

Office of the Chief Medical Examiner



At a Glance

JAMES R. GILL, MD, Chief Medical Examiner

Maura E. DeJoseph, DO, Deputy Chief Medical Examiner

Established - 1970

Statutory authority - Sec. CGS 19a-400 through 19a-415

Address - 11 Shuttle Road, Farmington, CT 06032

Average number of employees – 50 full-time authorized (42 actual) and 12 part-time

Recurring operating expenses (2015-2016) - \$6,492,966.88

Collected revenue (2015-2016) - \$2,551,780.58

Organizational structure - Independent agency comprised of 3 sections: Pathology, Laboratory, and Management Services.

Mission

The mission of the Office of the Chief Medical Examiner (OCME) is to:

- *Investigate reported deaths (indicated below)*
- *Accurately certify the cause and manner of death*
- *Explain and clarify investigative findings for the family*
- *Identify, document, and interpret relevant forensic scientific information for use in criminal and civil legal proceedings necessary in the investigation of violent, suspicious, and sudden unexpected deaths.*
- *To provide information to legitimate interested parties as defined by law and regulation.*
- *Use investigative information to protect the public health.*

Our goal is to investigate deaths presented to this Office in a timely and high quality manner; transport and then release the remains within 24 hours; and complete 90% of OCME reports within sixty days of the investigation.

Medicolegal investigations protect the public by producing accurate vital statistics records, providing information that may prevent unnecessary litigation, protect those who may have been falsely accused, and assist the courts in the proper adjudication in criminal matters; diagnosing previously unsuspected contagious disease; identifying hazardous environmental conditions in the workplace, in the home, and elsewhere; identifying trends such as rate changes in homicides, motor vehicle fatalities, and drug-related deaths; and identifying new types and forms of drugs appearing in the state, or existing drugs/substances becoming new subjects of abuse.

The mission of the Office is accomplished by three sections: Pathology, Laboratory, and Management Services. The OCME is located on the grounds of the University of Connecticut Health Center in Farmington and operates 24 hours a day, 7 days a week, year round.

Statutory Responsibility

The Connecticut General Statutes dictate which deaths are reportable to the Medical Examiner's Office. It is then the OCME's responsibility to determine whether or not jurisdiction should be assumed and what investigative functions need to be exercised in order to execute the statutory mandate. Reportable cases include:

- All violent, sudden, unexpected and suspicious deaths.
- Deaths related to employment or which constitute a threat to the public health.
- Deaths of people whose bodies are to be cremated.
- Deaths that occur outside of a normal hospital setting.
- Deaths under anesthesia in the operating room, recovery room or those resulting from diagnostic or therapeutic procedures must be called into our office.
- All drug deaths related to poisoning, drug abuse, or addiction.

Chapter 368q of the Connecticut General Statutes places OCME under the control and supervision of the Commission on Medicolegal Investigations.

Commission membership during fiscal year 2015-2016

Chair: Todd Fernow, JD, University of Connecticut, School of Law

Vice Chair: John Sinard, MD, PhD, Professor of Pathology, Yale University, School of Medicine

Sidney Hopfer, PhD, Professor of Pathology, University of Connecticut, School of Medicine

Celia Pinzi, Public Member, West Haven

Steven B. Duke, JD, Professor of Law, Yale University, School of Law

Richard A. Lavelly, MD, JD, MS, MPH, Connecticut Bar Association (resigned: July 2016)

Raul Pino, MD, MPH, Commissioner, Department of Public Health

Olinda Morales, JD, Commissioner Pino's Designee

Susan Keane Baker, MHA, Public Member, New Canaan
Isaac Goodrich, MD, Connecticut Medical Society

Public Service Improvements

The chief recipients of our public service are the next-of-kin of the decedents whose deaths fall under our jurisdiction. Our goal is to investigate and certify these deaths in a timely, efficient, and caring manner. The expeditious removal and then release of the remains to the funeral home is part of this process. Our work also involves and/or benefits treating physicians, law enforcement agencies, funeral directors, the legal system, public health agencies, and the general public. The OCME continues its ongoing initiative to improve the quality and delivery of its critical services. We gauge our forensic practice through accreditation by National Association of Medical Examiners (NAME) and a variety of office metrics for completion of autopsy reports and length of time for examination completion. Our medical record's section responded to 5,452 written requests for reports and sent out 3,571 reports to various governmental agencies and 1,288 to families, attorneys, and insurance companies. We have begun a computer based protocol for handling the documents the OCME generates and have expedited several processes through the use of this technology.

In addition to normal agency operations, the agency receives and responds to innumerable requests for information from state, municipal and federal agencies, research facilities, and many other organizations who utilize our data. The OCME's information technology (IT) section produced substantial computerized statistical reports during the year including substance abuse and homicide data. Recipients included state's attorneys, several state agencies, public defenders, hospital quality control departments, researchers, and the media. We participate in data collection for the National Violent Death Reporting System (NVDRS) and suicide investigation and prevention. Due to a layoff in our IT section, we anticipate not being able to respond to all of these requests in a timely fashion in the coming year.

Pathology residents (from hospital training programs at Yale, Hartford Hospital, and Danbury Hospital) and master degree candidates in Forensic Sciences (from the University of New Haven) typically spend an elective rotation at the OCME. Pathologist's Assistants (master degree candidates) from Quinnipiac University spend a rotation observing and assisting in the performance of autopsies. Educational programs have been provided to law enforcement personnel, medical students at the University of Connecticut and Yale University Schools of Medicine, and for many professional and community groups across the state. This fall OCME will accept Physician Assistant students for clinical rotations from the brand new program at Sacred Heart University.

The OCME's fax-cremation certificate process has made it easier and more expeditious for funeral directors to obtain their cremation certificates. These fax cremation requests decrease call volume and telephone hold times for funeral directors and have allowed our investigators to attend more death scenes (>95%).

Achievements 2015-2016

Due to a 56% increase in autopsies over 2 years (1,488 in 2014, 1,933 in 2015, and 2,327 in 2016), the number of postmortem examinations per medical examiner has increased beyond the absolute maximum of 325 per examiner required to maintain national accreditation. To avoid any accreditation deficiencies, each medical examiner should perform no more than 250 autopsies per year. The OCME, which has been fully accredited for the past 5 years, will undergo its annual accreditation evaluation by the National Association of Medical Examiners (NAME) in September 2016. *Therefore, despite meeting the NAME reporting goals, we anticipate loss of full accreditation solely due to inadequate staffing levels for our increased work load. Loss of NAME accreditation means that our office does not meet the minimum requirements for death investigation.*

The increase in autopsies puts additional demands on every facet of our office including mortuary technicians, transportation services, medical secretaries and records staff, processing technicians, business office staff, and our investigators. In addition, every section of our office, except the business office, has vacant positions that have not been re-filled due to the hiring freeze. *Due to understaffing in the face of an increasing workload, there is an increased risk for mistakes in all areas of our agency.*

Laboratory Services: The NAME benchmark for toxicology reporting is 90% or more of toxicology reports must be completed within 90 days to avoid a loss of accreditation. For fiscal year 2015-2016, 99% of toxicology reports were completed within 30 days; our average toxicology report turnaround time was 11-12 days.

The OCME has a very active Anthropology Laboratory, under the direction of a part-time Forensic Anthropologist. She has been essential to the death investigation of skeletonized remains and unidentified persons.

Pathology Services: To maintain NAME accreditation, the turn-around-time for autopsy reports must be 90% or more completed within 90 days. The turn-around-time for all autopsy reports for calendar year 2015 were 96% completed within 90 days. The office is struggling to meet the higher tier expectation that 90% of reports be complete within 60 days. This expectation is reasonable given the outstanding toxicology report turnaround time, however, given the number of autopsies each doctor has to perform annually it is more and more difficult to meet this goal.

Management Services: Administrative support services returned to the OCME late in fiscal year 2015. There has been an improvement in the control and management of appropriated funds and detailed reporting of agency expenditures and projections. The agency created in collaboration with the Department of Administrative Services Procurement Division critical contracts for body transport services, toxicology testing services, body bags, and medical dictation transcription services. The business office upgraded leased office machines, the transport cargo van, and other agency equipment past its useful industry life. The business office has reduced the outstanding accounts receivable balance while working with agency customers. With collaborative partnerships with the Department of Administrative Services, the property

management company, and other state agencies, the OCME is striving to meet the growing operational demands within the same building structure since 1986.

Human Resources also returned to OCME in fiscal year 2015. This has allowed for renewed assessment of the needs of our workforce and workplace. Health and safety issues are continually addressed with the expected result of a better environment for the employees and protection of evidence. Our safety committee is highly active and productive.

The facility is under the control of the Department of Administrative Services Bureau of Properties and Facilities Management and managed by a private company.

A private transport service is used as backup support for our mortuary transport team to ensure rapid removal of remains in instances when the primary team is otherwise occupied.

Information Reported as Required by State Statute

The agency remains committed to the principles of affirmative action and equal employment opportunity. As in prior years, the agency's affirmative action plan submitted to the C.H.R.O. was recommended for approval. Additionally, the OCME met 236.82% of its set aside goal for small business contracts, and met 232.06% of its goal for minority business enterprise contracts. As required by state statute, the agency provides data reports and information to the Office of Policy and Management, Office of Fiscal Analysis and Office of the State Comptroller on a continuous basis.

Our website is regularly accessed by interested individuals. Please visit our website at <http://www.ct.gov/ocme>.