



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 that 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. Forensic 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.

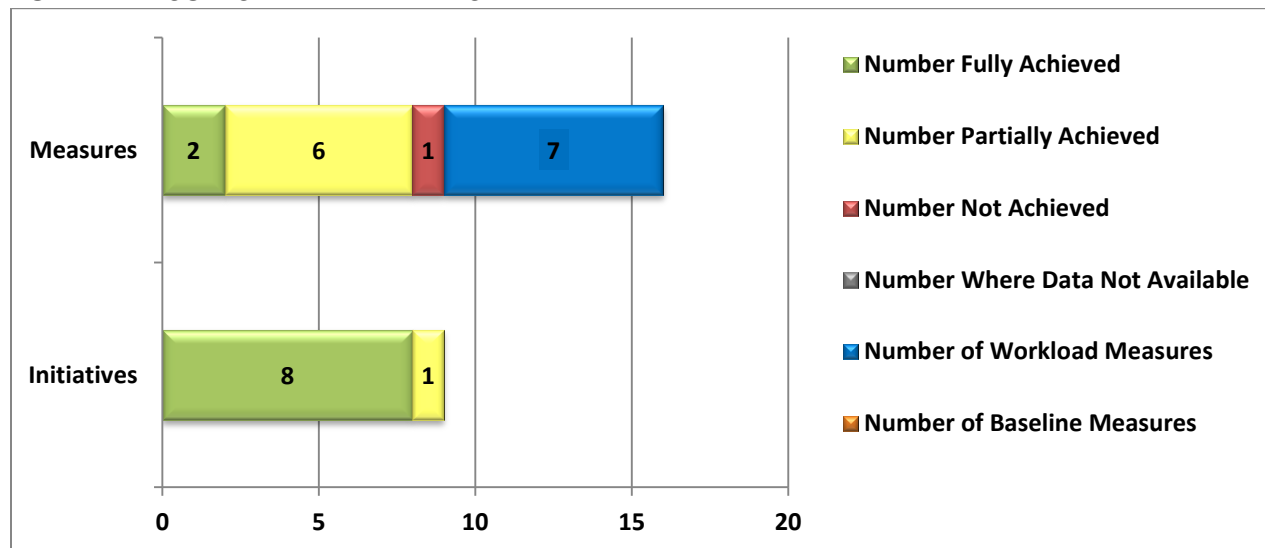
ACCOMPLISHMENTS

- ✓ The Forensic Tox Lab implemented a new District breath alcohol testing program.
- ✓ The Forensic Tox Lab received ABFT accreditation effective Oct 2011.
- ✓ The OCME implemented a move plan and relocation COOP toward a move to a new facility.

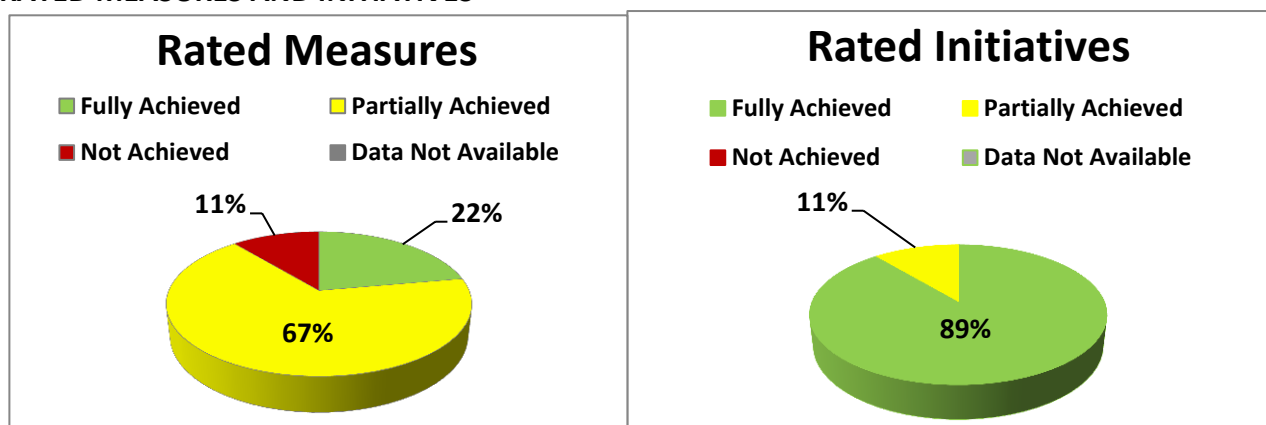


OVERALL OF AGENCY PERFORMANCE

TOTAL MEASURES AND INITIATIVES



RATED MEASURES AND INITIATIVES



Note: Workload and Baseline Measurements are not included

Default KPI Rating:	
$\geq 100\%$	Fully Achieved
75 - 99.99%	Partially Achieved
$< 75\%$	Not Achieved



Performance Initiatives – Assessments Details

Performance Assessment Key:

 Fully achieved  Partially achieved  Not achieved  Data not reported

Death Investigation and Certification

OBJECTIVE 1: Provision of Accurate and Timely Death Investigation and Certification

INITIATIVE 1.1: Meet National Association of Medical Examiners (NAME) industry standards for autopsy and postmortem examination reporting. (PUBLIC SAFETY)

Partially Achieved: One of the NAME standards for autopsy reporting is completion of 90% of autopsy reports on homicide cases within 90 days from the time of autopsy. The agency completed about 80% of such reports. However, met the 90% target during the first quarter. A second NAME standard is completion of 90% of all postmortem examinations autopsy reports (homicide cases excluded) within 60 days. The agency achieved 74% on this target. The agency continues to work to improve in this area with the implementation of technology; establishment of timelines; and weekly reporting to medical examiners regarding their caseload; status of pending cases. Of importance is the fact that some cases do not meet the timeline due to one or all of the following factors: the need for outside consultation; awaiting toxicological findings; awaiting MPD, FEMS or other investigatory reports; or the case is complex. While the agency partially achieved this target, 80% of homicide autopsy cases were completed within the target and 74% of non-homicide cases resulting in preventing a backlog of autopsy reports, next of kin receipt of reports/information in a timely fashion for the purposes of death benefits, insurance and other business matters. This also allows law enforcement to receive key information for criminal investigation and ensures that information is available for court proceedings.

INITIATIVE 1.2: Expand agency Quality Control and Assurance Program (PUBLIC SAFETY)

Fully achieved : Beverly Fields, Anna Frances QA/QC REPORTING **Fully Achieved:** During the 4th quarter of FY11 the OCME formalized the monthly reporting requirements for the following units within the OCME: Investigations, Mortuary, Records Management, and Transcription. The required reporting enables the managers to provide incentives where excellence is achieved or take immediate corrective action where procedures are not being followed or the quality of work is suffering. QA/QC AUDITS AND REVIEW Audits of unit processes and current qa/qc policies are under review (FY12/FY13) to ensure these policies are still applicable, reasonable and continue to directly support the mission of the agency. NEW PROGRAMS A first draft of “Procurement” procedures was been submitted during FY12 for the purpose of developing a quality assurance and control program for the procurement processes. A first draft of the “P-Card” procedures have been developed, but not submitted and will continue to be developed and reported on during FY13. ISO RESEARCH An extensive research effort was conducted during FY11 related to ISO standards for a Medical Examiners office and it was discovered that currently there are no ISO standards for Medical Examiners as a profession or any aspect of their work; however, portions of the Toxicology lab does have aspects of their work that would qualify for ISO accreditation. Specifically ISO 17025 for Breath Alcohol calibration and forensic specific testing.



Fatality Review

OBJECTIVE 1: Provide analysis and make recommendations that result in improved services and outcomes for those populations served by the Fatality Review Division

INITIATIVE 1.1: Efficient operation of the Fatality Review Unit (SUSTAINABILITY)

- Fully Achieved:** The Fatality Review Division was reorganized with respect to three staff persons sharing responsibilities for all fatality reviews (Child Fatality Review Committee; Developmental Disabilities; and Domestic Violence Review Board). Previously the Division had 13 staff with each person dedicated to specific reviews. The unit conducted monthly review meetings for all of the committees; worked with the Mayor's office to provide the list of members to facilitate committee appointments, and provided the requisite recommendations resulting from the reviews to the appropriate agencies or entities. The Unit worked to publish the following annual reports: 2009 CFRC and 2010 DDFRC.
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Forensic Toxicology

OBJECTIVE 1: Implementation of a Breath Alcohol Instrument Service for the District

INITIATIVE 1.1: The Forensic Toxicology Laboratory will implement a new breath alcohol instrument service for the District of Columbia (PUBLIC SAFETY, FISCAL STABILITY)

- Fully Achieved:** The OCME Forensic Toxicology Laboratory implemented a new breath alcohol testing program for the District according to industry standards. The Agency made critical changes to existing software, hired essential staff, developed an operator training program; a quality management program; as well as certified and placed evidential instruments in the field. In FY2012, the OCME successfully trained ten MPD officers using the program and is planning to begin the extensive ASCLD-LAB International (American Society of Crime Laboratory Directors) accreditation process in January of 2013.
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OBJECTIVE 2: Provision of Statistical Reporting of Interest to Various District Agencies

INITIATIVE 2.1: Enhancement of annual statistical reporting (PUBLIC SAFETY, FISCAL STABILITY)

- Fully Achieved:** The OCME Forensic Toxicology Laboratory provided enhanced annual statistical reporting of Driving Under the Influence (DUI) and Drug Facilitated Sexual Assault (DFSA) casework to Districts Agencies (MPD and OVS) as well the 2011 Annual Report. Reports included graphic representations of drug prevalence, ethanol concentrations, and demographics (DFSA only).
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Office of the Chief & Administration

OBJECTIVE 1: Maintain high quality office and system operations to support effective medicolegal death investigation, efficient and quality autopsy reporting, and accurate certification of deaths.

INITIATIVE 1.1: Prepare for agency transition to CFL via review and modification of overall agency operations and customer service, as well as modification of policies and procedures (PUBLIC SAFETY, SUSTAINABILITY)

- Fully Achieved:** The agency implemented its transition plan for occupancy of a new facility. This included: 1) reviewing the CFL agency floor plans for modifications and change orders to ensure continuity of operations for agency process in the new building as discussed prior to the build-out; 2) reviewing all agency policies and procedures and implementing modifications prior to the move in order to assess issues or gaps and ascertaining challenges that will have to be addressed with process changes once in the new facility; 3) development of equipment lists and purchase of laboratory, mortuary or office equipment for existing processes and for new and enhanced
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technology; 4) staffing model changes, including new positions and upgrades to accommodate new work processes; 5) work on actual move management with respect to assignment of office space, keys, moving resources and move of OCME bodies, specimens, equipment and offices/mortuary supplies; and 6) attendance at all meetings, provision of agency information, implementation of directives regarding background/traffic checks and drug testing; and development and implementation of a Relocation COOP.

INITIATIVE 1.2: Enhance OCME incident management response: revision of plans, coordination of training efforts and implementation of technological advances in the agency case management system. (PUBLIC SAFETY)

Fully Achieved: The following OCME incident plans were revised: OCME COOP, Emergency Response Plan and Mass Fatality Plan based on the new District Response Plan, District-wide incident management trainings and risk management information. The Mass Fatality Plan continues to be reviewed for additional upgrade via regular meetings of the OCME Mass Fatality Group led by the Mass Fatality Coordinator. The agency conducted several trainings regarding emergency plans and specifically use of the body storage unit and emergency radios. The agency participated in the following incident management committees and/or training exercises: Emergency Management Committee (EMC); HSEMA's Severe Winter Weather Tabletop; NIMS Training (100, 200, 700 and 800); International Mass Fatality Management Conference; HEPRAs POD Training; Active Shooter Training; HSEMA's Citywide DRP Exercise; HEPRAs Mass Fatality Working Group; Review of DOH's Mass Fatality Plan; Emergency Preparedness Council (EPC); and the District level Cyber Attack Exercise. The agency implemented technology upgrades: including: a) finalizing development of the autopsy internal and external examination report templates; b) case management system: installation of forensic toxicology FACTS (in order to assist in more expedient processing during incidents) and evaluation of the FACTS mass fatality module by management and IT to identify needed improvements and upgrades ; c) case management system: IT unit testing of the latest upgrade to FACTS software and procurement of vendor services for critical upgrades and training; d) streamlined remote access capabilities for management and medical examination by reduction of mobile devices and cell phones in favor of more robust technology that can be used during incident response and other facets of work. The agency also participated in the following District-wide trainings.

INITIATIVE 1.3: Provide Employee Training: Second Annual Employee Summit & Supervisory Training Program (PUBLIC SAFETY, SELF-DETERMINATION, QUALITY EDUCATION)

Fully Achieved: On October 5, 2012, the agency conducted the Supervisory Training Program with all managers/supervisors, entitled, "After All, You're the Supervisor!" The training included a video, role of the supervisor, delegating and developing teams, role-plays and agency performance planning. He OCME conducted a workshop for employees regarding the move to the CFL including the facility layout, the consideration of new policies and procedures that would be developed to accommodate the following: the investigations unit, which includes the case processing unit, being split on the 1st and 5th floors; modifications to interactions with funeral directors; and determination of processes for transport of confidential and evidentiary materials (i.e., toxicology, specimens, decedent bodies, medical examiner case files, personnel files and other records). Subsequent to the first workshop, several were conducted and in the first and subsequent workshops staff were able to make inquiries and resolve issues pertaining to gaps that they perceived for the move itself and for the agency's tenure in the new facility. The agency also



facilitated staff tours to the facility.

INITIATIVE 1.4: Expand agency digitization project throughout agency operations. (FISCAL STABILITY, PUBLIC SAFETY)

- **Fully Achieved;** The agency continued its medical examiner case file digitization project and worked with CFL managers and DGS to implement a contract with a vendor to digitize the rest of the files, x-rays and slides. This will be fully implemented in FY2013. Specifically, in fully achieving this KPI, the agency fully implemented the Electronic Death Registration System (EDRS), which involves the creation of electronic death certificates which enables the death certification process to be streamlined and results in improved efficiencies with interaction with funeral homes. This includes electronic signatures that are applied to the death certificates. The agency also worked with CFL managers and DGS to contract with OCTO for a build out of a credit card acceptance procedure on the agency website for the purpose of funeral directors/homes to pay for electronically for cremation requests/approvals. The build out was completed for the agency's move to the CFL and will be implemented with funeral directors/homes during the second quarter of FY2013 in the new facility. The agency met with funeral directors to inform them of the new procedure. Lastly, the agency has purchased the equipment and the IT Team has developed the plan for digitized identification of decedents when the agency transitions to its new CFL facility.



Key Performance Indicators – Details

Performance Assessment Key:

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

KPI	Measure Name	FY 2011 YE Actual	FY 2012 YE Target	FY 2012 YE Revised Target	FY 2012 YE Actual	FY 2012 YE Rating	Budget Program	
Death Investigation and Certification								
●	1.1	Percent of reports of all postmortem examinations completed within 90 calendar days from time of autopsy in homicide cases	0	90%	90%	79.57%	88.41%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.2	Percent of positively identified bodies ready for release within 48 hours	93.04%	95%	95%	87.24%	91.83%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.3	Percent of preliminary investigative reports complete for utilization in the daily case review morning meetings	0	95%	95%	89.58%	94.29%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.4	Percent of mortuary scene response within one hour of notification that case has been accepted for OCME jurisdiction by an investigator or medical examiner	91.5%	95%	95%	85.55%	90.05%	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.5	Number of Postmortem Examinations Performed	1,078	0		1,061	Workload measure	DEATH INVESTIGATIONS/ CERTIFICATIONS
●	1.6	Number of Deaths Due to Traffic Accidents	53	0		36	Workload measure	DEATH INVESTIGATIONS/ CERTIFICATIONS



	KPI	Measure Name	FY 2011 YE Actual	FY 2012 YE Target	FY 2012 YE Revised Target	FY 2012 YE Actual	FY 2012 YE Rating	Budget Program
●	1.7	Number of Deaths Due to Hypertensive Cardiovascular Disease	0	0		288	Workload measure	ACCOUNTABILITY, CONTROL/COMPLIANCE
●	1.8	Number of Court-related Activities	89	0		49	Workload measure	DEATH INVESTIGATIONS/CERTIFICATIONS
●	1.9	Percent of reports of all postmortem examinations completed within 60 calendar days from time of autopsy (homicide cases excluded)	0	90	90	73.68%	81.87%	DEATH INVESTIGATIONS/CERTIFICATIONS
Fatality Review								
●	1.1	Percent of CFRC fatality reviews held within six months of notification of death	88	75	75	44.62%	59.49%	FATALITY REVIEW COMMITTEES
●	1.2	Percent of DD fatality reviews held within 3 months of receipt of the investigative report from DHS/DDS and determination of the cause and manner of death	78	75	75	100%	133.33%	FATALITY REVIEW COMMITTEES
●	1.3	Number of Child Deaths Due to Inappropriate Bedding	4	0		7	Workload measure	FATALITY REVIEW COMMITTEES
Forensic Toxicology								
●	1.1	Number of DUI Cases Performed	915	0		927	Workload measure	FORENSIC TOXICOLOGY
●	2.1	Number of Court-related Activities	783	0		1139.5	Workload measure	FORENSIC TOXICOLOGY
●	2.2	Percent of negative toxicology examinations completed within 30 calendar days of case submission	0	90		87.76%	97.51%	FORENSIC TOXICOLOGY



	KPI	Measure Name	FY 2011 YE Actual	FY 2012 YE Target	FY 2012 YE Revised Target	FY 2012 YE Actual	FY 2012 YE Rating	Budget Program
●	2.3	Percent of positive toxicology examinations completed within 60 calendar days of case submission	0	90		97.53%	108.37%	FORENSIC TOXICOLOGY