**DOP/NCIPC and NCHS collaborations that are responsive to SUDORS OMB#0920-1128 NOA**

**March 2022**

**1.0 Background on Update**

The Division of Overdose Prevention (DOP), formerly the Division of Unintentional Injury Prevention (DUIP), CDC is collaborating with the National Center for Health Statistics (NCHS), CDC to streamline and improve the quality and timeliness of drug overdose data collected on the death certificate as required by its NOA for the State Unintentional Drug Overdose Reporting System (SUDORS) OMB# 0920-1128. The last update on this collaborative effort was provided in August 2021.

**2.0 NOA language for SUDORS OMB#0920-1128**

The following language is a quotation from the SUDORS’ OMB NOA:

“OMB clears this ICR consistent with the understanding that DOP/NCIPC will continue to devote resources to maximizing the long-term value of CDC’s investment in working with state health departments and medical examiners/coroners to improve the timeliness of fatal opioid overdose surveillance. More specifically, DOP/NCIPC will continue to collaborate with NCHS (who has the lead in working with states’ vital records agencies) on developing standardized, efficient, and sustainable approaches to incorporating mutually agreed upon data elements into state death certificates. Efforts during the first year will focus on broad development of ME/C standards and improving electronic interoperability of ME/C case management systems that incorporate toxicology information and findings from death scene investigations into vital statistics systems. Efforts during the second year of clearance include multi-state piloting, and the third year of clearance will focus on broad implementation into electronic death reporting.”

**3.0 Current collaborations between DOP and NCHS as of March 2022**

The Division of Overdose Prevention (DOP), CDC is collaborating with the National Center for Health Statistics (NCHS), CDC to streamline and improve the quality and timeliness of drug overdose data collected on the death certificate as outlined in the previous NOA terms of clearance for SUDORS. These improvements may indirectly improve SUDORS, which contains information abstracted from the death certificate. Also, the collaboration supporting interoperability among ME/C case management systems, state vital statistics, and state surveillance systems may directly enhance SUDORS reporting in some states. Finally, CDC operates the Opioid Response Coordinating Unit (ORCU) that brings together all CIO’s in CDC to ensure coordination and integration of opioid surveillance activities across CDC.

In accordance to OMB’s terms of clearance, CDC-NCIPC has provided OMB seven reports on the progress of collaborations with NCHS. These were provided in August 2018, March 2019, January 2020, August 2020, February 2021, August 2021, and March 2022. The current collaborations between DOP and NCHS are summarized in the table below.

| **Description of Current DOP and NCHS Collaboration** | **OMB NOA Terms of Clearance Addressed** |
| --- | --- |
| **Training on death investigation best practices:** One of the NCHS activities funded through CDC’s Opioid Response Coordinating Unit (ORCU) was to improve investigation of drug overdose deaths by updating the National Association of Medical Examiners (NAME) position paper on death investigation best practices and developing training materials to implement recommendations. **Project updates:** NCHS and RTI released an online training focused on the revised NAME position paper on death investigation best practices. An NCIPC-supported drug overdose death investigation IACME training workshop held on July 21, 2021 highlighted and promoted the training, providing information on how to access the training and praising the training as being a good resource. The training will be promoted again at the 2022 IACME training workshop, and continues to be promoted by DOP when communicating with funded jurisdictions.  | This project addresses the OMB term of clearance to continue collaborations between DOP/NCIPC and NCHS on developing standardized, efficient, and sustainable approaches to incorporating data elements into State death certificates. |
| **Work with ASTHO to address forensic pathologist workforce shortages:** DOP/NCIPC provided funding to ASTHO to support states to explore partnerships among medical examiners, academic centers, and public health and other stakeholders to address forensic pathology workforce shortages. ASTHO, DOP/NCIPC, NCHS and additional designated subject matter experts provided technical assistance in the form of virtual convenings. The main goals of this project were to 1) strengthen the role of state public health officials and their leadership teams in addressing forensic pathologist shortages, 2) understand barriers to implementing strategies that have been proposed at the national level, and 3) provide possible solutions for the many states facing these shortages by producing a toolkit, the contents of which are described below. **Project updates**: Two learning communities were hosted by ASTHO/NCIPC in March and May 2021, focusing on forensic pathologist funding and loan repayment programs, and the visa process for foreign medical graduates interested in forensic pathology. As a result, 3 brief reports were released and are available at <https://www.astho.org/topic/brief/reducing-forensic-pathologist-shortages-funding-and-visas/>ASTHO/NCIPC released a podcast on forensic pathologist workforce shortages that was shared with NCHS (and other CDC Centers). <https://www.astho.org/communications/podcast/what-shortage-of-forensic-pathologists-means-for-public-health/>ASTHO/NCIPC developed an online microlearning module (accessible with registration) which incorporated the background information and possible solutions covered throughout the project period. <https://learn.astho.org/products/forensic-pathology-workforce-shortage-context-and-considerations-for-public-health>A survey question bank for medical examiners’ use in assessing workforce capacity was also developed.The project was completed on July 31, 2021. | This project will help address forensic pathologist workforce shortages within states, thus improving fatal overdose surveillance data collected by DOP/NCIPC and NCHS. Consequently, it addresses the OMB term of clearance to continue collaborations between DOP/NCIPC and NCHS on developing sustainable approaches to incorporating data elements into State death certificates. |
| **Build capacity of Medical Examiners and Coroners:** DOP/NCIPC is providing additional funding to further build capacity of medical examiners, coroners, and other medico-legal death investigators on drug overdose death investigation. Planning calls were held between NCIPC/DOP and NCHS on May 7, 2020 and July 24, 2020 to discuss current gaps in trainings and training needs that would benefit from additional funding. The following training ideas were discussed and agreed upon by NCIPC/DOP and NCHS: 1. Continue the use of Project ECHO for providing virtual forensic pathology training and virtual technical assistance to medical examiners and coroners investigating drug overdose deaths. This learning forum aims to help build connections between forensic pathologists and coroners and provide a mechanism for providing “tele-medicine” forensic pathology training and collaboration.
2. Support training around self-care and resiliency for medical examiners and coroners and other death scene investigators involved in drug overdose death investigation.
3. Provide additional trainings on drug overdose death investigation for medical examiners, coroners, and other medico-legal death investigators with a non-medical background. This could build off of the NCHS-funded online training on the revised NAME position paper on death investigation best practices, subsidize trainings for death investigators working in rural areas, and/or include new training content based on DOP/NCIPC and NCHS identified training gaps.

**Project updates:** From October 26, 2021 to February 16, 2022, 5 ECHO sessions have been conducted and have included didactic forensic pathology presentations as well as case presentations of challenging drug overdose death investigations. A meeting to discuss plans and updates for projects 1 and 2 was held between ASTHO and NCIPC/DOP on September 10, 2021. Carryover funds from year 1 are being used to develop wellness workshops through a sub-contract with RTI and will occur during a no-cost extension period during July-September, 2022. For project 3, NCIPC supported the inclusion of a 3.5 hour drug overdose death investigation workshop during the annual IACME meeting. The workshop was held on July 21, 2021 and was attended by both NCIPC and NCHS. As part of the workshop, IACME promoted the NCHS and RTI developed training on the revised NAME position paper. Attendance scholarships were awarded to 174 participants. Currently planning to repeat this workshop, to be offered in basic and advanced levels, at the next IACME meeting in July 2022. NCIPC also supported CFSRE and NAME development and implementation of 1) a series of 12 bi-weekly forensic pathology grand rounds (beginning on 7 January 2022) and 2) a 3-part virtual training series on drug overdose death investigation and certification [offered at increasing experience levels on 23-24 September (Module I), 27-29 October (Module II), and 1-2 December (Module III) 2021]; free of charge to attendees. The training series included a collaborative presentation by NCIPC and NCHS during Module II on 29 October 2021, and the entire series is set to repeat during March, April, and May 2022. NCHS has attended the sessions and expressed great excitement for the project. All project 3 activities are supported through a cooperative agreement with NCIPC and NNPHI. | This project addresses the OMB term of clearance to continue collaborations between DOP/NCIPC and NCHS on developing standardized, efficient, and sustainable approaches to incorporating data elements into State death certificates. |
| **Participate in Office of Justice Programs/Health and Human Services medicolegal death investigation working group:** DOP/NCIPC and NCHS continue to jointly participate in the multi-agency medicolegal death investigation working group. As part of the working group, DOP/NCIPC and NCHS give updates on work to support medicolegal death investigation, and participate in discussions on barriers and potential ways to address them. **Project updates:** Meetings were held on October 7, 2021 and January 20, 2022. NCIPC and NCHS staff also jointly participate in the Forensic Technology Center of Excellence’s Medicolegal Death Investigation Data Workgroup and their Toxicology Workgroup. The Data Workgroup developed recommendations to help standardize collection of medical examiner and coroner data. The group identified nine essential types of information including demographic characteristics, circumstance, narrative, exam/autopsy, cause and manner, location, date and time, medical history, toxicology, as well as recommended variables within these categories. Staff attended meetings on September 14-15, 2021 to present recommended content to the main workgroup. The Toxicology Workgroup has not convened since August 2021; however, the toxicologists have been working independently to create a portal for drug taxonomy. | This activity addresses the OMB term of clearance to continue collaborations between DOP/NCIPC and NCHS on developing standardized, efficient, and sustainable approaches to incorporating data elements into State death certificates. |
| **Participate in new Medical Examiner/Coroner Office (housed within NCHS) working group:** NCHS is standing up a new Medical Examiner/Coroner Office to help coordinate ME/C efforts across the agency. DOP/NCIPC is providing funding for the office and is participating on the ME/C office working group. | This activity addresses the OMB term of clearance to continue collaborations between DOP/NCIPC and NCHS on developing standardized, efficient, and sustainable approaches to incorporating data elements into State death certificates. |

Future collaborative priorities for NCHS and DOP/NCIPC will be driven by lessons learned from the above mentioned collaborations.