

MICHIGAN DEPARTMENT OF CORRECTIONS POLICY DIRECTIVE	EFFECTIVE DATE 02/08/2016	NUMBER 01.05.120
SUBJECT CRITICAL INCIDENT REPORTING – CORRECTIONAL FACILITIES ADMINISTRATION (CFA)	SUPERSEDES 01.05.120 (10/16/2000)	
	AUTHORITY MCL 791.203 – 791.206, MCL 791.208	
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POLICY STATEMENT:

Critical incidents shall be promptly reported to ensure administrators are informed of such incidents and that other agencies are appropriately advised, victims are appropriately notified and inquiries from family members, the media and legislators can be accurately addressed. Critical incidents shall be reviewed to ensure direction can be provided as to how future incidents can be avoided.

POLICY:

DEFINITIONS

- A. ASSAULT - Physical contact as the result of an attack on, or intentional, non-consensual touching of, another person in anger or with intent to abuse.
 1. CATEGORY I ASSAULT - Assault resulting in death or serious physical injury.
 2. CATEGORY II ASSAULT - Sexual assault with penetration.
 3. CATEGORY III ASSAULT - Sexual assault without penetration but involving more than intentional non-consensual touching (e.g., use of force, attempted sexual penetration).
 4. CATEGORY IV ASSAULT - Sexual assault not covered in Category II or III.
 5. CATEGORY V ASSAULT - Assault with non-serious physical injury.
- B. SERIOUS PHYSICAL INJURY - Physical injury that requires hospital admission but does not include instances where only emergency room treatment is provided.
- C. SEXUAL ASSAULT - Sexual penetration of, or sexual contact with, another person or intentional non-consensual touching of another person's genital area, buttocks or breasts. A Prison Rape Elimination Act (PREA) investigation packet shall be completed for all reported and/or alleged sexual assaults in accordance with PD 03.03.140 "Prohibited Sexual Conduct Involving Prisoners."

GENERAL INFORMATION

- D. For purposes of this policy, "employee" refers to Department employees and contractual employees working in a facility, unless otherwise specified. All other individuals in a facility, except offenders, shall be considered "visitors."
- E. Critical incidents which are required to be reported if occurring in a facility also shall be reported if occurring outside a facility or off facility grounds.

CRITICAL INCIDENTS

- F. The following critical incidents shall be reported immediately by telephone and reported in writing on the Critical Incident Report (CAJ-570) as set forth in this policy:
 1. Death of an on-duty employee or a visitor in a facility.
 2. Death of an offender unless the death is expected due to a terminal illness. These incidents shall be

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reported in accordance with PD 04.06.110 "Deaths: Natural, Accidental, Suicide, Homicide."

3. Serious physical injury of an on-duty employee, offender, or visitor in a facility. These incidents also shall be reported if the offender was under the Department's jurisdiction but not in Department custody when the incident occurred.
4. Category I, II or III assault of an on-duty employee, offender, or a visitor in a facility. Category II and III assaults of an offender require a critical incident report only after a PREA investigation has confirmed a sexual assault has occurred.
5. Discharge of a Department-issued firearm by an employee resulting in death or serious physical injury.
6. Loss or theft of a Department-issued firearm, electronic control device (ECD), specialty impact device or chemical agent, or loss or theft of a personal firearm if lost or stolen while on duty or while on facility property.
7. Act or threat of an act of collective insubordination, hostage-taking, demonstration, strike or riot.
8. Escape or attempted escape from a facility. These incidents also shall be reported if the offender was under the Department's jurisdiction but not in Department custody when the incident occurred.
9. Major physical plant failure in a facility which results in building damage or loss of electrical power, heat, water, sewer or perimeter security. This applies only when the condition significantly affects facility security or the welfare of employees or offenders (e.g., loss of emergency power for security system).
10. Explosion, natural disaster, or major chemical or toxic spill in a facility, or other events, including fire, that cause physical damage to facility property in excess of \$1,000.
11. Discovery of a contraband gun, ammunition or explosive in a facility or on facility grounds.
12. Any event not identified above which may attract adverse attention to the Department as determined by the facility head.

G. The following critical incidents shall be reported in writing on the Critical Incident Report (CAJ-570) as set forth in this policy:

1. Use of force to control a disruptive or resisting offender which results in the offender requiring hospital admission but does not include instances where only emergency room or facility treatment is provided.
2. Suicidal and self-injurious behavior, as defined by PD 04.06.115 "Suicidal and Self-Injurious Behavior," which results in serious physical injury as defined in Paragraph B.
3. A drug overdose in a facility which requires hospital admission but does not include instances where only emergency room or facility treatment is provided.
4. An unusual event not identified above.
5. Discovery of a contraband cell phone.

CRITICAL INCIDENT REPORTING REQUIREMENTS

- H. Each employee who is a participant in or witness to an active critical incident shall immediately verbally report the incident through the chain of command to the facility head where the incident occurred. If the reporting employee is a Department employee who is not an employee of the facility at which the incident occurred, s/he also shall report the incident to his/her immediate supervisor.
- I. Each employee who is a direct participant in or witness to a critical incident shall complete a Critical Incident

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Participant Report (CAJ-571). The completed report shall be submitted to the facility head or designee as soon as possible but not later than the conclusion of the same shift during which the incident occurred or before the end of the employee's regular work hours unless additional investigatory time is necessary to establish that a critical incident has occurred, as authorized by the Warden or designee.

- J. For critical incidents which require immediate reporting pursuant to Paragraph G, telephone and e-mail notification shall be provided up through the chain of command to the CFA Deputy Director. For incidents described in Paragraph G, numbers 8 and 9, the Deputy Director shall immediately notify and the Director. The Deputy Director also shall inform the Office of Public Information and Communications of critical incidents which may attract media attention, and notify legislative liaison staff in the Executive Bureau of critical incidents which may attract legislative attention.
- K. The Warden shall ensure the Critical Incident Report along with other related reports and forms required by this or another policy (e.g., Misconduct Report, Notice of Escape or Attempt to Escape) are submitted through the chain of command to the CFA Deputy Director no later than seven business days after the incident occurred. The Warden shall ensure a unique identification number is assigned to each critical incident report. If the critical incident involves an employee who is not an employee of the facility at which the incident occurred, the Warden shall forward a copy of the Critical Incident Report to each employee's facility head or administrator.
- L. Each Warden shall ensure all critical incidents are recorded in appropriate custody assignment logbooks in accordance with PD 04.04.100 "Custody, Security and Safety Systems."

RELEASE OF CRITICAL INCIDENT INFORMATION

- M. Critical incident information shall be made available to news media representatives by a designated spokesperson in accordance with PD 01.06.130 "Media Relations."
- N. Requests for critical incident information under the Freedom of Information Act shall be handled in accordance with PD 01.06.110 "Freedom of Information Act - Access to Department Public Records."

POST INCIDENT REVIEWS

- O. An internal critique of any critical incident may be conducted by facility staff at the discretion of the Warden to identify, assess and correct any noted problem areas. If an internal critique is conducted, the report shall be submitted to the Warden for review.
- P. Upon the request of the Director or Deputy Director, in conjunction with the notification required pursuant to this policy on any critical incident, a formal post-incident review of the reported event and surrounding circumstances shall be conducted by management staff and reported in writing by the appropriate Warden.
- Q. In connection with the following types of incidents, a formal post-incident review is required without a specific request by the Director or Deputy Director:
 - 1. Death of any person in a facility from other than natural causes.
 - 2. Category I, II or III assault of an on-duty employee, or a visitor in a facility.
 - 3. Category I or II assault of an offender.
 - 4. Act of collective insubordination, hostage-taking, strike or riot.
 - 5. Escape or attempted escape from a facility.
 - 6. Any critical incident not listed above, as determined by the Director or Deputy Director.
- R. The formal post incident report shall be submitted within 30 days of the critical incident unless additional time is approved by the CFA Deputy Director. The formal post incident report shall include the following information:

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1. A detailed description of the sequence of events. The description shall include the date, time and location of all events and be accompanied by photographs and/or diagrams. This section shall provide the names and titles of all participants and witnesses including employees, visitors and offenders.
 2. A detailed facility critique of the incident and how employees responded to the incident. All relevant documents, including a copy of pertinent video recordings and any Bureau of Health Care Services (BHCS) critique, witness statements and reports from outside agencies, shall be included. Any changes in practice or procedure which were implemented or are planned to be implemented to correct a problem shall be reported.
 3. All administrative rules, policy directives, and operating procedures applicable to the event shall be listed and accompanied by an explanation of compliance or non-compliance. This review also shall include an evaluation of training needs and any recommendations for change in policy directive or operating procedure requirements.
 4. A plan of action, identifying deficiencies and providing a method of resolution. The plan will identify the staff responsible for the correction and the time frames for the completion of the recommended actions.
- S. Upon receipt of the formal post incident review report, the Director, Deputy Director, or designees, may require further analysis, inquiry, audit or investigation.
- T. For any critical incident involving the death of an offender who was receiving health care administered through the BHCS, the BHCS Administrator shall submit the Statewide Mortality Review Committee recommendations within 90 days after receipt to the Deputy Director and Warden.
- U. If the Deputy Director determines a Post Incident Review Committee is warranted, the post incident review report and the Statewide Mortality Review Committee recommendations, as applicable, shall be submitted to the Director with a recommendation.
- V. The Director shall determine the need to convene a Post Incident Review Committee and, as necessary, appoint a chairperson. In consultation with the Deputy Director and the Administrator of the Office of Legal Affairs, the chairperson of the Post Incident Review Committee shall designate the members of the Post Incident Review Committee.
- W. The Post Incident Review Committee may request additional information or investigations regarding the critical incident. The Committee shall prepare a report containing an in-depth analysis of the critical incident and recommend action to be taken. The report shall be forwarded to the Director for review. The Deputy Director shall develop an action plan to implement those recommendations approved by the Director.

DOCUMENTATION

- X. All documents, forms and video recordings related to critical incidents shall be retained as required by the Department's Record Retention and Disposal Schedule or, if not addressed in the schedule, for a minimum of three years from creation.

OPERATING PROCEDURES

- Y. Wardens shall ensure that procedures are developed as necessary to implement requirements set forth in this policy directive within 60 calendar days after the effective date.

AUDIT ELEMENTS

- Z. A Primary Audit Elements List has been developed and is available on the Department's Document Access System to assist with self-audit of this policy pursuant to PD 01.05.100 "Self-Audits and Performance Audits."