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Attachment 1: CMEC survey and screenshots of web instrument

Survey Instructions:

• Submit this form using one of the following three methods:

o Online: https://www.bjscmec.rti.org

Agency ID:

Password:

2023 CENSUS OF MEDICAL EXAMINER AND CORONER OFFICES



U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics

Acting as collection agent: RTI International

Please use this form to provide information on behalf of the following agency:

[FILL AGENCY NAME HERE]

If the agency name printed above or jurisdiction(s) included are incorrect, please call us at 1-866-509-7470.

		J								
○ E-n	○ E-mail: CMEC@rti.org									
o Ma	 Mail: Use the enclosed postage-paid envelope 									
Please	do not leave ar	ny items blank. If you do not	understand a question,	please email or call for clarification	ո.					
If the ar	nswer to a que	stion is none or zero, write	"0" in the space provided	d. When exact numeric answers are	e not available,					
please	provide estima	tes and mark the estimate of	check box where approp	riate.						
Use blu	e or black ink a	and print as neatly as possib	le.							
Use an	X when markir	ng an answer in a box.								
Please indi	icate the prin	nary person who comple	ted this form:							
Name:										
	Last Name		First Name		MI					
Title:										
Phone:		<u> </u>								
	Area Code N	umber	Extension							
E-mail:										
Agency										
Website:										

Burden Statement

If you have any questions, call RTI toll-free at 1-866-509-7470, or send an e-mail to <u>CMEC@rti.org</u>. If you have general project-related questions, please contact Matt Durose of BJS at (202) 598-0295 or Matt.Durose@usdoj.gov.

Federal agencies may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 90 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspects of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. The Omnibus Crime Control and Safe Streets Act of 1968, as amended (34 USC 10132), authorizes this information collection. Although this survey is voluntary, we urgently need your cooperation to make the results comprehensive, accurate, and timely. We greatly appreciate your assistance.

This survey is intended to collect information about your office's death investigation functions. If your office is embedded within another department or type of office (e.g., law enforcement agency, mortuary), please only report details about the resources and practices related to death investigation functions.

ADMINISTRATION

A1 .	What is the title of the head position in your office (e.g., Chief Medical Examiner, Coroner) and who holds that title?
	Title:
	Name: Last Name First Name
A2.	Is your head of office required to be a Forensic Pathologist or other type of physician? Yes – the head of office is required to be a Forensic Pathologist
	Yes – the head of office is required to be a Porensic Pathologist No
A3.	Which of the following best describes your death investigation office? Coroner office Medical examiner office Law enforcement coroner office (e.g., Sheriff-coroner) District attorney or prosecutor office Justice of the peace My office does not investigate deaths → SKIP to the end of the survey and return in the enclosed envelope Other medicolegal death investigation office (please specify)
A4.	What level of government best describes your office? City office County office District/regional office State office
A5.	Does your office have authority over multiple jurisdictions? For example, your office is the medical examiner or coroner for multiple counties or districts. Yes No
A6.	What geographic jurisdictions does your office have authority over (e.g., Wake County or State of Ohio, or Judicial District 8)? If you have authority over multiple jurisdictions, enter a comma (,) between each jurisdiction.

	we will collect additional information about the <u>head position</u> in your office that you rted in A1.
A7.	Is your head of office's position full-time or part-time? Full-time (30 hours or more per week) Part-time (Less than 30 hours per week)
A 8.	Is the head of your office elected? Yes No
A9.	Does your head of office perform any of the following death investigation functions in addition to their primary administrative duties? Select all that apply. Autopsies
	Scene investigations
	 Other investigative casework (e.g., perform body examinations or inspections, conduct and document interviews)
	The head of office is an administrative position only and <u>does not</u> perform direct death investigation or autopsy duties
A10.	What was the annual salary (or annual salary equivalent if paid hourly or by stipend) for your head of office as of December 31, 2023?
	Annual Salary or Equivalent
	\$, , , , , , , , , , , , , , , , , , ,

The next section collects information about the following types of staff who could support death investigation functions at your office.

- Forensic Pathologists or Autopsy Pathologist
- Death Investigators
- Other scientific support staff (e.g., Forensic Toxicologists, Forensic Analysts)
- Ancillary staff (e.g., drivers, photographers, evidence technicians)
- Administrative staff (e.g., administrative managers/directors, administrative assistants, record clerks, secretaries)

Each employee should be reported only <u>once</u> in this section. If an employee fills more than one role, please include them in their primary role.

For questions in this section, please consider the following definitions:

- **Full time employees:** Staff directly employed by your office who have regularly scheduled hours and work on average 30 hours or more per week on death investigation functions.
- Part-time employees: Staff directly employed by your office who have regularly scheduled hours and work on average fewer than 30 hours per week on death investigation functions.
- **Contractors/Fee-for-service:** Those who are hired to do work for your office as a contractor and are not directly employed by your office (e.g., receives a 1099).
- **On-Call employees:** Staff directly employed by your office who <u>do not</u> have regularly scheduled hours and only work on an as needed basis.
- Vacancies: Positions for which your office has funds to staff but remain unfilled or open.

Many medical examiner and coroner offices do not <u>directly employ</u> Forensic or Autopsy Pathologists, and rely on contracted entities, the state Medical Examiner, or other medical examiner/coroner office for their autopsy services.							
A11. How are autopsy services handled by your office? Select all that apply. Autopsies sent to the State Medical Examiner or another public Medical Examiner/Coroner office Private company, independent contractor (e.g. locum tenens), university, hospital, or other contract entity perform autopsies Forensic or Autopsy Pathologists directly employed by our office perform autopsies SKIP to A17 on page 5 if your office only contracts autopsy services or sends to another MEC office.							
Next, we will collect information about <u>Forensic Pathologists</u> or <u>Autopsy Pathologists</u> that were <u>directly employed</u> by your office during the pay period that included December 31, 2023. A12. How many Forensic/Autopsy Pathologists did your office <u>directly employ</u> in the following categories during the pay period that included December 31, 2023? <u>Include</u> full-time, part-time, and on-call employees. <u>Do not</u> include contractors. <u>Include</u> Chief Medical Examiners that are Autopsy/Forensic Pathologists. Enter 0 if your office does not have staff in given category. □ My office did not directly employ Forensic/Autopsy Pathologists → SKIP to A17 on page 5							
Full-time employees: Part-time employees: On-call employees:							
A13. How many full-time and part-time Forensic/Autopsy Pathologists directly employed by your office in the pay period that included December 31,2023 were certified in forensic pathology by the American Board of Pathology (ABP)? Do not include contractors. If none, enter 0. Number of full-time autopsy pathologists certified by ABP in forensic pathology: Number of part-time autopsy pathologists certified by ABP in forensic pathology: A14. How were Forensic/Autopsy Pathologists directly employed by your office paid in 2023? Do not include contractors. Do not include Chief Medical Examiners/head of office salaries reported in A10. Select all that apply. Hourly Salary Salary Fee-for-service (paid by case, call, day, or other fee structure) → SKIP to A16 on page 5 if staff are paid only on a fee-for-service basiso							

	A15. What is the annual starting salary range (or starting salary range equivalent if paid hourly or by stipend) for <u>full-time</u> and <u>part-time</u> Autopsy Pathologists directly employed by your												
		offi	ce as of Dorted in A1	ecember 31,	2023?	Do no	<u>t</u> inclu	ide Chief	Medica	al Exar	niner sa	alaries previo	usly
						Annı		arting Sa nimum	alary	Annu	al Star Maxir	ting Salary num	N/A
			salary (or if paid hou	nnual <u>full-tim</u> salary equiva ırly or by stip	alent end)	\$,		\$			
		b.	time (or sa	nnual salary alary equivale y or by stiper	ent if	\$				\$			
		sep incl	arate from uded Dece es	e employ an assisting in ember 31, 20	n an A	ified Pa utopsy	athol Tech	ogists' A nnician re	ssistar ole, dur	nts to ring th	perforn le pay l	n autopsies, period that	
The duri	follow	ing pav	questions	collect info	rmatic Decen	n abou	ut <u>De</u>	ath Inves	stigator	<u>'s</u> that	worke	d for your o	ffice
	How durin emplo positi in giv	mar oyee ons en o	ny Death In ne pay peries and cont (e.g., Coro category. fice did not	nvestigators iod that inclipant Death In iners) that are employ deat	did young did not be also for all all also for all all also for all all also for all all also for all also for all all also for all all also for all all all all also for all all all also for all all all all all all all all all al	our offi Decemb ators th Death I	ice er oer 3 nat wo nvest	mploy or 1, 2023? ork directl	<u>Include</u> y for yo	full-tin ur offic	ne, pari ce. <u>Inclu</u>	wing catego t-time, on-cal ude head of c loes not have	l office
			employees										
			employee										
	 		ors/Fee-for										
	On-c	all e	mployees:										
		the	pay period	I-time and p d that includ Death Invest	led De	cembe	r 31,	estigato 2023 wer	rs that re certif	worke fied by	d for y the A	our office do merican Boa	uring ard of
		Nui	mber of <u>full</u>	<u>-time</u> Death	Investi	gators o	certifie	ed by ABI	MDI:				
		Nui	mber of <u>pa</u>	<u>rt-time</u> Death	Invest	igators	certif	ied by AE	BMDI:				
			mber of <u>cor</u> tified by AE	ntract/fee-for BMDI:	-servic	<u>e</u> Death	n Inve	stigators					
		sala	Hourly Salary Stipend Fee-for-sel	ath Investigated in A10. Set Continue to rvice (paid by aid only on a	elect al A20 o case,	il that ap n page call, da	o <i>ply.</i> • 6 ay, or	other fee				e head of offi	ice
			9- • P	Jy J.11 U	00 .0	. 55, 110							

	A20.	0. What is the annual starting salary range (or starting salary range equivalent if paid hourly or by stipend) for <u>full-time</u> and <u>part-time</u> Death Investigators employed by your office as of <u>December 31, 2023?</u> <u>Do not include head of office salaries reported in A10.</u>							
			Annual Starting Salary Minimum	Annual Starting Salary Maximum	N/A				
		 a. Starting annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend) 	Ψ	\$, , , , , , , , , , , , , , , , , , ,					
		b. Starting annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)		\$, , , , , , , , , , , , , , , , , , ,					
A21	Did y		eer Death Investigators in 20	023?					
Antl pho	nropo tograp	ct questions ask about <u>scientif</u> logists, Autopsy Technicians, ohers, evidence technicians, fa e pay period that included Dec	or non-autopsy physicians) mily support workers) that v	and ancillary staff (e.g., dr	rivers, fice				
A22	func inclu does	many scientific support or antions did your office directly ended December 31, 2023? Do not have staff in a given category	mploy in the following categot include contractors or contractors or contractors.	ories during the pay perio	d that ffice				
		My office did not employ scientificancillary staff → SKIP to A23	c support or						
	Full	-time employees:							
	Par	t-time employees:							
	On-	call employees:							
adm	inistr	ct questions ask about <u>adminis</u> ative assistants, records clerks e pay period that included Dec	s, secretaries, and IT staff) t	ative managers/directors, hat were employed by you	r office				
A23	durii entiti	many Administrative Staff did ng the pay period that included es. Enter 0 if your office does no	l December 31, 2023? <u>Do no</u> t have staff in a given categor	t include contractors or conti	s ract				
		My office did not employ adminis staff → SKIP to A24	trative						
	Ful	l-time employees:							
	Par	t-time employees:							
	On	-call employees:							
A24	. How durii	many <u>vacant or unfilled</u> positing the pay period that included	ons did your office have for I December 31, 2023? If none	each of the following role e, enter 0.	s				
	Fore	nsic or Autopsy Pathologists:							
	Dea	th Investigators:							

EXPENDITURES AND FUNDS

B1.	On what month and day does your office's M M / D D	fiscal year begin	(e.g., 01/01,	07/01, 10/	01)?				
B2.	B2. How much did your office spend on death investigation functions in the most recently completed fiscal year?								
	If your office is part of a larger organization expenses related to death investigation funinclude your total expenses.								
	 Include expenses paid by your office, such training, transportation, toxicology/ancillary related to MEC functions. 								
	\$	k if estimate:							
В3.	Which of the following functions of your of reported in B2? Select one for each row.	fice are included i	in the total e	expenditui	res				
	Expense		All	Some	None				
	a. Autopsies								
	b. Personnel								
	c. Supplies and equipment								
	d. Training								
	e. Transportation		0	0	0				
	f. Toxicology		0		0				
	g. Indigent Burial		0	0	0				
	h. Body storage		0	0	0				
B4.	 Which of the following provides budgetary oversight of your office? Public health agency (e.g., department or division of public health) Law enforcement agency (e.g., department or division of public safety) Government attorney's office (e.g., district attorney, attorney general) Department or division of forensic science Court system Other government funding body (e.g., county or state commission) Other (please specify) 								
B5.	In your most recently completed fiscal year resources, or spend personal, out-of-pocke on any of the following? Select one for each	t money for whic							
	Expense	Yes	No	Do	n't Know				
	a. Personal protective equipment (PPE)	0	0		0				
	b. Continuing education or certifications	0	0		0				
	c. Other official work supplies								

WORKLOAD

Th	is section	has o	uestions	about	three	levels	of invo	lvement	in (death	investigation	ns.
	II3 36611011	iias y	เนษอเเบเเอ	about	unce	161613	OI 11170	,ı v eiileiit	111 \	a c aui	IIIVESHUAHO	ııə.

Depending on how your office categorizes cases/investigations, numbers reported in a given category may be the same as the number reported in a prior category.

- a) Total number of deaths your office was notified of in 2023: The total number of deaths your office was notified of, including all cases reported to your office even if jurisdiction was declined.
- b) Number of deaths for which your office performed death investigation functions: The number of deaths for which your office performed death investigation functions beyond documenting the initial notification of the death outlined above. For example, the number of cases for which your office performed death investigation functions like responding to a scene, identifying a decedent, conducting supplemental interviews, notifying family, or ordering autopsies.
- c) Number of deaths where your office determined cause and manner: The number of deaths where your office determined cause and manner. <u>Do not</u> include cases where another agency (e.g., State Medical Examiner) assumed jurisdiction to complete the death certificate.

 In 2023, was your office notified of any deaths? Include all cases that were reported to your office, even if jurisdiction was declined. Include cremation cases. Yes No → SKIP to C4 on page 9 												
►C2 .	►C2. In 2023, what was the total number of deaths reported to your office for the following levels of involvement in death investigations?											
		Number of deaths	NA – My office did not have deaths in this category	My office had deaths in this category, but did not track								
	a. Total number of deaths your office was notified of in 2023	Check if estimate:										
	b. Number of deaths for which your office performed death investigation functions	Check if estimate:										
	c. Number of deaths where your office determined cause and manner	Check if estimate:										
C3.	In 2023, was your office notified 'tribal lands' includes areas labeled											

No - Our office receives deaths from tribal lands, but none were reported in 2023

No - Our office does not have tribal lands in our geographic jurisdiction

trust lands, Alaska Native villages, and tribal communities.

() Yes

These next questions ask about autopsies your office ordered or performed in 2023.										
C4.	24. Did your office conduct medicolegal autopsies <u>at your facility or facilities</u> (e.g., "in-house") in 2023? Include referrals from other medicolegal death investigation authorities but exclude any private or clinical autopsies. Include both partial and complete autopsies.									
	Yes									
		lo → SKIP to C6								
	•C5.	facilities (e.g. "in-hous	se")?	·	ies did your office conduct at your facility or autopsies conducted at your facility or facilities					
		Crieck ii estimate.								
C6.	C6. Did your office order any medicolegal autopsies to be conducted at a location other than your facilities in 2023? Include autopsies sent to State Medical Examiners, other Medical Examiner/Coroner offices, and private facilities or hospitals. Yes No → SKIP to C10									
	·C7.	In 2023 where were th	e autons	sies orde	ered by your office performed? Select all that apply.					
	٠,٠	•	-		our office does not use private facilities or hospitals					
		Other public MEC of	fice	\frac{n}{to p}	erform autopsies → SKIP to C10					
		── Private facility or hos	pital	, ,						
	\downarrow									
	C8.	How many of these au in 2023?	topsies	were per	formed for your office by private facilities/hospitals					
		Numbe	er of auto	psies per	formed at private facilitates/hospitals					
		Check if estimate:								
	C9.	How far from your offi frequently?	ce is the	autopsy	facility or contractor your office uses most					
		Less than 50 miles								
		○ 50-100 miles								
		○ Greater than 100 mil	es							
C10.	follo		hen dete	ermining	ur office <u>routinely</u> perform or order autopsies for the cause and manner of death and signing the death ons.					
	Тур	e of death	Yes	No						
	a.	Drug related	0	0						
	b.	Elderly	0	0						
	C.	Homicides	0	0						
	d.	Motor vehicle deaths	0	0						
	e.	Suicide by firearm	0	0						
		Suicide by hanging								

These next questions ask about your office's medicologal death investigations (MDI)										
These next questions ask about your office's medicolegal death investigations (MDI). C11. In 2023, did your office (e.g. medicolegal death investigators) perform scene investigations? Yes No → SKIP to C13										
►C12. In 2023, how many scene investigations did your office (e.g. medicolegal death investigators) conduct? Number of scene investigations Check if estimate:										
				ce, who is <u>primar</u>	rily responsible					
	_	Forensic or Autopsy Pathologists	Death Investigators	Other Medical Examiner/ Coroner Staff	Not applicable - this function is not performed by my office					
a.	Determination of which deaths are accepted for further investigation	0	0	0	0					
b.	Death scene investigations with inspection/ examination of body	0	0	0	0					
C.	Determination of which deaths are autopsied	0	0	0	0					
d.	Determination of which deaths receive forensic toxicology testing	\circ	0	0	0					
C14. At the death scene, external examination/inspection, or at autopsy, did your office routinely perform drug screening tests (e.g., urine screen or Randox®) in 2023? Yes No → SKIP to C16										
►C15. After performing drug screening tests, did your office routinely confirm positive results with toxicology testing in a laboratory in 2023? Yes No										
C16. For your office, who of the following is primarily responsible for notifying next of kin about the individual's death? Law enforcement personnel Medical examiner/coroner personnel Someone else (please specify):										
	For for d. At per C1!	In 2023, did your office (e.g. Yes No → SKIP to C13 C12. In 2023, how many so investigators) conduct Number of Check if estimate: For those functions that ar for performing the followin Duty a. Determination of which deaths are accepted for further investigation b. Death scene investigations with inspection/ examination of body c. Determination of which deaths are autopsied d. Determination of which deaths receive forensic toxicology testing At the death scene, externate perform drug screening testing At the death scene, externate perform drug screening testing At the death scene, externate perform drug screening testing No → SKIP to C16 C15. After performing drug with toxicology testing No For your office, who of the individual's death? Law enforcement persons Medical examiner/corone	In 2023, did your office (e.g. medicolegal de Yes No → SKIP to C13 C12. In 2023, how many scene investigation investigators) conduct? Number of scene investigation investigators or scene investigation of the for performing the following duties? Select or select for further investigation b. Death scene investigations with inspection/ examination of which deaths are autopsied d. Determination of which deaths are autopsied d. Determination of which deaths are autopsied d. Determination of which deaths receive forensic toxicology testing At the death scene, external examination/insperform drug screening tests (e.g., urine scene) Yes No → SKIP to C16 C15. After performing drug screening tests, with toxicology testing in a laboratory Yes No No For your office, who of the following is primindividual's death? Law enforcement personnel Medical examiner/coroner personnel	In 2023, did your office (e.g. medicolegal death investigators) — Yes No → SKIP to C13 C12. In 2023, how many scene investigations did your office (investigators) conduct? Number of scene investigations Check if estimate: For those functions that are conducted internally by your offifor performing the following duties? Select one for each row. Forensic or Autopsy Pathologists a. Determination of which deaths are accepted for further investigation b. Death scene investigation b. Death scene investigation of which deaths are autopsied d. Determination of which deaths are autopsied d. Determination of which deaths receive forensic toxicology testing At the death scene, external examination/inspection, or at autoperform drug screening tests (e.g., urine screen or Randox®) — Yes No → SKIP to C16 C15. After performing drug screening tests, did your office rowith toxicology testing in a laboratory in 2023? Yes No For your office, who of the following is primarily responsible individual's death? Law enforcement personnel Medical examiner/coroner personnel	Yes No → SKIP to C13 C12. In 2023, how many scene investigations did your office (e.g. medicolegal investigators) conduct? Number of scene investigations Check if estimate:					

C17.	In 2023, did your office respond to a multiple fatality event with four or more decedents? —○ Yes ○ No → SKIP to D1
	C18. Did your office need or use assistance from other Medical Examiner/Coroner offices/jurisdictions during any multiple fatality event in 2023? Yes No
	SPECIALIZED INVESTIGATIONS
or m	the following questions, unidentified remains refers to remains that are unidentified for 60 days ore. Include cases unresolved for 60 days or more even if subsequently identified. Include cases from for years. As of December 31, 2023, did your office have any records of remains that were unidentified for 60 days or more? Include cases regardless of disposition of the remains. Include cases
	unresolved for 60 days or more even if subsequently identified after December 31, 2023. ── Yes ── No → SKIP to D3
	PD2. How many cases of human remains did your office have on record that were unidentified for 60 days or more as of December 31, 2023? Include cases regardless of disposition of the remains. Don't know Total number of unidentified humans remains on record Check if estimate:
D3.	How long does your office generally hold unidentified human remains before disposition? Less than 1 month 1-6 months More than 6 months to a year Our office holds unidentified remains indefinitely
D4.	How does your office dispose of unidentified human remains? Select all that apply. Bury Cremate Donate body to a body donation program Donate body to other program(s) (e.g., museum) Our office holds unidentified remains indefinitely Other (please specify)
D5.	What biometrics and samples do you routinely collect before disposition of unidentified human remains? Select all that apply. Dental records (charting) Dental Radiographs/X-rays Fingerprints Full body radiographs (X-ray, CT) Photos of identifying characteristics (e.g., tattoos, scars, etc.) Samples for DNA analysis (e.g., blood card/spot, bone)

D6. For suspected overdose deaths in 2023, did your office do the following for all deaths, some deaths, or not at all? Exclude delayed overdose deaths (e.g., hospital inpatients). Select one for each row.									
	Ac	ction	All deat	hs	Mos deat	_	_	ome eaths	None/My office does not do this
	a.	Go to scene of death if outside of hospital	0		<u> </u>			0	
	b.	Order an autopsy	\bigcirc		\circ			\circ	
	C.	Draw toxicology specimens	0		0			0	
	d.	Run toxicology tests	0		0			\bigcirc	0
	e.	Consult with a toxicologist before determining cause and manner of death	0		0			0	0
D7. If you have a sudden unexpected infant death case, which of the following procedure your office conduct, or request, if warranted, to determine cause and manner of death Select one for each row.									
	Dro	ocedure		,	Yes	No		elsewhe medica	ere (e.g. state I examiners' office)
		2 : " "			0	0			
	b.	Doll re-enactment			0		\neg		
	C.	Imaging, including x-ray, CT, or MRI			0	0			0
	d.	Autopsy			0	0			0
	e.	Forensic toxicology			0	0			0
	f.	Microbiology			0	\bigcirc			0
	g.	Histology			0	0			0
	h.	Genetic testing (e.g., sudden cardiac	deaths)			\bigcirc			0
D8.	a d () '	es your office use the Sudden Infanteath certificate? Yes No Death certificate completed elsewhere	-			·			en completing

RECORDS AND EVIDENCE RETENTION

E1.	of I	I your office have a computerize December 31, 2023? Such a system as a system as a system as a system as a system. This does not in the information. Yes → SKIP to E3	em is also known as	a computerized ca	ase or information	
	►E2.	What is the primary reason yo management system? Select of Do not want computerized call Funding Privacy or security concerns Too few cases/records Other (please specify)	one.	·		ation
E3.	pro aut	deaths reported to your office induced? An investigation report is opsy reports. All deaths Some deaths No deaths Did not have any deaths in 2023	distinct from any log	gs, death certificate	s in 2023? A retenti	
	sch	redule is a policy for how long reco	rds are retained. Se	elect one for each r	Not applicable - our office does not produce or use this	
	a.	Case records	0	0		
	b.	Forensic toxicology specimens	0	0	0	
	C.	Biological specimens other than toxicology specimens	0	0	0	
	d.	Non-biological evidence		\bigcirc		

E5 .	E5. Does your office currently archive hard copies of your official investigative records and									
LJ.	repo	orts?	ecorus a	iiiu						
	_	es								
		No → SKIP to E7								
	►E6. Does your office currently archive hard copies of your official investigative records and reports in any of the following places? Select one for each row.									
	Location Yes No a. Government-owned office									
			0	0						
		b. Government-run or government-controlled dedicated storage facility	0	0						
		c. A regulated third-party storage facility (e.g., Iron Mountain)d. Personal storage (including both home and rental storage)	0	0						
		0	0							
		e. Other business or office (e.g., funeral home, hospital, law office)								
	E7. How does your office dispose of unclaimed human remains? Select all that apply. Bury Cremate Donate body to a body donation program Donate body to other program(s) (e.g., museum) Our office holds unclaimed remains indefinitely Other (please specify) For unclaimed remains, does your office work with Veterans Administration or other groups to determine if the decedent is a veteran? Yes No									
		RESOURCES								
F1.	devi	of December 31, 2023, did your office have access to the Internet, separatice, to use for official job functions? /es	te from a	personal						
F2.	F2. As of December 31, 2023, did your office have a work vehicle dedicated to death investigation functions separate from personal vehicles? Yes No									

F3.	 As of December 31, 2023, did your office, or the agency with administrative oversight of your office, own a body storage cooler that you used for death investigation functions? Yes No → SKIP to F5 							
	►F4. Is the official maximum capacity of all your office's body storage cooler(s), including disaster equipment, 20 or more? Yes No							
F5.	Did your office have access to the follo agency, as of December 31, 2023? Sele				er direct	ly or thro	ugh another	
	Resource		, dire		•	rough a agency	No acces	s
	a. Criminal history databases				(
	b. EMS records				($\overline{}$	0	
	c. Fingerprint databases				(0	
	d. Medical records databases				(\bigcirc	
	e. Prescription drug monitoring program	s			($\overline{)}$		
F6.	In 2023, did any of the staff at your office Select one for each row. Training or resource a. Mass fatality investigation/disaster plants. b. Bloodborne pathogens	-	Yes	No O	of the fo	llowing tr	ainings ?	
F7.	counseling, therapy, or peer support. Yes No							
	Select one for each row. Select no if an ite	em is not	offere	d in yol	ur jurisdid	My offic	e did not	
	Specialty area	Yes		N	0		in 2023	
	a. Child fatality	0				(\bigcirc	
	b. Elderly/vulnerable adult fatality	0				(\bigcirc	
	c. Overdose fatality					(
	d. Maternal death					(
	e. Suicide					(
	o. Guidide							

In 2023, did your office directly provide the following support services or provide referrals for these services? Select one for each row.								
Sı	ıpport service	Service directly provided	Referral to another entity or organization	No				
a.	Advocates for families of victims							
b.	Grief and bereavement services for survivors (e.g., counseling or therapy, homicide survivor groups)	0	0	0				
C.	On-scene support or advocacy for bystanders or other family and friends of deceased	0	0	0				
F10. As of December 31, 2023, did your office have a dedicated family support specialist or trained trauma counselor for family and friends of the deceased? Yes No F11. Does your office have access to a computerized axial tomography (CAT or CT) scan, either directly or through a partner agency? Yes, directly Yes, through a partner agency No								

Thank you for your participation in the 2023 Census of Medical Examiner and Coroner Offices (CMEC).

Your feedback is very important to us!

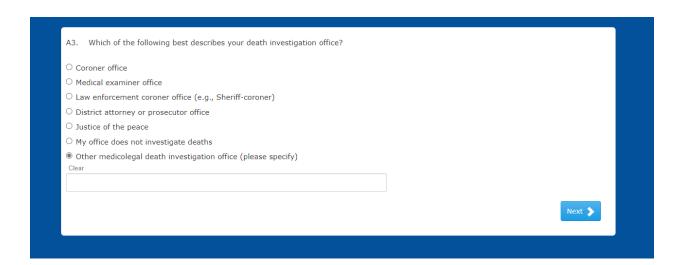
Please return your survey in the enclosed envelope or send to:

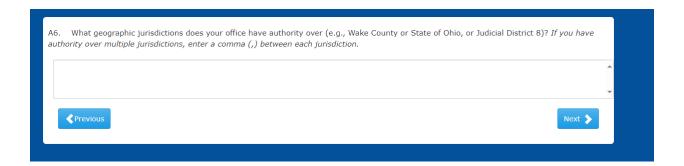
Census of Medical Examiner and Coroner Offices RTI International ATTN: 0218708.000.005 3040 E. Cornwallis Road, PO Box 12194 Research Triangle Park, NC 27709-2194

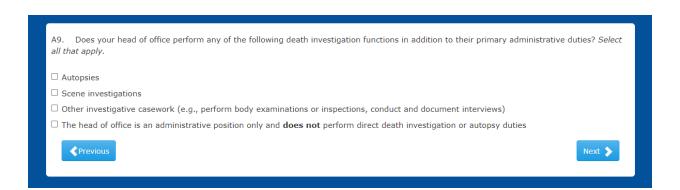
Attachment 1.

2023 CMEC: Example screenshots of web instrument









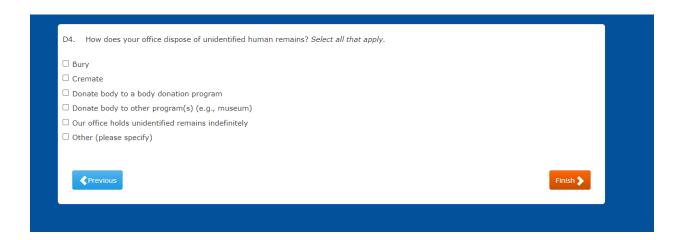
B3. Which of the following functions of your office are included in the total expenditures previously reported? Select one for each row.

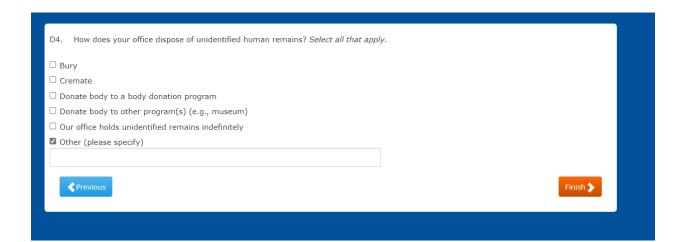
Expense

All	Some	None	
0	0	0	Clear
0	0	0	Clear
0	0	0	Clear
0	0	0	Clear
0	0	0	Clear
0	0	0	Clear
0	0	0	Clear
0	0	0	Clear
	0 0 0 0 0 0		



Next 🗦





Attachment 2: BJS authorizing legislation

34 USC 10131: Statement of purpose

Text contains those laws in effect on January 30, 2018

From Title 34-CRIME CONTROL AND LAW ENFORCEMENT

Subtitle I-Comprehensive Acts

CHAPTER 101-JUSTICE SYSTEM IMPROVEMENT

SUBCHAPTER III-BUREAU OF JUSTICE STATISTICS

Jump To:

Source Credit

Codification

Prior Provisions

Amendments

Effective Date

§10131. Statement of purpose

It is the purpose of this subchapter to provide for and encourage the collection and analysis of statistical information concerning crime, juvenile delinquency, and the operation of the criminal justice system and related aspects of the civil justice system and to support the development of information and statistical systems at the Federal, State, and local levels to improve the efforts of these levels of government to measure and understand the levels of crime, juvenile delinquency, and the operation of the criminal justice system and related aspects of the civil justice system. The Bureau shall utilize to the maximum extent feasible State governmental organizations and facilities responsible for the collection and analysis of criminal justice data and statistics. In carrying out the provisions of this subchapter, the Bureau shall give primary emphasis to the problems of State and local justice systems.

(Pub. L. 90–351, title I, §301, as added Pub. L. 96–157, §2, Dec. 27, 1979, 93 Stat. 1176; amended Pub. L. 98–473, title II, §605(a), Oct. 12, 1984, 98 Stat. 2079.)

CODIFICATION

Section was formerly classified to section 3731 of Title 42, The Public Health and Welfare, prior to editorial reclassification and renumbering as this section.

PRIOR PROVISIONS

A prior section 301 of Pub. L. 90–351, title I, June 19, 1968, 82 Stat. 199; Pub. L. 91–644, title I, §4(1)–(4), Jan. 2, 1971, 84 Stat. 1882; Pub. L. 93–83, §2, Aug. 6, 1973, 87 Stat. 199; Pub. L. 94–503, title I, §§109, 128(b), Oct. 15, 1976, 90 Stat. 2411, 2424, related to purposes and categories of grants for law enforcement and criminal justice purposes, prior to the general amendment of this chapter by Pub. L. 96–157.

AMENDMENTS

1984-Pub. L. 98–473 struck out "(including white-collar crime and public corruption)" after "information concerning crime" and "(including crimes against the elderly, white-collar crime, and public corruption)" after "levels of crime".

EFFECTIVE DATE OF 1984 AMENDMENT

Amendment by Pub. L. 98–473 effective Oct. 12, 1984, see section 609AA(a) of Pub. L. 98–473, set out as an Effective Date note under section 10101 of this title.

34 USC 10132 : Bureau of Justice Statistics

Text contains those laws in effect on January 30, 2018

From Title 34-CRIME CONTROL AND LAW ENFORCEMENT

Subtitle I-Comprehensive Acts

CHAPTER 101-JUSTICE SYSTEM IMPROVEMENT

SUBCHAPTER III-BUREAU OF JUSTICE STATISTICS

Jump To:

Source Credit

References In Text

Codification

Prior Provisions

<u>Amendments</u>

Effective Date

Miscellaneous

§10132. Bureau of Justice Statistics

(a) Establishment

There is established within the Department of Justice, under the general authority of the Attorney General, a Bureau of Justice Statistics (hereinafter referred to in this subchapter as "Bureau").

(b) Appointment of Director; experience; authority; restrictions

The Bureau shall be headed by a Director appointed by the President. The Director shall have had experience in statistical programs. The Director shall have final authority for all grants, cooperative agreements, and contracts awarded by the Bureau. The Director shall be responsible for the integrity of data and statistics and shall protect against improper or illegal use or disclosure. The Director shall report to the Attorney General through the Assistant Attorney General. The Director shall not engage in any other employment than that of serving as Director; nor shall the Director hold any office in, or act in any capacity for, any organization, agency, or institution with which the Bureau makes any contract or other arrangement under this Act.

(c) Duties and functions of Bureau

The Bureau is authorized to-

- (1) make grants to, or enter into cooperative agreements or contracts with public agencies, institutions of higher education, private organizations, or private individuals for purposes related to this subchapter; grants shall be made subject to continuing compliance with standards for gathering justice statistics set forth in rules and regulations promulgated by the Director;
- (2) collect and analyze information concerning criminal victimization, including crimes against the elderly, and civil disputes;
- (3) collect and analyze data that will serve as a continuous and comparable national social indication of the prevalence, incidence, rates, extent, distribution, and attributes of crime, juvenile delinquency, civil disputes, and other statistical factors related to crime, civil disputes, and juvenile delinquency, in support of national, State, tribal, and local justice policy and decisionmaking;
- (4) collect and analyze statistical information, concerning the operations of the criminal justice system at the Federal, State, tribal, and local levels;
- (5) collect and analyze statistical information concerning the prevalence, incidence, rates, extent, distribution, and attributes of crime, and juvenile delinquency, at the Federal, State, tribal, and local levels;
- (6) analyze the correlates of crime, civil disputes and juvenile delinquency, by the use of statistical information, about criminal and civil justice systems at the Federal, State, tribal, and local levels, and about the extent, distribution and attributes of crime, and juvenile delinquency, in the Nation and at the Federal, State, tribal, and local levels;
- (7) compile, collate, analyze, publish, and disseminate uniform national statistics concerning all aspects of criminal justice and related aspects of civil justice, crime, including crimes against the elderly, juvenile delinquency, criminal offenders, juvenile delinquents, and civil disputes in the various States and in Indian country;
- (8) recommend national standards for justice statistics and for insuring the reliability and validity of justice statistics supplied pursuant to this chapter;

- () maintain liaison with the judicial branches of the Federal Government and State and tribal governments in matters relating to justice statistics, and cooperate with the judicial branch in assuring as much uniformity as feasible in statistical systems of the executive and judicial branches;
- (10) provide information to the President, the Congress, the judiciary, State, tribal, and local governments, and the general public on justice statistics;
- (11) establish or assist in the establishment of a system to provide State, tribal, and local governments with access to Federal informational resources useful in the planning, implementation, and evaluation of programs under this Act;
 - (12) conduct or support research relating to methods of gathering or analyzing justice statistics;
- (13) provide for the development of justice information systems programs and assistance to the States, Indian tribes, and units of local government relating to collection, analysis, or dissemination of justice statistics:
- (14) develop and maintain a data processing capability to support the collection, aggregation, analysis and dissemination of information on the incidence of crime and the operation of the criminal justice system:
- (15) collect, analyze and disseminate comprehensive Federal justice transaction statistics (including statistics on issues of Federal justice interest such as public fraud and high technology crime) and to provide technical assistance to and work jointly with other Federal agencies to improve the availability and quality of Federal justice data;
- (16) provide for the collection, compilation, analysis, publication and dissemination of information and statistics about the prevalence, incidence, rates, extent, distribution and attributes of drug offenses, drug related offenses and drug dependent offenders and further provide for the establishment of a national clearinghouse to maintain and update a comprehensive and timely data base on all criminal justice aspects of the drug crisis and to disseminate such information:
- (17) provide for the collection, analysis, dissemination and publication of statistics on the condition and progress of drug control activities at the Federal, State, tribal, and local levels with particular attention to programs and intervention efforts demonstrated to be of value in the overall national anti-drug strategy and to provide for the establishment of a national clearinghouse for the gathering of data generated by Federal, State, tribal, and local criminal justice agencies on their drug enforcement activities;
- (18) provide for the development and enhancement of State, tribal, and local criminal justice information systems, and the standardization of data reporting relating to the collection, analysis or dissemination of data and statistics about drug offenses, drug related offenses, or drug dependent offenders;
- (1) provide for improvements in the accuracy, quality, timeliness, immediate accessibility, and integration of State and tribal criminal history and related records, support the development and enhancement of national systems of criminal history and related records including the National Instant Criminal Background Check System, the National Incident-Based Reporting System, and the records of the National Crime Information Center, facilitate State and tribal participation in national records and information systems, and support statistical research for critical analysis of the improvement and utilization of criminal history records;
- (20) maintain liaison with State, tribal, and local governments and governments of other nations concerning justice statistics;
- (21) cooperate in and participate with national and international organizations in the development of uniform justice statistics;
- (22) ensure conformance with security and privacy requirement of section 10231 of this title and identify, analyze, and participate in the development and implementation of privacy, security and information policies which impact on Federal, tribal, and State criminal justice operations and related statistical activities: and
 - (23) exercise the powers and functions set out in subchapter VII.

(d) Justice statistical collection analysis and dissemination

(1) In eneral

To ensure that all justice statistical collection, analysis, and dissemination is carried out in a coordinated manner, the Director is authorized to-

- (A) utilize, with their consent, the services, equipment, records, personnel, information, and facilities of other Federal, State, local, and private agencies and instrumentalities with or without reimbursement therefor, and to enter into agreements with such agencies and instrumentalities for purposes of data collection and analysis;
 - (B) confer and cooperate with State, municipal, and other local agencies:
- (C) request such information, data, and reports from any Federal agency as may be required to carry out the purposes of this chapter;

- (D) seek the cooperation of the judicial branch of the Federal Government in gathering data from criminal justice records;
- (E) encourage replication, coordination and sharing among justice agencies regarding information systems, information policy, and data; and
- (F) confer and cooperate with Federal statistical agencies as needed to carry out the purposes of this subchapter, including by entering into cooperative data sharing agreements in conformity with all laws and regulations applicable to the disclosure and use of data.

(2) Consultation ith Indian tribes

The Director, acting jointly with the Assistant Secretary for Indian Affairs (acting through the Office of Justice Services) and the Director of the Federal Bureau of Investigation, shall work with Indian tribes and tribal law enforcement agencies to establish and implement such tribal data collection systems as the Director determines to be necessary to achieve the purposes of this section.

(e) Furnishin of information data or reports by Federal a encies

Federal agencies requested to furnish information, data, or reports pursuant to subsection (d)(1)(C) shall provide such information to the Bureau as is required to carry out the purposes of this section.

(f) Consultation ith representatives of State tribal and local overnment and udiciary

In recommending standards for gathering justice statistics under this section, the Director shall consult with representatives of State, tribal, and local government, including, where appropriate, representatives of the judiciary.

() Reports

Not later than 1 year after July 2 , 2010, and annually thereafter, the Director shall submit to Congress a report describing the data collected and analyzed under this section relating to crimes in Indian country.

(Pub. . 0 351, title I, 302, as added Pub. . 6 157, 2, Dec. 27, 1 7 , 3 Stat. 1176; amended Pub. . 8 473, title II, 605(b), Oct. 12, 1 84, 8 Stat. 207; Pub. . 100 6 0, title VI, 60 2(a), Nov. 18, 1 88, 102 Stat. 433; Pub. . 103 322, title III, 330001(h)(2), Sept. 13, 1 4, 108 Stat. 213; Pub. . 10 162, title I, 1115(a), Jan. 5, 2006, 11 Stat. 3103; Pub. . 111 211, title II, 251(b), July 2, 2010, 124 Stat. 22 7; Pub. . 112 166, 2(h)(1), Aug. 10, 2012, 126 Stat. 1285.)

REFERENCES IN TE T

This Act, referred to in subsecs. (b) and (c)(11), is Pub. . 0 351, June 1 , 1 68, 82 Stat. 1 7 , known as the Omnibus Crime Control and Safe Streets Act of 1 68. For complete classification of this Act to the Code, see Short Title of 1 68 Act note set out under section 10101 of this title and Tables.

CODIFICATION

Section was formerly classified to section 3732 of Title 42, The Public Health and elfare, prior to editorial reclassification and renumbering as this section.

PRIOR PRO ISIONS

A prior section 302 of Pub. . 0 351, title I, June 1 , 1 68, 82 Stat. 200; Pub. . 3 83, 2, Aug. 6, 1 73, 87 Stat. 201; Pub. . 4 503, title I, 110, Oct. 15, 1 76, 0 Stat. 2412, related to establishment of State planning agencies to develop comprehensive State plans for grants for law enforcement and criminal justice purposes, prior to the general amendment of this chapter by Pub. . 6 157.

AMENDMENTS

2012-Subsec. (b). Pub. . 112 166 struck out ", by and with the advice and consent of the Senate" before period at end of first sentence.

2010-Subsec. (c)(3) to (6). Pub. . 111 211, 251(b)(1)(A), inserted "tribal," after "State," wherever appearing.

Subsec. (c)(7). Pub. . 111 211, 251(b)(1)(B), inserted "and in Indian country" after "States". Subsec. (c)(). Pub. . 111 211, 251(b)(1)(C), substituted "Federal Government and State and tribal governments" for "Federal and State Governments".

Subsec. (c)(10), (11). Pub. . . 111 211, 251(b)(1)(D), inserted ", tribal," after "State".

Subsec. (c)(13). Pub. . 111 211, 251(b)(1)(E), inserted ", Indian tribes," after "States".

Subsec. (c)(17). Pub. . 111 211, 251(b)(1)(F), substituted "activities at the Federal, State, tribal, and local" for "activities at the Federal, State and local" and "generated by Federal, State, tribal, and local" for "generated by Federal, State, and local".

Subsec. (c)(18). Pub. . 111 211, 251(b)(1)(G), substituted "State, tribal, and local" for "State and local".

Subsec. (c)(1). Pub. . 111 211, 251(b)(1)(H), inserted "and tribal" after "State" in two places.

Subsec. (c)(20). Pub. . 111 211, 251(b)(1)(I), inserted ", tribal," after "State".

Subsec. (c)(22). Pub. . 111 211, 251(b)(1)(J), inserted ", tribal," after "Federal".

Subsec. (d). Pub. . 111 211, 251(b)(2), designated existing provisions as par. (1), inserted par. (1) heading, substituted "To ensure" for "To insure", redesignated former pars. (1) to (6) as subpars. (A) to (F), respectively, of par. (1), realigned margins, and added par. (2).

Subsec. (e). Pub. . 111 211, 251(b)(3), substituted "subsection (d)(1)(C)" for "subsection (d)(3)".

Subsec. (f). Pub. . 111 211, 251(b)(4)(B), inserted ", tribal," after "State".

Pub. . 111 211, 251(b)(4)(A), which directed insertion of ", tribal," after "State" in heading, was executed editorially but could not be executed in original because heading had been editorially supplied.

Subsec. (g). Pub. . 111 211, 251(b)(5), added subsec. (g).

200 -Subsec. (b). Pub. . 10 162, 1115(a)(1), inserted after third sentence "The Director shall be responsible for the integrity of data and statistics and shall protect against improper or illegal use or disclosure."

Subsec. (c)(1). Pub. . 10 162, 1115(a)(2), amended par. (1) generally. Prior to amendment, par. (1) read as follows "provide for research and improvements in the accuracy, completeness, and inclusiveness of criminal history record information, information systems, arrest warrant, and stolen vehicle record information and information systems and support research concerning the accuracy, completeness, and inclusiveness of other criminal justice record information:".

Subsec. (d)(6). Pub. . 10 162, 1115(a)(3), added par. (6).

- **1 4-**Subsec. (c)(1). Pub. . 103 322 substituted a semicolon for period at end.
- 1 -Subsec. (c)(16) to (23). Pub. . 100 6 0 added pars. (16) to (1) and redesignated former pars. (16) to (1) as (20) to (23), respectively.
- **1 4**-Subsec. (b). Pub. 8 473, 605(b)(1), inserted provision requiring Director to report to Attorney General through Assistant Attorney General.

Subsec. (c)(13). Pub. . 8 473, 605(b)(2)(A), (C), added par. (13) and struck out former par. (13) relating to provision of financial and technical assistance to States and units of local government relating to collection, analysis, or dissemination of justice statistics.

Subsec. (c)(14), (15). Pub. . 8 473, 605(b)(2)(C), added pars. (14) and (15). Former pars. (14) and (15) redesignated (16) and (17), respectively.

Subsec. (c)(16). Pub. . 8 473, 605(b)(2)(A), (B), redesignated par. (14) as (16) and struck out former par. (16) relating to insuring conformance with security and privacy regulations issued under section 10231 of this title.

Subsec. (c)(17). Pub. . 8 473, 605(b)(2)(B), redesignated par. (15) as (17). Former par. (17) redesignated (1).

Subsec. (c)(18). Pub. . 8 473, 605(b)(2)(D), added par. (18).

Subsec. (c)(1). Pub. . 8 473, 605(b)(2)(B), redesignated former par. (17) as (1).

Subsec. (d)(1). Pub. . 8 473, 605(b)(3)(A), inserted ", and to enter into agreements with such agencies and instrumentalities for purposes of data collection and analysis".

Subsec. (d)(5). Pub. . 8 473, 605(b)(3)(B) (D), added par. (5).

EFFECTI E DATE OF 2012 AMENDMENT

Amendment by Pub. . 112 166 effective 60 days after Aug. 10, 2012, and applicable to appointments made on and after that effective date, including any nomination pending in the

Senate on that date, see section 6(a) of Pub. . 112 166, set out as a note under section 113 of Title 6, Domestic Security.

EFFECTI E DATE OF 1 4 AMENDMENT

Amendment by Pub. . 8 473 effective Oct. 12, 1 84, see section 60 AA(a) of Pub. . 8 473, set out as an Effective Date note under section 10101 of this title.

CONSTRUCTION OF 2010 AMENDMENT

- Pub. . 111 211, title II, 251(c), July 2 , 2010, 124 Stat. 22 8 , provided that "Nothing in this section amending this section and section 41507 of this title or any amendment made by this section-
 - "(1) allows the grant to be made to, or used by, an entity for law enforcement activities that the entity lacks jurisdiction to perform; or
 - "(2) has any effect other than to authorize, award, or deny a grant of funds to a federally recognized Indian tribe for the purposes described in the relevant grant program."

For definition of "Indian tribe" as used in section 251(c) of Pub. . 111 211, set out above, see section 203(a) of Pub. . 111 211, set out as a note under section 2801 of Title 25, Indians.

INCLUSION OF ONOR IOLENCE IN NATIONAL CRIME ICTIMI ATION SUR E

Pub. . 113 235, div. B, title II, Dec. 16, 2014, 128 Stat. 21 1, provided in part "That beginning not later than 2 years after the date of enactment of this Act div. B of Pub. . 113 235, Dec. 16, 2014, as part of each National Crime Victimization Survey, the Attorney General shall include statistics relating to honor violence".

STUD OF CRIMES A AINST SENIORS

- Pub. . 106 534, 5, Nov. 22, 2000, 114 Stat. 2557, provided that
- "(a) In General.-The Attorney General shall conduct a study relating to crimes against seniors, in order to assist in developing new strategies to prevent and otherwise reduce the incidence of those crimes.
 - (b) Issues Addressed.-The study conducted under this section shall include an analysis of-
 - "(1) the nature and type of crimes perpetrated against seniors, with special focus on-
 - "(A) the most common types of crimes that affect seniors;
 - "(B) the nature and extent of telemarketing, sweepstakes, and repair fraud against seniors; and
 - "(C) the nature and extent of financial and material fraud targeted at seniors;
 - "(2) the risk factors associated with seniors who have been victimized;
 - "(3) the manner in which the Federal and State criminal justice systems respond to crimes against seniors;
 - "(4) the feasibility of States establishing and maintaining a centralized computer database on the incidence of crimes against seniors that will promote the uniform identification and reporting of such crimes;
 - "(5) the effectiveness of damage awards in court actions and other means by which seniors receive reimbursement and other damages after fraud has been established; and
 - "(6) other effective ways to prevent or reduce the occurrence of crimes against seniors."

INCLUSION OF SENIORS IN NATIONAL CRIME ICTIMI ATION SUR E

- Pub. . 106 534, 6, Nov. 22, 2000, 114 Stat. 2557, provided that "Beginning not later than 2 years after the date of enactment of this Act Nov. 22, 2000, as part of each National Crime Victimization Survey, the Attorney General shall include statistics relating to-
 - "(1) crimes targeting or disproportionately affecting seniors;
 - "(2) crime risk factors for seniors, including the times and locations at which crimes victimizing seniors are most likely to occur; and
 - "(3) specific characteristics of the victims of crimes who are seniors, including age, gender, race or ethnicity, and socioeconomic status."

CRIME VICTIMS WITH DISABILITIES AWARENESS

Pub. L. 105–301, Oct. 27, 1998, 112 Stat. 2838, as amended by Pub. L. 106–402, title IV, §401(b)(10), Oct. 30, 2000, 114 Stat. 1739, provided that:

"SECTION 1. SHORT TITLE.

"This Act may be cited as the 'Crime Victims With Disabilities Awareness Act'.

- "SEC. 2. FINDINGS; PURPOSES.
 - "(a) Findings.-Congress finds that-
 - "(1) although research conducted abroad demonstrates that individuals with developmental disabilities are at a 4 to 10 times higher risk of becoming crime victims than those without disabilities, there have been no significant studies on this subject conducted in the United States:
 - "(2) in fact, the National Crime Victim's Survey, conducted annually by the Bureau of Justice Statistics of the Department of Justice, does not specifically collect data relating to crimes against individuals with developmental disabilities;
 - "(3) studies in Canada, Australia, and Great Britain consistently show that victims with developmental disabilities suffer repeated victimization because so few of the crimes against them are reported, and even when they are, there is sometimes a reluctance by police, prosecutors, and judges to rely on the testimony of a disabled individual, making individuals with developmental disabilities a target for criminal predators;
 - "(4) research in the United States needs to be done to-
 - "(A) understand the nature and extent of crimes against individuals with developmental disabilities;
 - "(B) describe the manner in which the justice system responds to crimes against individuals with developmental disabilities; and
 - "(C) identify programs, policies, or laws that hold promises for making the justice system more responsive to crimes against individuals with developmental disabilities; and
 - "(5) the National Academy of Science Committee on Law and Justice of the National Research Council is a premier research institution with unique experience in developing seminal, multidisciplinary studies to establish a strong research base from which to make public policy.
 - "(b) Purposes.-The purposes of this Act are-
 - "(1) to increase public awareness of the plight of victims of crime who are individuals with developmental disabilities;
 - "(2) to collect data to measure the extent of the problem of crimes against individuals with developmental disabilities; and
 - "(3) to develop a basis to find new strategies to address the safety and justice needs of victims of crime who are individuals with developmental disabilities.
- "SEC. 3. DEFINITION OF DEVELOPMENTAL DISABILITY.

"In this Act, the term 'developmental disability' has the meaning given the term in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 [42 U.S.C. 15002].

"SEC. 4. STUDY.

- "(a) In General.-The Attorney General shall conduct a study to increase knowledge and information about crimes against individuals with developmental disabilities that will be useful in developing new strategies to reduce the incidence of crimes against those individuals.
 - "(b) Issues Addressed.-The study conducted under this section shall address such issues as-
 - "(1) the nature and extent of crimes against individuals with developmental disabilities;
 - "(2) the risk factors associated with victimization of individuals with developmental disabilities;
 - "(3) the manner in which the justice system responds to crimes against individuals with developmental disabilities; and

- "(4) the means by which States may establish and maintain a centralized computer database on the incidence of crimes against individuals with disabilities within a State.
- "(c) National Academy of Sciences.-In carrying out this section, the Attorney General shall consider contracting with the Committee on Law and Justice of the National Research Council of the National Academy of Sciences to provide research for the study conducted under this section.
- "(d) Report.-Not later than 18 months after the date of enactment of this Act [Oct. 27, 1998], the Attorney General shall submit to the Committees on the Judiciary of the Senate and the House of Representatives a report describing the results of the study conducted under this section.

"SEC. 5. NATIONAL CRIME VICTIM'S SURVEY.

"Not later than 2 years after the date of enactment of this Act, as part of each National Crime Victim's Survey, the Attorney General shall include statistics relating to-

- "(1) the nature of crimes against individuals with developmental disabilities; and
- "(2) the specific characteristics of the victims of those crimes."

Attachment 3: Cognitive interview report

2023 Census of Medical Examiner and Coroner Offices: Cognitive Testing

Final Report

Prepared for

U.S. Department of Justice 810 Seventh Street N.W. Washington, DC 20531

Prepared by

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2023 Census of Medical Examiner and Coroner Offices: Cognitive Testing

Final Report

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1. Project Background

In 2024, the Bureau of Justice Statistics (BJS) plans to conduct the 2023 Census of Medical Examiner and Coroner Offices (CMEC). This survey was last conducted in 2018 and is designed to gather data on administrative practices, personnel/staffing, budgets, workload, resources, and other policies and practices of medical examiner and coroner (MEC) offices across the United States.

To prepare for the 2023 CMEC, several activities were conducted to inform instrument revisions, including a data quality assessment to identify questions with high nonresponse and an expert panel review of the 2018 CMEC instrument to assess current needs of the field. Using the outcomes of these activities, BJS implemented several changes to the instrument to improve data quality and question clarity, reduce respondent burden, and collect data that are relevant to the field.

As part of the effort to reduce burden, several large grids in the 2018 instrument were redesigned into "yes or no" questions or otherwise simplified using logic to reduce the number of data points being requested from respondents. For example, on the 2018 instrument, all staffing counts were grouped in one large grid (A8) with no accompanying filter questions or skip logic that would allow respondents to skip items that were not relevant to them. If a particular staffing type (e.g., Autopsy Pathologists) did not apply, respondents were instructed to enter "0." If a respondent left an item blank because it did not apply, this would have been considered an invalid or missing response. This format also did not allow for differentiation in the data to determine a not applicable "0" response (e.g., an office does not have autopsy capabilities) from an office that may, for example, have staffing needs in this area but currently does not have staff filling this position (e.g., has a vacancy).

To address these issues, using expert panel feedback and informed by practices in survey design, the 2023 CMEC was redesigned to ask respondents about each staffing category separately in using easy-to-answer filter checkbox that skips respondents out of questions that collect staffing counts for roles that are not applicable to their office. *Figures 1.1* and *1.2* compare the 2018 and 2023 CMEC changes for the staffing count section.

Figure 1.1 2018 Staffing Count Question

Enter the number of employees during the pay period including December 31, 2018. Report each employee in only one category. If an employee fills more than one role, please put them in their primary role. If none, enter 0. • Full time employees are those who work on average 35 or more hours per week. • Part-time employees are those who work on average 34 or fewer hours per week. • Consultants/Contractors are those who work under another company or as a consultant and are hired to work for your office. • On-Call employees are those who do not have regularly scheduled hours and only work when they are needed				but them in k. ek. consultant and
	During the p	av period inc	luding Decem	ber 31, 2018
	<u> </u>			On-Call
Polo				
noie	Linployees	Linployees	Contractors	Lilipioyees
a. Autopsy pathologists				
b. Coroners/non-physicians				
c. Death investigators (or coroner investigators)				
d. Forensic toxicologists (i.e., performs case interpretation)				
e. Forensic analysts or chemists (i.e., does not perform case interpretation)				
f. Other scientific investigative support staff (e.g., anthropologists, histologists)				
g. Administrative staff (e.g., secretary, accountant)				
h. Ancillary staff (e.g., drivers, photographers)				
Total (sum of rows a-h):	Column 1 Total	Column 2 Total	Column 3 Total	Column 4 Total
	each employee in only one category. If ar their primary role. If none, enter 0. • Full time employees are those who • Part-time employees are those who • Consultants/Contractors are those are hired to work for your office. • On-Call employees are those who describe when they are needed. Role a. Autopsy pathologists b. Coroners/non-physicians c. Death investigators (or coroner investigators) d. Forensic toxicologists (i.e., performs case interpretation) e. Forensic analysts or chemists (i.e., does not perform case interpretation) f. Other scientific investigative support staff (e.g., anthropologists, histologists) g. Administrative staff (e.g., secretary, accountant) h. Ancillary staff (e.g., drivers, photographers)	each employee in only one category. If an employee fills their primary role. If none, enter 0. • Full time employees are those who work on avera • Part-time employees are those who work on avera • Consultants/Contractors are those who work und are hired to work for your office. • On-Call employees are those who do not have reg when they are needed. During the prull-Time Employees a. Autopsy pathologists b. Coroners/non-physicians c. Death investigators (or coroner investigators) d. Forensic toxicologists (i.e., performs case interpretation) e. Forensic analysts or chemists (i.e., does not perform case interpretation) f. Other scientific investigative support staff (e.g., anthropologists, histologists) g. Administrative staff (e.g., secretary, accountant) h. Ancillary staff (e.g., drivers, photographers) Total (sum of rows a-h):	each employee in only one category. If an employee fills more than on their primary role. If none, enter 0. • Full time employees are those who work on average 35 or more • Part-time employees are those who work on average 34 or fewe • Consultants/Contractors are those who work under another con are hired to work for your office. • On-Call employees are those who do not have regularly schedul when they are needed. During the pay period inc Full-Time Employees a. Autopsy pathologists b. Coroners/non-physicians c. Death investigators (or coroner investigators) d. Forensic toxicologists (i.e., performs case interpretation) e. Forensic analysts or chemists (i.e., does not perform case interpretation) f. Other scientific investigative support staff (e.g., anthropologists, histologists) g. Administrative staff (e.g., secretary, accountant) h. Ancillary staff (e.g., drivers, photographers) Total (sum of rows a-h): Column 1 Column 2	each employee in only one category. If an employee fills more than one role, please patheir primary role. If none, enter 0. • Full time employees are those who work on average 35 or more hours per wee. • Part-time employees are those who work on average 34 or fewer hours per wee. • Consultants/Contractors are those who work under another company or as a company are hired to work for your office. • On-Call employees are those who do not have regularly scheduled hours and on when they are needed. During the pay period including Decemedate in the pay part time in the pay period including Decemedate in the pay pathologists. During the pay period including Decemedate in the pay pathologists. Consultants/Contractors.

Figure 1.2 Example of the Revised 2023 Staffing Count Questions

<u>A13</u>	A13. How many Forensic/Autopsy Pathologists did your office directly employ in the following categories during the pay period that included December 31, 2023? <u>Include</u> full-time, part-time and on-call employees. <u>Do not include contractors</u> . <u>Include Chief Medical Examiners that are Autopsy/Forensic Pathologists</u> . Enter 0 if your office does not have staff in given category.			
	My office did not directly employed Pathologists → SKIP to A18 or			
	Full-time employees:			
Г	Part-time employees:			
	On-call employees:			

After changes were implemented, and as part of the instrument development and redesign process, BJS decided to conduct cognitive testing on new and revised items before the full data collection in 2024. The goal of this effort was to understand how well the questions work when administered to a subset of the target population, identify any potential

measurement issues, and make appropriate revisions to ensure that high-quality data are collected in the upcoming CMEC.

Testing was conducted in two iterative rounds. The first round (n=18 interviews) was conducted to identify major issues in need of revision, whereas the second round (n=9 interviews) focused on confirming whether changes made to the instrument effectively addressed the major issues found in the first round and performed as intended. This report summarizes the cognitive testing process and procedures, findings, and recommendations from 18 cognitive interviews conducted for Round 1 testing that took place from December 2023 to February 2024. Testing for Round 2 was conducted in March 2024. Results for Round 2 will be appended to the final cognitive testing findings report once completed.

Section 2 summarizes the methods used to recruit for and conduct the cognitive interviews, including a description of participants. The findings and recommendations from the cognitive interviews are presented across **Section 3** in a question-specific discussion. **Section 4** discusses reactions to potential items being considered in an addendum to the 2023 CMEC, and **Section 5** discusses notable miscellaneous considerations discussed during the interview debrief (e.g., burden, overall feedback).

2. Methodology

2.1 Participant Recruitment

Forty MEC offices representing a variety of different characteristics were identified as potential cognitive interview participants. To ensure representation, the cognitive testing sample was purposely selected to represent MEC offices across key characteristics, including (1) office type (e.g., medical examiner, coroner, or justice of the peace), (2) government type (e.g., state, county, or regional), (3) autopsy location (internally or externally conducted), (4) size of the population served, and (5) private versus fully public. Selected candidates were sent an initial email inviting them to participate in a 60-minute virtual interview (*Appendix A.1*). Approximately 1 week after the initial outreach, a reminder email was sent to selected candidates who did not respond to the initial email outreach (*Appendix A.2*). When specifically trying to contact Justices of the Peace, a final outreach attempt was made via phone. When a selected MEC office did not respond to outreach attempts or declined to be interviewed, a substitute office was identified that corresponded with the general profile of the nonresponse/refusal case.

Once participants confirmed their willingness to participate, a follow-up email that proposed dates and times for the interview was sent (if needed) (*Appendix A.3*). A final confirmation email (*Appendix A.4*) with agreed-upon dates and times, as well as a copy of the Round 1 or 2 version of the 2023 CMEC (depending on the round being conducted) (*Appendices C.1* and *C.2*) and the consent form (*Appendix B.1*) were sent to the participant once dates and times were confirmed. After the interview, all cognitive interview participants received a final email to thank them for their time and participation (*Appendix A.5*).

Of participants from the sampled MEC offices, 18 completed a cognitive interview for Round 1 testing from December 2023 through February 2024, and 13 completed an interview for Round 2 from March 2024 to early April 2024. Of the 31 participants interviewed across both rounds, 14 were medical examiner offices, 14 were coroner offices, and 3 were justice of the peace. Regarding type of government, 26 offices were at the district or county level, and 5 were regional or state. An overview of sample characteristics for Rounds 1 and 2 is provided in *Table 2.1*.

Table 2.1 Summary by Office Type, Government, and Size

Characteristics	Round 1 Count	Round 2 Count	Total
Office Type			
Coroner	9	5	14
Medical examiner	8	6	14
Justice of the Peace	1	2	3
Government Type			
District/county	15	11	26
Regional/state	3	2	5
Autopsy Location			
Internal	8	7	15
External—state medical examiner	2	2	4
External—other	8	4	12
Size of Population Served			
Fewer than 25,000	4	2	6
Between 25,000 and 250,000	7	4	11
Over 250,000	7	7	14
Privatized Component			
Yes	3	0	3
No	15	13	28

2.2 Data Collection Procedures and Protocol

The cognitive testing effort was designed to assess respondent burden and ease of access to requested information or data, identify potential issues with clarity or comprehension (e.g., question wording, formats, survey design), variability in interpretation, or other issues that might affect response or result in measurement error.

Four cognitive interviewers from RTI conducted CMEC interviews across both rounds of testing. Before any interviews were conducted, a training session was held with all interviewers to explain the purpose of the cognitive test, discuss the interview protocol and all study procedures, and answer any questions interviewers had about the process. All interviewers also participated in one paired mock interview for training purposes, before the start of data collection. During data collection, the interviewing team met weekly to discuss progress, preliminary findings, and any challenges with the protocol or procedures.

All interviews were conducted via Teams or Zoom and lasted approximately 1 hour each. All interviews were recorded with participants' consent. Once informed consent was obtained, interviewers followed a cognitive interview protocol with scripted concurrent and

retrospective probes (*Appendix B.2*). Based on Round 1 findings, an updated protocol was used for Round 2 testing (*Appendix B.3*). Generally, the participants were asked about text clarity, their ability to provide answers, ease of navigating the instrument (i.e., format), and recommendations for improving the survey. The interviewers also used spontaneous probes when needed to clarify participant feedback (e.g., *Can you tell me more about that?*). In Round 1, cognitive interviews focused primarily on substantially revised or new questions. However, participants were able to view the full instrument to provide context, which also allowed for any potential feedback on items not being specifically reviewed. To this point, participants were encouraged to share feedback about any item in the instrument, and probes in the end section were used to determine whether participants had feedback on any items not specifically probed on in that section. In Round 2, cognitive interviews focused on the modified questions based on recommendations from Round 1. The interview debriefing in Round 1 asked questions to assess the overall effort it would take to complete the survey and gather general feedback about the instrument. Findings from these interviews are discussed in detail in *Sections 3* and *5*.

During the first round of testing, in addition to the main instrument (*Appendix C.1*), participants were asked to review and provide feedback on an "addendum" instrument (*Appendix C.3*) containing questions being considered as an optional supplement to the 2023 CMEC or as potential additions to the main CMEC instrument if they were found to be critical to the field. The addendum instrument was not tested in Round 2. Findings for the addendum instrument are discussed in more detail in *Section 4*.

After each interview, the interview team used a formatted Excel spreadsheet to facilitate notetaking and, later, analysis of compiled interview data.

3. Question-Specific Discussion

This section presents questions for which changes are recommended. Each subsection covers one section of the survey (e.g., administration, workload) and begins with a summary of how questions performed in the section overall. Questions that performed consistently, and that participants generally understood well, are noted in the section introductions but not discussed in detail in the question-specific findings. Questions for which potential issues were identified in testing are presented for reference, followed by a discussion of findings and recommendations for question improvement. Items that were retested in Round 2 include a summary of Round 1 findings, Round 1 recommendations, Round 2 findings from retesting revised items, and final recommendations as applicable. Items that were tested only once in Round 1 include only one set of findings or recommendations. Each section includes numbered recommendations to ensure easy reference for discussion.

3.1 Section A—Administrative

This section contains topics designed to collect data about administrative details of offices, including staffing counts, salaries, and other topics related to personnel. Of the 29 questions in Section A, 15 items tested well and thus have no recommendations.

The 14 items discussed in this section presented problems and were determined to need clarification or revision. However, six of these items (A7/A8, A24/A25, A26/A27) encountered a similar issue with providing counts for contractors and are presented together in this section, given the overlap with findings and parallel recommendations across items. Related, findings identified with four items (A13–A16) are also presented together, given that the issues observed in testing applied to the entire series.

A4.	Which, if any, of the following provides administrative oversight of your office?
	OPublic health agency (e.g., department or division of public health)
	○ Law enforcement agency (e.g., department or division of public safety)
	Ogovernment attorney's office (e.g., district attorney, attorney general)
	Operation Department or division of forensic science
	○ Court system
	○ Other (please specify)¬

Round 1 Findings

Five participants experienced confusion with A4 or were uncertain of how to respond. Interpretations of "administrative oversight" also differed across participants. Participants

cited a variety of functions where oversight might be provided, including budgets, staffing or hiring, "day-to-day" supervision, statute or policy oversight, and reporting deaths to the state or county.

Four participants reported situations where they do not have "day-to-day" oversight but noted that higher levels of government provide oversight for some functions, such as creating budgets, making hiring decisions, appointing staff, complying with statutes and policies, and reporting vital statistics. Two of these participants noted county commissions and two noted state commissions provide higher-level oversight. These participants felt there was not a clear option for them to select.

Some participants also described situations where different agencies provide oversight for different types of administrative functions. Two participants noted their county appoints medical examiners and provides a budget, but the state ultimately provides oversight to ensure that their office complies with statutes. One noted their office sits under the county but report to the state department of health. One also noted their office is part of the court system but also noted it "reports" to state vital statistics. Two of these participants noted they wanted to select multiple options because different agencies provided oversight for different functions.

Round 1 Recommendations

 Consider focusing this question on one administrative domain. Given that one of the CMEC's core focuses is understanding MEC office budgets, RTI recommends revising this question to instead capture "budget oversight" and moving to Section B (new B3):

"Which of the following provides budgetary oversight of your office?"

We also recommend adding an additional response option to capture scenarios where oversight comes from the highest levels of government (e.g., county or state commission):

"Other government funding body (e.g., county or state commission)"

2. Test the proposed changes in Round 2 cognitive testing.

Round 2 Findings

A4 was revised and moved to Section B (renumbered to B3) based on recommendation #1 from Round 1 testing, and performed well in Round 2 testing. Participants found the new question clear and straightforward.

Final Recommendations (Round 2)

The item performed well in Round 2 testing, so no additional changes are recommended. RTI recommends fielding the revised version in Section B as tested in Round 2:

B3. Which of the following provides budgetary oversight of your office?	
Public health agency (e.g., department or division of public health)	
Law enforcement agency (e.g., department or division of public safety)	
Government attorney's office (e.g., district attorney, attorney general)	
Department or division of forensic science	
Court system	
Other government funding body (e.g., county or state commission)	
Other (please specify)	
BJS Decision	
The final recommendation was accepted and implemented in the instrument.	
A5. Is your office located within another business, such as a funeral home? Yes No	
The majority of participants did not have issues with A5. However, three participants suggested providing other examples in this question, like doctor's offices, universities hospitals. Two of these participants specifically noted that "funeral home" was not the example for their office, with one indicating that in their state (Michigan), it was "illegoperate an MEC office out of a funeral home.	e best
Recommendations	
3. Consider adding "university," "doctor's office," or "hospital" to the list of exam "Is your office operated within another business, such as a funeral home, univ or doctor's office?"	
BJS Decision	
• Recommendation #3 was accepted and implemented in the instrument.	
A6. Does your office have authority over multiple jurisdictions? For example, your office is the medical examiner or coroner for multiple counties or districts. Yes No	

Findings

The majority of participants did not have issues with this item. However, a participant from one state office was uncertain how to respond and explained that as the state medical examiner, they technically have only one jurisdiction (i.e., the state), but the state is made up of multiple counties and districts.

Recommendations

- 4. Revise the guestion to include "state" in the list of examples:
 - "Does your office have authority over multiple jurisdictions? For example, your office is the medical examiner for the state, or coroner for multiple counties or districts."

BJS Decision

- Recommendation #4 was accepted and implemented in the instrument.
- A7. What jurisdictions does your office have authority over (e.g., County, State, or Judicial District)? If you have authority over multiple jurisdictions, enter a comma (,) between each jurisdiction.

Findings

The majority of participants felt this question was clear, but the examples provided prompted two participants to respond with "county" instead of providing the actual county name.

Recommendations

5. RTI recommends adding the term "geographic" for clarity and inserting actual examples (e.g., state of North Carolina) to reduce confusion:
"What geographic jurisdictions does your office have authority over (e.g.,
Wake County or State of Ohio, or Judicial District 8)? If you have authority over multiple jurisdictions, enter a comma (,) between each jurisdiction."

BJS Decision

Recommendation #5 was accepted and implemented in the instrument.

Issues Reporting Contractor Counts in Staffing Series (A7/A8, A24/A25, A26/A27)

Did your office employ/contract any [STAFF TYPE] during the pay period that included December 31, 2023? Please include all full-time, part-time, consultants/contractors, and on-call employees. Yes No → SKIP to [QUESTION]				
How many [STAFF TYPE] did your office employ/contract in the following categories during the pay period that included December 31, 2023? Enter 0 if your office does not have staff in a given category.				
Full-time employees:				
Part-time employees:				
Consultants/contractors:				
On-call employees:				

Round 1 Findings

Seven participants experienced confusion about how to report contractor staffing counts or were observed having difficulty (e.g., misreporting) with one or more of the staffing count questions (A7/A8, A24/A25, and A26/A27). This issue was most prominent in A8 and A24 because many offices contract for Autopsy Pathologist services (A8) and other scientific support functions (A25) like toxicology.

Regarding autopsy pathologist counts for contractors, participants reported a variety of scenarios that made it difficult to respond or resulted in response errors. Eight participants specifically noted they contract through a third-party entity for autopsies, like a private autopsy company, another MEC office, or a university, and not individual contractors who work directly for their office, which made it difficult to provide counts. For example, two participants noted they were not sure how many autopsy pathologists work on their cases when they request an autopsy. One participant indicated they used three locations for their autopsy services and would have to inquire with the entities to obtain counts. Three reported relying on Autopsy Pathologists who were employees of another county or state to conduct their autopsies and were not sure how to respond; one of these participants indicated they would enter "0" because these were employees of another county, whereas another would provide these counts. Related, seven participants were also uncertain how to handle toxicology contractors (A25) because they use private laboratories for these services (e.g., NMS Labs) and do not know how many individual contract staff are supporting their requests. Some of these participants indicated they would try providing some sort of count and attempted to reconcile reporting challenges in various ways: Two noted they would attempt to report the number working for the contract entity, one indicated they would

review the number of times the contractor was used and report that number, and two indicated they would report the entire entity as "1."

A few participants also noted asking offices to provide a count of contractors may also result in duplicate reporting because contractors or contracting agencies typically work across many MEC offices, as one participant noted:

"You're not gonna get very good numbers from the consult or contract question. Every time I'm answering for Doctor Smith for a contract with him, I'm contracting with his entire university and however many Autopsy Pathologists he has. Then that university is also getting counted by the other counties that also send their autopsies to him."

Round 1 Recommendations

6. RTI recommends removing contractor counts from the staffing question series for Autopsy Pathologists, administrative staff, ancillary staff, and other scientific support staff (A7/A8, A24/A25, and A26/A27). Follow-up questions would then collect staffing counts for only full-time, part-time, and on-call employees. However, RTI recommends asking about contractors in the death investigator question series because many death investigators are not directly employed by MEC offices and typically work for only one office (A17/A18).

It is noted that although the 2018 CMEC collected contractor counts, BJS did not report contractor counts in 2018 and reported only full and part-time employees. Because contractors often work for more than one MEC office, these counts are not unique for each office and would result in duplicate reporting of the same staff.

7. RTI also recommends adding a filter question that captures how offices handle autopsy services to better understand how many offices rely on contractors for autopsy functions, and to facilitate skip logic. If a participant indicates their office solely outsources autopsy services to contract entities or other MEC offices, they would skip items asking for Autopsy Pathologist employee counts because those items do not apply to their office:

"Many medical examiner and coroner offices do not directly employ Forensic or Autopsy pathologists, and rely on contracted entities or the state Medical Examiner or other medical examiner/coroner office for their autopsy services.
How are autopsy services handled by your office? Select all that apply.
Our office sends autopsies to the State Medical Examiner or another Medical Examiner/Coroner office to be performed
Our office contracts with a private company, university, hospital, independent contractor, or other contract entity to

perform autopsies

- Autopsies are conducted by Forensic or Autopsy Pathologists directly employed by our office"
- 8. Because the term "consultant" is not commonly associated with death investigators, RTI also recommends using only "contractor" when asking about death investigators.
- 9. Test the aforementioned proposed changes in Round 2 cognitive interviews.

Round 2 Findings

In general, participants were able to navigate the staffing count questions more easily with contractors removed (Round 1, recommendation #6), and the new filter question (Round 1, recommendation #7) helped mitigate confusion with reporting contractor counts seen in Round 1. However, one participant was uncertain how they should categorize *locum tenens* because they did not originally consider them "contractors" based on answer options in the new filter item developed based on recommendation #7 (i.e., "Our office contracts with a private company, university, hospital, independent contractor, or other contract entity to perform autopsies."). Related, two participants were uncertain whether a private medical examiner office would also fall under "another Medical/Examiner Coroner office" because it is technically another MEC office. One of these participants indicated that including "public" (i.e., "another *public* MEC") would clarify this item.

Four participants prematurely included administrative staff in earlier staffing questions, but recognized that counts for administrative staff are collected later once they arrived at that series of questions. Related, two participants were also uncertain about where administrative managers/directors should be counted because they did not initially notice that "administrative managers" was included further down in the list of examples of who should be counted in the administrative staff question series.

In the Death Investigator staffing question series, one participant read the instructions to not include "head of office" positions but still was uncertain about who should be excluded and who "head of office" referenced in this question. Related, two additional participants were uncertain whether "Chief Death Investigators" should be included because of use of the "head of office" term in these instructions given these individuals have supervisory roles. When probed, participants felt adding the examples used in A1 ("e.g., Chief Medical Examiner, Coroner") or adding an instruction to reference A1 would clarify what was meant by "head of office."

Finally, one participant was unclear how to classify their office's Death Investigator and was uncertain whether this would fall under "contractor". When probed, this participant noted this Death Investigator is paid on a "fee-for-service" basis and receives a 1099. Including "fee for service" and a reference to a 1099 in the definitions presented before the staffing

section would have made it clearer for the participant that this Death Investigator should be considered a contractor.

Final Recommendations

- 10. RTI recommends listing all staff types that will be asked about with instructions at the start of the staffing section to reduce issues with offices prematurely reporting staffing counts for roles that are asked about later in Section A:
 - "The following section collects information about staff who support death investigation functions at your office and includes questions about Autopsy or Forensic Pathologists, Death Investigators, other scientific support staff (e.g., Forensic Toxicologists, Forensic Analysts), ancillary staff (e.g., drivers, photographers, evidence technicians), and administrative staff (e.g., administrative managers/directors, administrative assistants, record clerks, secretaries)."
- 11. RTI recommends including new language to the staffing instructions to make it clear employees should be reported only once in their primary role in the staffing section:

 "Each employee should be reported only once in this section. If an employee fills more than one role, please include them in their primary role."
- 12. RTI recommends adding "fee for service" and "receives a 1099" as clarifying examples to the definition for contractors, and expanding the definition to clarify these individuals are "not directly employed":
 - "Contractors/Fee-for-service: Those who are hired to do work for your office as a contractor and are not directly employed by your office (e.g., receives a 1099; paid on a fee-for-service basis)."
- 13. RTI recommends adding "public" to the first answer option to clarify that "another MEC" refers to public offices and adding "e.g., *locum tenens*" to the second answer choice after "independent contractor" in the new filter question from recommendation #7 retested in Round 2:

"How are autopsy services handled by your office? Select all that apply.
\square Our office sends autopsies to the State Medical Examiner or another public
Medical Examiner/Coroner office to be performed
\square Our office contracts with a private company, university, hospital, independent
contractor (e.g., locum tenens), or other contract entity to perform autopsies
Autopsies are only conducted by Forensic or Autopsy Pathologists <u>directly</u>
employed by our office"

- 14. RTI recommends revising instructions on the death investigator staffing count question (A22) to include an instruction not to include head-of-office positions already reported in A1:
 - "How many Death Investigators did your office employ/contract in the following categories during the pay period that included December 31, 2023? <u>Do not include head of office positions (e.g., Coroners) reported in A1 that also act as Death Investigators."</u>
- 15. RTI recommends putting "administrative managers/directors" first in the list of examples included in instructions before (new) Question A30:

 "These next questions ask about administrative staff (e.g., administrative managers/directors, administrative assistants, records clerks, and secretaries) that were employed by your office during the pay period that included December 31, 2023."

BJS Decision

Recommendation #10 was accepted with BJS revision revising to a bulleted list.
 This change is reflected below, in final recommendations and has been implemented in the instrument.

The next section collects information about the following types of staff who could support death investigation functions at your office.

- Autopsy or Forensic Pathologists
- Death Investigators
- Other scientific support staff (e.g., Forensic Toxicologists, Forensic Analysts)
- o Ancillary staff (e.g., drivers, photographers, evidence technicians),
- Administrative staff (e.g., administrative managers/directors, administrative assistants, record clerks, secretaries)."
- Recommendation #12 was accepted with BJS revision removing "fee-for-service" from the e.g., list. This change is reflected below and has been implemented in the instrument.
 - "Contractors/Fee-for-service: Those who are hired to do work for your office as a contractor and are not directly employed by your office (e.g., receives a 1099)."

- Recommendation #13 was accepted with slight BJS revision to the response options. This change is reflected below and has been implemented in the instrument.
 - o How are autopsy services handled by your office? Select all that apply.
 - Autopsies sent to the State Medical Examiner or another public Medical Examiner/Coroner office
 - Private company, independent contractor (e.g. locum tenens), university, hospital, or other contract entity perform autopsies
 - Forensic or Autopsy Pathologists <u>directly employed</u> by our office perform autopsies
- BJS accepted recommendations #11, #14, and #15 as is. These changes have been implemented in the instrument.

A13. Did your office employ/contract any Coroners/non-physician Medical Examiners/non-autopsy physicians during the pay period that included December 31, 2023? Please include all full-time, part-time, consultants/contractors, and on-call employees. If an employee fills more than one role, please put them in their primary role. ○ Yes ○ No → SKIP to A17 on page 5
A14. How many Coroners/non-physician Medical Examiners/non-autopsy physicians did your office employ/contract in the following categories during the pay period that included December 31, 2023? Enter 0 if your office does not have staff in given category.
Full-time employees:
Part-time employees:
Consultants/contractors:
On-call employees:
A15. How were Coroners/non-physician Medical Examiners/non-autopsy physicians at your office paid in 2023? Please select all that apply. Hourly Salary Continue to A16 on page 5 Stipend Fee-for-service (paid by case, call, day or other fee structure) → SKIP to A17
Salary Continue to A16 on page 5 Stipend

A16. What was the average annual salary (or annual salary equivalent if paid hourly or by stipend) for full-time and part-time Coroners/non-physician Medical Examiners/non-autopsy physicians employed by your office as of December 31, 2023?		
	Annual Salary or Equivalent	Not Applicable
a.Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$	
b. Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)	\$	

Round 1 Findings

The majority of participants (n=14) experienced confusion with this series and did not understand the "Coroners/non-physician Medical Examiners/non-autopsy physicians" terminology or staff grouping, which resulted in misreporting staffing counts not intended for this section. This item is intended to capture administrative heads of office (e.g., Coroners and those with the title of "Medical Examiner" who are not Pathologists), but many participants included death investigators, autopsy technicians, clinical pathologists, and other non-forensic pathologist staff (e.g., anthropologists, odontologists, forensic technicians, laboratory physicians, neuropathology consultants). Only one participant seemed to understand what this series was asking and recommended instead asking about the primary "head of office" and their role first. This participant also recommended asking whether "head of office" positions were required to be forensic pathologists.

Round 1 Recommendations

16. RTI recommends replacing A13–A16 with a new series of questions that ask about administrative heads of office (e.g., Chief Medical Examiners, Coroners and non-physician Medical Examiners) first before collecting information about other staff. The "head of office" count should be only one per office (e.g., one Chief Medical Examiner, one Coroner per office), but as outlined in the findings, participants were reporting a variety of staffing types in A14 even though it was intended to only collect e.g., Coroners. This change should reduce confusion with other "non-autopsy physician" roles that should be reported under the other scientific support staff question series. Related, this would also help ensure head-of-office salaries are not inflating reported averages for staff and would facilitate the collection of other relevant data (e.g., capturing counts of elected head positions, requirements to be a forensic pathologist). A draft of this new series is provided as follows:

"First we will collect additional information about the <u>head position</u> (e.g., Chief Medical Examiner, Coroner) in your office.

Is head position at your office full-time, part-time or on-call? Full-time Part-time or on-call
Is the head of your office elected? Yes No
Does your head of office perform any of the following death investigation functions in addition to their primary administrative duties? Select all that apply. Autopsies
☐ Scene investigations
 Other investigative casework (e.g., perform body examinations/inspections, conduct and document interviews) The head of office is an administrative position only and does not perform direct death investigation or autopsy duties
What was the annual salary (or annual salary equivalent if paid hourly or by stipend) for your head of office as of December 31, 2023?"
Annual Salary or Equivalent

17. Test the proposed changes in Round 2 of cognitive interviews.

Round 2 Findings

The majority of participants (n=9) understood the person being asked about in regard to "head of office" for this new question series. However, two participants experienced some confusion about who should be considered "head of office" and requested more clarity in the term "head of office." It is noted that these participants did not have issues reporting head of office as intended in A1, and when probed, these participants noted referencing A1 would clarify whom this series of questions was asking about. Two participants also experienced slight confusion around how to classify full-time staff who also were sometimes "on call" and exhibited some hesitation on how best to answer (new) A10. Finally, one participant noted that a Forensic Pathologist is also a type of physician, which could be better clarified in the answer choices for (new) A2.

Final Recommendations

18. RTI recommends adding the word "other" to (new) question A2 and clarifying the response options as follows:

"Is your head of office required to be a Forensic Pathologist, Autopsy Pathologist, or other type of physician?

- Yes the head of office is required to be a Forensic Pathologist
- Yes the head of office is required to be a physician, but is not required to be
 a Forensic or Autopsy Pathologist
- O No"
- 19. RTI recommends adding language to the instructions before (new) Question A10: "First we will collect additional information about the head position in your office that you reported in A1."
- 20. RTI recommends adding language to (new) Question A10 to clarify how to classify full-time staff with on-call duties:

"Is your head of office's death investigation role full-time, part-time, or on-call? If staff are full-time employees that sometimes have on-call hours, consider them as full-time.

- Full-time
- Part-time or on-call"

BJS Decision

- BJS accepted recommendations #16, #18, #19 without changes. These changes have been implemented in the instrument.
- BJS suggested a revision to recommendation #20 to remove "on-call" and only capture full and part-time in A8. This change is reflected below and has been implemented in the instrument.

Is your head of office's death investigation role full-time or part-time? If staff are

- o Full-time
- o Part-time

3.2 Section B—Expenditures and Funds

This section contains topics designed to collect data about office budgets, expenditures, and funding sources. Of the five questions in Section B, only one item presented minor confusion (B3), whereas four items (B1, B2, B4, B5) tested well and thus have no recommendations.

	Yes	No
Expense		
a. Autopsies		
b. Personnel		
c. Supplies and equipment	0	0
d. Training	0	0
e. Transportation	0	0
f. Toxicology	0	0
g. Indigent Burial	0	0
h. Body storage	0	0
i. Other (please specify) ¬	0	

Findings

Two participants indicated that their office pays for a portion but not all of the expenditures for some of the functions that were covered in their B2 budget. For example, one office noted staff salaries were paid from the office's budget, but other staff benefits were paid from the county budget.

Recommendations

21. Consider revising the "Yes" and "No" column headers used in B3 (new Question B4) to "All," "Some," and "None" to facilitate reporting and reduce confusion for offices that pay for some, but not all, of a given expense.

BJS Decision

 BJS recommends leaving the item as Yes/No and not changing column headers as outlined in recommendation #21.

3.3 Section C—Workload

This section contains topics designed to measure workload. Of the 28 questions in Section C, 18 items were determined to be problematic, whereas 10 (C12, C16, C17, C18, C22, C23, C24, C25, C26, C27) tested well and thus have no recommendations. In this section were two sets of question series that especially generated some issues among participants (C1–C6, C13–C15), which will be evaluated in the context of each series.

C1. In 2023, were there any deaths that your office investigated or otherwise documented? Yes
○ No → SKIP to C13 on page 10
→C2. In 2023, what was the total number of deaths that your office investigated or otherwise documented? □ Don't know—This specific data was not tracked □ Deaths Check if estimate:
C3. In 2023, did any of the deaths reported in C2 meet your office's criteria to perform additional death investigation functions? Yes No → SKIP to C5 on page 9
►C4. In 2023, for how many deaths did your office perform death investigative functions, beyond documenting the report of the death? □ Don't know—This specific data was not tracked □ Deaths Check if estimate: □
C5. In 2023, did any of the deaths reported in C2 meet your office's criteria to determine cause and/or manner of death? Yes No → SKIP to C7
→C6. In 2023, for how many deaths did your office determine the cause and/or manner of death? □ Don't know—This specific data was not tracked
Check if estimate:

Round 1 Findings

Some participants had trouble with the terminology being used in C1/C3 to describe the different "levels" of deaths about which offices may be notified. The confusion did not appear to be around reporting for each "level," but rather that the terms being used to describe the different levels of reporting and investigative functions were confusing. In particular, "additional death investigation functions" and "otherwise documented" caused confusion for some participants.

Round 1 Recommendations

22. RTI recommends revising wording for clarity and providing clarifying instructions about what types of cases should be included in C1 to avoid confusion with "investigated or otherwise documented" terminology that was reported by participants:

- "In 2023, was your office notified of any deaths that were documented? *Include all cases that were reported to your office, even if jurisdiction was declined. Include cremation cases."*
- 23. RTI recommends revising wording for clarity to avoid confusion with "additional death investigation functions" reported by participants and providing clarifying examples for C3:
 - "In 2023, did any of the deaths reported in C2 meet your office's criteria to perform death investigation functions beyond documenting the initial notification of the death (e.g., identifying the decedent, responding to a scene, conducting supplemental interviews, notifying family, ordering an autopsy)?"
- 24. RTI recommends revising wording for clarity and providing clarifying instructions for C5:
 - "In 2023, did any of the deaths reported in C2 meet your office's criteria to determine cause and/or manner of death? <u>Do not include cases where another agency (e.g., State Medical Examiner) assumed jurisdiction of the death certificate."</u>
- 25. RTI recommends cascading these same wording changes appropriately into C2, C4, and C6, then cognitively testing the proposed changes in Round 2.

Round 2 Findings

Overall, changes implemented from Round 1 recommendations #22–25 performed well in Round 2 testing. However, one participant noted it would be helpful to clarify whether the examples presented in recommendation #23 for C3 were the only examples that should be included in the count, or whether they are just a sample and not an exhaustive list. Additionally, two participants shared that their counts for C4 and C6 would be the same, which generated some initial confusion that was quickly cleared once it was confirmed counts could be identical.

Final Recommendations

- 26. RTI recommends adding instructions to the start of this question series to provide context for the differing levels of investigations and how they can vary between offices, as well as a disclaimer regarding how counts may be the same:
 - "Next you will be asked about caseloads specific to 3 separate levels of involvement in death investigations. Acknowledging offices can have differing levels of involvement in their cases, the numbers reported in a given category may be the same as the number reported in the prior category. However, the answer reported in subsequent questions should always be lower than or equal to the prior question."

- 27. RTI recommends moving the list of examples (e.g., identifying the decedent, responding to a scene, conducting supplemental interviews, notifying family, ordering an autopsy) in C3 to appear directly after "death investigation functions" and adding the phrase "including but not limited to" and the word "or" to the list of examples used in Questions C3 and C4:
 - (C3) "In 2023, did any of the deaths reported in C2 meet your office's criteria to perform death investigation functions (including, but not limited to: identifying the decedent, responding to a scene, conducting supplemental interviews, notifying family, or ordering an autopsy) beyond documenting the initial notification of the death?"
 - (C4) "In 2023, for how many deaths did your office perform death investigative functions (e.g., identifying the decedent, or responding to a scene, or conducting supplemental interviews, or notifying family, or ordering an autopsy)?"

BJS Decision

- BJS suggested revisions to recommendation #26 for clarity. This change is reflected below and in the instrument.
 - This section has questions about three levels of death investigations.
 Depending on how your office categorizes cases/investigations, numbers reported in a given category may be the same as the number reported in a prior question.
- BJS suggested moving the e.g., list in C3 (from recommendation #27) to instead appear as a separate sentence after the question. This change is outlined below and has been implemented in the instrument.
 - For example, identifying the decedent, responding to a scene, conducting supplemental interviews, notifying family, or ordering an autopsy.

C7. In 2023, did your office receive any deaths from tribal lands? The term 'tribal lands' includes areas labeled Indian country, federal or state recognized reservations, trust lands, Alaska Native villages, and tribal communities. ———————————————————————————————————
No - Our office does not have tribal lands in our geographic
jurisdiction No - Our office receives deaths from tribal lands, but none were reported in 2023 SKIP to C13 on page 10
C8. In 2023, what was the total number of deaths from tribal lands that your office investigated or otherwise documented?
Don't know—This specific data was not tracked
, Deaths
Check if estimate:

Findings

The majority of participants understood this question set (C7–C8); however, one participant suggested wording clarification around "receive" and "from tribal lands" and noted "occurred on tribal lands" may be clearer.

Recommendations

28. RTI recommends changing C7 to increase clarity and understanding: "In 2023, was your office notified of any deaths that occurred on tribal lands?"

BJS Decision

• Recommendation #28 was accepted and implemented in the instrument.

C9. In 2023, did any of the deaths from tribal lands reported in C8 meet the criteria for your office to perform additional death investigation functions? Yes
○ No → SKIP to C11
► C10. In 2023, for how many deaths from tribal lands did your office perform investigative functions, beyond documenting the report of the death?
Don't know—This specific data was not tracked
Deaths
Check if estimate:

Findings

The majority of participants understood this question set (C9–C10), but one participant suggested clarifying "additional death investigation functions."

Recommendations

- 29. RTI recommends adding language to C9 for clarity. This change mirrors changes in recommendation #23 for C4:
 - "In 2023, did any of the deaths from tribal lands reported in C8 meet the criteria for your office to perform death investigation functions beyond documenting the initial notification of the death (e.g., identifying the decedent, respond to a scene, conducting supplemental interviews, notifying family, or ordering an autopsy)?"
- 30. Consider dropping C9/C10 to reduce burden and ask about only the number of tribal cases reported (C7/C8) and number of cases in which cause and manner of death were determined (C11/C12).

BJS Decision

Recommendations #29 and #30 were accepted and implemented in the instrument.

C11. In 2023, did any of the deaths from tribal lands reported in C8 meet your office's criteria
to determine cause and/or manner of death?
○Yes
○ No → SKIP to C13 on page 10

Findings

The majority of participants understood this question (C11); however, one participant suggested clarifying jurisdiction surrounding tribal lands because some cases might fall under their jurisdiction, but others may not.

Recommendations

31. RTI recommends adding instructional language at the end of this question. This mirrors recommendation #24 offered for C5:

"<u>Do not</u> include cases where another agency (e.g., State Medical Examiner) assumed jurisdiction to sign the death certificate."

BJS Decision

• Recommendation #31 was accepted and implemented in the instrument.

These next questions ask about autopsies your office ordered or performed in 2023.
C13. Did your office conduct medicolegal autopsies <u>internally</u> in 2023? Yes ○ No → SKIP to C15
►C14. In 2023, how many medicolegal autopsies did your office conduct internally? Include referrals from other medicolegal death investigation authorities but exclude any private or hospital autopsies. Include both partial and complete autopsies. Number of medicolegal autopsies conducted internally
C15. Did your office order any medicolegal autopsies to be conducted externally in 2023? ○ Yes ○ No → SKIP to C19

Round 1 Findings

Some participants had trouble with the terminology being used in C13-C15 to describe "internally" and "externally" conducted autopsies. This finding relates to the fact that in the medicolegal death investigation (MDI) community, these terms are often used to describe types of autopsies or examinations. Some participants did not realize that the question was asking about the location at which autopsies were being conducted and instead thought the question referred to types of autopsies or examinations being conducted. It did not appear the confusion was with reporting where autopsies are conducted, but rather the terms being used to describe autopsies conducted "in house" (i.e., internal) versus autopsies that were sent to other facilities to be conducted (i.e., external).

Round 1 Recommendations

- 32. RTI recommends revising wording for clarity and providing clarifying examples to C13, C14, and C15:
 - (C13) "Did your office conduct medicolegal autopsies <u>at your facility or facilities</u> (e.g., 'in-house') in 2023? *Include referrals from other medicolegal death investigation authorities but exclude any private or hospital autopsies. Include both partial and complete autopsies."*
 - (C14) "In 2023, how many medicolegal autopsies did your office conduct at your facility or facilities (e.g., 'in-house')?"
 - (C15) "Did your office order any medicolegal autopsies to be conducted <u>at a location</u> <u>other than your facility or facilities</u> in 2023? *Include autopsies sent to State Medical Examiners, other Medical Examiner/Coroner offices, and private facilities or hospitals."*
- 33. RTI recommends retesting these changes in Round 2.

Round 2 Findings

The recommended language from Round 1 testing was included in C13, C14, and C15 for Round 2 retesting. In Round 2, the majority of participants noted C13–C15 were straightforward and clear. However, for C16, one participant who uses a private facility for autopsy services was uncertain whether they should choose between the "private" or "other MEC office" response options because, technically, the private facility is "another MEC." When probed, this participant noted that adding "public" would help clarify which option they should select (i.e., private facility).

Final Recommendations

34.	. RTI recommends adding "public" in C16 to clarify that "another MEC" refers to public offices. This mirrors recommendation $\#13$ addressing a similar issue:
	"In 2023, where were the autopsies ordered by your office performed? Select all that
	apply.
	State Medical Examiner's Office
	Other public MEC office
	☐ Private facility or hospital"

BJS Decision

• Recommendation #34 was accepted and implemented in the instrument.

auto		es of dea	aths wher	fice <u>routinely</u> perform or order n determining cause and manner of
Ту	pe of death	Yes	No	
a.	Drug related	0	0	
b.	Elderly	0	0	
C.	Homicides	0	0	
d.	Motor vehicle deaths			
e.	Suicide by firearm	0	0	
f.	Suicide by hanging			

Findings

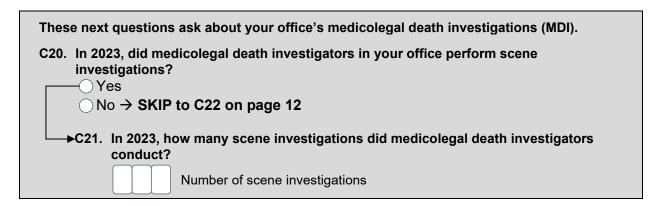
This question was not technically probed on, but one participant was uncertain whether it mattered about the type of autopsy ordered (e.g., for each type of death).

Recommendations

35. Consider clarifying autopsy terminology, and include language such as, "no matter the extent, excluding externals" or "exclude external examinations."

BJS Decision

Recommendation #35 was accepted and implemented in the instrument.



Findings

The majority of participants understood this question set (C20 and C21) and said they would have no trouble providing a number for C21, although two participants noted there should be an additional box for the number of scene investigations. One participant suggested asking about the "office" instead of specific "medicolegal death investigators" performing or conducting scene investigations.

Recommendations

- 36. RTI recommends changing this set of questions to instead read as follows:
 - (C20) "In 2023, did your office (e.g., medicolegal death investigators) perform scene investigations?"
 - (C21) "In 2023, how many scene investigations did your office (e.g., medicolegal death investigators) conduct?" This will make the questions more inclusive for Justices of the Peace.
- 37. RTI recommends adding an additional box to provide the number of scene investigations.

BJS Decision

Recommendations #36 and #37 were accepted and implemented in the instrument.

C28.	Did your office need and/or use assistance from other jurisdictions to respond to multiple fatality events in 2023 for functions your office would normally complete independently?
	○Yes
	○ No

Findings

This question was not technically probed on, but one participant pointed out they always have law enforcement present as assistance from "other jurisdictions," so this item could benefit from clarity (e.g., instead say, "from other MEC offices/jurisdictions").

Recommendations

38. Consider changing the question to reference MEC offices/jursidictions to read as follows:

"Did your office need and/or use assistance from other Medical Examiner/Coroneroffices/jurisdictions to respond to multiple fatality events in 2023 for functions your office would normally complete independently?"

BJS Decision

Recommendation #38 was accepted and implemented in the instrument.

3.4 Section D—Specialized Investigations

Section D contains seven items related to specialized investigations, including items related to unidentified human remains, sudden infant deaths, and toxicology testing. Participants had trouble with or had revision recommendations for two questions:, D2, and D7. The remaining questions (D3, D4, D5, D6) were well understood; thus, no recommendations for these measures are provided.

D1.	As of December 31, 2023, did your office have <u>any</u> records of remains that were unidentified for 60 days or more? Please include cases regardless of disposition of the
	remains.
	Yes
	No → SKIP to D7 on page 13

Findings

The majority of participants understood this question and its components: (1) defining unidentified remains as those "unidentified for 60 days or more" and (2) including cases "regardless of disposition of the remains." Most participants understood "regardless of disposition of the remains" to mean regardless of the status or condition of the remains. Examples provided included remains that were buried, cremated, or still at their facility.

However, one participant suggested the question clarify whether cases that were unidentified for 60 days or more, but are now resolved, should be included. This participant thought this section was referring to cases still unidentified and not resolved. One participant also asked whether this item was asking for cases from only 2023 or from all prior years.

Recommendations

- 39. Consider clarifying current "resolved" cases that were unidentified for 60 days or more to include instructions such as "include cases that were unresolved for 60 days or more even if subsequently identified after December 31, 2023."
- 40. Add clarifying instructions to "include the cases from all prior years."

BJS Decision

Recommendations #39 and #40 were accepted and implemented in the instrument.

D2. In what year was the oldest case of unidentified remains currently on record reported to
your office?

Findings

As with D1, the majority of participants understood this question and specified it would be easy for them to answer. The same participant who asked about whether resolved cases should be included was also uncertain whether they should report them in this question. One participant also commented on the sentence structure (i.e., "In what year...") and suggested revising for clarity and readability.

Recommendations

- 41. Consider clarifying now "resolved" cases that were unidentified for 60 days or more to include instructions such as "include cases that were unresolved for 60 days or more even if subsequently identified after December 31, 2023."
- 42. Consider rephrasing this question:
 "What is the year of your oldest case of unidentified remains on record?"

BJS Decision

• BJS decided to remove D1 above, and as such these recommendations (#41 and #42) were not implemented. This item has been removed in the instrument.

For suspected overdose deaths in 2023, did your office do the following for all deaths, some deaths, or not at all? Exclude delayed overdose deaths. Select one for each row.						
Action	All deaths	Most deaths	Some deaths	None/My office does not do this		
Go to scene of death if outside of hospital	0	0	0			
b. Order an autopsy	\bigcirc					
c. Draw toxicology specimens	0					
d. Run toxicology tests	\bigcirc	0	0			
e. Consult with a toxicologist before determining cause and manner of death	0	0	0	0		

Findings

Of the 13 participants who responded to this question, 10 thought the question was straightforward with no needed revisions, and of those 10, 4 interpreted "delayed overdose deaths" to mean a person spent some time in a hospital before death versus someone found deceased on scene due to overdose. Two other participants had similar interpretations and felt it referred to an overdose death that was not immediate or where death occurred after some amount of time had elapsed. Contrastingly, 3 participants sought further clarification. Of those three participants, two recommended defining "delayed overdose deaths," with one of those participants specifying it be defined as "greater than X hours."

Recommendations

43. Consider defining "delayed overdose deaths." For example, include a clarifying example such as "(e.g., hospital inpatients)."

BJS Decision

Recommendation #43 was accepted and implemented in the instrument.

3.5 Section E—Records and Evidence Retention

The eight items in Section E covered the infrastructure in place to manage and store records, such as computerized information management systems, evidence retention policies, and case record storage. Overall, this section performed well, but some participants sought clarification on four questions (E4, E6, E7, and E8). The remaining questions in the section were easily understood; thus, no recommendations are provided for those items (E1, E2, E3, and E5).

E4. Did your office have one for each row.	Did your office have a written retention schedule for the following items in 2023? Select one for each row.				
		Yes	No	Not applicable, our office does not produce or use this	
Case records		0	0	<u> </u>	
Forensic toxicolo	gy specimens	\circ			
Biological specin toxicology specin		0	0	0	
Non-biological ev	vidence	0	0	0	

Findings

The majority of participants noted they could easily answer this question. However, one participant was uncertain about the meaning of "written retention schedule" but correctly assumed it was referring to a policy for how long records are retained.

Recommendations

44. Consider including clarifying instructions in parentheses: "(i.e., a policy for how long records are retained)."

BJS Decision

- BJS recommendations a revision to recommendation #44 to appear as a separate sentence as shown below. This change has been implemented in the instrument.
 - Did your office have a written retention schedule for the following items in
 2023? A retention schedule is a policy for how long records are retained.

E6.	Upon the last administration change (e.g., appointment of a new medical examiner or election of a new coroner), did the current office administration receive comprehensive death records from the prior administration?
	○Yes
	○ No
	O Don't know

Findings

The majority of participants noted they could easily answer this question. However, one participant was somewhat confused by this question because their office has a case management system, and records are automatically transferred.

Recommendations

45. Consider including clarifying instructions:

"This may happen automatically with a case management system."

BJS Decision

Recommendation #45 was accepted and implemented in the instrument.

E7.	Does your office archive hard copies of your official investigative records and reports?
	○Yes
	○ No → SKIP to F1

Findings

The majority of participants understood this question and specified it would be easy for them to answer. One participant recommended specifying a calendar year for this query because they could not determine whether the question was referring to only the calendar year or the entire history of the office.

Recommendations

46. Consider adding "currently" to clarify the time frame this question is asking about.

BJS Decision

• Recommendation #46 was accepted and implemented in the instrument.

		•	
Lo	cation	Yes	No
a.	Government-owned office		
b.	Government-run or government-controlled storage facility		\bigcirc
C.	A regulated third-party storage facility (e.g., Iron Mountain)	0	
d.	Personal storage (including both home and rental		
e.	Other business or office (e.g., funeral home, hospital, law office)	0	0

Findings

The majority of participants understood this question and specified it would be easy for them to answer. As with E7, one participant recommended specifying a time frame (e.g., "currently"). Another participant thought a "government-owned office" and a "government-run or government-controlled storage facility" were the same.

Recommendations

- 47. Consider adding "currently" to clarify the time frame this question is asking about.
- 48. Consider revising "government-run or government-controlled storage facility," to better distinguish it from government-owned office storage; for example, "government-run or government-controlled *dedicated* storage facility."

BJS Decision

• Recommendations #47 and #48 were accepted and implemented in the instrument.

3.6 Section F—Resources

This section contains topics designed to collect data related to office resources, including access to the internet, body storage coolers, databases, trainings, mental health/wellness support for staff, emergency training, and multidisciplinary review teams. Of the 13 questions in Section F, 7 items (F2, F4, F6, F7, F10, F12, F13) were determined to be problematic, whereas 6 items (F1, F3, F5, F8, F9, F11) tested well and thus have no recommendations.

F2.	As of December 31, 2023, did your office have a work vehicle dedicated to death investigation functions, separate from personal vehicles?
	○ Yes○ No

Findings

The majority of participants noted this question made sense and that they could easily answer it, but one participant was confused by the term "death investigation functions."

Recommendations

49. RTI recommends adding an example to clarify "death investigation functions," such as "e.g., such as responding to scene or transporting remains or specimens."

BJS Decision

- BJS recommended the example statement from recommendation #49 instead be added as a separate sentence. This change is outlined below and has been implemented in the instrument.
 - As of December 31, 2023, did your office have a work vehicle dedicated to death investigation functions separate from personal vehicles? For example, using a personal vehicle to respond to a scene or transport

remains or specimens.

F4.	What is the official maximum capacity of the body storage cooler(s)?
	Maximum capacity

Findings

As with F2, the majority of participants understood F4. Two of the participants in particular understood the question but recommended some clarification around wording. One participant suggested clarifying ownership (i.e., who has access to the cooler or control over it) as some office may use body storage coolers of other offices. One participant suggested instead asking whether the office has emergency capacity to body storage coolers, or whether it has this capacity regularly.

Recommendations

50. RTI recommends changing the question:

"What is the official maximum capacity of your office's body storage cooler(s)?"

BJS Decision

• Recommendation #50 was accepted and implemented in the instrument.

n 2023, did staff at your office participate Select one for each row.	in any o	f the follo	owing trainings?
Training or resource	Yes	No	
a. Mass fatality investigation	0		
b. Disaster planning (e.g., National Incident Management System [NIMS])	0	0	
c. Bloodborne pathogens	0	0	
d. Proper lifting procedures	0		

Findings

The majority of participants found F6 easy to answer. However, one participant was confused as to whether it was asking about *any* of the office's staff, versus training taken by all or most all of the staff.

Recommendations

51. Consider clarifying the number of staff to be captured with this question, and change as follows:

"In 2023, did <u>any of the</u> staff at your office participate in any of the following trainings?"

BJS Decision

Recommendation #51 was accepted and implemented in the instrument.

F7.	In 2023, did your office provide mental health/wellness support (e.g., counseling, therapy, peer support) for staff?
	○Yes
	○ No

Findings

Although this question (F7) was not directly probed on, one participant found it slightly confusing and missed "for staff" at the end of this question because of the location of the health/wellness support examples.

Recommendations

52. RTI recommends putting the health/wellness support examples, "(e.g., counseling, therapy, peer support)," at the end of the question to avoid issues with "for staff" being missed.

BJS Decision

- BJS suggested including the "e.g. information" as a separate sentence from recommendation #52. This change is outlined below and has been implemented in the instrument. Recommendation #52 was accepted and implemented in the instrument.
 - In 2023, did your office provide mental health/wellness support for staff?
 For example, counseling, therapy, or peer support.

	n 2023, did your office participa ? Select one for each row.	ite in the fo	llowing mu	Itidisciplinary revie
Sį	pecialty area	Yes	No	My office did not have cases of this type in 2023
а.	Child fatality	0	0	
b.	Elderly/vulnerable adult fatality	\circ	0	0
C.	Overdose fatality	0	0	
d.	Maternal death	0	0	
e.	Suicide	0	0	0

Findings

This question (F10) was not technically probed on, but one participant found the instructions slightly confusing, because they were uncertain what to choose if they did not have that specific type of multidisciplinary review team in place in their jurisdiction. One participant suggested putting "My local jurisdiction fatality review team does not offer this" as the column header, instead of "My office did not have cases of this type." However, under this circumstance RTI feels the respondent should answer "no" if they do not offer services.

Recommendations

53. RTI recommends adding "Select no if this is not offered in your jurisdiction." to the instructions.

BJS Decision

Recommendation #53 was accepted and implemented in the instrument.

2023, did your office directly ovide referrals for these servi			ervices or
Support service	Service directly provided	Referral to another entity or organization	No
a. Advocates for families of victims	0	0	
b. Grief and bereavement services for survivors (e.g., counseling or therapy, homicide survivor groups)	0	0	0
c. On-scene support or advocacy for bystanders or other family and friends of deceased	0	0	•

Findings

The majority of participants found this question (F12) made sense and was easy to answer. One participant noted that the question makes sense but would add additional resources like connecting families to legal help or helping families in general, and turning this question into a "Select all that apply" instead of selecting one item in each row. One participant stated they have a team for support services but recognized not every office does; thus, this participant suggested rewording some of the columns to find middle ground between "directly provided" and "referral." This participant was also interested in capturing staffing counts for this question, including volunteers, for family support/care teams.

Recommendations

54. RTI recommends no changes at this time.

F13. As of December 31, 2023, did your office have a dedicated family support specialist or counselor for family and friends of the deceased?	
Yes	
○ No	

Findings

This question (F13) was not directly probed on, but one participant recommended adding the term "trained trauma" to "counselor."

Recommendations

55. RTI recommends changing the question:

"As of December 31, 2023, did your office have a dedicated family support specialist or trained trauma counselor for family and friends of the deceased?"

BJS Decision

• Recommendation #55 was accepted and implemented in the instrument.

4. Addendum Questions

In addition to the main CMEC questions outlined in the previous sections, cognitive interview participants were asked to review a series of questions being considered for the 2023 CMEC, as part of the main instrument or as an addendum. The addendum questionnaire included 14 items, including 4 (AD1, AD2, AD13, AD14) that were part of the 2018 CMEC and that the expert panel identified as candidates for removal. The addendum captured data on various topics, including (1) investigative and clinical procedure policies for determining sudden unexpected infant deaths and the use of the sudden infant death syndrome diagnosis, (2) collection of demographic data for decedents (i.e., biological sex, gender identity, and race/ethnicity), (3) procedures for disposition of unclaimed remains, (4) procedures for handling deaths of foreign nationals, (5) genetic screening/testing, (6) computed axial tomography/computed tomography (CAT/CT) and magnetic resonance imaging (MRI) access, and (7) knowledge of the Centers for Disease Control and Prevention's Collaborating Office for Medical Examiners and Coroners (COMEC) resources. Because of time limitations during interviews, addendum items were administered to 11 participants.

All 11 participants felt the two items related to infant deaths (AD1, AD2) were important to include. The majority of participants also felt the items collecting sex/gender (AD3, AD4) and race/ethnicity information (AD5/AD6) were important. Five participants felt the items that asked about procedures for unclaimed remains (AD7/AD8) and reporting deaths of foreign nationals (AD9) were important to the field, but others (n=6) felt less strongly about including these items. Seven participants felt items asking about genetic testing (AD10, AD11) were important, with one noting this was something that they were curious about. Only three participants were familiar with COMEC (AD12), and all three felt this item was important to include given the limited awareness of the resources it offers to MEC offices. Regarding the two items that collected data on access to CAT/CT (AD13) and MRI (AD14), only four participants felt these were important and relevant to the field, noting many offices do not have access to CAT/CT and MRIs given these technologies' cost.

When asked how likely they would be to complete optional addendum questions, all 11 participants noted they would be very likely to complete the additional items. Participants cited reasons such as the importance of the items, the addendum is short, and the items are straightforward/low burden.

RTI recommends fielding the addendum questionnaire if BJS is interested in these data. Alternatively, RTI recommends removing items BJS previously identified as being of lower importance when identifying critical items (e.g., F5, F6, F11) and adding AD1, AD2 (infant deaths), AD3/AD4 (sex/gender), and AD5/AD6 (race/ethnicity) to the main questionnaire. Participants cited these items as most important among those in the addendum.

BJS Decision

- BJS decided to move addendum items identified as important (AD1-AD8, AD13-AD14) into the main instrument as follows:
 - o AD1-AD2 (infant death items) were added to section D.
 - AD3-AD6 (sex, gender identify and race/ethnicity items) were added to section E. Race/Ethnicity items were updated to reflect minimum reporting categories outlined in SPD 15.
 - o AD7-AD8 (unclaimed remains, VA) were added to section E.
- AD9, AD10-AD12 were not added to the instrument.

5. Miscellaneous Topics

At the end of each interview, participants were debriefed with a series of questions designed to assess the overall performance of the instrument and to gauge participant burden and ability to provide requested data. Because of time limitations, 10 participants were administered debrief questions.

5.1 General Feedback and Relevance

In general, the cognitive interview participants were supportive of the CMEC, and multiple participants expressed gratitude to BJS for conducting this survey. The feedback during the debrief was generally very positive. All 10 participants who answered debrief items noted the survey was relevant and important to the field. They shared thoughts such as feeling like the survey was necessary, expressed the importance of getting insights of the community, and noted the CMEC was a "good way to get public resources disseminated" to MEC offices that need them. Many participants provided feedback that the survey overall was "straightforward" or "flowed smoothly."

5.2 Burden and Data Availability

Participants were asked how long they felt it would take them to complete the survey and whether they would have any issues providing requested data. The majority of participants noted they would be able to provide exact counts or estimates, and all participants were generally able to describe their processes for gathering data throughout the survey. When asked how long they felt the questionnaire would take to complete, participant responses ranged from 20 minutes to "a couple of hours," with an average of approximately 1 hour. The most common response was approximately 30 minutes. However, RTI does not recommend changing Office of Management and Budget estimates given these reported time ranges and the previous estimates from 2018. However, this feedback from participants does speak to the fact that they did not perceive the survey as burdensome.

Appendix A: Recruitment Materials

- A.1 Email Invitation
- A.2 Reminder Email
- A.3 Scheduling Email
- A.4 Confirmation and Meeting Invite Email
- A.5 Thank You Email

A.1 Email Invitation

Email Subject: Invitation to Participate in Interview for the 2023 Census of Medical Examiner and Coroner Offices (CMEC)

Dear [NAME],

The U.S. Department of Justice's Bureau of Justice Statistics (BJS) is preparing to conduct the third Census of Medical Examiner and Coroner Offices (CMEC) in 2024. This survey was last conducted in 2018 and is designed to gather data on administrative practices, personnel/staffing, budgets, workload, and resources of medical examiner and coroner offices (MEC).

With input from subject matter experts and MEC stakeholders, BJS and RTI international (BJS's data collection agent for this survey) have developed a new questionnaire and we are asking for your help to refine the instrument. The perspectives you share will give us the information we need to revise the CMEC instrument to reduce burden while producing meaningful, relevant, and timely statistics to serve the MEC community.

If you agree to assist, we will provide you with a copy of the revised survey and ask that you participate in a 60-minute interview with RTI's staff. During the interview, you and the RTI staff member will review the questionnaire together to discuss the clarity, meaning, and your understanding of the questions and answer categories. You will not be asked to complete the survey. BJS is merely testing to see if the questions and answer categories make sense, and if it would be possible for you to answer the questions. The feedback you provide will be carefully considered by BJS and used to improve the survey.

If you are interested in participating, please contact Kathryn Greenwell (kgreenwell@rti.org) at RTI International (also copied on this email) If you have questions or comments about the project in general, you can also contact Connor Brooks (connor.brooks@usdoj.gov; 202-598-1864) at BJS.

Thank you for your time and consideration of this important study. Sincerely,

A.2 Reminder Email

Email Subject: Reminder: Invitation to Participate in Interview for the Census of Medical Examiner and Coroner Offices (CMEC)

Dear [NAME],

Recently we emailed you to ask for your assistance in evaluating the revised Census of Medical Examiner and Coroner Offices (CMEC) survey from the Bureau of Justice Statistics (BJS) that will be conducted in 2024. We are asking for your feedback to help BJS refine the survey to reduce burden while producing meaningful, relevant, and timely statistics to serve the MEC community.

If you are interested in participating, please contact me, Kathryn Greenwell (kgreenwell@rti.org) at RTI International.

If you are willing to assist, we will send you a copy of the revised survey and ask you to participate in a 60-minute interview with RTI's staff. During the interview, you and the RTI staff member will review the questionnaire together to discuss the clarity, meaning, and your understanding of the questions and answer categories. You will not be asked to complete the survey. BJS is merely testing to see if the questions and answer categories make sense, and if it would be possible for you to answer the questions. The feedback you provide will be carefully considered by BJS and used to improve the survey.

If you have questions or comments about the project in general, you can also contact Connor Brooks (connor.brooks@usdoj.gov; 202-598-1864) at BJS.

Thank you for your time and consideration of this important study. Sincerely,

A.3 Scheduling Email

Dear [NAME],

Thank you for agreeing to participate in a Census of Medical Examiner and Coroner Offices (CMEC) Cognitive Interview. These interviews will be conducted via Teams. Would you be available at any of the following three times for that interview?

[LIST POTENTIAL TIMES]

Your interviewer will be [INTERVIEWER NAME], who will send you a calendar invite with confirmation and additional information. If you have any questions about the interview process or if none of these times work for you, you can contact me at [EMAIL].

Best,

A.4 Confirmation and Meeting Invite Email

Dear [NAME],

Thank you for agreeing to participate in a Census of Medical Examiner and Coroner Offices (CMEC) Cognitive Interview. We have scheduled your interview on [MM/DD/YYYY at 00:00 am/pm] with [INTERVIEWER NAME].

The interview will be conducted via Teams. To join the meeting, please click on the link below.

I am also attaching two documents for your review. The first document is a copy of the Census of Medical Examiner and Coroner Offices (CMEC) questionnaire. The attached survey instrument is being provided to you only for reference ahead of your scheduled interview session. You do not need to complete the survey before the scheduled interview, but please feel free to review it ahead of time to gather any preliminary thoughts or comments you would like to share with us. The second document provides more information about the study, your rights as a participant, and the measures we are taking to keep the feedback you share during your interview private.

If you have any questions about the interview process or attached documents, or if you need to reschedule for any reason, you can contact me at [EMAIL] or [PHONE].

Best,

[INTERVIEWER]

A.5 Thank You Email

Dear [NAME]:

On behalf of the Bureau of Justice Statistics (BJS) and RTI International, thank you for participating in the interviews to test the Bureau of Justice Statistics' draft instrument for the Census of Medical Examiner and Coroner Offices (CMEC) on DATE. We know that you have many demands on your time, so we are very grateful that you generously offered your time and expertise to assist us.

Your perspectives, along with those of the other subject matter experts, medical examiners and coroner stakeholders we interviewed, will help us refine the CMEC instrument in a way that will reduce burden while producing meaningful, relevant, and timely statistics to serve the community.

You have our deepest appreciation for your invaluable insight, time, and expertise, we extend our deepest appreciation.

Should you have any questions about CMEC or have further thoughts to share, please do not hesitate to contact us.

With many thanks,

Appendix B: Interview Materials

- **B.1** Consent Form
- **B.2** Round 1 Cognitive Interview Protocol
- **B.3** Round 2 Cognitive Interview Protocol

B.1 Consent Form

2023 Census of Medical Examiner and Coroner Offices Cognitive Testing Informed Consent

What is the purpose of the interview? The interview is part of a research study that is being conducted by the Bureau of Justice Statistics (BJS). The purpose of the interview is to receive feedback on the 2023 Census of Medical Examiner and Coroner Offices (CMEC).

What will happen during the testing? The interview will take approximately 60 minutes. You will be asked to read through the CMEC survey as if you were completing it on your own. During the survey I will stop you and ask you some questions about the survey and whether the questions make sense and are easy to answer. The interview will also involve recording your comments for later analysis. The recording will only be heard by authorized project staff and your name will never be used. You can choose not to be recorded. If the interview is conducted via Zoom you are welcome to have your camera on or off, whatever you are most comfortable with.

Why was I chosen? You were chosen because you are either a medical examiner, coroner justice of the peace, or key member of their staffs. Participants represent the types of people who will take part in the 2023 CMEC Survey.

Are there risks? There is no expected risk to participating in this study. Any information that is learned during this discussion will not be shared with anyone outside the CMEC project staff.

Are there benefits? There are no expected direct benefits to you for participating in this study.

What will I get for participating? By participating you will make an important contribution to the understanding of the nation's medicolegal death investigation system.

Do I have to participate? Participation in this interview is entirely voluntary. You can stop the interview at any time. You can also refuse to answer any question on any form.

Will this be kept private? Participants' names and other identifying information will not be used in any report or publication. Everything we learn will be kept private by BJS and RTI to the fullest extent of the law. Only project team members from RTI and BJS will be allowed access to this information or observe any of the interviews. You can choose not to be audio recorded or observed.

Whom do I call if I have questions? If you have any questions about the study, you can call the project director, Hope Smiley-McDonald. Her number is 919-485-5743. If you have any questions about your rights in taking part in this study, you can call RTI's Office of Research Protection at 1-866-214-2043 (this is a toll-free call).

By participating in this interview, you consent to BJS and RTI using your answers to inform the survey. You are also acknowledging receipt of this consent form. If there is any part of this form that is not clear to you, be sure to ask about it before you consent.

B.2 Round 1 Cognitive Interview Protocol

Cognitive Interview Protocol

Participant Number
Date of Interview
Interviewer

[ASK PARTICIPANT IF THEY WERE ABLE TO REVIEW THE INFORMED CONSENT SENT TO THEM PRIOR TO THE INTERVIEW, AND IF THEY HAVE ANY QUESTIONS. CONFIRM THAT THE PARTICIPANT CONSENTS TO INTERVIEW AND RECORDING. THEN READ/PARAPHRASE THE FOLLOWING TO THE PARTICIPANT]:

On behalf of the Bureau of Justice Statistics and the project team at RTI, thank you again for participating in the testing of the 2023 Census of Medical Examiner and Coroner Offices (CMEC). We're talking today because we want to see how well people understand these questions and how they might answer them. This interview is voluntary; you can skip any question or stop the interview at any point. The answers you provide will not be shared outside the RTI/BJS team.

During this process, you and I will go through the survey items together so that I can understand how you would answer them. I will ask that you read certain questions aloud. Please tell me anything that comes to mind as you read the question. You do not need to provide specific answers or numbers at this point. For those questions for which you would need to do additional research, please tell me whether you would be able to answer the question and, if so, how long it would take to get the answer. However, please let me know if you would not be able to provide exact numbers when we are actually collecting these data next year.

As you are reviewing the questionnaire, please read/think aloud so that I can better follow where you are in the survey. After reviewing a question, I may stop you and ask how you came up with your answer, or what specifically you were thinking about. These questions will help me understand your thought process when answering, which will help us determine if any changes need to be made to the question. If there is a question that you'd like to provide feedback on that I do not ask about, please let me know.

There are no right or wrong answers to the questions I ask. Our goal is to make sure that the questions make sense and that people like yourself can answer them and follow the questionnaire instructions easily. You can help us by pointing out anything you find confusing or unclear. If something doesn't make sense, please let me know. Or, if you're not sure about your response, please tell me that too.

Do you have any questions? [ANSWER ANY QUESTIONS]

Ok, let's begin. First, I have a few general questions about you.

- 1. What is your job title?
- 2. How long have you been in this position? (*If needed*) How long have you been at your agency?

[LET THE PARTICIPANT KNOW THAT YOU'D LIKE TO SHARE THE INSTRUMENT ON THE SCREEN. CONFIRM IF THEY CAN VIEW THEIR SCREEN AND/OR IF THEY HAVE THE COPY SENT TO THEM AVAILABLE TO REFERENCE DURING THE INTERVIEW. BEGIN SCREEN SHARE TO DISPLAY THE INSTRUMENT LOCATED HERE: \\RTPNFIL02\cmec\Instrumentation\Cognitive
Testing\Interview Materials\CMEC 2023 PAPI.docx]

[INTERVIEWER: IF JP CASE, ONLY ADMINISTER THE FOLLOWING PROBE THROUGHOUT PROTOCOL TO ASSESS ABILITY TO RESPOND: Would you be able to answer this/these question(s)? Why/why not?]

SURVEY INTRODUCTION

This survey is intended to collect information about your office's death investigation functions. If your office is embedded within another department or type of office (e.g. law enforcement agency, mortuary), please only report details about the resources and practices related to death investigation functions.

1. What does the term "death investigation functions" mean to you? (If needed) Can you provide examples of "death investigation functions"?

ADMINISTRATION

A1. What is the title of the head position in your office (e.g., Chief Medical Examiner, Coroner)

	and	d who holds that title?
	Titl	e:
	Firs	st Name: Last Name:
A2.	Wł	nich of the following best describes your death investigation office?
	A.	Coroner office
	B.	Medical examiner officer
	C.	Law enforcement coroner office (e.g., Sheriff-coroner)
	D.	District attorney or prosecutor office
	E.	Justice of the peace
	F.	My office does not investigate deaths \rightarrow Skip to the end of the survey and return in the enclosed

G. Other medicolegal death investigation office (please specify):_____

envelope

	В.	County office
		District/regional office
	D.	State office
\4	A. B. C. D. E.	nich, if any, of the following provides administrative oversight of your office? Public health agency (e.g., department or division of public health) Law enforcement agency (e.g., department or division of public safety) Government attorney's office (e.g., district attorney, attorney general) Department or division of forensic science Court system My office does not report to another agency
	G.	Other (please specify):
ſ	1.	In your own words, what is this question asking?
	۷.	(If needed/not answered in probe 1) What does the phrase "provides administrative oversight" mean to you?
	3.	(If Justice of the Peace Office) What option would you select for this question? Why would you select that option?
۹5	. Is y	your office located within another business, such as a funeral home? O Yes O No
46		es your office have authority over multiple jurisdictions? For example, your office is the edical examiner or coroner for multiple counties or districts. Yes No
46	Dis	What jurisdictions does your office have authority over (e.g., County, State, or Judicial trict)? If you have authority over multiple jurisdictions, enter a comma between each isdiction.
Ī	1.	How would you answer question A6 and A6a?
	2.	In your own words, what do you think question A6 is asking? What about A6a?
	3.	(If needed/not answered in probe 2) What does "have authority over multiple jurisdictions" mean? Can you think of any examples?

A3. What level of government best describes your office?

A. City office

The following section collects information about staff that support death investigation functions at your office and includes questions about Autopsy Pathologists, Coroners/non-physician Medical Examiners/non-autopsy physicians, Death Investigators, other scientific support staff (e.g., Forensic Toxicologists, Forensic Analysts), ancillary staff (e.g., drivers, photographers, evidence technicians), and administrative staff (e.g., administrative assistants, record clerks, secretaries).

If an employee fills more than one role, please include them in their primary role.

[INTERVIEWER: STOP THE PARTICIPANT AFTER THEY READ THIS INTRO PARAGRAPH AND ADMINISTER PROBES.]

- 1. Is there anything confusing or unclear about these instructions?
- 2. What do you think we mean by the term "ancillary staff"? What about "administrative staff"? Who might you include under these categories?

For questions in this section, please consider the following definitions:

- **Full-time employees:** Staff directly employed by your office who have regularly scheduled hours and work on average 30 hours or more per week on death investigation functions.
- Part-time employees: Staff directly employed by your office who have regularly scheduled hours and work on average fewer than 30 hours per week on death investigation functions.
- **Consultants/Contractors:** Those who work for another company or as a consultant and are hired to work for your office, including locums tenens.
- On-call employees: Those who do not have regularly scheduled hours and only work on an as needed basis.
- Vacancies: Positions for which your office has funds to staff but remain unfilled or open.
- 1. Is there anything confusing or unclear about these definitions?
- 2. Are any employee/staff types missing from the list of definitions that you think should be included?
- 3. In your own words, what is the difference between "on-call employees" and "part-time employees"?
- 4. What does the term "locums tenens" mean to you? (*If needed*) Which category of employees would locums tenens fall under at your office, if applicable?

Autopsy Pathologists

		ocluded December 31, 2023? Please include all full-time, part-time, part-time						
		O Yes						
	O No → Skip to A13							
	1.	there anything confusing or unclear about this question?						
		A8. How many Autopsy Pathologists did your office employ/contract in the following categories during the pay period that included December 31, 2023? Enter 0 if your office does not have staff in given category.						
		 a. Full-time employees: b. Part-time employees: c. Consultant/contractors/locum tenens: d. On-call employees: 						
	1.	What would be involved in obtaining these numbers for your office?						
	2.	(If needed) How long do you think it would take?						
	3.	Are there any categories for which your office would have trouble providing counts?						
	4.	Are there any scenarios here where you would not know what category to put an employee (e.g., fits in multiple types, missing type)?						
AS	the Am	ow many full-time and part-time Autopsy Pathologists directly employed by your office in e pay period that included December 31,2023 were certified in forensic pathology by the nerican Board of Pathology (ABP)? Do not count contractors, consultants, or locum tenens. none, enter 0.						
		Number of <u>full-time</u> autopsy pathologists certified by ABP in forensic pathology:						
		Number of <u>part-time</u> autopsy pathologists certified by ABP in forensic pathology:						
A1	P	low were Autopsy Pathologists that performed autopsies for your office paid in 2023? lease include full-time and part-time employees and consultants/contractors/locums enens. Select all that apply.						
		 ☐ Hourly ☐ Salary ☐ Stipend ☐ Fee-for-service (paid by case, call, day or other fee structure) → Skip to Question A12 						

A7. Did your office employ/contract any Autopsy Pathologists during the pay period that

- 1. When answering this question, which staff would you include?
- 2. How easy or difficult would it be to answer this question for Autopsy Pathologists?
- 3. What does the term "stipend" mean to you? (If needed) Can you think of any examples?)
- 4. What does the term "fee-for-service" mean to you? (If needed) Can you think of any examples?)
- 5. What do you think we mean by "paid by case, call, day, or other structure"?

A11. What was the average annual salary (or annual salary equivalent if paid hourly or by stipend) for <u>full-time</u> and <u>part-time</u> Autopsy Pathologists employed by your office as of December 31, 2023?

	Annual Salary or Equivalent	Not Applicable
a. Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)		
b. Average annual salary part-time (or salary equivalent if paid hourly or by stipend)		

- 1. When answering this question, which staff would you include?
- 2. What do you think we mean by the phrase "annual salary or equivalent"?
- 3. What would be involved in providing these annual salary or equivalent figures for your office?
- 4. (If hourly or stipend pay type selected) Could you describe how you might come up with these figures for staff paid hourly/by stipend?

A12. Did your office employ/contract any certified Pathologists Assistants to perform autopsies
separate from assisting in an Autopsy Technician role, during the pay period that included
December 31, 2023?

O	Yes

O No

Coroners/non-physician Medical Examiners/non-autopsy physicians

A1	al al	olid your office employ/contract any Coroners/non-physician Medical Examiners/non-utopsy physicians during the pay period that included December 31, 2023? Please include all full-time, part-time, consultants/contractors, and on-call employees. If an employee fills more than one role, please put them in their primary role. ○ Yes ○ No → Skip to Question A17
	1.	Is there anything confusing or unclear about this question?
	2.	In this question we use the term "Coroners/non-physician Medical Examiners/non-autopsy physicians." Who would you include in this question?
	3.	Is there an easier term or terms that we should consider to describe this group?
		A14. How many Coroners/non-physician Medical Examiners/non-autopsy physicians did your office employ/contract in the following categories during the pay period that included December 31, 2023? Enter 0 if your office does not have staff in given category. 1. Full-time: 2. Part-time: 3. Consultant/contractors: 4. On-call employees:
	-	ASKED PREVIOUSLY, ONLY ADMINISTER PROBES IF PARTICIPANT CONFIRMS PROCESS IS FFERENT]
	1.	(If probes already administered in prior section): Would the process for obtaining these staffing numbers be different than what you described for Autopsy Pathologists?
	IF Y	YES TO PROBE 1 <u>OR</u> NOT PREVIOUSLY ASKED:
	2.	What would be involved in obtaining these numbers for your office? (<i>If needed</i>) How long do you think it would take?
	3.	Are there any employee categories for which your office would have trouble providing counts?
	4.	Are there any scenarios here where you would not know what category to put an employee (e.g., fits in multiple types, missing type)?
A1		

2. How easy or difficult would it be to answer this question for Coroners/non-physician Medical Examiners/non-autopsy physicians?

[ONLY ADMINISTER IF NOT ASKED PREVIOUSLY]

- 1. What does the term "stipend" mean to you? (If needed) Can you think of any examples?)
- 2. What does the term "fee-for-service" mean to you? (If needed) Can you think of any examples?)
- 3. What do you think we mean by "paid by case, call, day, or other structure"?

A16. What was the average annual salary (or annual salary equivalent if paid hourly or by stipend) for <u>full-time</u> and <u>part-time</u> Coroners/non-physician Medical Examiners/non-autopsy physicians employed by your office as of December 31, 2023?

	Annual Salary or Equivalent	Not Applicable
a. Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)		
b. Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)		

[ASK ALL]

1. When answering this question, which staff would you include?

[IF PROBES ALREADY ADMINISTERED FOR THIS QUESTION IN PRIOR SECTION]:

2. Would the process for obtaining these figures be different for Coroners/non-physician Medical Examiners/non-autopsy physicians? IF YES: What would be involved in providing these annual salary or equivalent figures for your office?

[ONLY ADMINISTER IF NOT ASKED PREVIOUSLY]

- 1. What do you think we mean by the phrase "annual salary or equivalent"?
- 2. What would be involved in providing these annual salary or equivalent figures for your office?
- 3. (If hourly or stipend pay type selected) Could you describe how you might respond or come up with these figures for staff paid hourly/by stipend?

Death Investigators

A17. Did your office employ/contract any Death Investigators during the pay period that included December 31, 2023? Please include full-time, part-time, consultants/contractors, and on call employees. If an employee fills more than one role, please put them in their primary role. ○ Yes ○ No → Skip to Question A22
1. Is there anything confusing or unclear about this question?
A18. How many Death Investigators did your office employ/contract in the following categories during the pay period that included December 31, 2023? Enter 0 if your office does not have staff in given category.
a. Full-time: b. Part-time: c. Consultant/contractors: d. On-call employees:
[IF ASKED PREVIOUSLY, ONLY ADMINISTER PROBES IF PARTICIPANT CONFIRMS PROCESS IS DIFFERENT]
 (If probes already administered in prior section): Would the process for obtaining these numbers be different than what you described for [Autopsy Pathologists; Medical Examiner/Coroners]? IF YES TO PROBE 1 OR NOT PREVIOUSLY ASKED:
2. What would be involved in obtaining these numbers for your office? (<i>If needed</i>) How long do you think it would take?
3. Are there any employee categories for which your office would have trouble providing counts?
4. Are there any scenarios here where you would not know what category to put an employee (e.g., fits in multiple types, missing type)?
A19. How many Death Investigators directly employed by your office during the pay period that included December 31, 2023 are certified by the American Board of Medicolegal Death Investigators (ABMDI)? Full-time Death Investigators certified by ABMDI: Part-time Death Investigators certified by ABMDI:
A20. How were Death Investigators at your office paid in 2023? ☐ Hourly ☐ Salary ☐ Stipend ☐ Fee-for-service (paid by case, call, day, or other fee structure) → Skip to Question A22

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IΑ	.5K	A	LL

- 3. When answering this question, which staff would you include?
- 4. How easy or difficult would it be to answer this question for Death Investigators?

[ONLY ADMINISTER IF NOT ASKED PREVIOUSLY]

- 1. What does the term "stipend" mean to you? (If needed) Can you think of any examples?
- 2. What does the term "fee-for-service" mean to you? (If needed) Can you think of any examples?
- 3. What do you think we mean by "paid by case, call, day, or other structure"?
 - A21. What was the average annual salary (or annual salary equivalent if paid hourly or by stipend) for <u>full-time</u> and <u>part-time</u> Death Investigators employed by your office as of December 31, 2023?

	Annual Salary or Equivalent	Not Applicable
a. Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)		
b. Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)		

[ASK ALL]

1. When answering this question, which staff would you include?

[IF PROBES ALREADY ADMINISTERED FOR THIS QUESTION IN PRIOR SECTION]:

1. Would the process for obtaining these figures be different than what you described for [Autopsy Pathologists; Coroner/Medical Examiners]? IF YES: What would be involved in providing these annual salary or equivalent figures for your office?

[ONLY ADMINISTER IF NOT ASKED PREVIOUSLY]

- 1. What do you think we mean by the phrase "annual salary or equivalent"?
- 2. What would be involved in providing these annual salary or equivalent figures for your office?
- 3. (If hourly or stipend pay type selected) Could you describe how you might respond or come up with these figures for staff paid hourly/by stipend?

A22.	Did your	office h	nave vo	lunteer	Death	Investigators	in	2023?
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O Yes

 \bigcirc No \rightarrow Skip to Question A24

A23. How many volunteer Death Investigators did your office have in 2023? ______

Scientific Support and Ancillary Staff

A2	4. During the pay period that included December 31, 2023, did your office employ/contract
	scientific support staff (e.g., Forensic Toxicologists, Forensic Analysts or Chemists, Autopsy
	Technicians, Pathologists Assistances, or other scientific investigative support staff) or
	ancillary staff (e.g., drivers, photographers, evidence technicians) with roles specific to death
	investigation functions? <i>Include full-time, part-time, consultants/contractors, and on call</i>
	employees.

O Yes			
O No →	Skip to	Questio	n A26

1. Is there anything confusing or unclear about this question?

A25. How many scientific support or ancillary staff with roles specific to death investigation functions did your office employ in the following categories during the pay period that included December 31, 2023?

a.	Full-time:	
b.	Part-time:	
c.	Consultant/contractors:	
d.	On-call employees:	

[IF ASKED PREVIOUSLY, ONLY ADMINISTER PROBES IF PARTICIPANT CONFIRMS PROCESS IS DIFFERENT]

1. (If probes already administered in prior section): Would the process for obtaining these numbers be different than what you described for [Autopsy Pathologists; Medical Examiner/Coroners; Death Investigators]?

IF YES TO PROBE 1 OR NOT PREVIOUSLY ASKED:

- 2. What would be involved in obtaining these numbers for your office? (*If needed*) How long do you think it would take to get these numbers?
- 3. Are there any employee categories for which your office would have trouble providing counts?
- 4. Are there any scenarios here where you would not know what category to put an employee (e.g., fits in multiple types, missing type)?

Administrative Staff

A26. During the pay period that included December 31, 2023, did your office employ/cont	tract
any Administrative Staff (e.g., administrative assistants, records clerks, secretaries) that	it
directly supported death investigation functions? Please include full-time, part-time,	
consultants/contractors, and on call employees.	
O Yes	
○ No → Skip to Question A28	

1. Is there anything confusing or unclear about this question?

A27. How many Administrative Staff (e.g., administrative assistants, records clerks, secretaries) did your office employ/contract in the following categories during the pay period that included December 31, 2023?

a.	Full-time:	
b.	Part-time:	
c.	Consultant/contractors:	
d.	On-call employees:	

[IF ASKED PREVIOUSLY, ONLY ADMINISTER PROBES IF PARTICIPANT CONFIRMS PROCESS IS DIFFERENT]

1. (If probes already administered in prior section): Would the process for obtaining these numbers be different than what you described for [Autopsy Pathologists; Medical Examiner/Coroners; Death Investigators; Scientific Support/Ancillary staff]?

IF YES TO PROBE 1 OR NOT PREVIOUSLY ASKED:

- 2. What would be involved in obtaining these numbers for your office? (*If needed*) How long do you think it would take to get these numbers?
- 3. Are there any employee categories for which your office would have trouble providing counts?
- 4. Are there any scenarios here where you would not know what category to put an employee?

A28. How many <u>vacant or unfilled</u> positions did your office have for each of the following roles during the pay period that included December 31, 2023? *If none, enter 0*

Role	Vacant Positions
Autopsy Pathologists:	
Coroners/non-physician Medical Examiners/non-autopsy physicians:	
Death Investigators:	

Section Debrief:

 For all the questions in section A, did you think back to the definitions of the different staff types from the beginning of this section?

EXPENDITURES AND FUNDS

B1. On what month and day does your office's fiscal year begin (e.g., 01/01, 07/01, 10/01)?
Day Month
 B2. How much did your office spend on death investigation functions in the most recently completed fiscal year? If your office is part of a larger organization (e.g., sheriff-coroner), only include expenses
related to death investigation functions. If your office only functions as an MDI office, include your total expenses.
 Include expenses paid by your office, such as, for autopsies, personnel, supplies and equipment, training, transportation, toxicology/ancillary testing, indigent burial, and body storage expenses related to MEC functions
Total expenditures: O If estimate, check here
1. In this question, what do you think we mean by the instruction "If your office is part of a larger organization (e.g., sheriff-coroner), only include expenses related to death investigation functions"?
2. What expenses would you include in this question?
3. How easy or difficult will it be for your office to come up with this number? (If needed) How would you come up with your answer to this question?
4. (If office is part of larger organization) How easy or difficult would it be for your office to separate out death investigation expenses from larger budgets/expenditures?
5. (If difficult for respondent to answer) Did you notice the estimate check box? Would you use it? Why or why not?

B3. Which of the following functions of your office are included in the total expenditures reported in B2? *Please select all that apply.*

Expense		Yes	No
a.	Autopsies	\circ	0
b.	Personnel	\circ	\circ
C.	Supplies and equipment	0	0
d.	Training	0	0
e.	Transportation	\circ	0
f.	Toxicology	\bigcirc	\bigcirc

g.	Indigent Burial	\bigcirc	\circ
h.	Body storage		\bigcirc
i.	Other (please specify)	\circ	0

B4. In your most recently completed fiscal year did your office receive funding from any of the following? *Select one for each row.*

				Don't	My office is not permitted to collect funds
Fu	nding/revenue source	Yes	No	Know	from this source
a.	American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF)	0	0	0	0
b.	Consultant fees/referral fees (e.g., autopsies, neuropathology)	0	0	0	0
c.	Cremation waiver/authorization or permit fees	0	0	0	0
d.	Opioid Settlement Funds	0	0	0	0
e.	Report/record fees	0	0	0	0

B5. In 2023, did staff in your office use their own personal resources, or spend personal, out-of-pocket money for which there was no reimbursement, on any of the following? *Select one for each row.*

Expense		Yes	No
j.	Personal protective equipment (PPE)	0	0
k.	Specimen storage	0	0
I.	Certifications/continuing education	0	0
m.	Transportation (not including commute to work)	0	0
n.	Other official work supplies	0	0

1.	What do	you think	this q	uestion	is	asking?
----	---------	-----------	--------	---------	----	---------

WORKLOAD

C1	. In	2023, were there any deaths that your office investigated or otherwise documented? O Yes
		O No → Skip to Question C13
		C2. In 2023, what was the total number of deaths the your office that your office investigated or otherwise documented? Number of deaths reported: O If estimate, check here O Don't know—This specific data was not tracked
	1.	What do you think C1 and C2 are asking? (If needed) What does "that your office investigated or otherwise documented" mean to you?
	1.	(If yes to C1) How easy or difficult would it be to provide this number? What would you have to do to come up with this number in C2?
	2.	(If difficult for respondent to answer) Did you notice the estimate check box? Would you use it? Why or why not?
		2023, did any of the deaths reported in C2 meet your office's criteria to perform onal death investigation functions? ○ Yes ○ No → Skip to Question C5
		C4. In 2023, for how many deaths did your office perform death investigative functions, beyond documenting the report of the death? Number of deaths investigated: O If estimate, check here O Don't know—This specific data was not tracked
	1.	What do you think C3 and C4 are asking? (If needed) What does "meet your office's criteria to perform additional death investigation functions" mean to you?
	2.	(If needed) Is there a difference between C1 and C3? Why or why not?
	3.	(If yes to C3) How easy or difficult would it be to provide this number in C4? What would you have to do to come up with this number?

		2023, did any of the deaths reported in C2 meet your office's criteria to determine cause or manner of death? ○ Yes ○ No → Skip to Question C7	
		C6. In 2023, for how many deaths did your office determine the cause and/or manner of death?	
		Number of deaths where cause and manner were determined: O If estimate, check here O Don't know—This specific data was not tracked	
	1.	What do you think C5 and C6 are asking? (If needed) What does "meet your office's criteria to determine cause and/or manner of death" mean to you?	
	2.	(If yes to C5) How easy or difficult would it be to provide this number in C6? What would you have to do to come up with this number?	
are	eas l	2023, did your office receive any deaths from tribal lands? The term 'tribal lands' includes labeled Indian Country, federal or state recognized reservations, trust lands, Alaska Native es, and tribal communities.	
		O Yes O No - Our office <u>does not</u> have tribal lands in our geographic jurisdiction O No - Our office receives deaths from tribal lands, but none were reported in 2023	on C13
		C8. In 2023, what was the total number of deaths from tribal lands that your office investigated or otherwise documented? Reported deaths from tribal lands: O If estimate, check here O Don't know—This specific data was not tracked	
	1.	What do you think C7 and C8 are asking? (If needed) Is there anything confusing or unclear about C7 or C8?	
	2.	(If yes to C7): How easy or difficult would it be to provide this number in C8? What would you have to do to come up with this number?	
		2023, did any of the deaths from tribal lands reported in C8 meet the criteria for your to perform additional death investigation functions? ○ Yes ○ No → Skip to Question C11	
		C10. In 2023, for how many deaths from tribal lands did your office perform investigative functions, beyond documenting the report of the death? Investigated deaths from tribal lands:	

		O If estimate, check here O Don't know—This specific data was not tracked
	1.	What do you think C9 and C10 are asking?
	2.	(If yes to C9) How easy or difficult would it be to provide this number in C10? What would you have to do to come up with this number?
C11. In 2023, did any of the deaths from tribal lands reported in C8 meet your office's criter determine cause and/or manner of death? ○ Yes ○ No → Skip to Question C13		
		C12. In 2023, for how many from tribal lands deaths did your office determine the cause and/or manner of death? Number of deaths where cause and manner were determined: O If estimate, check here O Don't know—This specific data was not tracked
	1.	What do you think C11 and C12 is asking?
	2.	(If yes to C11) How easy or difficult would it be to provide this number in C12? What would you have to do to come up with this number?
These next questions ask about autopsies your office ordered or performed in 2023.		
C1	.3. D	id your office conduct medicolegal autopsies <u>internally</u> in 2023? ○ Yes ○ No → Skip to Question C15
	1.	What do you think we mean by "conduct internally"?
		C14. In 2023, how many medicolegal autopsies did your office conduct <u>internally</u> ? Include referrals from other medicolegal death investigation authorities but exclude any private or hospital autopsies. Include both partial and complete autopsies
		Number of medicolegal autopsies conducted internally:
	1.	(If yes to C13) How easy or difficult would it be to provide this number in C14? What would you have to do to come up with this number?
C15. Did your office order any medicolegal autopsies to be conducted <u>externally</u> in 2023? ○ Yes ○ No → Skip to Question C19		

1.	What do you think we mean by "	"conduct externally"? (If ne	eded) Would adding (e.g.,			
1	at another location than your of	• • •				
	C16. In 2023, where were autopsi					
	select all that apply.					
	 ☐ State Medical Examiner's offi ☐ Other MEC office ☐ Private facility or hospital 	ice If your office does not perform autopsies →	use private facilities or hospita Skip to Question C18			
	C17. How many autopsies were p	erformed for your office by	private facilities/hospitals			
	in 2023?					
	Number of autopsies performed a	at private facilitates/hospita	ls			
1.	What do you think we mean by t	the term "ordered" as it is u	ised in C16?			
2.	(If C16 = private facility or hospit	al) How easy or difficult wo	ould it be to provide this			
	number in C17? What would you	ı have to do to come up wit	h this number?			
	ow far from your office is the auto	6 111	cc:			
	O 50-100 miles					
for the	O Greater than 100 miles 2023, as part of practice or policy following types of deaths when de					
or the	O Greater than 100 miles a 2023, as part of practice or policy be following types of deaths when decertificate?	etermining cause and mann	er of death and signing the			
or the	O Greater than 100 miles 2023, as part of practice or policy following types of deaths when decertificate? Type of death	etermining cause and mann Yes	er of death and signing the			
or the	O Greater than 100 miles a 2023, as part of practice or policy following types of deaths when decertificate? Type of death a. Drug related	etermining cause and mann Yes O	er of death and signing the No O			
or the	O Greater than 100 miles 2023, as part of practice or policy following types of deaths when decertificate? Type of death	etermining cause and mann Yes	er of death and signing the			
or the	O Greater than 100 miles 2023, as part of practice or policy following types of deaths when decertificate? Type of death a. Drug related b. Elderly	Yes O	No O			
or the	O Greater than 100 miles 2023, as part of practice or policy following types of deaths when decertificate? Type of death a. Drug related b. Elderly c. Homicides	Yes O O	No O O O			
for the	O Greater than 100 miles 2023, as part of practice or policy following types of deaths when decertificate? Type of death a. Drug related b. Elderly c. Homicides d. Motor vehicle deaths	Yes O O O	No O O O O O			
for the	O Greater than 100 miles 2023, as part of practice or policy of following types of deaths when decertificate? Type of death a. Drug related b. Elderly c. Homicides d. Motor vehicle deaths e. Suicide by firearm f. Suicide by hanging	Yes O O O O O O	No O O O O O O O O O O O O O O O O O O O			
for the death	O Greater than 100 miles 2023, as part of practice or policy of following types of deaths when decertificate? Type of death a. Drug related b. Elderly c. Homicides d. Motor vehicle deaths e. Suicide by firearm f. Suicide by hanging What do you think this question	Yes O O O O is asking?	No O O O O O O O O O O O O O O O O O O O			
for the death 1. 2.	O Greater than 100 miles 2023, as part of practice or policy of following types of deaths when decertificate? Type of death a. Drug related b. Elderly c. Homicides d. Motor vehicle deaths e. Suicide by firearm f. Suicide by hanging What do you think this question What does "routine practice or p	Yes O O O is asking? policy" mean to you in this o	No O O O O O O O O O O O O O O O O O O O			
for the death 1. 2.	O Greater than 100 miles 2023, as part of practice or policy of following types of deaths when decertificate? Type of death a. Drug related b. Elderly c. Homicides d. Motor vehicle deaths e. Suicide by firearm f. Suicide by hanging What do you think this question	Yes O O O is asking? policy" mean to you in this o	No O O O O O O O O O O O O O O O O O O O			
1. 2. These	O Greater than 100 miles 2023, as part of practice or policy of following types of deaths when decertificate? Type of death a. Drug related b. Elderly c. Homicides d. Motor vehicle deaths e. Suicide by firearm f. Suicide by hanging What do you think this question What does "routine practice or p	Yes O O O O is asking? policy" mean to you in this odicolegal death investigation	No O O O O O O O O O O O O O O O O O O O			

	C21. In 2023, how m conduct? Number of s	nany scene inve	_	licolegal death	investigato	ors
	How easy or difficu to come up with this	lt would it be t		nber? What wo	ould you h	ave to do
	2. For those functions the ponsible for performing			•	s <u>primarily</u>	
Di	uty	Autopsy Pathologists	Coroners/Non- physician Medical examiner/non- autopsy physicians	Death Investigators	Other Internal Staff	Not applicable, this function is not performed by my office
a.	Determination of which deaths are accepted for further investigation	0	0	0	0	0
b.	Death scene investigations with inspection/examination of body	0	0	0	0	0
c.	Determination of which deaths are autopsied	0	0	0	0	0
d.	Determination of which deaths receive forensic toxicology testing	0	0	0	0	0
	3. At the death scene, extinely perform drug scre ○ Yes ○ No → Skip to Que C24. After performing results with toxicold O Yes ○ No	ening tests (e. estion C25 ng drug screeni	g., urine screen or ng tests, did your o	Randox [®]) in 20.	23?	
	5. For your office, who of individual's death. O Law enforcement O Medical examine O Someone else (pl	: personnel r/coroner perso	onnel	<u>sible</u> for notifyi	ng next of	kin about

1.	(If Sheriff Coroner/Deputy serving as MEC) Which option would you choose given your dual roles?
6. In	2023, did your office respond to a multiple fatality event with four or more decedents? ○ Yes ○ No → Skip to Question D1
1.	What do you think we mean by the term "multiple fatality event"?
	C27. In 2023, how many multiple fatality <u>events</u> (4 or more decedents) did your office respond to? O 1-5 O 6-10 O More than 10
	C28. Did your office need and/or use assistance from other jurisdictions to respond to multiple fatality events in 2023 for functions your office would normally complete independently? O Yes O No
	6. In

SPECIALIZED INVESTIGATIONS

For the following questions, unidentified remains refer to remains that are <u>unidentified for 60</u> days or more.

		ntifie O Y	ecember 31, 2023, did your office have <u>any</u> records of remains that were d for 60 days or more? <i>Please include cases regardless of disposition of the remains.</i> The vertex $\frac{1}{2}$ is $\frac{1}{2}$ Skip to Question D7
	1.	Wh	at do you think this question is asking?
	2.	Wh	at does "regardless of disposition status" mean to you?
		ffice	t year was the oldest case of unidentified remains currently on record reported to ? r:
	1.	(If y	res to D1): How easy or difficult would it be to provide this year?
<u>60</u>		rs or ns. Tota O	any cases of human remains did your office have on record that were <u>unidentified for more</u> as of Dec 31, 2023? <i>Please include cases regardless of disposition of the</i> al number of unidentified humans remains on record: If estimate, check here Don't know
	1.	Wh	at do you think we mean by "on record"?
	2.		w easy or difficult would it be to provide this number? What would you have to do come up with this number?
D4	1. Hc	ow lo	ng does your office generally hold unidentified human remains before disposition? Less than 1 month 1- 2 months 3-6 months More than 6 months to a year More than 1 year Our office holds unidentified remains indefinitely
D5	5. Ho	ow do	Des your office dispose of unidentified human remains? Please select all that apply. Bury Cremate Our office holds unidentified remains indefinitely Other (please specify)

Dental records (charting)
Dental Radiographs/X-rays
Fingerprints
Full body radiographs (X-ray, CT)
Photos of identifying characteristics (e.g., tattoos, scars, etc.)
Samples for DNA analysis (e.g., blood card/spot, bone)

This next question asks about suspected drug overdose deaths in 2023.

2. Is there anything missing from this list that should be included?

D7. For suspected overdose deaths in 2023, did your office do the following for all deaths, some deaths, or not at all? *Exclude delayed overdose deaths*. *Select one for each row*.

					None/My
					office
			Most	Some	does not
Ac	tion	All deaths	deaths	deaths	do this
a.	Go to scene of death if outside of hospital	0	0	0	0
b.	Order an autopsy	0	0	0	0
c.	Draw toxicology specimens	0	0	0	0
d.	Run toxicology tests	0	0	0	0
e.	Consult with a toxicologist before		0	0	0
	determining cause and manner of death		J		J

- 1. Is there anything confusing or unclear about this question?
- 2. What do you think we mean by the term "delayed overdose deaths"?
- 3. Is there anything missing from this list that should be included?

RECORDS AND EVIDENCE RETENTION

E1. Did your office have a computerievidence as of December 31, 2023? management system or CMS. This do software to manage case information ○ Yes → Skip to Question E3 ○ No	Such a system is oes not include th	also known as a	computerized informat	tion
E2. What is the <u>primary</u> reason O Do not want CMS O Funding		es not have a CN	IS? Select one	
O Privacy or security concert O Technology constraints	ns			
O Too few cases/records				
O Other (please specify) _				
E3. For deaths reported to your officinvestigations produced, distinct from reports? O All deaths O Some deaths O No deaths ODid not have any deaths			•	osy
1. What do you think this ques	stion is asking?			
2. (If needed) What does "narr	ative report of ir	vestigations" m	ean to you?	
E4. Did your office have a written ref	tention schedule	for the following		one
			Not applicable, our	
	Vos	No	office does not	
a. Case records	Yes O	No O	produce or use this O	

E5. Did your office maintain records for storage as hard copies, electronically, or both in 2023?

0

0

O Hard copies

toxicology specimensd. Non-biological evidence

O Electronically

b. Forensic toxicology specimens

c. Biological specimens other than

0

O Both
O Don't produce written records
 E6. Upon last administration change (e.g., appointment of a new medical examiner or election of a new coroner), did the current office administration receive comprehensive death records from the prior administration? O Yes O No O Don't know
E7. Does your office archive hard copies of your official investigative records and reports? O Yes
O No → Skip to Question F1

E8. Does your office archive hard copies of your official investigative records and reports in the any of the following places? *Check 'Yes' or 'No' for each row.*

Lo	Location		No
a.	Government-owned office	0	0
b.	Government- run or government-controlled storage facility	0	0
c.	A regulated third-party storage facility (e.g., Iron Mountain)	0	0
d.	Personal storage (including both home and rental storage)	0	0
e.	Other business or office (e.g., funeral home, hospital, law office)	0	0

- 1. Is there anything confusing or unclear about this question?
- 2. Is there anything missing from this list that should be included?

RESOURCES

F1. As of December 31, 2023, did your office have access personal device, to use for official job functions? O Yes O No	to the Intern	et, separate f	rom a
F2. As of December 31, 2023, did your office have a work investigation functions, separate from personal vehicles? O Yes O No		cated to deatl	h
In your own words, what is this question asking vehicle dedicated to death investigation function.		What does a	"work
F3. As of December 31, 2023, did your office, or the ager your office, own a body storage cooler that you used for ○ Yes ○ No → Skip to Question F5	•		_
F4. What is the official maximum capacity of the Maximum Capacity:	body storage	cooler(s)?	
1. Is there anything confusing or unclear about thi	s question?		
F5. Did your office have access to the following resource agency, as of December 31, 2023? Select one for each ro		tly or through	ı another
	Yes,	Yes, through a partner	

		Yes,	through a partner	
Re	source	directly	agency	No access
a.	Criminal history databases	0	0	0
b.	EMS records	0	0	0
c.	Fingerprint databases	0	0	0
d.	Law enforcement or other criminal records databases	0	0	0
e.	Medical records databases	0	0	0
f.	Prescription drug monitoring programs	0	0	0

F6. In 2023, did staff at your office participate in any of the following trainings? *Select one for each row.*

Tra	Training or resource		No
a.	Mass fatality investigation	0	0
b.	Disaster planning (e.g., National Incident Management System [NIMS])	0	0
c.	Bloodborne pathogens	0	0
d.	Proper lifting procedures	0	0

1. Is there anything confusing or unclear about this question?

F7. In 2023, did your office provide mental health/wellness support (e.g., counseling, therapy, peer support) for staff? O Yes O No
F8. In 2023, did your office participate in county/statewide emergency response drills? O Yes O No
O Our county/state does not conduct emergency response drills
F9. In, 2023, did your office participate in any multidisciplinary review teams? For example, for child fatalities, elderly/vulnerable adult fatalities, or overdose fatalities? ○ Yes ○ No → Skip to F11
What do you think we mean by "multidisciplinary review teams"?

F10. In 2023, did your office participate in the following multidisciplinary review teams? Select one for each row.

				My office did
				not have
				cases of this
Sp	ecialty area	Yes	No	type in 2023
a.	Child fatality	0	0	0
b.	Elderly/vulnerable adult fatality	0	0	0
c.	Overdose fatality	0	0	0
d.	Maternal death	0	0	0
e.	Suicide	0	0	0

F11. In 2023, did your office participate in any of these data collection efforts or programs? *Select one for each row.*

				Don't
Da	ita collection	Yes	No	know
a.	National Missing and Unidentified Persons (NamUs)	0	0	0
	Sponsor: Department of Justice (DOJ)			
b.	National Violent Death Reporting System (NVDRS)	0	0	0
	Sponsor: Centers for Disease Control and Prevention (CDC)			
c.	State Unintentional Drug Overdose Reporting System (SUDORS)	0	0	0
	Sponsor: Centers for Disease Control and Prevention (CDC)			

F12. In 2023, did your office directly provide the following support services or provide referrals
for these services? Select one for each row.

		Referral to	
	Service	another	
	directly	entity or	
Support service	provided	organization	No
a. Advocates for families of victims	0	0	0
b. Grief and bereavement services for survivors (e.g. counseling or therapy, homicide survivor groups)	0	0	0
c. On-scene support or advocacy for bystanders other family and friends of deceased	or O	0	0

1. Is there anything confusing or unclear about this question?	
--	--

F13. As of December 31, 2023, did your office have a dedicated family support specialist or
counselor for family and friends of the deceased?
O Yes
O No
-

ADDENDUM PROTOCOL

[INTERVIEWER: DIRECT PARTICIPANT TO THE ADDENDUM INSTRUMENT]

Next, we are going to review the 2023 CMEC addendum instrument. This is a brief and optional supplement to the CMEC that BJS is considering for 2023. This optional section will not require any additional data gathering/pulling and is mostly be yes/no questions. The addendum instrument collects data on a few additional topics, like sudden infant death, unclaimed remains, and the use of MRI and CT machines.

AD1. Are the following procedures standard parts of your office's death investigations for sudden unexpected infant deaths?

	den dhexpected illiant deaths:			
		Yes	No	Don't
Pro	ocedure			Know
a.	Scene investigation	\bigcirc		\bigcirc
b.	Scene or doll re-enactment	\circ	\circ	\circ
c.	Comprehensive forensic toxicology	\bigcirc		\bigcirc
	(e.g., multiple toxin screens)			
d.	Complete autopsy	\bigcirc		\bigcirc
e.	Child or infant death review	\circ	0	0
f.	Genetic testing (e.g., sudden cardiac deaths)	0	0	0
g.	Metabolic screening (e.g., pediatric inborn errors of metabolism)	\bigcirc		\bigcirc
h.	Microbiologic testing			
i.	Pediatric skeletal survey (e.g., radiology)	0	0	0

AD2.	Does your office use the Sudden Infant Death Syndrome, or SIDS, diagnosis?		
	○ Yes		
	○ No		

- 1. How relevant or important do you feel AD1 and AD2 are to the MEC field? Why or why not?
- 2. How would you answer these questions? Would you answer "yes" to any of these items?

ΑD	3.	Do you record decedents' biological sex?
		○ Always○ Sometimes
		○ Never
ΑD		Oo you record decedents' gender identity, for example by interviewing a spouse or elative?
		○ Always
		○ Sometimes
		○ Never
		Is it clear what we are asking for when we ask about "sex" and "gender"? If your office does record gender, how does it do so?
ΑD)5.	Do you capture race and/or ethnicity for decedents? Yes
		○ No → SKIP to AD7
AD6.		Which of the following race and ethnicity categories do you capture for decedents? White
		Black or African American
		Hispanic
		American Indian or Alaska Native
		Asian
		Native Hawaiian or Other Pacific Islander
		We do not capture race or ethnicity for decedents
	1.	How relevant or important do you feel AD3 – AD6 are to the MEC field? Why or why not?
	2.	How would you answer these questions? Would your office be able to provide this
		information?
AD7. How does your office dispose of unclaimed human remains? Please select all that		
		apply.
		Bury
		Cremate
		☐ Donate body to a body donation program ☐ Donate body to other program(s) (e.g., museum)
		Our office holds unclaimed remains indefinitely
		Other (please specify)
		" " " "

AD8.		For unclaimed remains, does your office work with Veterans Administration or other groups to determine if the descendent is a veteran? Yes No		
	1.	How relevant or important do you feel AD7 – AD8 are to the MEC field? Why or why not?		
	2.	How would you answer these questions? Would your office be able to provide this information?		
ΑC	9.	When your office receives a death of a foreign national do you notify the consulate of the decedent's country of origin? Yes No		
AD10.		Are you aware of genetic screening as a test that medical examiner and coroner offices are starting to use? Yes		
		○ No		
AD11.		In the last 5 years have you sent any cases for genetic testing? Yes No		
	1.	How relevant or important do you feel AD9 – AD11 are to the MEC field? Why or why not?		
	2.	In your own words, what do you think we mean by "genetic screening test"?		
	3.	How would you answer these questions? Would your office be able to provide this information?		
ΑC)12.	Are you aware of the new Centers for Disease Control and Prevention's Collaborating Office for Medical Examiners and Coroners (COMEC) and the resources it offers MEC offices? Yes No		
ΑC)13.	Does your office have access to a computerized axial tomography (CAT or CT) scan, either directly or through a partner agency? Yes, directly Yes, through a partner agency No		

ΑI	D14.	Does your office have access to magnetic resonance imaging (MRI), either directly or through a partner agency? Yes, directly
		Yes, through a partner agencyNo
	1.	How relevant or important do you feel AD12 – AD14 are to the MEC field? Why or why not?
	2.	How would you answer these questions?

ADDENDUM DEBRIEFING PROBES

- 1. If you received this optional addendum questionnaire with the CMEC, how likely is it that you would complete it?
- 2. Are there any questions from the addendum questionnaire that you don't think would be of interest to the field or needed by the field? If so, which ones?
- 3. Do you feel any of these questions are critical to include in the main CMEC instrument and not in an optional addendum? If so, which ones?
- 4. Were there any questions that were unclear or confusing that we did not already talk about? If so, which ones?

GENERAL DEBRIEFING PROBES

Now I would like you to think about the instrument as a whole, not including the addendum items we just discussed.

- 1. Not including the addendum items, how long do you think it would take to complete the survey, including gathering all of the data necessary to answer these questions?
 - a. (If needed) Would multiple people be involved in responding?
- 2. When completing this survey, would you be able to provide your exact numbers or would you estimate?
- 3. Overall, what did you think of this survey?
- 4. Were there any questions that were unclear or confusing that we did not already talk about? If so, which ones?
- 5. Are there any questions that you don't think would be of interest to the field or needed by the field? If so, which ones?
- 6. Are there any questions that would be more effort than they're worth? If so, which ones?
- 7. Are there any questions/topics that you feel are critical to include in the main CMEC instrument that are not currently included? If so, what?
- 8. If you were to receive this survey without having participated in this testing, would you complete it?

On behalf of BJS and RTI, thank you so much for your time. Those are all of the questions I have. If you think of anything else that would be helpful for us to know as we refine this survey, please don't hesitate to send us an email.

B.3 Round 2 Cognitive Interview Protocol

Cognitive Interview Protocol

Participant Numbe	er
Date of Interview _	
Interviewer	

[ASK PARTICIPANT IF THEY WERE ABLE TO REVIEW THE INFORMED CONSENT SENT TO THEM PRIOR TO THE INTERVIEW, AND IF THEY HAVE ANY QUESTIONS. CONFIRM THAT THE PARTICIPANT CONSENTS TO INTERVIEW AND RECORDING. THEN READ/PARAPHRASE THE FOLLOWING TO THE PARTICIPANT]:

On behalf of the Bureau of Justice Statistics (or BJS) and the project team at RTI, thank you again for participating in the testing of the questionnaire for the forthcoming Census of Medical Examiner and Coroner Offices (or CMEC for short). We're talking today because we want to see how well people understand these questions and how they might answer them. This interview is voluntary; you can skip any question or stop the interview at any point. Your responses to the questions and other feedback will be used to improve the questionnaire and not shared outside the RTI/BJS team.

During this process, you and I will go through the survey and review specific items together so that I can understand how you would answer them. I will ask that you read certain questions aloud. Please tell me anything that comes to mind as you read the question. You do not need to provide specific answers or numbers at this point. For those questions for which you would need to do additional research, please tell me whether you would be able to answer the question and, if so, how long it would take to get the answer. In addition, please let me know if you would not be able to provide any of the exact numbers requested in the questionnaire. After reviewing a question, I may stop you and ask how you came up with your answer, or what specifically you were thinking about. These questions will help me understand your thought process when answering, which will help us determine if any changes need to be made to the question.

There are no right or wrong answers to the questions I ask. Our goal is to make sure that the questions make sense and that people like yourself can answer them and follow the questionnaire instructions easily. You can help us by pointing out anything you find confusing or unclear. If something doesn't make sense, please let me know. Or, if you're not sure about your response, please tell me that too.

Do you have any questions? [ANSWER ANY QUESTIONS]

Ok, let's begin. First, I have a few general questions about you.

- 1. What is your job title?
- 2. How long have you been in this position? (*If needed*) How long have you been at your agency?

[LET THE PARTICIPANT KNOW THAT YOU'D LIKE TO SHARE THE INSTRUMENT ON THE SCREEN. CONFIRM IF THEY CAN VIEW THEIR SCREEN AND/OR IF THEY HAVE THE COPY SENT TO THEM AVAILABLE TO REFERENCE DURING THE INTERVIEW. BEGIN SCREEN SHARE TO DISPLAY THE INSTRUMENT]

[INTERVIEWER: IF JP CASE, ONLY ADMINISTER THE FOLLOWING PROBE THROUGHOUT PROTOCOL TO ASSESS ABILITY TO RESPOND: Would you be able to answer this/these question(s)? Why/why not? :IF P CAN RESPOND, USE OTHER PROBES AS NEEDED TO ASSESS QUESTION UNDERSTANDING AND RESPONSE PROCESSES.]

[INTERVIEWER – START WITH A20 SHOWCARD PAPI HERE:

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A2. Is your head of office required to be a Forensic Pathologist or physician?

ADMINISTRATION – HEAD OF OFFICE

	Yes – the head of office is required to be a Forensic PathologistYes – the head of office is required to be a physicianNo
A2 Pro	bes:
1.	In your own words, what is this question asking?
	a. (If needed) How would your office respond, and why?
2.	What does the term "head of office" mean to you? Who would be included in this category?
3.	Is there anything confusing or unclear about this question?
A10.	Is your head of office's position full-time, part-time, or on-call? Full-time Part-time or on-call
A10 Pr	robes:

1. In your own words, what is the difference between "on-call" and "part-time"?

a. Is there overlap between the two? Or are they different?

2. Is there anything confusing or unclear about this question?

A11.	Is the head of your office elected? Yes No
A12. funct	Does your head of office perform any of the following death investigation ions in addition to their primary administrative duties? Select all that apply. Autopsies
	☐ Scene investigations
	 Other investigative casework (e.g., perform body examinations/inspections, conduct and document interviews) The head of office is an administrative position only and does not perform direct death investigation or autopsy duties
A13. stipei	What was the annual salary (or annual salary equivalent if paid hourly or by nd) for your head of office as of December 31, 2023?
	Annual Salary or Equivalent

A13 Probes:

- 1. How easy or difficult would it be to provide this information for your head of office?
 - a. (If needed) How would you obtain these figures?
- 2. What do you think we mean by the phrase "annual salary or equivalent"?

Head of Office Section Probes:

- 1. Were any questions in this section that were confusing or unclear?
- 2. When responding to questions in this section, who were you thinking about?

ADMINISTRATION – STAFFING INSTRUCTIONS

[DIRECT PARTICIPANTS TO INSTRUCTIONS ON PAGE 3 AND PROBE TO DETERMINE UNDERSTANDING. WE WANT TO BE SURE IT IS CLEAR THAT OFFICES SHOULD ONLY COUNT EMPLOYEES ONCE IN THEIR PRIMARY ROLE IN THIS SECTION. WE ALSO WANT TO GET A SENSE IF THEY WOULD CONSIDER THE HEAD OF OFFICE FROM THE PREVIOUS SECTION. NOTE CHIEF ME SHOULD BE INCLUDED IN FP COUNTS.]

Each employee should be reported only <u>once</u> in this section. If an employee fills more than one role, please include them in their <u>primary role</u>.

- 1. Is there anything confusing or unclear in these instructions?
- 2. In your own words, what does this instruction mean to you?

ADMINISTRATION – FORENSIC AND AUTOPSY PATHOLOGISTS

Many medical examiner and coroner offices do not directly employee forensic or autopsy pathologists, and rely on contracted entities or the state Medical Examiner or another medical examiner/coroner office for their autopsy services.

A14.	How are	autopsy	services	handled	by your	office?	Select	all that	apply
------	---------	---------	----------	---------	---------	---------	--------	----------	-------

Our office sends autopsies to the State Medical Examiner or another Medical Examiner/Coroner office to be performed	Skip to A18 if your office only contracts autopsy services or
Our office contracts with a private company, university, hospital, independent contractor, or other contract entity to perform autopsies	sends to another MEC office.
Autopsies are conducted by Forensic or Autopsy → Continue to A Pathologists directly employed by our office	A15

A14 Probes:

- 1. In your own words, what is this question asking? How would you respond?
 - a. (If needed) Is anything confusing or unclear about these questions?
- 2. Where would you go from here? [INTERVIEWER: PROBE TO GET A SENSE IF THE RESPONDENT UNDERSTANDS SKIP NAVIGATION AND WOULD SKIP FP QUESTIONS IF THEY ARE CONTRACT ONLY OR ANOTHER MEC CONDUCTS AUTOPSIES]

Next, we collect information about <u>Forensic Pathologists or Autopsy Pathologists</u> that were employed by your office during the pay period that included December 31, 2023.

415.	Did your office directly employ any Forensic/Autopsy Pathologists during the pay
	period that included December 31, 2023? Please include all full-time, part-time, and
	on-call employees. <u>Do not</u> include contractors.
	∩Yes

\bigcirc No \rightarrow SKIP to A21 on page 5

A15 Probes:

- 3. In your own words, what is this question asking?
- 4. Which staff would you include in this question?
 - a. (If needed) Would you include or exclude contractors here? Could you tell me more about that?

5 .	What does the term	"directly employ"	mean to	you? Can	you provide
	examples?				

6. Is anything confusing or unclear about this question?

		0.	13 dily	ining comusing of uncical about this question.	
A16.	fol Inc	lowin <u>lude</u> (g cate Chief M	ensic/Autopsy Pathologists did your office directly employ in the gories during the pay period that included December 31, 2023? edical Examiners that are Autopsy/Forensic Pathologists. <u>Do not includeder 0 if your office does not have staff in given category.</u>	
		Full-1	ime em	iployees:	
		Part-	time en	nployees:	
		On-c	all emp	loyees:	
	<u>A</u>	16 Pr	obes:		
		1.		staff would you include in this question? Who would not be included question?	
			a.	(If needed) Would you include or exclude contractors here? Could you tell me more about that?	
			b.	(If needed) Would Chief Medical Examiners be included in these counts?	
		2.	What	types of staff do you think would be included under "on call"?	
		3.		ere any scenarios here where you would not know what category to put ployee (e.g., fits in multiple types, missing type)?	
		4.	Is anyt	thing confusing or unclear about this question?	
A 17.	em cei	ployertified	ed by y I <u>in for</u> e	ctime and part-time Forensic/Autopsy Pathologists directly our office in the pay period that included December 31,2023 were ensic pathology by the American Board of Pathology (ABP)? <u>Do not fors.</u> If none, enter 0.	
		Num	ber of <u>f</u> u	ull-time autopsy pathologists certified by ABP in forensic pathology:	
		Num	ber of <u>p</u>	art-time autopsy pathologists certified by ABP in forensic pathology:	
A18.	pai cor	id in 2	2023? <i>F</i> ors. <u>Do</u> ly. _ Hourl _ Salar _ Stipe	y Continue to A19	
			staff	are paid <u>only</u> on a fee-for -service basis	

A19. What was the average annual salary (or annual salary equivalent if paid hourly or by stipend) for <u>full-time and part-time</u> Autopsy Pathologists <u>directly employed</u> by your office as of December 31, 2023? <u>Do not</u> include Chief Medical Examiner salaries previously reported.

	Annual Salary or Equivalent	Not Applicable
a. Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$, , , , , , , , , , , , , , , , , , ,	
 Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend) 	\$, ,	

A17/A18 Probes:

- 1. When answering these questions, which staff would you include? Who would not be included in this question?
- 2. Would Chief Medical Examiners' salaries be included here? Why or why not?
- 3. Is anything confusing or unclear about these questions?

. Did your office employ any certified Pathologists' Assistants to perform autopsies separate from assisting in an Autopsy Technician role, during the pay period that included December 31, 2023?					
○Yes					
○ No					

Forensic/Autopsy Pathologist Section Probes:

- 1. Were any questions in this section that were confusing or unclear that we haven't already discussed? Could you tell me more about that?
- 2. When responding to questions in this section, who were you thinking about?
 - Which staff would you include? Who would not be included in these questions?
- 3. Is it clear where and where not to include contractors in this section? Could you tell me more about that?
- 4. Are there any scenarios here where you would not know where to put an employee in this section? Could you tell me more about that?

[INTERVIEWER: SWITCH TO FULL PAPI VERSION HERE:

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ADMINISTRATION – DEATH INVESTIGATORS

The following questions collect information about <u>Death Investigators</u> that worked for your office during the pay period that included December 31, 2023.

•			
A21.	that and o one	incl cont role, Yes	r office employ or contract any Death Investigators during the pay period luded December 31, 2023? Please include full-time, part-time, on-call employees tract Death Investigators that work for your office. If an employee fills more than please put them in their primary role. S SKIP to A26 on page 6
	A2:	1 Pr	obes:
		1.	In your own words, what is this question asking?
		2.	Which staff would you include in this question?
		3.	Would you include or exclude "contract" Death Investigators in this question? Could you tell me more about that?
		4.	In your own words, what do you think the difference is, if any, between a contract death investigator and an on-call employee?
A22.	cate	gori	iny Death Investigators did your office employ/contract in the following ies during the pay period that included December 31, 2023? Enter 0 if your ses not have staff in given category.
	F	ull-t	time employees:
	F	art-	time employees:
	C	ont	ractors:
	C	n-c	all employees:
	A2	2 Pr	obes:
			Which staff would you include in this question?
		2.	Are there any scenarios here where you would not know what category to put
			an employee (e.g., fits in multiple types, missing type)?
		3.	What types of staff do you think would be included under "on call"? "Contractors"?
		4.	Is anything confusing or unclear about this question?

	A23. How many full-time and part-time Death Investigators that worked for your office during the pay period that included December 31, 2023 were certified by the American Board of Medicolegal Death Investigators (ABMDI)?							
	Number of <u>full-time</u> Death Investigators certified by ABMDI:							
		Number of part-time Death Investigators cer	tified by ABMDI:					
		Number of <u>contract/on-call</u> Death Investigate ABMDI:	ors certified by					
A24.	A24. How were Death Investigators at your office paid in 2023? Please select all that apply. ☐ Hourly ☐ Salary ☐ Stipend ☐ Fee-for-service (paid by case, call, day, or other fee structure) → SKIP to A26 on page 6 if paid only on a fee-for-service basis							
	stij	nat was the average annual salary (or annu pend) for <u>full-time and part-time</u> Death Invo December 31, 2023?						
			Annual Sala Equivale		Not Applicable			
	a.	Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$,					
	b.	Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)	\$					
A26. Did your office have unpaid volunteer Death Investigators in 2023? Yes No → SKIP to A28 A27. How many volunteer Death Investigators did your office have in 2023?								
<u>Death</u>	<u>ı In</u>	vestigator Section Probes:						
1.		Vere any questions in this section that were lready discussed? Could you tell me more ab		ear that w	ve haven't			
2.	V	When responding to questions in this section	, who were you th	ninking ab	oout?			

o Which staff would you include? Who would not be included in these

3. Are there any scenarios here where you would not know where to put an

employee in this section? Could you tell me more about that?

questions?

ADMINISTRATION – CORNER/NON-PHYSICIAN

ADMINISTRATION – SCIENTIFIC SUPPORT/ANCILLARY STAFF

These next questions ask about <u>scientific support staff</u> (e.g., Forensic Toxicologists, Anthropologists, Autopsy Technicians, or non-autopsy physicians) and <u>ancillary staff</u> (e.g., drivers, photographers, evidence technicians, family support) that worked for your office during the pay period that included December 31, 2023.

A28. During the pay period that included December 31, 2023, did your office employ any

	taff with roles specific to death investigation time, and on call-employees. <u>Do not</u> include contractors.		
A29. How many scientific support or ancillary staff with roles specific to death investigation functions did your office employ in the following categories during the pay period that included December 31, 2023? <u>Do not include contractors</u> . Enter 0 if your office does not have staff in given category.			
Full-time employees:			
Part-time employees:			
On-call employees:			
	ons? Include full-time, parters D → SKIP to A30 any scientific support or gation functions did your riod that included Decembration for the staff in gray Full-time employees: Part-time employees:		

Scientific Support/Ancillary Section Probes:

- 1. When responding to questions in this section, who were you thinking about?
 - O Which staff would you include? Who would not be included in these question?
- 2. Are there any scenarios here where you would not know what category to put an employee (e.g., fits in multiple types, missing type)?
- 3. Were any questions in this section that were confusing or unclear? Could you tell me more about that?

ADMINISTRATION – ADMINISTRATIVE STAFF

These next questions ask about <u>administrative staff</u> (e.g., administrative assistants, records clerks, secretaries, and IT staff) that worked for your office during the pay period that included December 31, 2023

A30. During the pay period that included December 31, 2023, did your office employ any Administrative Staff who directly supported death investigation functions? Please include full-time, part-time, consultants/ contractors, and on-call employees.

Yes No → SKIP to A32 on page 7
A31. How many Administrative Staff (e.g., administrative assistants, records clerks, secretaries) did your office employ/contract in the following categories during the pay period that included December 31, 2023? <u>Do not include contractors</u> . Enter 0 if your office does not have staff in given category.
Full-time employees:
Part-time employees:
On-call employees:
Administrative Staff Section Probes:
1. Were any questions in this section that were confusing or unclear? Could you tell me more about that?
2. When responding to questions in this section, who were you thinking about?
 Which staff would you include? Who would not be included in these questions?
3. Are there any scenarios here where you would not know what category to put an employee (e.g., fits in multiple types, missing type)?
EXPENDITURES AND FUNDS – B3 ONLY
Which of the following provides budgetary oversight of your office? Public health agency (e.g., department or division of public health) Law enforcement agency (e.g., department or division of public safety) Government attorney's office (e.g., district attorney, attorney general) Department or division of forensic science Court system Other government funding body (e.g., County commissioner or Governor) Other (please specify)
B3 Probes:

- 1. In your own words, what is this question asking?
- 2. (If needed) What does the phrase "provides budgetary oversight" mean to you?
- 3. Is there anything about this question that is confusing or unclear? Could you tell me more about that?

WORKLOAD - C1-C6

C1.	In 2023, was your office notified of any deaths? Include all cases that were reported to your office, even if jurisdiction was declined. Include cremation cases.
	○Yes
	○ No → SKIP to C13 on page 10
C2.	In 2023, what was the total number of deaths that your office was notified of in C1? Don't know—This specific data was not tracked Deaths Check if estimate:
<u>C1/</u>	C2 Probes:
	 In your own words, what kind of information is C1 and C2 requesting? Can you provide examples?
	a. What kinds of cases would you include here?
	2. What does "notified of any deaths" mean to you?
	3. How easy or difficult would it be to provide this number? What would you have to do to come up with this number?
C3.	In 2023, did any of the deaths reported in C2 meet your office's criteria to perform death investigation functions beyond documenting the initial notification of the death (e.g., identifying the decedent, responding to a scene, conducting supplemental interviews, notifying family, ordering an autopsy)? ○ Yes ○ No → SKIP to C5 on page 9
C4.	In 2023, for how many deaths did your office perform death investigative functions (e.g., identifying the decedent, respond to a scene, conducting supplemental interviews, notifying family, order an autopsy)? Don't know—This specific data was not tracked Deaths Check if estimate:

C3/C4 Probes:

- 1. In your own words, what kind of information is C3 and C4 requesting? Can you provide examples?
 - a. What kinds of cases would you include here?
- 2. How easy or difficult would it be to provide this number? What would you have to do to come up with this number?

C5.	In 2023, did any of the deaths reported in C2 meet your office's criteria to determine cause and/or manner of death? Do not include cases where another agency (e.g., State Medical Examiner) assumed jurisdiction of the death certificate. ○ Yes ○ No → SKIP to C7
C6.	In 2023, for how many deaths did your office determine the cause and/or manner of death?
	☐ Don't know—This specific data was not tracked ☐ , ☐ Deaths Check if estimate: ☐
<u>C5/C</u>	6 Probes:
1	. In your own words, what kind of information is C5 and C6 requesting? Can you provide examples?
	a. What kinds of cases would you include here?
2	. How easy or difficult would it be to provide this number? What would you have to do to come up with this number?
Worl	kload – C1-C6 Section Probes:
1	. Looking at C1-C6, in your own words, can you describe the three levels, or types, of cases we are seeking information about?
2	. Were any questions in this section that were confusing or unclear? Could you tell me more about that?
	WORKLOAD - C13-C17
Thes	se next questions ask about autopsies your office ordered or performed in 2023.
C13.	Did your office conduct medicolegal autopsies <u>at your facility/ies</u> (e.g., conducted autopsies "in-house") in 2023? Include referrals from other medicolegal death investigation authorities but exclude any private or hospital autopsies. Include both partial and complete autopsies. Yes No → SKIP to C15
C14.	In 2023, how many medicolegal autopsies did your office conduct at your facility/ies (e.g., conducted "in-house")? Number of medicolegal autopsies conducted at our facility/ies

C13/C14 Probes:

- 1. In your own words, what are these questions asking? What information do you think we are seeking?
- 2. Is there anything confusing or unclear about these questions?

C 15.	than your facilities in 2023? Include autopsies sent State Medical Examiners, other Medical Examiner/Coroner offices, and private facilities or hospitals.
C16.	. In 2023, where were the autopsies ordered by your office performed? Please select all that apply. ☐ State Medical Examiner's office ☐ Other MEC office ☐ Private facility or hospital
C17.	. How many autopsies were performed for your office by private facilities/hospitals in 2023? Number of autopsies performed at private facilitates/hospitals

C15-C17 Probes:

- 1. In your own words, what are these questions asking? What information do you think we are seeking?
- 2. Is there anything confusing or unclear about these questions?

Workload – C13-C17 Section Probes:

1. Were any questions in this section that were confusing or unclear? Could you tell me more about that?

GENERAL DEBRIEFING PROBES

- 1. Overall, what did you think of these questions?
- 2. Were there any questions that were unclear or confusing that we did not already talk about? If so, which ones?

On behalf of BJS and RTI, thank you so much for your time. Those are all of the questions I have. If you think of anything else that would be helpful for us to know as we refine this survey, please don't hesitate to send us an email.

Appendix C: Instruments

- C.1 Round 1 Instrument
- C.2 Round 2 Instrument
- C.3 Addendum Instrument

C.1 Round 1 Instrument

Form CMEC-1

OMB No. 1221-0296: Approval Expires 00/00/20XX

2023 CENSUS OF MEDICAL EXAMINER AND CORONER OFFICES

TO THE STATE OF TH

U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics

Acting as collection agent: RTI International

Please use this form to provide information on behalf of the following agency: [FILL AGENCY NAME HERE]

If the agency name printed above is incorrect, please call us at 1-866-662-8134.

Survey Insti						
	Submit this form using one of the following four methods:					
o On	ine: https://www.bjscmec.org					
	Agency ID:					
	Password:					
	nail: CMEC@rti.org					
	: 1-800-647-9660 (toll-free)					
	il: Use the enclosed postage-paid envelope					
		stand a question, please email or call for clarification.				
		he space provided. When exact numeric answers are no	t available,			
· ·	provide estimates and mark the estimate check b	ox where appropriate.				
	e or black ink and print as neatly as possible.					
• Use an	K when marking an answer in a box.					
Diagram in di		. 				
Please indi	cate the primary person who completed th	is form:				
Name:						
	Last Name	First Name	MI			
Title:						
Phone:	Area Code Number Exte	nsion				
Fax:	Area Code Number					
E-mail:						
Agency						
Website:						

If you have any questions, call RTI toll-free at 1-866-662-8134, or send an e-mail to CMEC@rti.org. If you have general project-related questions, please contact Connor Brooks of BJS at (202) 514-8633 or Connor.Brooks@usdoj.gov.

Burden Statement

Federal agencies may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 90 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspects of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. The Omnibus Crime Control and Safe Streets Act of 1968, as amended (34 USC 10132), authorizes this information collection. Although this survey is voluntary, we urgently need your cooperation to make the results comprehensive, accurate, and timely. We greatly appreciate your assistance.

This survey is intended to collect information about your office's death investigation functions. If your office is embedded within another department or type of office (e.g., law enforcement agency, mortuary), please only report details about the resources and practices related to death investigation functions.

ADMINISTRATION

A 1.	What is the title of the head position in your office (e.g., Chief Medical Examiner, Coroner) and who holds that title?				
	Title:				
	Name:				
A2.	Which of the following best describes your death investigation office? Coroner office Medical examiner office Law enforcement coroner office (e.g., Sheriff-coroner) District attorney or prosecutor office Justice of the peace My office does not investigate deaths → SKIP to the end of the survey and return in the enclosed envelope Other medicolegal death investigation office (please specify)				
A3.	What level of government best describes your office? City office County office District/regional office State office				
A4.	Which, if any, of the following provides administrative oversight of your office? Public health agency (e.g., department or division of public health) Law enforcement agency (e.g., department or division of public safety) Government attorney's office (e.g., district attorney, attorney general) Department or division of forensic science Court system My office does not report to another agency Other (please specify)				
A5.	Is your office located within another business, such as a funeral home? Yes No				
A6.	Does your office have authority over multiple jurisdictions? For example, your office is the medical examiner or coroner for multiple counties or districts. Yes No				

A6a	A6a. What jurisdictions does your office have authority over (e.g., County, State, or Judicial District)? If you have authority over multiple jurisdictions, enter a comma (,) between each jurisdiction.				
your Exar Fore	offic niner	ving section collects information about staff who support death investigation functions at the and includes questions about Autopsy Pathologists, Coroners/non-physician Medical s/non-autopsy physicians, Death Investigators, other scientific support staff (e.g., Toxicologists, Forensic Analysts), ancillary staff (e.g., drivers, photographers, evidence ans), and administrative staff (e.g., administrative assistants, record clerks, secretaries).			
If an	emple	oyee fills more than one role, please include them in their <u>primary role</u> .			
For c	questi	ons in this section, please consider the following definitions:			
		Full time employees: Staff directly employed by your office who have regularly scheduled hours and work on average 30 hours or more per week on death investigation functions.			
		Part-time employees: Staff directly employed by your office who have regularly scheduled hours and work on average fewer than 30 hours per week on death investigation functions.			
		Consultants/Contractors: Those who work for another company or as a consultant and are hired to work for your office, including locums tenens.			
		On-Call employees: Those who <u>do not</u> have regularly scheduled hours and only work on an as needed basis.			
	•	Vacancies: Positions for which your office has funds to staff but remain unfilled or open.			
A7.	Dece and o	your office employ/contract any Autopsy Pathologists during the pay period that included ember 31, 2023? Please include all full-time, part-time, consultants/contractors/locum tenens, on-call Autopsy Pathologists. es o → SKIP to A13 on page 4			
	A8.	How many Autopsy Pathologists did your office employ/contract in the following categories during the pay period that included December 31, 2023? Enter 0 if your office does not have staff in given category.			
		Full-time employees			
		Part-time employees:			
		Consultants/contractors/locum tenens:			
		On-call employees:			
	A9.	How many full-time and part-time Autopsy Pathologists directly employed by your office in the pay period that included December 31,2023 were certified in forensic pathology by the American Board of Pathology (ABP)? Do not count contractors, consultants, or locum tenens. If none, enter 0.			
Number of <u>full-time</u> autopsy pathologists certified by ABP in forensic pathology:					
		Number of <u>part-time</u> autopsy pathologists certified by ABP in forensic pathology:			

	A10.	 O. How were Autopsy Pathologists who performed autopsies for your office paid in 2023? Please include full-time and part-time employees and consultants/contractors/locums tenens. Select all that apply. Hourly Salary Stipend Continue to A11 Stipend Fee-for-service (paid by case, call, day, or other fee structure) → SKIP to A12 				
	A11.	Wh stip	at was the average annual salary (or annual salary for annual salary (or annual salary for full-time and part-time Autopsy Part salary (or annual salary for full-time and part-time)	al sa	lary equivalent if paid	hourly or by
			,		Annual Salary or Equivalent	Not Applicable
		а.	Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$	3 , , , , , , , , , , , , , , , , , , ,	
		b.	Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)	\$	3 , , , , , , , , , , , , , , , , , , ,	
	A12.	aut tha	your office employ/contract any certified lopsies, separate from assisting in an Auto tincluded December 31, 2023? Yes			
A13	phys part-i pleas	i cia time se pu es	office employ/contract any Coroners/non- ns during the pay period that included Dec , consultants/contractors, and on-call employe ut them in their primary role. SKIP to A17 on page 5	em	ber 31, 2023? Please ir	nclude all full-time,
	►A14. How many Coroners/non-physician Medical Examiners/non-autopsy physicians did your office employ/contract in the following categories during the pay period that included December 31, 2023? Enter 0 if your office does not have staff in given category. Full-time employees:					
			rt-time employees:			
		Co	nsultants/contractors:			
		On	-call employees:			
	A15.	offi	w were Coroners/non-physician Medical Exce paid in 2023? Please select all that apply. Hourly Salary Continue to A16 on page 5 Stipend Fee-for-service (paid by case, call, day or other			•

A16.	stipend) for <u>full-time and part-time</u> Coroners/non-physician Medical Examiners/non- autopsy physicians employed by your office as of December 31, 2023?			
	autopsy physicians employed by your office	Annual Salary or	Not	
	a. Average annual full-time salary (or salary	Equivalent	Applicable	
	equivalent if paid hourly or by stipend)	\$		
	 Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by 			
	stipend)			
Dece empl Y	 ⇒ SKIP to A22 on page 6 How many Death Investigators did your office during the pay period that included December 	ime, consultants/contractors, please put them in their prima ce employ/contract in the f	and on-call ary role.	
	staff in given category. Full-time employees:			
	Part-time employees:			
	Consultants/contractors:			
	On-call employees:			
A19.	How many full-time and part-time Death Inveduring the pay period that included December Board of Medicolegal Death Investigators (A Number of full-time Death Investigators certifie	er 31, 2023 were certified I ABMDI)?		
	Number of <u>part-time</u> Death Investigators certifi	ed by ABMDI:		
A20.	How were Death Investigators at your office Hourly Salary Stipend Fee-for-service (paid by case, call, day, or o			
A21.	What was the average annual salary (or ann stipend) for <u>full-time and part-time</u> Death Inv December 31, 2023?			
		Annual Salary or Equivalent	Not Applicable	
	a. Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$, ,		
	b. Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)	\$,		

	your office have volunteer Death Investigators in 2023? es lo → SKIP to A24
►A23.	. How many <u>volunteer</u> Death Investigators did your office have in 2023?
scie Tech staff inve	ing the pay period that included December 31, 2023, did your office employ/contract ntific support staff (e.g., Forensic Toxicologists, Forensic Analysts or Chemists, Autopsy hnicians, Pathologists Assistants, or other scientific investigative support staff) or ancillary f (e.g., drivers, photographers, evidence technicians) with roles specific to death estigation functions? Include full-time, part-time, consultants/contractors, and on call-employees. Yes
►A25.	. How many scientific support or ancillary staff with roles specific to death investigation functions did your office employ in the following categories during the pay period that included December 31, 2023?
	Full-time employees:
	Part-time employees:
	Consultants/contractors:
	On-call employees:
Adm supp conta	ing the pay period that included December 31, 2023, did your office employ/contract any ninistrative Staff (e.g., administrative assistants, records clerks, secretaries) who directly ported death investigation functions? Please include full-time, part-time, consultants/ ractors, and on-call employees. Yes No → SKIP to A28
►A27.	. How many Administrative Staff (e.g., administrative assistants, records clerks, secretaries did your office employ/contract in the following categories during the pay period that included December 31, 2023?
	Full-time employees:
	Part-time employees:
	Consultants/contractors:
	On-call employees:

A28.	A28. How many <u>vacant or unfilled</u> positions did your office have for each of the following roles during the pay period that included December 31, 2023? <i>If none, enter 0.</i>				
	Role	Vacant Positions			
	Autopsy Pathologists:				
	Coroners/non-physician Medical Examiners/non-autopsy physicians:				
	Death Investigators:				,
	EXPE	NDITURES AND FUN	DS		
B1.	On what month and day does yo M M / D D	ur office's fiscal year begin (e	e.g., 01/01	, 07/01, <i>′</i>	10/01)?
B2.	 How much did your office spend on death investigation functions in the most recently completed fiscal year? If your office is part of a larger organization (e.g., sheriff-coroner, funeral home), only include expenses related to death investigation functions. If your office only functions as an MDI office, include your total expenses. Include expenses paid by your office, such as, for autopsies, personnel, supplies and equipment, training, transportation, toxicology/ancillary testing, indigent burial, and body storage expenses related to MEC functions. \$				
В3.	Which of the following functions B2? Select one for each row.	of your office are included in	the total	expendi	tures reported in
	Expense		Yes	No	
	a. Autopsies		0		
	b. Personnel				
	c. Supplies and equipment				
	d. Training				
	e. Transportation				
	f. Toxicology		0	\bigcirc	
	g. Indigent Burial				
	h. Body storage				
	i. Other (please specify)			0	

B4.	n your most recently completed fiscal year did your office receive funding from any of the following? Select one for each row.					
				Don't	My office is not permitted to collect funds	
	Funding/revenue source	Yes	No	Know	from this source	
	 a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF) 	0	0	0	•	
	b. Consultant fees/referral fees (e.g., autopsies, neuropathology)	0	0	0	0	
	c. Cremation waiver/authorization or permit fees	0	0	0	0	
	d. Opioid Settlement Funds	0	0	0	0	
	e. Report/record fees					
B5. In 2023, did staff in your office use their own personal resources, or spend personal pocket money for which there was no reimbursement, on any of the following? Selection each row.						
	Expense	Yes	No			
	a. Personal protective equipment (PPE)					
	b. Specimen storage					
	c. Certifications/continuing education					
	d. Transportation (not including commute to work)	0		_		
	e. Other official work supplies	0	0			
WORKLOAD						
C1. In 2023, were there any deaths that your office investigated or otherwise documented? ○ Yes ○ No → SKIP to C13 on page 10						
C2. In 2023, what was the total number of deaths that your office investigated or otherwise documented? Don't know—This specific data was not tracked Deaths Check if estimate:						
C3. In 2023, did any of the deaths reported in C2 meet your office's criteria to perform additional death investigation functions? Yes No → SKIP to C5 on page 9						
	►C4. In 2023, for how many deaths did your office perform death investigative functions, beyond documenting the report of the death? □ Don't know—This specific data was not tracked □ Deaths Check if estimate:					

C5. In 2023, did any of the deaths reported in C2 meet your office's criteria to determine cause and/or manner of death? Yes No → SKIP to C7
C6. In 2023, for how many deaths did your office determine the cause and/or manner of death' Don't know—This specific data was not tracked Deaths Check if estimate:
C7. In 2023, did your office receive any deaths from tribal lands? The term 'tribal lands' includes areas labeled Indian country, federal or state recognized reservations, trust lands, Alaska Native villages, an tribal communities. Yes No - Our office does not have tribal lands in our geographic jurisdiction No - Our office receives deaths from tribal lands, but none were reported in 2023 on page 10
C8. In 2023, what was the total number of deaths from tribal lands that your office investigated or otherwise documented? Don't know—This specific data was not tracked Deaths Check if estimate:
C9. In 2023, did any of the deaths from tribal lands reported in C8 meet the criteria for your office to perform additional death investigation functions? Yes No → SKIP to C11
►C10. In 2023, for how many deaths from tribal lands did your office perform investigative functions, beyond documenting the report of the death? □ Don't know—This specific data was not tracked □ Deaths Check if estimate: □
C11. In 2023, did any of the deaths from tribal lands reported in C8 meet your office's criteria to determine cause and/or manner of death? Yes No → SKIP to C13 on page 10
➤C12. In 2023, for how many deaths from tribal lands did your office determine the cause and/or manner of death? □ Don't know—This specific data was not tracked □ , □ Deaths Check if estimate: □

These next questions ask about autopsies your office ordered or performed in 2023.
C13. Did your office conduct medicolegal autopsies <u>internally</u> in 2023? Yes No → SKIP to C15
►C14. In 2023, how many medicolegal autopsies did your office conduct internally? Include referrals from other medicolegal death investigation authorities but exclude any private or hospital autopsies. Include both partial and complete autopsies.
Number of medicolegal autopsies conducted internally
C15. Did your office order any medicolegal autopsies to be conducted externally in 2023?
Yes No → SKIP to C19
C16. In 2023, where were the autopsies ordered by your office performed externally? Please
select all that apply. State Medical Examiner's office If your office does not use private facilities or hospitals to
☐ Other MEC office ————————————————————————————————————
Private facility or hospital
C17. How many autopsies were performed for your office by private facilities/hospitals in 2023? Number of autopsies performed at private facilitates/hospitals
C18. How far from your office is the autopsy facility or contractor your office uses most
frequently? Less than 50 miles
50-100 miles
Greater than 100 miles
C19. In 2023, as part of practice or policy, did your office <u>routinely</u> perform or order autopsies for the following types of deaths when determining cause and manner of death and signing the death certificate?
Type of death Yes No
a. Drug related
b. Elderly C. Homicides C.
d. Motor vehicle
e. Suicide by firearm
f. Suicide by hanging
These next questions ask about your office's medicolegal death investigations (MDI).
C20. In 2023, did medicolegal death investigators in your office perform scene investigations?
Yes ○ No → SKIP to C22 on page 11
C21. In 2023, how many scene investigations did medicolegal death investigators conduct?
Number of scene investigations

	For those functions or performing the				who is <u>primaril</u>	<u>y responsible</u>
Duty		Autopsy Pathologists	Coroners/ Non-physician Medical examiner/ non-autopsy physicians	Death Investigators	Other Internal Staff	Not applicable, this function is not performed by my office
v	Determination of which deaths are accepted for further nvestigation	0	0	0	0	0
ii ii e b	Death scene nvestigations with nspection/ examination of pody	0	0	0	0	0
v a	Determination of which deaths are autopsied	0	0	0	0	0
v r	Determination of which deaths eceive forensic oxicology testing	0	0	0	0	0
	At the death scene, perform drug scree Yes No → SKIP to C2	ening tests (e.g.				ce routinely
►C24. After performing drug screening tests, did your office routinely confirm positive results with toxicology testing in a laboratory in 2023? Yes No						
	For your office, who ndividual's death? Law enforcement Medical examined Someone else (p	personnel r/coroner person	nnel	esponsible for	notifying next o	of kin about the

_	023, did your office respond to a multiple fatality event with four or more decedents?
	/es No → SKIP to D1
►C27	 In 2023, how many multiple fatality events (4 or more decedents) did your office respond to? 1-5 6-10 More than 10
C28	 Did your office need and/or use assistance from other jurisdictions to respond to multiple fatality events in 2023 for functions your office would normally complete independently? Yes No
	SPECIALIZED INVESTIGATIONS
For the formore.	ollowing questions, unidentified remains refer to remains that are <u>unidentified for 60 days or</u>
D1. As 60 c	of December 31, 2023, did your office have <u>any</u> records of remains that were unidentified for days or more? Please include cases regardless of disposition of the remains.
10	No → SKIP to D7 on page 13
▶ D2.	In what year was the oldest case of unidentified remains currently on record reported to your office? YYYY
D3.	How many cases of human remains did your office have on record that were unidentified for 60 days or more as of December 31, 2023? Please include cases regardless of disposition of the remains. Don't know Total number of unidentified humans remains on record Check if estimate:
D4.	How long does your office generally hold unidentified human remains before disposition? Less than 1 month 1-2 months 3-6 months More than 6 months to a year More than 1 year Our office holds unidentified remains indefinitely
D5.	How does your office dispose of unidentified human remains? Please select all that apply. Bury Cremate Our office holds unidentified remains indefinitely Other (please specify)

This	D6. What biometrics and samples do you ro human remains? Please select all that ap Dental records (charting) Dental Radiographs/X-rays Fingerprints Full body radiographs (X-ray, CT) Photos of identifying characteristics (e.g. Samples for DNA analysis (e.g., blood of sext question asks about suspected drug over	ply. g., tattoos, sca card/spot, bon	ars, etc.) e)	sposition of	unidentified
D7.		your office do	the follow		eaths, some
	Action	All deaths	Most deaths	Some deaths	None/My office does not do this
	a. Go to scene of death if outside of hospital	0		0	
	b. Order an autopsy		0	0	0
	c. Draw toxicology specimens	O	0		
	d. Run toxicology tests				
	e. Consult with a toxicologist before determining cause and manner of death	0	0	0	0
	RECORDS AND EVI	DENCE R	ETENT	ION	
E1.	Did your office have a computerized system evidence as of December 31, 2023? Such a symanagement system or CMS. This does not incompanage case information. ○ Yes → SKIP to E3 ○ No	⁄stem is also k	known as a d	computerized	l information
	►E2. What is the <u>primary</u> reason your office do ☐ Do not want CMS ☐ Funding ☐ Privacy or security concerns ☐ Technology constraints ☐ Too few cases/records ☐ Other (please specify) ☐	es not have	a CMS? Sel	ect one.	
E3.	For deaths reported to your office in 2023, he produced, distinct from any logs, death certinology. All deaths Some deaths No deaths Did not have any deaths				

E4.	Did your office have a written rete each row.	ntion sch	nedule fo	or the following items in 20	23? Select one for
		Yes	No	Not applicable, our office not produce or use the	
	a. Case records				
	b. Forensic toxicology specimens	0	0	0	
	c. Biological specimens other than toxicology specimens	0	0	0	
	d. Non-biological evidence			\bigcirc	
E5.	Did your office maintain records for the Hard copies Electronically Both Don't produce written records	or storag	e as har	d copies, electronically, or	both in 2023?
E6.	Upon the last administration chan a new coroner), did the current off the prior administration? Yes No Don't know	ge (e.g., ice admi	appointr nistratio	nent of a new medical exar n receive comprehensive o	niner or election of death records from
	O Bon Cinion				
E7.	Does your office archive hard cop — Yes ○ No → SKIP to F1	ies of yo	ur officia	al investigative records and	d reports?
	►E8. Does your office archive hard any of the following places?				ls and reports in
	Location			Yes	No
	a. Government-owned office)		0	
	b. Government-run or gover	nment-co	ntrolled s	storage facility	0
	c. A regulated third-party sto	orage faci	lity (e.g.,	Iron Mountain)	
	d. Personal storage (including	ng both he	ome and	rental storage)	
	e. Other business or office (office)			• ,	0
		RESC	DURCI	ES	
F1.	As of December 31, 2023, did your device, to use for official job functory Yes No		ave acce	ess to the Internet, separate	e from a personal
F2.	As of December 31, 2023, did your functions, separate from personal Yes			ork vehicle dedicated to dea	ath investigation

F3.	As of December 31, 2023, did your office, office, own a body storage cooler that you —───────────────────────────────────				
	►F4. What is the official maximum capacity Maximum capacity	y of the I	oody stor	rage cooler(s)?	
F5.	Did your office have access to the following agency, as of December 31, 2023? Select of			er directly or throug	gh another
	Resource	Yes, o	lirectly	Yes, through a partner agency	No access
	a. Criminal history databases	(
	b. EMS records	(\supset	0	0
	c. Fingerprint databases	(
	d. Law enforcement or other criminal records databases	(\supset	0	0
	e. Medical records databases	(\supset	0	0
	f. Prescription drug monitoring programs	($\overline{\mathcal{O}}$	0	0
	row. Training or resource a. Mass fatality investigation b. Disaster planning (e.g., National Incident Management System [NIMS]) c. Bloodborne pathogens	Yes	No O		
	d. Proper lifting procedures				
F7.	support) for staff? Yes No				
F8.	In 2023, did your office participate in emer city)? Yes No Our state/region/county/city does not cond	- ,		, .	unty, regional or
F9.	In, 2023, did your office participate in any in fatalities, elderly/vulnerable adult fatalities, or ○ Yes ○ No → SKIP to F11 on page 16				example, for child

			023, did your office participate in the	e following mu	ltidis	sciplinary	review	teams?
			pecialty area	Yes		No	have	ffice did not cases of this be in 2023
		a.	Child fatality	0		0	<u> </u>	0
		b.	Elderly/vulnerable adult fatality			\bigcirc		\bigcirc
		C.	Overdose fatality	0		0		0
		d.	Maternal death	\bigcirc		\bigcirc		0
		e.	Suicide			0		0
F11.			lid your office participate in any of t	hese data colle	ectio	n efforts	or progr	ams? Select
	Dat	a cc	llection			Yes	No	Don't know
		Spo	onal Missing and Unidentified Persons nsor: Department of Justice (DOJ)	,		0	0	0
			onal Violent Death Reporting System (nsor: Centers for Disease Control and		(C)	0	0	0
		(SUI	e Unintentional Drug Overdose Report DORS) nsor: Centers for Disease Control and	-	(C)		0	0
F12.	In 20 these	23, c ser	lid your office directly provide the for vices? Select one for each row.	ollowing suppo	ort se	ervices or	provide	e referrals for
	Su	opor	t service	Service directly provided		Referra another e or organiz	entity	No
			ocates for families of victims	0		0		0
		surv	f and bereavement services for ivors (e.g., counseling or therapy, icide survivor groups)	0		0		0
		byst	scene support or advocacy for anders or other family and friends of eased	0		0		0
F13.		selo es	cember 31, 2023, did your office hav r for family and friends of the decea		famil	y suppor	t specia	list or
	Th	ank	you for your participation in the Coroner Offi Your feedback is ve	ces (CMEC).			Examine	er and

Please return your survey in the enclosed envelope or send to:

Census of Medical Examiner and Coroner Offices RTI International ATTN: 0216093.000.005 5265 Capital Boulevard Raleigh, NC 27690

C.2 Round 2 Instrument

Form CMEC-1

OMB No. 1221-0296: Approval Expires 00/00/20XX

2023 CENSUS OF MEDICAL EXAMINER AND CORONER OFFICES





Acting as collection agent: RTI International

Please use this form to provide information on behalf of the following agency:

[FILL AGENCY NAME HERE]

If the agency name printed above is incorrect, please call us at 1-866-662-8134.

C	Instructions:	
SHEWAY	inctrictions.	

- Submit this form using one of the following four methods:
 - o Online: https://www.bjscmec.org

Agency ID:

Password:

- E-mail: CMEC@rti.org
- o Fax: 1-800-647-9660 (toll-free)
- o Mail: Use the enclosed postage-paid envelope
- Please do not leave any items blank. If you do not understand a question, please email or call for clarification.
- If the answer to a question is none or zero, write "0" in the space provided. When exact numeric answers are not available, please provide estimates and mark the estimate check box where appropriate.
- Use blue or black ink and print as neatly as possible.
- Use an X when marking an answer in a box.

Please indi	cate the pr	imary person wh	o complete	d this form:		
Name:						
	Last Name			First Name	MI	
Title:						
Phone:						
	Area Code	Number		Extension		
Fax:	Area Code	Number —				
E-mail:						
Agency Website:						

If you have any questions, call RTI toll-free at 1-866-662-8134, or send an e-mail to CMEC@rti.org. If you have general project-related questions, please contact Connor Brooks of BJS at (202) 514-8633 or Connor.Brooks@usdoj.gov.

Burden Statement

Federal agencies may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 90 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspects of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. The Omnibus Crime Control and Safe Streets Act of 1968, as amended (34 USC 10132), authorizes this information collection. Although this survey is voluntary, we urgently need your cooperation to make the results comprehensive, accurate, and timely. We greatly appreciate your assistance.

This survey is intended to collect information about your office's death investigation functions. If your office is embedded within another department or type of office (e.g., law enforcement agency, mortuary), please only report details about the resources and practices related to death investigation functions.

ADMINISTRATION

A1.		the title of the head position in your of lds that title?	fice (e.g., Chief Medical Examin	er, Coroner) and
	Title:			
	Name:	Last Name	First Name	
Δ2. I		ead of office required to be a Forensic		
	_	- the head of office is required to be a Fore		
	○ Yes – ○ No	- the head of office is required to be a phy	sician	
A3.		of the following best describes your dea	ath investigation office?	
		cal examiner office		
	_	enforcement coroner office (e.g., Sheriff-co	oroner)	
		ct attorney or prosecutor office ce of the peace		
	○ My of	ffice does not	rvey and return in the enclosed env	velone
		tigate deaths → SKIP to the end of the su r medicolegal death investigation office (pl		relope
			→	
A4.	What lev	vel of government best describes your	office?	
	O City o			
		ity office ct/regional office		
		office		
A6.	doctor's	office operated within another business office?	s, such as a funeral home, unive	ersity, or
	YesNo			
A7.	Does yo	our office have authority over multiple j I examiner for the state, or coroner for i		office is the
	○ Yes ○ No	ŕ		
A8.	of Ohio,	eographic jurisdictions does your office, or Judicial District 8)? If you have author each jurisdiction.		

First	we will collect additional information about the <u>head position</u> in your office.
A10.	Is your head of office's position full-time, part-time or on-call? Full-time Part-time or on-call
A11.	Is the head of your office elected? Yes No
A12.	Does your head of office perform any of the following death investigation functions in addition to their primary administrative duties? Select all that apply. Autopsies
	Scene investigations
	 Other investigative casework (e.g., perform body examinations/inspections, conduct and document interviews) The head of office is an administrative position only and does not perform direct death investigation or autopsy duties
A13.	What was the annual salary (or annual salary equivalent if paid hourly or by stipend) for your head of office as of December 31, 2023?
	Annual Salary or Equivalent \$

The next section collects information about staff who support death investigation functions at your office.

Each employee should be reported only <u>once</u> in this section. If an employee fills more than one role, please include them in their primary role.

For questions in this section, please consider the following definitions:

- **Full time employees:** Staff directly employed by your office who have regularly scheduled hours and work on average 30 hours or more per week on death investigation functions.
- Part-time employees: Staff directly employed by your office who have regularly scheduled hours and work on average fewer than 30 hours per week on death investigation functions.
- **Contractors/Consultants:** Those who work for another company or entity or are hired on a contract basis to do work for your office.
- On-Call employees: Staff directly employed who do not have regularly scheduled hours and only work on an as needed basis.
- Vacancies: Positions for which your office has funds to staff but remain unfilled or open.

	First, we collect information about <u>Forensic Pathologists or Autopsy Pathologists</u> that were <u>employed</u> by your office during the pay period that included December 31, 2023.							
inclu <u>Do n</u>	A14. Did your office directly employ any Forensic/Autopsy Pathologists during the pay period that included December 31, 2023? Please include all full-time, part-time, and on-call employees. Do not include contractors. Yes No → SKIP to A20 on page 5							
→A15.	15. How many Forensic/Autopsy Pathologists did your office directly employ in the following categories during the pay period that included December 31, 2023? <u>Include</u> Chief Medical Examiners that are Autopsy/Forensic Pathologists. <u>Do not</u> include contractors. Enter 0 if your office does not have staff in given category.							
	Full-time employees:							
	Part-time employees:							
	On-call employees:							
A16.	How many full-time and part-time Forensic/Au your office in the pay period that included Dec pathology by the American Board of Patholog enter 0.	cember 31,2023 were certif	ied <u>in forensic</u>					
	Number of <u>full-time</u> autopsy pathologists certified by ABP in forensic pathology:							
	Number of part-time autopsy pathologists certifie	ed by ABP in forensic patholo	ogy:					
A17.	How were Forensic/Autopsy Pathologists directly Please include full-time, part-time, and on-call entinclude Chief Medical Examiners/head of office standard Hourly Salary Continue to A18 Stipend Fee-for-service (paid by case, call, day, or oth paid only on a fee-for-service basis	nployees. Do not include con alaries. Select all that apply.	ntractors. <u>Do not</u>					
A18.	What was the average annual salary (or annual stipend) for <u>full-time</u> and <u>part-time</u> Autopsy Pass of December 31, 2023? Do not include Chief	athologists directly employ	<u>ved</u> by your office					
	<u> </u>	Annual Salary or Equivalent	Not Applicable					
	c. Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$						
	d. Average annual salary <u>part-time</u> (or salary equivalent if paid hourly or by stipend)	\$, ,						
A19.	Did your office employ any certified Pathologiseparate from assisting in an Autopsy Techni included December 31, 2023? Yes No							

Path	your office ever <u>contract</u> with a private company or independent Forensic or Autopsy ologist(s), or work with another Medical Examiner/Coroner location to conduct autopsies? et all that apply.
	es – Our office sends autopsies to the State Medical Examiner or another Medical caminer/Coroner office
	es – Our office contracts with a private company, university, hospital, independent ntractor, or other contract entity to perform autopsies
	o – Autopsies are only conducted by Forensic or Autopsy Pathologists directly employed our office
	ring questions collect information about <u>Death Investigators</u> that worked for your office pay period that included December 31, 2023.
Dece that v	rour office employ or contract any Death Investigators during the pay period that included mber 31, 2023? Include full-time, part-time, on-call employees and contract Death Investigators work directly for your office. If an employee fills more than one role, please put them in their ary role.
○ No	o → SKIP to A26 on page 6
► A22.	How many Death Investigators did your office employ/contract in the following categories during the pay period that included December 31, 2023? Enter 0 if your office does not have staff in given category. <u>Do not</u> include head of office positions (e.g., Coroners) that also act as Death Investigators.
	Full-time employees:
	Part-time employees:
	Contractors:
	On-call employees:
A23.	How many full-time and part-time Death Investigators that worked for your office during the pay period that included December 31, 2023 were certified by the American Board of Medicolegal Death Investigators (ABMDI)?
	Number of <u>full-time</u> Death Investigators certified by ABMDI:
	Number of part-time Death Investigators certified by ABMDI:
	Number of contract/on-call Death Investigators certified by ABMDI:
A24.	How were Death Investigators at your office paid in 2023? <u>Do not</u> include head of office salaries reported elsewhere. Select all that apply. Hourly Salary Continue to A25 Stipend Fee-for-service (paid by case, call, day, or other fee structure) → SKIP to A26 on page 6 if paid only on a fee-for-service basis

A25	What was the average annual salary (or annual salary equivalent if paid hourly or by stipend) for <u>full-time</u> and <u>part-time</u> Death Investigators employed by your office as of December 31, 2023?					
		Annual Salary or Equivalent	Not Applicable			
	c. Average annual <u>full-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$				
	d. Average annual <u>part-time</u> salary (or salary equivalent if paid hourly or by stipend)	\$, , , , , , , , , , , , , , , , , , ,				
	your office have unpaid volunteer Death Inves ∕es lo → SKIP to A28	stigators in 2023?				
A27	. How many <u>volunteer</u> Death Investigators did	your office have in 2023?				
Anthropo photogra	ext questions ask about <u>scientific support staff</u> blogists, Autopsy Technicians, or non-autopsy phers, evidence technicians, family support w he pay period that included December 31, 2023	physicians) and <u>ancillary</u> porkers) that were employe	staff (e.g., drivers,			
scie full-t	ing the pay period that included December 31, entific support or ancillary staff with roles spectime, part-time, and on call-employees. <u>Do not</u> includes √es No → SKIP to A30	cific to death investigation	functions? Include			
►A29	. How many scientific support or ancillary state functions did your office directly employ in to period that included December 31, 2023? Do Enter 0 if your office does not have staff in a given	he following categories d u not include contractors or c	iring the pay			
	Full-time employees:					
	Part-time employees:					
	On-call employees:					
manager	ext questions ask about <u>administrative staff</u> (e.s., records clerks, secretaries, and IT staff) that at included December 31, 2023					
Adn time	ing the pay period that included December 31, ninistrative Staff who directly supported death e, and on-call employees. Do not include contract (es No → SKIP to A32 on page 7	investigation functions?				

	A31. How many Administrative Staff (e.g., administrative assistants, records clerks, secretaries) did your office employ in the following categories during the pay period that included December 31, 2023? <u>Do not</u> include contractors or contract entities. Enter 0 if your office does not have staff in a given category.
	Full-time employees:
	Part-time employees:
	On-call employees:
A32.	How many <u>vacant or unfilled</u> positions did your office have for each of the following roles during the pay period that included December 31, 2023? <i>If none, enter 0.</i>
	Role Vacant Positions
	Forensic or Autopsy Pathologists:
	Death Investigators:
	EXPENDITURES AND FUNDS
B1.	On what month and day does your office's fiscal year begin (e.g., 01/01, 07/01, 10/01)? M M / D D
B2.	How much did your office spend on death investigation functions in the most recently completed fiscal year?
	• If your office is part of a larger organization (e.g., sheriff-coroner, funeral home), only include expenses related to death investigation functions. If your office only functions as an MDI office, include your total expenses.
	 Include expenses paid by your office, such as, for autopsies, personnel, supplies and equipment, training, transportation, toxicology/ancillary testing, indigent burial, and body storage expenses related to MEC functions.
	\$,00 Check if estimate:
B3.	
	Public health agency (e.g., department or division of public health)Law enforcement agency (e.g., department or division of public safety)
	Ogovernment attorney's office (e.g., district attorney, attorney general)
	Department or division of forensic scienceCourt system
	Other government funding body (e.g., County commissioner or Governor)Other (please specify)

Expense			All	Some	None
Expense a. Autopsies					
b. Personnel					
c. Supplies and equipment					
d. Training					
e. Transportation					
f. Toxicology				\bigcirc	
g. Indigent Burial				0	
h. Body storage				0	
i. Other (please specify)			0	0	
· · · · · · · · · · · · · · · · · · ·			'		
n your most recently completed fiscal year did yo	our office	e receive	e fundir	ng from a	ny of the
ollowing? Select one for each row.	I	l	I	My of	fice is no
					fice is no nitted to
			Don't		ct funds
Funding/revenue source	Yes	No	Know	from t	his sourc
· anamgrevenae eearee	100		111011	11 0111 (ino ooai o
	0	0	0		
a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF)	0	0	0		0
 a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF) b. Consultant fees/referral fees (e.g., autopsies, neuropathology) 	0	0	0		0
 a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF) b. Consultant fees/referral fees (e.g., autopsies, neuropathology) c. Cremation waiver/authorization or permit fees 	0	0	0		0
 a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF) b. Consultant fees/referral fees (e.g., autopsies, neuropathology) c. Cremation waiver/authorization or permit fees d. Opioid Settlement Funds 	OOOO	0	0		OOOOO
 a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF) b. Consultant fees/referral fees (e.g., autopsies, neuropathology) c. Cremation waiver/authorization or permit fees d. Opioid Settlement Funds 			0		
 a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF) b. Consultant fees/referral fees (e.g., autopsies, neuropathology) c. Cremation waiver/authorization or permit fees d. Opioid Settlement Funds e. Report/record fees n 2023, did staff in your office use their own perspocket money for which there was no reimbursen 	onal res	ources,	or sper	nd persor	onal, out-o
 a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF) b. Consultant fees/referral fees (e.g., autopsies, neuropathology) c. Cremation waiver/authorization or permit fees d. Opioid Settlement Funds e. Report/record fees n 2023, did staff in your office use their own perspecket money for which there was no reimbursen each row. 	onal res	ources,	or sper	nd persor	onal, out-o
 a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF) b. Consultant fees/referral fees (e.g., autopsies, neuropathology) c. Cremation waiver/authorization or permit fees d. Opioid Settlement Funds e. Report/record fees n 2023, did staff in your office use their own persocket money for which there was no reimbursen each row. Expense 	onal respent, on	ources, any of the	or sper	nd persor	onal, out-o
 a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF) b. Consultant fees/referral fees (e.g., autopsies, neuropathology) c. Cremation waiver/authorization or permit fees d. Opioid Settlement Funds e. Report/record fees n 2023, did staff in your office use their own persocket money for which there was no reimbursen each row. Expense a. Personal protective equipment (PPE) 	onal respent, on	ources, any of the	or sper	nd persor	onal, out-o
 a. American Rescue Plan Act/Coronavirus State and Local Fiscal Recovery Funds (ARPA/SLFRF) b. Consultant fees/referral fees (e.g., autopsies, neuropathology) c. Cremation waiver/authorization or permit fees d. Opioid Settlement Funds e. Report/record fees n 2023, did staff in your office use their own persocket money for which there was no reimbursen each row. Expense a. Personal protective equipment (PPE) 	onal respent, on	ources, any of the	or sper	nd persor	onal, out-o

e. Other official work supplies

ppenc	iix C — Instruments
	WORKLOAD
C1.	In 2023, was your office notified of any deaths? Include all cases that were reported to your office, even if jurisdiction was declined. Include cremation cases. ──────────────────────────────────
	ONO 7 SKIF to C13 on page 10
	C2. In 2023, what was the total number of deaths that your office was notified of in C1? Don't know—This specific data was not tracked Deaths Check if estimate:
C3.	In 2023, did any of the deaths reported in C2 meet your office's criteria to perform death investigation functions beyond documenting the initial notification of the death (e.g., identifying the decedent, responding to a scene, conducting supplemental interviews, notifying family, ordering an autopsy)? — Yes
	○ No → SKIP to C5 on page 9
	C4. In 2023, how many deaths did your office perform death investigative functions (e.g., identifying the decedent, responding to a scene, conducting supplemental interviews, notifying family, ordering an autopsy)? Don't know—This specific data was not tracked Deaths Check if estimate:
C5.	In 2023, did any of the deaths reported in C2 meet your office's criteria to determine cause and/or manner of death? Do not include cases where another agency (e.g., State Medical Examiner) assumed jurisdiction to complete the death certificate. — Yes ○ No → SKIP to C7
	□ Don't know—This specific data was not tracked □ Deaths Check if estimate: □

C7. In 2023, was your office notified of any deaths that occurred on tribal lands? The term 'tribal lands' includes areas labeled Indian country, federal or state recognized reservations, trust lands, Alaska Native villages, and tribal communities. Yes
No - Our office does not have tribal lands in our geographic jurisdiction No - Our office receives deaths from tribal lands, but none were reported in 2023 SKIP to C13 on page 10
►C8. In 2023, what was the total number of deaths that occurred on tribal lands that your office was notified of in C7?
Don't know—This specific data was not tracked
Deaths
Check if estimate:
C9. In 2023, did any of the deaths that occurred on tribal lands reported in C8 meet the criteria for your office to perform death investigation functions beyond documenting the initial notification of the death (e.g., identifying the decedent, respond to a scene, conducting supplemental interviews, notifying family, order an autopsy)? Yes
○ No → SKIP to C11
➤ C10. In 2023, for how many deaths that occurred on tribal lands did your office perform investigative functions (e.g., identifying the decedent, respond to a scene, conducting supplemental interviews, notifying family, order an autopsy)? □ Don't know—This specific data was not tracked
Check if estimate:
C11. In 2023, did any of the deaths that occurred on tribal lands reported in C8 meet your office's criteria to determine cause and/or manner of death? Do not include cases where another agency (e.g., State Medical Examiner) assumed jurisdiction to sign the death certificate. Yes No → SKIP to C13 on page 10
► C12. In 2023, for how many deaths that occurred on tribal lands did your office determine the cause and/or manner of death?
Don't know—This specific data was not tracked
Deaths
Check if estimate: These next questions ask about autopsies your office ordered or performed in 2023.
C13. Did your office conduct medicolegal autopsies <u>at your facility/ies</u> (e.g., conducted autopsies
"in-house") in 2023? Include referrals from other medicolegal death investigation authorities but exclude any private or clinical autopsies. Include both partial and complete autopsies. Yes
○ No → SKIP to C15
No → SKIP to C15 C14. In 2023, how many medicolegal autopsies did your office conduct <u>at your facility/ies (</u> e.g., conducted "in-house")?

faciliti offices Yes	our office order any m es in 2023? Include au , and private facilities c	utopsies s	sent State	esies to be conducted at a location other than your e Medical Examiners, other Medical Examiner/Coroner
	pply.	ner's offic	ce \ If yo	ered by your office performed? Please select all that our office does not use private facilities or hospitals to form autopsies -> SKIP to C19
C18. H	Number of a low far from your officequently? Less than 50 miles 50-100 miles Greater than 100 miles	autopsies ce is the	autopsy	ed at private facilitates/hospitals / facility or contractor your office uses most
	ing types of deaths w			ur office <u>routinely</u> perform or order autopsies for the cause and manner of death and signing the death
	of death	Yes	No	
a.	Drug related		0	
	Elderly			
	Homicides	0	<u> </u>	
d.	Motor vehicle	0	0	
e.	,	0	0	
f.	Suicide by hanging			
C20. In 2023	3, did medicolegal de	ath inves		dicolegal death investigations (MDI). s in your office perform scene investigations?

These next questions ask about your office's medicolegal death investigations (MDI).
C20. In 2023, did medicolegal death investigators in your office perform scene investigations? Yes No → SKIP to C22 on page 12
C21. In 2023, how many scene investigations did medicolegal death investigators conduct? Number of scene investigations

C22. For those functions that are conducted internally by your office, who is <u>primarily responsible</u> for performing the following duties? Select one for each row.							
	Du	ty	Forensic or Autopsy Pathologists	Death Investigators	Other Medical Examiner/Coroner Staff	Not applicable, this function is not performed by my office	
	e.	Determination of which deaths are accepted for further investigation	0		0	•	
	f.	Death scene investigations with inspection/ examination of body	0			0	
	g.	Determination of which deaths are autopsied	0		0	0	
	h.	Determination of which deaths receive forensic toxicology testing	0	0	0	0	
po	C23. At the death scene, external examination/inspection, or at autopsy, did your office routinely perform drug screening tests (e.g., urine screen or Randox®) in 2023? Yes No → SKIP to C25 C24. After performing drug screening tests, did your office routinely confirm positive results with toxicology testing in a laboratory in 2023? Yes Yes						
C25. For your office, who of the following is primarily responsible for notifying next of kin about the individual's death? Law enforcement personnel Medical examiner/coroner personnel Someone else (please specify):							

C26	_	223, did your office respond to a multiple fatality event with four or more decedents?
	\sim	res lo → SKIP to D1
	→ C27.	In 2023, how many multiple fatality events (4 or more decedents) did your office respond to? 1-5 6-10 More than 10
	C28.	Did your office need and/or use assistance from other jurisdictions to respond to multiple fatality events in 2023 for functions your office would normally complete independently? Yes No
		SPECIALIZED INVESTIGATIONS
For moi		ollowing questions, unidentified remains refer to remains that are <u>unidentified for 60 days or</u>
D1.	60 d —⊖ Y	of December 31, 2023, did your office have <u>any</u> records of remains that were unidentified for ays or more? Please include cases regardless of disposition of the remains.
4	O N	lo → SKIP to D7 on page 13
	→ D2.	In what year was the oldest case of unidentified remains currently on record reported to your office? YYYY
	D3.	How many cases of human remains did your office have on record that were unidentified for 60 days or more as of December 31, 2023? Please include cases regardless of disposition of the remains. Don't know Total number of unidentified humans remains on record Check if estimate:
	D4.	How long does your office generally hold unidentified human remains before disposition? Less than 1 month 1-2 months 3-6 months More than 6 months to a year More than 1 year Our office holds unidentified remains indefinitely
	D5.	How does your office dispose of unidentified human remains? Please select all that apply. Bury Cremate Our office holds unidentified remains indefinitely Other (please specify)

	D6. What biometrics and samples do you rou human remains? Please select all that app Dental records (charting) Dental Radiographs/X-rays Fingerprints Full body radiographs (X-ray, CT) Photos of identifying characteristics (e.g. Samples for DNA analysis (e.g., blood care)	ly. , tattoos, sca	ars, etc.)	sposition o	f unidentified
This	next question asks about suspected drug over			ing for all d	eaths some
<i>Ο1</i> .	deaths, or not at all? Exclude delayed overdose				eatiis, soille
	Action	All deaths	Most deaths	Some deaths	None/My office does not do this
	a. Go to scene of death if outside of hospital	0		0	
	b. Order an autopsy			0	
	c. Draw toxicology specimens	0	0	0	
	d. Run toxicology tests	\bigcirc			
	e. Consult with a toxicologist before determining cause and manner of death	0		0	
	RECORDS AND EVID	ENCE F	RETENT	ION	
E1.	Did your office have a computerized system u evidence as of December 31, 2023? Such a system or CMS. This does not inclumanage case information. ○ Yes → SKIP to E3 ○ No	tem is also	known as a d	computerize	d information
	►E2. What is the <u>primary</u> reason your office doe	e not have	2 CMS2 Sa	lact one	
	Do not want CMS Funding Privacy or security concerns Technology constraints Too few cases/records Other (please specify)	is not nave	a Civio: 36/	ect one.	
E3.	For deaths reported to your office in 2023, how produced, distinct from any logs, death certific All deaths Some deaths				
	○ No deaths				
	Olid not have any deaths				

E4.	Did your office have a written rete each row.	ntion scl	nedule fo				lect one for
		Yes	No	Not applicable not produc			
	a. Case records				\bigcirc		
	b. Forensic toxicology specimens	0	0		0		
	c. Biological specimens other than toxicology specimens	0	0		0		
	d. Non-biological evidence				\circ		
E5.	Did your office maintain records for the Hard copies Electronically Both Don't produce written records	or storag	je as har	d copies, electro	onically,	or both ir	ı 2023?
E6.	Upon the last administration chan a new coroner), did the current off the prior administration? Yes No Don't know						
E7.	Does your office archive hard cop Yes No → SKIP to F1 ►E8. Does your office archive hard any of the following places?	d copies	of your o	official investiga			
	Location	Ocioci ori	ic for cac	11 1 OW.	Yes	No	
	a. Government-owned office	<u>, </u>			res	NO	
	b. Government-run or gover		ntrolled s	etorage facility			
	c. A regulated third-party sto						
	d. Personal storage (including	_		,			
	e. Other business or office (office)			<u> </u>	0		
	,		W V 1		_		
		RESC	DURC	<u> </u>			
F1.	As of December 31, 2023, did your device, to use for official job functory Yes No		ave acce	ss to the Intern	et, sepai	rate from a	a personal
F2.	As of December 31, 2023, did your functions, separate from personal Yes			rk vehicle dedic	ated to	death inve	estigation

F3.	F3. As of December 31, 2023, did your office, or the agency with administrative oversight of your office, own a body storage cooler that you used for death investigation functions? Yes No → SKIP to F5							
	F4. What is the official maximum capacity of the body storage cooler(s)? Maximum capacity							
F5.	F5. Did your office have access to the following resources, either directly or through another agency, as of December 31, 2023? Select one for each row.							
	Resource	Yes, d	irectly	Yes, through a partner agency	No access			
	a. Criminal history databases							
	b. EMS records			0	0			
	c. Fingerprint databases				0			
	d. Law enforcement or other criminal records databases			0	0			
	e. Medical records databases			0	0			
	f. Prescription drug monitoring programs			0	0			
	row. Training or resource a. Mass fatality investigation b. Disaster planning (e.g., National Incident Management System [NIMS]) c. Bloodborne pathogens	Yes	No O					
F7.	d. Proper lifting procedures 7. In 2023, did your office provide mental health/wellness support (e.g., counseling, therapy, peer support) for staff? Yes No							
F8.	 8. In 2023, did your office participate in emergency response drills (e.g., state, county, regional or city)? Yes No Our state/region/county/city does not conduct emergency response drills 							
F9.	In, 2023, did your office participate in any fatalities, elderly/vulnerable adult fatalities, or ○ Yes ○ No → SKIP to F11 on page 16				example, for child			

F	F10. In 2023, did your office participate in the following multidisciplinary review teams? Select one for each row.						eams?	
		0		W		No	have o	fice did not cases of this
			oecialty area	Yes		No	typ	e in 2023
			Child fatality	0				0
			Elderly/vulnerable adult fatality					
			Overdose fatality	0				0
			Maternal death					
		e.	Suicide	0				
			lid your office participate in any of t	hese data colle	ectio	n efforts	or progr	ams? Select
			llection			Yes	No	Don't know
	S	וסמ	onal Missing and Unidentified Persons nsor: Department of Justice (DOJ)	,		0	0	0
	S	וסמ	onal Violent Death Reporting System (nsor: Centers for Disease Control and	Prevention (CD	C)	0	0	0
	(5	U	e Unintentional Drug Overdose Report DORS) nsor: Centers for Disease Control and	J	C)	0	0	0
			lid your office directly provide the fovices? Select one for each row.	ollowing suppo	ort se	ervices or	provide	referrals for
	Sunr	Support service		Service directly provided	Referral to another entity or organization		No	
			ocates for families of victims	provided		Organiz	duon	0
	b. G	rie ırv	f and bereavement services for ivors (e.g., counseling or therapy, icide survivor groups)	0		0		0
	b	/st	scene support or advocacy for anders or other family and friends of eased	0				0
F13. As of December 31, 2023, did your office have a dedicated family support specialist or counselor for family and friends of the deceased? Yes No								
	Thank you for your participation in the 2023 Census of Medical Examiner and Coroner Offices (CMEC). Your feedback is very important to us!							
			Please return your survey in the	e enclosed en	velo	pe or se	nd to:	
			-			-		
	Census of Medical Examiner and Coroner Offices RTI International ATTN: 0216093.000.005							

5265 Capital Boulevard

C.3 Addendum Instrument

Form CMEC-X OMB No. : Approval Expires

2023 CENSUS OF MEDICAL EXAMINER AND CORONER OFFICES



U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics

Acting as collection agent: RTI International

Please use this form to provide information on behalf of the following agency: [FILL AGENCY NAME HERE]

	If the agency name printed above is incorrect, please call us at 1-866-662-8134.	
Survey Insti	ructions:	
• Submit	t this form using one of the following four methods:	
o On	nline: https://www.bjscmec.org	
	Agency ID:	
	Password:	
○ E-n	mail: CMEC@rti.org	
	x: 1-800-647-9660 (toll-free)	
o Ma	ail: Use the enclosed postage-paid envelope	
	do not leave any items blank.	
	answer to a question is none or zero, write "0" in the space provided. When exact numeric answers are not available	e,
•	provide estimates and mark the estimate check box where appropriate.	
	ue or black ink and print as neatly as possible.	
Use an	X when marking an answer in a box.	
Please indi	licate the primary person who completed this form:	
Name:		
	Last Name First Name MI	
Title:		
Phone:		
	Area Code Number Extension	
Fax:		
	Area Code Number	
E-mail:		
Agency		

If you have any questions, call RTI toll-free at 1-866-662-8134, or send an e-mail to CMEC@rti.org. If you have general project-related questions, please contact Connor Brooks of BJS at (202) 514-8633 or Connor.Brooks@usdoj.gov.

Website:

Burden Statement

Federal agencies may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB Control Number. Public reporting burden for this collection of information is estimated to average 90 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate, or any other aspects of this collection of information, including suggestions for reducing this burden, to the Director, Bureau of Justice Statistics, 810 Seventh Street, NW, Washington, DC 20531. The Omnibus Crime Control and Safe Streets Act of 1968, as amended (34 USC 10132), authorizes this information collection. Although this survey is voluntary, we urgently need your cooperation to make the results comprehensive, accurate, and timely. We greatly appreciate your assistance.

Procedure	Yes	No	Decision made elsewhere (e.g. state medical examiners' office)
a. Scene investigation			
b. Doll re-enactment	0	0	0
c. Imaging, including x-ray, CT, or MRI	0	0	0
d. Autopsy	0	0	0
e. Forensic toxicology	0	0	0
f. Microbiology	0	0	0
g. Histology		0	0
9			
h. Genetic testing (e.g., sudden cardiac deaths) D2. Does your office use the Sudden Infant Death Sy a death certificate?	yndrome, or	SIDS, diaç	gnosis when completin
h. Genetic testing (e.g., sudden cardiac deaths) D2. Does your office use the Sudden Infant Death Sy	yndrome, or	SIDS, diaç	gnosis when completing
h. Genetic testing (e.g., sudden cardiac deaths) D2. Does your office use the Sudden Infant Death Sy a death certificate? Yes No Death certificate completed elsewhere		SIDS, diaç	gnosis when completing
h. Genetic testing (e.g., sudden cardiac deaths) D2. Does your office use the Sudden Infant Death Sy a death certificate? Yes No Death certificate completed elsewhere (e.g., state medical examiners' office)		SIDS, diaç	gnosis when completing
h. Genetic testing (e.g., sudden cardiac deaths) D2. Does your office use the Sudden Infant Death Sya death certificate? Yes No Death certificate completed elsewhere (e.g., state medical examiners' office) D3. Does your office record decedents' biological season Always Sometimes		SIDS, diag	gnosis when completing
h. Genetic testing (e.g., sudden cardiac deaths) D2. Does your office use the Sudden Infant Death Sy a death certificate? Yes No Death certificate completed elsewhere (e.g., state medical examiners' office) D3. Does your office record decedents' biological se Always		SIDS, diag	gnosis when completing
h. Genetic testing (e.g., sudden cardiac deaths) D2. Does your office use the Sudden Infant Death Sya death certificate? Yes No Death certificate completed elsewhere (e.g., state medical examiners' office) D3. Does your office record decedents' biological season Always Sometimes	ex?		
h. Genetic testing (e.g., sudden cardiac deaths) D2. Does your office use the Sudden Infant Death Sya death certificate? Yes No Death certificate completed elsewhere (e.g., state medical examiners' office) D3. Does your office record decedents' biological season Always Sometimes Never D4. Does your office record decedents' gender idental season and season are suggested as a season and season are suggested.	ex?		
h. Genetic testing (e.g., sudden cardiac deaths) D2. Does your office use the Sudden Infant Death Sy a death certificate? Yes No Death certificate completed elsewhere (e.g., state medical examiners' office) D3. Does your office record decedents' biological season Always Sometimes Never D4. Does your office record decedents' gender identive?	ex?		

AD5. Does your office capture race and/or ethnicity for decedents?
Yes
○ No → SKIP to AD7
AD6. Which of the following race and ethnicity categories do you capture for decedents?
White
Black or African American
Hispanic or Latino
American Indian or Alaska Native
Asian
☐ Native Hawaiian or Other Pacific Islander
Other (please specify)
AD7. How does your office dispose of unclaimed human remains? Please select all that apply.
☐ Bury ☐ Cremate
☐ Donate body to a body donation program
Donate body to other program(s) (e.g., museum)
Our office holds unclaimed remains indefinitely
Other (please specify)
AD8. For unclaimed remains, does your office work with Veterans Administration or other groups to determine if the decedent is a veteran?
Yes
○ No
AD9. When your office receives a death of a foreign national do you notify the consulate of the decedent's country of origin?
○ Yes
○ No
AD10. Are you aware of genetic screening as a test that medical examiner and coroner offices are starting to use?
○ Yes
○ No
AD11 In the last 5 years has your office cent any cases for genetic testing?
AD11. In the last 5 years has your office sent any cases for genetic testing? O Yes
O No
○ INO

AD12. Are you aware of the new Centers for Disease Control and Prevention's Collaborating Office for Medical Examiners and Coroners (COMEC) and the resources it offers MEC offices?
○ Yes
○ No
AD13. Does your office have access to a computerized axial tomography (CAT or CT) scan, either directly or through a partner agency?
○ Yes, directly
○ Yes, through a partner agency
○ No
AD14. Does your office have access to magnetic resonance imaging (MRI), either directly or through a partner agency?
○ Yes, directly
○ Yes, through a partner agency
○ No

Attachment 4: 60-day federal register notice, public comment and BJS response



in the study. A maximum of 600 jails will be contacted for study logistics planning and roster coordination at 75 minutes per facility for a total of 750 hours. During data collection, jail staff will escort a maximum of 10,000 inmates to and from interview sites at

15 minutes per inmate for a total of 2,500 hours. Inmate consent and survey participation total 73 minutes per interview for a total of 12,167 hours.

6. An estimate of the total public burden (in hours) associated with the collection: The estimated total public burden is 15,602 annual hours. This comprises 3,435 hours of facility staff burden and 12,167 hours of respondent interviewing burden.

7. An estimate of the total annual cost burden associated with the collection, if applicable: The estimated cost is \$90,450.

2024 SILJ ESTIMATED ANNUALIZED RESPONDENT COST AND HOUR BURDEN

Activity	Number of respondents	Frequency	Total annual response	Time per response (minutes)	Total annual burden (hours)	
Facility Recruitment and Logistic						
Introduction and Facility Approval	740 600	1 1	740 600	15 45	185 450	
	National St	udy				
Staff time—Providing inmate roster Staff time—Escorting inmates Consent—Inmate recruitment Interview—Participate in the SILJ	600 10,000 10,000 10,000	1 1 1 1	600 10,000 10,000 10,000	30 15 3 70	300 2,500 500 11,667	
Total	31,940		31,940		15,602	

If additional information is required, contact: Darwin Arceo, Department Clearance Officer, United States Department of Justice, Justice Management Division, Policy and Planning Staff, Two Constitution Square, 145 N Street NE, 4W–218, Washington, DC.

Dated: May 16, 2024.

Darwin Arceo,

Department Clearance Officer for PRA, U.S. Department of Justice.

[FR Doc. 2024-11115 Filed 5-20-24; 8:45 am]

BILLING CODE 4410-18-P

DEPARTMENT OF JUSTICE

[OMB Number 1121-0296]

Agency Information Collection
Activities; Proposed eCollection
eComments Requested;
Reinstatement, With Change, of a
Previously Approved Collection for
Which Approval Has Expired: Census
of Medical Examiner and Coroner
Offices (CMEC)

AGENCY: Bureau of Justice Statistics, Department of Justice.

ACTION: 60-Day notice.

SUMMARY: The Bureau of Justice Statistics, Department of Justice (DOJ) will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. **DATES:** Comments are encouraged and will be accepted for 60 days until July 22, 2024.

FOR FURTHER INFORMATION CONTACT: If you have comments especially on the estimated public burden or associated response time, suggestions, or need a copy of the proposed information collection instrument with instructions or additional information, please contact Matt Durose (email: *Matt.Durose@usdoj.gov*; telephone: 202–598–0295), Bureau of Justice Statistics, 810 Seventh Street NW, Washington, DC 20531.

SUPPLEMENTARY INFORMATION: Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address one or more of the following four points:

- —Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the Bureau of Justice Statistics, including whether the information will have practical utility;
- —Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- —Evaluate whether and if so, how the quality, utility, and clarity of the information to be collected can be enhanced; and
- —Minimize the burden of the collection of information on those who are to respond, including using appropriate

automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, *e.g.*, permitting electronic submission of responses.

Abstract: The Bureau of Justice Statistics (BJS) 2023 Census of Medical Examiner and Coroner Offices (CMEC) will provide comprehensive statistics regarding the organizational structure, operations, policies and procedures, finances, and resources of the approximately 2,300 medical examiner and coroner (MEC) offices in 2023 nationwide. In the United States, medicolegal death investigations are provided by MEC offices whose purpose is to determine the cause and manner of death. As such, these offices are valuable, unique sources of information to many stakeholders, including the federal government, local law enforcement, the court system, the public health community, and families. The 2023 CMEC will generate an enumeration of the number and type of MEC offices operating in the United States in 2023, staff at these offices, budget and capital resources, workload, policies and procedures regarding casework, specialized death investigations, records and evidence retention, resources, and operations. The 2023 CMEC will be the third administration of the survey since 2004. To provide more comprehensive statistics on the nation's medicolegal death investigations outside of the traditional MEC offices, the 2023 CMEC

will also include the approximately 700 justices of the peace in Texas that make cause and manner of death determinations but were out of scope for the 2004 and 2018 CMECs. The 2023 CMEC survey was assessed by a panel of practitioners and subject matter experts and revised to ensure content is up-to-date and relevant to the medicolegal death investigation system today. The survey has also been revised to improve clarity and ease of answering questions. The 2023 CMEC will extend the national understanding of medicolegal death investigations and complement BJS's data collections involving publicly funded forensic crime laboratories and law enforcement core statistics.

Overview of This Information Collection

1. Type of Information Collection: Reinstatement, with changes, of a

previously approved collection for which approval has expired.

2. Title of the Form/Collection: 2023 Census of Medical Examiner and Coroner Offices (CMEC)

3. Agency form number, if any, and the applicable component of the Department of Justice sponsoring the collection: The form number is CMEC-1. The applicable component within the Department of Justice is the Bureau of Justice Statistics (BJS), in the Office of

Justice Programs.

4. Affected public who will be asked or required to respond, as well as the obligation to respond: Affected public are state and local government agencies. The 2023 CMEC is revised from the 2018 CMEC. BJS plans to field the 2023 CMEC from September 2024 through July 2025. Respondents will be the staff at MEC offices and Texas justices of the peace. The obligation to respond is voluntary.

5. An estimate of the total number of respondents and the amount of time estimated for an average respondent to respond: A projected 3,000 respondents (including 2,300 MEC offices and 700 justices of the peace in Texas) will take an average of 90 minutes (1.5 hours) each to complete form CMEC-1, including time to research or find information not readily available. In addition, an estimated 1,500 respondents will be contacted for data quality follow-up at 15 minutes (.25 hours) per respondent.

6. An estimate of the total public burden (in hours) associated with the collection: The total burden hours for this collection is 4.875.

7. An estimate of the total annual cost burden associated with the collection, if applicable: \$1,301,727.

TOTAL BURDEN HOURS

Activity	Number of respondents	Frequency	Total annual responses	Time per response	Total annual burden (hours)
Survey Data Quality Follow-Up	3,000 1,500	1	3,000 1,500	90 min (1.5 hrs.) 15 min (.25 hrs.)	4,500 375
Unduplicated Totals	3,000		3,000		4,875

If additional information is required. contact: Darwin Arceo, Department Clearance Officer, United States Department of Justice, Justice Management Division, Policy and Planning Staff, Two Constitution Square, 145 N Street NE, 4W-218, Washington, DC.

Dated: May 16, 2024.

Darwin Arceo,

Department Clearance Officer for PRA, U.S. Department of Justice.

[FR Doc. 2024–11114 Filed 5–20–24; 8:45 am]

BILLING CODE 4410-18-P

NATIONAL FOUNDATION ON THE **ARTS AND THE HUMANITIES**

National Endowment for the Humanities

Meeting of Humanities Panel

AGENCY: National Endowment for the Humanities: National Foundation on the Arts and the Humanities.

ACTION: Notice of meeting.

SUMMARY: The National Endowment for the Humanities (NEH) will hold two additional meetings, by video conference, of the Humanities Panel, a

Federal advisory committee, in May 2024, and two meetings during June 2024. The purpose of the meetings is for panel review, discussion, evaluation, and recommendation of applications for financial assistance under the National Foundation on the Arts and the Humanities Act of 1965.

DATES: See SUPPLEMENTARY INFORMATION for meeting dates. The meetings will open at 8:30 a.m. and will adjourn by 5 p.m. on the dates specified below.

FOR FURTHER INFORMATION CONTACT:

Elizabeth Voyatzis, Committee Management Officer, 400 7th Street SW, Room 4060, Washington, DC 20506; (202) 606–8322; evoyatzis@neh.gov.

SUPPLEMENTARY INFORMATION: Pursuant to section 10(a)(2) of the Federal Advisory Committee Act (5 U.S.C. 10), notice is hereby given of the following meetings:

1. Date: May 20, 2024

This video meeting will discuss applications for the Dynamic Language Infrastructure—Documenting **Endangered Languages Fellowships** grant program, submitted to the Division of Preservation and Access.

2. Date: May 22, 2024

This video meeting will discuss applications on the topics of Democracy, Governance, and Trust, for the Trans-Atlantic Partnership grant program, submitted to the Division of Research Programs.

3. Date: June 25, 2024

This video meeting will discuss applications on the topics of History, Philosophy, and the Social Sciences, for the Fellowships grant program, submitted to the Division of Research Programs.

4. Date: June 26, 2024

This video meeting will discuss applications on the topics of Literature and the Arts, for the Fellowships grant program, submitted to the Division of Research Programs.

Because these meetings will include review of personal and/or proprietary financial and commercial information given in confidence to the agency by grant applicants, the meetings will be closed to the public pursuant to sections 552b(c)(4) and 552b(c)(6) of title 5, U.S.C., as amended. I have made this determination pursuant to the authority granted me by the Chair's Delegation of

 From:
 Tyler Counsil

 To:
 Durose, Matt (OJP)

Subject: [EXTERNAL] RE: Public comments requested on the reinstatement, with change, of a previously approved BJS

data collection: Census of Medical Examiner and Coroner Offices (CMEC)

Date: Monday, July 15, 2024 10:13:02 AM

Matt,

I hope I've reached the correct inbox for commenting on the most recent interest in bathering new Coroner/Medical Examiner (C/ME) data via <u>CMEC</u>. Your contact info. was present when I observed the Federal Register <u>URL</u> found on the original landing page.

I am a national trainer on death investigation through Zero Abuse Project, a non-profit dedicated to ending child abuse. I'm also the Chief Deputy Coroner and inbound Coroner for Daviess Co., IN.

In terms of comments RE: Evaluate whether and if so, the quality, utility, and clarity of the information to be collected can be enhanced--

- Data RE: C/ME education and training would be helpful. Namely, how much training do these professionals have (e.g., learning on the job, continuing education training events), how much training do they have, and how frequently they update their training.
 - A dive into core topics would be helpful, too:
 - SUID
 - SDY
 - Substance Use/Misuse/Abuse; maybe clarify on state's capacity to train or educate RE: Dealing Resulting in Death statutes.
 - Suicides
 - Homicide
 - Natural Deaths
 - Mass Fatality Incidents
- Our agency also favors the expanded evaluation of agency turnover/burnout and contributing factors (e.g., severity of casework, preparation or education and longevity in the field, peer support).
- Data RE: peer support, challenges with vicarious trauma, and secondary traumatic stress should be explored further, as we have seen quite a bit RE: training requests on the notion of self- and collective care in recent years.

Our team also believes this information from the survey--both the recommendations herein + ongoing surveillance of C/ME data--can be helpful in identifying topics, best practices, and training needs for the C/ME population, which is vastly understudied in the U.S., largely due to the decentralization and lack of federal/state funding opportunities to provide extensive training and evaluation on the topic.

Feel free to let me know if you need further clarification RE: these expanded queries.

Thanks.

Tyler

Tyler Counsil, Ed.D. | Director, Child Advocacy Studies (CAST) | Zero Abuse Project

651.714.4673x708 | tyler@zeroabuseproject.org | zeroabuseproject.org | Strengths: Learner-Achiever-Belief-Responsibility-Input | Pronouns: He-Him-His

<u>Learn more</u> about our training topics and visit our website to <u>request</u> additional information.

Appendix 4: Comments received during 60-day notice and BJS response

Comment from	Comment	BJS response
Coroner	"In terms of comments RE: Evaluate whether and if so, the quality, utility, and clarity of the information to be collected can be enhanced	Thank you for your recommendations to ways to enhance the utility of the CMEC. BJS recognizes that a survey on
	 Data RE: C/ME education and training would be helpful. Namely, how much training do these professionals have (e.g., learning on the job, continuing education training events), how much training do they have, and how frequently they update their training. A dive into core topics would be helpful, too:	the amount and types of education and training possessed by coroners and medical examiners, including on-the-job learning, continuing education, and a dive into the specific training topics, could benefit the C/ME population. In addition, BJS understands how an expanded evaluation on staff turnover/burnout, peer support, challenges with traumatic stress, and contributing factors (e.g., severity of casework) would be
	educate RE: Dealing Resulting in Death statutes. Suicides Homicide Natural Deaths Mass Fatality Incidents Our agency also favors the expanded evaluation of agency turnover/burnout and contributing factors (e.g., severity of casework, preparation or education and longevity in the field, peer support). Data RE: peer support, challenges with vicarious trauma, and secondary traumatic stress should be explored further, as we have seen quite a bit RE: training requests on the notion of self- and collective care in recent years.	As the CMEC is a survey completed by the office head about the overall characteristics of the agency, BJS must consider their ability to provide complete and accurate responses to the questions and the impact that adding new questions will have on the response rates for the core CMEC questions. In-depth interviews or a survey of the death investigators and C/ME professionals themselves on their education, training, and work experiences would require a different type of data collection. A survey dedicated
	Our team also believes this information from the surveyboth the recommendations herein + ongoing surveillance of C/ME datacan be helpful	T T

in identifying topics, best practices, and training needs for the C/ME population, which is vastly understudied in the U.S., largely due to the decentralization and lack of federal/state funding opportunities to provide extensive training and evaluation on the topic."

measure and collect through an administrative survey such as the CMEC and significantly increase the burden on the offices that respond. The upcoming CMEC will, however, include several general questions related to training, education, specialty areas of multidisciplinary review teams, and support services.

- Availability of funding for staff training.
- Whether staff had to use their own personal expenses for continuing education and certifications.
- Participation in trainings for mass fatality investigations and disaster planning.
- Participation in multidisciplinary review teams.
 - Child fatality
 - Elderly/vulnerable adult fatality
 - Overdose fatality
 - Maternal death
 - o Suicide
- Availability of mental health and wellness support for staff.
- Support services provided.
 - Advocates for families of victims
 - Grief and bereavement services
 - Support specialists and

trauma
counselors for
bystanders and
family/friends of
deceased
BJS will consider incorporating
the items you have proposed
for the future iterations of the
CMEC if an expanded evaluation
is determined to be feasible.
Thank you again for your
interest in this important data
collection.

Attachment 5: 30-day federal register notice

Billing Code: 4410-18

DEPARTMENT OF JUSTICE

[OMB Number 1121-0296]

Agency Information Collection Activities; Proposed eCollection eComments Requested;

Reinstatement, with change, of a previously approved collection for which approval has expired: Census of Medical Examiner and Coroner Offices (CMEC)

AGENCY: Bureau of Justice Statistics, Department of Justice

ACTION: 30-day Notice

SUMMARY: The Department of Justice (DOJ), Office of Justice Programs, Bureau of Justice Statistics, will be submitting the following information collection request to the Office of Management and Budget (OMB) for review and approval in accordance with the Paperwork Reduction Act of 1995. The proposed information collection was previously published in the Federal Register on May 21, 2024, allowing a 60-day comment period.

DATES: Comments are encouraged and will be accepted for 30 days until [INSERT DATE 30 DAYS AFTER DATE OF PUBLICATION IN THE FEDERAL REGISTER].

FOR FURTHER INFORMATION CONTACT: If you have comments especially on the estimated public burden or associated response time, suggestions, or need a copy of the proposed information collection instrument with instructions or additional information, please contact: Matt Durose (email: Matt.Durose@usdoj.gov; telephone: 202-598-0295), Bureau of Justice Statistics, 810 Seventh Street NW, Washington, DC 20531.

SUPPLEMENTARY INFORMATION:

Written comments and suggestions from the public and affected agencies concerning the proposed collection of information are encouraged. Your comments should address one or more of the following four points:

- Evaluate whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information will have practical utility;
- Evaluate the accuracy of the agency's estimate of the burden of the proposed collection of information, including the validity of the methodology and assumptions used;
- Enhance the quality, utility, and clarity of the information to be collected; and/or
- Minimize the burden of the collection of information on those who are to respond, including through the use of appropriate automated, electronic, mechanical, or other technological collection techniques or other forms of information technology, e.g., permitting electronic submission of responses.

Written comments and recommendations for this information collection should be submitted within 30 days of the publication of this notice on the following website www.reginfo.gov/public/do/PRAMain. Find this particular information collection by selecting "Currently under 30-day Review—Open for Public Comments" or by using the search function and entering either the title of the information collection or the OMB Control Number [1121-0296]. This information collection request may be viewed at www.reginfo.gov. Follow the instructions to view Department of Justice, information collections currently under review by OMB.

DOJ seeks PRA authorization for this information collection for three (3) years. OMB authorization for an ICR cannot be for more than three (3) years without renewal. The DOJ notes that information collection requirements submitted to the OMB for existing ICRs receive a month-to-month extension while they undergo review.

Overview of this information collection:

- 1. Type of Information Collection: Reinstatement, with changes, of a previously approved collection for which approval has expired.
- Title of the Form/Collection: 2023 Census of Medical Examiner and Coroner Offices
 (CMEC)
- 3. Agency form number, if any, and the applicable component of the Department of Justice sponsoring the collection: The form number is CMEC-1. The applicable component within the Department of Justice is the Bureau of Justice Statistics (BJS), in the Office of Justice Programs.
- 4. Affected public who will be asked or required to respond, as well as a brief abstract: Affected Public: Affected public are state and local government agencies. The 2023 CMEC is revised from the 2018 CMEC. BJS plans to field the 2023 CMEC from September 2024 through July 2025. Respondents will be the staff at MEC offices and Texas justices of the peace.

Abstract: The Bureau of Justice Statistics (BJS) 2023 Census of Medical Examiner and Coroner Offices (CMEC) will provide comprehensive statistics regarding the organizational structure, operations, policies and procedures, finances, and resources of the approximately 2,300 medical examiner and coroner (MEC) offices in 2023 nationwide. In the United States, medicolegal death investigations are provided by MEC offices whose purpose is to determine the cause and manner of death. As such, these offices are valuable, unique sources of information to many stakeholders, including the federal government, local law enforcement, the court system, the public health community, and families. The 2023 CMEC will generate an enumeration of the

number and type of MEC offices operating in the United States in 2023, staff at these offices, budget and capital resources, workload, policies and procedures regarding casework, specialized death investigations, records and evidence retention, resources, and operations. The 2023 CMEC will be the third administration of the survey since 2004. To provide more comprehensive statistics on the nation's medicolegal death investigations outside of the traditional MEC offices, the 2023 CMEC will also include the approximately 700 justices of the peace in Texas that make cause and manner of death determinations but were out of scope for the 2004 and 2018 CMECs. The 2023 CMEC survey was assessed by a panel of practitioners and subject matter experts and revised to ensure content is up-to-date and relevant to the medicolegal death investigation system today. The survey has also been revised to improve clarity and ease of answering questions. The 2023 CMEC will extend the national understanding of medicolegal death investigations and complement BJS's data collections involving publicly funded forensic crime laboratories and law enforcement core statistics.

- 5. Obligation to Respond: The obligation to respond is voluntary.
- Total Estimated Number of Respondents: A projected 3,000 respondents (including 2,300 MEC offices and 700 justices of the peace in Texas) will complete form CMEC-1. In addition, an estimated 1,500 respondents will be contacted for data quality follow-up at 15 minutes (.25 hours) per respondent.
- 7. Estimated Time per Respondent: CMEC-1 will take an average of 90 minutes (1.5 hours) for each of the 3,000 respondents to complete. In addition, an estimated 1,500

respondents will be contacted for data quality follow-up at 15 minutes (.25 hours) per respondent.

- 8. Frequency: Each respondent will complete the CMEC-1 once.
- 9. Total Estimated Annual Time Burden: The total burden hours for this collection is 4,875.
- 10. Total Estimated Annual Other Costs Burden: \$1,296,618.

Total Burden Hours

Activity	Number of Respondents	Frequency	Total Annual Responses	Time Per Response	Total Annual Burden (Hours)
				90 min	
Survey	3,000	1	3,000	(1.5 hrs.)	4,500 hrs.
Data Quality				15 min	
Follow-Up	1,500	1	1,500	(.25 hrs.)	375 hrs.
Unduplicated					
Totals	3,000	•••••	3,000		4,875 hrs.

If additional information is required, contact: Darwin Arceo, Department Clearance Officer,
Policy and Planning Staff, Justice Management Division, United States Department of Justice,
Two Constitution Square, 145 N Street NE, 4W-218 Washington, DC 20530.

Dated: [Date].

Darwin Arceo,

Department Clearance Officer for PRA,

U.S. Department of Justice.

Attachment 6: Survey invitation letters for MEC offices and Texas justices of the peace



U.S. Department of Justice

Office of Justice Programs

Bureau of Justice Statistics

Washington, DC 20531

«TITLE» «POC NAME» OR CURRENT CHIEF EXECUTIVE «MEC» «ADDRESS1», «ADDRESS2» «CITY», «STATE» «ZIP»

Dear «TITLE» «NAME»:

I am writing to ask for your participation in the 2023 Census of Medical Examiner and Coroner Offices (CMEC) which now includes justices of peace with responsibilities for death investigations in much of Texas. The Bureau of Justice Statistics (BJS) last conducted the CMEC in 2018 and your response to the new CMEC is critical to provide current information on the personnel, policies, and practices of agencies that conduct death investigations.

The CMEC is endorsed by several professional organizations including the National Association of Medical Examiners, the International Association of Coroners and Medical Examiners, the American Board of Medicolegal Death Investigators, the National Sheriffs' Association, and the Society of Medicolegal Death Investigators.

To participate, please access the survey at https://www.bjscmec.rti.org. Your log-in information is:

Username: «WebUsername»

Password: «PIN»

Please complete this questionnaire online by December 15, 2024.

The questionnaire takes approximately 90 minutes to complete. You may download a copy of the survey to assist you in gathering the necessary data and you may share it with others who can assist in providing the requested information.

If you need to change the point of contact for your office or update your contact information, go to https://www.bjscmec.rti.org using the username and password above and follow the instruction provided. If you have questions about the questionnaire, please contact RTI International at [RTI NUMBER] or CMEC@rti.org. If you have any general comments, please contact Matt Durose, the program manager from BJS, at 202-598-0295 or Matt.Durose@usdoj.gov.

BJS uses the data collected in the CMEC only for research and statistical purposes, as described in Title 34, USC §10134. As the CMEC data collection contractor, RTI International is required to adhere to BJS Data Protection Guidelines, which include the federal statutes, regulations, and other authorities that govern BJS data and data collected and maintained under BJS's authority.

Thank you in advance for your office's participation in the CMEC. We appreciate your consideration, time, and effort.

Sincerely,

Kevin M. Scott, PhD Acting Director Bureau of Justice Statistics U.S. Department of Justice



U.S. Department of Justice

Office of Justice Programs

Bureau of Justice Statistics

Washington, DC 20531

«TITLE» «POC NAME»
OR CURRENT CHIEF EXECUTIVE
«MEC»
«ADDRESS1», «ADDRESS2»
«CITY», «STATE» «ZIP»

Dear «TITLE» «NAME»:

I am writing to ask for your participation in the 2023 Census of Medical Examiner and Coroner Offices (CMEC). The Bureau of Justice Statistics (BJS) last conducted the CMEC in 2018 and your response to the new CMEC is critical to provide current information on the personnel, policies, and practices of agencies that conduct death investigations.

The CMEC is endorsed by several professional organizations including the National Association of Medical Examiners, the International Association of Coroners and Medical Examiners, the American Board of Medicolegal Death Investigators, the National Sheriffs' Association, and the Society of Medicolegal Death Investigators.

To participate, please access the survey at https://www.bjscmec.rti.org. Your log-in information is:

Username: «WebUsername»

Password: «PIN»

Please complete this questionnaire online by December 15, 2024.

The questionnaire takes approximately 90 minutes to complete. You may download a copy of the survey to assist you in gathering the necessary data and you may share it with others who can assist in providing the requested information.

If you need to change the point of contact for your office or update your contact information, go to https://www.bjscmec.rti.org using the username and password above and follow the instruction provided. If you have questions about the questionnaire, please contact RTI International at [RTI NUMBER] or CMEC@rti.org. If you have any general comments, please contact Matt Durose, the program manager from BJS, at 202-598-0295 or Matt.Durose@usdoj.gov.

BJS uses the data collected in the CMEC only for research and statistical purposes, as described in Title 34, USC §10134. As the CMEC data collection contractor, RTI International is required to adhere to BJS Data Protection Guidelines, which include the federal statutes, regulations, and other authorities that govern BJS data and data collected and maintained under BJS's authority.

Thank you in advance for your office's participation in the CMEC. We appreciate your consideration, time, and effort.

Sincerely,

Kevin M. Scott, PhD Acting Director Bureau of Justice Statistics U.S. Department of Justice

Attachment 7: Endorsement letter



International Association of Coroners & Medical Examiners

Collaboration · Education · Accreditation

Dedicated to the promotion of excellence in medicolegal death investigation through collaboration, education, and accreditation.

[DATE]

Dear Fellow Medical Examiner or Coroner:

The purpose of this letter is to encourage you to participate in the attached 2023 Census of Medical Examiner and Coroner Offices (CMEC), which the International Association of Coroners and Medical Examiners (IACME) strongly supports. The Bureau of Justice Statistics (BJS), working with RTI International (RTI), is sending the CMEC to every medical examiner and coroner office in the United States with the goal of generating statistics that will develop a detailed understanding of the U.S. medicolegal death investigation system and gather information that will help address training, staffing, and jurisdictional coverage needs. **IACME is hoping that you will participate in this important survey effort.**

The information produced by the CMEC will provide valuable data regarding staffing, budget, and caseload information that will be comparable to the previous CMEC administration, which referenced 2018. The previous CMEC found, for example, that the estimated total annual budget across all MEC offices in the U.S. was \$1.5B, and the average budget per office ranged from \$60,000 to over \$1.8M depending on office size and type. For more information about the previous CMEC's survey results that referenced 2018, please see:

https://bjs.ojp.gov/data-collection/census-medical-examiner-and-coroner-mec-offices.

Your response to the 2023 CMEC is critical to obtain national estimates of personnel, resources, policies, and infrastructure of our community. Since it is a census, your responses cannot be replaced. The CMEC is the only systematic survey effort of its kind to focus on our community and directly supports the IACME's mission of promoting excellence in the day-to-day investigation of individual cases as well as improving the interaction of death investigation systems with other agencies and political entities that interact with death investigation efforts. We know that you and your staff have many responsibilities and limited time, but we hope that you will provide the requested information and contribute to this effort. Your participation will help ensure that the 2023 CMEC is a success and that the results can be used with confidence by the federal government and by our community.

Sincerely,

IACME Board of Directors

Attachment 8: Survey email invitation and CMEC flyer

TO: «TITLE» «POC NAME» OR CURRENT CHIEF EXECUTIVE «MEC»

SUBJECT: Census of Medical Examiner and Coroner Offices

Dear «TITLE» «NAME»:

Last week, we sent you the 2023 Census of Medical Examiner and Coroner Offices (CMEC) and would like to confirm that you successfully received your invitation. I encourage you to contact RTI International if you have any questions related to the data collection or did not receive the invitation.

Please reply to this message to indicate that you received the 2023 CMEC invitation.

In the event you did not receive the materials, the survey invitation and an informational flyer on the CMEC are provided in this email.

Thank you,

Matt Durose Program Manager Bureau of Justice Statistics

Survey Invitation Letter



The Census of Medical Examiner and Coroner Offices (CMEC) is a national survey conducted by the <u>Bureau of Justice Statistics (BJS)</u> to provide much-needed statistics on the important work of the agencies conducting medicolegal death investigations. It provides one of the only national snapshots of the current operations and the resources available to conduct the work.

What information does the CMEC collect?

The survey collects data on a variety of topics relevant to medical examiner and coroner offices, including:

- Staff size and functions they perform
- Budget and funding sources
- Resources and technology
- Types of work performed
- Policies and procedures

As the principal statistical agency of the Department of Justice, BJS will use these data to publish a report with national statistics on the current workloads and operations of medical examiner and coroner offices. The results will help to identify resource needs and changes since the CMEC was last conducted in 2018. The 2018 CMEC report is available at https://bjs.ojp.gov/content/pub/pdf/meco18.pdf.

Why should my office participate?

The CMEC is vital to understanding the operations of the offices performing medicolegal death investigations nationwide. Because this is a census requesting data from <u>all</u> offices, your office's data cannot be reproduced, and can help lead to an understanding of the diversity among offices. The survey will provide key information that in turn can be used to drive policy and resourcing decisions by providing nationally representative statistics to policymakers. We know that you have many responsibilities and increasing caseloads and get a multitude of requests for information. We truly appreciate your time and effort to support this project.

How can I find out more about the 2023 CMEC?

For questions or more information, please contact RTI International at CMEC@rti.org.

Please complete your survey by December 15

Attachment 9: First reminder letter



U.S. Department of Justice

Office of Justice Programs

Bureau of Justice Statistics

Washington, DC 20531

«TITLE» «POC NAME» «MEC» «ADDRESS1», «ADDRESS2» «CITY», «STATE» «ZIP»

Dear «TITLE» «NAME»:

The Bureau of Justice Statistics (BJS) is conducting the 2023 Census of Medical Examiner and Coroner Offices (CMEC). Last month, RTI sent <<MEC>> an invitation on behalf of BJS to participate in the CMEC. We hope to receive your survey soon so that the results of this census reflect the important work of all agencies the conduct medicolegal death investigations nationwide. Information from your office is needed to ensure the results are nationally representative.

The questionnaire due date is **December 15, 2024**. Please complete the CMEC questionnaire by that date if possible. I understand that you often receive survey requests and I genuinely appreciate your attention to this request.

You may access the questionnaire online at <u>bjscmec.rti.org</u> and entering the following information:

User Name: <<WebUsername>>
Password: <<PIN>>

If you have questions about CMEC or need to update your contact information, please contact the RTI team at [RTI NUMBER] or CMEC@rti.org. If you have any general comments about this data collection, please contact me at 202-598-0295 or Matt.Durose@usdoj.gov.

Thank you for your time and consideration.

Sincerely,

Matt Durose Program Manager Bureau of Justice Statistics

«caseID»

Attachment 10: Second reminder email

TO: «TITLE» «POC NAME» OR CURRENT CHIEF EXECUTIVE «MEC»

SUBJECT: Census of Medical Examiner and Coroner Offices

Dear «TITLE» «NAME»:

Recently, materials related to the 2023 Census of Medical Examiner and Coroner Offices (CMEC) were sent to you by mail. This email message is to request confirmation that we have successfully reached you and encourage you to contact us if you have any questions related to the data collection.

Please reply to this message to confirm that we have reached <<MEC>>.

The information contained in the letter that we mailed most recently (on <<DATE>>) is provided below.

Thank you,

Matt Durose Program Manager Bureau of Justice Statistics

First Reminder Letter

Attachment 11: Third reminder postcard

VISIT BJSCMEC.RTI.ORG

The CMEC provides
national statistics on the
resource needs of
medical examiner and
coroner (MEC) offices.





One in four MECs across the U.S. did not have access to the internet separate from a personal device in 2018, per the CMEC.

RTI International 3040 East Cornwallis Road Research Triangle Park, NC 27709





FOR ASSISTANCE SEE: BJSCMEC.RTI.ORG OR CONTACT US AT CMEC@RTI.ORG

The CMEC provides national statistics on budgets, staffing, workload, and resources of medical examiner and coroner offices.



YOUR PARTICIPATION MATTERS!

JOHN DOE 3040 East Cornwallis Road Research Triangle Park, NC 27709

Attachment 12: Fourth reminder letter



U.S. Department of Justice

Office of Justice Programs

Bureau of Justice Statistics

Washington, DC 20531

«TITLE» «POC NAME» OR CURRENT CHIEF EXECUTIVE «MEC» «ADDRESS1», «ADDRESS2» «CITY», «STATE» «ZIP»

Dear «TITLE» «NAME»:

«MEC» has been asked to participate in the Bureau of Justice Statistics' (BJS) Census of Medical Examiner and Coroner Offices (CMEC). CMEC data will be used by policy makers and researchers to better understand and respond to the challenges facing medical examiners and coroners such as yourself. No other national data collection can provide comprehensive data on administrative issues, budget and resources, workload, specialized death investigations, records and evidence retention, and training. Since CMEC is a census, your responses are critical to making the results nationally representative.

I recognize that you may not have received the previous correspondence or that you may not have responded because of time constraints. I appreciate that your time is limited; however, the reliability of the study directly depends on your participation. The questionnaire includes items that are relevant to all medical examiner and coroner offices, and your responses are essential to our ability to provide the information needed by practitioners, policy makers, and other stakeholders.

Please complete the questionnaire by using this link <u>bjscmec.rti.org</u> and entering the following information:

User Name: <<WebUsername>>
Password: <<PIN>>

Alternatively, you can submit your data by mail using the enclosed hardcopy questionnaire and business reply envelope.

The questionnaire due date was December 15, 2024. Please submit your questionnaire as soon as possible. If you have questions about the CMEC survey or having difficulty accessing the website, please contact RTI's data collection team at [RTI NUMBER] or CMEC@rti.org. If you have any general comments about this data collection, please contact me at 202-598-0295 or Matt.Durose@usdoj.gov.

Sincerely,

Matt Durose Program Manager Bureau of Justice Statistics

Enclosures: CMEC questionnaire; Business reply envelope

Attachment 13: Fifth reminder email

TO: «TITLE» «POC NAME» OR CURRENT CHIEF EXECUTIVE «MEC»

SUBJECT: Census of Medical Examiner and Coroner Offices

Dear «TITLE» «NAME»:

Recently, materials related to the 2023 Census of Medical Examiner and Coroner Offices (CMEC) were sent to you by mail. This email message is to request confirmation that we have successfully reached you and encourage you to contact us if you have any questions related to the data collection.

Please reply to this message to confirm that we have reached <<MEC>>.

The information contained in the letter that we mailed most recently (on <<DATE>>) is provided below.

Thank you,

Matt Durose Program Manager Bureau of Justice Statistics

«caseID»

Fourth Reminder Letter

Attachment 14: Sixth reminder email

To: «Survey Contact Email»

If Survey Contact Email is not available, send to Chief Email

Subject: 2023 Census of Medical Examiner and Coroner Offices (CMEC) Reminder | << Facility

Name>>

Body of Email:

Dear « TITLE» «First Name» «Last Name»: Match e-mail address to Title and Name

I'm writing on behalf of the Bureau of Justice Statistics (BJS) to remind you that «FACILITYNAME» has been invited to participate in the 2023 Census of Medical Examiner and Coroner Offices (CMEC).

This data collection has been endorsed by the National Association of Medical Examiners, the International Association of Coroners and Medical Examiners, the American Board of Medicolegal Death Investigators, the National Sheriffs' Association, and the Society of Medicolegal Death Investigators. The endorsements from these organizations can be found on our website: https://bjscmec.rti.org.

All survey responses are crucial to this effort, and we need your participation in order to have reliable results.

Please complete the 2023 CMEC questionnaire as soon as possible. I understand that you often receive survey requests and I appreciate your attention to this request.

You may access the questionnaire online at: https://bjscmec.rti.org Your office-specific information is:

Username: «CaseID»
Password: «Password»

Thank you for your time and consideration.

Sincerely,

Matt Durose Program Manager Bureau of Justice Statistics

Attachment 15: Seventh reminder letter

[DATE]

«First Name» «Last Name» «Facility» «ADDRESS1», «ADDRESS2» «CITY», «STATE» «ZIP»

Dear «First Name» «Last Name»:

On behalf of the Bureau of Justice Statistics (BJS), RTI International is conducting the Census of Medical Examiner and Coroner Offices (CMEC). This letter is to remind you that «FACILITYNAME» has been invited to participate in CMEC. All responses are crucial to this effort, and we need your participation in order to have reliable results.

This data collection has been endorsed by the National Association of Medical Examiners, the International Association of Coroners and Medical Examiners, the American Board of Medicolegal Death Investigators, the National Sheriffs' Association, and the Society of Medicolegal Death Investigators. The endorsements from these organizations can be found on the website listed below.

As of [DATE], [X]% of offices have responded. Although the questionnaire is past due, we are still accepting surveys. Please complete the 2023 CMEC questionnaire as soon as possible. I understand that you receive a number of survey requests and I appreciate your attention to this request.

Please access the questionnaire online at https://www.bjscmec.rti.org. Your facility-specific information is:

Username: «CaseID»
Password: «Password»

Alternatively, you can submit your data by mail using the enclosed hardcopy questionnaire and business reply envelope.

BJS will use the data collected only for research and statistical purposes. Your response is very important to help policymakers and researchers better understand and respond to the challenges facing medical examiners and coroners such as yourself.

If you have questions about the CMEC survey, would like a hardcopy mailed to you or are having difficulty accessing the website, please contact RTI via phone toll-free at 1-##-#### or via email at cmec@rti.org. If you have any general comments about this data collection, please contact me at 202-598-0295 or <a href="mailto:

Sincerely,

Matt Durose Program Manager Bureau of Justice Statistics

Attachment 16: Eighth reminder letter

«Firstname» «Lastname» «FACILITY» «ADDRESS1», «ADDRESS2» «CITY», «STATE» «ZIP»

Dear «Firstname» «Lastname»:

On behalf of the Bureau of Justice Statistics (BJS), RTI International is conducting the 2023 Census of Medical Examiner and Coroner Offices (CMEC). RTI has not received your completed survey.

The results from the 2023 CMEC can help to support important policy and budget decisions.

As of [INSERT DATE], <% Completed> of offices in <STATE NARRATIVE> have submitted surveys.

Don't miss your chance to speak up for your office and <STATE NARRATIVE>!

The survey due date is [INSERT DATE]. Please complete the CMEC questionnaire as soon as possible. I understand that you receive numerous survey requests and I genuinely appreciate your attention to this request.

You may access the questionnaire online at https://www.bjscmec.rti.org and entering the following information:

Username: <<CASEID>>
Password: <<PASSWORD>>

If you have questions about CMEC, need to change the point of contact for your office, or need to update your contact information, please contact the RTI team via phone or e-mail at 1-###-#### or CMEC@rti.org. If you have any general comments about this data collection, please contact me at 202-598-0295 or Matt.Durose@usdoj.gov.

Thank you for your time and consideration.

Sincerely,

Matt Durose Program Manager Bureau of Justice Statistics

«caseID»

Attachment 17: Ninth reminder email

To: «Survey Contact Email»

Subject: 2023 Census of Medical Examiner and Coroner Offices (CMEC) Reminder | << Facility Name>>

Body of Email:

On behalf of the Bureau of Justice Statistics (BJS), RTI International is conducting the 2023 Census of Medical Examiner and Coroner Offices (CMEC). RTI has not received your completed survey.

The results from the 2023 CMEC can help to support important policy and budget decisions.

As of [INSERT DATE], <% Completed> of offices in <STATE NARRATIVE> have submitted surveys.

Don't miss your chance to speak up for your office and <STATE NARRATIVE>!

The survey due date is [INSERT DATE]. Please complete the CMEC questionnaire as soon as possible. I understand that you receive numerous survey requests and I genuinely appreciate your attention to this request.

You may access the questionnaire online at https://bjscmec.rti.org and entering the following information:

Username: <<CASEID>>
Password: <<PASSWORD>>

If you have questions about CMEC, need to change the point of contact for your office, or need to update your contact information, please contact the RTI team via phone or e-mail at 1-###-#### or CMEC@rti.org. If you have any general comments about this data collection, please contact me at 202-598-0295 or Matt.Durose@usdoj.gov.

Thank you for your time and consideration.

Sincerely,

Matt Durose Program Manager Bureau of Justice Statistics

«caseID»

Attachment 18: Telephone follow-up scripts for data quality

Sample Call Script for Data Quality Follow-up Calls

[IF CALL RINGS TO A GATEKEEPER]

Hello, this is <<INSERT NAME>> calling on behalf of the Bureau of Justice Statistics regarding the 2023 Census of Medical Examiner and Coroner Offices. I am following up on a survey invitation that we sent addressed to <<POC NAME>>. May I speak with <<POC NAME>>?

[IF CALL RINGS TO POC]

Hello, this is <<INSERT NAME>> calling on behalf of the Bureau of Justice Statistics regarding the 2023 Census of Medical Examiner and Coroner Offices. It is important that we obtain complete data from all medical examiner and coroner offices. I'm calling to confirm that we have everything recorded correctly and completely for your office. This should only take a few minutes of your time.

BEGIN READING QUESTION(s) THAT IS (ARE) MISSING INFORMATION OR HAVE INCONSISTENT RESPONSES.

Thank you for your time.

Attachment 19: Telephone follow-up scripts for nonresponse

Phone Prompting Specifications CMEC Non-Response Follow-Up CATI Script

USE 2690 AS THE COMPLETED SURVEY CODE TO INDICATE COMPLETE VIA WEB OR TELEFORM AND NO PROMPTING NEEDED.

NT00.

PROGRAMMER, DISPLAY:
STATUS, DATE OF LAST CALL, NUMBER OF ATTEMPTS

LEAD_IN

Shows:

- Case Level Status
- Line Level Status
- Case-Level Comments
- Date of Last Call
- Last Appt
- Contact info

TW

WHAT DO YOU WANT TO DO?

- 1 = CONTINUE WITH THIS CASE **{GO TO AUTO_DIAL1}**
- 2 = REVIEW RECORD OF EVENTS
- 3 = REVIEW ROSTER OF NUMBERS AND NAMES **(GO TO ROSTER LINES)**
- 4 = REVIEW/ENTER CASE LEVEL COMMENTS **(GO TO CASE COMMENTS)**
- 6 = SAVE THE CURRENT CASE; GET ANOTHER CASE OR EXIT CATI-CMS
- 7 = SCHEDULE A CALLBACK **{GO TO SCHEDULER}**}
- 8 = CHOOSE A NEW NUMBER TO CALL **GO TO ROSTER LINES**}
- 9= CALL IN CASE **{GO TO CALL_IN}**
- 90 = SPECIAL OPTIONS

DIAL1

DID A PERSON ANSWER THE PHONE (NOT OPERATOR)?

- 1 = YES {IF QINT1 already has a response, GO TO CALLBACK; ELSE GO TO QINT1}
- 2 = NO **(GO TO DIAL2)**
- 9= CALL IN CASE **(GO TO CALL_IN)**

DIAL2

WHAT IS THE RESULT OF THIS CALL?

1265 = ANSWERING MACHINE **(GO TO ANSPROMPT1)**

```
1201 = RING NO ANSWER
```

1202 = BUSY SIGNAL / ALL CIRCUITS BUSY

1273 = DISCONNECTED NUMBER / CALL CANNOT BE COMPLETED AS DIALED

1274 = TEMPORARILY DISCONNECTED / LINE TROUBLE

1281 = MODEM / FAX MACHINE

1271 = RECORDING GIVES NEW NUMBER

1282 = BEEPER / PAGER

1275 = BLOCKED LINE / # DOES NOT ACCEPT INCOMING CALLS

1287 = PRIVACY MANAGER

1543 = TDD REQUIRED

1284 = MOBILE / CELL PHONE

[PROGRAMMER – only route callback screen if this is a callback to a case that has already completed some of the front-end questions.]

CALL IN

Hi, you've reached 2023 Census of Medical Examiner and Coroner Offices, also known as CMEC, this is [INTERVIEWER NAME], how may I help you?

1 WILL COMPLETE SURVEY ONLINE [GO TO QINT20]

2 WILL COMPLETE A HARD-COPY [GO TO QINT23]

3 WILL COMPLETE ON PHONE NOW [OPEN SURVEY IN HATTERAS]

4 SET CALLBACK TO COMPLETE ON PHONE LATER [SET CALLBACK]

9 REFUSED [GO TO QINT28]

CALLBACK. Hello, this is [INTERVIEWER NAME], calling from RTI regarding the 2023 Census of Medical Examiner and Coroner Offices, also known as CMEC, that is being conducted by the Bureau of Justice Statistics.

We previously spoke with someone at this office and wanted to offer our assistance with any questions you have about the survey.

1 CONTINUE [pick up where left off last time, or else QINT11 if front end is completed]

QINT1. Hello, this is <<INTERVIEWER NAME>>, calling from RTI regarding the 2023 Census of Medical Examiner and Coroner Offices, also known as CMEC.

I'm following up on a notification that we sent to <<FILL MEC>> regarding a shortened version of the CMEC survey" Have I reached <<FILL MEC>>?

1 YES **[GO TO QINT11]**

2 NO **[GO TO QINT2]**

QINT2. What is your office's/agency's name?

QINT3. What is the office's/agency's address?

INTERVIEWER INSTRUCTION: DO NOT READ ADDRESS TO R

[PROGRAMMER: FILL ADDRESS]

1 YES - MATCH TO RECORDS [GO TO QINT7]

2 NO - DOES NOT MATCH RECORDS [GO TO NEW_ADDR1]

NEW_ADDR1. INTERVIEWER: RECORD ADDRESS, ASKING RESPONDENT TO REPEAT IF NECESSARY.

ADDRESS 1:

ADDRESS 2:

CITY:

STATE:

ZIP:

QINT5. Let me just confirm that I have the address listed correctly.

INTERVIEWER: IF NOT CORRECT, BACK UP TO CORRECT THE INFORMATION. [PROGRAMMER: DISPLAY MEC, ADDRESS, NEW INFORMATION JUST PROVIDED.]

QINT7.

Is this the best number to reach you: <<area >>-<<phone>>?

- 1 CORRECT NUMBER [GO TO QINT11]
- 2 NOT CORRECT [GO TO QINT8]
- 3 WOULD LIKE TO BE CALLED ON A NEW NUMBER [GO TO TELO6]

QINT8. W	Vhat phone number have I reache	d?
[PROGRA	AMMER: APPEND THE PHONE NUM	MBER TO THIS CASE.]
[GO TO 0	QINT11]	

TEL06. What is the best number that you may be reached?

(ENTER NUMBER WITH NO DASHES, SPACES OR OTHER PUNCTUATION)

INTERVIEWER: END THIS CALL. Thank you for providing me with this information, I will call the new number promptly. Have a nice day.

WHEN CATI ASKS "DO YOU NEED TO RETURN TO THE MAIN MENU FOR THIS CASE?", ANSWER YES IN ORDER TO MAKE A NEW CALL TO THIS CASE USING THE NEWLY COLLECTED PHONE NUMBER.

[PROGRAMMER: APPEND THE PHONE NUMBER TO THIS CASE; RESUME AT CALLBACK/QINT11 FOR NEXT CALL TO THIS CASE (see note).]

[GO TO QINT11 - PROGRAMMER: ** CALL SHOULD RESUME HERE AFTER TELO6 **]

QINT11.

May I speak with <<name>>?

- 1 TRANSFER TO POC (LIVE) [GO TO QINT14]
- 2 GATEKEEPER IS POC [GO TO QINT14]
- 3 TRANSFER TO VM FOR POC [GO TO ANSPROMPT1]
- 4 NO/NOT AVAILABLE SCHEDULE CALLBACK [GO TO INTO6]
- 5 POC NO LONGER IN MEC [GO TO QINT12]
- 9 REFUSED **[GO TO QINT28]**

QINT12.

INTERVIEWER INSTRUCTION: IF YOU KNOW WHETHER THE OFFICE IS A MEDICAL EXAMINER OR CORONER, PLEASE ADJUST THE LANGUAGE BELOW AS NEEDED, OTHERWISE USE VERBATIM.

	١	٨	/ł	าat is	the	new	medica	l examiner	's c	r coroner'	's	name	?
--	---	---	----	--------	-----	-----	--------	------------	------	------------	----	------	---

9 REFUSED

[GO TO QINT13]

QINT13. INTERVIEWER INSTRUCTION: IF YOU KNOW WHETHER THE OFFICE IS A MEDICAL EXAMINER OR CORONER, PLEASE ADJUST THE LANGUAGE BELOW AS NEEDED, OTHERWISE USE VERBATIM.

May I speak with the medical examiner or coroner?

- 1 TRANSFER TO POC (LIVE) [GO TO QINT14]
- 2 GATEKEEPER IS POC [GO TO QINT14]
- 3 TRANSFER TO VM FOR POC [GO TO ANSPROMPT1]
- 4 NO/NOT AVAILABLE SCHEDULE CALLBACK [GO TO INTO6]
- 9 REFUSED **[GO TO QINT28]**

QINT14. [IF Q11=1 OR Q13=1, FILL: Hello, this is <<INTERVIEWER NAME>> calling from RTI regarding the 2023 Census of Medical Examiner and Coroner Offices, also known as CMEC.]

I'm following up on our invitation that asked your office to participate in the CMEC survey. Have you received the invitations we have sent you?

- 1 YES, RECEIVED INVITATION [GO TO QINT18]
- 2 NO, DID NOT RECEIVE [GO TO QINT19]
- 3 NO ANSWER [END CALL]
- 4 WENT TO VOICEMAIL [GO TO ANSPROMPT1]
- 5 YES, ALREADY COMPLETED [GO TO QINT29, CODE 1579]
- 9 REFUSED [GO TO QINT17a]

ANSPROMPT1. [DISPLAY FOR CALL COUNTS 1, 3, AND 5.] Hello, this is	, calling
from RTI regarding the 2023 Census of Medical Examiner and Coroner Offices. We've sent you	a few
letters and email messages inviting your office to participate in the census. We have not heard	ł back
from your office and I wanted to follow up with you to inform you that we have shortened the	survey to
encourage your participation. At your convenience, please call us at 1-XXX-XXX-XXXX reference	ing Case
ID < <caseid>>. Again, that number is 1-XXX-XXXX and your Case ID is <<caseid>>. Any m</caseid></caseid>	ember of
our team can assist you. Thank you!	
[DISPLAY FOR CALL COUNT 6 AND 8] Hello, this is, calling from RTI regarding t	he 2023
Census of Medical Examiner and Coroner Offices. This message is for < <poc name="">>. Your age</poc>	ency's
participation ensures our study accurately represents coroner and medical examiner offices ac	cross the
country. At your convenience, please call us at 1-XXX-XXX-XXXX referencing Case ID < <cas< td=""><td>EID>>.</td></cas<>	EID>>.
Again, that number is 1-XXX-XXXX-XXXX and your Case ID is < <caseid>>. Any member of or</caseid>	ur team
can assist you. Thank you!	

1 LEFT MESSAGE. END CALL.

2 SOMEONE PICKED UP. [IF QINT11 = 3 or QINT13 = 3 or QINT14 = 4 GO TO QINT11; ELSE GO TO QINT1] 3 UNABLE TO LEAVE MESSAGE. END CALL.

INTO6. When would be a better time to call back? INTERVIEWER: CALLBACK SHOULD ONLY BE SET IF THE RESPONDENT REQUESTED OR AGREED TO BE CALLED BACK.

INTERVIEWER: IF RESPONDENT INDICATES THAT THEY ARE WILLING TO TALK NOW BUT THEY ARE DRIVING, SAY: I'm sorry, but for your safety we're not able to continue while you're driving (or doing something else that requires your full attention).

IS THIS CALLBACK SET BY THE RESPONDENT OR SOMEONE ELSE?

1 APPOINTMENT BY SUBJECT -- THE RESPONDENT SELECTED TO COMPLETE THE INTERVIEW AND PROVIDED A SPECIFIC TIME AND DATE FOR THE APPOINTMENT. [GO TO APPOINTMENT SCHEDULE SCREENS AND THEN QINT28]

2 APPOINTMENT BY OTHER -- SOMEONE OTHER THAN THE SELECTED RESPONDENT ASKED FOR US TO CALLBACK, OR THE SELECTED RESPONDENT DID NOT PROVIDE A SPECIFIC DATE AND TIME TO BE CALLED BACK. [GO TO APPOINTMENT SCHEDULE SCREENS AND THEN QINT28]
3 REFUSED. I will just try again later. [GO TO QINT28]

QINT17a & QINT17b. [PROGRAMMER: IF AGENCY HAS NOT RECEIVED COMMUNICATIONS (Q14=2), DO NOT ASK. ELSE, ASK OF EACH AGENCY THAT HAS REFUSED.]

Your agency's participation helps to ensure our study accurately represents all coroner/medical examiner offices across the country. We cannot substitute another agency for yours. Would you please tell me more about your agency's reasons for not participating?

INTERVIEWER: ENTER VERBATIM IN OPEN ENDED BOX FOR CODE 00, THEN CODE THE RESPONSE

SELECT ALL THAT APPLY:

0 ENTER VERBATIM

- 1 COMPLETE AGENCY CLAIMS THAT SURVEY HAS BEEN SUBMITTED/SENT
- 2 DUE DATE CANNOT RESPOND BY DUE DATE
- 3 LIMITED TIME/RESOURCES NOT RELATED TO DUE DATE
- 4 APPLICABILITY AGENCY THOUGHT SURVEY DID NOT APPLY TO THEM
- 5 NO INTEREST AGENCY STAFF ARE UNINTERESTED IN THE SURVEY TOPIC OR GOALS
- 6 NO BENEFIT AGENCY RECEIVES NO BENEFIT FROM PARTICIPATION/SURVEY
- 7 VOLUNTARY PARTICIPATION IS NOT MANDATED BY LAW
- 8 SURVEY FATIGUE AGENCY RECEIVES TOO MANY SURVEY REQUESTS
- 9 LACK OF DATA DATA NOT AVAILABLE DURING SURVEY PERIOD
- 10 LACK OF DATA DATA DO NOT EXIST OR ARE NOT MAINTAINED
- 11 INACCESSIBLE DATA DATA EXIST, BUT ARE NOT EASILY ACCESSIBLE
- 12 POOR QUALITY DATA DATA EXIST, BUT ARE OF QUESTIONABLE/POOR QUALITY
- 13 CONFIDENTIALITY DATA ARE NOT TO BE SHARED OUTSIDE OF AGENCY/AUTHORITY
- 14 FEDERAL ROLE FEDERAL GOVERNMENT SHOULD NOT BE INVOLVED IN LOCAL ISSUES
- 15 JURISDICTION RULE JURISDICTION DOES NOT PARTICIPATE IN RESEARCH
- 16 OTHER
- 99 REFUSED TO GIVE REASON FOR DELAY/REFUSAL

QINT18. INTERVIEWER: IF REFUSAL, DO NOT ASK; CODE 6 [NO, will not complete survey]

ELSE: Do you have any questions or concerns about the survey that I might be able to help with? ADDRESS RESPONDENT QUESTIONS OR CONCERNS. IF UNABLE TO ADDRESS CONCERNS, INDICATE HELP DESK WILL FOLLOW UP WITH THEM. SELECT OPTION 7.

Can I ask how would you prefer to complete the survey? You have the option to complete it online or via hard-copy by downloading it from the survey website and emailing, faxing, or mailing it back to us. We can also complete it over the phone now or whenever is convenient for you. What would you prefer?

IF PHONE: The survey asks questions about your office's budget, staffing and workload for 2023. Do you know that information off hand, or have that information available? If not, we can set an appointment to complete the survey when you've had a chance to gather that information.

- 1 POC HAS COMPLETED WEB SURVEY OR SENT HARD-COPY [GO TO QINT29, Code 1579]
- 2 YES, WILL COMPLETE SURVEY ONLINE [GO TO QINT20]
- 3 YES, WILL COMPLETE A HARD-COPY [GO TO QINT23]
- 4 YES, WILL COMPLETE ON PHONE NOW [OPEN SURVEY IN HATTERAS]

5 YES, SET CALLBACK TO COMPLETE ON PHONE [SET CALLBACK]
6 NO, WILL NOT COMPLETE SURVEY [GO TO QINT17a]
7 Help Desk Follow up [GO TO QINT29, Code 1579]

QINT19. IF QINT14=2: Let me send you the survey again. You have the option to complete it online, via hard copy by downloading it from the survey website, or on the phone with me. Which do you prefer?

IF PHONE: The survey asks questions about your office's budget, staffing and workload for 2023. Do you know that information off hand, or have that information available? If not, we can set an appointment to complete the survey when you've had a chance to gather that information.

- 1 YES, WILL COMPLETE SURVEY ONLINE [GO TO QINT20]
- 2 YES, WILL COMPLETE A HARD-COPY [GO TO QINT23]
- 3 YES, WILL COMPLETE ON PHONE NOW [OPEN SURVEY IN HATTERAS]
- 4 YES, SET CALLBACK TO COMPLETE ON PHONE [SET CALLBACK]
- 5 NO, WILL NOT COMPLETE SURVEY [GO TO QINT28]

QINT20. Do you need me to send the survey link and login information to you again?

1 Yes **[GO TO QINT21]**

2 No **[GO TO QINT27]**

QINT21. What is your preferred email address?

[GO TO QINT25]

QINT23. Would you like me to walk you through how to download the survey from the website?

IF SO:

Please use your login credentials that you received in the mail to log into the survey at bjscmec.rti.org. Log into the survey and press the "Download Survey" button near the top of the screen. This will generate a pdf file that you can print out, fill out, and email, fax, or mail back to us. The contact information is on the pdf document, but I can provide it to you now as well.

WEB CREDENTIALS: LOGIN: [CASEID]

PASSWORD: [PASSWORD]

DUE DATE: December 15th

FAX: 1-XXX-XXX-XXXX

MAIL:

Census of Medical Examiner and Coroner Offices

RTI International ATTN: [Charge Code] 5265 Capital Boulevard Raleigh, NC 27690

IF NOT, PROCEED.

1 PROCEED [GO TO QINT27]

2 NEED TO SEND WEB CREDENTIALS [GO TO QINT21]

QINT25. We will send a link to the survey and your login information by email, but I can provide it to you now as well

Website: bjscmec.rti.org

LOGIN: [CASEID]

PASSWORD: [PASSWORD]

We look forward to receiving your completed survey. I appreciate you taking the time to speak with me today. Please contact the CMEC Help Desk with any questions you might have. Have a nice day.

OFFER HELP DESK INFORMATION AS NEEDED:

Help Desk phone number: 1-866-662-8134

Help Desk email: CMEC@rti.org

INTERVIEWER: END CALL. SYSTEM DISPOSITION CASE AS 2391 (SEND EMAIL WITH CREDENTIALS).

QINT27. We look forward to receiving your completed survey. I appreciate you taking the time to speak with me today. Please contact the CMEC Help Desk with any questions you might have. Have a nice day.

OFFER HELP DESK INFORMATION AS NEEDED:

Help Desk phone number: 1-XXX-XXXX

Help Desk email: CMEC@rti.org

INTERVIEWER: END CALL. SYSTEM DISPOSITION CASE AS 2698.

QINT28.I appreciate you taking the time to speak with me today. Please contact the CMEC Help Desk with any questions you might have. Have a nice day.

OFFER HELP DESK INFORMATION AS NEEDED:

Help Desk phone number: 1-XXX-XXXXX

Help Desk email: CMEC@rti.org

INTERVIEWER: END CALL.

IF QINT11 OR 13 = 9 SYSTEM DISPOSITION CASE AS 1441.

IF INTO 1 OR 2 SYSTEM DISPOSITION CASE AS 1290-1299.

IF INTO 33 DISPOSITION CASE AS 1441.

IF QINT18 1 DISPOSITION CASE AS 1579 (Potential Problem). These cases will be removed from the dialer queue and stowed off to the side in a different one.

Scenarios for Other Dispositions:

1255 "Max Calls Reached" for cases with >= 8 call attempts

1579 "Potential Problem" will be set if SUBJ_CODES = 8 "R INDICATES THEY HAVE COMPLETED THE SURVEY" (breakoff situation)

2250 "Bad Contact Info" will be set if SUBJ_CODES = 7 "NOT A MEDICAL EXAMINER OR CORONERS OFFICE" (breakoff situation)

QINT29. We will pass along your information to the help desk and they will contact you shortly. Thank you for speaking with me today.

OFFER HELP DESK INFORMATION AS NEEDED:

Help Desk phone number: 1-XXX-XXXX

Help Desk email: CMEC@rti.org

INTERVIEWER: END CALL

CODE AS 1579 POTENTIAL PROBLEM

Will need the following screen, as well... only routed after returning to CATI from Hatteras if a positive status code is not returned. (Note: If positive status is returned but in not an expected value, interviewer will be routed to SUBJ_CODES screen to make further decisions.)

BACK_FROM_WEB. INTERVIEWER: WHAT WAS THE OUTCOME OF THE HATTERAS INTERVIEW?

1 BREAKOFF, SET CALLBACK [GO TO APPOINTMENT SCHEDULER]

4 COMPLETE [CODE AS 2698 COMPLETE]

6 REFUSAL [GO TO QINT17a]

Attachment 20: Critical items list

2023 Census of Medical Examiner and Coroner Offices

Critical Items List

- 1. A3 Type of office
- 2. A4 Level of government
- 3. A6 Jurisdiction
- 4. A7 Head of office FT/PT
- 5. A9 Head of office other duties
- 6. A12 Pathologists, full time and PT
- 7. A17 Death Investigators, full time and PT
- 8. A22 Scientific support staff, full time and PT
- 9. A23 Admin staff, Full time and PT
- 10. A24 Vacant positions
- 11. B2 Spending
- 12. B4 Agency with budget oversight
- 13. C2 Caseload
- 14. C4/C5 In house autopsies
- 15. C6/C7 /C8 other location autopsies
- 16. C11/C12 scene investigations
- 17. D1/D2 Unidentified remains
- 18. E1 CMS
- 19. F3 Body cooler
- 20. F7 mental health support for staff

Attachment 21: Critical items survey letter

[DATE]

«First Name» «Last Name» «FacilityName» «ADDRESS1», «ADDRESS2» «CITY», «STATE» «ZIP»

Dear «First Name» «Last Name»:

By now, you have likely received communications from the Bureau of Justice Statistics (BJS) and RTI International regarding the 2023 Census of Medical Examiner and Coroner Offices (CMEC). We realize that your time and resources are extremely limited, so <u>we have reduced the size of the survey by about half to focus on only the most important questions</u>. We hope this will minimize the burden this important data collection places on [FacilityName] and encourages your participation.

You will find included in this package a paper copy of the survey and a prepaid envelope for you to return it to us upon completion. **The online version of the survey has been shortened as well**, so we have included your facility-specific login information below, should you prefer to complete it online.

The CMEC has been endorsed by the National Association of Medical Examiners, the International Association of Coroners and Medical Examiners, the American Board of Medicolegal Death Investigators, the National Sheriffs' Association, and the Society of Medicolegal Death Investigators. The endorsements from these organizations can be found on the website listed below.

Please access the questionnaire online at https://bjscmec.rti.org. Your facility-specific information is:

Username: «CaseID»
Password: «Password»

BJS will use the data collected only for research and statistical purposes. Your response is very important to help policymakers and researchers better understand and respond to the challenges facing medical examiners and coroners such as yourself. Your response is very important; in a census, your agency cannot be replaced by another agency.

If you have questions about the CMEC survey or are having difficulty accessing the website, please contact RTI at 1-###-#### or cmec@rti.org. If you have any general comments about this data collection, please contact me at 202-598-0295 or Matt.Durose@usdoj.gov.

Sincerely,

Matt Durose Program Manager Bureau of Justice Statistics

Attachment 22: Critical items email

To: «Survey Contact Email»

Subject: 2023 Census of Medical Examiner and Coroner Offices (CMEC) Reminder | << Facility

Name>>

Body of Email:

Dear « TITLE» «First Name» «Last Name»:

You should recently have received a UPS envelope from the Bureau of Justice Statistics (BJS) and RTI International regarding the 2023 Census of Medical Examiner and Coroner Offices (CMEC). As mentioned in our letter, we have reduced the size of the survey by about half to focus on only the most important questions. We hope this will minimize the burden this important data collection places on your office and encourages your participation.

If you have not received the mailing and would like a hardcopy of the survey, please let us know.

You may also access the questionnaire online at: https://bjscmec.rti.org

Your office-specific information is:

Username: «CaseID»
Password: «Password»

I understand that you receive a number of survey requests and I appreciate your attention to this request. Please complete the 2023 CMEC questionnaire as soon as possible.

I look forward to your assistance with this important data collection.

Sincerely,

Matt Durose Program Manager Bureau of Justice Statistics

Attachment 23: End-of-study letter



U.S. Department of Justice

Office of Justice Programs

Bureau of Justice Statistics

Washington, DC 20531

«TITLE» «POC NAME»
OR CURRENT CHIEF EXECUTIVE
«MEC»
«ADDRESS1», «ADDRESS2»
«CITY», «STATE» «ZIP»

Dear «TITLE» «NAME»:

We have made several attempts to contact you over the past few months regarding the participation of <<MEC>> in the Bureau of Justice Statistics' (BJS) Census of Medical Examiner and Coroner Offices (CMEC). Your responses are vital to understanding the needs of those doing medicolegal death investigations across the country.

I am writing today to notify you that there are only a couple of weeks remaining to complete the questionnaire. We must receive your response soon to ensure that the national results accurately reflect the characteristics and activities of your office. The reliability of the study's results directly depends on the participation of all medical examiners and coroners. Since CMEC is a census, your responses cannot be replaced.

Please complete the questionnaire by using the following link: https://www.bjscmec.rti.org and entering the following information

User Name: «WebUsername»
Password: «PIN»

Alternatively, if you would prefer to complete the questionnaire on paper, we are happy to send you a hard copy or you may download and print a paper version upon entering your questionnaire access code on the CMEC questionnaire website.

If you have questions about the CMEC or need to update your contact information (including e-mail address), please contact RTI at ###-#### or CMEC@rti.org. If you have any general comments about this data collection, please contact me at 202-598-0295 or Matt.Durose@usdoj.gov.

I greatly appreciate your consideration.

Sincerely,

Matt Durose Program Manager Bureau of Justice Statistics

Attachment 24: End-of-study email

TO: «TITLE» «POC NAME» OR CURRENT CHIEF EXECUTIVE «MEC»

SUBJECT: End of Study - Census of Medical Examiner and Coroner Offices

Dear «TITLE» «NAME»:

Recently, materials related to the 2023 Census of Medical Examiner and Coroner Offices (CMEC) were sent to you by mail. This email message is to relay this message to you via email as well and encourage you to contact us if you have any questions related to the data collection.

Please reply to this message to confirm that we have reached <<MEC>>>.

The information contained in the letter that we mailed most recently (on <<DATE>>) is provided below.

Thank you,

Matt Durose Program Manager Bureau of Justice Statistics

End of Study Letter

Attachment 25: Completion thank you email

To: «Survey Contact Email»

Subject: Thank You For Completing the CMEC!

Body of Email:

Dear «TITLE» «NAME»:

On behalf of the Bureau of Justice Statistics (BJS) and RTI International, I would like to thank you for your participation in the 2023 Census of Medical Examiner and Coroner Offices (CMEC). I truly appreciate your support in completing this survey. Your participation ensures that we are a step closer to providing a complete enumeration of the nation's medical examiner and coroner offices and that your jurisdiction is represented among those doing medicolegal death investigations.

This letter confirms that we have received your survey and are currently processing the data. RTI will contact you if there are any questions about the answers your agency has submitted. When the final report is completed, the results of the CMEC will be available through the BJS and CMEC websites.

Sincerely,

Matt Durose Program Manager Bureau of Justice Statistics