


**CITY AND COUNTY OF SAN FRANCISCO
BOARD OF SUPERVISORS
BUDGET AND LEGISLATIVE ANALYST**

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Policy Analysis Report

To: Supervisor Peskin
From: Budget and Legislative Analyst's Office 
Re: Restructuring the Office of the Chief Medical Examiner
Date: November 2, 2020

Summary of Requested Action

The Budget and Legislative Analyst was requested to conduct a comparative analysis of best practices of jurisdictions that employ a Medical Examiner, including core functions, general oversight, hiring and firing criteria, and funding.

For further information about this report, contact Severin Campbell at the Budget and Legislative Analyst's Office.

Executive Summary and Policy Considerations

- San Francisco's Office of the Chief Medical Examiner (OCME) provides forensic science services to the public and agencies of the City and County of San Francisco. Under the provisions of State law, the office is responsible for the investigation and certification of a variety of deaths of legal or public health interest. In FY 2019-20, OCME has an annual budget of \$11.2 million and 36 budgeted positions. The office is currently located in the City Administrator's Office with four major divisions: Investigations, Forensic Pathology (Autopsy), Forensic Lab (Toxicology), and Administration.
- Under State law, the Medical Examiner is a physician specialized in pathology. While State law allows the county's board of supervisors to appoint the Medical Examiner, in San Francisco, the Administrative Code provides for the Chief Medical Examiner to be appointed by the City Administrator with the concurrence of the Mayor. The Medical Examiner was appointed by the board of supervisors (or board of commissioners) in four of the eight jurisdictions in our survey.
- Seven of the eight Medical Examiner offices in our survey were stand-alone departments reporting to the County Executive or Administrator. One Medical Examiner office was situated within the county health agency.
- Three surveyed jurisdictions had the same investigative, Forensic Pathology, and Forensic Lab functions as San Francisco. OCME's Chief Medical Examiner directly oversees the Forensic Pathology (Autopsy) division, while the Deputy Director III oversees the Forensic Lab (Toxicology), Investigations, and Administration divisions. However, in the three jurisdictions with the same functions as OCME, the Chief

Medical Examiner oversees the Forensic Lab (Toxicology) division and other medical divisions, such as Forensic Pathology. One jurisdiction stated that this organizational structure is helpful because of the medical and science expertise of the Chief Medical Examiner that addresses the difficulty in disentangling scientific considerations from traditionally more administrative or managerial decisions.

- Other jurisdictions also monitored and reported on performance measures not used by OCME, including measuring the time frame for conducting and reporting on autopsies and completing investigations.

Policy Considerations

- While our survey does not evaluate whether other appointing and organizational structures contribute to better oversight of Medical Examiner functions, it highlights potential options for the Board of Supervisors to consider. The Board of Supervisors could consider if amending the Administrative Code to provide the Board with appointing authority of the Chief Medical Examiner, consistent with the practice of some other jurisdictions, would contribute to the independence and oversight of the Medical Examiner function.
- The Board of Supervisors could consider if designating the Office of the Chief Medical Examiner as a stand-alone department would contribute to OCME's independence and accountability. Consideration of the organizational placement of the OCME would need to include the budgetary and operational risks of a small stand-alone department. Also, hiring of a Chief Medical Examiner, which has been vacant since June 2019, is necessary to ensure oversight and accountability of the Medical Examiner function.
- The survey also identified different operational structures. Whether internal operations and oversight would benefit from restructuring of the Chief Medical Examiner's direct management oversight of all OCME functions or just the medical ones (pathology and toxicology) is a question to the City Administrator and the new Chief Medical Examiner when hired.
- Other surveyed jurisdictions also track and report on more performance measures than OCME. The Board of Supervisors should request that the City Administrator, OCME, and the Controller's Office develop and establish additional performance measures and numerical targets that monitor OCME's core provision of services to ensure accountability and oversight.

Project staff: Karrie Tam, Nicolas Menard, Severin Campbell

Overview of San Francisco’s Office of the Chief Medical Examiner

Services

San Francisco’s Office of the Chief Medical Examiner (OCME) provides forensic science services to the public and agencies of the City and County of San Francisco. Under the provisions of state law¹, the office is responsible for the investigation and certification of a variety of deaths of legal or public health interest.

In FY 2019-20, approximately 1,500 cases² were investigated by the OCME. As shown in Exhibit 1 below, the number of cases has increased by 22.3 percent since FY 2015-16, which according to the Deputy City Administrator, is primarily due to an increased number of accidental overdose deaths.

Exhibit 1: Number of OCME Cases, FY 2015-16 through FY 2019-20

Fiscal Year	Number of Cases	Percentage Change
FY 2015-16	1,227	5.78%
FY 2016-17	1,160	-5.46%
FY 2017-18	1,120	-3.45%
FY 2018-19	1,284	14.55%
FY 2019-20	1,500	16.91%
5-Year Change	273	22.3%

Source: City Administrator’s Office

Oversight and Organizational Structure

Unlike most counties in California that use a coroner’s model, San Francisco uses the medical examiner system.³ Under the provisions of San Francisco Administrative Code Chapter 2A.250, the City Administrator, with the concurrence of the Mayor, appoints and may remove a Chief Medical Examiner who serves as department head and appointing officer for the office. The functions of the Chief Medical Examiner are defined in State law. The office is currently located in the City Administrator’s Office⁴, and is organized into four major divisions: (1) Investigations, (2) Forensic Pathology (Autopsy), (3) Forensic Lab (Toxicology), and (4) Administration. Appendix A shows the office’s current organizational chart.

¹ Each county within California is mandated to perform the functions of Coroner as defined in the California Government Code Section 27491, the Health and Safety Code Section 102850, the Penal Code and various other codes and regulations.

² Cases reflect Medical Examiner investigations accepted under their jurisdiction. According to the City Administrator’s Office, these figures reflect the number of death certificates issued by OCME.

³ There are two major differences between medical examiners and coroners and their corresponding systems. Coroners can be elected or appointed and are usually associated with the Sheriff in most California counties. However, coroners are not required to be physicians. A medical examiner is required to be a physician, certified by the American Board of Pathology in the medical specialty of Forensic Pathology, and experienced in the Forensic Sciences.

⁴ OCME is one of 25 departments and programs which are under the oversight umbrella of the City Administrator’s Office.

Budgeted Expenditures and Positions

OCME’s FY 2019-20 total original budget was \$11,180,607, which has decreased by 41.2 percent (\$7,829,996) since FY 2015-16. However, this was due to OCME receiving an additional \$9.5 million in funding for relocation to a new facility in FY 2015-16. Since FY 2016-17, OCME’s budget has increased by 23.7 percent (\$2,144,792). During this same timeframe, OCME’s revenues⁵ also increased by 20.7 percent (\$279,705). OCME’s funded positions have remained relatively the same since FY 2015-16, decreasing by 0.3 percent from 35.92 full time equivalent positions (FTEs) to 35.83 FTEs in FY 2019-20. Exhibit 2 below shows a summary of the office’s 5-year historical expenditures, revenues, funded FTE positions, and number of vacant positions.

Exhibit 2: 5-Year Historical Budgets, Revenue, Funded FTEs and Number of Vacancies

Fiscal Year	Original Total Budget	Original Total Revenue	Funded FTEs	Number of Vacancies
FY 2015-16	\$19,010,603	\$1,390,223	35.92	6
FY 2016-17	\$9,035,815	\$1,348,723	36.83	9
FY 2017-18	\$9,659,380	\$1,348,723	36.35	6
FY 2018-19	\$9,928,967	\$1,515,500	35.31	4
FY 2019-20	\$11,180,607	\$1,628,428	35.83	4.5
5-Year Change	(\$7,829,996)	\$238,205	(0.09)	1.5
5-Year % Change	-41.19%	17.13%	-0.25%	-25%

Sources: Annual Appropriation Ordinances and Positions Reports, City Administrator’s Office

Vacancies in Key Positions

The Chief Medical Examiner position has been vacant since June 2019, and the Deputy Director III position has been vacant since August 2020. Consequently, the Deputy City Administrator currently oversees coordination of Medical Examiner operations and supervises all non-forensic pathology staff. An Assistant Medical Examiner currently serves as the Acting Chief Medical Examiner and directly supervises the forensic pathology staff. Exhibit 3 below shows the job class, job class title and vacancy date of OCME vacant positions as of November 2020.

⁵ Revenues are primarily from fees charged to any persons or government agencies, including departments or agencies of the City and County of San Francisco, that request or require documents or services such as a proof of death letter, certified copy of Medical Examiner’s report, storage of remains, etc.

Exhibit 3. OCME Vacant Positions as of November 2020

Job Class	Job Class Title	Vacancy Date
2584 (formerly 0965)	Chief Medical Examiner (formerly Department Head)	June 22, 2019
0953 (formerly 0952)	Deputy Director III (formerly Deputy Director II)	August 7, 2020
2598	Assistant Medical Examiner	May 2, 2020
2456	Forensic Toxicologist I	April 11, 2020
2577 (0.5 FTE)	Medical Examiner's Investigator I	January 23, 2019

Source: City Administrator's Office

Survey of Medical Examiner Offices

Jurisdictions and Methodology

To understand how San Francisco's OCME compares to other jurisdictions, we surveyed all of the Medical Examiner and Medical Examiner-Coroner offices in operation for at least a year in California⁶ in the following areas: core functions, general oversight, funding, and hiring and firing criteria of the Chief Medical Examiner. We also surveyed five jurisdictions outside of California that were selected based on several factors including National Association of Medical Examiners (NAME) accreditation⁷, county demographics, and peers identified by the City Administrator's Office. The selected jurisdictions in California include Ventura County, San Diego County, Santa Clara County, and Los Angeles County. The selected jurisdictions outside of California include Miami-Dade County in Florida, Spokane County and King County in Washington, Cook County in Illinois, and Multnomah County⁸ in Oregon.

Funding

The total FY 2019-20 budget of surveyed jurisdictions ranged from approximately \$47.4 million (Los Angeles County) to approximately \$2.0 million (Spokane County). In addition, the General Fund share of the total budget of surveyed jurisdictions is relatively similar to OCME (85 percent) and ranged from 98 percent (Ventura County) to 78 percent (King County). The average General Fund share of the budget is 90 percent across surveyed jurisdictions. Like OCME, sources of revenue are primarily from fees charged for provision of services, such as a cremation permit fee. The number of FY 2019-20 budgeted positions in

⁶ San Joaquin County's Medical Examiner office declined to participate in the survey because they are transitioning from a Sheriff-Coroner's model and have operated as an independent office less than five months.

⁷ NAME is a national professional organization of medical examiners, death investigators, and death investigation system administrators who perform official investigations of deaths of public interest. NAME offers a voluntary accreditation program for Medical Examiner offices. Accreditation applies to offices and systems, not individual practitioners, and represents minimum industry standards for a high-quality medico-legal system. San Francisco's OCME does not currently have NAME accreditation.

⁸ In Multnomah County, investigations are performed by the county, while the forensic pathology/autopsy work is performed by the Oregon State Medical Examiner Office. Survey responses were only received by the Oregon State Medical Examiner Office conducting forensic pathology work for the office. Because of the organizational differences and incomplete survey data, this jurisdiction was excluded from the analysis.

surveyed jurisdictions ranged from 253 (Los Angeles County) to 13 (Ventura County and Spokane County). Exhibit 4 below shows a summary of the FY 2019-20 total budget, General Fund support, revenues, and budgeted positions in other jurisdictions.

Exhibit 4: FY 2019-20 Budget, Revenue, and Number of Positions in Medical Examiner Offices in Surveyed Jurisdictions

County	Total Budget	General Fund Support	Revenue	General Fund Share of Budget	Budgeted Positions
Los Angeles	\$47,379,000	\$45,218,000	\$2,161,000	95%	253
San Diego	\$11,668,771	\$10,957,694	\$711,077	94%	57
Santa Clara	\$7,186,763	\$6,845,396	\$341,367	95%	28
San Francisco	\$11,180,607	\$9,552,179	\$1,628,428	85%	35.83
Ventura	\$3,345,441	\$3,285,441	\$60,000	98%	13
Cook	\$14,566,989	\$12,072,589	\$2,494,400	83%	113
King ⁹	\$13,878,398	\$10,821,398	\$3,057,000	78%	32
Miami-Dade	\$14,472,000	\$13,567,000	\$905,000	94%	88
Spokane	\$1,979,535	\$1,568,185	\$411,350 ¹⁰	79%	13

Sources: Review of County Budget Reports

Core Functions

Of the eight surveyed jurisdictions, three (San Diego County, Los Angeles County, and Miami-Dade County) have the same core functions as OCME. Other Medical Examiner offices did not have in-house Forensic Lab (Toxicology) services. Instead, they contract out these services to NMS Labs¹¹ (a privately owned company), a state toxicology lab, or the county hospital.

Lab Contracts

Three jurisdictions (Ventura County, Cook County, and Santa Clara County) have contracts with NMS Labs. Cook County in Illinois, for example, has a sole source contract with NMS Labs because they are one of the few ISO/IEC 17025¹² accredited toxicology labs in the country. To ensure quality, the contract details specific turnaround time, costs for tests, provisions for a dedicated toxicologist to meet with the doctors monthly and specific training for the office’s forensic pathologist fellows. Ventura County and Santa Clara County also

⁹ Figures reflect King County’s biennial budget for calendar years 2019 and 2020.

¹⁰ \$150,000 is from intergovernmental revenue.

¹¹ NMS Labs is a bioanalytical toxicology and forensic sciences laboratory providing clinical and forensic services to physicians, attorneys, the criminal justice system, clinical reference labs, pharmaceutical companies, and consumer products manufacturers.

¹² ISO/IEC 17025 is a company level accreditation based on a standard published by the International Organization for Standardization (ISO), which contains two main sections: management requirements (primarily related to the operation and effectiveness of the quality management system within the laboratory) and technical requirements (primarily related to the competence of staff and calibration of equipment). The standard also gives requirements related to quality management such as document control and corrective action.

contract with NMS Labs because the vendor follows NAME recommendations for lab credentials and certifications.

Spokane County uses the Washington State Toxicology Laboratory for services. To ensure quality, the jurisdiction confirms that one or more toxicologists running the lab is certified by the American Board of Forensic Toxicology (ABFT) or certified in toxicological chemistry by the American Board of Clinical Chemistry (ABCC) or the international equivalent, and that the lab is accredited by the ABFT. In addition, the Spokane County Medical Examiner's Office monitors the turnaround time from submission of a sample for testing to receiving the toxicology report.

Oversight and Organizational Placement

As noted above, the Chief Medical Examiner is appointed by the City Administrator with the concurrence of the Mayor, and the Office of the Chief Medical Examiner is located organizationally in the City Administrator's Office. We observed other oversight structures in our survey. Four of eight Medical Examiners in the surveyed jurisdictions are appointed by the legislative body. Of the four Medical Examiners appointed by the legislative body, two are in California (Los Angeles and Ventura counties), consistent with California Government Code § 24010, which states the following:

“Notwithstanding any other provision of law, the board of supervisors may by ordinance abolish the office of coroner and provide instead for the office of medical examiner, to be appointed by the said board and to exercise the powers and perform the duties of the coroner. The medical examiner shall be a licensed physician and surgeon duly qualified as a specialist in pathology.”

Of eight Medical Examiner offices in the survey, the King County Medical Examiner's Office is located in the county Health Department. The remaining seven Medical Examiner offices are stand-alone departments reporting to the County Executive, Administrative, or Operating Officer (or Mayor in the case of Miami-Dade County). Exhibit 5 below summarizes the appointing authority and organizational placement of the Medical Examiner offices in the other jurisdictions.

Exhibit 5. Governing Entity and Organizational Placement of Medical Examiner Offices in Other Jurisdictions

County ¹³	Appointing Authority	Reports to
<i>Medical Examiner Offices in California</i>		
Los Angeles	Board of Supervisors	Chief Executive Officer
San Diego	Chief Administrative Officer	Chief Administrative Officer
San Francisco		
	City Administrator/Mayor	City Administrator
Santa Clara	County Executive	County Executive Officer
Ventura	Board of Supervisors	County Executive Officer
<i>Medical Examiner Offices Outside of California</i>		
Cook County, IL	Board of Commissioners	Chief Administrative Officer
King County, WA	Director of Public Health	Director of Public Health
Miami-Dade County, FL	Mayor	Mayor
Spokane County, WA	Board of Commissioners	Chief Operations Officer

Sources: BLA survey of Medical Examiner offices and review of county statutes

The minimum qualifications for the Chief Medical Examiner in all of the surveyed jurisdictions are similar to OCME and require a license to practice medicine in their respective state, as well as a board certification in Forensic Pathology, as detailed in California Government Code § 24010 for jurisdictions in California. Some surveyed jurisdictions also require the Chief Medical Examiner to have certifications from the American Board of Pathology in Anatomic and Clinical Pathology or Anatomic Pathology, which is also a required qualification of San Francisco’s Chief Medical Examiner. Of note, the Chief Medical Examiner in Cook County, Illinois serves for a renewable five-year term.

Experience Requirement

San Francisco’s Chief Medical Examiner position does not have a minimum experience requirement, comparable to most of the jurisdictions in our survey. However, Miami-Dade County requires their Chief Medical Examiner to have seven to ten years of experience as an Assistant Medical Examiner. Similarly, the Santa Clara County Chief Medical Examiner must have four years of experience in death investigations, and Ventura County requires three years of experience in forensic pathology.

Performance Measures

OCME’s performance measures as reported to the Controller’s Office are the following:

- 1) Percentage of all notifications of families completed by medical examiner within 24 hours; and
- 2) Percentage of toxicology exams completed by medical examiner within 90 calendar days of submission.

¹³ Multnomah County was not included because investigations are performed by the county, while the forensic pathology/autopsy work is performed by the Oregon State Medical Examiner Office.

When compared to all the surveyed jurisdictions, OCME tracks and reports on the least number of performance measures. Common performance measures monitored and reported on by other jurisdictions but not OCME include the following:

- Percentage of autopsy reports completed within 60 days of autopsy;
- Percentage of autopsy reports completed within 90 days of autopsy;
- Percentage of cases examined or autopsied within a specific timeframe (e.g., 24 hours) of completed investigation;
- Percentage of death investigations completed within a specific timeframe (e.g., four working days).

Office Organizational Structure

As previously mentioned, three surveyed jurisdictions (San Diego County, Los Angeles County, and Miami-Dade County) have the same core functions as OCME and have in-house toxicology lab services. Consequently, we compared OCME's organizational structure to these three jurisdictions. As shown in Appendix A, OCME's Chief Medical Examiner directly oversees the Forensic Pathology (Autopsy) division, while the Deputy Director III (Chief Operating Officer) oversees the Forensic Lab (Toxicology), Investigations, and Administration divisions.

However, in the three jurisdictions with the same functions as OCME, the Chief Medical Examiner oversees the Forensic Lab (Toxicology) division and other medical divisions, such as Forensic Pathology. One jurisdiction stated that this organizational structure is helpful because of the medical and science expertise of the Chief Medical Examiner that addresses the difficulty in disentangling scientific considerations from traditionally more administrative or managerial decisions. In addition, the structure also allows the Chief Medical Examiner to be closer to the day to day operations of the office, which can help in quality assurance. OCME's Deputy Director III (Chief Operating Officer) is not required to have a medical, toxicology or forensic pathology background, and qualifications reflect an operational and administrative role.

In addition, all three jurisdictions have a Deputy Chief Medical Examiner that reports to the Chief Medical Examiner and provides managerial support to the forensic pathologists. This differs from OCME's organizational structure, which lacks an additional supervisory position to oversee the forensic pathologists besides the Chief Medical Examiner. However, it should be noted that all three jurisdictions have a larger budget and higher number of FTE employees than OCME.¹⁴

¹⁴ In FY 2019-20, San Diego County Medical Examiner Office's budget was \$11.7 million with 57 FTEs, Los Angeles County Medical Examiner-Coroner Office's budget was \$47.4 million with 253 FTEs, and Miami-Dade County Medical Examiner Department's budget was \$14.5 million with 88 FTEs. As compared to San Francisco, which in FY 2019-20 had a total budget of \$11.2 million and 35.83 funded FTEs.

Medical Examiner Recruiting

The Chief Medical Examiner position, which is responsible for OCME oversight, has been vacant since June 2019, a period of 17 months. Because of the limited number of qualified forensic pathologists, recruiting for the Medical Examiner position is difficult.¹⁵ Some jurisdictions noted the challenges in recruiting and retaining qualified Medical Examiners because of the nationwide shortage of trained forensic pathologists in the country, as well as the difficulty in maintaining competitive salaries for these positions. According to City Administrator staff, the City Administrator's Office has worked closely with the Department of Human Resources to recruit for the vacant Chief Medical Examiner position, but have not yet been able to hire a qualified candidate.

Policy Considerations

Organizational Structure and Oversight

Overall, in comparison to OCME, we observed different oversight and organizational structures in the eight surveyed jurisdictions. While our survey does not evaluate whether other appointing and organizational structures contribute to better oversight of Medical Examiner functions, it highlights potential options for the Board of Supervisors to consider. For example, the Medical Examiner is appointed by the legislative body (board of supervisors or board of commissioners) in four of the surveyed jurisdictions, whereas in San Francisco, the Chief Medical Examiner is appointed by the City Administrator in concurrence with the Mayor. The Board of Supervisors could consider if amending the Administrative Code to provide the Board of Supervisors with appointing authority of the Chief Medical Examiner, consistent with the practice of some other jurisdictions, would contribute to the independence and oversight of the Medical Examiner function.

Seven of the Medical Examiner offices in the surveyed jurisdictions are stand-alone departments reporting to the respective county's Executive, Administrative, or Operations Officer. These counties are structured differently from the City and County of San Francisco, for which the executive position is the elected Mayor, rather than an appointed executive. The Board of Supervisors could consider if designating the Office of the Chief Medical Examiner as a stand-alone department would contribute to OCME's independence and accountability. Consideration of the organizational placement of the OCME would need to include the budgetary and operational risks of a small stand-alone department. Also, hiring

¹⁵ According to a 2003 National Institute of Health Report, between 1959 and 2003, only 1,150 people became board-certified in forensic pathology, and forensic pathology training programs had only 70 slots in 2003, many of which were not filled ("Overview of the Medicolegal Death Investigation System in the United States", National Library of Medicine, National Institute of Health, 2003). According to a 2018 article in Governing Magazine, there were only 500 board-certified forensic pathologists in the United States, about one-half of the number needed ("America's Coroners Face Unprecedented Challenges", Mattie Quin, Governing Magazine, August 2018). According to a March 2020 article, the number of pathologists in the United States decreased by 17.5 percent between 2007 and 2017 ("Multibrief, A look at America's Dire Need for Medical Examiners", Bambi Majumdar, March 25, 2020. According to the article, the 17.5 percent decrease in the number of pathologists was based on data from the Association of American Medical Colleges).

of a Chief Medical Examiner is necessary to ensure oversight and accountability of the Medical Examiner function.

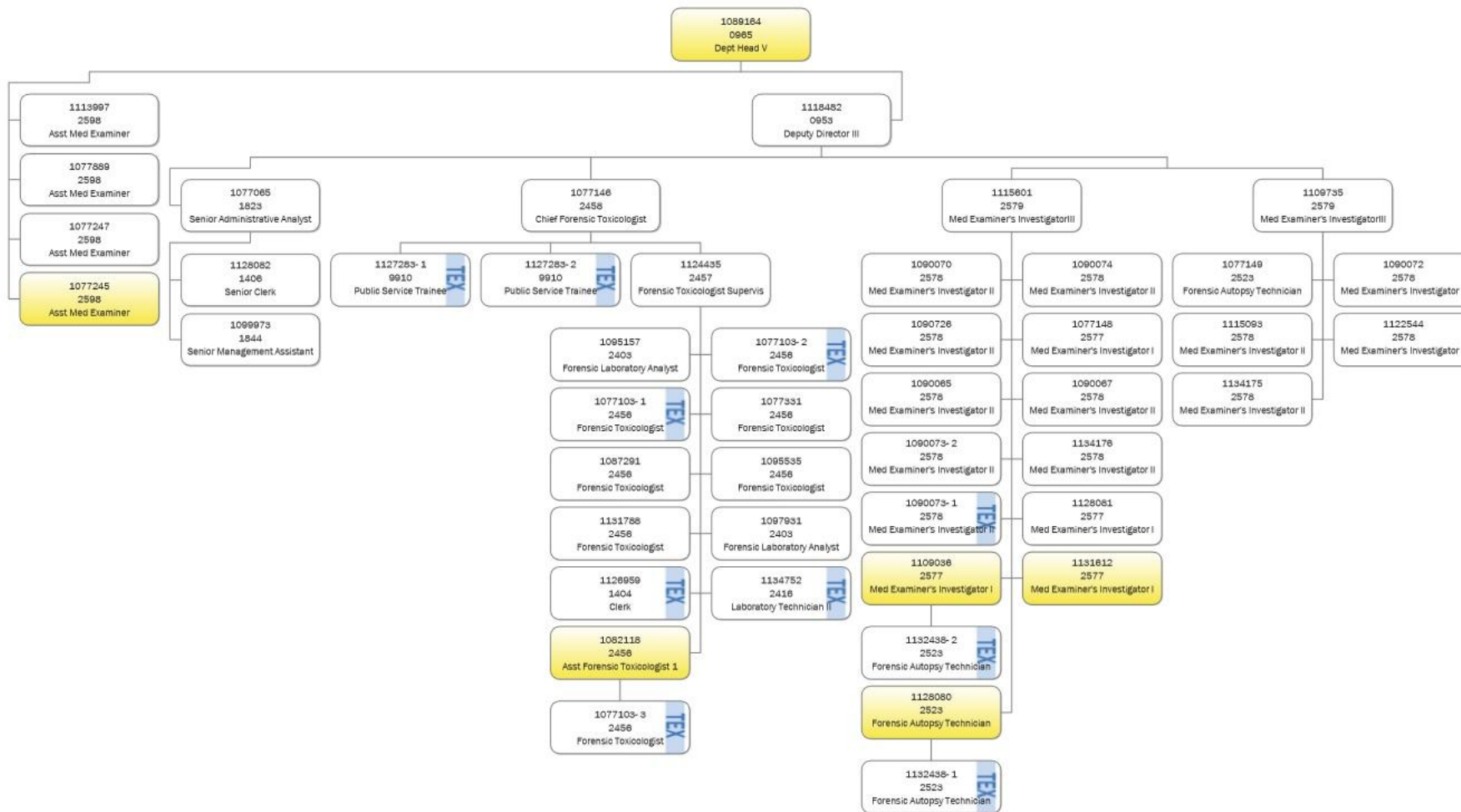
Alternatively, the Board of Supervisors could consider placement of OCME within the Department of Public Health. One Medical Examiner office in the surveyed jurisdictions was a division of the county health agency. According to King County Medical Examiner's Office, which is under the Prevention Division of the Public Health Department, the benefits of this placement includes being able to "buffer" the agency and avoid interference in its activities. In addition, being able to access more resources, such as epidemiologist expertise, from the Public Health department during emergency situations has been helpful. As a counterpoint, in 2019 the Ventura County Medical Examiner's Office was transferred out of their health care agency and now operates as a stand-alone department. In requesting approval from the Ventura County Board of Supervisors, the Chief Medical Examiner noted that the benefit of the transfer included greater authority over the office's operations.

Operations and Performance

The survey also identified different operational structures and performance measures. OCME has an in-house Forensic Lab (Toxicology), while these services are often contracted out to various vendors. Also, in the jurisdictions with the same functions as OCME, the Chief Medical Examiner oversees the Forensic Lab (Toxicology) division and other medical divisions, such as Forensic Pathology, which differs from OCME's organizational structure. Whether internal operations and oversight would benefit from restructuring of the Chief Medical Examiner's direct management oversight of all OCME functions or just the medical ones (pathology and toxicology) is a question to the City Administrator and the new Chief Medical Examiner when hired.

Other surveyed jurisdictions also track and report on more performance measures than OCME. The Board of Supervisors should request that the City Administrator, OCME, and the Controller's Office develop and establish additional performance measures and numerical targets that monitor OCME's core provision of services to ensure accountability and oversight.

Appendix A: Office of the Chief Medical Examiner's Organizational Chart (June 2020)



Source: City Administrator's Office

Appendix B: Summary of Medical Examiner Office Survey Results

Organizational Information	Ventura County	Santa Clara County	San Diego County	Los Angeles County	Miami Dade County	Spokane County	King County	Cook County	Multnomah County (Oregon State Medical Examiner)
Functions	Investigations, Forensic Pathology, Administration	Investigations, Forensic Pathology, Administration	Investigations, Forensic Pathology, Toxicology (Lab Testing), Administration	Investigations, Forensic Pathology, Toxicology (Lab Testing), Administration	Investigations, Forensic Pathology, Toxicology (Lab Testing), Administration	Investigations, Forensic Pathology, Administration	Investigations, Forensic Pathology, Administration	Investigations, Forensic Pathology, Administration	Forensic Pathology, Administration
Other					Evidence/Body Recovery, Indigent Cremation Services		Disposition Authorization, Indigent Remains Program, Forensic Anthropology for WA, Overdose Death Surveillance for WA, minimal in-house testing (e.g., Randox)	Histology, photography, radiology	Counties perform investigations aspect in OR.
Specific Divisions	Forensic Pathology, Operations, Investigations, Administration, Morgue	Administration, Investigations, Technicians and Medical staff	Pathology, Investigations, Toxicology and Administration	Executive Office, Administration Services Bureau, Operation Bureau, Forensic Lab, Forensic Medicine	Forensic Pathology, Forensic Toxicology, Forensic Investigations, Operations, Business Office, Records & Transcription, Computer Services, Morgue, Forensic Imaging, Indigent Cremation	Medical Examiners, Medical Investigators, Autopsy Assistants, and Administration	Investigations, Autopsy Techs, Pathologists, Administration	Investigations, Forensic Technicians, Pathology, Photography, Radiology, Histology, Medical Records, Administration	6 pathologists over 3 locations.

Organizational Information	Ventura County	Santa Clara County	San Diego County	Los Angeles County	Miami Dade County	Spokane County	King County	Cook County	Multnomah County (Oregon State Medical Examiner)
Conditions for Investigation	California Law Government Code 27491	California Law Government Code 27491	California Law Government Code 27491	California Law Government Code 27491	FL Statute 406.11	Every death report made to the office initiates an inquiry. State law outlines the types of death that must be reported to the Medical Examiner	State law. We take jurisdiction in all non-natural deaths, and additionally deaths that are sudden or unexplained, where the decedent was not under the care of a physician or where the physician declines to sign the death certificate.	Sec. 38-109 of Cook County Ordinance	N/A
NAME Accreditation and/or ABFT Certification	No	No	NAME, ABFT	Provisional NAME and ANAB (ANSI National Accreditation Board)	NAME and ABFT	NAME	NAME	NAME	No

Organizational Information	Ventura County	Santa Clara County	San Diego County	Los Angeles County	Miami Dade County	Spokane County	King County	Cook County	Multnomah County (Oregon State Medical Examiner)
Internal Oversight/Reporting Structure	CME reports to the County Executive Officer. COO and Asst. CME both report to the CME. All other personnel report to the COO	Chief Medical Examiner oversees all functions. CME reports to County Executive.	CME is department head. Supervising investigator, supervising toxicologist and admin report to CME. Chief Deputy Medical Examiner is supervisor for all of the pathologists. Investigators report to supervising investigator. Toxicologists report to supervising toxicologist.	CME oversees Chief Deputy Director, who oversees Administration Services, Operations, Forensic Lab and Forensic Medicine. CME has direct oversight over Forensic Lab and Forensic Medicine.	CME is department head and directly oversees Forensic Pathology and Forensic Toxicology divisions. CME also oversees Director of Operations, who oversees all of the other divisions.	The Medical Examiners, the Office/Operations Manager, and the Chief Autopsy Assistant are the management team and have supervisory responsibility	Chief Pathologist supervises the pathologists and anthropologists and sets the direction of the program. An Administrator supervises (directly or indirectly) all other staff and handles HR, budget, grants, etc. There are no "empowered" managers over the autopsy techs and investigators.	Each division has their own supervisor. Largest sections (investigations, forensic technicians) have 2 supervisors. These supervisors report to either Deputy Chief ME (science-oriented) or Executive Officer. Both the Deputy Chief ME and Executive Officer report to CME.	CME supervises the forensic pathologists and administrator. Administrator supervises office assistant and autopsy tech. CME reports to Major in Oregon State Police. With the counties, the state can only recommend best practices on death investigations but there is no direct way to influence activities at the county level.

Organizational Information	Ventura County	Santa Clara County	San Diego County	Los Angeles County	Miami Dade County	Spokane County	King County	Cook County	Multnomah County (Oregon State Medical Examiner)
<p>Benefits and Challenges of Internal Oversight/Reporting Structure</p>	<p>Leadership is in alignment on directives. No conflict among leaders. However, we are a skeleton crew and more personnel is needed including departmental managers. Only the COO is the direct supervisor for all employees with the exception of the Chief and Asst. Chief.</p>	<p>Chief Medical Examiner is very knowledgeable on all aspects of the job duties. Challenges include that at times, not enough hours in the day and difficult to delegate certain tasks.</p>	<p>We are confident in our results; it helps us catch mistakes and assures validity and helps maintain our NAME accreditation and standards. We are structured in a way to meet the NAME standards. Challenges include having to wait for all of the approvals (investigations, autopsy and tox reports) to be completed.</p>	<p>CME is close to the day-to-day operations of the office and plays hybrid role of operations and department-wide leader. CME directly overseeing forensic pathology and the lab is helpful because of the CME's medical/science expertise. Challenge is that this can tax the CME in his or her ability to lead versus manage.</p>	<p>Generally speaking, safety, policy and business controls fall to the Director of Operations. While this works for most business operations, there is a slight disconnect when it comes to Medical Examiner-specific protocols as the Director Operations is not a certified Medical Examiner.</p>	<p>The office holds full NAME accreditation. The main challenge is investigator scheduling to maintain full 24/7 coverage.</p>	<p>Freeing the CME from dealing with the minutiae, HR, etc. is both better in terms of cost, but is also better in terms of what doctors do well, and what they do not. In terms of the "leads" in some ways they are a part of the team, and this can help with team cohesion. Also, they are overtime eligible, so when they have to stay late/come in early, they are compensated for it in a direct and immediate way. Doctors in general are not good with staying in their lane. This can be hard, but it's important to build a strong amount of mutual respect to make it work. In terms of the "lead" structure for autopsy techs and investigators, it is not a good set up. Basically, leads have all the responsibility, but their only authority is their personal ability to get people to play nicely together.</p>	<p>People in a unit that are doing a function are reporting to a person who knows that function and doing that function as well. Pathologists report to Deputy Chief ME who has subject matter expertise. As an administrator, working with unions to have staff accountable is a challenge. Another challenge is recruiting forensic pathologists and retaining them.</p>	<p>Distributes the workload of death investigations so cost is low. Reporting to state police is beneficial because you can take advantage of additional resources and they are well-versed with the political structure of the state. Challenge is that the quality of investigative work product highly varies by county and the state cannot enforce recommendations.</p>

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Organizational Placement	Became a stand-alone department in 2019 reporting to the County Executive. Previously, was located in the County Health Care Agency office.	Stand-alone department reporting to County Executive	Stand-alone department. Deputy Chief Administrative Officer for Public Safety oversees the office. The Deputy CAO reports to the CAO, who reports to the Board of Supervisors.	Stand-alone department reporting to County Executive	Stand-alone department reporting to Mayor	Stand-alone department reporting to Chief Operations Officer who reports to County Executive	Prevention Division within Public Health.	Stand-alone department	Under Oregon State Police Department
Compliance Process	For training that involves HIPPA, we rely on the Healthcare agency compliance office. For overall management practices and control, we follow county policies and procedures that all county departments follow. Most of our employees are union (SEIU or SPOAVC) so we follow civil service rules as well.	Overseen by Chief ME with input from all departments	Various audits, county occupational health, policies and procedures are established and based on NAME standards and requirements	Subject matter experts assist with establishing internal controls that are consistent with countywide best practices.	CME reviews and is responsible for the quality of all death certifications. The Director of Toxicology oversees all toxicology results. Director of Operations reviews and manages internal controls for all other bureaus. We are subject to regular reviews from our County's Office of Commission Auditors, County's Office of Risk Management, NAME, ABFT.	Our quality assurance program includes quarterly case reviews that involve all four employee areas - pathologists, investigators, autopsy assistants, and administrative staff	Everyone is involved in quality management and quality improvement, and helps in the writing and editing of manuals.	Forensic Compliance Officer manages and documents quality management processes.	Quality assurance process for challenging cases but not formalized.

Organizational Information	Ventura County	Santa Clara County	San Diego County	Los Angeles County	Miami Dade County	Spokane County	King County	Cook County	Multnomah County (Oregon State Medical Examiner)
FY19-20 Death Certificates	745	Approximately 900-1,000	3,424	11,194	We do not issue death certificates. In Florida, they are issued by the Florida Department of Health, Bureau of Vital Statistics. We certify roughly 2400 deaths per year.	Our state uses an electronic death registration system operated by the Public Health Department. Medical Examiners electronically sign death certificates in cases where we have assumed jurisdiction; there were greater than 600 in the last year	Office does not issue the death certificates; we provide cause and manner of death for them. We have about 2700 jurisdictional cases per year.	Approximately 6,500	Approximately 1,500.
Performance Measures (Examples)	Autopsy performance % exams within 48 hrs and 72 hrs; Autopsy reports completed within 60 days and 90 days of autopsy; Toxicology reviews done within 60 days (all NAME metrics)	Percentage of autopsy cases closed within 60 days; Average number of days death investigation is closed by the Medical Examiner-Coroner	90% of autopsy reports completed in 60 days for homicides and non-homicides; 85% of investigations reports completed in 60 days; 90% of all notifications of families completed within 12 hours; 97% of tox reports completed within 60 days; 97% of autopsies ready for release in 7 days.	Percent of hospital death investigations completed within four working days; Percent of criminalistics reports available to the medical file within 30 working days from the day the case was handled; Percent of accurate toxicology reports issued (based on the number or corrected reports issued); Percent of	Percent of all death investigations performed by the department that are certified as to cause and manner of death within 60 and 90 days; Toxicology case turnaround time; Autopsy protocol preparation time (calendar days)	NAME Inspection and Accreditation standards/requirements and time to completion of autopsy reports are measured.	Case completion time; number of autopsies per pathologist; eviscerations per tech; investigations per investigator, etc. We also have CQI work throughout the office that allows us to identify issues, change policies and implement them quickly.	Number of cases that are autopsied every month; number of cases per pathologists; number of cases that are closed within 90 days; autopsies closed within 90 days; tox reports closed within 60 days and 90 days.	N/A

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				autopsy reports completed within 60 days and 90 days of autopsy					
CME Appointment Methods	The CEO recommends a vetted candidate to the Board of Supervisors and the Board appoints the CME.	County Executive	Chief Administrative Officer	Board of Supervisors	Mayor	Board of Commissioners	Prevention Division Director runs the process, and the Director of Public Health appoints.	Board of Commissioners	State medical examiner advisory board
CME Minimum Qualifications/Required Credentials	Current CA medical license and board certification in forensic pathology	Medical license in good standing and Board Certification	Licensed physician and board-certified Forensic Pathologist in California	Certification in anatomic and clinical pathology or anatomic pathology and forensic, and a California State Physician's and Surgeon's Certificate.	Board Certified by the American Board of Pathology in Anatomical and Forensic Pathology	Current medical license and Board Certification in Forensic Pathology by the American Board of Pathology	Board certified in forensic pathology, with some experience.	Active medical license in IL and anatomical pathology and forensic pathology board certification.	Licensed physician. 5 years' experience in forensic pathology and boarded in forensic pathology.
CME Term Limit	None	None	None	None	None	None	None	Five years but can be renewed	None
Independently Contracted Services	Odontology, Transportation, Toxicology (NMS Labs)	Transportation and toxicology	Transportation, histology, anthropology, odontology	None	Odontology and Anthropology	Body transportation and Toxicology (state laboratory)	Toxicology (Washington State Patrol tox lab), histology, some transportation	Toxicology (NMS Labs)	Transcription and administrative support