Office of the Chief Medical Examiner FY2017

FY2017 Performance Accountability Report

The Performance Accountability Report (PAR) measures each agency's performance for the fiscal year against the agency's performance plan and includes major accomplishments, updates on initiatives, and key performance indicators (KPIs).

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.

FY17 Top Accomplishments

| Accomplishment | Impact on Agency | Impact on Residents |
|---|---|--|
| While the OCME has been granted full accreditation by NAME effective February 16, 2016 through February 16, 2021, each year the agency must be reaccredited. The agency has received its reccreditation which is a review of the annual status of the agency operations, facility and standard operating procedures and a fee payment. The initial inspection, which is a rigorous process involving the physical facility and review of office practices and policies and procedures, only revealed six (6) Phase I and zero (0) Phase II deficiencies out of 351 accreditation checklist items. | This impacts the agency in that it provides national visibility as an accredited office, thus, attracting professional talent and also ensuring that it is a premier medical examiner's office with best practices for medicolegal investigation. | The residents of DC can be assured that the agency is run by industry standard and that death investigation is sound and medicolegally efficient. |
| In FY16, the agency implemented a Mortuary Examiner Transport Team (METT) Pilot Program. This METT fulfills the standards established by NAME which requires proper body handling on a daily basis and during a mass fatality. In FY17, the agency's goal was to phase in additional staff and gradually phase out the vendor. | This accomplishment is significant in light of the fact that the vendor not only had performance challenges but, ultimately, lost clean hands/licensing. As such, the development of the METT enabled the continuity of the critical decedent transport function with the use of in-house staff resources. The initiative also reduced costs via phase out of the vendor, improved efficiency in reporting to death scenes for transport and provided additional opportunity for staff to perform other duties, | With 12 staff, the agency noted a change in the number of inhouse versus vendor transports with over 80% completed by METT. The agency's response to death scenes with the use of METT averaged about 40 minutes versus approximately 67 minutes with the vendor. The agency's KPI is to respons to 90% of scenes within an hour. The METT are also performing decedent |

| | | releases to funeral homes, inventory work, mortuary room setup and cleaning, periodic autopsy work, fleet maintenance and other duties. |
|--|---|---|
| Fiscal Accountability: The agency was able to spend more than 99% of its FY17 local budget (below \$100,000) and keep a small vacancy rate throughout the fiscal year, including to below 5 FTEs during Q3 and Q4. This was achieved while fulfilling the agency mission of death investigation. This was accomplished utilizing standard operating procedures established in-house on budget/procurement and human resources; managerial oversight; and strategic and performance planning. | This impacts the agency in maintaining accreditation status for the agency as a whole and for the Toxicology Laboratory and ensuring that the agency operates efficiently and effectively/ | Fiscal Accountability demonstrates to District residents good governance and use of their tax dollars. |
| The OCME sponsored a Fatality Management Symposium and Full-Scale Exercise from September 11-13, 2017. The event was held at the Consolidated Forensic Laboratory, Hyatt Place and at designated District sites for the exercise located at 401 E Street and across the street respectively. The "international" event focused on District-wide mass fatality plans and training for all District and regional stakeholders. International guests include representatives from Belgium and Egypt to discuss experiences from mass fatality incidents in those jurisdictions. Emergency response local and regional stakeholders participated in workshops and fatality management exercises over the 4 day period. The Mayor provided remarks during the first two days of the Symposium portion of the event. | This initiative provided training to staff agency wide in emergency response and also gives the agency regional and even nationwide visibility as a lead in emergency response and fatality management. | This initiative was designed to prepared the agency, pubic safety cluster agencies, regional and federal partners and other stakeholders for emergency incidents, in particular mass fatalities. District residents benefit from the training that their public servants receive in emergency preparedness. |

2017 Strategic Objectives

| Objective Number | Strategic Objective |
|---------------------|--|
| 1 | Provide efficient and quality forensic services related to: a) the medicolegal investigation and certification of the cause and manner of death; b) toxicological analyses and interpretations; c) family assistance in understanding the cause and manner of death; d) expert testimony; and e) education and training of law enforcement, health care providers, academic institutions and other stakeholders. |
| 2 | Provide efficient and effective service through a quality management system supported by continuous process improvement, quality control measures, adherence to accrediting body guidelines, training and best practices. |
| 3 | Serve as a public health and safety surveillance organization providing statistical data to law enforcement, health care entities and social service entities tasked with prevention, detection and deterrence and ultimately preventing deaths. |
| 4 | Provide sound expertise as the District's fatality management authority maintaining a comprehensive District-wide plan to respond to all types of fatality incidents and ensure decedent disposition, family assistance, and continuity of operations. |
| 5 | Create and maintain a highly efficient, transparent and responsive District government.** |

2017 Key Performance Indicators

| Measure | Freq | Target | Q1 | Q2 | Q3 | Q4 | FY 2017 | KPI Status | Explanation | | | | |
|---|-----------|--------|-------|-------|-------|-------|------------|---------------|---|--|--|--|--|
| 1 - Provide efficient and quality forensic services related to: a) the medicolegal investigation and certification of the cause and manner of death; b) toxicological analyses and interpretations; c) family assistance in understanding the cause and manner of death; d) expert testimony; and e) education and training of law enforcement, health care providers, academic institutions and other stakeholders. (6 Measures) | | | | | | | | | | | | | |
| Percent of all reports of postmortem examinations completed within 90 calendar days from the time of autopsy in all cases. | Quarterly | 90% | 72.8% | 66.1% | 68.3% | 83.1% | 72.6% | Unmet | The agency experienced a shortage of medical examiners for the majority of the reporting period. Of six medical examiner positions, only two were filled until the 3rd quarter when a part-time medical examiner was hired. Subsequently, during the 4th quarter, two additional medical examiners were hired. Note also that the agency's Deputy Chief Medical Examiner position was also vacant throughout the fiscal year until 4th quarter. Not only did the agency experience a staff shortage during the year, but the caseload increased. During FY18, the agency will fill the remaining medical examiner position. Having a full forensic pathologist staff will assist the agency in addressing the increased workload and it is anticipated that this target will be met. | | | | |
| Percent of public dispositions ready for release within 45 days | Quarterly | 90% | 28.4% | 81.7% | 64.3% | 72.7% | 58.3% | Unmet | This target is impacted by the agency's work with next of kin who are attempting to claim their family members. Often there are delays due to the inability to finance a funeral/cremation; claim disputes; or other legal matters. There are times when after delay the next of kin does not ultimately claim the decedent and the public disposition process moves forward but beyond the time period slated. The agency however is cognizant of its role in working with next of kin to assist them as much as possible in claiming their loved ones. | | | | |

| Percentage of preliminary investigative reports presented at the morning meeting contain sufficient detail for the Medical Examiners to determine the type of postmortem examination. | Quarterly | 95% | 98.9% | 99.5% | 100% | 99.1% | 99.4% | Met | |
|---|-----------|-----|-------|-------|-------|-------|-------|---------------|---|
| Percent of mortuary/transport service scene response within one hour of transport notification by an investigator or medical examiner of an accepted case | Quarterly | 95% | 79.2% | 100% | 96.1% | 100% | 97.1% | Met | |
| Percent of toxicology examinations completed within 90 calendar days of case submission | Quarterly | 75% | 97% | 77.6% | 97.3% | 94.4% | 91.4% | Met | |
| Percent of toxicology examinations completed within 60 calendar days of case submission | Quarterly | 40% | 81.2% | 55.8% | 74.9% | 78.8% | 72.5% | Met | |
| 2 - Provide efficient and improvement, quality co | | | | | | | | | ntinuous process est practices. (4 Measures) |
| Percent of employees completing and maintaining licensure, certification, industry-specific, web-based, internal agency training | Quarterly | 90% | 68.1% | 79.1% | 88.9% | 92.9% | 82.6% | Nearly Met | This target was actually met as noted during the 4th quarter with 92 of 99 employees obtaining or maintaining licensure, certifications and/or requisite trainings. |
| Percent of forensic pathologists (medical examiners) that are board certified or board eligible. | Quarterly | 90% | 100% | 100% | 100% | 100% | 100% | Met | |
| Percentage of all death certificate amendments processed wthin 3 business days of completion/signature. | Quarterly | 90% | 52% | 66.3% | 100% | 98.4% | 87.1% | Nearly Met | This target was impacted by the first two quarters when a new process was being established. |
| Percent of external autopsy requests responsed to within 2 | Quarterly | 90% | 98.6% | 80.1% | 100% | 100% | 92.1% | Met | |

3 - Serve as a public health and safety surveillance organization providing statistical data to law enforcement, health care entities and social service entities tasked with prevention, detection and deterrence and ultimately preventing deaths. (3 Measures)

business days of receipt.

| Percent of FOIA requests responded to within fiften (15) days. | Quarterly | 90% | 100% | 75% | 98% | 90% | 95.5% | Met | |
|--|---------------------|-----------------------|--------------------------|---------------------|-------------------------|-------------------------|-----------------------|-------------------|---|
| Percent of Child Fatality Review Committee (CFRC) fatality reviews held within six months of notification of the death | Quarterly | 70% | 100% | 100% | 83.3% | 100% | 96.5% | Met | |
| Percent of Developmental Disabilities Fatality Review Committee (DDS FRC) fatality reviews held within three months of receipt of the investigative report from DHS/DDS and determination of the cause and manner of death | Quarterly | 100% | 100% | 100% | 100% | 100% | 100% | Met | |
| 4 - Provide sound expert respond to all types of fa Measure) | ise as the laterial | District' lents ar | 's fatality nd ensure | managem decedent | ent autho dispositio | rity maint n, family | taining a assistan | compre ce, and | ehensive District-wide plan to continuity of operations. (1 |
| Percent of agency employees completing a mass fatality training annually. | Annually | 95% | Annual Measure | Annual Measure | Annual Measure | Annual Measure | 100% | Met | |
| 5 - Create and maintain a | a highly eff | ficient, | transpare | nt and res | ponsive D | istrict go | vernmer | nt.** (3 | Measures) |
| Percent of positions posted and filled within 30 days | Quarterly | 80% | 85.7% | 83.3% | 100% | 100% | 88% | Met | |
| Percent of requisitions submitted by the timeframe as prescribed by the District's contracting authority's acquisition planning. | Annually | 98% | Annual Measure | Annual Measure | Annual Measure | Annual Measure | 100% | Met | |
| Percent of decedent cases identified in 5 days | Quarterly | 80% | 94.4% | 93.6% | 96.2% | 96% | 95.2% | Met | |

We've revisited a project to standardize District wide measures for the Objective "Create and maintain a highly efficient, transparent and responsive District government." New measures will be tracked in FY18 and FY19 and published starting in the FY19 Performance Plan.

2017 Workload Measures

| Measure | Freq | Q1 | Q2 | Q3 | Q4 | FY 2017 |
|---|-----------|-----|-----|-----|-----|---------|
| 1 - Forensic Pathology Services (9 Measures) | | | | | | |
| Number of Postmortem Examinations performed: Full/Partial (Not including External Exams) | Quarterly | 363 | 366 | 356 | 321 | 1406 |
| Number of Deaths Due to Traffic Accidents (i.e., cars, Metro, motorcycles, pedestrian, bicycle) | Quarterly | 20 | 16 | 18 | 12 | 66 |
| Number of drug deaths (illicit/rxn) diagnosed | Quarterly | 98 | 100 | 105 | 180 | 483 |

| Number of deaths due to hypertensive cardiovascular disease/obesity | Quarterly | 104 | 96 | 83 | 84 | 367 | | | | |
|---|-----------|-----|-----|----|----|-----|--|--|--|--|
| Number of Infant deaths (1 year and under) | Quarterly | 10 | 10 | 16 | 11 | 47 | | | | |
| Number of child deaths due to inappropriate bedding/SUID (with or without crib in the dwelling) | Quarterly | 0 | 3 | 0 | 0 | 3 | | | | |
| Number of elder deaths due to falls (age 65 and over) | Quarterly | 17 | 17 | 26 | 11 | 71 | | | | |
| Number of youth (ages 10-19) homicides where gun violence is a factor | Quarterly | 3 | 3 | 1 | 7 | 14 | | | | |
| Number of Anthropologic Analyses Performed | Quarterly | 31 | 25 | 36 | 31 | 123 | | | | |
| 1 - Toxicology Analysis (1 Measure) | | | | | | | | | | |
| Number of DUI cases performed | Quarterly | 112 | 136 | 94 | 97 | 439 | | | | |

2017 Strategic Initiatives

| Title | Description | Complete to Date | Status Update | Explanation | | | | | |
|---|--|------------------|--|-------------|--|--|--|--|--|
| CONTRACTS AND PROCUREMENT (1 Strategic Initiative) | | | | | | | | | |
| Develop SOPs for In-house Agency Budget & Procurement Process | The agency will develop Standard Operating Procedures for its internal budget and contracts & procurement process. The SOPs will focus on the agency internal budget review meetings and analysis, as well as the procedures to be followed by managers internally with regard to purchasing good and services for operational purposes in line with Office of Contracting & Procurement regulations and policies. | Complete | The SOPs for the Budget and Contracts & Procurement Process were developed and reviewed. They include an overview of the District Process and an outline of the internal agency process such as internal BRT meetings, expectations of agency managers with regard to quarterly budget meetings to review budgetary needs and purchase orders within their jurisdictions; reprogrammings; budget hearings; the agency MARC and District BRT preparations; the FRP; and procurement of resources, goods and services to support the agency's mission. | | | | | | |
| CUSTOMER SERV | VICE (1 Strategic Initiative) | | | | | | | | |
| Implementation of Digitization | The agency Records Management Unit will begin an initiative focused on digitization of agency records. The purpose is to | Complete | As with Q3, during Q4 homicide cases, | | | | | | |

Methodology

streamline the management of medical examiner case files and other documents generated, utilized and stored by the agency (particularly in light of hard copy storage limitations internally and at District external sites.) This initiative involves staff training, development of Standard Operating Procedures, procurement of associated equipment and development of a phased in approach to the digitization effort. Digitization of documents will enable the agency to provide more timely response to records requests in that they are more easily assessable and, thus, can be more efficiently forwarded or provided in a timely manner.

currently "Accepted" Medical Examiner cases were continued to be converted from paper to a digital format. In addition, all faxes received by Investigations and Records Management are obtained electronically via Right fax, and those documents that are related to an "Accepted" case are saved directly into the applicable case file. The case file folders are established on a dedicated server with a specified naming convention. Staff continue training in the use of various scanning equipment.

FATALITY MANAGEMENT (2 Strategic initiatives)

Build-Out of Agency Fatality Management Operations Center (FMOC)

The agency must have a centralized location for disaster operations and coordination. As such, the agency plans to construct a fatality management operations center to include "emergency communications and office infrastructure." The Fatality Management Operations Center (FMOC) would provide the agency with initial and ongoing situational awareness for preplanned or emergency incidents; the ability to centralize operations, assess the situation and provide rapid response; provide appropriate staff preparedness on an ongoing basis; allow communication with other stakeholders (i.e., jurisdictional law enforcement, fire and rescue, emergency agencies and hospitals); and provide a training center for staff and stakeholder partners for emergency preparedness. The center will also be utilized on a day-to-day basis for operational assessment meetings of medical examiner caseload. Build-out of an FMOC also supports the agency's accreditation efforts as related to accreditation standards requiring a sound mass disaster plan and resources. This initiative ensures that the agency has the appropriate resources and infrastructure to fulfill its role in emergency preparedness situations.

0-24%

The agency submitted a FY17/FY18 Capital Requests in the amount of for \$700,000 to build-out the FMOC. The agency used local funds to construct a small portion of the project -- the Executive Operations Room -wherein situational awareness is monitored. The room is currently used for videoconferencina. web-based seminars and trainings. It has also been used for inhouse and City-wide emergency incident planning drills and trainings in partnership with District and external public safety and health stakeholders.

The agency was not awarded a capital budget to complete the project as anticipated.

Disaster Plan The OCME will continue its evaluation of mass fatality and Complete In addition to the Evaluation & continuity of operations planning; emergency response standard activities in the other Training/Exercises operating procedures; local and regional planning and quarters, during Q4, cooperation; and training and exercising. This will involve the agency hosted the coordination with regional entities, such as other local Medical Fatality Management Examiners, District agency stakeholders, funeral homes, Symposium universities and hospital, federal partners and other community September 11th – stakeholders. The OCME will continue its evaluation of mass 13th. The OCME's fatality and continuity of operations planning; emergency Second Annual Fatality response standard operating procedures; local and regional Management planning and cooperation; and training and exercising. This will Symposium will be involve coordination with regional entities, such as other local held September 11th Medical Examiners, District agency stakeholders, funeral homes, 13th, 2017 and will universities and hospital, federal partners and other community consist of a stakeholders. The agency will participate in an emergency symposium to be held responce exercise. This initiative focuses on agency preparation at the CFL and an and collaborative partnerships with stakeholders to ensure the exercise held at the safety and security of the District during natural disasters, public Stadium Armory lot health emergencies and terrorist and criminal threats... similar to last year. The Public Safety Cluster agencies will receive invitations and more information in the next week or so. Fatality Review (1 Strategic Initiative) Complete In August 2017, the Expansion of The Fatality Review Unit will evaluation the expansion of the Fatality Review programmatic thrust of the review committees to include a OCME grant Programmatic maternal review committee as well as one focused on violence application to the **Populations** prevention. In FY16, the agency has submitted regulations to OVSJG for continued expand the District's fatality review program to include a Maternal support for the Male Mortality Fatality Review. During that fiscal year, the agency Survivor's project was began discussions with the Administration through the Mayoral awarded. . The OCME Safer Stronger Iniative regarding a Violence Prevention Review. continues to partner with the DOH to secure funding and develop a Maternal Interview Program. The legislation for the establishment of a Violence Fatality Review Board (VFRB) and a Maternal Mortality Review Committee was submitted and the status remains pending awaiting approval. FLEET MANAGEMENT (1 Strategic Initiative) Fleet In FY17, the agency will continue its Fleet Replacement Initiative. Complete The agency was The agency will work to replace vehicles utilized by mortuary, successful in securing Replacement Plan

| | investigations or administrative units via grant opportunities or will look to procure additional vehicles for the purpose of mass fatality usage. The agency's fleet is aging and the cost of consistent repairs is not effective nor are the vehicles as reliable as required for day to day usage or mass fatality purposes. As such, as part of it's strategic plan, the agency has developed a Fleet Replacement Plan utilizing grant funding. | | 2 vehicles for its Death Investigations Division one for its Investigations Unit for death scene response and one for the Mortuary Unit for body transport. This was above expectation and, thus, this initiative is considered fully met. The agency actually submitted a Capital Request for 6 vehicles which it is currently pending. The agency is looking to FY18 to | |
|---|---|----------|--|---|
| | | | FY19 for capital support. | |
| FORENSIC INVES | STIGATIONS (1 Strategic Initiative) | | | |
| Medicolegal Death Investigations Field Guide Revision | The Medicolegal Death Investigations Unit will augment its Standard Operating Procedures with a revised Field Operations Guide. The Field Operatons Guide provides procedures and guidance to the investigative team on a step by step process to death scene investigations, as well as interactions with stakeholders at the scene. The Guide is to be exhaustive and include full details of the procedures. | Complete | The Medicolegal Death Investigations Unit completed its work toward augmenting its SOPs for a revision of its Field Operations Guide. This includes determining current industry standards and guidelines and memorializing any new or modified agency procedures or protocols. The guide includes a number of scene types that are typically investigated during medicolegal death investigation. Sixteen scene types are identified and outlined within the guide. | |
| FORENSIC PATH | OLOGY (1 Strategic Initiative) | | | |
| Meet National Association of Medical Examiners (NAME) industry standards for | The OCME's Medicolegal Death Investigation Division will focus efforts on meeting NAME standards for postmortem examinations – 90% of reports of postmortem examinations completed within 90 days from the time of autopsy in all cases. The agency has implemented a myriad of initiatives to enhance the reporting autopsy reporting time periods to include: improved management | 50-74% | The agency continues to make strides in meeting this initiative. An additional medical examiner began their tenure during Q4. | The agency's efforts to increase staffing were completed during Q4. The |

| postmortem examination reporting – 90% of reports postmortem examinations completed within 90 days from the time of autopsy in all cases. | modules and work processes, dictation services, staffing models and scheduling. | | With 6 MEs including the Chief and Deputy, there is consistent coverage within the autopsy suite and autopsy completion rates have improved. However, there has been an increased caseload in FY17 and as such, the agency is recruiting for an additional permanent medical examiner. | forensic pathology industry has a shortage of medical examiner and it is a hard to fill position. Given the fact that the team now has 6 staff, the autopsy report completion rates are anticipated to improve. However, given the increased workload, the agency is currently recruiting for one more medical examiner. |
|---|---|----------|--|--|
| FORENSIC TOXIO | COLOGY LAB (2 Strategic initiatives) | | | |
| Implementation of DUI Testing Enhancement | The Forensic Toxicology Laboratory will implement a new rapid drug testing methodology that will increase the scope and performance of DUI testing. The Laboratory will monitor turnaround times for DUI casework and tests for an increased number of "impairings" drugs in addition to alcohol. The turnaround times should decrease based on the new methodology. | Complete | The turnaround times are currently being measured for DUI casework and a substantial decrease in turnaround times has been noted based on the new methodology. A graph with supporting data is attached hereto. | |
| Contributions to Forensic Toxicology Scientific Community | As part of its function to contribute to the scientific community specifically, the forensic toxicology laboratory will assess toxicological findings, conduct trend analyses and present research papers, publications or presentations to key stakeholders (i.e, scientific community, health care entities, law enforcement and academic community). The goals are to: 1) highlight data findings and trends relevant to stakeholders; 2) provide training for staff in analyzing findings and trends and presenting such information in an academic setting; and 3) provide visibility to the District's forensic tociology laboratory. | Complete | During Q4, the Toxicology Division hosted a two day national forensic toxicology method development workshop at the Consolidated Forensic Laboratory where the agency is located with over fifty (50) attendees. | |
| INFORMATION T | ECHNOLOGY (3 Strategic initiatives) | | | |

| Qualtrax and Surgicare Implementation | The agency will implement two web-based systems to ensure inventory and document control Qualtrax and Surgicare. These systems are managed by the Information Technology and Quality Control/Records Management Units. In FY16, agency staff underwent extensive training and built-out the foundation of these systems and uploaded the requisite documents and items to each. | Complete | The agency has fully implemented both Qualtrax and Surgicare. Qualtrax, as managed by the Records Management Unit, is being utilized for document control and all agency SOPs, MOUs and other critical documents have been uploaded. It is currently being utilized for document modification and review by all managers and for quality control. Surgicare is utilized for inventory control and is managed by IT. It is fully utilized by the Toxicology Division and Administration and Mortuary/Investigation are at the initiation stages of utilization. | |
|--|---|----------|--|--|
| Enhancement of FACTS and Implementation of FACTS | The agency will implement consultation on the implemenation of Lab Information System (LIMS) and work toward enhancement of its current Forensic Analytic Case Tracking System. | Complete | During Q4, data from departmental focus groups yielded a list of dashboard and application requirements that were provided to the software vendor for finalizing the newest iteration of the FACTS application – now known as CMS (Case Management System). The entire application has been migrated from its legacy Microsoft operating system to Microsoft Windows Server 2012 on new Dell server hardware. The final component was the enhanced application dashboard overlay and robust reporting features, including electronic signatures. | |

| Establishment of Data Analysis Fusion Center Grant | The Data Analysis Fusion Center is a collaborative effort established by the agency to provide and/or share data with stakeholders toward "prevention," "detection," "law enforcement" or other types of evaluation or analysis, particularly in the areas of public safety or health. Mortality data is critical data that can be formatted in a manner that can provide key information to other agencies in the form of trends, GIS mapping and statistical studies. This data can be utilized within the District in providing enhanced services to residents and visitors. In FY17, the Center Director will focus efforts on obtaining a grant(s) to support such public surveillance work in the form of resources and/or staffing. | Complete | The Data Analysis Fusion Center worked with DOH to secure a National Violent Death Reporting System (NVDRS) grant focused on violent deaths occuring in the District, such as homicides, suicides, unintentional firearm related deaths. During Q4, the staff hired under the grant performed data entry for the project (about 142 cases year that meet the grant criteria.) A second grant was obtained, entitled "State Unintentional Overdose Reporting System". |
|---|--|----------|--|
| MORTUARY (1 | Strategic Initiative) | | |
| METT | In FY16, the agency implemented a Mortuary Examiner Transport Team (METT) Pilot program. This METT fulfills the standards established by NAME which requires proper body handling on daily basis and during mass fatality. Body transport has been performed by a vendor but during the pilot and in FY17 will be performed by METT. In FY17, the agency's goal is to phase in additional staff with the existing pilot staff and phase out the vendor. This initiative will be evaluated with regard to the staffing model, overtime, emergency availability of the vendor, annual/sick leave and the use of the METT team for other duties to determine the cost, resource, time savings, as well as whether there will be maintenance of improved death scene response times as compared to the vendor (a KPI). | Complete | The 4 new METT staff hired during Q3 were trained during Q4 and were able to be integrated into the full schedule by October 1st for the start of FY18. The addition of this staff will assist the agency in meeting its 24 hours/7 days per week obligation to provide medical examiner transport services the District. |
| PERSONNEL (1 | Strategic Initiative) | | |
| Ensure Efficient Recruitment Process for Qualified Candidates | The agency will implement an Efficient and Effective Recruitment Initiative in line with DCHR's goal to ensure that the recruitment process is within a 45 day timeline and that the best qualified candidates are hired. | Complete | The Chief of Staff and Management Liaison Specialist (HR Advisor) have worked to establish agency procedures surrounding timelines for in-house management review of candidate applications, the |

applications, the

interview process and preparation of candidate selection packet. This timeline also includes the time the candidate may need to accept the offer and the hire/onboarding date. The 45 day turnaround time is the goal. The last portion of the SOP includes training of management in the interview and selection process.

TRAINING (1 Strategic Initiative)

Establish a Formal Internal and External Academic & Training Program

The agency's mandate includes an academic component. This includes: 1) ensuring that staff obtains requisite training to maintain required licensures and certificates and to implement agency standards within work processes and procedures (i.e. attendance at professional toxicology, forensic pathology, death investigations, mass fatality, human resources, quality assurance, records management, IT, anthropology, histology, epidemiology, fatality review and social services, legal, business processing, fatality management and emergency preparedness and other conferences associated with the industries in the fields of work of the staff);; 2) providing academic training opportunities for external stakeholders to learn about the agency and its procedures; internships and other educational opportunities for students (i.e., residents, medical students, forensic students); and 3) training opportunities for stakeholders.

Complete

During the fourth quarter, staff continued to attend trainings throughout the agency to include Forensic Toxicology, Anthropolgoy, Medicolegal Death Investigation. Administration and Fatality Management. Throughout the summer and last quarter, Management staff also participated in a several workshops given by the Chief of Staff and General Counsel geared towards supervisory skills.