POLICY

REPORTING AND REVIEWING CRITICAL INCIDENTS

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

SUMMARY OF REVISION/REVIEW:

II.D. - Adjusted timeframe
III.A. and VIII.A. - Added clarifying language
Added III.A.8 on ECD deployment requiring a fact finding
IV.F. - Removed language for clarification
VI.C.2. - Adjusted timeframe and added required report content
VII.B. - Adjusted that employees named in the review will be provided a copy of the final report
Added VIII.B. on debriefings in Community Corrections

APPROVED:

Signature on file

BERNARD WARNER, Secretary
Department of Corrections

9/17/14
Date Signed
POLICY

REPORTING AND REVIEWING CRITICAL INCIDENTS

REFERENCES:

DOC 100.100 is hereby incorporated into this policy; RCW 42.56; ACA 4-4225-1; ACA 4-4373; ACA 1C-01; ACA 1C-01-1; DOC 280.510 Public Disclosure of Records; DOC 400.100 Incident and Significant Event Reporting; DOC 410.050 Emergency Management Plan; DOC 410.200 Use of Force; DOC 410.920 Use of Force - Community Corrections; DOC 610.600 Infirmary/Special Needs Unit Care; DOC 890.000 Safety Program

POLICY:

I. [1C-01] The Department manages critical incidents through a reporting and review process. Critical incidents occurring within the Department and critical incidents involving offenders under Department supervision will be reported timely, accurately, and completely. Through reviewing incidents, Department management will gain an understanding of the circumstances and events contributing to the incident.

II. [1C-01] Information gathered through incident reviews will be analyzed to identify activities that contributed to successful outcomes, improve Department procedures, policies, training, and practices, and determine if improvements are needed. [4-4373] The information may be used in other proceedings, including disciplinary actions, but will not replace a Just Cause review.

DIRECTIVE:

I. Reporting Requirements

A. Department managers will ensure critical incidents are reported per DOC 400.100 Incident and Significant Event Reporting.

B. The Health Authority/designee will report all critical incidents (i.e., adverse events) involving offenders in the infirmary per DOC 610.600 Infirmary/Special Needs Unit Care.

II. Fact Finding and Critical Incident Reviews

A. [4-4225-1] The appropriate Assistant Secretary will assess incidents and initiate fact findings or critical incident reviews as required or appropriate. The Deputy Secretary, Chief of Staff, other Assistant Secretaries, or Risk Management/Safety Director may also determine that a fact finding or critical incident review should be initiated.

1. The initiator may immediately request a critical incident review based on the totality of the information available.
2. If a critical incident review is not immediately requested, but a fact finding is required or appropriate, the initiator will appoint a fact finder to informally determine what occurred and the Department’s involvement in the incident.
   
a. Within 15 days of assignment, the fact finder will report the findings to the initiator. The initiator may request a written report, though it is not required.
   
b. Based on the findings, the initiator may request a critical incident review.

B. Employees will have an opportunity to have representation during interviews for fact findings and critical incident reviews.

C. Employees named in a critical incident review will have an opportunity to review the report before its use at any review board.

D. The size, scope, and timeframes for a critical incident review will be established by the initiator. Reviews will be completed within 45 days of assignment. Extensions may be granted by the initiator.

E. The initiator will notify the Risk Management/Safety Director at the time a critical incident review is initiated. The Risk Management Office will assign a tracking number at commencement of the review.

III. Incidents Requiring a Fact Finding or Critical Incident Review

A. [4-4225-1] [1C-01-1] The following incidents require a fact finding, at a minimum:
   
1. Significant disruption of normal operations,

2. Accidental discharge of a firearm,

3. Escape from a minimum custody facility,

4. Escape from a Work Release, when the offender remains on escape status for more than 24 hours,

5. Staff assaults, [4-4373]

6. Bomb or terrorist threats,

7. Death or serious bodily injury resulting from the action of an offender on supervision, [4-4373]
8. Deployment of an Electronic Control Device (ECD) outside of training, with the exception of accidental deployment, and

9. Suicide attempts while in Department custody. [4-4373]

B. [4-4225-1] [1C-01-1] The following incidents require a critical incident review:

1. Escape from a medium or higher custody facility,

2. Disturbances with substantial property damage or loss of resources valued at over $100,000,

3. Unnatural death of an employee while on duty, [4-4373]

4. Death or serious bodily injury resulting from the action of an offender on supervision, when the offender has been arrested and charged with a criminal act related to the incident,

5. Unnatural death or serious bodily injury of an offender, contract staff, volunteer, or visitor occurring on Department premises, including offender suicide, and [4-4373]

6. Discharge of a firearm in the line of duty, except discharges directed at animals.

C. Use of force incidents will be reviewed per DOC 410.200 Use of Force or DOC 410.920 Use of Force - Community Corrections, as appropriate.

D. Employee injuries will be reviewed per DOC 890.000 Safety Program.

IV. Critical Incident Review Teams

A. Each Assistant Secretary will designate at least 5 employees who will be available to serve as team members for critical incident reviews. The Emergency Operations Unit may be contacted to assist as subject matter experts or help in identifying team members.

B. Team members will be officially designated and available for assignment. Initiators will rotate assignments to maximize resources and balance workload.

C. Review teams will consist of at least 2 employees designated by the initiator.

1. As necessary, the initiator should appoint team members in order to provide a complete review and avoid potential conflicts of interest. Teams
will consist of members from facilities or offices other than the one being reviewed.

2. All assigned team members should have appropriate experience, training, and knowledge of Department policies, procedures, and practices necessary to conduct the specific review.

D. Review teams should be identified and deployed as soon as practical after the incident.

E. The initiator will conduct a team briefing that will include:
   1. Designating a team leader who has completed incident review training as outlined by the Department,
   2. A description of the incident, along with a copy of any written notification of the incident,
   3. Size, scope, limitations, and timeframes of the review,
   4. Establishing the process for entrance/exit interviews, and
   5. Designating a liaison at the facility or office being reviewed.

F. [4-4225-1] Upon completion of the review, the team leader will debrief the initiator and the Risk Management/Safety Director. The debriefing will include:
   1. A review of:
      a. Employee and offender actions during the incident,
      b. Incident impact on employees and offenders, and
      c. Corrective actions taken and still needed.
   2. Plans for improvement to avoid another incident.

V. Written Reports and Action Plans

A. The critical incident review will:
   1. Be documented on DOC 18-022 Incident Review Report and is final once signed by the initiator.
   2. Initiate a written action plan submitted on DOC 18-024 Critical Incident Review Action Plan. A copy of the final action plan will be forwarded to the Risk Management/Safety Director.
B. Appointing Authorities will report the status of action plans to the initiator monthly until all actions have been completed.

VI. Risk Mitigation

A. The Risk Management/Safety Director will periodically discuss incidents and post-incident actions with Department executives and managers.

B. Each Assistant Secretary will appoint a coordinator to assist with tracking and filing reports and action plans. The coordinator will work with the Risk Management Office to ensure final reports and action plans are completed and filed.

C. Each Assistant Secretary/designee will review critical incident trends and produce an action plan summary report.
   1. The summary report will provide analysis of actions taken and measure the effectiveness of the action plan items, as appropriate.
   2. By December 31 each year, the summary reports will be forwarded to the Risk Management/Safety Director, who will compile information into one report and provide it to the Executive Leadership Team for further distribution.

D. The Assistant Secretaries will ensure policy level and cross-division issues are addressed.

VII. Access to Critical Incident Review Reports and Action Plans

A. Critical incident review reports and resulting action plans are subject to RCW 42.56 and DOC 280.510 Public Disclosure of Records.

B. Once finalized, the initiator will provide employees named in the review a copy of the final report, which will be redacted per applicable state law and provided without charge.

VIII. [4-4225-1] Employee Debriefing

A. In Prisons, employee debriefing will be conducted per DOC 410.050 Emergency Management Plan.

B. In Community Corrections, the Statewide Programs/Work Release Administrator, Field Administrator, or designee will review the critical incident report and provide recommendations to the initiator and employees involved in the incident.
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 18-022 Incident Review Report
DOC 18-024 Critical Incident Review Action Plan