



Office of the Chief Medical Examiner OCME (FX)

MISSION

The Mission of the Office of Chief Medical Examiner (OCME) is to ensure that justice is served and the health and safety of the public is improved by conducting quality death investigations and certification, and providing forensic services for government agencies, health care entities and grieving families.

SUMMARY OF SERVICES

OCME provides forensic services to local and federal government agencies, health care providers, institutions of higher learning and citizens in the District and metropolitan area. Services include: forensic investigation and certification of certain deaths (i.e., deaths occurring as a result of violence (injury) as well as those that occur unexpectedly, without medical attention, in custody or pose a threat to public health); review of deaths of specific populations; grief counseling; performance of a full range of toxicological examinations; cremation approvals and public dispositions of unclaimed remains.

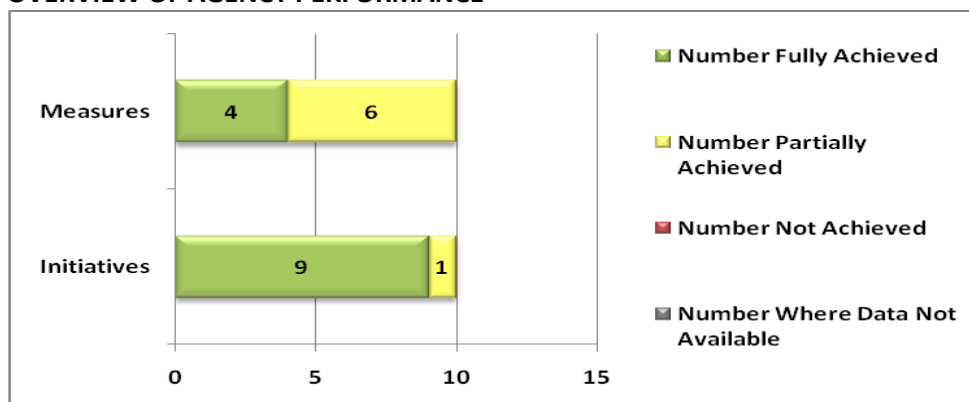
AGENCY OBJECTIVES

1. Achieve provisional accreditation from the National Association of Medical Examiners (NAME) in order to raise the national profile of the agency.
2. Raise agency standards and performance by recruiting and retaining the highest caliber of personnel in the fields of forensic pathology, toxicology and mortuary sciences.
3. Achieve readiness to effectively respond to mass fatalities occurring in the District and surrounding jurisdictions.
4. Improve the ability to retrieve records for the general public by preserving critical case reports and associated information by digitizing agency historical records.

ACCOMPLISHMENTS

- ✓ OCME obtained and extended provisional accreditation from the National Association of Medical Examiners (NAME).
- ✓ OCME raised agency standards and performance by recruiting and retaining high caliber personnel in forensic pathology, toxicology, mortuary sciences and medicolegal investigation. OCME successfully coordinated emergency response with federal, regional and local entities to prepare for the 2009 Presidential Inauguration and following the 2009 Metro train accident.

OVERVIEW OF AGENCY PERFORMANCE






Performance Initiatives – Assessment Details

Performance Assessment Key:


-  Fully achieved  Partially achieved  Not achieved  Data not reported

OBJECTIVE 1: ACHIEVE PROVISIONAL ACCREDITATION FROM THE NATIONAL ASSOCIATION OF MEDICAL EXAMINER'S (NAME) IN ORDER TO RAISE THE NATIONAL PROFILE OF THE AGENCY.


INITIATIVE 1.1: Meet National Association of Medical Examiner (NAME) standards for autopsy and postmortem examination reporting.

-  By the end of FY2009, the agency had hired two additional forensic pathologists as medical examiners for full staffing. Improvements in staffing levels and other procedures resulted in an increase in reporting efficiencies in FY 2009. The agency will continue to strive to meet the standards in FY 2010.

INITIATIVE 1.2: Review and evaluate deficiencies noted in the NAME accreditation inspection report.


-  The OCME was granted provisional accreditation by NAME on October 15, 2008 for six months. The NAME Inspection Report forwarded to OCME prior to the accreditation provided the agency with its deficiencies and several recommendations for improving operations of its death investigation and certification. The agency addressed several deficiencies and forwarded an update to NAME in December 2008. As a result, the agency was granted an additional six months of provisional accreditation through October 15, 2009.

INITIATIVE 1.3: Expand the agency's Quality Control and Assurance Program.

-  The agency was able to hire (at the end of the fiscal year) a person to assume responsibilities for quality control and assurance. There was no person dedicated to this effort throughout the fiscal year in order to coordinate the quarterly reporting as anticipated. Despite the absence of a full time staff member, however, the program continued, to include morning, weekly and quarterly meetings; medical records reviews; quarterly case management system quality control checks; and publication of an annual report.

OBJECTIVE 2: RAISE AGENCY STANDARDS AND PERFORMANCE BY RECRUITING AND RETAINING THE HIGHEST CALIBER OF PERSONNEL IN THE FIELDS OF FORENSIC PATHOLOGY, TOXICOLOGY AND MORTUARY SCIENCES.

INITIATIVE 2.1: Create comprehensive OCME employee training and education program focused on employees' duties, including the provision of opportunities for professional and technical staff to advance within their fields.

-  During FY2009, the OCME provided numerous in-house and external training programs for staff. Staff in positions requiring continuing education credits for licensing purposes (medical examiners and medicolegal investigators) were able to attend conferences and in-house staff and guest lectures and utilize online educational resources provided by the agency to obtain credits. Toxicologists, forensic investigators and pathologist assistants also attended



conferences to advance within their fields. Through these efforts, OCME was not only able to improve training of its existing staff, but it also recruited additional staff.

INITIATIVE 2.2: Enhance the OCME Safety and Illness/Injury Prevention Program.

The agency held in-house training sessions on safety and wellness. Above and beyond the training sessions, management placed a special emphasis on safety within the mortuary unit with review of policies and procedures related to personal protective equipment (PPE),

- universal precautions and hazard communications. The agency also fully implemented the Wellness program with a local hospital that enabled employees to receive respirator fit-testing (for the first time in several years); TB and Hepatitis A/B testing; flu shots; and emergency injury care.

INITIATIVE 2.3: Fill 90 percent of agency positions by expanding recruitment and staff retention efforts.

The agency is pleased to report that this objective was met through efforts to fully staff the Toxicology and Forensic Pathology units that had significant vacancies and despite an unanticipated increase in vacancies in the investigative unit in the third quarter of the fiscal year, terminations due to criminal conduct and lack of performance, and regular retention issues (i.e., resignations). The agency hired a deputy chief toxicologist, and filled four vacant toxicologist positions and two vacant medical officer positions such that the forensic pathology unit is fully staffed for the first time since 2002. It also had a full investigative staff for a portion of the fiscal year. Of note, the agency was able to attract twoboard certified forensic pathologists to medical officer positions such that four of six are board certified, with three having an additional board certification. Further, the director of investigations became a board certified fellow with the American Board of Medicolegal Death Investigators.

- Of 87 FTEs, by the end of the fiscal year, the agency had 83 FTEs available to be filled (four positions were frozen or planned to be eliminated in FY 2010). Of those 83 FTEs, 74 or 90 percent were filled.

OBJECTIVE 3: ACHIEVE READINESS TO EFFECTIVELY RESPOND TO MASS FATALITIES OCCURRING IN THE DISTRICT AND SURROUNDING JURISDICTIONS.

INITIATIVE 3.1: Develop a comprehensive mass fatality coordination and training program.

During FY2009, the OCME continued in-house training on mass fatality planning. Specifically, the OCME had an opportunity to coordinate and undergo training with various District agencies, regional and federal partners, universities, schools, funeral directors and other organizations in preparation for the Inauguration. The agency utilized this opportunity to develop its program, including purchase of resources/equipment, establishment of special staff scheduling, extensive review of the written plan, participation on all local, regional and federal inauguration committee meetings, and specified emergency response training. The agency also developed a new natural disease disaster plan and trained staff in order to address threatened pandemics of specified diseases. This plan has been shared with all stakeholders. The agency was also able to implement its mass fatality plan during the Metro train incident and based on the after-action report further develop and modify the plan and associated training.

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INITIATIVE 3.2: Improve coordination with local, regional and federal agencies and other entities.

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INITIATIVE 3.3: Identify and procure applicable resources and equipment.

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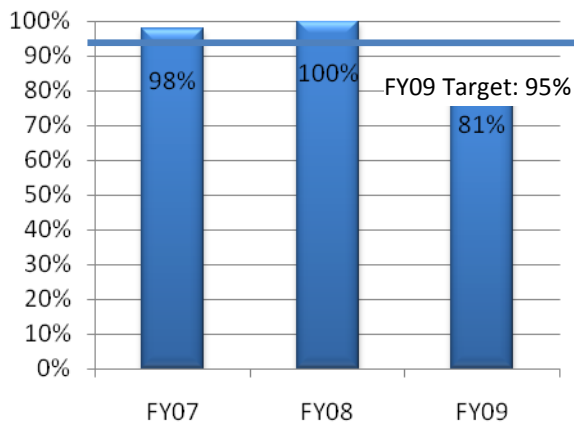
INITIATIVE 3.4: Conduct training and exercises in-house, as well as with local, regional and federal partners.

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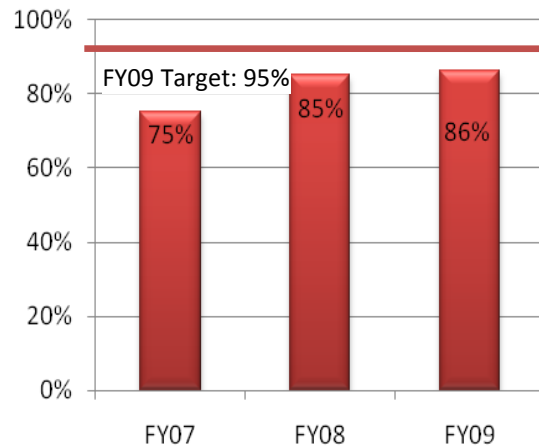
Key Performance Indicators – Highlights

From Objective 1: Percent of positive toxicology examinations completed within 30 days of case submission



PARTIALLY ACHIEVED

From Objective 1: Percent of autopsy reports on homicide cases completed within 60 days.



PARTIALLY ACHIEVED

More About These Indicators:

How did the agency's actions affect this indicator?

- OCME worked diligently to reduce the Forensic Toxicology Laboratory FTE vacancy rate from 70% to 20%.
- OCME detailed a Laboratory Technical Assistant to the Forensic Toxicology Laboratory to reduce the vacancy rate to 10%.
- While the overall FY2009 KPI percentages do not meet the target goals, the fourth quarter percentage (92%) reflects a significant improvement over the previous quarters.

What external factors influenced this indicator?

- OCME faced a challenge in hiring a Chief Toxicologist due to competitive salaries in this field, as well as the length of time associated with human resources protocols and procedures.

How did the agency's actions affect this indicator?

- Recruited and hired two board certified forensic pathologists and a Deputy Chief Medical Examiner
- Began digitizing autopsy reports to ease and expedite case reviews by board certified medical examiners
- Continued to streamline the case tracking system to help medical transcriptionists and examiners efficiently complete cases.
- Autopsy report timeliness was impacted by the backlog of toxicology results needed to make cause and manner of death findings.

What external factors influenced this indicator?

- Agency time and resources were impacted by preparing for the 2009 Presidential Inauguration and the Metro accident
- Medical examiners dedicate a large portion of their time to court testimony, including pre-trial conferences, depositions and testimony within the District, Maryland, and Virginia court systems.



Key Performance Indicators – Details

Performance Assessment Key:

● Fully achieved
 ● Partially achieved
 ● Not achieved
 ● Data not reported

	Measure Name	FY2008 YE Actual	FY2009 YE Target	FY2009 YE Actual	FY2009 YE Rating	Budget Program
●	1.1 % of autopsy reports on homicide cases completed within 60 days	85	95	81.25%	85.53%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.2 % of autopsy reports on non-homicide cases completed within 90 days	77	95	75.41%	79.37%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.3 % of positively identified bodies ready for release within 48 hours	94	95	94.32%	99.29%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.4 % of primary contacts (case decision for jurisdiction) made within 8 hours of case assignment to investigator	89	95	93.21%	98.12%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.5 % of mortuary scene response within one hour of notification that case has been accepted for OCME jurisdiction by an investigator or medical examiner	88	90	90.83%	100.92%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.6 % of negative toxicology examinations completed within 30 days of case submission	98	95	72.87%	76.71%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.7 % of positive toxicology examinations done within 60 days of case submission	100	95	77.41%	81.48%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.8 % of CFRC fatality reviews held within six months of notification of death	95	85	94.55%	111.23%	DEATH INVESTIGATIONS/ CERTIFICATIONS



● 1.9	% of MRDD fatality reviews held within 3 months of receipt of the investigative report from DHS/DDS and determination of the cause and manner of death	94	85	90%	105.88%	DEATH INVESTIGATIONS/ CERTIFICATIONS
● 1.10	% of DV fatality reviews held within 3 months of the conclusion of the case prosecution	0	85	100%	117.65%	DEATH INVESTIGATIONS/ CERTIFICATIONS