

Description of the Issue

NAME accreditation is an endorsement indicating that the office or system provides an adequate environment for a medical examiner in which to practice his or her profession and provides reasonable assurances that the office or system well serves its jurisdiction. It is the objective of NAME that the application of these standards will aid materially in developing and maintaining a high caliber of medicolegal investigation of death for the communities and jurisdictions in which they operate.”¹ The decision to pursue accreditation for a medicolegal death investigation system by the National Association of Medical Examiners (NAME) stems from a desire by the leadership to demonstrate confidence that the Medical Examiner's Office is committed to providing a system worthy of the public’s trust. Does the system meet or exceed minimum quality standards established by reputable organizations? Do those leading and engaged in the office strive to identify strengths and more importantly, potential weaknesses that may require additional attention? Does the organization provide a working environment in which the forensic pathologists and other professionals working in the system have the necessary personnel, a safe working environment, the necessary equipment, and adequate staffing to complete the particularly important work of medicolegal death investigations? It is these questions that shape the foundation for pursuing NAME accreditation, and specifically, shaped the necessary support to acquire this accreditation at the Medical Examiner’s Office within the Department of Pathology at the Western Michigan University Homer Stryker M.D. School of Medicine (WMed).

Medical Examiner and Coroner (ME/C) offices across the country have faced staffing challenges related to the nationwide shortage of forensic pathologists for many years. This strain

¹ NAME Core Accreditation Program. <https://www.thename.org/inspection-accreditation>. Successfully linked on May 20, 2022.

has become even more acute in recent years due to the COVID-19 pandemic with significantly higher numbers of deaths reported to ME/C offices, which subsequently results in higher numbers of deaths requiring investigation, higher numbers of deaths requiring postmortem examinations and thus, higher numbers of deaths requiring certification by a Medical Examiner or Coroner. While the pandemic has exacerbated this forensic pathologist shortage, this drastic increase in deaths has placed a significant burden on autopsy and administrative staff, as well. The Medical Examiner's Office located within the Department of Pathology at WMed provides Medical Examiner (ME) services to 13 counties in Michigan and serves as a consultant to many surrounding counties that do not have a board-certified forensic pathologist on staff to perform postmortem forensic examinations required by law. In 2021, our office performed over 300 postmortem examinations as a consultant to another county's Medical Examiner or Coroner. For the 13 counties we serve as the ME, we investigated 4,330 deaths and performed nearly 1,200 postmortem examinations. From 2019 to 2020, our office experienced a 28% increase in reported deaths due to the COVID-19 pandemic; this included considerable increases in natural deaths, accidents, and homicides. To date, the number of homicides and drug-related deaths continues to increase. As the workload has increased, the resources to support our continued services have not. Meeting accreditation standards requires persistent management and coordination of data, policies and procedures, and reporting standards. To maintain the level of quality in our work product and engagement within the community, additional resources are needed.

Pursuing and maintaining NAME Accreditation is an important piece of the success story of our office. Because of our NAME accreditation status, we are able to hire highly qualified forensic pathologists, forensic toxicologists, and forensic anthropologists. This status confirms that our office meets NAME standards in care for deceased patients, their loved ones,

and the communities we serve. Our status as a NAME accredited organization labels us as a facility that makes certain that prospective employees have what they need to perform high quality examinations and that the legal system would be well supported by our proficient personnel.

NAME accreditation status is also a vital tool in attracting forensic pathology fellows to the Forensic Pathology Fellowship Program at WMed. This program is only one of two forensic pathology fellowship programs in the state of Michigan and even though it is in its infancy, has already graduated and introduced two new forensic pathologists into the field during a critical shortage. One of our graduates is now a board-certified forensic pathologist and a newly added faculty member of our team.

Funding for Medical Examiner and Coroner offices, including ours, is typically provided via contract by each county served by the Medical Examiner or Coroner office. With the remarkable increase in deaths over the last two years, expectations have remained the same while resources have dwindled. Unfortunately, due to the unprecedented pandemic, county budget constraints have left many offices under-staffed and under-resourced during an ever-evolving situation. There have been multiple supply and demand concerns, increased laboratory costs with the addition of SARS-CoV-2 testing needs, and an overall increase in material needs related to this surge of deaths. Funding specifically marked for accreditation support is not currently available.

Project Design and Implementation

We are proposing to hire a part-time Project Coordinator (PC) that will be responsible for assisting our team of forensic pathologists, autopsy staff, laboratory directors and technicians, scene investigators and administrative staff with continued compliance of accreditation standards

set forth by the NAME. Using the NAME Accreditation Checklist, the PC will perform quarterly inspections, guided by the PI/Quality and Research Manager, to confirm compliance with accreditation standards, safety protocols and to potentially identify gaps in policies and procedures within the department. Findings of these quarterly inspections will be reviewed and evaluated by the PIs before being reported in quarterly meetings to each responsible faculty and/or staff leader. The NAME Accreditation Checklist includes a thorough review of organizational and departmental practices including facility space, security, safety and maintenance; quality assurance; mass disaster/fatality surge planning; compilation and dissemination of annual statistics; investigative practices, including scene investigations and scientific identification; autopsy practices; postmortem radiology practices; evidence and specimen collection; maintaining chain of custody; histology laboratory space, safety and practices; toxicology space, safety, practices and certification; reporting practices and release of information; death certification; record keeping; personnel training, certification and licensure; and support services provided by consulting experts and external laboratories. As standards are amended by the NAME Inspection and Accreditation Committee, which typically happens one or more times each year, the PC will be responsible for notifying the respective faculty member or staff leader responsible for that area.

The PC will assist in the continuous review and updating of current written departmental policies and procedures, including those specifically required by the NAME. NAME accreditation standards include the review and/or revision of all required written policies and procedures (approximately 35 in total) at least every two years. The PC will also assist in the development and execution of a more robust quality assurance program within our department to include regular randomized reviews of medicolegal death investigations and their accompanying

postmortem examination and reports, if applicable. The current process will be reevaluated by the PIs and the PC to determine program adjustments, as well. The PC will maintain records of the peer reviewed reports in a secure manner.

As stated above, the compilation of annual statistics related to ME/C services is required by NAME accreditation standards. The PC will assist the PI/Quality and Research Manager with data “scrubbing” of the web-based case management system to ascertain complete input of data from the start of a medicolegal death investigation all the way to the death certification. With 13 counties served by the ME Office at WMed and a total of nearly 5,200 deaths reported in 2021, the database requires regular quality assessments and corrections. The PC will be responsible for managing pending postmortem examination reports, pending death certificates and tracking forensic pathologist turn-around-times of finalized postmortem examination reports from the date of the examination. This management of data is required by NAME accreditation standards.

The PC will be responsible for the input of all NAME accreditation-related data and documentation into the web-based Inspection and Accreditation program, as required. Submission of this information is an annual requirement of NAME and includes virtual evaluation of all documents, data, reports, certifications, licensures, and photographs pertaining to maintaining accreditation standards. Over the two-year grant period, the PC will compile this information accordingly and submit it for each year’s annual review by the NAME Inspection and Accreditation Committee. The PC will assist in the preparation, scheduling, and coordination of our next site inspection, as well, which will be scheduled for early 2024.

With the counties we serve as consultant for forensic services included, our office serves a total population of 1.69 million people with 40% of these counties classified by the most recent census as mostly or entirely rural with historically elevated levels of poverty. Counties such as

Berrien, Calhoun, Kalamazoo, and Muskegon have historically higher levels of poverty than other counties we serve and also have higher rates of both accidental and homicidal deaths. Additionally, these counties typically have the highest number of accidental drug-related deaths each year. Our office's highly qualified team of forensic experts and accreditation status allows us to contribute to greater access to services for communities that have been generally underserved, marginalized and affected by inequality. Our faculty, fellow and staff are integrated in the communities via multidisciplinary child and elder death review teams and engage with families and county health departments frequently. Additional support, such as the addition of this particular individual, will allow us to have an increased presence and impact in the communities we serve.

Capabilities and Competencies

This proposed PC will be required to have a bachelor's degree in an applicable field and a master's degree in public health or public administration would be preferred. Ideally, this individual would have previous experience with policy writing and management. This individual would need exceptional communication skills both verbally and in writing and the individual would be required to be proficient in Microsoft Office. Much of the day-to-day functions would be taught on-the-job by the Quality and Research Manager.

The PI and Quality and Research Manager, [REDACTED], has been responsible for maintaining the office's compliance with NAME accreditation standards since early 2017. This includes an annual accreditation documentation review, which encompasses a full virtual evaluation of documents, data, reports, certifications, licensures and photographs pertaining to maintaining accreditation. [REDACTED] also manages all departmental policies and procedures, including bi-annual reviews, amendments and dissemination of these to applicable parties within

the department. Before 2017, PI and Chair, ██████████ led the office's compliance efforts.

The two PIs will be responsible for overseeing this project and the PC's progress throughout the grant period. ██████████ will also be responsible for all reporting requirements of this grant.

██████████ and ██████████ have tremendous experience administering and managing grants similar in size and scope. ██████████ currently manages a team of research assistants and grant-funded coordinators of multiple research projects focused on local, state and national public health initiatives, such as the COVID-19 pandemic.

██████████ and ██████████ have extensive experience with other accrediting bodies, such as the Accreditation Council for Graduate Medical Education (ACGME) and the College of American Pathologists (CAP). The Forensic Pathology Fellowship within the Department of Pathology at WMed is an ACGME-accredited program. ██████████ is the Program Director and ██████████ was the Program Coordinator from 2019 to 2022. ██████████ and ██████████ ascertain that the program is compliant with ACGME requirements, which includes annual reviews of program materials and site inspections every ten years. Due to the program being newly established (2019), the Forensic Pathology Fellowship Program underwent a site inspection in the fall of 2021 and was granted continued accreditation. ██████████ also has significant experience with CAP accreditation as the Toxicology Laboratory located within the Department of Pathology at WMed is currently accredited through this accrediting body.

Furthermore, WMed has vast experience administering grants of comparable size and scope to this grant. WMed provides organizational support for overseeing the expenditures of the grant, including meeting all legal pay and reporting requirements. Employing a part-time PC over the two-year grant period for this important task is an affordable method to maintain the reputation and trust that our office has built with the communities that we serve.

Plan for Collecting Data Required for this Solicitation's Performance Measures

The Quality and Research Manager will be responsible for the collection and dissemination of data related to this proposed project. The MEO is located within the Department of Pathology at WMed and uses a web-based case management system that will be used to collect data specifically related to the ME/C-required services provided to the counties we serve. This is the same database currently used to track many of the data-driven elements associated with NAME accreditation.

The most important measurement will be our office's continued NAME accreditation status. We were first accredited in 2016, with annual continued accreditation until our scheduled site inspection, occurring every four years, set for early 2020. Due to the COVID-19 pandemic, our accreditation status was extended until our site inspection which was eventually performed in October 2021. At this time, we passed inspection with minimal (two) Phase I violations and no Phase II violations. We are currently accredited until 2024 when our next site inspection will occur. As stated, each year, our organization will be required to submit data and documentation to evidence that we are still functioning per NAME accreditation standards.

Our goal will be to pass our annual reviews and four-year inspections with minimal to no Phase I or II violations. Achievement of this goal will be measured by the NAME Inspection and Accreditation Committee and will be provided for this award's reporting requirements.