INTERNAL INVESTIGATION PROCESS

1. **Purpose.** This operating procedure establishes uniform policies and procedures for internal investigations at Florida State Hospital.

2. **Scope.** This operating procedure applies to all areas of Florida State Hospital and employees, residents, visitors and vendors.

3. **Training Requirements.** All supervising and managing employees will be trained on this operating procedure upon hire into the position by their supervisor during Worksite Education and each time the operating procedure is revised.

4. **References.**
   


5. **Authority.**

   a. The Hospital Investigator and/or security liaison represents Florida State Hospital and has been delegated the full authority to conduct internal investigations in compliance with Florida State Hospital policies and procedures by the Hospital Administrator through the Hospital Attorney’s Office. The investigator and/or security liaison is authorized to enter all locations on hospital grounds to secure and review all records, data, and other information pertinent to an internal investigation. The Hospital investigator and/or security liaison is not involved in the administering of disciplinary action resulting from findings of Florida State Hospital investigations, but can be summoned to provide additional information during a management review.

   b. The Hospital Investigator and/or security liaison is given authority to conduct investigations and other inquiries free of actual or perceived impairment to the investigation process, to include freedom from any interference, and allowed timely access to records and other sources of information.
c. The Hospital Investigator and/or security liaison will report expeditiously to local law enforcement agencies, as appropriate, whenever reasonable grounds exist to believe there has been a violation of criminal law. The Hospital Investigator and/or security liaison is not a law enforcement officer, does not have arrest powers, and cannot conduct custodial interviews.

d. Investigations will be conducted with support of the Hospital Security Department and units/departments.

6. Definitions.

a. Custodial Interviews. An interview of an individual who has been detained or taken into custody by law enforcement officials while conducting a criminal investigation.

b. Non-Custodial Interviews. An interview conducted for the purpose of gathering information from an individual who is not in custody or being detained by law enforcement officials.

c. Internal Investigation. Investigation conducted within confines of Florida State Hospital by the Hospital Investigator and/or security liaison.

d. First Responder. Designated authorities from security and/or legal services who are first on the scene to preserve and gather evidence, collect statements and other related documents, and to identify all involved parties.

7. Requests for Internal Investigations.

a. Requests for internal investigations can be received from any of the following:

(1) Hospital Administrator/Administrator on Duty.

(2) Assistant Hospital Administrators or designee for Administrative Services, Forensic Services, Civil Services, Quality Improvement and Clinical Services.

(3) Director of Legal Services/Hospital Attorney.

b. The investigator will be provided with all available and relevant information, including original documents by the individual requesting an investigation, at the time an investigation is requested.

c. Each request for investigation is documented in the investigator’s database, and assigned a case number.

8. The Investigative Process. The Hospital Investigator and/or security liaison will conduct investigations within timeframes established by the Director of Legal Services/Hospital Attorney. Investigative procedures may include, but are not limited to, the following actions:

a. First responder collection and review of all available evidence.

b. Reviewing records, statements and other source documents for accuracy.

c. Questioning potential witnesses and recording interviews.
d. Preparing detailed reports of investigation in proper format.

e. Preparing memos and written communication, as required.

f. Serving as liaison with local law enforcement.

g. Providing testimony, as required.

h. Briefing managers on investigative matters.

i. Prioritizing assigned investigations, as appropriate.

j. Maintaining case management and tracking records thoroughly, timely, and consistently.

k. Complying with confidentiality requirements.

l. Serving as member of investigative teams, committees, work-groups, and task forces, as assigned.

m. Maintaining electronic and typewritten case files as well as computer based audio files.

9. Types of Investigations. (may include, but not limited to):

a. Allegations of physical assault by employee against resident.

b. Unexplained injury to resident(s) that requires emergency treatment.

c. Injury to employee(s) that requires medical treatment.

d. Unknown injuries sustained by resident while on clinical observation that meet criteria for completing critical incident report.

e. Substantial loss or damage of state property.

f. Allegations of sexual abuse and sexual interaction between resident and employee.

  g. Theft of state property.

  h. Accidents involving state vehicle or private vehicle on hospital grounds.

  i. Escape.

  j. Possession or introduction of illegal (criminal or non-criminal) contraband into state facility.

  k. Resident neglect or exploitation.

  l. Commission of any criminal act or violence in workplace.
m. Any additional complaints warranting investigation deemed necessary by Hospital Administration (special assignments).

10. **Investigation Report.** An investigation report of findings for each investigation event will be provided to the Hospital Administrator and the respective Assistant Hospital Administrator for dissemination, handling and follow-up.

11. **Review Requirements.** Legal Services will conduct analysis of investigation reports to identify hospital trends and root causes of trends. The Office of Performance Improvement and Planning may be requested to support analysis of trend data. A quarterly summary of findings, quality improvement actions and investigation review trends will be provided by Legal Services to the Hospital Administrator and the Assistant Hospital Administrator for Quality Improvement Services.

*(Signed original on file in Central Health Information Services)*

DIANE R. JAMES
Hospital Administrator

Attachment
Flow Sheet—FSH Internal Investigations
FSH INTERNAL INVESTIGATIONS

<table>
<thead>
<tr>
<th>STEP</th>
<th>AHA/AOD/CD/DESIGNEE/RAC</th>
<th>SECURITY/UD</th>
<th>LEGAL SERVICES</th>
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<tbody>
<tr>
<td>NEED</td>
<td>Need To Determine If Internal Investigation Is Required</td>
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<tr>
<td>NOTIFY</td>
<td>Notify First Responder(s) Of Event Or Issue</td>
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<td>COLLECT</td>
<td>Collect Evidence And Send To AHA</td>
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<td>DETERMINE</td>
<td>Determine If An Internal Investigation Is Warranted</td>
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<td>DECIDE</td>
<td>OK Without Internal Investigation?</td>
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<td>YES</td>
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<td>* AHA Will Notify Investigator To Initiate Investigation.</td>
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<td>* AHA/Security Will Forward All Evidence, Videos And Original Statements To Investigator.</td>
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<td>NO</td>
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<td></td>
<td>* Receive Request To Begin Internal Investigation.</td>
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<td>* Review All Evidence And Initiate Investigation.</td>
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<td>* Gather Additional Information As Needed.</td>
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<td>* Conduct Interviews With Involved Parties.</td>
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<td>* Summarize Findings And Forward To Legal Chief For Review.</td>
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<td>* Send Final Summary Report To AHA And Other Designated Parties.</td>
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<td>FORWARD</td>
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<td>SUMMARIZE</td>
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<td>SEND</td>
<td>Initiate Corrective Actions Required</td>
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<td>NEED MET</td>
<td>Investigation Decision Completed</td>
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Attachment
Operatimng Procedure 30-2