

# Repatriation of Mortal Remains





nternational Corporate Health Leadership Council



# Repatriation of Mortal Remains

The sudden overseas death of a business traveler, international assignee or study abroad student is a distressing event for both the organization and the family.

The organization and/or family may opt to bring the body of the deceased back home for the funeral service and burial instead of burial overseas. This process, called Repatriation of Mortal Remains [RMR], typically provided by an assistance provider in partnership with your organization, is very complex due to:

- Emotional challenges
- Administrative considerations
- Logistic challenges

## The Opportunity

Since 2003, section 204© of P.L. 107-228 of the Foreign Relations Authorization Act has mandated that the Department of State bi-annually collect (and publish) on the Department's Bureau of Consular Affairs internet site, certain information on any United States citizen who dies from unnatural causes in a foreign country. The most recent report indicates that there were 900 deaths from unnatural causes of US citizens in foreign countries during the 2013 calendar year. Reports indicate that there were nearly 1,000 deaths from unnatural causes of US citizens in foreign countries in recent years. The report typically does not include US military or US government officials, nor does the report include those US citizens living abroad (expatriates) where the next of kin did not contact the nearest US embassy. Nonetheless, the number of deaths of US citizens living abroad is substantial and the number of global foreign nationals who die from unnatural causes that go unreported is certainly higher than the official figures.

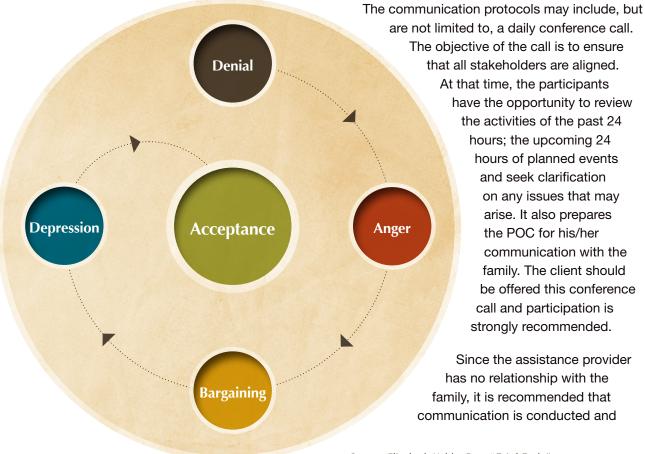
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THIS REPORT OUTLINES ONE OPTION OF MANAGING SUDDEN DEATH OF A FOREIGN NATIONAL WHO UNEXPECTEDLY DIES OUTSIDE THEIR COUNTRY OF CITIZENSHIP.

# **Emotional Challenges**

As described by Dr. Elisabeth Kübler-Ross, the author of the book On Death and Dying (1969), where she first discussed her theory of the five stages of grief, the grieving family, organization staff, university faculty and students go through phases from shock, denial and anger, by way of bargaining and depression until final acceptance.

Initial interaction with the family at this vulnerable time can be challenging as they typically are in the first three stages of their grieving – shock, denial and anger. During this period it is critical to have a single Point of Contact (POC) for communication, both within the organization and the assistance provider. It's also important to agree on communication protocols to ensure consistency in messaging and expectation setting.



Source: Elizabeth Kubler Ross "Grief Cycle"

maintained by an organization representative who is familiar with the family. However, if this is not possible, the assistance provider can perform this function on condition that the organization identifies the next of kin. This may be challenging from time to time because of the social infrastructure of the family [divorce, separation, boyfriend, girlfriend, or outdated HR records].

The organization POC must be able to channel the information within the organization to any stakeholder. Therefore, the POC must understand the internal workings of the organization, as well as being in a position to make decisions on behalf of the organization.

Any communication must be done with great sensitivity with respect to the distress of the next of kin. The assistance provider requires, as soon as possible, the family's decision regarding the final disposition of the body (local burial, local cremation and/or transport of ashes, repatriation of mortal remains) and the selected consignee (receiving funeral home) if cremation or repatriation of mortal remains to home country is chosen. The assistance provider will seek guidance from the POC to determine who will communicate with the family - and with whom - based on their understanding of family dynamics, organizational policy and relevant insurance coverage.

# Administrative Considerations

Although each nation has its own unique set of documentation requirements, most countries require the following documents:

#### Cause of death (COD) issued by the treating doctor:

- If the COD cannot be established, the authorities may insist on an autopsy as a legal requirement, irrespective of religious or cultural considerations.
- A full autopsy report may not be available for 6 to 8 weeks.
- Access to the autopsy report can be very complex and bureaucratic.

Death certificate issued by the police or medical examiner after autopsy:

- The COD may not be on the death certificate for privacy reasons.
- After autopsy, a provisional or temporary certificate will be issued to allow the repatriation to proceed, but may not necessarily satisfy insurance requirements.
- Final death certificate will be available after full autopsy results are completed. Only the family can request this document and engagement of the local embassy or consulate is advised.

## ...THE COMMUNICATION PROTOCOLS MAY INCLUDE, BUT ARE NOT LIMITED TO, **A DAILY CONFERENCE CALL...**

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ANY COMMUNICATION MUST BE DONE WITH **GREAT** SENSITIVITY

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Consular report of death overseas issued by the embassy:

 20 to 30 copies of the death certificate for settlement of the estate of the deceased. The school needs to decide how many copies they need for their records.

Embalming certificate issued by funeral director Sealing certificate issued by the funeral director Port health certificate issued by the public health authorities Export/import permit issued by customs authorities Cancellation of passport by embassy Air way bill issued by the airline

...THE ROLE OF THE ASSISTANCE PROVIDER IS TO **ENSURE** THAT THESE DOCUMENTS ARE **COMPLETE AND CORRECT**.

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All documents must be translated by an official translator, and certain fees may apply for obtaining these documents, as well as notarization.

During the first conference call with the organization, the question will be posed as to what type of documentation the benefits department requires in order to satisfy their internal processes and procedures. (example: does the organization require a copy of the death certificate to process benefits of the employee/student). Even in death, the employee or student has the right to privacy. Before releasing the documentation, the assistance provider must obtain permission from the legal next of kin.

Each local municipality, province or state has different documentation requirements. This may result in having to obtain multiple signatures from the next of kin at various stages of the process, inconveniencing the grieving family. Although these documents are issued by various parties and authorities, the role of the assistance provider is to ensure that these documents are complete and correct. The assistance provider will do its best to present the family in the beginning of the case with a full set of documents for their signatures.

# Logistic Challenges

Most repatriations of mortal remains are transported via commercial carriers. Under exceptional circumstances chartered aircraft can be used.

In order to transport the remains on commercial carrier to its final destination, the following logistics apply in parallel with the processing of the documentation:

- · Release of the body by the local authorities.
- Identification of the body by the family or family representative (this can be organization staff or embassy staff).
  - o If remains are unidentifiable, dental records or DNA testing may be needed.
  - Due to legal implications, the assistance provider cannot interfere in the identification process.
- Transfer of the body to the sending funeral home. In China and Vietnam, for example, the funeral directors, with permits to perform international repatriations, are appointed by the government. The assistance provider has no influence on the choice of funeral director.
- Embalming is to International Air Transport Association (IATA) standards and restoration.
  - For short and speedy transfers, embalming may not be required as long as the cold chain can be maintained throughout the journey.
  - Timing of embalming must allow three to fours hours to settle, prior to departure for the airport.
  - o Review embalming requirements of airline as well as destination.
- Placing the remains in casket, with zinc lining or BioSeal and packing case:
  - Note the approximate weight (500 pounds) and dimensions.
     (78 x 28 x 18 inches)
  - Ideally use a simple but durable transport casket chosen by the family.
     When the family is on-site, they may decide to select the casket in the sending funeral parlor or even order a custom made casket.



EACH LOCAL MUNICIPALITY OR PROVINCE OR STATE HAS **DIFFERENT** DOCUMENTATION **REQUIREMENTS.** 

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PERSONAL BELONGINGS CANNOT BE SHIPPED IN THE PACKING CASE. THESE HAVE TO BE **HANDLED** SEPARATELY.

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- In certain countries, (e.g. France) the sealed casket cannot be opened without court order. Unless the casket has a viewing window, the family can not see the remains of their loved one.
- If the organization or the family wishes to conduct a religious service locally, this is best organized before the casket is sealed.
- The sealing of the casket and packing case will be done in the presence of the local authorities, and in some countries an embassy representative. The objective is to certify that only the remains are packed and shipped.
- Make reservations for flight and issue an "air way bill." The assistance provider should endeavor to use the most direct combination of passenger/cargo flight (COPAX) if appropriate.
- If a family member or an organization representative wants to accompany the casket on the same flight, the issuing of the tickets must be well coordinated. Note however, that due to the size of the casket and packing case, the travel escort may have to take a different domestic sector route.
- Transfer the remains to the cargo complex well in advance of the departure schedule.
- Start tracking the remains by air way bill number.
- Make trans-shipment arrangements.
- Arrival at destination cargo terminal:
  - Send by fax or email, copies of documents to consignee and the benefits department if requested and authorized by the legal next of kin.
  - o Consider opening/closing hours of cargo complex.
  - Assess clearance timing which often takes four to six hours after arrival of aircraft.
- Clearing security and customs and retrieval of the casket by the consignee.

- Transfer of casket to receiving funeral home.
- Unpacking and checking if the body is viewable for family and friends.
- Viewing, funeral service and burial.
- If time is of the essence, the assistance provider can discuss alternative modes of transport with the client. (e.g. chartered aircraft)

The documentation process for transporting cremated remains is similar to that required for bodies, however, ashes kept in an urn may be hand carried by a family member to the home country in a transport urn, that meets TSA standards on being radiolucent. The "carrier" must have a full set of documentation on hand.

Personal belongings cannot be shipped in the packing case. These have to be handled separately. The organization security department may intervene to protect organization sensitive data (example: storage on notebook, PCs, cell phones, and other electronic devices). Once cleared with explicit permission from the legal representative of the estate, an inventory must be taken, documented and witnessed prior to shipment. Some items such as batteries, medications and biological samples cannot be shipped.

Based on the above process, the repatriation of mortal remains takes 7 to 10 working days on average, sometimes longer. This process may be shortened, however, it is essential to keep the POC informed of the progress during the daily scheduled conference call.

### Providers

As this process indicates, in order to successfully execute the service, the assistance provider must maintain a good working relationship with many players beyond funeral directors such as government officials, medical examiners, pathologists, limo services, airlines and charter operators, to name a few. The assistance provider should maintain a global dynamic database of providers that are vetted and are qualified. During city or country site surveys, these providers should be visited and audited using standardized templates and questionnaires. It is ideal to have at least one funeral director with international experience in each country where there is organizational exposure. This gives the assistance providers that have been vetted and qualified the opportunity to build a working relationship, have common operating procedures, etc. Given the need for direct managerial oversight and control, the use of a large global RMR provider is not recommended.

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OURECT MANAGERIAL OVERSEEING AND CONTROL, THE USE OF A LARGE GLOBAL RMR PROVIDER IS **NOT RECOMMENDED.** 

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# Checklist for the RMR process

| Со            | st Call<br>nference call offered to organization?<br>accepted, set date and time and | RESPONSIBILITY Assistance Provider |
|---------------|--|------------------------------------|
| Со            | nference call offered to organization?   | Assistance Provider                |
|               | •  |                                    |
| 2. If         | accepted set date and time and   |                                    |
|               | onference call bridge  | Assistance Provider                |
| Sin<br>3.     | gle Point of Contact (POC) identified?   | Client AND                         |
|               | articipant's conference call?  | Assistance Provider                |
| Adv           | vice on religious denomination   | Client                             |
| <b>4.</b> • S | tandby religious priest, etc.  | Assistance Provider                |
| • A           | dvise local funeral director and consignee   | Assistance Provider                |
| 5             | plain RMR process to first caller and POC;<br>ve time for questions                  | Assistance Provider                |
| 6. Set        | expectations re: timeline & constraints  | Assistance Company                 |
| ls f          | amily representative on-site?  |                                    |
|               | yes, does organization have a go-team member with amily or EAP involved?             | Client                             |
| • If          | no, offer counselling services   | Assistance Provider                |
| 8.            | tification of death to family in person<br>by phone                                  | Client                             |
| 9             | ntify legal Next of Kin (NOK) or<br>ecutor of the estate (court doc)                 | Client                             |
| 10. Has       | s family identified undertaker?  | Family                             |
| Has           | s family identified consignee?   | Family                             |
| 11. • If      | yes, validate credentials and capability   | Assistance Provider                |
| • V           | Vhen in doubt, appoint intermediary  | Assistance Provider                |
|               | ere and how are the remains stored?  | Client OR<br>Assistance Provider   |
| 12. • ⊦       | leight and weight of deceased  | Family OR Client                   |
| • A           | re remains viewable upon arrival home?   | Assistance Provider                |
| 13. Is a      | utopsy mandatory or optional?  | Local Authorities                  |
| 14            | opsy: date and time, where and outcome<br>cal authorities                            | Local Authorities                  |
| Ide           | ntification of Mortal Remains  |                                    |
|               | unable to visually ID, what method will Medical Examiner se [dental, DNA]?           | Family<br>OR Client Rep            |

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|---------------------|---|----------------------------------|
| ITEM                |   | RESPONSIBILITY                   |
| 16.                 | Release of Mortal Remains by local authorities  | Local Authorities                |
|                     | Embalming & preparation for transport<br>by local undertaker  | Local Undertaker                 |
|                     | International standard  |                                  |
|                     | Restoration and advice, if remains are viewable   | Local Undertaker                 |
| 17.                 | Casket of choice of family or transport casket  | Family OR<br>Assistance Provider |
| 17.                 | <ul> <li>Custom made casket needed?</li> <li>o Height and weight</li> <li>o Viewing window</li> </ul> | Local Undertaker                 |
|                     | Zinc lining or Bioseal?   | Local Undertaker                 |
|                     | <ul> <li>Packing for cargo</li> <li>o Advice on weight and dimensions</li> </ul>                      | Local Undertaker                 |
| 18.                 | Prepare package of all docs required from NOK   | Assistance Provider              |
|                     |   |                                  |

### THE NEXT ITEMS (19 & 20) ARE ACTIONED IN PARALLEL WITH ABOVE

|     | <b>Documentation to be completed</b><br>(Original documents and translation in English<br>or language of destination)   | Assistance Provider   |
|-----|---|---|
|     | Cause Of Death (COD)  | TMO OR Coroner/ME   |
|     | Death certificate; civilian or military   | Coroner/ME OR   |
|     | Death certificate: temporary or final?  | Government agency   |
| 19. | <ul> <li>Death certificate</li> <li>Check for completeness and correctness</li> <li>Necessary number of copies of D/C</li> <li>Family</li> <li>Organization</li> <li>If comp. requests copy, ask permission from NOK</li> </ul> | Police OR Local Hospital<br>Assistance Provider<br>Assistance Provider<br>Family<br>Client<br>Assistance Provider |
|     | <ul> <li>Autopsy report (if applicable)</li> <li>o Final report can take weeks</li> <li>o Invoke help from embassy</li> <li>Cremation/burial permit</li> <li>Certificate of non-contagious disease</li> </ul>                   | Assistance Provider<br>Family<br>Consignee<br>Port Health Authority   |
|     | Embalming certificate   | Undertaker/Hospital   |

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|-------|---|--|
| ITE   | N   | RESPONSIBILITY   |
| 19.   | <ul> <li>Sealing and packing certificate <ul> <li>No personal belongings in packing case</li> <li>Separate inventory and packing</li> <li>Security clearance (dual use electronic devices)</li> </ul> </li> <li>Export permit <ul> <li>Cancellation of passport</li> <li>Air Way Bill (AWB)</li> </ul> </li> <li>Official translation and notarization <ul> <li>Country specific documentation, e.g. consent forms, etc.</li> <li>Check for completeness and correctness</li> <li>Check credentials of consignee <ul> <li>TSA known shipper</li> </ul> </li> <li>Import permit and customs documentation</li> </ul></li></ul> | Undertaker/Hospital<br>Undertaker/Hospital<br>Client<br>Client<br>Customs Officer<br>Embassy/Consular Office<br>Cargo Carrier/Airline<br>Embassy/Consular Office<br>Assistance Provider<br>Assistance Provider |
|       | <ul> <li>Transport</li> <li>Local transport to airport of departure</li> <li>Is religious send-off prayer requested? <ul> <li>If yes, have airport authorities agreed and approved?</li> <li>If no, can service be held day before sealing?</li> </ul> </li> </ul>  | Undertaker<br>Client   |
|       | <ul> <li>Explore air transport options (most direct,<br/>reliable, cost effective)</li> </ul>   | Local undertaker   |
| 20.   | <ul><li>Book cargo/air freight – AWB number confirmation</li><li>Tracking of cargo using AWB number</li></ul>   | Handling Agent Assistance Provider   |
| 20.   | <ul> <li>Trans-shipment arrangements</li> <li>o Cool storage when in transit</li> </ul>   | Assistance Provider  |
|       | Beware of domestic or regional sector (aircraft type)   | Assistance Provider  |
|       | <ul> <li>Consignee at destination advised of ETA</li> <li>Travel arrangements for escort (if any)</li> <li>Passport valid</li> <li>Valid visa available</li> <li>Coordinate flights</li> </ul>  | Assistance Provider<br>Client OR<br>Assistance Provider  |
|       | o Coordinate flights<br>o Issue tickets   | Assistance Provider  |

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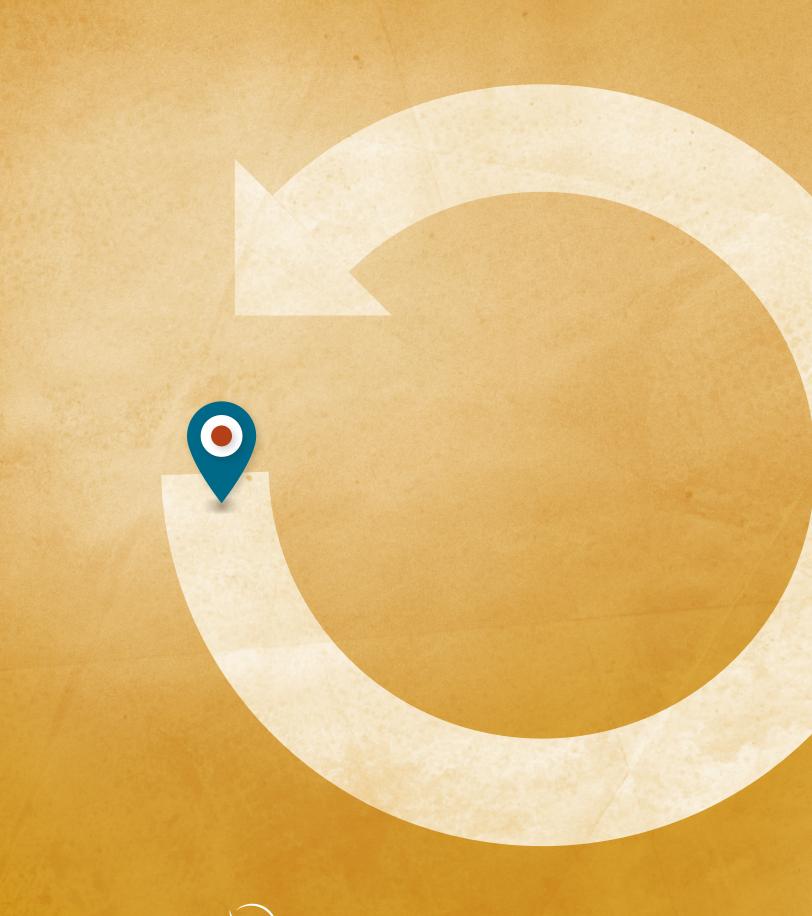
| ITE | N   | RESPONSIBILITY |  |
|-----|---|----------------|--|
|     | Arrival at Destination  |                |  |
|     | Import permit issued  | Consignee      |  |
|     | Cremation/burial permit from Local Authorities in destination                     | Consignee      |  |
|     | Check opening hours of cargo complex  |                |  |
| 21. | <ul> <li>Can cargo complex opening hours be extended<br/>upon request?</li> </ul> | Consignee      |  |
|     | Ground transport from cargo complex to casket organization                        | Consignee      |  |
|     | <ul> <li>Unpacking and inspection</li> </ul>                                      | Consignee      |  |
|     | <ul> <li>Restoration and change of casket, if needed</li> </ul>                   | Consignee      |  |
|     | <ul> <li>Clear communication on when cover ceases</li> </ul>                      | Client         |  |
| 22. | Who is paying for service: organization or family?                                | Client         |  |
| 22. | To advise consignee   | Client         |  |
|     | CREMATION/BURIAL SERVICE  |                |  |
|     | 23.1) Cremation   | Consignee      |  |
|     | a) Application for time slot  | Family         |  |
|     | b) Payment of fees  | Family         |  |
|     | c) After cremation, cremation certificate will be issued                          | Consignee      |  |
|     | d) Collection of ashes next day   | Consignee      |  |
|     | e) Booking of niche   | Family         |  |
| 23. | f) Selection of urn   | Family         |  |
|     | g) Place urn and ashes in niche at columbarium                                    | Family         |  |
|     | 23.2) Burial  | Consignee      |  |
|     | a) Funeral organization can book and pay on behalf of family                      | Consignee      |  |
|     | b) Death certificate and copy of identification card of informant                 | Consignee      |  |
|     | c) Booking of burial time   | Consignee      |  |
|     | d) Apply for permission to erect tombstone  | Consignee      |  |
|     | e) Once permission granted, order tombstone                                       | Family         |  |
|     | f) Building of tombstone takes one to two months                                  | Undertaker     |  |

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|--------|--|-----------------------------------|
| ITE    | VI   | RESPONSIBILITY                    |
| 24.    | Communication  | Assistance Provider<br>AND Client |
|        | <ul> <li>Appoint single managerial POC with the organization<br/>and in assistance ctr.</li> </ul> |                                   |
|        | <ul> <li>POC has relationship, skills and authority</li> </ul>                                     |                                   |
|        | Schedule daily updates by phone/conference call  |                                   |
|        | <ul> <li>Set expectations and explain process</li> </ul>   |                                   |
|        | <ul> <li>Use working days and not days for<br/>expectation management</li> </ul>                   |                                   |
|        | <ul> <li>Be aware of local and embassy public holidays</li> </ul>                                  |                                   |
|        | Consider religious and cultural issues   |                                   |
|        | <ul> <li>Engage the escort/organization representative (if any)</li> </ul>                         |                                   |

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# About the Council

The International Corporate Health Leadership Council (the Council) is a non-profit 501(c)(6) foundation whose objective is to drive standards and policies that result in reducing risk and improving delivery of healthcare to international business travelers, expatriates (and their families) and employees (in emerging markets) wherever they may live or work. Made up of the most senior leadership in corporate health – medical directors, corporate executives, thought leaders and researchers – the Council produces periodic reviews of the latest health trends relevant to global enterprises and provides key recommendations so that appropriate standards are benchmarked and best practices identified and shared with those who make or influence policy decisions concerning the protection and preservation of human capital.



International Corporate Health Leadership Council