PURPOSE

Assembly Bill 1608 seeks to ensure that localdeath investigations are conducted independently and objectively, reducing any perception of biased investigative medical examinations when determining the cause of death of an individual, including those in custody.

BACKGROUND

In December of 2020, Angelo Quinto, a Navy veteran from Northern California, was tragically killed by police. Angelo had been suffering from a mental health episode when his family called the police for help in order to de-escalate the situation. While Angelo lay face down and bloodied with handcuffs behind his back, a responding officer knelt on Angelo's neck for at least four and a half minutes while another officer restrained his legs. Angelo lost and never regained consciousness – he died in a hospital three days later.

Angelo's death already inspired an initial change in the law with AB 490 (Gipson, 2021) that now bans law enforcement in California from using chokeholds and restraints that lead to positional asphyxiation — this is a condition in which someone loses the ability to breathe.

But when a forensic pathologist in Contra Costa County ruled that the death of Angelo was the result of "excited delirium" – a controversial explanation when people die in police custody – it soon after intensified a debate about the validity of a medical diagnosis that is increasingly being rejected by top medical professionals and organizations.

A 2020 study by the Oregon Health & Science University School of Medicine looked at published cases of excited delirium and found the diagnosis

rarely, if ever, happens independent of police involvement.

The increasing attention around excited delirium prompted the American Medical Association to recently reject the term. Additionally, neither the World Health Organization, nor the American Psychiatric Association, recognize this term.

The issue has, in part, reinvigorated the need for both a more transparent investigative medical examination process as well as a claim to eliminate potential conflicts of interest.

Currently, state law does not require a sheriff to have any medical background or certification to assume the duties of a coroner, in contrast to independent medical examiners, who are required to be a licensed physician and surgeon duly qualified as a specialist in pathology.

California is also currently one of only three states that actually allows counties to combine the offices of coroner and sheriff.

All 58 counties in California have a sheriff's department but not all have a separate coroner or medical examiner's office. The duties of the coroner are currently combined with the sheriff's department in 48 counties. Counties of Los Angeles, San Diego, and San Francisco, for example, all have coroners that are independent of law enforcement.

A consistent statewide policy toward independent coroner's offices would help to ensure that medical examinations and investigations of sudden, violent, or unexplained/suspicious deaths are conducted objectively.

EXISTING LAW

Each county within the state is mandated to perform the functions of Coroner as defined in the California Government Code Section 27491, the Health and Safety Code Section 102850, the Penal Code, and various other codes and regulations.

SOLUTION

AB 1608 would separate the duties of the coroner from the duties of the sheriff, strengthening the medical examination process, thereby increasing accountability and transparency when determining the cause of death.

SPONSOR

ACLU California Action
California Faculty Association
California Families United For4 Justice
California Medical Association
Justice for Angelo Quinto
Secure Justice
The Miles Hall Foundation
Union of American Physicians and Dentists
AFSCME Local 206

SUPPORT

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