

Fiscal Year 2016-2017

Office of the Chief Medical Examiner

James R. Gill, MD, *Chief Medical Examiner*

Maura E. DeJoseph, DO, *Deputy Chief Medical Examiner*

Established – 1970. Statutory authority - Conn Gen Statutes Sec. 19a-400-415

Address: 11 Shuttle Road, Farmington, CT 06032

Average number of employees – 50 full-time authorized (46 actual) and 14 part-time

Recurring operating expenses (2016-2017): \$6,096,917

Collected revenue (2016-2017): \$2,617,823

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 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, providing information that may prevent unnecessary litigation, protect those who may have been falsely accused, and assist the courts in the proper adjudication of criminal matters; diagnosing previously unsuspected contagious disease; identifying hazardous environmental conditions in the workplace, in the home, and elsewhere; identifying trends such as changes in homicidal, motor vehicular, and drug-related death rates; and identify 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, unexpected, and suspicious deaths.
- All deaths related to poisoning, drug abuse, or addiction.
- 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.

Chapter 368q of the Connecticut General Statutes places OCME under the control and supervision of the Commission on Medicolegal Investigations whose members are appointed by the Governor.

Commission membership during fiscal year 2016-2017:

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)

Michael T. McCormack, JD, Connecticut Bar Association (appointed: February 15, 2017)

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

Olinda Morales, JD, Commissioner Pino's Designee

Susan Keane Baker, MHA, Public Member, New Canaan

VACANT, Connecticut Medical Society (Isaac Goodrich, MD resigned: September 16, 2016)

The Commission is undertaking an updating and revision of the agency regulations.

Public Service

The chief recipients of our public service are the next-of-kin of the decedents who fall under our jurisdiction. Our goal is to investigate and certify these deaths in a timely, high quality, 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. 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 5,485 written requests for reports and sent out 698 reports to various governmental agencies and 1,200 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, we receive and respond 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). Due to a layoff in our IT section, we have not been able to respond to all of these requests in a timely fashion. We have started to put some of this data on the OCME website.

Related to the increase in drug intoxication deaths, we have attended drug forums with Connecticut's U.S. Senators and have informed law enforcement agencies of new drugs of abuse identified in decedents. These have included various fentanyl analogues including carfentanil. We have participated with the DPH to test all of our suspected drug abusers for viral hepatitis C. in order to determine the prevalence of this infection in this population.

In October 2016, the OCME, along with the CT Department of Public Health Preparedness and Response, hosted the annual Tri-State (CT, NY, and NJ) disaster training drill held for 3 days at Camp Hartell at Windsor locks. It simulated a mass disaster involving a commuter train explosion.

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 Yale University School of Medicine, physician assistant students from Sacred Heart University, and for many professional and community groups across the state.

The OCME's fax-cremation certificate process continues to make 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%).

Improvements/Achievements 2016-2017

Every five years we have an on-site National accreditation inspection by NAME. The most recent inspection occurred in January 2017. ***Unfortunately, the OCME was notified in February 2017 that we had lost full accreditation due to inadequate staffing and body storage capacity.*** We have recently completed construction of a new body storage cooler and have re-filled several vacant investigative, mortuary, and medical records positions. At this point, the only deficiency that is preventing us from regaining full accreditation, is the need for two more medical examiners. Due to our increased caseload, we need to create, fund, and fill two more medical examiner

positions to meet our current workload. *This loss of NAME accreditation means that our office does not meet the minimum requirements for death investigation.*

Laboratory Services: The NAME benchmark for toxicology reporting is that 90% or more of toxicology reports must be completed within 90 days to avoid a loss of accreditation. For fiscal year 2016-2017, 99% of the NMS toxicology reports were completed within 30 days; the average NMS toxicology report turn-around time was 12 days. Beginning in August, 2016, toxicology testing on certain cases (homicides, traumatic suicides, and motor vehicle collisions) were sent to the lab of the Connecticut Division of Scientific Services under DESPP. For fiscal year 2016-2017, 90% of the DESPP toxicology reports were completed within 30 days; the average DESPP toxicology report turn-around time was 22 days.

The OCME has a very active Anthropology Laboratory service, 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: We currently have seven medical examiners which is the same number the OCME had in 1989 when approximately 1,400 autopsies were performed each year. In 2016, we performed 2,357 autopsies. To avoid a NAME accreditation deficiency, no medical examiner should perform over 250 autopsies per year. If over 325 autopsies are performed per ME, there is automatic loss of accreditation. This is why the OCME needs at least two more medical examiners.

Three more of our special investigators have become board certified by the American Board of Medicolegal Death Investigations (ABMDI).

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.

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 business office has reduced the outstanding accounts receivable balance while working with agency customers.

The facility is under the control of the Department of Administrative Services Bureau of Properties and Facilities Management and managed by a private company. With these collaborative partnerships, the OCME is striving to meet the growing operational demands within the same building structure since 1986. These partners have helped us add new body cooler storage space and special exterior electric connection terminals for refrigerated tractor trailers in case of a mass disaster event. We anticipate a new roof in the fall of 2017.

Human Resources 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.

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 177.41% of its set aside goal for small business contracts, and met 121.57% 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>.

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