

Richland County Coroner's Office 2016 Annual Report



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The Richland County Coroner's Office is pleased to release this 2016 Annual Report. The purpose of the report is to enable the County Commissioners, Law Enforcement, the Richland County Health Department, and the general public to better acquaint themselves with the activities of our office, as well as to provide an ongoing statistical analysis of past and current deaths in the county and to serve as a tool for future planning.

I would like to thank the voters of Richland County for voting. As Dr. Stewart Ryckman, M.D., retired at the end of 2016, I took office January 2, 2017. We appreciate and thank Dr. Ryckman for all of his hard work as Richland County Coroner for the last 12 years. I look forward to working with my investigators, administrative assistant, our County Commissioners, the County Prosecutor's office, law enforcement, emergency medical response agencies, the Health Department, and local funeral homes.

In recent years in the state of Ohio the workload of county Coroners has increased dramatically. This is partly due to changes in the Ohio Revised Code mandating new investigative and reporting responsibilities, as well as changes in society that have made the Coroner's investigative function increasingly important to help resolve conflicts in criminal and civil legal cases, insurance investigations, Worker's Compensation and OSHA cases, Consumer Product and Safety issues, etc. Coroners and their staff are now urged to undergo education and certification, which is mandatory. Proposed legislation pending in Congress will require coroner's investigators to undergo formal certification in order to perform their duties and there is discussion on a national level of certifying all coroner and medical examiner offices. In addition, our office has involved itself in community education by speaking to service clubs, high school and college classes, teenage driving schools, drug rehabilitation forums, victim awareness classes, and by participating in the annual 4H Mock Crash event. We are also involved in the county Suicide Coalition, Safe Communities Coalition, and Emergency Planning Committee. We have had multiple interns from criminal justice programs, forensic science, and forensic nursing programs spend time with us. We are also involved with Ohio Mortuary Operational Response Team; OMORT is for search and recovery for any mass fatalities that can occur in the state of Ohio. We are also involved with the Richland County Mass Fatality Board. Lastly, we are involved with Starfish.

With being elected as Richland County Coroner, I will be active in the Ohio State Coroner's Association. There is a movement by the Ohio County Commissioners Association and the Ohio Legislature to reformat the structure of county government, starting with ideas for the changes in the functioning of the coroner's office. While not opposed to change per se, we want to ensure that changes are indeed improvements and are done solely to improve our ability to provide proper and efficient death investigation services to the citizens of Ohio.

In 2016, we continued to operate on a tight budget in recognition of the fiscal problems facing all residents and agencies in Richland County. We operated on an originally requested budget of \$338,942.00, but actually spending \$373,124.91. This increase in spending was due to an unexpected increase in illicit drug activity and increased overdose deaths that are plaguing the county as well as the rest of the state and the country. As all county departments have had to do, we have made cuts. Most of these involve reimbursements for such things as coroner and investigator training, travel expenses, etc.

We believe that training and continuing education is very important, and it is mandated by the state of Ohio, so we continue to educate ourselves with personal funds, look for training paid for by grants, and hope that these items can be added back to the budget as the financial situation improves.

As technology advances, we as an office are moving our files from paper to digital. We have used an online database program since 2006; this program allows us to store data from our cases, however, still keeping paper files because according to County law we have to keep all files/cases. We have also hired a part time person to scan all of our paper files onto a digitally stored filing system.

We have investigated over 3300 deaths during the twelve-year period of 2005-16. Our goal is to maintain a high level of quality, professionalism, and integrity in the field of death investigation. We hope that the reader finds the report useful and informative. If you have any questions regarding this report feel free to contact us, (419)-774-5868.

I would like to thank my investigators and administrative assistant for the time and effort that they have put in at all hours, and for welcoming me as the new Coroner. They work 24 hours a day, 7 days a week, including holidays. Without their dedication to the community and their compassion to help families of the deceased, this office could not function.

Sincerely,

Daniel D. Burwell, DO.
Richland County Coroner

Duties of the Coroner's Office

Many people do not understand the difference between a coroner and a medical examiner. Both essentially perform the same functions, but there are a couple of differences. Medical examiners are appointed officials and are always licensed physicians. Coroners are elected officials, and this theoretically offers them autonomy and freedom from being controlled by an "appointing" agency, however in most states coroners are not required to be licensed physicians. Ohio is one of two states that utilize the coroner system but also require their elected coroners to be licensed physicians.

Duties of the Richland County Coroner's Office include:

- To respond to death scenes when needed, 24 hours a day, 7 days a week.
- To thoroughly investigate death scenes.
- To determine the date and time of death, as nearly as possible.
- To determine the manner and cause of death.
- To take all necessary steps to properly and positively identify the decedent.
- To collect, preserve, and process pertinent evidence at the scene (often working along with the local or state crime lab).
- To photograph, sketch, or otherwise document the scene.
- To interview witnesses, family members, physicians, employers, friends, neighbors, etc.
- To remove the body from the scene in a dignified manner.
- To make sure that next-of-kin are notified in a proper fashion.
- To take responsibility for all personal effects on the person of the deceased, and to document the release of these items to the family, law enforcement, or crime lab.
- To determine in which cases an autopsy should be performed.
- To arrange for an autopsy by a forensic pathologist when required.
- To be present at autopsy if necessary, and to otherwise consult with the forensic pathologist in determining cause of death.
- To provide families with information and assistance in helping them through the ongoing process of the death investigation.
- To compile and document all information in an unbiased, accurate, and thorough report.
- To interact with other law enforcement, government, and health agencies, including police/sheriff, fire, EMA, prosecutors, private attorneys, OSHA, Consumer Product Safety Commission, FAA, NTSB, hospitals, funeral homes, organ donation teams, etc.
- To release information to the public and media through interviews and press releases.
- To provide testimony at depositions and in court.
- To provide training and education in the field of death investigation and the role of the Coroner's office to other law enforcement, health, and community service agencies.

- To otherwise be of community service in any way possible, including community and school education activities and participation in community health forums and safety programs.
- To work with the county Emergency Planning Agency(s) to develop mass fatality plans.
- To ensure that the Coroner, Deputy Coroner, and Coroner's Investigators receive ongoing continuing education by attending death investigation, medical, and forensic seminars, and encouraging certification by the American Board of Medicolegal Death Investigators.

Community Service Activities

The philosophy of the Richland County Coroner's Office is that it is our responsibility to participate in community safety and education forums whenever possible. To that end we have been a part of the following;

- Presentations to Teen Driver's Education programs.
- Presentations to high school science classes.
- Presentations to North Central State College classes.
- Presentations to community service clubs.
- Participation in Safe Community Coalition Meetings.
- Participation in Child Fatality Reviews at the health department.
- Participation in Suicide Prevention meetings at the health department.
- Participation in Pandemic Flu Seminars for the community.
- Helped develop a county wide Pandemic Flu Plan.
- Developed a county Mass Fatality Plan
- Presentation at MADD dinner.
- Member of Local Emergency Planning Committee.
- Participation in Mock Disaster Drills.
- Participation in annual 4-H-sponsored Teen Mock Crash events at fairgrounds.
- Participation in high school job shadowing programs.
- Member of Board of Directors of Richland Alternative Program.
- Meet with various local township fire/EMS units.
- Hosted a conference for Emergency Responders.
- Served as preceptors for forensic nursing and criminal justice majors.

Reportable Deaths

By law, the County Coroner is directed to administer and conduct investigation into all deaths which occur under questionable circumstances. By law, all deaths must be reported to the Coroner in the following circumstances:

Accidental Deaths; if the death occurs when in apparent good health or in any unusual or suspicious manner including:

- Asphyxiation by gagging on foreign substance, including food in airway; compression of the airway or chest by hand, material, or ligature; drowning; handling cyanide; exclusion of oxygen; carbon monoxide; and/or other gasses causing suffocation.
- Blows or other form of mechanical violence.
- Burns from fire, liquid, chemical, radiation or electricity.
- Cutting, stabbing, or gunshot wounds.
- Electrocution.
- Drug overdose from medication, chemical, or poison ingestion (actual or suspected).
- Explosion.
- Falls, including hip fractures or other injury.
- Stillborn or newborn infant death where there is recent or past traumatic event to the mother such as vehicular accident, drug ingestion, homicide attempt, or suicide attempt that may have precipitated delivery or had a detrimental effect to the newborn.
- Vehicular accidents, including auto, bus, train, motorcycle, bicycle, aircraft, watercraft, or snowmobile, including driver, passenger, or non-passenger deaths related to the accident.
- Weather related deaths, including lightning, heat exhaustion, hypothermia, or death due to high winds.

Homicidal Deaths;

- By any means, suspected or known.

Suicidal Deaths;

- By any means, suspected or known.

Occupational Deaths;

Instances in which the environment of present or past employment may have caused or contributed to death either by trauma or disease. This includes not only injuries received during employment or past employment such as fractures or burns, but also industrial infections, pneumoconiosis, present or past exposure to toxic waste or product (including nuclear products, asbestos, or coal dust), and caisson disease (bends).

Sudden Deaths;

If the death occurs when in apparent good health or in any suspicious or unusual manner including;

- DOA; any person pronounced dead on arrival at any hospital, emergency room, or doctors office shall be reported.

- Any infant or young child found dead, unless under medical care and clearly a natural death from a pre-existing condition. This includes all cases of Crib Death (Sudden Infant Death Syndrome).
- All stillborn infants when there is actual or suspected trauma to the mother.
- Deaths under unknown circumstances.
- Any deaths where the identity of the deceased is unknown.
- Any sudden unexpected death on the street, at home, in a public place, or a place of employment.
- Any death related to drug abuse, habitual use of drugs, or drug addiction.

Custodial Deaths;

- Deaths occurring while in jail, confinement, or any kind of judicial custody.
- Any Death while being pursued, apprehended, or taken into custody.

Special Circumstances;

- Death of any Mentally/Developmentally Disabled (MRDD) client.
- Any maternal or infant death where there is suspicious of illegal interference by unethical or unqualified personnel, or self-induction.
- “Delayed Death” where the immediate cause of death is from natural disease, but an accident or injury may have occurred weeks, months, or even years before that initiated the sequence of events or medical conditions leading to the death.

Therapeutic Deaths;

- Any death while under anesthesia, during the anesthetic induction, or during the post-anesthetic recovery period.
- Any death while undergoing any type of surgical procedure.
- Any death thought to be related to any surgical procedure.
- Death during or following any diagnostic procedure if thought to be related to the procedure or complications of the procedure.
- Death due to the administration of any drug, serum, vaccine, or any other substance given for diagnostic, therapeutic, or immunologic purpose.

The Richland County Coroner’s Office encourages the reporting of any death where there is a doubt about whether or not the case should be reported. Many times after investigation the Coroner will release the case back to the jurisdiction or institution where the death certificate will be signed by the attending physician as a natural death.

By state law, only the Coroner can sign the death certificate if the manner of death is anything other than a natural death.

Richland County Demographics

Richland County is located in North Central Ohio and as of the 2010 census had a population of 124,475. It is the 23rd most populated county out of Ohio's 88 counties.



The county has a total area of 500 square miles. The county seat is Mansfield with a population of 49,346. Other cities within the county include Shelby, Ontario, and parts of Crestline and Galion. The county also includes the villages of Bellville, Butler, Lexington, Lucas, Shiloh, and part of Plymouth. It borders five counties; Ashland, Crawford, Huron, Knox, and Morrow counties.

Interstate 71 runs from SW to NE through southern Richland County. US 30 is a major east-west hub and US 42 runs through the county as well. There are fourteen state highways running through Richland County. Overall there are 595.27 lane miles of state, US, and Interstate highways.

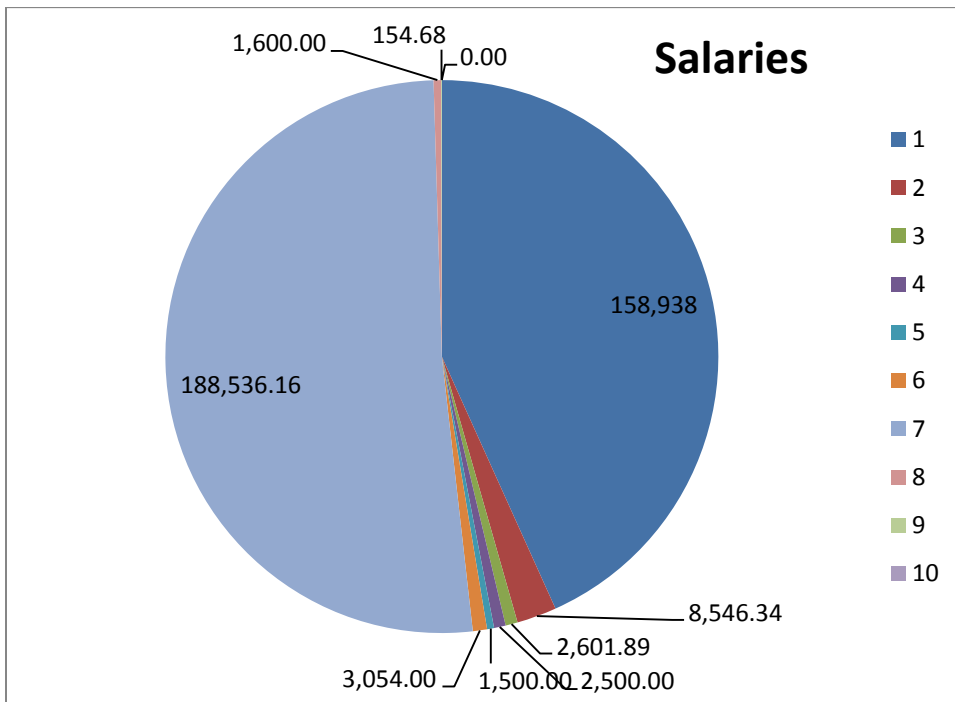
The county has two major river basins. The Clear Fork of the Mohican River runs through the southern part of the county, and the Black Fork of the Mohican River runs through northern Richland County.

The county contains parts of three major reservoirs within its boundaries; The Clear Fork Reservoir lies within Richland and Morrow Counties while both Pleasant Hill Reservoir and Charles Mill Reservoir lie within Richland and Ashland Counties.

2016 Budget - Richland County Coroner's Office

The total spending of the Richland County Coroner's Office for 2016 was \$373,124.91. This was an increase of \$31,827.91 from the 2015 budget. This was primarily due to an increase in cases and autopsies required, Original budget requested was \$338,942.00, but this was supplemented late in year due to more autopsies than budgeted for. Below is the break-down of our spending.

Salaries	\$158,938.00
Contract services	\$9,600.00
Non-Contact Services	\$155,300.00
Training	\$2,500.00
Travel	\$1,500.00
Dues	\$3,054.00
Supplies	\$4,100.00
Equipment/Repair	\$1,600.00
Subscriptions/Printing	\$250.00
BWC Chargeback	\$0.00
Total	\$338,942.00



Non-Contract services represent vendors that we don't have a contract with, which includes out autopsies. Because Richland County has no forensic morgue and has no forensic pathologists, coroner's cases that require autopsy are usually sent out of county to coroner's offices such as Cuyahoga or Montgomery County where the autopsies are performed. In 2016, there were # cases in Richland County sent for autopsy. Currently and out of county autopsy and transport costs \$1,750.00.

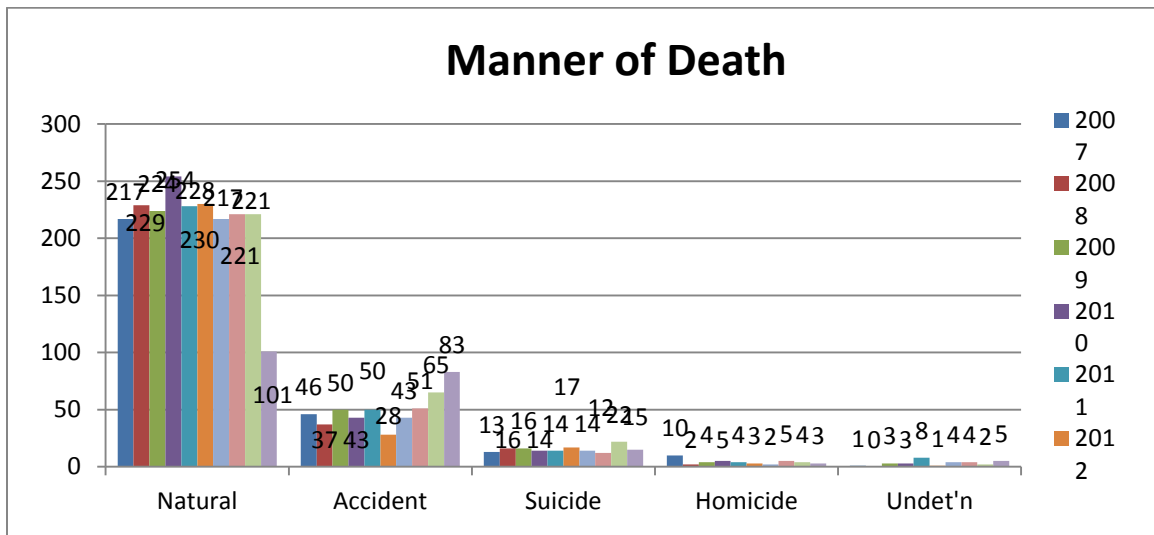
With the increase of autopsies needed from 2015 to 2016, the price of the autopsy increases, along with the increase in transportation to and from the autopsy. According to Ohio Law, the cost of having an autopsy done in a referral county shall be "no greater than the actual value of the services of technicians and the materials used in performing such examination."

Total Deaths

There were 1,154 total deaths in Richland County in 2016, and in Shelby there were 107 reported deaths. Of these, 332 were reported to the Coroner's Office. 111 were accepted as Coroner's cases for full investigation. 111 of these decedents were sent for autopsy, and the rest of cases were referred back to family physician.

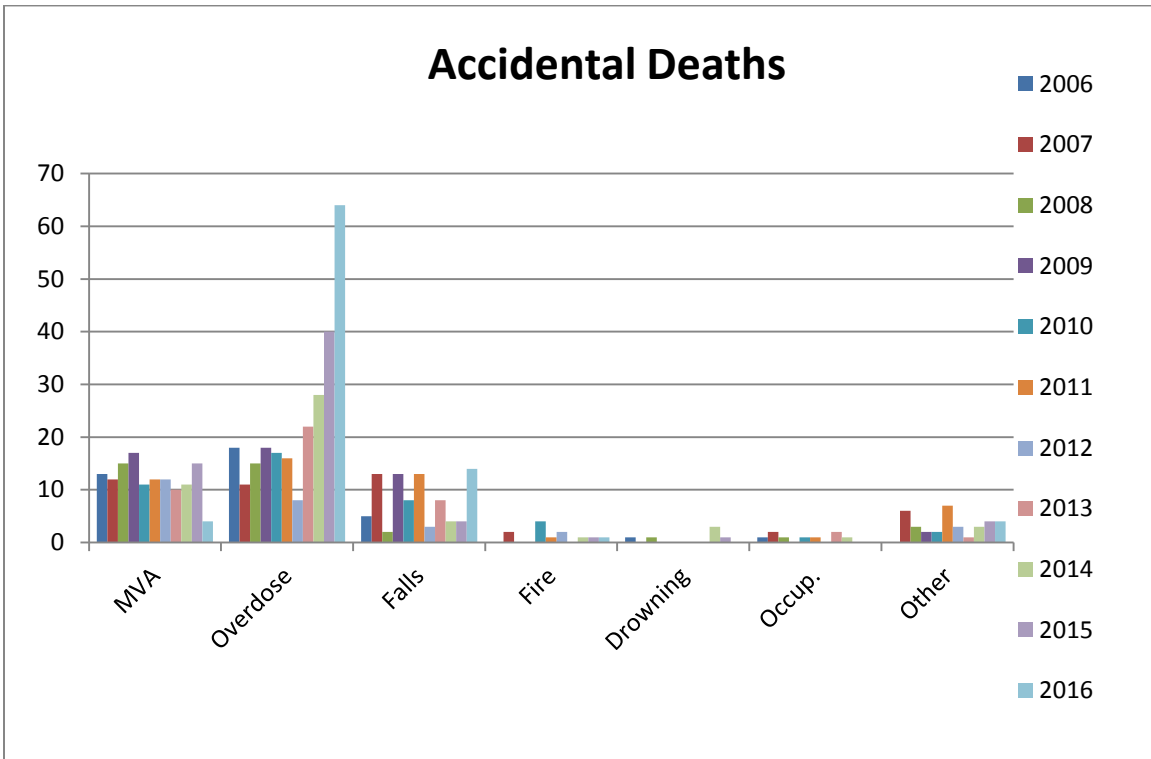
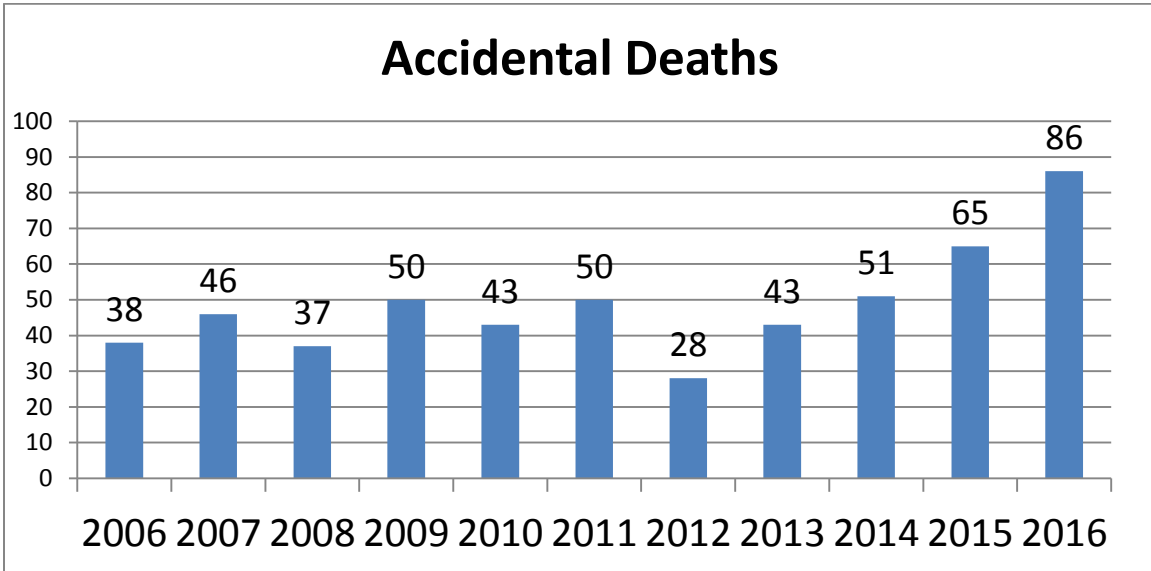
Manner of Death

Of the 332 deaths reported to the Coroner's Office in 2016, 214 (64%) were determined to be from were determined to be from natural causes. There were 64 accidental deaths (19% of reported cases), 15 suicides (4.51%), 3 homicides (.90%), and # deaths were ruled to be of undetermined manner.



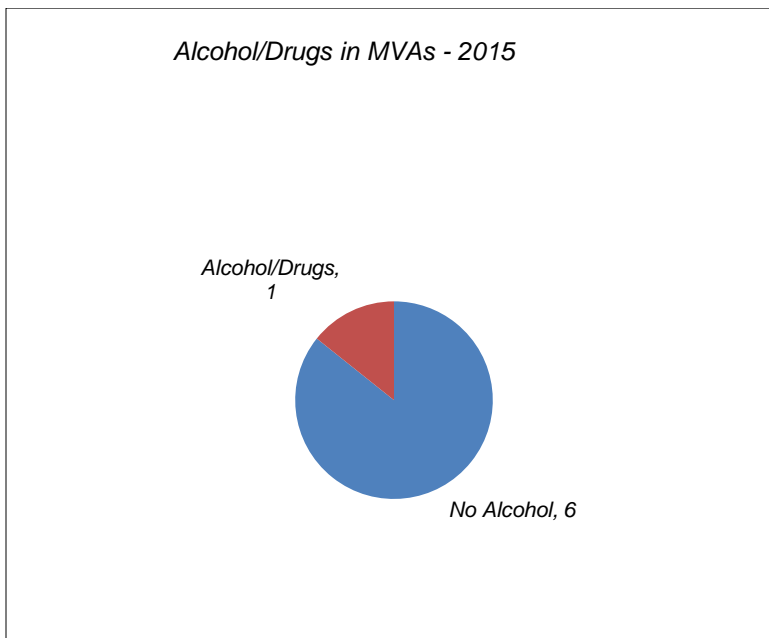
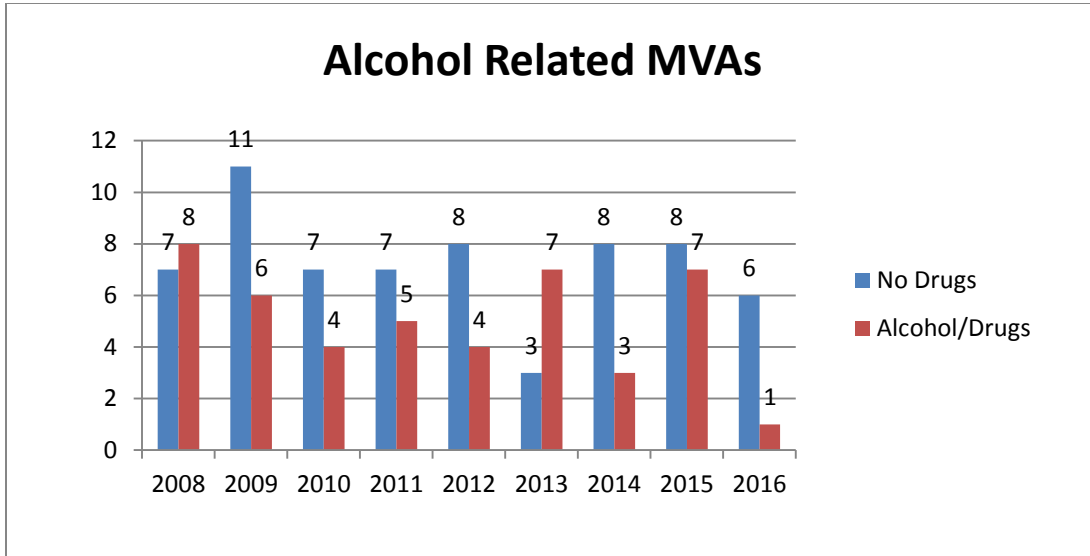
Accidental Deaths

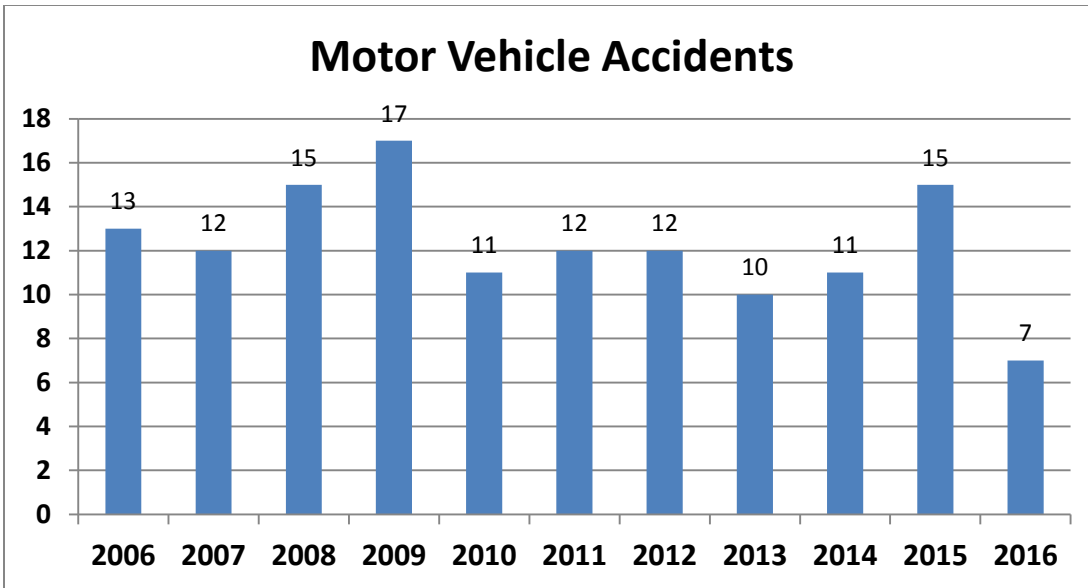
There were 86 accidental deaths in Richland County in 2016. Of these, 4 were motor vehicle accidents, 64 were drug overdoses, 14 were caused by falls, 2 were ATV related, 1 was by a flatbed truck, and 1 was smoke inhalation due to fire.



Motor Vehicle Accidents

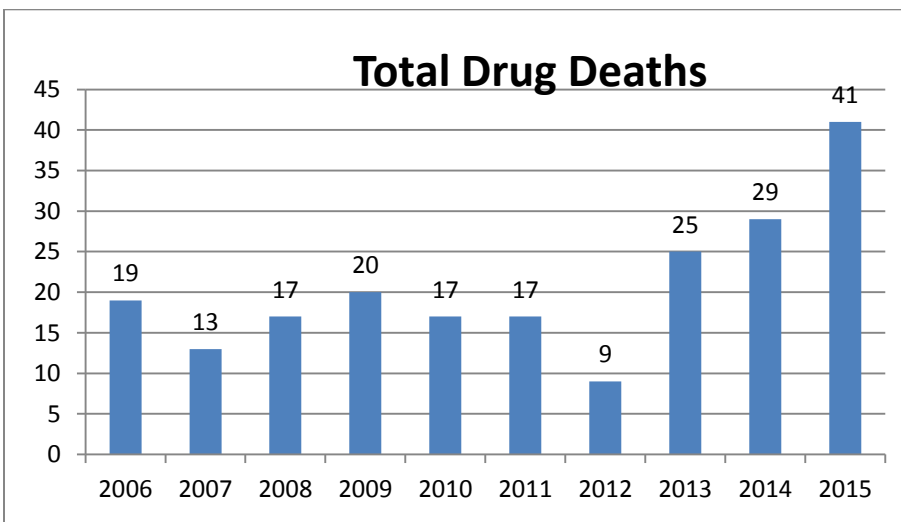
There were 7 motor vehicle deaths in 2016. One fatality was drug and/or alcohol related in regards to factors causing the crash.

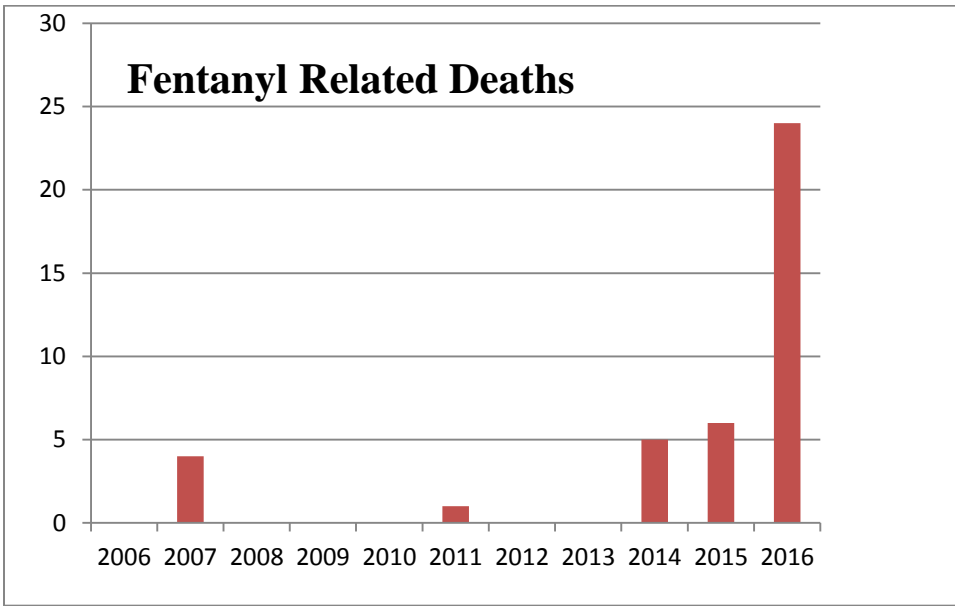
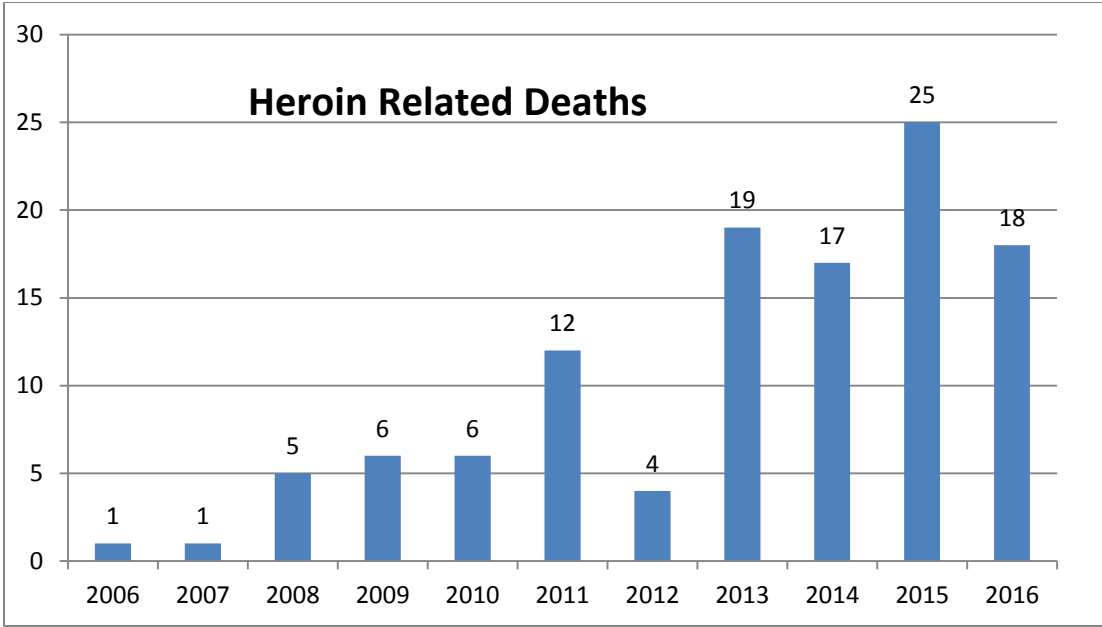


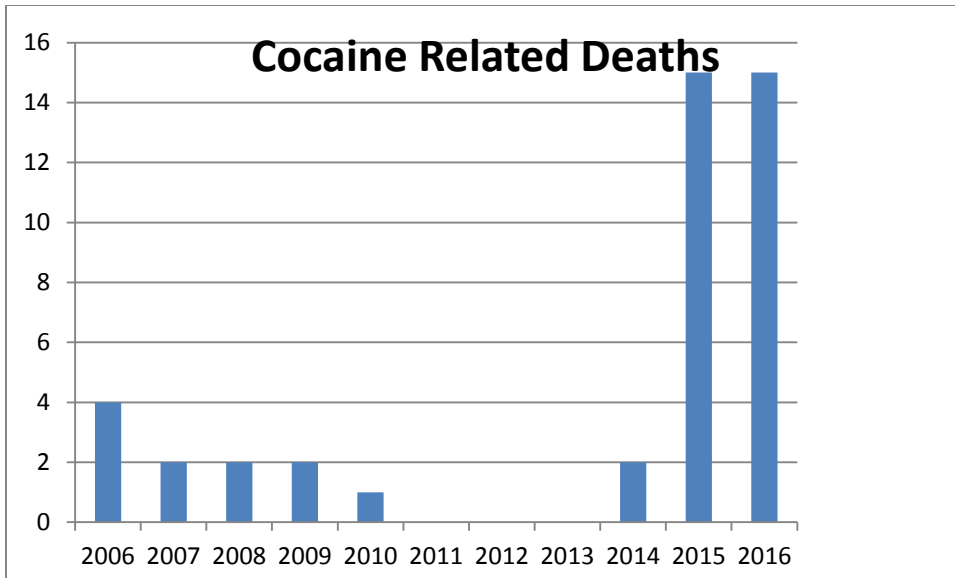


Drug Overdoses

There were 64 deaths due to drug overdose in 2016. All 64 were ruled to be accidental. Total Drug deals are currently the highest in the past decade. Many decedents died under the influence of a combination of drugs, and it is often hard to categorize them. In order to demonstrate the increasing influence of certain drugs we have made tables of the total number of decedents who were under the influence of heroin, cocaine, fentanyl, carfentianl, and whether or not there were multiple drugs involved.







Not including in these tables is that heroin, fentanyl, and cocaine were often combined with other substances such as carfentanyl, opiates, narcotics, alcohol, antidepressants, sedatives, and nerve pain medications.

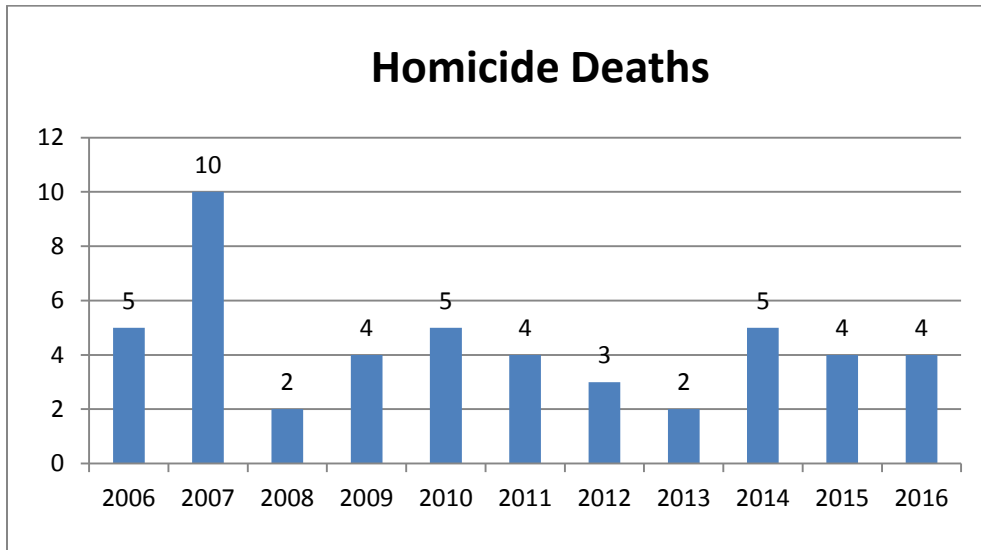
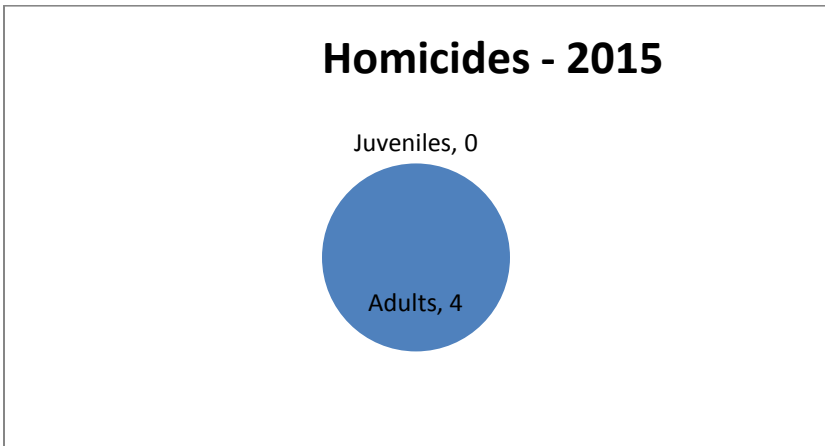
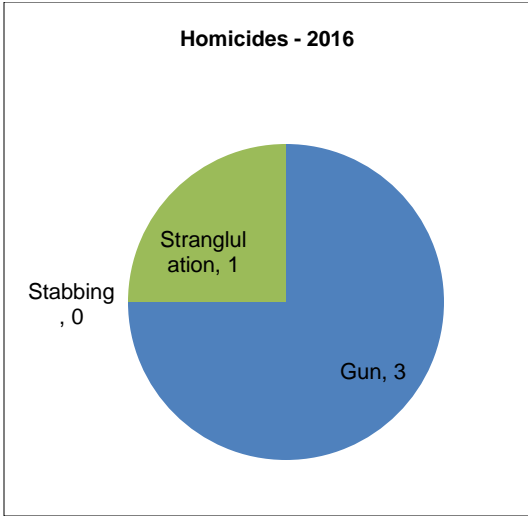
Drug overdose deaths have dramatically increased in Richland County, all over the state of Ohio, and all over the United States.

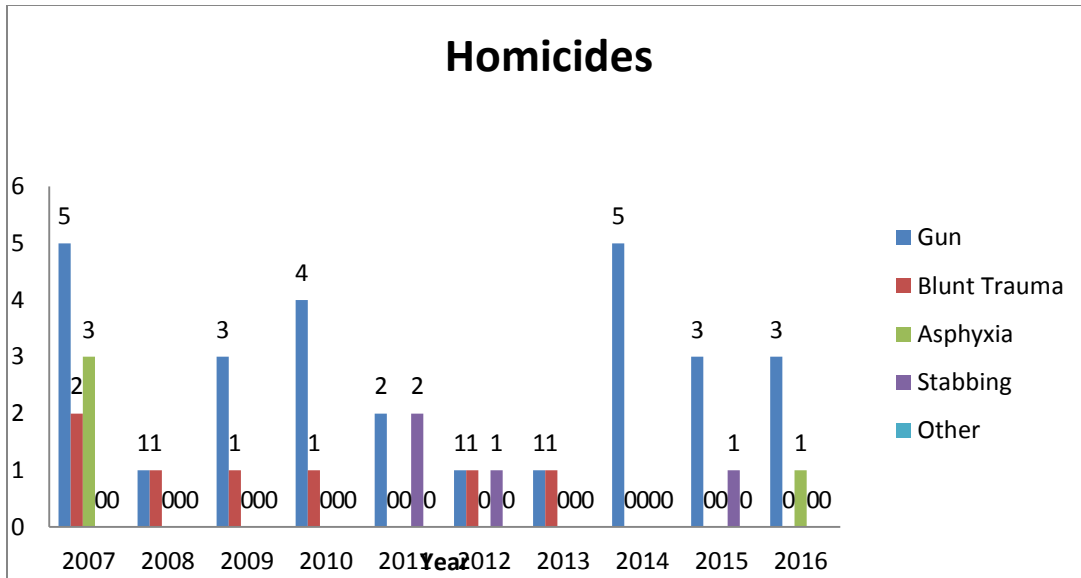
Firearm Related Deaths

Homicides

Note: The medicolegal definition of homicide is generally given as death due to the actions of another person. Sometimes there are gray areas with accidental deaths and some deaths are difficult to classify or even to come to a consensus among Coroners. **The medicolegal classification of a death as a homicide does not necessarily imply that it would be classified as a homicide or murder by the criminal justice system.**

There were 4 Homicides in 2016.
 3 were by gunshot wound(s).
 1 was neck compression by strangulation.
 There were no juvenile homicides (<18 y/o) in 2016.

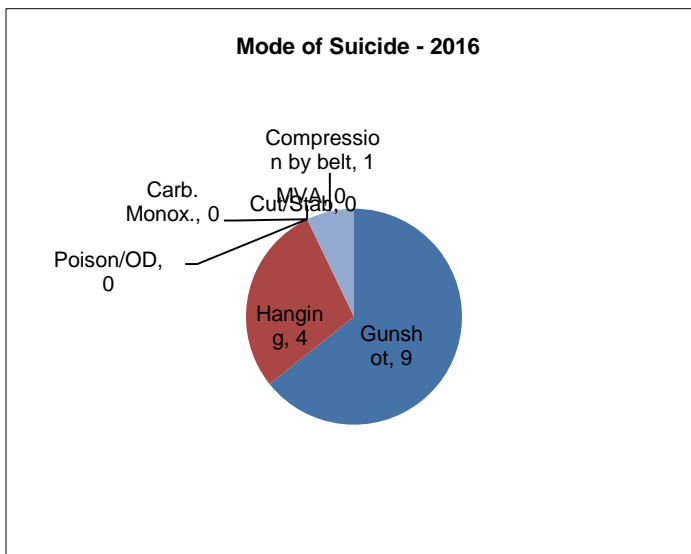




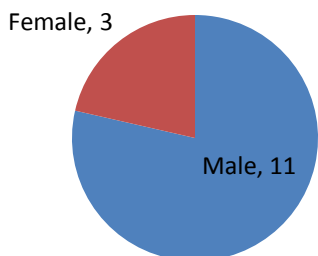
Suicides

In 2016, there were 14 suicides. 4 were by hanging, 1 was compression of neck by belt, and 9 were self-inflicting gunshot wound.

We have found three factors that are common in suicide; 1) prior attempts or threats, 2) history of alcohol or drug abuse, and 3) history of depressions or other mental illness.



Suicides - 2016



Child Fatalities

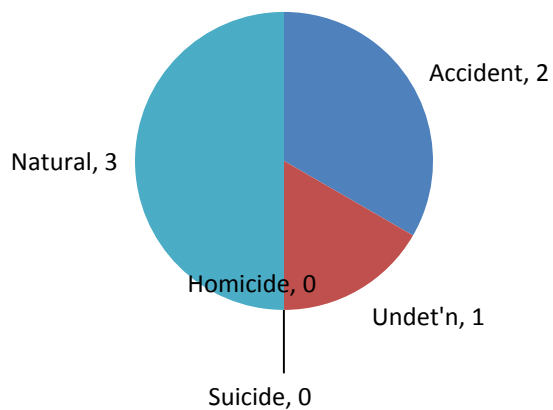
There were only 6 child fatalities (< 18 years old) in 2016 that fell under the jurisdiction of the Richland County Coroner's Office. The numbers are typically low since children who are transported to children's hospitals in other counties and die there or are pronounced dead there fall under that county's jurisdiction.

2 Accidental, this included blunt force to the head caused from a fall, and positional asphyxia.

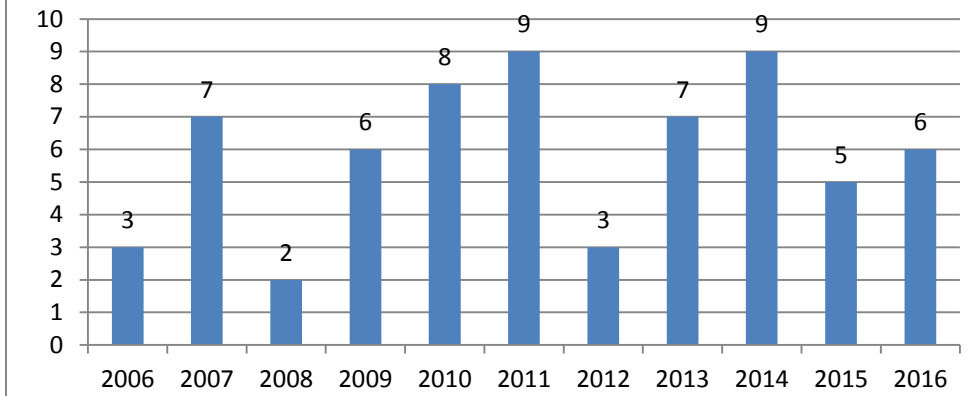
1 Undetermined natural causes

3 Natural, this included acute bronchopneumonia, MRDD, and pneumonia.

Child Deaths - 2016



Child Deaths 2006-2016





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