

**Department of Behavioral Health  
TRANSMITTAL LETTER**

<b>SUBJECT</b> Major Investigations		
<b>POLICY NUMBER</b> DBH Policy 662.1	<b>DATE</b> AUG 31 2015	<b>TL#</b> 288

**Purpose.** The purpose of this policy is to describe the process for conducting major investigations by the DBH Office of Accountability (OA). OA conducts major investigations to identify the cause (s) of incidents in order to eliminate conditions that may contribute to the reoccurrence of similar events through the identification and correction of causal factors.

**Applicability.** Department of Behavioral Health (DBH) licensed, certified and/or contracted behavioral health providers with a human care agreement who provide community-based mental health (MH) and substance use disorder (SUD) treatment services.

**Policy Clearance.** Reviewed by affected responsible staff and cleared through appropriate Behavioral Health Authority (BHA) offices.

**Effective Date.** This policy is effective immediately.

**Superseded Policy.** DMH Policy 662.1 Major Investigations, dated May 03, 2012

**Distribution.** This policy will be posted on the DBH web site at [www.dbh.dc.gov](http://www.dbh.dc.gov) under Policies and Rules. Applicable entities are required to ensure that affected staff is familiar with the contents of this policy.

  
Tanya A. Royster, M.D.      Date 8/31/15  
Acting Director, DBH

GOVERNMENT OF THE DISTRICT OF COLUMBIA  DEPARTMENT OF BEHAVIORAL HEALTH	<b>Policy No.</b> <b>662.1</b>	<b>Date:</b> AUG 31 2015	<b>Page 1</b>
	<b>Supersedes</b> <b>DMH Policy 661.1, Major Investigations, May 03, 2012</b>		

**Subject: Major Investigations**

1. **Purpose.** The purpose of this policy is to describe the process for conducting major investigations by the DBH Office of Accountability (OA). OA conducts major investigations to identify the cause (s) of incidents in order to eliminate conditions that may contribute to the reoccurrence of similar events through the identification and correction of causal factors.

2. **Applicability.** Department of Behavioral Health (DBH) licensed, certified and/or contracted behavioral health providers with a human care agreement who provide community-based mental health (MH) and substance use disorder (SUD) treatment services.

3. **Authority.** Department of Behavioral Health Establishment Act of 2013; 22 DCMR A34 Mental Health Rehabilitation Services (MHRS) Provider Certification Standards; and 22 DCMR A63 Certification Standards for Substance Use Disorder Treatment and Recovery Providers.

4. **Policy.**

4a. OA shall conduct a systematic examination of the types of incidents listed in Section 6 below that involve consumer care and/or administrative issues.

4b. OA shall, in accordance with the applicable laws and regulations, gather information as needed (e.g., review records, interview, take photos, etc.) to conduct and complete a full investigation of the identified incident.

4c. All entities listed in Section 2 above are required to fully cooperate with and provide all necessary assistance to the DBH assigned investigator during the investigation.

5. **Definition.**

**Major investigation.** Refers to the detailed inquiry or systematic examination of types of incidents listed in Section 6a below.

6. **Procedures in Major Investigations by the DBH OA.**

6a. **Types of Incidents to be investigated.**

(1) Incidents that must be investigated in accordance with this policy are as follows:

- a. Consumer deaths related to suicide;
- b. Unexpected deaths at Saint Elizabeths Hospital (SEH), any DBH certified program

or DBH licensed facility; and  
c. Death of a child or youth consumer.

(2) Other issues determined by the Director of DBH and Deputy Director of OA to require a major investigation (e.g., exploitation, neglect, physical and sexual abuse of consumer; work place violence, sexual harassment).

6b. Timeline for investigation. The timeline for completion of the investigation shall be 60 days after receipt of notice or discovery of incident by OA. If the full investigation cannot be completed within 60 days, OA shall notify those listed in section 6c (3) below of the new timeline and issue an interim report.

6c. Employee investigation. Investigations concerning allegations of employee misconduct shall be completed within ten (10) business days. If the full investigation cannot be completed within 10 business days, OA shall notify those listed in section 6d (3) below of the new timeline and issue an interim report. There will be no interim reports when the findings may involve disciplinary actions.

6d. Major Investigation Report.

(1) The final and interim investigation report (if needed) shall be prepared and signed by the Director, Division of Incident and Major Investigations (DIMI) and the Deputy Director of DBH Office of Accountability. The report shall contain the following:

- a. Investigation Team
- b. Description of Reported Incident
- c. Investigative Questions
- d. Evidence reviewed
- e. Interviews conducted
- f. Investigatory Dispositions (i.e., Substantiated, Unsubstantiated, Inconclusive)
- g. Remedial Actions/Recommendations

(2) All investigative reports are confidential. Any request for a copy of the DBH Investigation Report shall be forwarded to the DBH Office of the General Counsel to be processed in accordance with the District of Columbia Freedom of Information Act.

(3) The final investigation report shall be submitted by the Deputy Director, OA, to the following:

- a. DBH Director
- b. General Counsel
- c. Executive Staff members as determined by the Director, DBH
- d. Other individuals or entities as determined by the Director, DBH

(4) Relevant portions of the Incident Investigation Report as related to implementation of

the remedial action/recommendation shall be given to relevant providers and/or involved party/parties as determined by the DBH Director.

6e. Monitoring. Remedial actions/recommendations shall be monitored for implementation and compliance by OA for up to twelve (12) months, or as indicated in the investigation report/as appropriate.

6f. Trending and Analysis. OA shall review and analyze findings of major investigation reports on an annual basis to identify trends and opportunities for improvement. OA shall submit its findings to the Internal Quality Committee for review.

7. Sanction for Non-Compliance. Non-compliance of this policy may result in corrective actions in accordance with DBH policies and rules, and any other contractual actions allowed pursuant to the terms of the Human Care Agreements or other contracts.

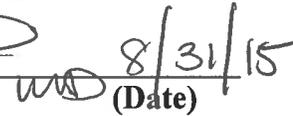
**8. Related DBH Policies.**

- DBH Policy 480.1 Reporting Major Unusual Incidents (MUIs) and Unusual Incidents (UIs)
- DBH Policy 482.1 DBH Policy on Protecting Consumers from Abuse, Neglect or Exploitation
- DBH Policy 115.1 Mortality Reviews

**Approved by:**

**Tanya A. Royster, M.D.  
Acting Director, DBH**

  
(Signature)

  
(Date)