REPORT ON ACHIEVING NATIONAL ACCREDITATION FOR THE NORTH CAROLINA OFFICE OF THE CHIEF MEDICAL EXAMINER

North Carolina Department of Health and Human Services Division of Public Health Office of the Chief Medical Examiner

April 1, 2015



Background and the NAME Accreditation Process

This report is submitted in response to the Joint Legislative Oversight Committee on Health and Human Services Subcommittee on Medical Examiners recommendation that the Joint Legislative Oversight Committee on Health and Human Services support the enactment of legislation by the General Assembly to require the Department of Health and Human Services to develop and submit a plan for the North Carolina Department of Health and Human Services (DHHS) Office of the Chief Medical Examiner (OCME) to become nationally accredited. The plan (including major milestones, an implementation timeline, and funding requirements) is to be submitted by April 1, 2015.

The agency that accredits medical examiner offices and programs is the National Association of Medical Examiners (NAME). The NAME accreditation standards emphasize policies and procedures and represent minimum standards (not guidelines) for an adequate medicolegal death investigation system. NAME accreditation is an endorsement by NAME that a medical examiner office provides an adequate environment in which a medical examiner/forensic pathologist may practice his or her profession. NAME accreditation also provides reasonable assurances that the office well serves its jurisdiction. It is the goal of NAME that application of these accreditation standards will aid in developing and maintaining a high caliber of forensic/medicolegal death investigations for the communities and jurisdictions in which they operate.

The NAME Inspection and Accreditation Program is a peer review system. NAME publishes a policies and procedures manual (22 pages) which describes the application and inspection processes that must occur in order for a medical examiner office to become accredited. NAME also publishes a 32-page checklist which is used to provide a realistic assessment of the quality of operations of a medical examiner office. The NAME checklist questions are used during an inspection to evaluate whether or not the office meets the NAME standards for accreditation.

Key Steps and Activities to Achieve NAME Accreditation

There are a number of key steps and activities that must be accomplished before the OCME may begin the process to submit its application for NAME accreditation. These steps and associated timelines are depicted in Appendix 1. Several actions are well underway and will be accomplished near the beginning of State Fiscal Year (SFY) 2015-16. These actions set up a forward motion and substantial progress to permit the application process to begin in earnest in the first quarter of SFY 2016-17. The application process requires an extensive amount of hands on work to upload all the pertinent documents into the NAME application site in order for NAME and its appointed inspectors to review prior to scheduling the onsite inspection.

The following are *major areas of NAME requirements* which are currently not met (including current status and plans) or which place at risk the achievement of NAME accreditation for the OCME:

Annual Statistical Report

- NAME has declared that the mere availability of data from a computerized information management system does not satisfy this checklist item.
- A major rationale for the compilation of such data is the value the data provides for analyzing and understanding the workload and short and long term trends that may affect a medical examiner office.
- The NAME checklist outlines a minimum of 16 different statistical data reports that must be included in an office's annual report.
- The OCME has recently hired a Public Health Epidemiologist whose primary responsibility it is to mine the Medical Examiner Information System (MEIS) for these data sets and create an annual report that will meet this requirement.
- A robust MEIS is necessary on a long-term basis to generate and compile data needed to satisfy this NAME requirement (see next item).

• Update the Medical Examiner Information System (MEIS)

- The MEIS is the backbone of the reporting and data/information system for the OCME; it also supports others in the state's Medical Examiner system. The MEIS is used by OCME staff in signing out completed medical examiner cases in a timely manner, for data analysis for the required annual report, and for payment of local medical examiners for their services.
- The OCME's current MEIS is based on obsolete technology first implemented in 1972 on the University of North Carolina at Chapel Hill's IBM mainframe housing administrative data. Conversion of MEIS data from IBM files to a relational database occurred in the mid-1990s and implementation of its first production applications was accomplished by 1998. The conversion necessitated adoption of a myriad of technologies framed on Sun Server microchip capability. This capability is 15 years old, is no longer supported and requires changing the application modules in order to update to a supportable technology.
- The MEIS is also not accessible by all medical examiners in the state, and real-time reporting is not supported by the MEIS.
- Upgrading the Medical Examiner Information System (MEIS) is needed to meet national accreditation standards and to better support real-time field ME investigations and reporting, to improve data analysis for trends in cause of death and for overall reporting and billing functions.

Each Board-Certified Forensic Pathologist should not perform more than 250 autopsies annually

- This NAME requirement recognizes the labor-intensive work performed by forensic pathologists.
- OCME has recruited a new Deputy Chief Medical Examiner who will be on staff at the beginning of SFY 2015-16 and will contribute to the OCME's forensic pathologist

- workforce. An additional forensic pathology position has also been created and is being actively recruited.
- Assuming current forensic pathology staffing at the OCME remains stable, the addition
 of the Deputy Chief Medical Examiner will reduce the other forensic pathologists'
 workloads to meet the NAME standard. This position will also permit the current Chief
 Medical Examiner to reduce her autopsy case load and to focus more attention to the
 management and oversight of the North Carolina Medical Examiner system.
- o If current forensic pathology staffing at the OCME does not remain stable, achieving this NAME standard may be difficult. The total number of board-certificated forensic pathologists nationally is limited and competition for this resource is fierce. Quickly replacing any potential future forensic pathology staffing losses at the OCME will be critical to achieving NAME accreditation.

Accredited Toxicology Laboratory

- An accredited toxicology laboratory is required by NAME in order for the OCME to become NAME accredited. The OCME operates a centralized toxicology laboratory that supports the entire North Carolina medical examiner system.
- The OCME Toxicology Laboratory is currently undergoing accreditation by the American Board of Forensic Toxicology (ABFT). The mission of the ABFT notes that forensic toxicology encompasses the measurement of alcohol, drugs and other toxic substances in biological specimens and interpretation of such results in a medicolegal context. The purpose of the American Board of Forensic Toxicology is to establish and enhance voluntary standards for the practice of forensic toxicology and for the examination and recognition of scientists and laboratories providing forensic toxicology services.
- The OCME Toxicology Laboratory is expected to become accredited after the upcoming onsite inspection scheduled for April 20-21, 2015. After the onsite inspection, the anticipated ABFT accreditation should occur by the first quarter of SFY 15-16.
- Once accredited, the OCME Toxicology Laboratory must be reaccredited every 2 years and must undergo an internal self-assessment every year.
- The Toxicology Laboratory is a very technology intensive operation and requires highly complex and sophisticated scientific equipment in order to perform the myriad required tests to aid in determining cause and manner of death, especially in drug overdose or suspected poisoning deaths. \$400,000 in non-recurring funding was requested in the Governor's proposed budget for SFY 2015-17 to replace outdated instrumentation or equipment no longer supported by the manufacturers.

With the implementation and sustainability of the various activities outlined in Appendix 1, the OCME should be poised to successfully meet the NAME accreditation requirements and become NAME accredited by the end of the first quarter of SFY 2017-18. There is an initial accreditation fee and once accredited, the OCME will be required to pay an annual fee to maintain accreditation.

Costs associated with the key activities (including current funding status) are included in Appendix 2.

RESOURCES:

American Board of Forensic Toxicology. Website information http://www.abft.org ABFT. Colorado Springs, CO

National Association of Medical Examiners. NAME Inspection Checklist, 2014-2019. NAME. Marceline, MO.

National Association of Medical Examiners. NAME Policies and Procedures Manual, 2014. NAME. Marceline, MO.

APPENDIX 1 ESTIMATED TIMELINE FOR MAJOR ACTIVITIES OF THE NORTH CAROLINA OFFICE OF THE CHIEF MEDICAL EXAMINER TO MEET NAME ACCREDITATION REQUIREMENTS

		Estimated T	imelines f	or Activities	of Office of th	e Chief Me	dical Examine	(OCME) to m	eet National A	ssociation c	of Medical Exar	miner (NAME)	Accreditat	ion Requir	ements	
	SFY 2015-2016				SFY 2016-2017				SFY 2017-2018			SFY 2018-2019				
Activity	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
OCME policies and procedures reviewed	х	COMPLETED														
and finalized	*	COMPLETED														
Annual Statistical Report	Х		\longrightarrow	COMPLETED	Х			COMPLETED	х		\rightarrow	COMPLETED	х			COMPLETI
Update Medical Examiner Information																
System (MEIS). Funding dependent; no	Unknown															
known funding source at present time.																
Secure Accreditation Fees (application,																
certification, annual). This item is	Х															
currently funded.																
Deputy Chief Medical Examiner begins;																
mproves workload for all forensic																
pathologists and increases sign-out of	Х															
cases to meet goal of 90% cases																
completed within 60 days																
Toxicology Laboratory accredited by	x	COMPLETED														
American Board of Forensic Toxicology	^	COIVITEETED														
Toxicology Laboratory - Seek								v								
reaccreditation (every 2 years)								Х			COMPLETED					
Equipment for OCME and Toxicology																
Laboratory. Funding dependent; \$400K	Unknown															
non-recurring funding requested in	Unknown															
Governor's proposed budget SFY 2015-17.																
Establish contracts for Specialty																
Consultants (forensic odontology,																
neuropathology pediatric pathology,		х														
forensic anthropology). This item is																
currently funded																
Upload required documents into NAME			х		COMPLETED											
application					COMIT ELTED											
Submit application to NAME					x											
Onsite NAME Accreditation Inspection *							х		COMPLETED							
Seek NAME Reaccreditation (every 2																
years)															х	
,,																
(- Quarter in which activity is estimated to	begin															
Dependent upon NAME. NAME attempts		onsite														
nspection within 6 weeks of completed ap																
eport on accreditation decision within 30-	•															

APPENDIX 2

ESTIMATED OR ACTUAL COSTS FOR MAJOR ACTIVITIES OF THE NORTH CAROLINA OFFICE OF THE CHIEF MEDICAL EXAMINER TO MEET NAME ACCREDITATION REQUIREMENTS

	Estimated or Actual Costs for Activities of Office of the Chief Medical Examiner (OCME) to meet National Association of Medical Examiner (NAME) Accreditation Requirements								
Activity	SFY 2015-2016	SFY 2016-2017	SFY 2017-2018	SFY 2018-2019					
OCME policies and procedures reviewed and finalized. This item is currently funded.	Staff time; completed	N/A	N/A	N/A					
Annual Statistical Report. This item is currently funded.	Staff time	Staff Time	Staff Time	Staff Time					
Update/replace Medical Examiner Information System (MEIS). Funding dependent; no known funding source at present time.			\$2,011,384 *	\$2,548,584 *					
Toxicology Laboratory initial fee for applying for accreditation by American Board of Forensic Toxicology. This item is currently funded.	\$3,500								
Toxicology Laboratory - Seek reaccreditation (occurs every 2 years with fees paid on an annual). This item is currently funded.		\$3,500	\$3,500	\$3,500					
First Year NAME Accreditation Fees. This item is currently funded.		\$7,000							
Annual NAME reaccreditation Fees. This item is currently funded.			\$2,000	\$2,000					
Equipment for OCME and Toxicology Laboratory. Funding dependent; \$400K non-recurring funding requested in Governor's proposed budget SFY 2015-17.	\$400,000	\$400,000	\$400,000	\$400,000					
Contracts for Specialty Consultants (forensic odontology, neuropathology pediatric pathology, forensic anthropology). This item is currently funded.	\$35,000	\$35,000	\$35,000	\$35,000					
* Estimates for costs of MEIS vendor solution. Includes 3 and \$1,716,192 non-recurring funding for 1st year, \$2,255 \$295,192 is estimate for annual recurring cost of MEIS fo support by vendor following implementation.	3,392 non-recurring fund	ing for 2nd year.							