

Unexpected Fatality Review DOC Corrective Action Plan

Unexpected Fatality UFR-22-021 Report to the Legislature

As required by RCW 72.09.770

October 27, 2022

DOC Corrective Action, Publication Number 600-PL001

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Legislative Directive

Engrossed Substitute Senate Bill 5119 (2021)

Unexpected Fatality Review Governance

Review (UFR) committee and meeting in any case "in which the death of an incarcerated individual is unexpected, or any case identified by the Office of the Corrections Ombuds." The department is also required to issue a report on the results of the review within 120 days of the fatality and, within 10 days of completion of the review, develop an associated corrective action plan to implement any recommendations made by the review team. The statute took effect July 25, 2021.

The "primary purpose of the unexpected fatality review shall be the development of recommendations to the department and legislature regarding changes in practices or policies to prevent fatalities and strengthen safety and health protections for prisoners in the custody of the department."

"'Unexpected fatality review' means a review of any death that was not the result of a diagnosed or documented terminal illness or other debilitating or deteriorating illness or condition where the death was anticipated and includes the death of any person under the jurisdiction of the department, regardless of where the death actually occurred. A review must include an analysis of the root cause or causes of the unexpected fatality, and an associated corrective action plan for the department to address identified root causes and recommendations made by the unexpected fatality review team under this section."

Unexpected Fatality Review Committee Report

The department issued the UFR committee report 22-021 on October 17, 2022 (DOC publication 600-SR001). This document includes the required corrective action plan. The department is required to implement the corrective actions within 120 days of the publication of the committee report.

Corrective Action Plan

CAP ID Number:	UFR-22-021-1			
Finding:	The incarcerated individual was not on medication assisted treatment for			
	opioid use disorder (OUD) prior to his death.			
Root Cause:	Currently, DOC facilities are not funded to support medication assisted			
	treatment and DOC staff are unaware of available community-based OUD			
	treatment options for incarcerated individuals who are transferring to GRE or			
	releasing to the community.			
Recommendation:	Explore expansion of treatment options for incarcerated individuals diagnosed			
	with OUD.			
Corrective Action:	Investigate options and develop a proposal for DOC leadership consideration to			
	expand medication assisted treatment options.			
Expected	Incarcerated individuals with OUD have access to medication for the treatment			
Outcome:	of OUD prior to reentering the community.			
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CAP ID Number:	UFR-22-021-2				
Finding:	DOC 420.380 Policy – Drug/Alcohol Testing does not include expectations for				
	monitoring and documenting receipt of drug screen results that are sent to a				
	contracted lab.				
Root Cause:	Inadequate policy or process.				
Recommendation:	Develop and implement a formal process for tracking and documenting drug				
	screening results for individuals in the GRE program.				
Corrective Action:	Implement a policy or protocol establishing expectations for GRE staff to				
	monitor receipt of drug screen results in a timely manner.				
Expected	More timely intervention to support individuals with substance use disorder to				
Outcome:	maintain their sobriety.				

CAP ID Number:	UFR-22-021-3				
Finding:	Not all Reentry staff are aware the lab portal can be configured to send an				
	email notification when drug screen results are ready for review.				
Root Cause:	Lack of staff training on lab portal software features and functionality.				
Recommendation:	Provide staff guidance and training on how to configure the lab portal to send				
	email notifications when drug screen results are ready for review.				
Corrective Action:	Provide training and require all Reentry Corrections Specialists to configure the				
	lab portal to send email notifications when drug screen results are ready for				
	review.				
Expected	More timely intervention to support individuals with substance use disorder to				
Outcome:	maintain their sobriety.				