



DISTRICT OF COLUMBIA
DEPARTMENT OF CORRECTIONS

EFFECTIVE DATE:

March 31, 2017

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**POLICY AND
PROCEDURE**

SUPERSEDES:

2920.4B
January 15, 2008

OPI:

Office of Accreditation and
Compliance

REVIEW DATE:

March 31, 2018

Approving Authority

Quincy L. Booth
Director

SUBJECT:

Inspections and Abatement Program

NUMBER:

2920.4C

Attachments:

Attachment A Plan of Action Form

SUMMARY OF CHANGES:

Section	Change
Change Notice 13-002	<i>Change Notice CN-13-002, "Honor Guard" has been rescinded</i>
Page 3, § 9 a(1-5) b	<i>Section #9 a(1-5)b was revised in its entirety</i>
Page 3, § 11 3) (a-c)	<i>Section #11, 3) (a-c) has been deleted</i>
Page 4, § 12 b (1-3)	<i>Section #12, b (1-3) has been deleted</i>
Page 5, § 15- " Training "	<i>Section # 15 of PS 1012.6D was removed in its entirety.</i>
Page 5, § 16	<i>Section #16 has been revised in its entirety.</i>
Page 5, § 17- " Retention Criteria "	<i>Section # 17 of PS 1012.6D was removed in its entirety.</i>

APPROVED:

3/31/2017

Quincy L. Booth, Director

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1. **PURPOSE AND SCOPE.** The inspection and abatement program provides requirements and procedures for daily housekeeping, preventive maintenance and life safety inspections, and corrective actions necessary to provide a safe work environment at the DC Department of Corrections' (DOC) facilities.
2. **POLICY.** It is DOC policy to: be consistent with applicable codes and standards, and to ensure actions are taken to prevent, identify, and document the correction of sanitation, health, and safety problems and deficiencies at DOC and contract facilities.
3. **APPLICABILITY.** This directive applies to all DOC employees, contract employees, and volunteers at DOC facilities.
4. **NOTICE OF NON-DISCRIMINATION** - In accordance with the D.C. Human Rights Act of 1977, as amended, D.C. Official Code § 2-1401.01 et seq., (Act), the District of Columbia does not discriminate on the basis of race, color, religion, national origin, sex, age, marital status, personal appearance, sexual orientation, gender identity or expression, familial status, family responsibilities, matriculation, political affiliation, genetic information, disability, source of income, status as a victim of an intrafamily offense, or place of residence or business. Sexual harassment is a form of sex discrimination that is also prohibited by the Act. Discrimination in violation of the Act will not be tolerated. Violators will be subject to disciplinary action.
5. **PROGRAM OBJECTIVES.** The expected results of this program are the:
 - a. Conduct of internal inspections to identify strengths and weaknesses, to ensure compliance, and to improve efficiency in operations.
 - b. Conduct of daily, weekly, and monthly inspections to maintain compliance with national standards, and in preparation for external agency audits/inspections in DOC facilities.
 - c. Generation of Plans of Action to address deficiencies identified during internal and external audits.
 - d. Follow-up on abatements to ensure compliance.

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6. DIRECTIVES AFFECTED

a. Directives Rescinded

PS 2920.4B Environmental Sanitation Program (2/15/08)

b. Directives Referenced

- 1) PP 2120.3E Food Service Program
- 2) SOPP
2920.4E-12 Fire Safety Inspections and Abatement
- 3) PP 2920.3D Hazardous Waste Management
- 4) PP 2920.8D Environmental Safety and Sanitation Inspections
- 5) PP 2920.6B Housekeeping Plan
- 6) PP 4210.2H Inmate Institutional Work Programs
- 7) PP 7500.2C Facilities Maintenance

7. AUTHORITY. DC Code § 24-211.02. Powers; Promulgation of Rules

8. STANDARDS REFERENCED

- a. National Fire Protection Association (NFPA) National Fire Codes (NFC), and NFPA 101, the Life Safety Code.
- b. American Correctional Association (ACA), 4th Edition, Performance-Based Standards for Adult Local Detention Facilities: 4-ALDF-1A-01, 4-ALDF-1A-08, 4-ALDF-1C-09.

9. DEFINITIONS. The following definitions shall apply to this directive:

- a. **DOC Facilities-** shall include the following: Central Detention Facility (CDF), Correctional Treatment Facility (CTF), Video Visitation Center (VVC), Training Academy, and Central Cell Block (CCB).
- b. **Office of Audit and Compliance (OAC)-** Responsibilities of staff assigned to this office include, but are not limited to, conducting internal audits of DOC facilities,

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generating reports of deficiencies, creating Plans of Action and forwarding them to respective managers for abatement, and follow-up to determine successful abatement.

Offices of Risk Management – The Office of Risk Management is responsible for assessing potential risk of the DOC. Conduct safety inspections and assess trends and patterns for safety issues. Issue abatement plans. Audit division areas for compliance and non-compliance. Assist in internal and external audits for the agency.

- c. **Plan of Action (POA)**- Shall mean a form utilized to identify deficiencies, and to document an abatement strategy (Attachment A).

10. STAFF RESPONSIBILITIES

- a. *The Warden or designee* is responsible for the implementation of the environmental safety and sanitation program at DOC facilities.
- b. *The Deputy Warden for Operations* shall ensure all uniformed staff at DOC facilities perform their responsibilities related to environmental safety and sanitation, and maintain facility compliance with all health and sanitation standards.
- c. *The Environmental Sergeant and Fire Protection Specialist* shall:
- 1) Coordinate and maintain documentation of life safety inspections at DOC facilities. These inspections include but may not be limited to DC Fire and Emergency Management Services (DCFEMS) and the Department of Health (DOH). Inspectors shall be given unfettered access to pertinent areas of the institutions, and reports and recommendations shall be issued to the Warden and responsible agency executives for corrective action.
 - 2) Conduct regular environmental and fire safety inspections, cite deficiencies and assist with appropriate corrective action activities.
 - 3) Inspect corrective action(s) to ensure the problem is adequately abated.
 - 4) Provide technical support to staff and managers and ensure staff and inmates receive appropriate orientation and refresher training in the performance of their related duties.
- d. *The Facility Maintenance Manager* shall oversee the contracted Facilities Management program to ensure preventive maintenance, and routine and emergency repairs are completed.

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- e. *The Food Services Contract Administrator* shall inspect/monitor contractor compliance for food service operations.
- f. *Program Managers and Office Chiefs* shall regularly inspect work areas under their responsibility for compliance with life safety requirements.
- g. *Employees.* DOC employees are responsible for ensuring that their respective work areas are clean, safe, and in full compliance with this and supporting directives.
- h. *OAC Staff.* OAC Staff Shall conduct internal audits of DOC facilities, and coordinate external audits, including audits by DOH, and the American Corrections Association (ACA). This includes developing a POA to respond to deficiencies that may be noted by external agencies.
- i. *Risk Manager.* The Risk Manager shall conduct audits and inspections for potential risks at all DOC facilities. Ensure risks are identified, abated and corrective actions/plan of actions is implemented pursuant to DOC policy. Identify trends and patterns of safety issues. Conduct meetings with Office Chiefs/Managers for risks that are graded as Imminent and High Risk. Issue sustainability plans for division areas. The Risk Manager shall chair the Risk Management Committee for DOC. At least annually, update this policy as needed.

11. PLAN OF ACTION. DOC utilizes a POA to ensure that deficiencies are addressed in a timely and efficient manner.

- a. *External Audits/Inspections-* In all cases where external inspections are conducted, the OAC manager, Risk Manager and/or the program manager shall, upon receipt of a deficiency report, generate a POA within the specified suspense date. A copy of the DOH POA shall be forwarded to the Director and Warden for review and approval. The Risk Manager shall also receive a copy for review. Upon approval, the POA shall be forwarded to the external agency for approval. The ACA POA shall be submitted to the Warden for approval.
- b. *Internal Audits/Inspections-* In all cases where internal inspections are conducted, the OAC manager, Risk Manager and/or the program manager shall generate a POA and submit it to the appropriate program manager for abatement. The completed POA shall be forwarded to the OAC and Risk Manager for review and approval. The Warden shall be provided a copy of the

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completed POA, and results of internal audits shall be posted to the shared drive that allows access to all DOC facilities managers.

- c. The POA shall include the area where the deficiency was discovered, the date of the audit, the type of audit conducted, the total number of POAs generated, the reference number used in the inspection report identifying the particular deficiency, the statement of non-compliance, the strategies to abate the deficiency, the person responsible for abatement, and the target completion date.
- d. The target date shall be set as soon as practical; not to exceed sixty (60) days unless exigent circumstances require an extension that is approved at the OAC manager's level, Risk Manager's level or higher.
- e. Upon abatement of all noted deficiencies, the senior manager shall forward a signed copy of the POA to OAC and Risk Manager for review. OAC staff along with the Risk Managers shall confirm the deficiencies were corrected. An OAC formal report shall be available on a shared drive for all DOC facilities managers to review.

12. ACCOUNTABILITY. Managers shall be responsible for deficiency abatement and corrective action in designated areas.

- a. Managers and staff shall be provided adequate opportunity to improve their deficiency areas. The OAC along with the Risk Manager shall monitor the deficient areas and provide continual status updates to area supervisors/managers.
- b. Managers and supervisors shall be subject to corrective action for failure to comply with the responsibilities and procedures set forth in this directive.
- c. The Environmental Officer and/or Fire Protection Specialist shall ensure that appropriate on-the-job or formal remedial training is provided when appropriate.
- d. The Environmental Officer and/or Fire Protection Specialist shall be responsible for communicating environmental and fire safety deficiencies to the OAC manager and Risk Manager and all responsible managers impacted by designated areas.
- e. The Environmental Officer and/or Fire Protection Specialist shall maintain appropriate documentation of all regularly and randomly scheduled

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environmental and safety inspections with results forwarded to appropriate managers, including the OAC and Risk Manager.

13. MONITORING/FOLLOW-UP. DOC facilities shall utilize the DOC Internal Audit tool and Risk Management audit tool to monitor compliance.

- a. The OAC manager shall monitor completion of determined strategies/action steps. Outstanding POA's shall be reviewed every thirty (30) days.
- b. The Risk Manager shall monitor and determined strategies/action steps for potential risks. POA's shall be reviewed?
- c. In the event that a POA cannot be completed by the target date, the affected Manager shall request additional time, as indicated on the POA. If an extension is necessary the OAC manager and/or Risk Manager shall approve the extension.

Attachment

Attachment A – Plan of Action Form

Inspections and Abatement

PS 2920.4

PLAN(S) OF ACTION FORM

Attachment A

SECTION 1: GENERAL INFORMATION

Institution:	
Audit Project:	

Date of Audit:

Total # POA Forms Generated by this Audit/Inspection:

SECTION 2: PLAN OF ACTION

Number	Ref. # from Inspection Report	Ref. Statement and Statement of Non-Compliance from Inspection Report	Strategies/Action Steps to Correct the Statement of Non-Compliance	Person(s) Responsible for Corrective Action	Target Completion Date	Extension Requested Date	Actual Completion Date
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							

Inspections and Abatement

PS 2920.4

PLAN(S) OF ACTION FORM

Attachment A

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19							
20							

SECTION 3: REVIEW/APPROVAL

Required Approvals	Printed Name	Signature	Date
FACILITY:			
Accreditation and Compliance Manager			
Deputy Warden for Operations/Programs			
Responsible Department/Manager			
Warden			

Inspections and Abatement

PS 2920.4

PLAN(S) OF ACTION FORM

Attachment A

SECTION 4: POA COMPLETION Signatures below certify that all strategies/action steps have been completed

Accreditation and Compliance Manager

Warden

Date