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**OFFICE OF THE CHIEF MEDICAL EXAMINER
BOARD OF MEDICOLEGAL INVESTIGATIONS**

**BOARD MEETING AGENDA
SPECIAL MEETING**

Tuesday, November 16, 2021, 2:00 P.M.
921 N.E. 23rd St., Oklahoma City, OK 73105, (405) 239-7141
Via Videoconference at 1115 W. 17th, Tulsa, OK 74107, 918-295-3400

Mr. Rick Adams, Mr. Robert Hoisington, Mr. Tyler Stiles, Mr. Keith Reed,
Dr. Michael Magguilli, and Dr. Eric Pfeifer will attend in Oklahoma City.
Dr. Doug Stewart, Dr. Robert Allen and Dr. Eric Harp will attend the meeting
in Tulsa via videoconference.

The Board may discuss, vote to approve, vote to disapprove, vote to table, or decide not to discuss any item on the agenda.

- I. Roll call
- II. Welcome/introductions (Board members)
- III. Adoption of minutes from the August 5, 2021.
- IV. Discussion and possible action regarding 2022 meeting dates for the Board of Medicolegal Investigations, Office of the Chief Medical Examiner.
- V. Nomination, discussion, and possible election of Board Chairman.
- VI. Nomination, discussion, and possible election of Board Vice Chairman.
- VII. Update from the Chief Medical Examiner
 - ◆ Agency update.
- VIII. Update from Deputy Chief Medical Examiner
 - ◆ Tulsa office updates.
- IX. Adjourn

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**OFFICE OF THE CHIEF MEDICAL EXAMINER
BOARD OF MEDICOLEGAL INVESTIGATIONS**

**BOARD OF MEDICOLEGAL INVESTIGATIONS
REGULAR MEETING**

Board Meeting Minutes from
Thursday August 5, 2021 at 2:00 p.m.
921 NE 23rd Street, Oklahoma City, OK 73105
and Via Videoconference

In conformity with the Oklahoma Open Meeting Act, advance notice of this meeting was transmitted to the Oklahoma Secretary of State on November 17, 2020 at 2:03 P.M. and public notice of this meeting, together with the agenda, was posted in prominent public view on the front door of the Office of the Chief Medical Examiner, 921 NE 23rd Street, Oklahoma City, .

Members present: Mr. Ricky Adams, Mr. Rocky McElvany, Mr. Chris Ferguson, Dr. Roy Zhang, and Dr. Eric Pfeifer.

Members present via videoconference: Dr. Robert Allen, Dr. Eric Harp, and Dr. Doug Stewart.

Members absent: Mr. Glen Huff

Others present: Dr. Joshua Lanter (OCME), John Crittenden (OAG), Kari Learned (OCME), Lori Shively (OCME), Renee Steward (OCME), Dr. Jesse Kemp, (OCME), Jodi Dillon (OCME), Dr. Marc Harrison (OCME), and Tyler Stiles (Oklahoma Funeral Board) Tricia Everest (SPS).

Mr. Adams called the meeting to order at 2:00 p.m. Roll was called and a quorum was established.

Mr. McElvany motioned to adopt the minutes as written from the May 6, 2021 meeting. Mr. Ferguson seconded the motion. Roll was called and all were in favor.

● Update from the Chief Medical Examiner, Dr. Eric Pfeifer

~ Dr. Pfeifer provided the following updates:

→ Staff:

The agency added two new physicians on July 1st, they were our fellows from the last academic year. Additionally, two new fellows joined us July 1st. We will evaluate them in November/December to see whether we would like them to join our staff once their training is complete. If this happens, we will have 16 physicians plus 2 fellows. In comparison, we had 6 physicians in 2011 for the entire state.

→ Case turnaround-time:

Open cases greater than 90 days old have dropped a little. We are currently at 297, down from 325 at our last Board meeting. This does not represent a static number of cases, every day we add 20-30 cases to this number. Our goal is to have less than 5% of cases greater than 90 days old, which we are at currently. With these numbers we would avoid a phase 1 deficiency with the National Association of Medical Examiners (NAME). To bring this to no deficiencies, the turnaround-time would need to be signed out at 60 days or less.

→ Fellowship program:

The Accreditation Council for Graduate Medical Education (ACGME) has approved 2 fellowship slots for our program. Some programs similar in size to ours have 4 fellows. At this time we do not want to take on 4, although we do have the caseload to support it. This is a great investment of time and resources to teach a fellow and for our program, 2 is enough now.

→ Administration:

All admin staff were given salary adjustments from the dissolution of the Chief Administration Officer (CAO) salary. There hasn't been a consistent increase in many years; sporadic increases for some but not across the board.

A position for a fellowship program coordinator was added in Oklahoma City. Additional responsibilities include accounts receivable/collections.

→ Anthropology:

The agency needs another anthropologist, if not two. We will be asking for one in our budget request. There are many clandestine, shallow graves in Oklahoma. We anticipate many scene excavations and will need more staff, whether it be a full-time forensic anthropologist or interns to help with the workload. Anthropology is a very slow-going process and is very complicated.

→ Autopsy services:

We will be requesting salary adjustments for autopsy services staff as well. We've obtained some local and regional data to determine what autopsy technicians are being paid.

→ Information technology (IT):

Since July we've had a full time Office of Management and Enterprise Services (OMES) IT expert imbedded within the agency. Currently, he's assisting in provisioning for the new Tulsa building.

→ Investigations:

Scene response time seems stable at the time. The July 2021 average scene response time was 1 hour, 27 minutes. This is for the entire state, all 77 counties. Dr. Pfeifer would like to see this number closer to an hour. The GeoSafe system, which assigns an investigator to the nearest scene, should allow us to see a slight improvement in response time. In order to see a significant improvement in response times, the agency will need to hire additional investigators. An unsubstantiated rule of thumb is that offices need 1 investigator per 100K population. At this ratio, we should have approximately 40 investigators and we currently have 30. We will work on this in the coming years.

Our investigators are among the least compensated regionally, nationally as well as within our state in comparison to other investigators. With this, we are looking at salary increases for investigators as well.

Permit turnaround times are fairly stable. July saw a slight increase of an average turnaround time of 11 hours 53 minutes. We do not want to exceed is 48 hours.

→ Toxicology:

The toxicology staff are by far the least compensated, not only nationally, regionally and within the state for similar positions. Pay increases for the chemists and toxicologists are in the budget workbook for next year. We are also looking at an additional forensic toxicologist.

This will be the last year we are eligible for accreditation by the American Board of Forensic Toxicology (ABFT). After this year, there will be no conventional toxicology laboratory accreditations. The accreditations will be through the International Organization for Standardization (ISO) which is extremely complicated and requires much more effort.

→ Legislative issues:

Senate Bill 354; is written to eliminate out of state transport permits from counties that neighbor other states. Dr. Pfeifer met personally with Senator Bergstrom to discuss the bill. Dr. Pfeifer feels this bill is not good for the agency and gives outside funeral homes jurisdiction over bodies that are transported out of state.

→ Priority projects:

Reaccreditation from NAME and completion of the Tulsa office remain the priorities.

We continue to sign death certificates on non-jurisdiction cases. These are cases where physicians refuse to sign a death certificate on their patient.

We are still looking into credit card payment options for permits.

→ Financial:

Approximately \$500K was allocated for IT in the Tulsa building and it appears this will come in between to \$300-\$400.

We currently have approximately \$9M available case. The carryover changes quickly; we just issued funds for the Tulsa building which was several million dollars. Expenditures have increased by adding two new full-time physicians and paying for the Tulsa facility.

→ COVID-19:

We're currently seeing an increase in the number of fatalities, both in our autopsy labs and in permits. We are carefully reevaluation procedures in an effort to keep the virus from propagating within our agency. We have standby cooler capacity for decedents which we've offered the state when case hospitals fill up. Right now, we have 60-70 slots that we can offer.

Mr. Adams referenced the expenditure report and asked Dr. Pfeifer if the figures reflect what was budgeted for the month. Mrs. Steward confirmed this is what was budgeted; however, the report doesn't reflect expenditures.

- Update from the Deputy Chief Medical Examiner, Dr. Josh Lanter.

~ Dr. Lanter provided the following updates:

→ The Tulsa office added two new positions, one of which is an Administrative Assistant. This position was filled by a current employee and was created to assist administrative staff to share some of the workload. This also includes criminal and civil litigation as well as IT support in the Tulsa office. Additionally, this employee is helping Dr. Lanter with the new Tulsa building. This position is the first addition to Tulsa admin in more than 12 years. We also created an Autopsy Technician Supervisor position. One of the autopsy technicians who has been with the agency for several years was promoted into the role. Dr. Deol stayed on as a staff pathologist at the end of his fellowship, giving Tulsa 5 fulltime physicians plus the new fellow, Dr. Michalski.

The new Tulsa building seems to be moving along smoothly. The completion date is still late spring with move in during the summer. The current focus is on IT, wiring and the internal elements of the building.

Dr. Lanter added that the regular VIP tour of the new facility is at 11:00 a.m., the 1st Thursday of every month. Anyone interested in seeing the building can email Dr. Lanter and he can make the arrangements.

Dr. Zhang asked Dr. Pfeifer if the state budget increases every year to increase the salary for all employees. Dr. Pfeifer explained the agency was successful in getting salary increases for our doctors and now the focus is on the salaries of investigators, autopsy technicians and chemists since they have fallen behind.

Mr. Adams asked Dr. Pfeifer if the agency has any revolving funds that have been recently impacted by changes in laws. Dr. Pfeifer replied no, however, SB354 could cause a major effect with an estimated impact of \$250K.

Mr. Crittenden mentioned tracking time and resources used in McGirt cases that will be retried in the Federal Court system. He also mentioned bringing this to the attention of the Governor's office, Attorney General's Office and/or Legislative leaders to try to come up with a plan for the Federal Government to reimburse the agency until they establish their own labs. These Federal cases will be an enormous impact to the agency's budget.

Mr. Ferguson announced to the Board that this is last meeting, he has resigned from the Funeral Board. A new appointment will be made next Thursday during the Funeral Board's meeting. He thanked Dr. Pfeifer for his leadership and Kari Learned for her assistance. Mr. Adams and Mr. McElvany thanked Mr. Ferguson for his years of service to the Board.

Mr. Ferguson motioned to adjourn the meeting. Dr. Zhang seconded the motion. Roll was called and were in favor. The meeting was adjourned at 2:36 pm.

DRAFT

2022

State Holidays
highlighted in yellow

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OCME Report to the Board of Medicolegal Investigations, August, 2021

Eric Pfeifer, MD

Foreword

The following is a reporting format that includes key operational components of the practice and quality indicators important to the mission of the OMCE.

Physicians

Last years' fellows have joined the staff this past July, bringing the total number of staff physicians then to 14 (two short of need). Two new fellows have joined us also this past July for a one-year training in July. We estimated we need 16 staff and 2 fellow physicians (18 total) to meet re-accreditation parameters. We have offered staff positions to this years' fellows. One has accepted to join the staff and one is pending.

Open cases >90 days (excluding anthropology, Nov 1, 2021): 354 (up from 325).

There has been a substantial increase in caseload (>20%) since the advent of the COVID-19 pandemic. This seems to be slowing down.

Fellowship in Forensic Pathology

Our fellowship program has been granted continued ACGME (American Council of Graduate Medical Education) accreditation for two concurrent fellows. Two new fellows have joined us in July for their one year of subspecialty training in Forensic Pathology. Should they both remain as staff we will have 16 staff forensic pathologists. Fellowship applicants are continually being evaluated for admission to our training program.

Administration

We are short one critical admin staff due to illness. We are hopeful this person will return full-time in mid-December.

It looks as if we might be able to implement online payments for cremation and out-of-state transport permits by the first of the year.

We have received the results of the annual OMES agency survey and will discuss this at the supervisors' meeting in two weeks.

Anthropology

We have identified a need for an incremental increase in the number of staff Forensic Anthropologists. In the budget workbook for the next fiscal year we are requesting an FTE increase of one anthropologist and salary adjustments for the anthropologist pay scale.

Autopsy Services

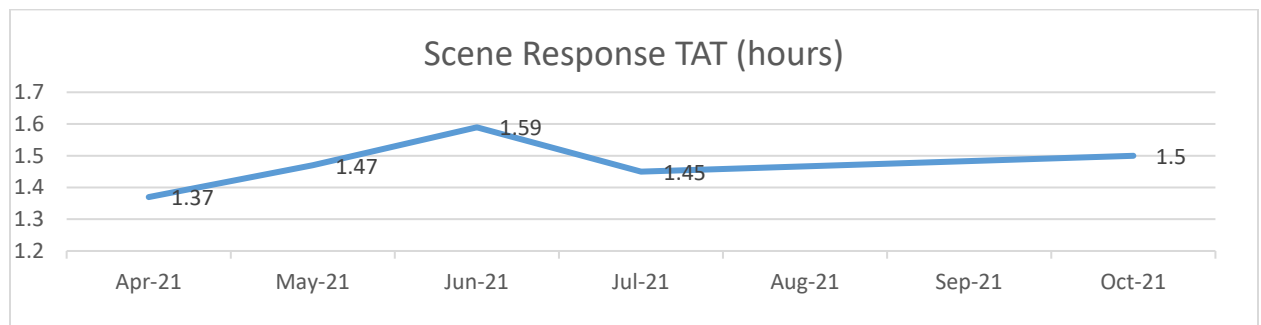
We will be requesting appropriations next fiscal year for an across-the-board salary adjustment for the pathology technicians.

Information Technology

We were offered by OMES to have an IT manager embedded with the OCME full time, and agreed it would be mission critical, given the IT-intense nature of our practice, to have such a person join us. This individual has been identified and embedded with us since July. The cost to OCME will be an additional (approximately) \$105,000 per year. We have enough funding to sponsor this person for at least two years, and will be requesting appropriations next fiscal year to sustain this position. We have already noticed a great positive change in the rapidity of IT issues and projects getting resolved. This person has been invaluable for the IT provisioning of the Tulsa building project.

Investigations

Scene response elapsed times (average, October 2021): 1 hr., 30m.

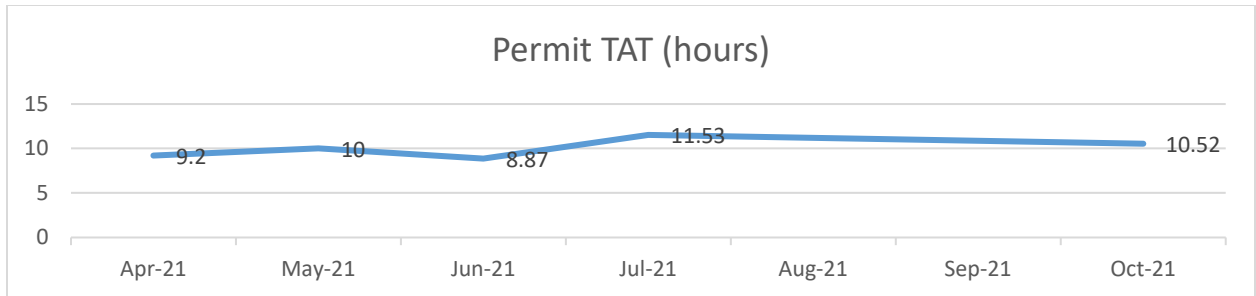


We are continuing to use Geosafe on a trial basis in OKC and Tulsa to optimize distances between investigators and scenes. This system maps the nearest investigator with a scene. So far this appears to be going well, and hope to see a small improvement in scene response TAT.

We have recently been given permission to use My Health, which provides direct electronic access to electronic medical records across the state. The long-standing “bottleneck” for issuing permits has been waiting on medical records, and this should speed things up. This will cost the agency approximately \$25K per year for end-user licenses and we feel this is an appropriate investment in keeping our permit process as efficient as possible.

We will be requesting appropriations next fiscal year for an across-the-board salary adjustment for the investigators, as well as new equipment requests. The investigative leadership have presented us with a detailed report of market data and anticipated needs, and we will be discussing this in detail in the coming weeks as we prepare for the next budget cycle.

Permit turnaround times (average, Oct 2021): 10hr., 31 m.



Toxicology

The toxicology laboratory workload has been increasing every year for at least the last ten years, and they are on track to handle over 6,000 cases this year. They have continuously maintained national accreditation by the ABFT (American Board of Forensic Toxicology). The toxicology laboratory were inspected this year for the conventional accreditation by the American Board of Forensic Toxicology, and this will be the last year this accreditation track is available; afterward, the lab will need to secure and maintain ISO accreditation, and this means a substantial increase in complexity and workload required for this certification. This is one of the reasons we have requested an FTE increase of one additional Forensic Toxicologist.

We have signed a statement of work to have a LIMS (Laboratory Information Management System) installed, costing us approximately \$358,000. This has been a five-year process and the selected system will be compatible with most of our analytical apparatus, and also offers advanced data mining capability.

We will be requesting appropriations next fiscal year for an across-the-board salary adjustment for the toxicologists and forensic chemists, as well as new equipment requests. The toxicology leadership have presented us with a detailed report of market data and anticipated needs, and we will be discussing this in detail in the coming weeks as we prepare for the next budget cycle.

Legislative Issues

SB 354 (no permits for out-of-state transport from counties neighboring other states): ON HOLD.

Interim study to assess feasibility of "county coroners" to assist ME office.

Priority Projects

1. Re-accreditation by the National Association of Medical Examiners; anticipated by 2023.
2. Completion of the Tulsa practice site building; this is anticipated by July 2022.
3. Completion of death certificates in non-jurisdictional cases: we are organizing a meeting with the health department, medical licensure board, and the Oklahoma Medical Association to discuss possible solutions for this issue.
4. Credit card payments option for permits.

Financial

One of the greatest unknowns in anticipated future capital expenditure(s) has been provisioning the new Tulsa practice site with IT equipment and services, including cabling, cable drops, switches, a new fiber optic line from the State, etc.. These appear to coming into greater focus and it seems there will be an outlay needed of between \$300K-\$400K, which is within the amount we anticipated from the beginning of the project.

See "Financial Snapshot" to be presented at Board meeting as part of a Powerpoint presentation item.

COVID-19

We have been monitoring closely the recent local, national, and international developments in the trends of COVID-19 (especially the Delta variant strain). The number of cases presenting to the office seem to be decreasing. We have had one confirmed COVID-19 illness (mild and self-limited) among our staff in the last few months.

END