refreshments
- Food
- Shaded areas
- Seats

Obtain services of a bagpiper or Gaelic Band – (Professional Firefighters of New Hampshire)

Obtain one or two buglers (they may need to be amplified).

Obtain the services of a drummer, if desired.

Obtain adequate white gloves for Command Staff, pallbearers, and color guard.

Obtain black bands for badges.

Design all necessary maps.

Obtain helmet and turnout that will accompany casket.

Select eight pallbearers and a leader. (Usually members of deceased company)  
Coordinate with Family Liaison Officer for family preferences.

Coordinate the FD color guards.

Issue a directive that specifies uniform to be worn: Class A uniform



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Arrange for helicopter fly over if desired (coordinate with service group leaders).

- New Hampshire State Police
- New Hampshire National Guard (1159<sup>th</sup> Medical Company)
- DHART
- Boston Med Flight
- U-Mass Worcester

If there are injured, or disabled firefighters, who wish to attend any service, provide access and transportation for them.

**Attempt to keep track and accountability of all expenses for the services**

Contact local taxi and transportation provider for assistance for traveling firefighters

Arrange for firefighters to be at local airports to assist traveling firefighters with current information of services. Coordinate with PIO to notify major airline carriers of arriving out-of-state firefighters and ask for their assistance.

**Arrange for at least two (2) firefighters, to stay at surviving family's home during viewing, memorial, and funeral services. This will help reduce the chance of criminals breaking into the family's homes while they're attending services.** The National Fallen Firefighters Foundation has reported that due to increase publicity of the firefighter(s) death or injury, criminals like to take advantage of grieving families.

**Completion of Funeral Service Information Sheet (see appendix)**



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Honor Guard Officer (HGO)

Will be responsible for selecting personnel, organizing, and supervising all the details of the casket watch, and pallbearers during viewing hours. Work effectively with all Liaison personnel. Coordinate and schedule casket watch activities with Funeral Director(s)/Liaison and Families wishes.

Recruit casket watch members from Honor Guard members, Off-duty personnel, On-duty Personnel, American Legion, Veterans of Foreign Wars (VFW), volunteers from other department or EMS services.

All casket watch pallbearers will be in their dress uniform with white gloves

Shirt and Coats will have black mourning bands

American and Department flags will be placed at the ends of the casket

Arrange two (2) casket watch pallbearers, one at each end of the casket at all times during viewing hours

Casket watch pallbearers will be at attention for duration of casket watch

Rotate pallbearers every fifteen (15) minutes

Honor Guard OIC or designee, with two (2) relief pallbearers will march at the half step, towards the casket; give the order to halt, right/left face, stay at attention, salute the watch, present "arms", order "arms", have replacement pallbearers step forward to the side of standing pallbearers. Have standing pallbearers step forward into formation about face, stand at attention, salute the watch present "arms", order "arms", right/left face, at the half step march out of the viewing room.

Arrange for two (2) Honor guard members to be at the door for opening/closing and assisting people in and out of viewing building



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Next of Kin

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## Notifications



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

The importance of the NEXT OF KIN NOTIFICATION cannot be over-emphasized. This process will set the tone for many difficult days, weeks, months, and years for the surviving family. Sensitivity and compassion are imperative.

Family notification should be made as quickly as possible to avoid the family receiving a notification from another outside party. The media will employ many efforts to seek out the name of the fallen firefighter(s), EMS provider(s), dispatcher(s), or civilian employee(s). You must use all necessary measures to protect the next of kin from unwanted media exposure.

For this reason, the Notification Team will need to assemble rapidly. The team should be at least two and preferably three individuals with individual vehicles. The team should be comprised of the following members:

1. The Chief of the Department, however, if unavailable, the **Highest Ranking Officer**
2. Family Liaison Officer (selected by the Chief)
3. Fire Department Chaplain/Clergy
4. A firefighter friend of the family or close civilian family friend
5. Member from the Office of Chief Medical Examiner

If the fallen firefighter's family resides far enough out of the area as to make your department's participation in the notification impractical, contact the local Fire/Police agency in the area to assist in a timely notification.

Another distinct possibility is that your Department could experience a loss of more than one member. This would require multiple notification teams to be assembled and deployed.

Before you arrive at the residence, verify latest information, (**employee emergency contact information form, see appendix**) and **DECIDE WHO WILL SPEAK, AND WHAT THAT PERSON WILL SAY**

A word of warning, the family may strike out and blame the Department for their loss. For this reason, the initial notification and how the department handles it is extremely important.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Steps to be taken at the residence:**

It may become necessary to have BLS/ALS Ambulance standing by if the people receiving the news are medically vulnerable. If this is done, have the apparatus stage near the residence, but not in view.

At the door identify yourself and ask to come in. (Notification should take place in a private setting.)

When inside, be sure you are notifying the right person.

Get people in a comfortable or relaxed setting: the most important function of the person making the notification is to put all of the known basic facts into one sentence and tell them. Make sure your message is absolutely clear and direct.

Begin with, "I have very bad news" or "I'm very sorry to tell you". Let them know how it happened, "Your husband died responding to a fire," or "Bob was killed in a building collapse."

Allow the family to express their emotions. Do not try to talk them out of their grief. This is a very sad time. **Do not mask your own grief.**

Provide only the facts you know, never speculate. If you cannot answer a question, find out the correct answer.

**Phrases or words to avoid:**

- a. **"I know how you feel."**
- b. **"It was God's will."**
- c. **"Life will go on."**
- d. **"He would have wanted to go this way."**
- e. **"Be brave."**
- f. **"Passed away."**



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Use the victim's first name when referring to your fallen member.**

Ask if the department can assist by notifying immediate family members (parents, brothers, and sisters). Ask if the department can pick up any children who may be away at this time. With the permission of the next of kin, the department can help setup a support system:

- a. Clergy
- b. Relatives
- c. Friends

Make a list of who attended notification (family members, department members, and others)

**Do not** take any of the victim's personal items with you.

If the survivor(s) ask to see the deceased or serious injured member, even if the body is badly disfigured **you must obtain clearance from Medical Examiners Office**. People often have a need to see, touch and hold the deceased; otherwise they may be in denial. This is often very helpful in the family's grief process. It gives a sense of finality/closure.

If family members wish to see the deceased or seriously injured member, arrangements need to be made rapidly for the viewing. **No viewing will be conducted at the Office of Chief Medical Examiner except under extreme circumstances**. Sensitivity to the family is very important. Provide the best possible environment and avoid delays that heighten the family's anxiety.

Offer to transport the family to the location of the member, and help prepare them for what they will see. **Do not let them drive**. If you transport the family, turn off your radio and/or advise dispatch that you are transporting the relatives and, if possible, switch to an alternate channel, or communicate by cell phone.

If the Department's Family Liaison Officer is not present at the notification, the family should be given the name prior to the team departing. Write down his/her telephone and pager numbers. If possible, the family should already know this person. Have one member of the Department stay with the family, unless the family declines.

Advise the family that the Family Liaison Officer will contact them to assist with the necessary arrangements.





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Advise the family of possible media calls. Unwanted media exposure will only add to the difficulty of this tragedy. Suggest that a friend of the family screens their incoming calls.

**Assure the family that their wishes are the Department's number one concern.**

The Office of Chief Medical Examiner will advise the family that New Hampshire State Law requires an autopsy. Having an autopsy completed may assist the family in obtaining benefits from the Public Safety Officer Benefit Program

Ensure that the family understands that they do not have to make any immediate decisions regarding services, mortuary, wills, etc.

Before leaving the residence, try to set a time for a Family Planning Meeting (Family Liaison Officer). There are decisions that will need to be made by the family that will shape the planning process. This meeting should take place within the first 24 hours.

**Never leave immediately after making a notification.  
Do not leave people without a support system. Wait for others to arrive.**

**Medical Facilities:**

Family Liaison Officer meets with Medical Facility Staff/Officials to discuss appropriate waiting area for the family, co-workers and the media.

Have emergency room staff contact in-house information officer/liaison or social services to assist the family and family liaison officer.

Ensure that hospital information liaison or social services has access to medical personnel treating department member(s) to obtain timely patient status information for the family.

Family Liaison Officer is to stay with the family member(s) to provide emotional support and to serve as liaison for the fire department.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Employee Emergency Contact Information**

Experience has shown repeatedly that when a line-of-duty death or serious injury occurs up-to-date employee information is critical. Officials responsible for notification must have access to only the current and correct information. The information that you provide will be used **ONLY** in the event of your serious injury or death in the line of duty. Please take the time to fill it out fully and accurately because the data will help the department take care of your family and friends.

**Personal Information**

Last Name	First Name	Middle Name
Home Address		
City	State	Zip
Daytime Phone Number:		Evening
Phone Number:		

**Contact Information**

Family or friends you would like the department to contact. Please list \*in the order you want them contacted. If needed, provide additional names on the back of this sheet.

**NOTE:** If the contact is a minor child, please indicate the name of the adult to contact.

Name: Relationship:

Home Contact Information

Address: Phone:

Work Contact Information: Name of Employer:

Address: Phone:

Pager/Cell phone:

Special Circumstances, i.e. health, age, etc.

Name: Relationship:

Home Contact Information

Address: Phone:

Work Contact Information: Name of Employer:

Address: Phone:

Pager/Cell phone:

Special Circumstances, (i.e. health, age, etc.)

Department member you would like to accompany the Chief or designee:



New Hampshire Department of Safety  
 Division of Fire Safety  
 Office of the State Fire Marshal  
 Line-of-Duty Death or Serious Injury  
 Contingency Plan



NH DEPT OF SAFETY - Div. of Fire Safety  
 OFFICE OF THE FIRE MARSHAL  
**IDENTIFICATION CARD**

Date \_\_\_\_\_ 20 \_\_\_\_\_

Date Joined Dept. \_\_\_\_\_

Name \_\_\_\_\_

SIGNATURE OF PERSON FINGERPRINTED				DENTAL RECORDS LOCATION			
RESIDENCE OF PERSON FINGERPRINTED (NO. & STREET)				CITY/TOWN/STATE/ZIP			
DATE OF BIRTH	SEX	RACE	HEIGHT	WEIGHT	EYES	HAIR	PLACE OF BIRTH
SCARS, MARKS, TATTOOS OR ANY UNUSUAL CHARACTERISTICS							
SIGNATURE OF OFFICIAL TAKING FINGERPRINTS				NAME & ADDRESS OF PRIMARY PHYSICIAN			

1. RIGHT THUMB	2. RIGHT INDEX	3. RIGHT MIDDLE	4. RIGHT RING	5. RIGHT LITTLE	
16. LEFT THUMB	7. LEFT INDEX	8. LEFT MIDDLE	9. LEFT RING	10. LEFT LITTLE	
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY		LEFT THUMB	RIGHT THUMB	RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY ( USE BACK OF CARD FOR FOOTPRINTS )	



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Fire Alarm/Dispatch Notification

When the Chief of the Department or designee is informed of the death of an active or retired member, the chief or designee will instruct fire alarm/dispatch center to notify the members of the death in the following manner:

Alphanumeric Pager system

Telephone

Audible paging system:

Chief \_\_\_\_\_ of the \_\_\_\_\_ Fire

Department announces with deep regret the passing of

(Retired/Rank) \_\_\_\_\_

(Name) \_\_\_\_\_

Funeral arrangements are as follows:

Calling hours are from \_\_\_\_\_ and \_\_\_\_\_ at the \_\_\_\_\_  
Funeral Home/ \_\_\_\_\_ School/ \_\_\_\_\_ Church. (address)  
\_\_\_\_\_ (City/Town) \_\_\_\_\_ ( State) \_\_\_\_\_.

All Companies place flags at half-mast.

Upon receiving official notification from the Chief of the Department of the death, the station flags will be lowered to half-mast until the day following the funeral.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

# Planning the Service



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Memorial Service Division

Memorial Service Division is responsible for planning and coordinating any and all arrangements for this main service for a line-of-duty death of firefighter(s), EMS provider(s) dispatcher(s), or civilian employee(s). This Division will work and coordinate arrangements with the Funeral Director(s).

The Division Leader will report directly to the Planning Group Officer.

For proper planning to commence, it is very important that the Planning Group Officer, and Family Liaison Officer, submit the following information, as soon as possible. Necessary information includes the following:

Date of service: \_\_\_\_\_

Location of service: \_\_\_\_\_

Time of service: \_\_\_\_\_

Level of Fire Department involvement? (Check with FLO)

Full Fire Department Funeral Yes \_\_\_\_\_ No \_\_\_\_\_

Open or closed service to public and outside agencies (check with FLO)

Open or closed casket

Preferred speakers:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Will the last alarm tradition be used? Yes \_\_\_\_\_ No \_\_\_\_\_

Secure a facility large enough to hold hundreds or thousands of Firefighter's (local schools, theaters, hotels with conference centers, churches, **(you may need to go outside your community)**).



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Ensure the facility is large enough to handle anticipated large numbers. You may have to plan for overflow.

Coordinate with:

- Logistics - arrival and departure from service
- Religious Leaders - program content

Design order of program. **This service should last no more than one hour and forty-five minutes.** Coordinate with Planning Group Leader and Funeral Director(s) on starting time of the service.

Design seating plan of the facility being used - if indoors determine capacity and obtain a floor plan drawing:

- Family area
- VIP's
- City management
- Politician
- Union (local, state, and national)
- Fire Department Officers
- Fire Department personnel
- Visiting Chief Officers
- Civilian friends
- Visiting departments (possibly in blocks)

Preferred music: \_\_\_\_\_

- Bag Piper: Yes \_\_\_\_\_ NO \_\_\_\_\_
- Bugler Playing Taps: Yes \_\_\_\_\_ NO \_\_\_\_\_
- Harpist courtesy of OCME (Kathrine Descheneaux) for calling hours, church services

How music is to be performed

- Choir
- Soloists (very impressive if possible)
- Recording
- Orchestra
- Small group (instrumental)

Adequacy of PA system:

Contact local school system for PA system: Yes \_\_\_\_\_ NO \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Use of Bull Horns to call cadence for visiting firefighters

If outdoors, there are special needs:

- PA system
- Tent
- Chairs
- Restrooms: Porta-potties (contact local companies)
- Water
- Stage
- Power
- Shade

Coordination with pallbearers, the designation of individual pallbearers will be the responsibility of the Logistics Group.

Conduct any rehearsals deemed necessary.

There should be ALS/BLS ambulances standing by.

Coordinate program with Funeral Director- Advise FLO, who will keep the family informed.

- Content
- Order
- Number of speakers

Eulogy presenter - **should be strong, and well prepared.**

Need large photo/oil painting of deceased(s) for service. Coordinate with FLO and PIO's.

Need a shadow box to present with:

- Badge
- Patches
- Hat hardware
- Picture (PIO/FLO to provide)

**Keep record of all financial cost when possible**





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Select the ushers to be used and tasks for them to carry out.

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

*Fire Department Chaplain. (If no chaplain available, contact NH Fire Chaplains Association, through Hudson, NH Fire Department Fire Alarm (603) 886-6021 and request a Fire Chaplain.)*

Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Room for family: Yes \_\_\_\_\_ No \_\_\_\_\_ (set aside a designated/marked area)

Last Alarm ceremony: Yes \_\_\_\_\_ No \_\_\_\_\_ (see "Last Alarm Ceremony" page)

Parking requirements.

- Local schools
- Local businesses/industry/commercial/shopping malls
- Hotel/motels

Coordinate with the PIO's on an appropriate video presentation:

- Interviews with friends, supervisors
- Any pre-existing video of firefighter
- Department video clips

Memorial program distribution:

- Last Alarm Cards



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Honor Guard/Casket watch coverage for viewing/vigil

- Department members
- Outside department members
- Elks
- VFW
- American Legion

**Keep record of all financial cost when possible**



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

# Funeral Arrangements

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## Funeral Services



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Viewing/Vigil Division

**The Viewing/Vigil Division will be established if service is desired by the family(s). This Division will work very close with the Funeral Director(s) at all times must keep Funeral Director(s) informed of any changes.**

The Viewing/Vigil Leader will report to the Planning Group Officer.

Necessary information that is needed:

What type of service is being held (Catholic, Jewish, Baptist, etc.)?

Service date: (usually one to two days prior to Memorial) \_\_\_\_\_

Location: \_\_\_\_\_

Time: \_\_\_\_\_

The duties and responsibilities of this Viewing/Vigil Leader are but not limited to:

Liaison with funeral director(s)

Liaison with clergy.

Coordinator with service facility.

Coordinate with Logistics Officer if the body is to be moved to another location.

Coordinate with HGO post honor guard representatives at entrances and exits of service facility. Post honor guard/Police at cross walks to assist with traffic control and to assist pedestrians.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

If this form of event is held, it is the responsibility of this Honor Guard Officer to provide Honor Guards for posting at or near the casket (one at each end of the casket). Rotate guards every 15 minutes. Coordinate with the Family Liaison Officer if there are preferred individuals by the family.

Honor Guards' Names:

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Other considerations:

Fire Department personnel should escort immediate family members to and from the viewing.

Catholic protocols may include a rosary service in conjunction with the viewing. This may or may not require the participation of an Honor Guard.

It is generally proper protocol for Honor Guards to wear their uniform hat inside the church or mortuary including the time spent posted alongside the casket gloves should also be worn.

The event is usually held one or two days prior to the memorial service.

The casket may be open or closed.

CISM members should be on site for counseling, if necessary.

Flower Arrangements.

Pictures of the fallen fighter(s) should be present. It is responsibility of the PIO to provide:

- An oil painting if possible
- Photographs
- Collage

Use of schools may require completion of Certificate of Insurance, contact local school district officials.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Possible Order of Service

Invocation

Prayer:

Preferred religion Priest/Pastor/Padre/Clergy/Minister  
Fire Department Chaplain

Opening remarks/greetings

Special music

Scripture reading/minister's remarks

Speakers:

- a. Town/City Manager, Town/City Administrator, Mayor
- b. Elected Officials
- c. Any State or Federal politicians
- d. Family representative(s)
- e. Union/Association representative(s)
- f. Fire Department representative's
- e. Friend(s)

Eulogy – Chief of the Department or **by request of the family**

Special music

Presentations

Closing remarks/prayer

Firefighters Prayer

Last Alarm Ceremony

Ringling of box number (bell needed)



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Bagpipes plays:

- "The Fallen Warrior" (family members entering the building)
- "Amazing Grace"
  
- "Last Alarm" cards
  
- 

(Passing out of "last Alarm" cards for firefighters outside of memorial service. Have some "Last Alarm" cards available at the reception also.)

"Dismissal instructions": to be given orally and in writing at the termination of formal services.

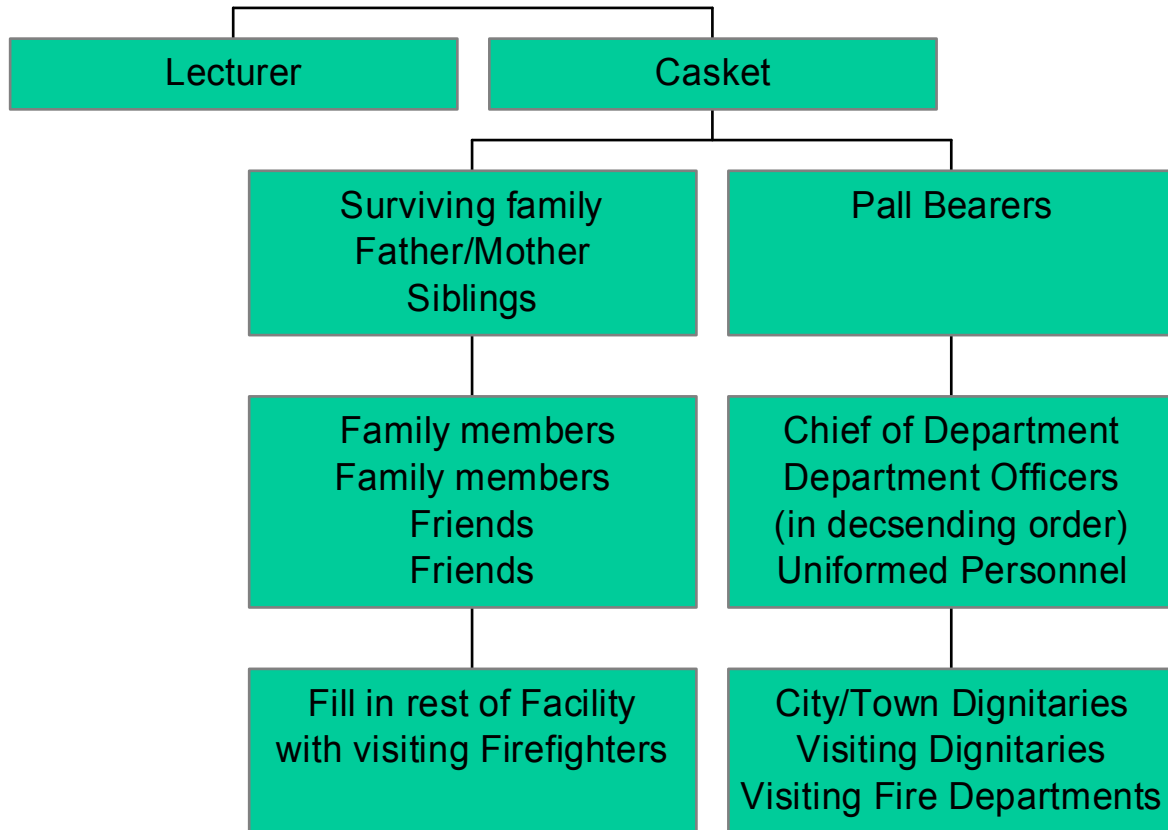
- Cemetery Directions
- Open House at Fire Station
- Reception location and directions



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

## Seating arrangements for Church/Parish

Family will sit on side of lecturer and Fire Department members will sit on opposite side.







New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## "Last Alarm" Ceremony

Chaplain or Department member recites:

Throughout most of history, the life of a firefighter has been closely associated with the ringing of a bell. As he/she began his hours of duty, it was the bell that started it off. Through the day and night, each alarm was sounded by a bell, which called him/her to fight fire and to place his/her life in jeopardy for the good of his/her fellow man. And when the fire was out and the alarm had come to an end, the bell rang three times to signal the end.

And now our Brother/Sister (name) \_\_\_\_\_ has completed his/her task, his/her duties well done, and the bell rings three times, followed by a pause, three times, followed by a pause, and three time in memory of, and in tribute to his/her life and service.

Inside Service: Firefighters are to remain seated

Outside Service: Officer in charge calls firefighters to attention. Honor/Color Guard and Firefighters called to present arms.

Bell is struck three times or the last box number (box 761, box 15, box 251 etc.)

Honor/Color Guard and Firefighters called to order arms.

Firefighters seated.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Cemetery/Graveside Division

The Cemetery Division is established to manage all arrangements for a cemetery/graveside service in response to a line-of-duty death.

The Cemetery Officer shall report directly to the Planning Group Officer.

The graveside service normally consists of a short religious service and several Fire Department protocols.

Remember, the arrival at the cemetery is a very difficult time for family members. A long wait before the service begins can cause a great deal of anxiety. If an extremely long motorcade or delays are anticipated, it may be advisable to arrange for a family waiting room. It is **imperative** to have a parking plan at the cemetery. Cemeteries usually have traffic plans and know exactly how many vehicles can be accommodated check with superintendent of cemetery.

### Critical information for this Division:

What type of service: (Catholic, Jewish, Baptist)

Open or closed service to the public

Location:

### In State:

Name of cemetery: \_\_\_\_\_

Town of Cemetery: \_\_\_\_\_

Telephone #: \_\_\_\_\_

### Out of State:

Name of Cemetery: \_\_\_\_\_

Town/State: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Telephone #: \_\_\_\_\_

Time of anticipated arrival \_\_\_\_\_ Hours

Number of anticipated guests:

Family: \_\_\_\_\_

VIP's: \_\_\_\_\_

Fire Department Personnel: \_\_\_\_\_

Visiting Firefighters: \_\_\_\_\_

Fire Department Honor/Color Guards: \_\_\_\_\_

Number of fire apparatus, buses, and POV vehicles: \_\_\_\_\_

**This Division is responsible for:**

Liaison with cemetery

Liaison with clergy

Setting FD formation

Arrange for seating for at least family and VIPs

Providing restrooms if deemed necessary

Distributing maps to reception location

Shade if necessary

Arrange for Medical/EMS Stand-By

Provide Water/ Heat depending on weather conditions

Coordinate flag presentation to family. The pallbearer/military team will coordinate this with Honor Guard Officer and FLO and who will make presentation to family.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**The Chief of the Department or designee, who will present the American Flag and state;**

**” This flag is presented to you on behalf of \_\_\_\_\_ department in our appreciation for the honorable and faithful service, and ultimate sacrifice of (name) \_\_\_\_\_.”**

Present badge, nametag, and department patch cased to the family.

Provide a parking plan

Provide a sound system

Coordinate a possible fly over of aircraft (if necessary)

Provide electrical power (portable generators/extension cords)

Provide a public address system

Provide and coordinate a bugler - Playing taps (one close and one afar)

Coordinate bagpiper or Gaelic Brigade

Coordinate gun salute (if necessary)

Relocation of flowers



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Funeral Procession Marching to Grave Site





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Vehicle Procession to Grave Site





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Program For Graveside Services

- ❑ Assembly:
  - Family
  - Friends
  - VIPs
  - Fire Department Personnel
  - Fire Department Honor Guard
  - Visiting Firefighters
  - Visiting Honor Guards

Officers and Firefighters stand at attention and Present Arms (as casket is being placed on grave)

Order Arms

Opening prayer

Scripture reading

Bagpiper/ Gaelic Brigade "Amazing Grace"

Committal reading, closing prayer (firemen's prayer if the prayer was not stated at church service)

Taps: (present arms)

Two Buglers, (one close and one afar)

Flag folding: Honor Guard

Flag presentations by Chief or designee (presenter, present arms, then **slowly** order arms.)

Gun salute

Fly by (if possible)

Attention

Dismissal

Provide directions and maps to location of reception.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Reception Division

The Reception Leader shall be responsible directly to the Planning Group Officer.

It is the responsibility of this Division to organize and provide food and refreshments at a reception at the conclusion of the burial service. This will probably take place at a location away from the cemetery. Food and Beverage services maybe needed between morning and afternoon funeral services or following a funeral service at one or more location.

Consider help from Fire Department Ladies Auxiliary or Auxiliary of mutual aid companies, or a professional caterer. Depending on the cause, and number of personnel involved in a line-of-duty death or serious injury, the number of out-of-town guest could range from a few hundred to several thousand.

The responsibilities of this Division include:

Location selection: (Ensure the site has parking and a venue large enough to accommodate the anticipated group.)

Is this event to be catered: Yes: \_\_\_\_\_ NO: \_\_\_\_\_

Location: \_\_\_\_\_

Address: \_\_\_\_\_

Number of anticipated attendees: \_\_\_\_\_

Anticipated starting time: \_\_\_\_\_

Anticipated closing time: \_\_\_\_\_

Menu and refreshments

Provide maps to be handed out at the cemetery/graveside





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

If outside:

- Tents for shade and weather
- Bathrooms
- Tables and chairs

Any introductions and/or program:

- PA/Bull horn
- Stage

Relocation of flowers



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## After Care



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

It is the responsibility of the Fire Department to assist the surviving family(s) and department members during their recovery from the devastating event of a line-of-duty death or serious injury. There will be many details, paper work, and steps that the department can assist the family with. This assistance may extend over a length of time.

The Family Liaison Officer is charged with providing the necessary assistance. This officer may need to select individuals with special expertise to assist in this function.

After care may require a generous time commitment, but as details are handled the workload will diminish.

The surviving family(s) should always be considered one of our own and to reduce the risk of the family members suffering from Post Traumatic Stress Disorder. This is what we would like the Department to do for our families if we were the fallen member.

After care responsibilities include, but are not limited to:

Assisting the family(s) with the completion of all forms for benefits: (see appendix C)

Assist with:

State of New Hampshire Worker's Compensation  
Public Safety Officer Benefit Program (**complete forms for serious injuries also**)

Reference:

**State:**

Worker's Compensation Division  
New Hampshire Department of Labor  
95 Pleasant Street  
Concord, New Hampshire 03031  
(603) 271-3176



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Federal:**

Public Safety Officers' Benefit Program (see appendix C)  
Bureau of Justice Assistance  
Washington D.C. 20531  
(202) 307-0635 or Toll Free (888) 744-6513 (8:30 – 5:00 Monday – Friday EST)  
Fax # (202) 616-0314

**Insurance:**

- Health
- Medical
- Supplemental Insurance: Aflac, Combined, etc.

**Non-Profit Organization Benefits:**

The Hundred Club of New Hampshire (see appendix C)  
P.O. Box 23  
Manchester, NH 03105-0023

Deferred Compensation  
Assisting with taxes

Review of all bills before payment by survivors for legality, honesty, and accuracy, this should include last illness, previous debts, and funeral expenses. Some bills may be covered by insurance, or otherwise not legally due.

Change of titles and bank accounts

**Grief counseling**

National Fallen Firefighters Foundation  
16825 South Seton Avenue  
Post Office Drawer 498  
Emmitsburg, MD 21727  
Phone: (301) 447-1365  
Fax: (301) 447-1645  
[www.firehero.org](http://www.firehero.org)



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Granite State Critical Stress Debriefing (1-800-266-8545)**

At some point the deceased's locker will need to be cleaned out and the contents returned to the family. It is the FLO's responsibility to do this. It is advisable that the contents are screened for inappropriate material prior to sending to the family.

**Employee Assistance Program (New Hampshire Municipal Association)**

**Phone: 1-800-647-9151**

Any other needs:

- Phone call to say hi and to check on family status
- Child Care
- Mowing lawns
- Painting- interior/exterior
- Children(s) birthdays
- Holidays

**Anniversary of the Death or Incident**

Invitations to Fire Department functions: This is important the family should never feel that they are not still included in our Fire Department family.

In the event that a seriously injured firefighter, dispatcher, or civilian employee is transported to an out-of-state medical facility, the fire department is responsible to establish an out-of-state support group for the family, until such time that a fire department support group can arrive.

**Contact and ask for assistance from:**

New Hampshire State Fire Marshal Office

Local Town/City Fire Department

Local Union Office/Officers

Local Fire Department Association/ Officers Association

Hospital Social Services Department



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

# Investigation



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Line-of-Duty Death or Serious Injury Investigation

In the event of a line-of-duty death or serious injury to one or your firefighter(s), EMS provider(s), dispatcher(s), or civilian employee(s), the department must take immediate steps to ensure that the incident is accurately documented and investigated. This action is conducted to protect the interests of the deceased or seriously injured, the surviving family (PSOB program), and the Department. New Hampshire State Fire Marshal Office must be notified of the death(s) or serious injury(s). It is also a mandate of NH State Law (**Pursuant to RSA 153:18**)

As soon as possible after a line-of-duty death(s) or serious injury(s) occurred, the Fire Chief should assign an Investigation Team to conduct an investigation of circumstances of the event. The objective of this team shall be to thoroughly analyze and document the events leading to the death or serious injury.

A secondary objective shall be to obtain, document and secure evidence, which may be a necessary factor in any regulatory action or litigation resulting from incident.

An officer designated by the Fire Chief shall direct the investigation of incidents involving the death or serious injury to fire department members. The investigation team shall report through the designated team leader, who shall be responsible for the management of investigative process

To accomplish this, there will be an Incident Investigation Team pre-designated for use in these types of emergencies. The team shall be made up of (but not limited to.)

1. Assistant/Deputy Chief (appointed by the Chief),
2. Officer-in-Charge of Fire Investigation
3. Officer-in-Charge of Fire Training
4. Officer-in-Charge of EMS Training
5. Member from the Office of Chief Medical Examiner
6. Fire Departments Safety Officer



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

7. Local/State Law Enforcement Agency

8. New Hampshire State Fire Marshal Office (NHSFMO)

The Officer in charge should call the activation of the team. The team should then meet at the scene of the incident as soon as possible.

The initial collection of facts, preservation of evidence, and the appropriate agency notifications shall be the responsibility of the Incident Commander until the time the team can take over.

The following is a list of items that should be addressed: (see Fire Investigation Checklist appendix B)

**Immediate Action:** (but not limited to)

**SECURE THE SCENE.** No unnecessary disturbing of the scene should take place.

- Remove all non-essential personnel.
- Designate one point of entrance and exiting
- Log all personnel entering and exiting the scene

**IMPOUND ALL SAFETY EQUIPMENT** that was used by your firefighter(s):

- SCBA
- Turnouts
- Helmet
- Gloves
- On/off duty clothing member was wearing
- Tools/Specialty equipment

**These items may need to be sent for testing.**

Have a video and still picture record made of the site.

**Secondary Action** (but not limited to:)

Coordinate with the NHSFMO/NHOCME the required autopsy that meets Public Safety Officers Benefit (PSOB) Program requirements.





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Obtain audiotapes of the incident.

Request written transcripts with times of radio transmissions.

Impound all written forms used in the incident.

Incident Work Sheets:

Personnel Accountability Forms

NFPA Fire Investigation Form (available from NHSFMO)

Ensure all necessary agency notifications have been made: (contact NHSFMO)

New Hampshire State Fire Marshal (see appendix NHSFMO Line-of-Duty Death Notification)

OSHA

U.S. Fire Administration (**301-447-1272**) 8:30 – 5:00 EST (301-447-1000) after work hours

NIOSH

Bureau of Alcohol, Tobacco, and Firearms (ATF)

NHSP/ Local Law enforcement agency (if there are suspicious circumstances)

Federal Emergency Management Association (FEMA)

PSOB Program **Fax # (202) 616-0314**

Obtain written statements from all directly involved individuals. It is preferred that these statements be completed prior to the release of members at the end of fire or EMS incident. If this is impractical, the statements should be provided within twenty-four hours. These statements are confidential and are not to be reviewed by any individual, including Supervisors. These documents are to be sealed and turned over to the Incident Investigation Team.

Review all chronological reports

Review all written statements.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Setup interview teams for all companies on the scene.

Interview all individuals on scene

Reconstruct the scene from statements

Have diagrams and designs of the fire scene for interviews

Review the autopsy report in the event of death (one should be required)

Write a final report

Other governmental agencies, which may be involved in investigation:

United States Fire Administration

National Institute for Occupational Safety and Health

New Hampshire Department of Labor

Occupational Safety and Health Administration

Law enforcement agencies

The participation of these agencies shall be at their own discretion, depending on the circumstances of the particular incident. These agencies may or may not produce their own reports of the incident with the recommendations for corrective actions. These reports do not supersede the Investigation Team report.

The investigation team shall utilize the resources of individuals and agencies outside the fire department to assist in investigation and/or provide technical consultation when necessary. These resources include but are not limited to:

National Fire Protection Association

International Association of Fire Chiefs

International Association of Fire Fighters

Consultants

Testing laboratories

If a firefighter, EMS provider, dispatcher, or civilian employee is killed as a result of a fire/explosion; the Fire Department and New Hampshire State Fire Marshal Office Investigation Team shall conduct the FIRE INVESTIGATION. The cause and origin determination shall rest with this team and any additional investigation resources that may be requested, such as the ATF, Local or State Police, or Sheriff Department. Once this investigation is complete, the Arson Investigation Team Leader will then turn the scene over to the Death Investigation Group.



New Hampshire Department of Safety  
 Division of Fire Safety  
 Office of the State Fire Marshal  
 Line-of-Duty Death or Serious Injury  
 Contingency Plan

**Injury/Death Investigation Checklist**

Incident # \_\_\_\_\_

(Military Time)

- Officer-in Charge per established Incident Command System
 Time: \_\_\_\_\_  
By whom: \_\_\_\_\_
- Secured the scene/area.
 Time: \_\_\_\_\_  
By whom: \_\_\_\_\_
- Removed all non-essential personnel.
- Secure the scene with **marking tape** or **rope**.
 Time: \_\_\_\_\_  
**1 entry and exit at the same point**  
**1 Firefighter to stay at entry/exit point to monitor activity**  
**Log names of person(s) entering/exiting**
Name: \_\_\_\_\_
- Perform only overhaul that is absolutely necessary.**
Time: \_\_\_\_\_
- Notify local Law Enforcement for assistance with scene security.
 Time: \_\_\_\_\_  
Officer(s) Name: \_\_\_\_\_
- Contact Fire Investigation Officer/Team.
 Time: \_\_\_\_\_
- Contact NH State Fire Marshal's Office. **(603) 271-3294**
Time: \_\_\_\_\_  
**(Contact NH State Police Dispatch 24 hours per day)**  
**1-800-852-3411**
Name: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Safety Equipment Impound Check Sheet

If a single or multiple, seriously injured or deceased firefighter(s) are transported to medical facilities for treatment, and you cannot secure the firefighter(s) personal protective equipment (PPE), you need to call the hospital, local fire department, or State Fire Marshal to assist with impounding and securing all PPE.

When impounding safety equipment, place equipment into **CLEAR, heavy-duty plastic bag(s)** and secure the plastic bag with an evidence tag from local Law Enforcement.

Impound **ALL Safety Equipment** that was used by your firefighter(s)

**SCBA** - to include Mask, Straps, Regulator, Harness, Bottle, and Pack.

Location Secured: \_\_\_\_\_

Timed Secured: \_\_\_\_\_

Date secured: \_\_\_\_\_

By Whom: \_\_\_\_\_

**Turnout/Bunker Coat** - to include liner(s) and tools attached

Location Secured: \_\_\_\_\_

Time Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Safety Equipment Impound Check Sheet

- Turnout/Bunker Pants** – to include liner(s), boots leather/rubber, suspenders.

Location Secured: \_\_\_\_\_

Time Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_

- Helmet** – to include liner(s), strap, and shield (Borks).

Location Secured: \_\_\_\_\_

Time Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_

- Gloves** – attempt to secure both gloves.

Location Secured: \_\_\_\_\_

Time Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Safety Equipment Impound Check Sheet

**Specialized Equipment** – to include hand, electrical, and power tools

Location Secured: \_\_\_\_\_

Time Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_

Please fill out the Chain-of-Custody portion of this checklist.

Fire Official Name: \_\_\_\_\_

Department: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Law Enforcement Officer Name: \_\_\_\_\_

Department: \_\_\_\_\_

Date/Time: \_\_\_\_\_

NH State Fire Marshal Name: \_\_\_\_\_

Date/Time: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## References



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

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New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## **Personal Interviews**

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Young, Sandy, Fire Chief, Pittsburg, NH, Pittsburg, NH May 2001

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Ouellette, Mark, President, Professional Firefighter's of New Hampshire, Telephone Interview June, 2001

Brassard, Jean, President, Manchester Firefighter's Local 856, Manchester, NH April 2001

Bouchard, Mike, Vice President, Manchester Firefighter's Local 856, Manchester, NH May, 2001

Peabody, Craig, Funeral Director, Peabody Funeral Home, Derry, NH April, 2001

Peabody, Eric, Funeral Director, Peabody Funeral Home, Derry, NH May, 2001

Duval, Jeff, 1<sup>st</sup> District Vice President Professional Firefighter's of New Hampshire, Telephone Interview April, 2001

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New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Websites

[firehero@erols.com](mailto:firehero@erols.com)

[www.ojp.usdoj.gov/BJA/](http://www.ojp.usdoj.gov/BJA/)

[www.iafc.org/publications.cfm](http://www.iafc.org/publications.cfm)

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New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Appendix A

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# Office of the Chief Medical Examiner



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## CHAPTER 611. MEDICAL EXAMINERS

### Section

- 611:1. Medical Examiners.
- 611:2. Appointments.
- 611:3. Oath; Duty to Investigate in Medicolegal Case.
- 611:4. Mandatory Reporting of Medicolegal Deaths.
- 611:5. Charge of Body.
- 611:5-a. Death of Person Under Care of Department of Health and Human Services.
- 611 6. Survey of Location.
- 611 7. Autopsy; Ordering.
- 611 7-a. Cost.
- 611 8. Postmortem Examination; Preserving Evidence.
- 611 9. Dental Examinations.
- 611 10. Report to County Attorney.
- 611 11. Report to Bureau of Maternal and Child Health.
- 611 12. Death Record.
- 611 13. Duty of State Pathologist.
- 611 14. Delivery of Body.
- 611 15. Unclaimed Body.
- 611 16. Property of Deceased.
- 611 17. Medical Examiner Accounts.
- 611 18. Fee Schedule.
- 611 19. Forms.

### Missing Persons.

- 611:20. Dental Records.
- 611:21. Identification by Scoring Probabilities.
- 611:22. Destruction of Records.

### § 611:1. Medical Examiners.

All medical examiners appointed under this chapter are under the authority of the chief medical examiner and subject to applicable provisions of RSA 611-A, in addition to the provisions of this chapter.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## History

**Source.**1995, 278:1, eff. Jan. 1, 1996.

### § 611:2.Appointments.

I. The chief medical examiner shall appoint licensed physicians to be deputy medical examiners. A deputy medical examiner shall serve the state without geographical restriction. Deputy medical examiners shall meet training and certification requirements established by rules adopted by the chief medical examiner under RSA 541-A. Deputy medical examiners shall possess all the powers granted to medical examiners under this chapter and shall be sworn in the same manner. Deputy medical examiners shall serve at the pleasure of the chief medical examiner.

II. The chief medical examiner may appoint assistant deputy medical examiners if no medical examiner or deputy medical examiner is able to perform the duties of medical examiner under this chapter. Assistant deputy medical examiners shall serve without geographic restriction. An assistant deputy medical examiner shall be a person learned in the science of medicine and shall serve under the direction and supervision of the chief medical examiner. An assistant deputy medical examiner shall possess all the powers granted to medical examiners under this chapter and be sworn in the same manner. Assistant deputy medical examiners shall serve at the pleasure of the chief medical examiner.

III. If no medical examiner, deputy medical examiner, or assistant deputy medical examiner is available to perform the duties of the medical examiner under this chapter, the chief medical examiner, deputy chief medical examiner, or designee may deputize a temporary assistant deputy medical examiner to perform the duties of medical examiner until a medical examiner, deputy medical examiner, or assistant deputy medical examiner is available to assume those duties.

## History

**Source.** 1995, 278:1, eff. Jan. 1, 1996.

### § 611:3. Oath; Duty to Investigate in Medicolegal Case.

I. Each medical examiner shall, before entering upon the duties of the office, take an oath of office.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

- II. A medical examiner shall make investigations in medicolegal cases. A medicolegal case exists when death is pronounced or remains are found indicating that a human has died and that death is known or suspected to have resulted from:
- (a) Any death known or suspected to have occurred during or as a result of any criminal act regardless of the time interval between incident and death and regardless of whether criminal violence appears to have been the immediate cause of death or a contributory factor thereto.
  - (b) Any death by suicide regardless of the time interval between the incident and death.
  - (c) Any death due to accidental or unintentional injury regardless of the time interval between the incident and death and regardless of whether such injury appears to have been the immediate cause of death or a contributory factor thereto.
  - (d) Deaths associated with fire or explosion.
  - (e) Deaths associated with firearms or other mortal weapons.
  - (f) Any death which occurs in or associated with any public or private conveyance including but not limited to any motor vehicle, recreational vehicle, bicycle, aircraft, watercraft, motorcycle, bus, train, or the like.
  - (g) Abortion or the complications thereof if the abortion was known or suspected to have been illegally obtained or performed by an unlicensed practitioner.
  - (h) Poison, illicit drug use, or an overdose of any drug or medication.
  - (i) Disease, injury, or exposure to a toxic agent resulting from or occurring during the course of employment.
  - (j) Disease or agent which constitutes a public health hazard or environmental hazard.
  - (k) Sudden unexpected death when in apparent good health of a person under the age of 60 years.
  - (l) Death unattended by a practicing physician
  - (m) Death occurring in legal custody including any death, which occurs in any prison or penal institution.
  - (n) Death associated with diagnostic or therapeutic procedures including intraoperative and perioperative deaths.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

- (o) Death in which a body is to be cremated in the state of New Hampshire or buried at sea regardless of the jurisdiction in which the death occurred.
- (p) Death occurring less than 24 hours after admission to a health care facility or hospital except when the decedent was known to have been terminally ill from natural disease and the death is imminent and expected.
- (q) Death of a child under the age of 18 years unless the child is known to be terminally ill from natural disease or congenital anomaly and the death is expected.
- (r) The death of any child from any cause when such death occurs at a day care facility, or when the child is in foster care, or when the child is in the custody of or being investigated by the department of health and human services.
- (s) Fetal deaths, which result from intrauterine trauma when the fetus has attained 20 weeks gestation or 350 grams weight.
- (t) Death known to have been improperly certified, including but not limited to any remains brought into the state of New Hampshire without proper certification.
- (u) Death of any unidentified person regardless of cause and manner.
- (v) Discovery of buried remains, which are known or thought to be human, and which are uncovered other than by an exhumation order.
- (w) The discovery of decomposed remains, including partially or completely skeletonized remains.
- (x) Suspicious or unusual circumstances surrounding a presumed natural death.
- (y) Death of a prominent or controversial person.

## History

**Source.** 1995, 278:1, eff. Jan. 1, 1996; 310:181, eff. Nov. 1, 1995

### § 611:4. Mandatory Reporting of Medicolegal Deaths.

It shall be the duty of anyone who finds the body of any person whose death is suspected to have been caused or to have occurred in any manner described in RSA 611:3 or who



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

finds remains which are thought to be human to immediately notify the medical examiner and the county attorney for the county where the body or remains are found.

## History

**Source.** 1995, 278:1, eff. Jan. 1, 1996.

### § 611:5. Charge of Body.

I. Whenever the medical examiner has notice that there has been found or is lying within the medical examiner's jurisdiction the body of a person whose death is supposed to have been caused in a manner described in RSA 611:3, the medical examiner shall take charge of the body and may go to the place where such body lies, may transport the remains, or give permission for moving the body to an appropriate place for viewing.

II. The provisions of paragraph I notwithstanding, whenever there is the body of a person whose death is supposed to have been caused in a manner described in RSA 611:3, and the medical examiner is unavailable, the chief medical examiner shall be promptly notified and shall assume jurisdiction.

## History

**Source.** 1995, 278:1, eff. Jan. 1, 1996.

### § 611:5-a. Death of Person Under Care of Department of Health and Human Services.

At the request of the commissioner of the department of health and human services pursuant to RSA 126-A: 5, V, the medical examiner shall take charge of the body of any individual who dies while admitted to, a resident of, or receiving care from New Hampshire hospital, Glencliff home for the elderly, or any other residential facility operated by the department or a contract service provider, for the purpose of viewing and autopsy.

## History

**Source.** 1995, 310:200, eff. Jan. 1, 1996.





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**§ 611:6. Survey of Location.**

I. Before a body is removed or disturbed, the medical examiner shall make or cause to be made a careful survey of it and of its surroundings, and reduce or cause to be reduced to writing an accurate and detailed description of the location, position and condition of the body and make careful minutes of all facts concerning it and its surroundings which will aid in determining the cause and circumstances of death.

II. A body shall not be altered or disturbed, personal effects shall not be removed or altered, and physical or biological evidence, including samples of blood and other body fluids for analysis, shall not be obtained or collected from the body, without the permission of the medical examiner.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996

**§ 611:7. Autopsy; Ordering.**

The county attorney, the attorney general, or the chief medical examiner or designee, if they deem an autopsy necessary, shall direct that one be made.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996

**§ 611:7-a. Cost.**

Any autopsy made at the request of the commissioner of the department of Health and Human Services shall be conducted in the presence of the medical examiner or designee, and the expense thereof shall be borne by the department of Health and Human Services.

**History**

**Source.** 1995, 310:38, eff. Jan. 1, 1996.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**§ 611:8. Postmortem Examination; Preserving Evidence.**

The chief medical examiner, deputy chief medical examiner, chief forensic investigator, deputy medical examiner, or assistant deputy medical examiner performing the postmortem examination shall take and preserve, under proper seal, such portions of the body and its contents, together with such other articles, which may require subsequent examination in the investigation of the case.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996.

**§ 611:9. Dental Examinations.**

In deaths investigated by a medical examiner, when the identity of a dead body cannot be established by visual means, fingerprints, or other identifying data, the medical examiner shall have a qualified dentist, as determined by the medical examiner; carry out a dental examination of the dead body. If the medical examiner with the aid of the dental examination and other sources of identification is still not able to establish the identity of the dead body, the medical examiner shall prepare and forward the dental examination records to the division of state police on a form supplied by the division for that purpose.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996.

**§ 611:10. Report to County Attorney.**

If, upon a view, with personal inquiry or autopsy, the chief medical examiner or medical examiner is of the opinion that the death of the person was caused or occurred in any manner described in RSA 611:3, the chief medical examiner or medical examiner shall file a record of the case with the county attorney or the attorney general, in accordance with rules adopted by the chief medical examiner under RSA 541-A.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

### **§ 611:11. Report to Bureau of Maternal and Child Health.**

In any case in which the deceased whose death is being investigated is a child whose death is determined to have been the result of sudden infant death syndrome, the chief medical examiner or medical examiner shall file a record of the case with the bureau of maternal and child health, department of health and human services. The bureau shall not release this report to any person without the written permission of the chief medical examiner or designee. The bureau may inform the parents of the child of the disposition of the case in a letter, but shall not include any portion of the autopsy report.

#### **History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996; 310:181, eff. Nov. 1, 1995.

### **§ 611:12. Death Record.**

The medical examiner shall file a death record with the city or town clerk, as required by the laws of the state. The death record shall contain all the facts necessary to complete the record as far as possible, as well as a personal description of the deceased for identification.

#### **History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996. 1997, 325:21, eff. Aug. 22, 1997.

### **CROSS REFERENCES**

Filing of certified copy of death record with probate court as prerequisite to appointment of administrator, see RSA 553:1-a.

### **§ 611:13. Duty of State Pathologist.**

Whenever the chief medical examiner or designee requires expert investigation, either chemical or pathological, of any substance or article preserved from an autopsy or for use in any criminal case pending within their respective jurisdictions, such investigation may be made at the state laboratory of the department of health and human services, without charge or expense to the state or county, and the expert making such



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

investigation shall submit a report of the results of the work to the chief medical examiner or designee requesting it.

### History

**Source.** 1995, 278:1, eff. Jan. 1, 1996; 310:181, eff. Nov. 1, 1995.

### § 611:14. Delivery of Body.

The medical examiner, upon the completion of the examination, shall deliver the dead body, upon their claim therefor, to one of the following persons:

- I. The husband or wife, as the case may be.
- II. The next of kin.
- III. Any friend of the deceased.

### History

**Source.** 1995, 278:1, eff. Jan. 1, 1996.

### § 611:15. Unclaimed Body.

If a dead body is unidentified or unclaimed for a period of not less than 48 hours following the view thereof, the medical examiner shall deliver the body to the overseer of public welfare in the town or, in the case of an unincorporated place, to a county commissioner, who shall decently bury or cremate the body, or, with the consent of the commissioners or the overseer, it may be sent to the medical department of a medical school or university, to be used for the advancement of the science of anatomy and surgery, as provided for by law.

### History

**Source.** 1995, 278:1, eff. Jan. 1, 1996.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**§ 611:16. Property of Deceased.**

In all cases arising under the provisions of this chapter, the medical examiner shall take charge of any money and other personal property of the deceased found upon or near the body and may instruct the investigating law enforcement officers to take custody of such property. Money and other personal property shall be released with the body to the legal next of kin unless held as evidence.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996.

**§ 611:17. Medical Examiner Accounts.**

Medical examiners shall submit all claims for fees and expenses to the office of the chief medical examiner, which shall authorize such claims and submit them for payment as follows:

I. For autopsies and expenses not requested or approved by the county attorney or the attorney general, such claims shall be submitted to the state treasurer, chargeable to the account of the chief medical examiner's office.

II. For autopsies and expenses authorized by the county attorney, such claims shall be approved by the county attorney and submitted for payment to the county treasurer.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996. 1996, 124:5, eff. July 15, 1996.

**§ 611:18. Fee Schedule.**

The chief medical examiner shall adopt rules, pursuant to RSA 541-A, establishing a fee schedule for fees and expenses, which may be claimed by medical examiners, and such fee schedule shall be subject to ratification by the county delegation.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**§ 611:19. Forms.**

The chief medical examiner shall adopt rules, pursuant to RSA 541-A, prescribing the form of record books, blank returns, and other papers necessary for medical examiners to carry out the provisions of this chapter, and the same shall be printed at the expense of the state and distributed to medical examiners.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996.

**MISSING PERSONS**

**§ 611:20. Dental Records.**

If a person reported missing has not been found within 30 days, the county sheriff, chief of police of a city or town, medical examiner, or other law enforcement authority initiating or conducting the investigation for the missing person shall request the family or next of kin of the missing person to give them written consent to contact and request from the dentist of the missing person the person's dental records. The dental records of the missing person shall be forwarded to the division of state police on a form supplied by the division for that purpose.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996.

**§ 611:21. Identification by Scoring Probabilities.**

The division of state police shall act as a repository or computer center, or both, for the dental examination records and dental records filed with it under this chapter. The division shall compare the dental examination records filed pursuant to RSA 611:9 with the dental records filed pursuant to RSA 611:20 and shall determine which scoring probabilities are the highest for purposes of identification, and shall submit the information to the county official who prepared and forwarded the dental examination records. The division files shall be made available to any law enforcement agency attempting to locate a missing person.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**§ 611:22. Destruction of Records.**

If a person reported missing has been found, the county sheriff, chief of police of a city or town, medical examiner, or other law enforcement authority shall report the fact to the division of state police. After receiving the report, the division shall erase or destroy the dental records with respect to the person, which are maintained pursuant to this subdivision.

**History**

**Source.** 1995, 278:1, eff. Jan. 1, 1996.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Appendix B

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# Notifications and Check List





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## **Firefighter Line-of-Duty Death Notification Procedure**

In the event of a Line-of-Duty Death to a New Hampshire Firefighter, permanent or volunteer, contact the New Hampshire State Fire Marshal

**1-800-852-3411**

(New Hampshire State Police, 24 hours per day)  
NHSP will contact NH State Fire Marshal Office.

**“Any fire, building collapse, or release of carbon monoxide other than from a motor vehicle occurring where death results shall be reported immediately to the office of the State Fire Marshal by the Fire Chief, and the Office of the State Fire Marshal shall investigate the fire within 48 hours after receiving said report.”**

### **The State Fire Marshal’s Office will:**

Assigned an investigative team to respond immediately, if the death is related to a fire incident, live fire training, building collapse, or release of carbon monoxide other than from a more vehicle. Pursuant to RSA 153:18

Notify the Granite State Critical Incident Stress Debriefing Team;

Notify the New Hampshire Fire Chaplains Association;

Notify the U.S. Fire Administration and the National Fire Academy;

Assist the Fire Chief as needed

Initiate statewide notification of fire departments and fire service agencies when funeral arrangements are complete.

Notify the New Hampshire “One Hundred Club” (provides benefits for families of fallen firefighters and police officers)

Any further Information, contact the NH State Fire Marshal Office at 603-271-3294



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Injury/Death Investigation Checklist**

Department: \_\_\_\_\_

Incident # \_\_\_\_\_

(Military Time)

- Officer-in-Charge per established Incident Command System  
Time: \_\_\_\_\_  
By whom: \_\_\_\_\_
- Secured the scene/area.  
Time: \_\_\_\_\_  
By whom: \_\_\_\_\_
- Removed all non-essential personnel.
- Secure the scene with **marking tape** or **rope**.  
**1 entry and exit at the same point**  
**1 Firefighter to stay at entry/exit point to monitor activity**  
**Log names of person(s) entering/exiting**  
Time: \_\_\_\_\_  
Name: \_\_\_\_\_
- Perform only overhaul that is absolutely necessary.**  
Time: \_\_\_\_\_
- Notify local Law Enforcement for assistance with scene security.  
Time: \_\_\_\_\_  
Officer(s) Name: \_\_\_\_\_
- Contact Fire Investigation Officer/Team.  
Time: \_\_\_\_\_
- Contact NH State Fire Marshal's Office. **(603) 271-3294**  
**(Contact NH State Police Dispatch 24 hours per day)**  
**1-800-852-3411**  
Time: \_\_\_\_\_  
Name: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Safety Equipment Impound Check Sheet

If a single or multiple, seriously injured or deceased firefighter(s) are transported to medical facilities for treatment, and you cannot secure the firefighter(s) personal protective equipment (PPE), you need to call the hospital, local fire department, or State Fire Marshal to assist with impounding and securing all PPE.<sup>3</sup>

**When impounding Safety equipment, place equipment into CLEAR, heavy-duty plastic bag(s) and secure the plastic bag with an evidence tag from local Law Enforcement.**

Impound ALL Safety Equipment that was used by your firefighter(s)

SCBA - to include Mask, Straps, Regulator, Harness, Bottle, and Pack.

Location Secured: \_\_\_\_\_

Timed Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_

Turnout/Bunker Coat - to include liner(s) and tools attached

Location Secured: \_\_\_\_\_

Time Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_

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<sup>3</sup> Degnan, William, NH Deputy State Fire Marshal. Oral Interview, 2001



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Safety Equipment Impound Check Sheet

- Turnout/Bunker Pants** – to include liner(s), boots leather/rubber, suspenders.

Location Secured: \_\_\_\_\_

Time Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_

- Helmet** – to include liner(s), strap, and shield (Borks).

Location Secured: \_\_\_\_\_

Time Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_

- Gloves** – attempt to secure both gloves.

Location Secured: \_\_\_\_\_

Time Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Safety Equipment Impound Check Sheet

**Specialized Equipment** – to include hand, electrical, and power tools

Location Secured: \_\_\_\_\_

Time Secured: \_\_\_\_\_

Date Secured: \_\_\_\_\_

By Whom: \_\_\_\_\_

Please fill out the Chain-of-Custody portion of this checklist.

Fire Official Name: \_\_\_\_\_

Department: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Law Enforcement Officer Name: \_\_\_\_\_

Department: \_\_\_\_\_

Date/Time: \_\_\_\_\_

NH State Fire Marshal Name: \_\_\_\_\_

Date/Time: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Employee Emergency Contact Information**

Experience has shown repeatedly that when a lie-of-duty death or serious injury occurs up-to-date employee information is critical. Officials responsible for notification must have access to only the current and correct information. The information that you provide will be used ONLY 'in the event of your serious injury or death in the line of duty. Please take the time to fill it out fully and accurately because the data will help the department take care of your family and friends.

**Personal Information**

Last Name	First Name	Middle Name
Home Address		
City	State	Zip
Daytime Phone Number		Evening
Phone Number		

**Contact Information**

Family or friends you would like the department to contact. Please list \*in the order you want them contacted. If needed, provide additional names on the back of this sheet.

**NOTE:** If the contact is a minor child, please indicate the name of the adult to contact.

Name: Relationship:

Home Contact Information

Address: Phone:

Work Contact Information: Name of Employer:

Address: Phone:

Pager/Cell phone:

Special Circumstances, i.e. health, age, etc.

Name: Relationship:

Home Contact Information

Address: Phone:

Work Contact Information: Name of Employer:

Address: Phone:


Pager/Cell phone:

Special Circumstances, i.e. health, age, etc.

Department member you would like to accompany the Chief or designee:



New Hampshire Department of Safety  
 Division of Fire Safety  
 Office of the State Fire Marshal  
 Line-of-Duty Death or Serious Injury  
 Contingency Plan



**NH DEPT OF SAFETY - Div. of Fire Safety  
 OFFICE OF THE FIRE MARSHAL  
 IDENTIFICATION CARD**

Date \_\_\_\_\_ 20 \_\_\_\_

Date Joined Dept. \_\_\_\_\_

---

Name \_\_\_\_\_

SIGNATURE OF PERSON FINGERPRINTED				DENTAL RECORDS LOCATION			
RESIDENCE OF PERSON FINGERPRINTED (NO. & STREET)				CITY/TOWN/STATE/ZIP			
DATE OF BIRTH	SEX	RACE	HEIGHT	WEIGHT	EYES	HAIR	PLACE OF BIRTH
SCARS, MARKS, TATTOOS OR ANY UNUSUAL CHARACTERISTICS							
SIGNATURE OF OFFICIAL TAKING FINGERPRINTS				NAME & ADDRESS OF PRIMARY PHYSICIAN			

1. RIGHT THUMB	2. RIGHT INDEX	3. RIGHT MIDDLE	4. RIGHT RING	5. RIGHT LITTLE	
16. LEFT THUMB	7. LEFT INDEX	8. LEFT MIDDLE	9. LEFT RING	10. LEFT LITTLE	
LEFT FOUR FINGERS TAKEN SIMULTANEOUSLY		LEFT THUMB	RIGHT THUMB	RIGHT FOUR FINGERS TAKEN SIMULTANEOUSLY ( USE BACK OF CARD FOR FOOTPRINTS )	



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Family Planning Checklist

Mortuary to be used after coroner's autopsy: (have suggestions if no preference)

Name: \_\_\_\_\_ (keep them informed)

Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Would the family like a formal Fire Department service? Explain what all this would entail.

Yes: \_\_\_\_\_ No: \_\_\_\_\_

Is there a preference? Burial \_\_\_\_\_ Cremation \_\_\_\_\_ Other \_\_\_\_\_

Has a cemetery plot been already purchased? Yes \_\_\_\_\_ No \_\_\_\_\_

Location: \_\_\_\_\_

If no, preferred location: \_\_\_\_\_

Will there be a Vigil/Viewing: Yes \_\_\_\_\_ No \_\_\_\_\_

Location: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

### Nature of Memorial Service

Religious preference if any: \_\_\_\_\_

Open or closed to public: Open \_\_\_\_\_ Closed \_\_\_\_\_

Is there a religious requirement for burial time frame? Yes: \_\_\_\_\_ NO: \_\_\_\_\_

If yes, when will burial or cremation have to be completed by? \_\_\_\_\_





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Location for memorial service (large area if open area service, School Gym, Church, Synagogue, Arena, Terrace Theatre, outside.)

Name: \_\_\_\_\_

Location: \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Open or closed casket: Open \_\_\_\_\_ Closed \_\_\_\_\_

Burial (graveside) service? Yes \_\_\_\_\_ NO \_\_\_\_\_

Fire Department involved? Yes \_\_\_\_\_ NO \_\_\_\_\_

Location: \_\_\_\_\_

Make arrangements for Critical Stress Debriefing Councilor to visit family

Ask if the Fire Department can assist with out-of-town family arrangements.

- Notifications of Relatives, Friends
- Transportation
- Lodging



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Ask if there are preferred pallbearers, and that eight will be needed in total. If no preference is made, assure the family that the Fire Department will select the necessary and appropriate individuals (usually assigned member(s) Engine/Truck Company).

Preferred Names:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Fire Department needs family contact numbers

Name	Relationship	Telephone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are there preferred scriptures? Yes \_\_\_\_\_ NO \_\_\_\_\_

Book/Bible: \_\_\_\_\_

Name of scripture: \_\_\_\_\_

Is there preferred music? Yes \_\_\_\_\_ NO \_\_\_\_\_

Name of Song: \_\_\_\_\_

Name of Song: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Family wishes to have Bag Piper? Yes \_\_\_\_\_ NO \_\_\_\_\_

Name: \_\_\_\_\_

Are there preferred speakers?

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Obtain all articles of clothing that the deceased will wear and deliver them to the funeral director.

- Suit and tie
- Class A Uniform
- Special articles of clothing

**Fallen Firefighter Dress Uniform Program:** Any firefighter, killed in the line of duty will be provided, for burial purpose, at the request of the immediate family, a Class-A uniform with rank striping or Maltese Crosses *free of charge*

If a Class-A uniform is unavailable contact:

Lighthouse Uniform Company  
1532 – 15<sup>th</sup> Avenue West  
P.O. Box 19213  
Seattle, Washington 98109  
1-800-426-5225  
light@lighthouseuniformco.com

Obtain recent photographs of the deceased for the Memorial Officer and PIO.

- Home Photographs
- Emergency Contact Information Form
- Recent work Photo's
- Newspaper/Magazine articles



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Memorial Service Division

Memorial Service Division is responsible for planning and coordinating any and all arrangements for this main service for a line-of-duty death of firefighter(s), EMS provider(s) dispatcher(s), or civilian employee(s). This Division will work and coordinate arrangements with the Funeral Director(s).

The Division Leader will report directly to the Planning Group Officer.

For proper planning to commence, it is very important that the Planning Group Officer, and Family Liaison Officer, submit the following information, as soon as possible. Necessary information includes the following:

Date of service: \_\_\_\_\_

Location of service: \_\_\_\_\_

Time of service: \_\_\_\_\_

Level of Fire Department involvement? (Check with FLO)

Full Fire Department Funeral Yes \_\_\_\_\_ No \_\_\_\_\_

Open or closed service to public and outside agencies (check with FLO)

Open or closed casket

Preferred speakers:

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Will the last alarm tradition be used? Yes \_\_\_\_\_ No \_\_\_\_\_

Secure a facility large enough to hold hundreds or thousands of Firefighter's (local schools, theaters, hotels with conference centers, churches, **(you may need to go outside your community)**).



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Ensure the facility is large enough to handle anticipated large numbers. You may have to plan for overflow.

Coordinate with:

- Logistics - arrival and departure from service
- Religious Leaders - program content

Design order of program. **This service should last no more than one hour and forty-five minutes.** Coordinate with Planning Group Leader and Funeral Director(s) on starting time of the service.

Design seating plan of the facility being used - if indoors determine capacity and obtain a floor plan drawing:

- Family area
- VIP's
- City management
- Politician
- Union (local, state, and national)
- Fire Department Officers
- Fire Department personnel
- Visiting Chief Officers
- Civilian friends
- Visiting departments (possibly in blocks)

Preferred music: \_\_\_\_\_

- Bag Piper: Yes \_\_\_\_\_ NO \_\_\_\_\_ (PFFNH Pipes and Drum)
- Bugler Playing Taps: Yes \_\_\_\_\_ NO \_\_\_\_\_
- Harpist courtesy of OCME (Kathrine Descheneaux) for calling hours, church services

How music is to be performed:

- Choir
- Soloists (very impressive if possible)
- Recording
- Orchestra
- Small group (instrumental)

Adequacy of PA system:

Contact local school system for PA system: Yes \_\_\_\_\_ NO \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Use of Bull Horns to call cadence for visiting firefighters

If outdoors, there are special needs:

- PA system
- Tent
- Chairs
- Restrooms: Porta-potties (contact local companies)
- Water
- Stage
- Power
- Shade

Coordination with pallbearers, the designation of individual pallbearers will be the responsibility of the Logistics Group.

Conduct any rehearsals deemed necessary.

There should be ALS/BLS ambulances standing by.

Coordinate program with Funeral Director- Advise FLO, who will keep the family informed.

- Content
- Order
- Number of speakers

Eulogy presenter - **should be strong, and well prepared.**

Need large photo/oil painting of deceased(s) for service. Coordinate with FLO and PIO's.

Need a shadow box to present with:

- Badge
- Patches
- Hat hardware
- Picture (PIO/FLO to provide)



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

Select the ushers to be used and tasks for them to carry out.

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Name: \_\_\_\_\_

*Fire Department Chaplain. (If no chaplain available, contact NH Fire Chaplains Association, through Hudson, NH Fire Department Fire Alarm (603) 886-6021 and request a Fire Chaplain.)*

Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Room for family: Yes \_\_\_\_\_ No \_\_\_\_\_ (set aside a designated/marked area)

Last Alarm ceremony: Yes \_\_\_\_\_ No \_\_\_\_\_ (see "Last Alarm Ceremony" page)

Parking requirements.

- Local schools
- Local businesses/industry/commercial/shopping malls
- Hotel/motels

Coordinate with the PIO's on an appropriate video presentation:

- Interviews with friends, supervisors
- Any pre-existing video of firefighter
- Department video clips

Memorial program distribution:

- Last Alarm Cards

Honor Guard/Casket watch coverage for viewing/vigil:

- Department members
- Outside department members



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

- Elks
- VFW
- American Legion

**Keep record of all financial cost when possible**





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Funeral Detail Checklist

Fire Department Funeral Detail OIC: \_\_\_\_\_

PFFNH/IAFF Representative OIC: \_\_\_\_\_

### **Bunting For Apparatus:**

NOTES

OIC/PIC: \_\_\_\_\_

Engine/Truck Company: \_\_\_\_\_

Station Location: \_\_\_\_\_

### **Bunting for Station(s):**

OIC/PIC: \_\_\_\_\_

### **Equipment for Apparatus:**

OIC/PIC: \_\_\_\_\_

- Casket Box
- Scaffolding (**Contact Boston Fire Special Operations Unit**)
- Plat Form **(617) 288-2100**
- Rubber bands/zip ties
- Straps/Tie downs
- Tools/drills/wrenches
- Assorted nuts & bolts

### **American/Department Flag for Casket:**

OIC/PIC: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**American Flag for Truck Companies:**

**NOTES**

OIC/PIC: \_\_\_\_\_

Truck CO.: \_\_\_\_\_

Truck CO.: \_\_\_\_\_

Location: \_\_\_\_\_

Report Time: \_\_\_\_\_

**Turnout Gear and Fire Helmet:**

OIC/PIC: \_\_\_\_\_

**Funeral Home/School:**

Funeral Home/School Name: \_\_\_\_\_

Address: \_\_\_\_\_

Funeral Director: \_\_\_\_\_

Funeral Director: \_\_\_\_\_

Fire Department OIC: \_\_\_\_\_

Fire Department FLO: \_\_\_\_\_

Call sign designation: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Motorcade:**

**NOTES:**

OIC/PIC: \_\_\_\_\_

Police/NHSP OIC: \_\_\_\_\_

Directions:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Drillmaster at Staging Area:**

**NOTES:**

OIC/PIC: \_\_\_\_\_

Location: \_\_\_\_\_

Report Time: \_\_\_\_\_

Cadence caller: \_\_\_\_\_

**Drillmaster at Church/Parish/School:**

OIC/PIC: \_\_\_\_\_

Location: \_\_\_\_\_

Report Time: \_\_\_\_\_

Cadence caller: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Church/Parish/School:**

**NOTES:**

Name of Church/Parish/School: \_\_\_\_\_

Address/Town/State: \_\_\_\_\_

Pastor: \_\_\_\_\_

Church/Parish/School OIC: \_\_\_\_\_

Committee: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Call sign designation: \_\_\_\_\_

**Inside Church/Parish/School:**

- Family seated on **side of lecturer** walking in
- Department Members/ State/Town/City seated on **opposite side** walking in
- Visiting dignitaries, Officers and Firefighters fill in empty seats.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Outside Church/Parish/School:**

- All Honor/Color Guards line up on the **same side of entrance**
- Visiting Dignitaries, Officers, Firefighters, and EMS personnel line up across from entrance.

**Line-up for marching procession to cemetery:**

**NOTES:**

- Deceased members Department
- Deceased members Volunteer/Call Department
- State Fire Marshal Office members
- Rank/File fill in

**(Four Abreast Going across width of street)**

**Drillmaster at Cemetery:**

OIC/PIC: \_\_\_\_\_

Location: \_\_\_\_\_

Report Time: \_\_\_\_\_

Cadence caller: \_\_\_\_\_

**Traffic/Police Enforcement:**

OIC/PIC: \_\_\_\_\_

PD/NHSP Liaison OIC: \_\_\_\_\_

Public Works Liaison OIC: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

**Transportation/Buses:**

**NOTES:**

OIC/PIC: \_\_\_\_\_

Committee: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Bus Company: \_\_\_\_\_

Vans: \_\_\_\_\_

Limousine: \_\_\_\_\_

**Honor Guard Casket Watch:**

OIC/PIC: \_\_\_\_\_

**Port-a-Potty/Restrooms Facilities:**

OIC/PIC: \_\_\_\_\_

**Weather Conditions: Heat/Cool:**

OIC/PIC: \_\_\_\_\_

**Refreshments:**

OIC/PIC: \_\_\_\_\_



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Appendix C

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# Federal, State, and Local Benefit Information



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Public Safety Officer Benefit Program

The Public Safety Officers' Benefits (PSOB) Act (42 U.S.C. 3796, et seq.) was enacted in 1976 to assist in the recruitment and retention of law-enforcement officers and firefighters. Specifically, Congress was concerned that the hazards inherent in law-enforcement and fire suppression and the low level of state and local death benefits might discourage qualified individuals from seeking careers in these fields, thus hampering the ability of the communities to provide for public safety.

The PSOB Act was designed to offer peace of mind to men and women seeking careers in public safety and to make a strong statement about the value American society places on contributions of those who serve their communities in potentially dangerous circumstances. Each year PSOB Program receives substantial information about line-of-duty deaths that is used to enhance public safety officer training. PSOB Program also encourages public safety agencies to adopt moral policies that can help guide and agency through the tragic event of a line of duty death.

The PSOB Program, a *public safety officer* is a person serving a *public agency* in an official capacity **with or without** compensation, as a law enforcement officer, firefighter, or a member of a public rescue squad or ambulance crew. Law enforcement officers include, but are not limited to, police, corrections, probation, parole, and judicial officers. **Volunteer Firefighters and members of volunteer rescue squads and ambulance crews are covered under the program if they're officially recognized or designated members of legally organized volunteer fire departments, rescue squads, or ambulance crews.**

The PSOB Program provides a one-time financial benefit to the **eligible survivors** of public safety officers whose deaths are the direct and proximate result of a traumatic injury sustained in the line of duty. The PSOB Program provides the same benefit to public safety officers who have been permanently and totally disabled by a catastrophic personal injury sustained in the line of duty if that injury permanently prevents the officer from performing **any** gainful work.

On December 15, 2003, President Bush signed into law legislation amending the current federal death benefit for public safety officers killed in the line-of-duty. The Public Safety Officers' benefits (PSOB) Program will now cover deaths from heart attacks or strokes while engaged in nonroutine stressful or strenuous emergency response or strenuous physical activity. The law also includes deaths while still on duty after such duties or within 24 hours.





New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

This new law is not retroactive and plies only to deaths from December 15, 2003, forward. **The one-time Federal death benefit increased to \$267,494.00 as of October 1, 2003.** The government adjusts the rate each year based upon changes in the Consumer Price Index.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## **State of New Hampshire Benefits**

### **One-Time Death Benefit**

None

### **Workers' Compensation**

For **career firefighters**, benefit is **60% of deceased's average weekly wage**. Weekly minimum and maximum; amounts change every year. For **volunteer firefighters**, benefit is **100%**, of the State's Average Weekly Wage. Children are eligible until 19, older if disabled, and until 25 if full-time student. If spouse remarries and children are still eligible, benefits will continue until they are ineligible. If spouse remarries and children are ineligible, benefits cease.

Contact:

Workers' Compensation Division,  
New Hampshire Department of Labor,  
95 Pleasant Street, Concord, NH 03301  
(603) 271-3176.

### **Funeral Benefit**

Maximum amount of \$5,000: (same Workers' Compensation contact as listed above.)

### **New Hampshire Retirement System Pension Plan Information**

For **career firefighters**, spouse receives an annual pension equal to 50% of the deceased firefighter's final compensation. If spouse remarries, the annual pension will transfer to any dependent children under 18, then to dependent parents, and so on. If the deceased was a firefighter member as of June 30, 1995, the surviving spouse and dependent children receive medical subsidy. Children are dependents until 18 or 23 if attending college full-time. For **volunteer firefighters**, spouse receives an annual allowance not to exceed \$1,250. If spouse remarries, the annual allowance will transfer to any dependent children under 18, then to dependent parents, and so on.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

### **Ordinary Death Benefit (RSA 100-A: 9)**

If you die before retirement but while “in service”, your beneficiary or beneficiaries may be entitled to receive the following ordinary death benefit, depending on the cause of your death and the benefit provided:

If you are married, have designated only your spouse as primary beneficiary and die after having become eligible to retire under service retirement, your spouse could elect to receive a monthly pension from the system. This monthly benefit – which continues until your spouse dies or remarries – is 50% of the service retirement allowance earned to your date of death. Instead of a monthly pension, if your spouse prefers, he or she can receive a refund of your accumulated contributions and lump sum payment equal to your earnings for the last twelve months of active service.

If you leave no surviving spouse, or if you are not eligible to retire at the time of your death, or if you designate a beneficiary (ies) will automatically receive a refund of your accumulated contributions and a lump sum payment equal to your earnings for the last twelve months of active service.

### **Accidental Death Benefit (RSA 100 – A:8)**

#### **GROUP II**

If, before retirement but while “in-service” in Group II, you die as a natural and proximate result of an accident while in the performance of duty at some definite time and place as a natural and proximate result of repeated trauma, gradual degeneration or occupational disease occurring while in the performance of duty or arising out of and in the course of employment, and not as the result of your willful negligence, one of the following classes of individuals may be eligible to receive an accidental death benefit. The **statutory order** of priority is your surviving spouse, your surviving children, if no surviving children,

your surviving dependent father or mother and if no surviving dependent father or mother, your designated beneficiary or beneficiaries. The death benefit which may be payable to a surviving spouse, surviving children or a surviving dependent father or mother is an annuity equal to 50% of your annual rate of earnable compensation at the time of death.

If none of the forgoing individuals survives you or meets the eligibility requirements for the foregoing benefit, the death benefit which may be payable to your designated beneficiary or beneficiaries is a lump sum amount equal to your



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

accumulated contributions combined with your base salary plus accrued benefits not paid at the time of death.

Contact:  
New Hampshire Retirement System,  
4 Chenell Drive, Concord, NH 03301-8509  
(603) 271-3351

**State of NH Tax Benefit**

None

**State of NH Education Benefit - Children**

None

**State of NH Education Benefit - Spouse**

None

**State of NH Memorial**

In planning stages at the New Hampshire Fire Academy, Concord, NH

**Non-Profit Organization Benefits**

**The Hundred Club of New Hampshire:**

- Immediate presentation of a \$10,000 check to families of police and firefighters who have lost their lives in the line-of-duty. (needs to meet PSOB program)
- Each child receives \$300.00 every Christmas up to their 17<sup>th</sup> birthday. College students also receive \$300.00
- During the summer, ages 8-16 can vacation for two weeks a camp
- Educational assistance of \$16,000 is made available to each college student each year.
- Four-year college students will receive total education assistance of \$60,000.

**New Hampshire Firemen's Association:**

- Must be a member to receive benefit of \$10,000.
- Contact New Hampshire State Fire Marshal Office for assistance.



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Appendix D

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# Department Members Pictures



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Appendix E

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# Transportation Information



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Appendix F

---

# Lodging Information



New Hampshire Department of Safety  
Division of Fire Safety  
Office of the State Fire Marshal  
Line-of-Duty Death or Serious Injury  
Contingency Plan

---

## Appendix G

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# Miscellaneous Information