

COMMISSION ON MEDICOLEGAL INVESTIGATIONS MINUTES

September 23, 2022

The meeting of the Commission on Medicolegal Investigations was held at the Office of the Chief Medical Examiner (OCME) in Farmington, CT on Friday September 23, 2022.

Present: John H. Sinard, M.D., Ph.D., Vice Chairman (Remotely)
Sidney M. Hopfer, Ph.D., Secretary (By Phone)
Celia F. Pinzi, (By Phone)
Michael M. Krinsky, M.D., (By Phone)
Elizabeth Frugale DPH, (In Person)

Absent: Todd D. Fernow, J.D. (Chairman)
Susan Keane Baker M.H.A.

Also Present: James R. Gill, M.D., Chief Medical Examiner
Maura E. DeJoseph, D.O., Deputy Chief
Linda Sylvia, Executive Secretary
Lincoln Dwayne Gordon, Administrator

Vice Chairman Sinard called the meeting to order at 2:05 P.M.

The Minutes for the March 25, 2022 were adopted with one correction.

Vice Chairman Sinard introduced the new Commission Member Elizabeth Frugale, Ex Officio, Section Chief and Health Statistics & Surveillance for DPH.

A short discussion on statutes and filling vacancies ensued.

Also introduced was Dr. Deland Weyrauch, our new Forensic Pathology Fellow. He came from North Dakota to Connecticut for a residency in anatomic and clinical pathology at Yale.

The National Association of Medical Examiners (NAME) Inspection is scheduled for October 3rd.

Report of the Chief:

Case completion numbers remain in the 85% range for 60 days. The numbers will fall within the guidelines of 95% for 90 days.

Investigator scenes presence for both July and August were 99%.

Autopsy numbers remain constant.

OCME is in the process of refilling two Principal Physician positions. Dr. Hays is leaving, and Dr. White is not returning.

A copy of the Governor's annual report is included in the packet.

The National Association of Medical Examiners (NAME) report will be reviewed at the November 18th meeting.

Budget requests will be discussed as part of the Executive Summary Report.

With the up-coming NAME Inspection, due to deficiencies in our facility, we expect to be downgraded to provisional status. There has been progress on the expansion/new facility with DAS. Two architectural firms have been interviewed for expansion of the Medical Examiner's facility. One of the architectural firms interested in the project (McLaren) has been used by many national crime laboratories. The firms will provide an assessment factoring in autopsy space and location of the facility. The time frame associated with this expansion is three years. According to the current statute a new building must be on the grounds of a teaching hospital. Geographically, the current location is optimal. Inevitably, refrigerated tractor trailers will be necessary until the expansion project is completed.

There are currently 65 unclaimed bodies on site over 30 days which is down from a peak of 100. Due to statute changes, we are having discussions with DDS to identify funding to funeral homes in order to expedite transfer of bodies. Discussions also include trade servicers that are willing to move a larger number of bodies. The Office will have to decide which funeral homes can handle such a load quickly. At the present time the Office is using two large funeral homes. An idea would be to consider sending an invitation to all funeral homes every two years to contact the Office if they are interested in participating in this opportunity.

The time to submit requests for new legislation has arrived. Suggestions from the Commission are welcome.

There are approximately 3 COVID related deaths per day - down from a peak of over 100/day.

Deaths due to fentanyl are now classified as "accidental drug intoxication" deaths not poisoning. The Office has processed 1,500 accidental drug intoxications this year of which 85% involve fentanyl. Xylazine, an animal tranquilizer, is being added to street drugs and was found in 300 cases last year. In general, the accepted term is intoxication not poisoning because poisoning has the connotation of intent by another. Most cases are classified as acute drug intoxication due to the combined effects of XXX because it would be difficult to attribute the death to one specific drug in particular.

Commissioner Krinsky informed the Commission that fentanyl is produced and available as candy-colored pills geared toward the younger generation. This could cause a higher number of deaths and could impact the Office. Dr. Gill stated any increase in the number of deaths would be a burden since the Office is at maximum capacity right now.

Commissioner Krinsky inquired whether the national shortage of physicians also had an impact on the number of available full time forensic pathologists. Dr. Gill stated there are 500 to 600 practicing full time forensic pathologists in the country. The competition to fill approximately 40 vacancies is intense.

Dr. Gill informed the Commission of cases of chronic verbal abuse against staff members of the Office by two separate funeral home directors. Drs. Gill and DeJoseph have spoken with the directors. Dr. Gill will be writing a formal letter to the Commission in the hopes the situation will improve. Dr. Gill is also considering contacting the funeral CFDA or licensing bureau. Commissioner Pinzi stated the complaint should go directly to the licensing board at the DPH since these directors may not be members of the CFDA. In any event, the CFDA does not have a disciplinary arm therefore no action will be taken.

Financial information in the Executive Administrative Summary Report was reviewed.

Several issues relating to building security were discussed. OPM will support these initiatives. The Office is in the process of obtaining a contract with Allied, a security company, similar to that already in place for other DAS or controlled access buildings within the State of Connecticut system.

There was a lengthy discussion regarding payment of cremation fees by funeral homes.

Approximately 55% of all deaths are recorded electronically using the EDRS. One third of nursing homes are using the system and hopefully will all be on board prior to November 1, 2022. The next push will be communicating to primary care physicians regarding use of EDRS for home deaths and home health agencies involved in hospice situations. Hopefully these areas will be compliant before the end of the year. DPH is actively working with Quincytech, the vendor, testing various scenarios to address interoperability between system which would eliminate the duplication of efforts in the Office.

Election of Commission officers was tabled until next meeting.

There being no further business the meeting was adjourned at 3:05 p.m.

Sidney M Hopfer, Ph.D
Secretary