

Death Investigation in Canada

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ABSTRACT: A survey of death investigation systems in Canada was conducted by questionnaire and included questions on the type of system used (coroner or medical examiner), budget, method of appointment and qualifications of coroners and medical examiners, responsible department of government, training requirements, laboratory facilities, and the utilization of investigators and pathologists by each jurisdiction.

Of the population of Canada 81.5% reside in coroner jurisdictions, the primary death investigator in 81% of the population is a licensed physician. The majority of jurisdictions either require or provide training in death investigation. All death investigation systems are under the respective provincial or territorial department of Justice or Attorney General with the chief coroner or chief medical examiner appointed by their respective provincial cabinet. The qualifications of the chief coroner vary with jurisdiction, while in 75% of medical examiner jurisdictions the chief medical examiner must be a pathologist. On a per capita basis medical examiner systems are less expensive to operate than coroner systems.

KEYWORDS: forensic science, medical examiner, coroner, death investigation, Canada

Canada comprises ten provinces and two territories and in terms of land mass is the second largest country in the world. Death investigation laws are mandated by the individual province or territory and utilize either a coroner or medical examiner system. The following study was conducted to review death investigation systems in Canada and where possible to compare with similar systems in the United States.

Methods

A questionnaire was sent to all chief coroners and chief medical examiners in Canada regarding death investigation within their jurisdiction. Information was solicited on the type of death investigation system utilized, budgets, method of appointment of the chief coroner/medical examiner, terms of appointment, educational and training requirements of coroners and medical examiners, and forensic laboratory facilities utilized by each jurisdiction. Information was also requested regarding the utilization of medical investigators and pathologists by each jurisdiction.

Results

Completed questionnaires were received from all twelve jurisdictions within Canada.

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Systems of Death Investigation—With respect to the type of death investigation system used, four provinces have a medical examiner system. The remaining eight provinces and two territories have coroner systems (Fig. 1). One province operates under a combined Sheriff/Coroner office. All death investigation systems operate at the provincial or territorial level with no separate city or county systems.

Branch of Government Responsible for Death Investigation—All coroner and medical examiner systems are under the auspices of the respective provincial Department of Justice or Attorney General, and operate under independent legislative authority.

Deaths Investigated—While there is some variation in the wording of which deaths are investigated, all jurisdictions include violent or unnatural deaths, sudden unexpected deaths, and custodial deaths. Some acts specify maternal deaths that are reasonably related to pregnancy, deaths from malpractice or negligence, and work related deaths. Others include vague terminology such as deaths that occur under circumstances that require investigation.

Appointment of Chief Coroner and Chief Medical Examiner—All chief coroners and chief medical examiners are appointed by the respective provincial cabinet on recommendation. Of the four medical examiner systems two chief medical examiners are appointed for a specified term (contractual) while two are appointed without term. Of the eight coroners systems two have a specified term of office for the chief coroner.

Appointment of Coroners and Medical Examiners—Medical examiners are appointed by the chief medical examiner in two jurisdictions and by the provincial cabinet upon recommendation by the chief medical examiner in the remaining two. With respect to the appointment of coroners, the appointment is by the chief coroner in two instances and by the provincial cabinet in the remaining six.

Qualifications of the Chief Medical Examiner and Chief Coroner—Three medical examiner jurisdictions require by legislation that the chief medical examiner be a pathologist, one requiring a pathologist with training or experience in forensic pathology. One jurisdiction requires that the chief medical examiner be a licensed practitioner. From a practical point all chief medical examiners are pathologists with training or experience in forensic pathology.

The qualifications of the chief coroner vary with jurisdiction. In two of the eight jurisdictions the chief coroner is required to be a licensed medical practitioner. One jurisdiction requires the chief coroner to be a physician or a lawyer. In the remainder the chief coroner is a lay person. Some jurisdictions require the chief coroner to have experience in administration. In ten jurisdictions



Unlike the United States, there is no election of coroners, with both chief coroners and medical examiners appointed by the respective provincial government. This avoids the potential conflicts that may arise with an elected official. In two jurisdictions the chief medical examiner is a full time faculty member, employed by a university medical school and subsequently seconded to the respective justice department, further adding to the independence of such an office. The chief coroners and chief medical examiners of Canada meet annually to discuss topics of local and national interest. Such a meeting provides a useful forum for debate and offers a diverse opinion on issues discussed.

All death investigation systems in Canada are under the auspices of the respective provincial Department of Justice or Attorney General, unlike the situation in the United States where death investigation jurisdictions may be under the auspices of the state departments of Justice, Public Health, Public Safety, or under County Government (2). All jurisdictions in Canada function autonomously with legislated authority to investigate reportable deaths.

In the majority of jurisdictions coroners and medical examiners are appointed by government, which usually requires approval from the provincial cabinet. This can be a time-consuming process resulting in delays in appointing coroners and medical examiners. The ability of the chief coroner or chief medical examiner in four jurisdictions to appoint coroners or medical examiners, offers an advantage over cabinet appointment in that appointments can be made in a timely fashion and allow for continuity of coverage for communities.

In all but three provinces, jurisdictions extend far into the north, and include isolated communities in which pathologists and often physicians are not available. Such situations can result in costly transportation charges and delays in providing the body to the next of kin. With respect to autopsy services seven provinces have

forensic pathologists either on staff or on contract to the respective coroner or medical examiners office. All jurisdictions rely on hospital pathologists with or without forensic training to provide autopsy services.

Forensic Pathology in Canada—Certification as a medical or surgical specialist in Canada is a function of the Royal Collage of Physicians and Surgeons of Canada (RCPS) by virtue of an act of Parliament in 1929. Unfortunately the RCPS does not recognize forensic pathology as either a specialty, subspecialty or provide certificates of special competence in forensic pathology. As a result there is no recognized forensic training programs in Canada that lead to specialist certification. At present there is only one fellowship position available in Canada which provides training and experience in forensic pathology. Those pathologists interested in a career in forensic pathology usually obtain training from programs in the United States or Europe or gain on the job experience. Recognizing a pathologist as a “forensic expert” is thus left to the courts to decide without the advantage of a standardized level of competence that would be available by certification.

References

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