



STATE OF WASHINGTON  
DEPARTMENT OF CORRECTIONS

APPLICABILITY  
**DEPARTMENT WIDE**

REVISION DATE  
7/23/24

PAGE NUMBER  
1 of 5

NUMBER  
**DOC 400.110**

**POLICY**

TITLE  
**CRITICAL INCIDENT REVIEWS**

**REVIEW/REVISION HISTORY:**

- Effective: 7/2/02
- Revised: 9/12/06
- Revised: 1/19/07 AB 07-002
- Revised: 12/5/08
- Revised: 8/17/09
- Revised: 12/26/11
- Revised: 10/20/14
- Revised: 9/24/20
- Revised: 7/23/24

**SUMMARY OF REVISION/REVIEW:**


Major changes to include content moved to new policy for fact-finding reviews. Read carefully!

**APPROVED:**

Signature on file

\_\_\_\_\_  
**CHERYL STRANGE**, Secretary  
Department of Corrections

6/21/24  
Date Signed

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**REFERENCES:**


DOC 100.100 is hereby incorporated into this policy; [RCW 43.19.782](#); [RCW 72.09.770](#)

**POLICY:**


- I. The Department has established procedures for conducting Critical Incident Reviews (CIR) to analyze potentially significant incidents that involve its operations.
- II. These procedures exist to inform risk mitigation and continuous process improvement efforts.

**DIRECTIVE:**


- I. Identifying Potential Incidents
  - A. Each Assistant Secretary, Deputy Assistant Secretary, or their designee must regularly review incidents arising in their division and, if indicated, initiate a critical incident review.
  - B. The Secretary, Deputy Secretary, the Senior Director for Correctional Operations, and the Director of Risk Management may initiate a critical incident review on any subject at any time.
- II. Critical Incident Reviews
  - A. The following incidents require a critical incident review:
    1. Prison escape,
    2. Employee or contractor death that occurred while on duty,
    3. Unnatural death on Department premises,
    4. Death requiring an Unexpected Fatality Review,
    5. On-the-job injury requiring inpatient hospitalization,
    6. Injury requiring inpatient hospitalization that occurred on Department premises,
    7. Discharge of a department-issued firearm, except shots fired in training or to euthanize injured wildlife,
    8. Property loss over \$250,000 for which the Department may be liable, and

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9. Any incident referred for CIR by the Secretary, Deputy Secretary, an Assistant Secretary, a Deputy Assistant Secretary, the Senior Director for Correctional Operations, or the Director of Risk Management.
- B. To initiate a critical incident review, the initiator or their designee must:
1. Obtain a risk file number from the Office of Risk Management,
  2. Assign a team leader and at least two additional team members, and
  3. Brief the team leader on the subject to be reviewed.
- C. The local appointing authority will designate a liaison to facilitate access to the site, relevant records, participants, and witnesses.
- D. Critical Incident Review Teams
1. Review teams will consist of at least 3 people with relevant subject matter expertise regarding Department policies, procedures, and practices.
    - a. If the incident involves the death or serious bodily injury of an incarcerated individual, the team must include a representative from Health Services.
    - b. If the incident involves the suicide of an incarcerated individual, the team must include a forensic psychological evaluator trained in conducting psychological autopsies.
  2. Team members must not:
    - a. Have witnessed or participated in the incident,
    - b. Be selected from the office or facility under review, or
    - c. Otherwise appear to have a conflict of interest.
- E. The CIR team will:
1. Review relevant policies and records,
  2. Interview persons with relevant knowledge,
  3. Determine the event's root causes, and
  4. Identify potential steps to reduce the risk of similar incidents.
- F. Critical Incident Report will contain:
1. Findings of fact,
  2. Contributing factors,

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3. Root cause analysis,
  4. Proposed mitigation steps, and
  5. Future risk analysis.
- G. The Critical Incident Report will not address medical practices or the application of clinical judgment because these are subject to the Coordinated Quality Improvement Program (CQIP) and not the CIR process.
- H. To complete the CIR documentation process, the team leader must:
1. Complete the Critical Incident Report located on the Risk Management page on the Department's internal website,
  2. Review the report with the initiator and obtain the initiator's signature,
  3. If a Corrective Action Plan (CAP) is necessary:
    - a. Review the draft DOC 18-024 Corrective Action Plan with the initiator,
    - b. Obtain the initiator's signature, and
    - c. Electronically submit to Risk Management:
      - 1) The completed and signed Critical Incident Report, and
      - 2) Confirmation that a CAP is not necessary.
- I. Deadlines
1. If the death of an incarcerated individual triggers a CIR and an Unexpected Fatality Review, the final Critical Incident Report and any associated DOC 18-024 Corrective Action Plan must be submitted within 60 days of the death.
  2. For all other CIRs, the final Critical Incident Report and any associated DOC 18-024 Corrective Action Plan must be submitted within 90 days of the date the team leader was assigned, unless the initiator requests an extension from Risk Management.
- III. Implementing the Corrective Action
- A. Corrective actions must be completed no more than 180 days following submission the DOC 18-024 Corrective Action Plan.
  - B. To complete the corrective action, the initiator or their designee must:

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1. Assign an employee or contract staff to perform the corrective action,
2. Confirm the corrective action was completed, and
3. Electronically submit to Risk Management proof that each corrective action was completed.

C. No more than 180 days after the submission of the DOC 18-024 Corrective Action Plan, Risk Management will forward the risk file to the internal auditor who will verify that the corrective actions have been completed.

#### IV. Employee Protections

- A. Employees may have representation present during interviews for critical incident reviews.
- B. Information collected under this policy may be used in other proceedings but will not replace a just-cause review.

#### **DEFINITIONS:**

The following words/terms are important to this policy and defined in the glossary section of the Policy Manual: Serious Bodily Injury. Other words/terms appearing in this policy may also be defined in the glossary.

#### **ATTACHMENTS:**

None

#### **DOC FORMS:**

DOC 18-024 Corrective Action Plan