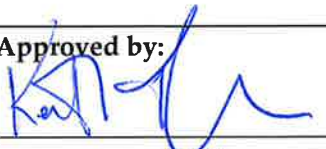
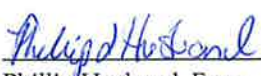


District of Columbia Department of Health <h2 style="text-align: center;">Incident Reporting and Investigation</h2>		PROCEDURE 350.100 Implementing Office: Office of Human Resources/Risk Management Training Required: Yes Originally Issued: January 17, 2014 Revised/Reviewed: DEC 20 2007
Approved by:  LaQuandra S. Nesbitt MD, MPH; Agency Director	Review by Legal Counsel:  Phillip Husband, Esq.; General Counsel	Effective Date: DEC 20 2007 Valid Through Date: DEC 20 2020

I. Authority	Reorganization Plan No. 4 of 1996; Mayor's Order 1997-42;
II. Reason for the Policy	The Unusual Incident Report (UIR) is an essential tool for collecting information on adverse events, gaps in policy, compliance issues, employee misconduct, unmet training needs, and other risk exposures within DOH. Unusual Incident Reports provide a mechanism by which such issues can be investigated, and quality improvement opportunities optimized.
III. Applicability	This policy applies to all Department of Health (DOH) employees, contract employees, volunteers, interns, summer youth employees, and federal employees assigned to the District government (collectively referred to herein as "employees" or "DOH employees.")
IV. Policy Statement	<p>The DOH Risk Manager, within the Office of Human Resources (DOH HR), is the employee responsible for overseeing the receipt of UIRs, the investigation of unusual incidents (where applicable) and the issuance of recommendations to resolve the issue or prevent recurrence.</p> <p>Unusual Incidents are divided into the following six categories:</p> <ul style="list-style-type: none"> • Sentinel Events- unexpected occurrences involving death or serious physical or psychological injury, or the risk thereof, even if the outcome was not death, or a major permanent loss of function.

- Facilities Events- This includes, but is not limited to utilities outages lasting longer than one hour, fire/safety hazards, destruction of government property, and pests/vermin.
- Vehicle Events- Automobile accidents, vehicle theft, damage, and/or vandalism.
- Non-Compliance Events- Any incident where the violation of, or non-adherence to, a law, rule, or policy resulted in an avoidable risk to a DOH employee, program participant, or member of the public. This category includes violation of an individual's rights guaranteed by law, or other DOH policies, e.g. SOP 250.10 Language Access, or SOP 260.000 Gender Identity and Expression Protections.
- Personnel Events- Verbal statements or physical contact of an inappropriate or sexual nature; physical altercations or threats thereof; any other incident that might be reasonably construed as creating a hostile work environment.
- Other Events- Any incident that a reasonable person would believe poses a risk to the health or safety of DOH staff, program participants, or the public that is not captured by any of the above categories.

Any employee who witnesses an Unusual Incident is responsible for reporting that incident to the DOH Risk Manager. He/she may do so via a supervisor, or (if applicable) through a union representative. The protocol for reporting an Unusual Incident is the DOH Incident Report Form.

An employee may report an Unusual Incident anonymously. This practice is discouraged, though, as it limits the available information to substantiate the issue reported. When this occurs, the Risk Manager shall initiate a DOH Incident Report Form, documenting that the report was received anonymously.

Retaliation of any kind for reporting an Unusual Incident is strictly prohibited. Any employee engaging in such retaliation will be subject to disciplinary action up to, and including, termination.

Upon receipt of a UIR, the Risk Manager shall issue a notification of receipt to the filer within one business day, or one business day of returning to the office if the Risk Manager was on leave. The Risk Manager is responsible for meeting with the filer at the

earliest mutual convenience. The purpose of this meeting is to clarify the following details:

- Specific details of the incident;
- Time, date, and location of the incident;
- The parties involved in the incident;
- Witnesses to the incident;
- Specific effects of the incidents, e.g. injuries, property damage, denial of service;
- Any actions taken to intervene in the event, or respond at the time, e.g. calls to first responders, any investigation initiated;
- Any subsequent action to remediate any adverse impact, e.g. services being provided to an individual inappropriately denied service; and

Following the meeting with the filer, the Risk Manager is responsible for investigating the Unusual Incident. This investigation shall include, but not necessarily be limited to:

- Interviewing parties to the Unusual Incident and/or witnesses;
- Obtaining additional documentation related to the Unusual Incident, e.g. video footage, photographs, official reports from first responders, and relevant e-mails or other internal documents; and
- A search of archival Unusual Incident Reports to determine if the incident was a repeat occurrence.

If the Unusual Incident alleges conduct of a criminal nature, DOH reserves the right to report any information to the relevant authorities. In the event the Unusual Incident is the subject of a criminal investigation, the DOH Risk Manager shall defer all investigative duties to the law enforcement body carrying out the investigation. In such cases, the result of that criminal investigation shall serve as the basis for the Risk Manager substantiating the Unusual Incident and recommending internal follow-up actions (see below).

All DOH employees are required to cooperate with requests for information or documentation from the DOH Risk Manager. Obstructing an investigation, or falsifying accounts or documents,

may cause the employee to be subject to disciplinary action. If a union employee is called upon to supply information or documents, he/she may respond through a union representative. Throughout the investigation process, DOH will honor any protections guaranteed to an employee under a collective bargaining agreement or the District of Columbia Government Comprehensive Merit Personnel Act of 1978 (D.C. Law 2-139; D.C. Code, § 1-601.1 et seq.) (CMPA) and its implementing regulations (6-B DCMR § 100.1 et seq.).

When a UIR reflects an acknowledged episode of non-compliance that has adversely impacted an employee or member of the public (e.g. a member of the public was unlawfully denied a service), the Risk Manager has the authority to recommend a pre-investigation resolution to remediate the compliance issue (e.g. providing the denied service). A recommendation of a pre-investigation resolution may be made at any time after receipt of a UIR and does not require a complete investigation. This authority is limited to recommending actions that directly remediate an adverse impact.

At the conclusion of the investigation, the Risk Manager is responsible for determining if the Unusual Incident is substantiated. The Unusual Incident shall be placed into one of the following four resolution categories:

- Substantiated- The available evidence demonstrates the Unusual Incident referenced in the report actually occurred, though not necessarily in the exact manner reported.
- Unsubstantiated/Inconclusive- The available evidence is insufficient to demonstrate whether the Unusual Incident occurred or not.
- Unsubstantiated/No Basis- The available evidence demonstrates that the Unusual Incident did not occur, or the actual occurrence was sufficiently materially different from the account in the UIR that it does not represent a legitimate risk to the Department, an individual or individuals employed by the Department, and/or the public.

Along with the status of substantiation, the Risk Manager shall include recommendations for any responsive action to resolve the issue and/or prevent recurrence. The Risk Manager may

recommend responsive action to any UIR regardless of its status of substantiation. Responsive action is divided into three categories:

- Corrective Action- Any step to be taken to minimize the likelihood of recurrence. Examples of corrective action include the development or revision of a Standard Operating Procedure (SOP), training, or implementation of an internal control to ensure appropriate oversight.
- Remedial Action- Any step to redress wrongs where improper conduct or system deficiencies adversely impacted the filer or others. This may include forwarding claims for property damage to the DC Office of Risk Management (DC ORM) or issuing an apology to a resident who received poor customer service.
- Personnel Action- Any action taken against an employee found to have engaged in improper conduct. Any personnel action recommended must comport with the CMPA and its implementing regulations, any applicable collective bargaining agreement, and the DOH progressive discipline practice.

Following the conclusion of the investigation, the Risk Manager shall offer the filer an opportunity for an after-action meeting. The filer has the right to decline to participate in an after-action meeting, or to have a union representative present (if applicable).

The Risk Manager shall submit an investigation report, including all recommendations for responsive action, to the Human Resources Officer (HRO). The HRO will report the finding to the Chief Operating Officer (COO). The Risk Manager will then relay the report to the Senior Deputy Director (SDD) of the affected administration(s).

The Risk Manager's recommendations for responsive actions are non-binding, but shall be given great weight in any applicable manager's decision to respond to the Unusual Incident.

Within 30 calendar days of the end of each quarter, the Risk Manager will submit a report to the Chief Operating Officer with aggregate counts of Unusual Incidents in each category for the preceding quarter. The Risk Manager shall summarize all responsive actions recommended. Additionally, the Risk Manager

	<p>shall identify any emergent or continuing patterns among Unusual Incidents suggesting a systemic issue requiring additional attention or action from the senior leadership team. This includes issues that have been identified in prior reports that are continuing to manifest.</p>
<p>IV. Definitions & Acronyms</p>	<p>CMPA- District of Columbia Government Comprehensive Merit Personnel Act of 1978 (D.C. Law 2-139; D.C. Code, § 1-601.1 et seq.)</p> <p>COO- Chief Operating Officer</p> <p>DC ORM- District of Columbia Office of Risk Management</p> <p>DOH HR- Department of Health Office of Human Resources</p> <p>Filer- The individual submitting an Unusual Incident Report</p> <p>HRO- Department of Health Human Resources Officer</p> <p>SDD- Senior Deputy Director</p> <p>UIR- Unusual Incident Report</p>
<p>VI. Procedures</p>	<p>Procedure A: Unusual Incident Reporting</p> <ol style="list-style-type: none"> 1. The filer will complete the Unusual Incident Report and submit to the Risk Manager. 2. The Risk Manager will provide a written notification of receipt to the filer within one business day, or within one day of returning to the office if the Risk Manager was on leave. 3. If the Unusual Incident is the subject of a criminal investigation, the Risk Manager shall defer to the law enforcement authority conducting the investigation, supplying any requested information. <p>Procedure B: Unusual Incident Report Investigation</p> <ol style="list-style-type: none"> 1. If the Unusual Incident is not the subject of a criminal investigation, the Risk Manager shall schedule an interview

with the filer. This interview shall assess the details of the incidents, and establish a list of involved parties, witnesses, other relevant personnel, relevant documentation, and any additional information necessary to substantiate the Unusual Incident.

2. The Risk Manager shall schedule and conduct interviews with witnesses, as well as obtain any relevant documentation.
3. The Risk Manager will classify the Unusual Incident in one of the six categories listed above, e.g. a sentinel event.
4. The Risk Manager will draft an Investigation Report with a summary of the investigation process and findings. He/she will determine the resolution category of the UIR.
5. The Risk Manager will detail the responsive action (if any) recommended.
6. The Risk Manager will submit the Investigation Report to the HRO for review.
7. Upon approval from the HRO, the Risk Manager will route the Investigation Report to the Labor Relations Advisor.
8. The Labor Relations Advisor will review the report to ensure that all recommendations comply with DOH's obligations under any applicable collective bargaining agreement.
9. Upon approval from the Labor Relations Advisor, the Investigation Report is forwarded to the COO and the SDD(s) of the affected administration(s).
10. The Risk Manager will formally close the UIR and provide a written notification to the filer.
11. The SDD of the administration within which the incident occurred will review the Investigation Report with the relevant manager(s) under his/her supervision.

	<p>12. The SDD and the relevant manager will decide upon the responsive action to be taken with great weight being given to the recommendations in the Investigation Report.</p> <p>Procedure C: UIR Aggregation and Reporting</p> <ol style="list-style-type: none"> 1. Upon the closure of a UIR, the Risk Manager will record it in a central listing of all UIRs. 2. This listing will include, at a minimum: The date the UIR was filed, whether the Unusual Incident was substantiated, the classification of the Unusual Incident, all affected administrations, and the date the UIR was closed. 3. Within 30 days of the end of a quarter of the fiscal year, the Risk Manager will compile a quarterly summary. This summary will include, at a minimum, the following elements inclusive of all UIRs closed during the previous quarter: <ol style="list-style-type: none"> a. Aggregate data on the number of Unusual Incidents in each classification and the number within each category that were substantiated; b. A detailed summary of any sentinel events occurring during the quarter; c. A summary of any emergent or continuing trends in Unusual Incidents; d. Recommendations for follow-up steps to mitigate risk exposure from any identified trends. 4. The Risk Manager will submit the quarterly report to the HRO. 5. Upon approval, the HRO will submit the quarterly report to the COO. 6. The Risk Manager will cooperate with any requests for follow-up information from the COO.
<p>VII. Contacts</p>	<p>DOH Risk Manager- (202) 442-8969</p>

VIII. Related Documents, Forms and Tools	Unusual Incident Report Form
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