



Session 3: Standards, Certification and Accreditation

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International Association of Coroners and
Medical Examiners (IACME)

NAS: Advancing the Field of Forensic
Pathology:

Lessons Learned from Death in Custody
Investigations

June 17, 2024

IACME

- **Dedicated to the promotion of excellence in medicolegal death investigation through collaboration, education, and accreditation.**
- The International Association of Coroners & Medical Examiners (IACME) has almost 90 years of experience in the presentation of educational seminars for the purpose of assisting coroners, medical examiners, and other forensic specialists in the performance of their duties.
- Offers accreditation to medical examiner and coroner (MEC) offices of all sizes since 2005

IACME Training



IACME Accreditation

- Currently 40 offices accreditation
 - Growing annually
- Costs based on population
 - Initial and every 5 year audit fee, plus annual fee
 - On site audit every 5 years, travel costs paid by agency
- Annual reporting requirement

IACME Accreditation – 2024 Standards Update

5 Main Sections

- 285 Total Standards
- 260 Total Required
- Agency Practices
 - 12 subheadings
 - 118 standards
 - 105 required
- Investigative Practices
 - 4 subheading
 - 60 standards
 - 57 required
- Morgue Facilities
 - 6 subheadings
 - 70 standards
 - 66 required
- Laboratory Services
 - 3 Subheadings
 - 16 standards
 - 14 required
- Forensic Specialists
 - 2 subheadings
 - 21 standards
 - 18 required

IACME Standard on In Custody Death Investigations

- New for 2024
 - **The agency shall have a written policy defining law enforcement related and in-custody deaths, their special investigative considerations, and case postmortem examination requirements.**
- Policies are reviewed by 2 auditors to ensure they are within industry norms

Other Relevant IACME Standards

The agency shall conduct an independent investigation separate from law enforcement or other investigative entities. (Required)

The agency shall have a written policy requiring medicolegal death investigators to take scene photographs independent from other investigative agencies (Required)

The chief/lead investigator shall be registered by the American Board of Medicolegal Death Investigators (ABMDI) or its Forensic Specialties Accreditation Board (FSAB)-accredited equivalent. (Required)

The majority of the medicolegal death investigators should be registered by the American Board of Medicolegal Death Investigators (ABMDI) or its Forensic Specialties Accreditation Board (FSAB)-accredited equivalent. (Not Required)

Board-certified forensic pathologists (American Board of Pathology [ABP]) shall perform/supervise forensic autopsies (Required)

CHALLENGES

- **Support of governing bodies**

- Low Budgets (for many offices)

- **Staffing Challenges**

- Forensic Pathologists
 - Regional challenges (WY)
- 6,330 coroners and death investigators as FTEs
 - FTE was calculated at 2 PT to 1 FT

- **Lack of Experience/Lack of Deaths**

- 99 office reported no cases for the reference year and another 16 had none accepted
- 2022 NFLIS report-
 - 13% of respondents served jurisdictions >250K, but handled over 75% of all referred cases
 - 45% of the 1605 respondents served jurisdictions <25K
- Makes meeting ABMDI requirements impossible

- **Limited Access to Resources**

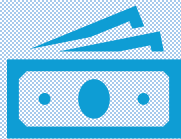
- including training
 - Recent CDC sponsored training we had over 600 people sign up for free training in 3 days from all but one state and 3 territories

Reported budget values of MECs, by census region, 2018

Region	Median Value	Mean Value
Overall	\$68,000	\$775,000
Midwest	\$56,224	\$359,772
Northeast	\$271,653	\$1,936,598
South	\$50,000	\$772,881
West	\$151,629	\$1,659,302

Budget by Urban-Rural Category

Urban-Rural Category	Median
Large/Medium Metro	\$317,299
Small Metro	\$155,000
Micropolitan	\$82,076
Rural/Non-Core	\$27,875



Cite: Bureau of Justice Statistics, 2018 Census of Medical Examiner and Coroner Offices

CHALLENGES cont.

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Staff Salaries by Urban-Rural Code

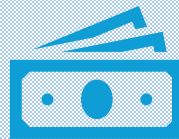
Urban-Rural Category	Autopsy Pathologists <i>Derived Midpoint Salary</i>					Death Investigators <i>Derived Midpoint Salary</i>				
	Mean	Median	Mode	Max	Min	Mean	Median	Mode	Max	Min
Large/Medium Metro	\$184,789	\$194,376	\$200,000	\$335,627	\$0	\$46,751	\$50,898	\$45,000	\$135,592	\$0
Small Metro	\$136,206	\$150,000	\$150,000	\$249,000	\$0	\$33,141	\$32,530	\$1,000	\$98,696	\$0
Micropolitan	\$305,000	\$305,000	\$305,000	\$305,000	\$305,000	\$27,472	\$24,000	\$0	\$100,000	\$0
Rural/Non- Core	\$19,113	\$0	\$0	\$240,000	\$0	\$14,752	\$5,000	\$0	\$176,750	\$0



Cite: Bureau of Justice Statistics, 2018 Census of Medical Examiner and Coroner Offices

Coroners/Nonphysicians Salaries by Urban-Rural Category

Urban-Rural Category	Coroners/Nonphysicians <i>Derived Midpoint Salary</i>				
	Mean	Median	Mode	Max	Min
Large/Medium Metro	\$59,230	\$53,000	\$18,000	\$257,000	\$0
Small Metro	\$46,408	\$40,700	\$6,000	\$180,000	\$0
Micropolitan	\$37,118	\$30,000	\$30,000	\$330,000	\$0
Rural/Non-Core	\$19,915	\$12,580	\$12,000	\$139,000	\$0

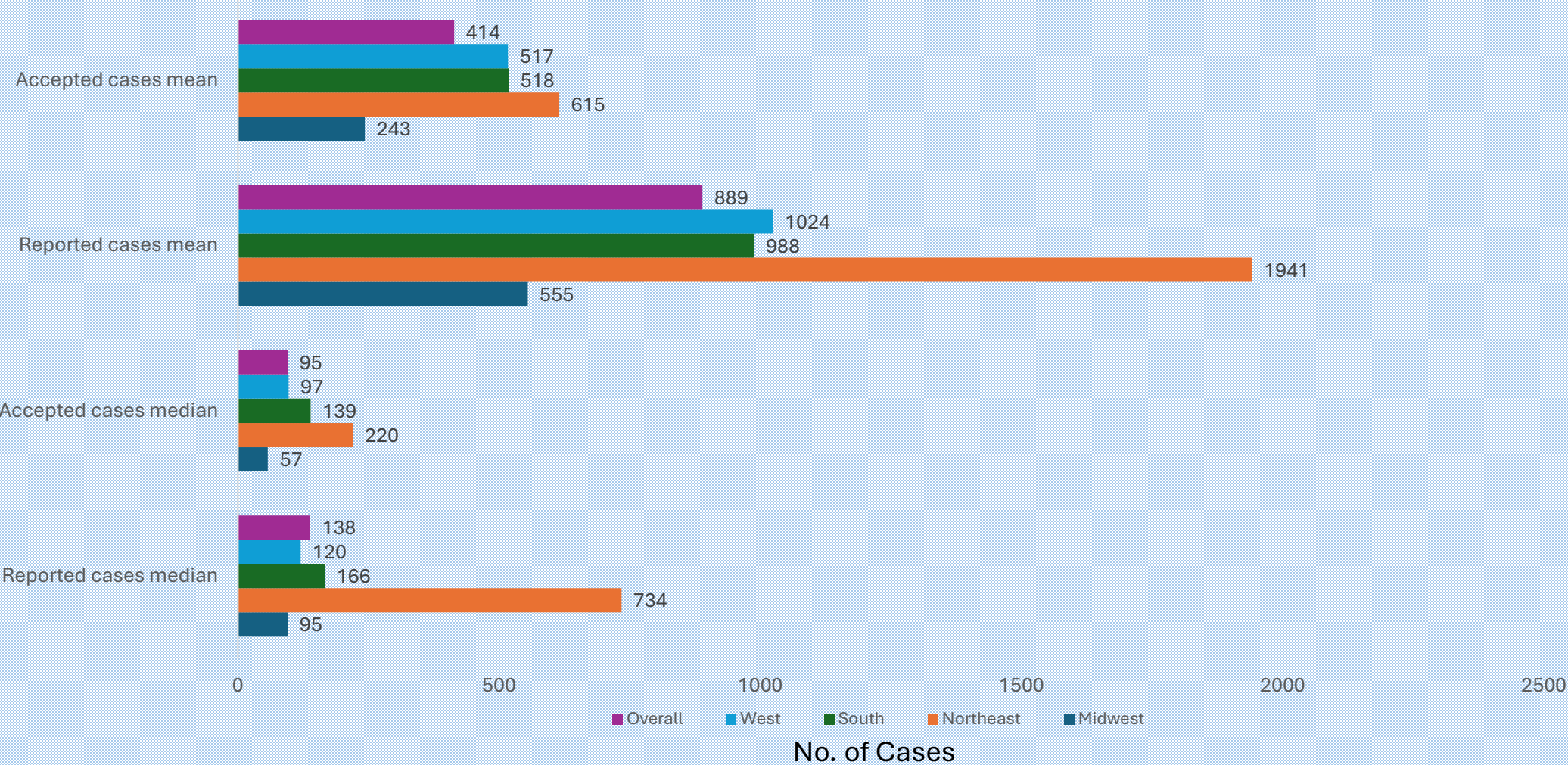


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 - 2022 NFLIS report-
 - 13% of respondents served jurisdictions >250K, but handled over 75% of all referred cases
 - 45% of the 1605 respondents served jurisdictions <25K
 - Approx .8% of the US population dies a year
 - Makes meeting ABMDI requirements impossible
- Limited Access to Resources
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Median and Mean Number of Cases Referred to and Accepted by MECs, by Census Region



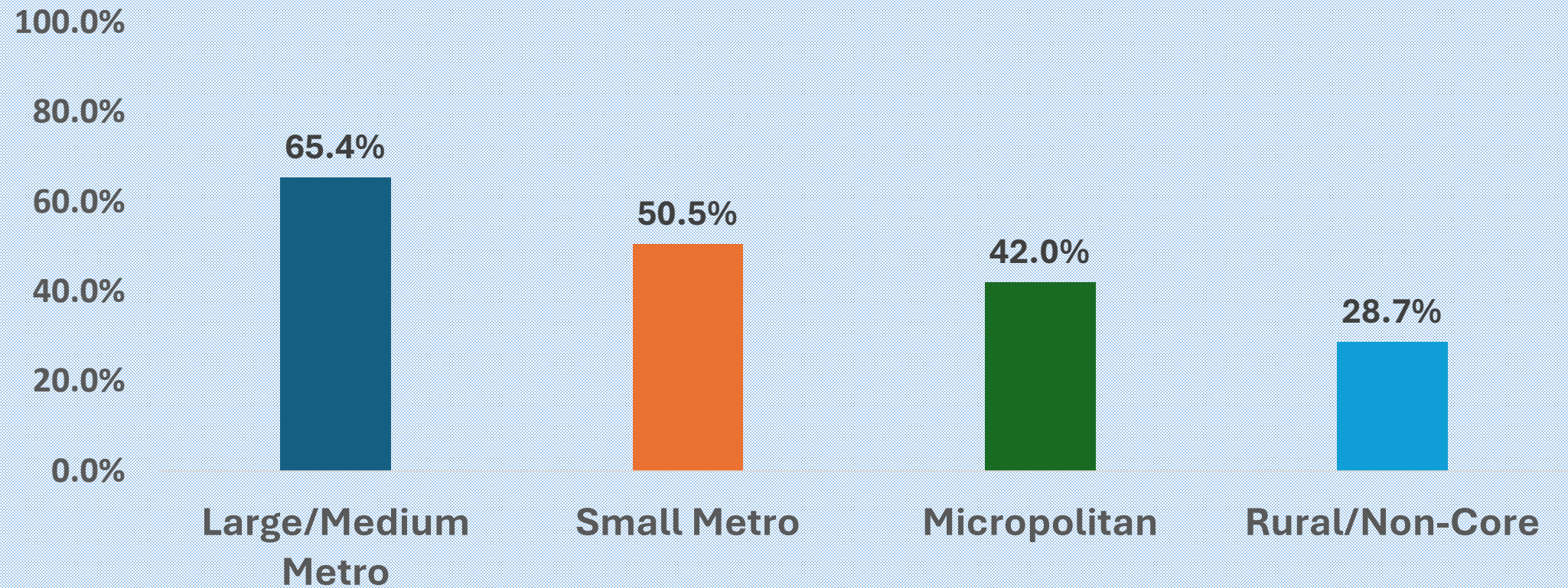
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Level of Computerization by Urban-Rural Category

Does your office have a computerized system used to manage, compile, or track cases or evidence?



Cite: Bureau of Justice Statistics, 2018 Census of Medical Examiner and Coroner Offices

Challenges cont.

Offices with access to selected database types, by population served: 2018 (partial)

Population served (n)	Criminal history database			Fingerprint database			Prescription drug monitoring program		
	Direct access	Access through partner agency	Total with access	Direct access	Access through partner agency	Total with access	Direct access	Access through partner agency	Total with access
Total (2,037)	15.0 % (305)	56.3 % (1146)	71.2 % (1451)	7.6 % (155)	61.7 % (1256)	69.3 % (1411)	28.8 % (587)	31.7 % (647)	60.5 % (1233)

Cite: Liat C. Weinstein, Kelly A. Keyes, Connor Brooks, Micaela A. Ascolese, Hope M. Smiley-McDonald, Jeri D. Roper-Miller, Technology use among the nation’s medical examiner and coroner offices: Data from the 2018 Census of Medical Examiner and Coroner Offices, Forensic Science International: Synergy, Volume 8, 2024, 100477, ISSN 2589-871X, <https://doi.org/10.1016/j.fsisyn.2024.100477>.

More Challenges

- Communicating to MECs
 - Many don't have a work email address or location
 - No access to journals/research
- Disparate systems
 - What is an ME? What is a Coroner?
 - Differing requirements
 - Differing laws
 - Don't necessarily qualify for ABMDI

Disparate systems

Type	States				
Statewide ME systems with <u>no</u> fully independently functioning county entities**	Alaska Connecticut Delaware Maine	Maryland Massachusetts New Hampshire New Mexico	North Carolina Oklahoma Rhode Island Utah	Vermont Virginia Washington, DC West Virginia	
Statewide ME system with county/Regional MEs and/or coroners	Alabama Arkansas Georgia	Iowa Kentucky Mississippi	Montana New Jersey Tennessee	North Dakota Oregon	
County systems ONLY***	Arizona (<u>ME</u>) California (ME/C) Colorado (ME/C) Hawaii (ME/C) Idaho(C) Illinois (ME/C)	Indiana (C) Louisiana (C) Michigan (ME) Minnesota (ME) <u>Missouri (C)</u>	Nebraska (C) Nevada (ME/C) New York (ME/C) Ohio (C) <u>Pennsylvania</u> (ME/C)	South Carolina(C) South Dakota (C) Texas (ME/JP) <u>Washington</u> (ME/C) Wisconsin (ME/C) Wyoming (C)	
District MEs and coroners composed of multiple counties	Florida (ME) Kansas (ME/C)				

**
Maine, Maryland, New Mexico, North Carolina, Oklahoma, Utah, Virginia, and West Virginia All also have county level death investigators (deputy MEs or similar names), who may not be separate from law enforcement, and who report to the State ME with varying degrees of autonomy, and varying degrees of training.

Arizona (ME) – many have appointed one of the big offices to serve as their ME; one county (I think Mohave) has an FP “assigned” as the ME but really operate out of a funeral home and the MD has little to do with operations.
California (ME/C)- varies from county to county, many are sheriff coroners
Colorado (ME/C) all but Denver are elected Coroners, Denver is ME

Hawaii (ME/C)- Honolulu (for Oahu) is an ME, the others are chief of police as Coroners
Idaho (C) – all elected Coroners
Illinois (ME/C)- all elected coroners except Cook County (Chicago) is ME
Indiana (C) all elected coroners, but Marion County has a FT Chief Deputy Coroner that runs the office, the Coroner is PT)
Kansas (ME/C) District based coroner and MEs, large offices tend to be ME; some counties are combined to regions
Louisiana (C) – all elected physician coroners
Michigan (ME)- appointed physician Coroners
many counties have unofficially combined to appoint the same MD as ME

Minnesota (ME)- appointed MEs or elected or appointed physician C, some counties have unofficially combined to appoint the same MD as ME and form regional centers
Missouri (ME/C)- larger counties are appointed ME, the rest are elected C
Nebraska (C) Prosecutor Coroners where the DA is also the Coroner
Nevada (ME/C) 2 large offices (Clark & Washoe) who are ME or combo, the rest are generally appointed coroner who may be the sheriff or may contract with one of the big ones
New York (ME/C)- ME or C depending on size; NYC is generally considered it's own system and not rolled up into the state stats.
Ohio (C) – elected physician Coroners and appointed MEs

Pennsylvania(ME/C) larger counties are ME, all other C
South Carolina(C) – all elected Coroner, although law allows for ME
South Dakota (C)- all elected or appointed coroners
Texas (ME/JP)- large jurisdictions are ME, all other JP who acts as a Coroner
Washington(ME/C) large jurisdictions are ME, smallest have the prosecuting attorney appointed as coroner, others are elected Coroner
Wisconsin (ME/C) –a mix of appointed MEs and elected Cs
Wyoming (C) all elected Coroner

ALL- may be regionalized

OSAC/ASB

- In custody deaths built into OSAC proposed document, currently at ASB, for scene response.
- ASB 125 – minimum resources
- Current project on in custody death investigation, but early on

Thank You

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