

## Death Investigation

### 328.1 PURPOSE AND SCOPE

The investigations of cases involving death include those ranging from natural cause to homicide. Some causes of death may not be readily apparent and some cases differ substantially from what they appeared to be initially. The thoroughness of death investigations cannot be emphasized enough.

### 328.2 INVESTIGATION CONSIDERATIONS

Death investigation cases require certain actions be taken. Paramedics shall be called in all suspected death cases unless the death is obvious (e.g., decapitated, decomposed). A supervisor shall be notified in all death investigations.

#### 328.2.1 CORONER REQUEST

Government Code § 27491 and Health & Safety Code § 102850 direct the Coroner to inquire into and determine the circumstances, manner and cause of certain deaths. The Coroner shall be called in any of the following cases:

- (a) Unattended deaths (No physician in attendance or during the continued absence of the attending physician. Also, includes all deaths outside hospitals and nursing care facilities).
- (b) Deaths where the deceased has not been attended by either a physician or a registered nurse, who is a member of a hospice care interdisciplinary team, as defined by Health and Safety Code § 1746 in the 20 days prior to death.
- (c) Physician unable to state the cause of death. Unwillingness does not apply. Includes all sudden, unexpected and unusual deaths and fetal deaths when the underlying cause is unknown.
- (d) Known or suspected homicide.
- (e) Known or suspected suicide.
- (f) Involving any criminal action or suspicion of a criminal act. Includes child and dependent adult negligence and abuse.
- (g) Related to or following known or suspected self-induced or criminal abortion.
- (h) Associated with a known or alleged rape or crime against nature.
- (i) Following an accident or injury (primary or contributory). Deaths known or suspected as resulting (in whole or in part) from or related to accident or injury, either old or recent.
- (j) Drowning, fire, hanging, gunshot, stabbing, cutting, starvation, exposure, alcoholism, drug addiction, strangulation or aspiration.
- (k) Accidental poisoning (food, chemical, drug, therapeutic agents).

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- (l) Occupational diseases or occupational hazards.
- (m) Known or suspected contagious disease and constituting a public hazard.
- (n) All deaths in operating rooms and all deaths where a patient has not fully recovered from an anesthetic, whether in surgery, recovery room or elsewhere.
- (o) In prison or while under sentence. Includes all in-custody and police involved deaths.
- (p) All deaths of unidentified persons.
- (q) All deaths of state hospital patients.
- (r) Suspected Sudden Infant Death Syndrome (SIDS) deaths.
- (s) All deaths where the patient is comatose throughout the period of the physician's attendance. Includes patients admitted to hospitals unresponsive and expire without regaining consciousness.

The body shall not be disturbed or moved from the position or place of death without permission of the coroner.

#### 328.2.2 BODY REMOVAL CONSIDERATIONS

Situations when an RPD Officer should not assist the coroner with body removal:

- (a) When the body weight, position, or terrain would likely cause injury to the lifting person
- (b) When decomposition, parasites, or body fluids are present, and obviously create a potential health hazard to the on-scene personnel
- (c) Officers will not request additional officers or Department employees to assist in body removal unless authorized by the on-duty supervisor.

#### 328.2.3 SEARCHING DEAD BODIES

The Coroner or Deputy Coroner is generally the only person permitted to search a body known to be dead from any of the circumstances set forth in Government Code § 27491. The only exception is that an officer is permitted to search the body of a person killed in a traffic collision for the limited purpose of locating an anatomical donor card (Government Code § 27491.3). If such a donor card is located, the Coroner or a designee shall be promptly notified. Should exigent circumstances indicate to an officer that any search of a known dead body is warranted prior to the arrival of the Coroner or a designee; the investigating officer shall first obtain verbal consent from the Coroner or a designee (Government Code § 27491.2).

Whenever possible, a witness, preferably a relative to the deceased or a member of the household, should be requested to remain at the scene with the officer pending the arrival of the Coroner or a designee. The name and address of this person shall be included in the narrative of the death report. Whenever personal effects are removed from the body of the deceased by the Coroner or a designee, a receipt shall be obtained. This receipt shall be attached to the death report.

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#### **328.2.4 DEATH NOTIFICATION**

When practical, and if not handled by the Coroner's Office, notification to the next-of-kin of the deceased person should be made, in person. When possible, a police chaplain will make the notification. If the next-of-kin lives in another jurisdiction, a law enforcement official from that jurisdiction shall be requested to make the personal notification. If the relatives live outside this county, the Coroner may be requested to make the notification. The Coroner needs to know if notification has been made. Assigned investigators may need to talk to the next-of-kin.

#### **328.2.5 UNIDENTIFIED DEAD BODIES**

If the identity of a dead body cannot be established after the Coroner arrives, the Coroner's office will issue a "John Doe" or "Jane Doe" number for the report.

#### **328.2.6 DEATH INVESTIGATION REPORTING**

All reports of deceased persons which are received by this Department shall require the response of an officer. The responding officer will then determine whether the death was natural or suspicious and notify the shift supervisor.

- (a) If any death is believed to be from natural causes and occurred while the victim was under the care of a physician or healthcare provider, the shift supervisor may authorize the incident to be closed as a log report only.
- (b) If the victim was not under the care of physician or health care provider at the time of death, the shift supervisor will notify the Investigations Division commander either immediately or by administrative watch briefing.

All incidents involving a death resulting from any criminal act, suicide, accident, injury or suspicious circumstances, require a shift supervisor be notified immediately. The supervisor will determine the need to notify the Investigations Division and the Coroner's Office.

The primary officer shall prepare an offense report or a supplemental report if an investigator is assigned the case.

#### **328.2.7 SUSPECTED HOMICIDE**

If the initially assigned officer suspects that the death involves a homicide or other suspicious circumstances, the Investigations Division shall be notified to determine the possible need for a detective to respond to the scene for further immediate investigation.

#### **328.2.8 EMPLOYMENT RELATED DEATHS OR INJURIES**

Any member of this agency who responds to and determines that a death, serious illness, or serious injury has occurred as a result of an accident at or in connection with the victim's employment shall ensure that the nearest office of Cal-OSHA is notified by telephone immediately or as soon as practicable with all pertinent information (8 CCR 342(b)).

### **328.3 SUICIDE INVESTIGATIONS**

Whenever a suicide involves the death of a minor, the minor's school principal shall be notified. When possible a police chaplain will make the notification.

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Any evidence found at the scene of a suicide shall be given to and held by the Coroner's Office.