Shelby County Coroner's Office

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Deputy Coroner Training Policy and Process

Both basic and in-service training for deputy coroners is critical to the successful completion of the mission of the Shelby County Coroner's Office. Therefore, it is the policy of the Coroner's Office to provide relevant and consistent training to all deputy coroners throughout the year.

The training of Shelby County deputy coroners consists of three tiers:

Orientation Training

Each newly-employed deputy coroner must complete a comprehensive checklist of more than 270 items that range from an understanding of office policies to the technical performance of coroner-related duties in the field, in the morgue and at autopsy. The checklist is completed over a period of months by the Chief Deputy Coroner/Coroner and the individual employee; the employee is immediately oriented to policies and procedures that are common to most or all cases; some specific types of death, such as a hypothermia case or deaths related to an aircraft crash, may not be "checked off" for a protracted period of time.

A copy of the current orientation checklist is attached to this document.

Basic Training

The Shelby County Coroner's Office has adopted the nationally-recognized training and certification process overseen by the American Board of Medicolegal Death Investigators (ABMDI). The ABMDI training and certification process is based upon National Institute of Justice performance standards in nine major areas and more than 200 subcategories; it serves as the current benchmark for the training and registration of deputy coroners and medical examiner investigators.

New personnel who have not achieved diplomate status or whose registration has expired must complete the mandatory skills demonstrations and the comprehensive written test

required for the registry within a period of about two years as a condition of employment.

Maintenance of the diplomate credential requires continuing education in the form of ABMDI-approved coursework. All Shelby County deputy coroners perform this required training as a part of their regular responsibilities.

Information regarding the American Board of Medicolegal Death Investigators and its program of professional registry and certification may be found at www.ABMDI.org.

In-Service Training
All personnel, regardless of currently-held certifications, are required to attend and participate in communal every year.

Communal training is performed with the entire staff about four to five times annually. The subject matter may range from mass casualty planning updates to information from organ and tissue donation agencies. These sessions do not provide continuing education credits for the staff.

In addition to communal training, deputy coroners who have already achieved ABMDI registration or certification will participate in personalized learning that is specifically intended to address areas in which further professional training would be desirable.

The identification of training needs is the responsibility of both the management team and the individual deputy coroner. The management team will review the needs assessment for each deputy coroner and attempt to match available coursework to the personal needs assessment and the management team's perception of what in-service training would be most helpful to the staff member. Again, personalized in-service training will be provided to those persons who have completed the basic training and are ABMDI registered or certified.

Once training needs are identified, they may be met by attendance at conferences or meetings that offer approved continuing education hours, or by participation in computer-based learning from such organizations as the University of North Dakota or the Death Investigation Training Academy. The death investigation curricula of these agencies are approved by ABMDI for continuing education credits.

A copy of the self-assessment instrument is attached to this document.

Shelby County Coroner's
Office Basic Training Checklist

LEARNER: _____

Administrative	DEMONSTRATED	PERFORMED	PRECEPTOR
INTRODUCTION TO SHELBY COUNTY GOVERNMENT			
INTRODUCTION TO ALABAMA CORONER LAW AND PRACTICE			
BUILDING ACCESS (KEYS AND CODES)			
FAMILIARIZATION WITH BLDG AND OFFICE			
EMERGENCY PROCEDURES AND EVACUATION PLAN			
BUILDING AND OFFICE SECURITY			
COUNTY CODE			
OATH OF OFFICE			
POLICY AND PROCEDURES			
CELL PHONE ASSIGNMENT			
COMPUTER ACCESS TO SERVERS			
TIMESHEET ACCESS AND UNDERSTANDING			
BUSINESS CARDS			
OPEN DOOR POLICY			
IMMUNIZATIONS			
GAS CARD			
VEHICLE ASSIGNMENT			
LOST, STOLEN, DAMAGED EQUIPMENT			
MILEAGE REIMBURSEMENT			
RELEASE OF INFORMATION			
SUPPLY INVENTORY			
MAINTENANCE REQUESTS			
EMPLOYEE DRESS CODE			
SCHEDULING AND WORK HOURS			
REPORTING AND INJURY			
SOCIAL MEDIA AND INTERNET POLICIES			
ON-CALL POLICIES			

Orientation			
FAMILIARIZATION WITH MORGUE			
ACCESS TO DECEDENTS			
HOSPITAL ACCESS AND ORIENTATION			
HR/FUEL ACCESS/FLEET MAINTENANCE			
EVIDENCE			
RECORDS AND DISPATCH			
JURISDICTIONAL LINES			

Facility Equipment			
FILING CABINETS			
STORAGE AREAS			
COPIER			
COOLER (BLOOD, OTHER SPECIMENS)			
FREEZER			
MEDICATION LOCKER			
PROPERTY LOCKER			
FILE ROOM; BATHROOM			
BIOHAZARDOUS WASTE (TRASH, SHARPS, DRUGS)			

Personal Equipment			
CORONER BAG			
PHONE			
GLOVES - WHEN TO USE WHICH KINDS			
EYE PROTECTION			
TYVEX SUIT			
FACE MASKS (N95, RESPIRATOR)			
BOOTIES AND SLEEVES			
FOOTWEAR POLICIES			

Vehicle Use & Equipment			
EMERGENCY LIGHTING AND SIREN			
BODY BAGS (LIGHT & HEAVY)			
BODY BAG EVIDENCE SEAL			
PROPERTY/EVIDENCE BAGS			
REENACTMENT DOLL			
VEHICLE MAINTENANCE			
VEHICLE POLICIES			
INVENTORY SUPPLY			

Computer Systems			
FORMS, LETTERHEAD, SCHEDULES, HOSPICE, ETC...			
GENERAL			
CREATING A CASE FILE			
CASE MANAGEMENT			
STATUS/FOLLOW UP			
INVOLVEMENTS			
NARRATIVES			
SUPPLEMENTS			
SUBMITTING REPORTS			
PENDING VS. AMENDED			

Death Reporting			
NOTIFICATION FROM DISPATCH			
1ST CALL SHEETS			
HOSPICE/NURSING HOME REPORTABLES			
NON-DISPATCH NOTIFICATIONS			
REPORTS (LONG VS. SHORT FORMATS)			
MEDICAL RECORD REQUEST			
SUIDI FORMS			
OTHER SCENE SPECIFIC FORMS			

Body Intake			
DEATH BOOK			
IDENTIFICATION TAGS			
SECURITY LOG			
PERSONAL EFFECTS (CLEANING, SECURITY, INVENTORY)			
BIOHAZARDOUS STICKERS, PACKAGING			
EXTERNAL EXAMS			
TOXICOLOGY (SAFETY, TECHNIQUES, STORING)			
MEDICATION INVENTORY			

Body Release			
FAMILY RELEASE			
BODY IDENTIFICATION (RELATIVES VIEWING THE BODY)			
HOLDS FOR AUTOPSY			
MORGUE LOG/SECURITY			
PROPERTY RELEASE			
FUNERAL HOME RELEASE			

Notifications			
DETERMINING THE NEXT OF KIN			
NEXT OF KIN NOTIFICAITON			
ORGAN AND TISSUE DONATION AGENCIES			
DISTRICT ATTORNEY			
LAW ENFORCEMENT JURISDICTION			
DFS NOTIFICATION			

Scene Investigation			
JURISDICTION CONFIRMATION			
RESPONSE TIME/NOTIFICATION FROM DISPATCH			
INITIAL CONTACT (LE/FIRE/NOK)			
SCENE/ENVIRONMENTAL ASSESSMENT & SAFETY			
PROPER PPE			
LE INTERVIEW			
NOK INTERVIEW			
REENACTMENT POLICY FOR CHILD DEATHS			
MANDATORY REPORTS OF ELDER ABUSE OR NEGLECT AND CHILD ABUSE			
FIRE/EMS INTERVIEW			
BODY IDENTIFICATION			
SCENE PHOTOGRAPHY			
BODY PHOTOGRAPHY			
BODY EXAMINATION			
ESTABLISHING TIME OF DEATH			
PERSONAL EFFECTS (ON OR NEAR THE BODY)			
COLLECTION OF EVIDENCE (SUICIDE NOTES, DRUGS, WEAPONS)			
BAGGING OF HANDS			
PACKAGING THE BODY FOR TRANSPORT (BODY BAGS, ID TAGS, SEALING THE BAG)			
REMOVING BODY FROM SCENE			
RELEASING PROPERTY FROM THE SCENE			
RELEASING THE BODY FROM THE SCENE			
FOLLOW-UP INVESTIGATION			
CASE UPDATE TO SUPERVISOR			

Case Management			
FIRST THINGS FIRST (REPORT ENTRY INTO SMARTSHEET)			
STATUS/FOLLOW-UP			
NATURAL DEATHS			
AUTOPSY CASES			
DEATH CERTIFICATES (PENDING, FINAL)			
RECEIVING AUTOPSY REPORTS			
SCANNING			
COMMUNICATION WITH FAMILY			
REPORT DEADLINES			
LONG REPORTS VS. SHORT REPORTS			
UPLOADING PHOTOS AND MEDICAL RECORDS			
ATTACHING FILES			

Death Investigations			
IDENTIFICATION			
NOK NOTIFICATION			
DONOR ALLIANCE			
LESS THAN 24-HOUR HOSPITAL DEATHS			
OVER 24-HOUR HOSPITAL DEATHS (DELAYED DEATHS)			
HOSPITAL ADMISSION SPECIMENS			
MEDICAL RECORD REQUEST			
FETAL DEMISE			
INCIDENTS THAT BEGAN OUTSIDE OF SHELBY COUNTY			
HOSPICE			
NURSING HOME\ASSISTED LIVING			
FALLS			
DECOMPOSITION			
NATURAL SCENE			
ACCIDENT (GENERAL)			
SUICIDES (GENERAL)			
HOMICIDE (GENERAL)			
CHILD/INFANT DEATH			
MOTOR VEHICLE ACCIDENTS			
FIREARM DEATH			
IN-CUSTODY DEATHS			
OFFICER INVOLVED SHOOTING			
CARBON MONOXIDE and HS DEATHS			
DRUG DEATHS			
ETOH (CHRONIC VS. ACUTE)			
DROWNING			
HANGINGS			
FIRE DEATHS			
MULTIPLE FATALITIES			
AIRCRAFT CRASHES			
BLUNT FORCE INJURY			
SHARP FORCE INJURY			
THERAPEUTIC COMPLICATIONS AND MEDICAL MISADVENTURES			
EXPOSURE-RELATED DEATHS (HYPO VS. HYPER)			
ASPHYXIATION (CHEMICAL, POSITIONAL, MECHANICAL)			
ELECTROCUTION DEATHS			
HUMAN VS. NON-HUMAN REMAINS			