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THIRD READING

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Bill No: AB 1108  
Author: Hart (D), et al.  
Amended: 7/17/25 in Senate  
Vote: 21

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SENATE PUBLIC SAFETY COMMITTEE: 5-1, 7/1/25  
AYES: Arreguín, Caballero, Gonzalez, Pérez, Wiener  
NOES: Seyarto

SENATE LOCAL GOVERNMENT COMMITTEE: 5-2, 7/16/25  
AYES: Durazo, Arreguín, Cabaldon, Laird, Wiener  
NOES: Choi, Seyarto

SENATE APPROPRIATIONS COMMITTEE: 5-2, 8/29/25  
AYES: Caballero, Cabaldon, Grayson, Richardson, Wahab  
NOES: Seyarto, Dahle

ASSEMBLY FLOOR: 72-0, 6/3/25 - See last page for vote

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**SUBJECT:** County officers: coroners: in-custody deaths

**SOURCE:** Author

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**DIGEST:** This bill, commencing January 1, 2027, prohibits a sheriff-coroner, in any county where the offices of sheriff and coroner are combined, from determining the circumstances, manner, and cause of death for any in-custody death, as defined, and instead requires the sheriff-coroner to contract with another county or third-party medical examination provider to determine the manner, circumstances, and cause of the in-custody death, as specified.

**ANALYSIS:**

Existing law:

- 1) Provides that officers of a county include a sheriff and coroner, among others. (Government (Gov.) Code, § 24000 subd. (b) & (m).)
- 2) Authorizes the board of supervisors to abolish by ordinance the office of coroner and provide instead for the office of medical examiner, to be appointed by the board and to exercise the powers and perform the duties of the coroner. The medical examiner shall be a licensed physician and surgeon duly qualified as a specialist in pathology. (Gov. Code, § 24010.)
- 3) Authorizes county boards of supervisors to consolidate by ordinance the duties of certain county offices into one or more combinations, including the sheriff and the coroner. (Gov. Code, § 24300.)
- 4) Authorizes certain classifications of counties to additionally combine the duties of the sheriff, tax collector, and coroner. (Gov. Code, §§ 24304 & 24304.1.)
- 5) Requires coroners to determine the manner, circumstances, and cause of death in several specified circumstances. (Gov. Code, § 27491.)
- 6) Requires the coroner or a deputy to sign the certificate of death when they perform a mandatory inquiry. (Gov. Code, § 27491, subd. (a).)
- 7) Allows the coroner or medical examiner discretion when determining the extent of the inquiry required to determine the manner, circumstances and cause of death. (Gov. Code, § 27491, subd. (b).)
- 8) Provides that in all cases in which a person has died under circumstances that afford a reasonable ground to suspect that the person's death has been occasioned by the act of another by criminal means, the coroner, upon determining that those reasonable grounds exist, shall immediately notify the law enforcement agency having jurisdiction over the criminal investigation, as specified. (Gov. Code, § 27491.1)
- 9) Provides that the cause of death appearing on a certificate of death signed by the coroner shall be in conformity with facts ascertained from inquiry, autopsy and other scientific findings, and prohibits the coroner from finally excluding crime, suicide or accident as a cause of death because of lack of evidence. (Gov. Code, § 27491.5.)
- 10) Authorizes a coroner, in any case where a coroner is required to inquire into a death, to delegate their jurisdiction over the death to an agency of another county or the federal government when specified conditions have been met. (Gov. Code, § 27491.55.)

- 11) Provides that a forensic autopsy shall only be conducted by a licensed physician and surgeon, and that the results of a forensic autopsy shall only be determined by a licensed physician and surgeon. (Gov. Code, § 27522, subds. (a), (b).)
- 12) Provides that the manner of death shall be determined by the coroner or medical examiner of a county. If a forensic autopsy is conducted by a licensed physician and surgeon, the coroner shall consult with the physician in determining the cause of death. (Gov. Code, § 27522, subd. (d).)
- 13) Provides that only persons directly involved in the investigation of the death of the decedent shall be allowed into the autopsy suite. (Gov. Code, § 27522, subd. (f)(1).)
- 14) Provides that if an individual dies due to the involvement of law enforcement activity, law enforcement directly involved with the death of that individual shall not be involved with any portion of the post mortem examination, nor allowed into the autopsy suite during the performance of the autopsy. (Gov. Code, § 27522, subd. (f)(2).)
- 15) Requires that any police reports, crime scene or other information, videos, or laboratory test that are in the possession of law enforcement and are related to a death that is incident to law enforcement activity be made available to the forensic pathologist prior to the completion of the investigation of the death. (Gov. Code, § 27522, subd. (g).)
- 16) States that the content of a death certificate must include, among other things, personal data of the decedent, date of death, place of death, disease or conditions leading directly to death and antecedent causes, accident and injury information, and information regarding pregnancy. (Health & Saf. Code, § 102875.)
- 17) Requires a physician and surgeon, physician assistant, funeral director, or other person to notify the coroner when they have knowledge that a death occurred, or if they have charge of a body in which death occurred under any of several specified circumstances. (Health & Saf. Code, § 102850.)
- 18) Provides that when a person, including a juvenile, who is in custody dies, the agency with jurisdiction over the state or local correctional facility with custodial responsibility for the person at the time of their death, shall post specified information on its website for the public to view within 10 days of the date of death. (Pen. Code, § 10008, subds. (a) & (b).)

- 19) For the purposes of the provision above, defines an “in-custody death” as the death of a person who is detained, under arrest, or is in the process of being arrested, is en route to be incarcerated, or is incarcerated at a municipal or county jail, state prison, state-run boot camp prison, boot camp prison that is contracted out by the state, any state or local contract facility, or other local or state correctional facility, including any juvenile facility. “In-custody death” also includes deaths that occur in medical facilities while in law-enforcement custody. (Pen. Code, § 10008, subd. (c).)

This bill:

- 1) Provides that in any county where the offices of the sheriff and the coroner are combined, the sheriff-coroner shall not determine the circumstances, manner, and cause of death for any in-custody death, but shall instead do one of the following:
  - a) Contract with another county that has a coroner’s office that operates independently from the office of the sheriff or another county that has established an office of medical examiner to determine the circumstances, manner, and cause of death.
  - b) Contract with a third-party medical examination provider that is separate and independent from the office of the sheriff-coroner and meets specified physician qualification requirements to determine the circumstances, manner, and cause of death. The medical examination provider shall operate independently from the office of the sheriff-coroner in conducting the medical examination process, including, but not limited to, exercising professional judgment to make determinations of the circumstances, manner, and cause of death.
- 2) Provides that the cause and manner of death listed on the death certificate shall match the cause and manner of death determined by the coroner, medical examiner, or third-party medical examination provider.
- 3) Provides that in any county in which the offices of the sheriff and the coroner are combined, the county board of supervisors shall annually select and enter into a service agreement with a medical examiner or independent coroner office of another county, or with a third-party medical examination provider. The county board of supervisors shall only enter into a service agreement with a third-party medical examination provider that is not currently under contract with a county sheriff’s office.

- 4) Provides that once the county board of supervisors has selected and entered into a service agreement, the sheriff-coroner shall contract only with that medical examiner, independent coroner, or third-party medical examination provider for the term of the service agreement.
- 5) Provides that, upon the determination of the circumstances, manner, and cause of death, the findings of the investigation shall be delivered to the sheriff-coroner, district attorney, county health officer, and board of supervisors of the county in which the death occurred. The findings shall also be delivered to the decedent's next of kin.
- 6) Provides that for the purposes of this bill, "in-custody death" is defined as set forth in Section 10008 of the Penal Code or as a death of a person who is detained, under arrest, or is in the process of being detained or arrested, by a federal law enforcement officer, including for the purposes of immigration enforcement, or who is en route to be detained, or is detained, at a federal correctional facility or immigration detention facility, and for which the sheriff-coroner has jurisdiction or the federal government has requested an autopsy be performed by the sheriff-coroner's office.
- 7) Specifies that the existing requirement that the manner of death be determined by the coroner or medical examiner of a county does not apply to an examination conducted by an outside coroner, medical examiner or third-party medical examination provider pursuant to this bill.
- 8) Specifies that the provisions above do not take effect until January 1, 2027.

## Comments

Under existing law, it is the duty of the county coroner to inquire into and determine the circumstances, manner and cause of deaths that occur within their jurisdiction, including violent, sudden or unusual deaths, unattended deaths, known or suspected homicide, suicide or accidental poisoning, deaths from or related to injury or accident, and death in whole or in part occasioned by criminal means, among others. Existing law also authorizes the coroner to perform an autopsy upon any victim of sudden, unexpected, or unexplained death or any death known or suspected of resulting from an accident, suicide, or apparent criminal means. The coroner is required to perform an autopsy if the surviving spouse requests them to do so in writing. If there is no surviving spouse, that right devolves to a surviving parent or child, and subsequently, if there is no surviving parent or child, to the next of kin.

Coroners are also authorized to conduct inquests, or more formal investigations into the cause of a death, of their own volition, and are required to conduct them if requested to do so by the Attorney General, district attorney, sheriff, city prosecutor, city attorney or chief of police in their jurisdiction. Autopsies are usually, but not always, a central component of inquests, if they had not been conducted prior to the commencement of the inquest. Pursuant to their statutory duties, coroners are responsible for the production and completion of various records and documents regarding a particular death under investigation. Centrally, coroners are generally responsible for signing death certificates, which indicate the manner of death.

County sheriffs, by contrast, have three primary duties: keeping the peace (involving patrol and arrest), attending the courts (including providing courthouse security), and operating the county jails. While the sheriff is a constitutionally elected official in all counties, some counties have elected coroners and others have appointed coroners, or medical examiners who perform the duties of a coroner (discussed further below). Under existing law, counties have the authority to consolidate the offices of sheriff and coroner, and currently 48 counties have done so. This consolidation usually occurs for two reasons: (1) the maintenance and function of two separate officers is more expensive, especially for smaller counties, and (2) many of the deaths that a coroner investigates have criminal or other law enforcement components.

Critics of consolidated sheriff-coroners argue that the duality of these offices constitutes an inherent conflict of interest. For instance, in consolidated counties, even if a forensic pathologist or medical examiner determines that someone was beaten to death, the sheriff-coroner has the authority to officially declare it an accident. Such an incident occurred in San Joaquin County, where a lawsuit was filed in 2018 alleging the sheriff's department changed an autopsy report at the center of a police excessive-force case. The year before in that same county, two pathologists resigned from the office and alleged that the sheriff changed the manner of death in autopsy reports without their knowledge. The pathologists called for a split of the offices so that the independence of the coroner could be guaranteed, and the county's board of supervisors ultimately voted to replace the coroner's office with a medical examiner.

As referenced above, and in contrast to sheriff-coroners, many counties utilize an office of the medical examiner that is independent from the Sheriff's Department. Existing law authorizes board of supervisors to abolish the office of coroner and provide instead for the office of medical examiner, to be appointed by the board and to exercise the powers and perform the duties of the coroner. County medical

examiners must, under state law, be licensed physicians with a specialization in pathology. Given the lower costs associated with maintaining a single Sheriff-Coroner Office, this option is typically utilized by larger, better-resourced counties. A medical examiner functions as the medical doctor responsible for examining bodies post mortem to determine cause of death. Medical examiners responsibilities may include investigating sudden or unnatural deaths, performing forensic medicine and pathology consultations, counseling families regarding manners and causes of death, testifying in courts, conducting physical examinations and laboratory tests, conducting inquests, and serving subpoenas for witnesses.

This bill, which goes into effect January 1, 2027, prohibits sheriff-coroners, in any county where those offices are consolidated, from determining the circumstances, manner and cause of death for any in-custody death, and instead requires them to either contract with another county that has an independent coroner's office or office of the medical examiner, or to contract with a third-party medical examination provider that is "separate and independent" from the office of the sheriff-coroner to make that evaluation. Under the bill, if a sheriff-coroner elects the latter option, the provider must meet specified physician qualification requirements and must operate independently from the sheriff-coroner's office in conducting the medical examination process, including, but not limited to, exercising professional judgement to make determinations of the circumstances, manner and cause of death. The bill further requires county boards of supervisors in any sheriff-coroner county to annually select and enter into a service agreement with another county's medical examiner or independent coroner office, or with a third-party medical examination provider, as specified. Finally, for any death investigation conducted under its provisions, the bill requires the cause and manner of death listed on the death certificate to match the cause and manner of death determined by the contracted party.

**FISCAL EFFECT:** Appropriation: No Fiscal Com.: Yes Local: Yes

According to the Senate Appropriation Committee:

Costs of an unknown but potentially significant amount to counties (local funds, General Fund). The bill requires a county sheriff-coroner to request an inquiry by another county's medical examiner or a third-party medical examination team for specified in-custody deaths. Making a request may not result in significant costs to the requesting sheriff-coroner. However, there are a number of open questions about the implementation of this bill that point to significant costs to counties. If a

county conducts an inquiry on behalf of another county with a conflict of interest, both counties may incur significant costs, including workload costs for coordinating and conducting the inquiry, transportation costs, and costs for materials and testing during the inquiry. If a county with a conflict of interest must pay a third-party medical examination team, the county would likely incur significant costs. The state must reimburse these county costs from the General Fund if the Commission on State Mandates determines the duties imposed by this bill constitute a reimbursable state mandate.

**SUPPORT:** (Verified 8/29/25)

Buen Vecino  
California Attorneys for Criminal Justice  
California Civil Liberties Advocacy  
California Medical Association;  
California Public Defenders Association  
Carpenteria Children's Project  
Central Coast Alliance for a Sustainable Economy  
Committee for Social Justice  
Council of Mexican Federations in North America  
Drivers Listos  
Immigration Selection of the Ventura County Bar Association  
Indivisible Ventura  
League of Women Voters of California  
Mixteco/Indigena Community Organizing Project  
Northern Santa Barbara County United Way  
Oakland Privacy  
Santa Barbara County Immigrant Legal Defense Center  
Smart Justice  
Voces Sin Fronteras Lompoc

**OPPOSITION:** (Verified 8/29/25)

California State Sheriffs' Association  
County of Fresno  
County of Kern  
Courage California  
Justice2Jobs Coalition  
Lead Filipino  
Riverside County Sheriff's Office



Starting Over INC  
Starting Over Strong

ASSEMBLY FLOOR: 72-0, 6/3/25

AYES: Addis, Aguiar-Curry, Ahrens, Alanis, Alvarez, Arambula, Ávila Farías, Bains, Bauer-Kahan, Bennett, Berman, Boerner, Bonta, Bryan, Calderon, Carrillo, Chen, Connolly, Davies, DeMaio, Dixon, Elhawary, Flora, Fong, Gabriel, Gallagher, Garcia, Gipson, Jeff Gonzalez, Mark González, Hadwick, Haney, Harabedian, Hart, Hoover, Irwin, Jackson, Kalra, Krell, Lackey, Lee, Lowenthal, McKinnor, Muratsuchi, Nguyen, Ortega, Pacheco, Papan, Patel, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Celeste Rodriguez, Rogers, Blanca Rubio, Sanchez, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Ta, Valencia, Wallis, Ward, Wicks, Wilson, Zbur, Rivas

NO VOTE RECORDED: Caloza, Castillo, Ellis, Macedo, Patterson, Michelle Rodriguez, Tangipa

Prepared by: Alex Barnett / PUB. S. /  
8/30/25 15:17:13

\*\*\*\* END \*\*\*\*