Public Safety

11

Homeland Security and Emergency Management Agency

There is no greater responsibility for the District of Columbia than to protect the public. The Homeland Security and Emergency Management Agency (HSEMA) helpshelp to ensure the readiness of the City by coordinating the homeland security and emergency management efforts of the District of Columbia and the National Capital Region (NCR). The mission of HSEMA is to lead the planning and coordination of homeland security and emergency management efforts to ensure that the District of Columbia is prepared to prevent, protect against, respond to, mitigate, and recover from all threats and hazards.

Summary of Services

To accomplish its mission, HSEMA employs a highly dedicated and talented group of professionals who:

- Develop emergency preparedness plans and procedures in coordination with District agencies, service providers, and private businesses;

- Train and exercise District emergency operations plans;Leading interagency efforts; and

- Deliver emergency preparedness exercises, trainings, seminars, and conferences to local first responders, city employees, and public and private stakeholders;

- Maintain ongoing situational awareness of potential threats and hazards;

- Serve as the central communications point for District agencies and regional partners before, during, and after an emergency;

- Lead the District's public safety planning efforts for events requiring interagency coordination such as festivals, parades, marathons, and other local or special events;

- Keep the public informed through multiple channels, including the press and social media, about preparedness and safety information before, during, and after an emergency; and

- Conduct community outreach to teach District residents, businesses, visitors, and commuters how to be prepared for all hazards.

In carrying out its mission, HSEMA works closely with other agencies, including the Metropolitan Police Department, the Department of Fire and Emergency Medical Services, the Department of Health, and other District and federal agencies. Other HSEMA partners include the major utility companies and non-profit and volunteer organizations, such as the American Red Cross and the Salvation Army.

Operations

HSEMA provides situational awareness, logistical and resource support, and field command operation to coordinate incident response, mitigation, and recovery for emergencies, severe weather conditions, disasters, and other major events affecting the District of Columbia. HSEMA manages the City's Emergency Operations Center (EOC) and works closely with Emergency Support Function lead agencies, which staff the EOC, in preparation for and during emergency activations.

On a day-to-day basis the 24/7 Joint All Hazards Operation Center serves as the central hub of communications, where information is processed, analyzed, and disseminated to District, regional and federal partners, businesses, and the public. This information creates a common operating picture and provides relevant and useful information for preparedness and mitigation planning. HSEMA also provides a command and control element that supports District and federal agencies during special events, such as the State of the Union

Address, Independence Day on the National Mall, Capital Pride, and the Presidential Inauguration.

Table 11.1. Operations Activations

	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Number of partial and full Emergency Operations Center activations	8	13	8	42	13

Source: Homeland Security and Emergency Management Agency

Washington Regional Threat and Analysis Center

HSEMA administers the Washington Regional Threat and Analysis Center (WRTAC), which is the Fusion Center for the District of Columbia. The mission of the WRTAC is to serve as the central intelligence information entity within the District government, ensuring timely, meaningful, accurate, and value-added synthesis and analysis of information provided by all partner government agencies and private-sector entities with a stake in the security of District residents. The Fusion Center leverages all resources from the District to focus on synthesizing and analyzing information, rather than just collecting information.

Public Information

HSEMA keeps the public informed before, during, and after an emergency. HSEMA utilizes multiple messaging platforms to ensure that safety measures and messages are relayed to District Government employees and District constituents. The AlertDC system is used to provide immediate text notification and update information during a major crisis or emergency. The system delivers important emergency alerts, notifications, and updates on a range of devices, including email accounts (work, home, and other); cell phones; pagers; and smart phones. HSEMA can also send out alerts directly to cellular phones through the Commercial Mobile Alerting System and, as a local authority, can use the Emergency Alerting System to send messages via broadcasters, cable television systems, wireless cable systems, satellite digital audio radio service providers, and direct broadcast satellite providers.

Table 11.2. AlertDC Messages

	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Number of AlertDC messages disseminated	4,405	3,361	5,770	6,624	5,694

Source: Homeland Security and Emergency Management Agency

Community Outreach

HSEMA maintains a strong outreach program designed to educate and equip community residents and businesses to deal with hazards and the potential for disasters. Outreach is conducted annually

through a series of presentations, workshops, and events provided to each of the District's eight wards. Annually, HSEMA provides information to the public at events, such as the NBC4 Health and Fitness Expo events, National Preparedness Month events held throughout the city, local businesses, and Advisory Neighborhood Commission meetings during the year.

Plans and Preparedness

HSEMA facilitates comprehensive planning that promotes resiliency in government agencies, our communities, and critical infrastructure by developing and revising emergency plans to address an array of emergency management and domestic homeland security contingencies. The plans ensure sustainment of essential functions during and after a disaster.

One of the District's largest planning efforts has been the implementation of the District Preparedness System (DPS), which provides a consistent foundation for preparedness activities throughout the District. The DPS acknowledges that preparedness is no longer considered to be a pre-disaster phase of emergency management. Rather, preparedness is a continuous process that will be incorporated throughout all phases of the District's emergency management program, including prevention/protection, mitigation, response, and recovery.

Table 11.3. Community Outreach Events					
	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Number of events attended by HSEMA Outreach Division.	37	55	226	274	228
Source: Homeland Security and Emergency Management Agency					

The DPS is comprised of the doctrine, organizational structures, documentation, and operational procedures that enable the District to assess and develop targeted capabilities in a strategic manner, in order to meet our goals in all areas of our preparedness mission. It encompasses all elements of the preparedness cycle that allow the District to identify capability gaps (Threat and Hazard Identification and Risk Assessment (THIRA), State Preparedness Report (SPR), and After Action Reports (AAR)), prioritize capabilities for development (Strategy, Playbook), resource and develop top priority capabilities (Grant Funded Projects), and execute those capabilities when required by real world events (Framework, Operational/District-wide Plans). Several DPS milestones were achieved in 2014, including the release of the first set of strategic and planning documents; incorporation of SPR, THIRA, and AAR information into the prioritization process; and the establishment of multiple District of Columbia Emergency Response System (DCERS) Mission Area Subcommittees.

Training and Exercises

HSEMA spearheads the delivery of disaster management simulations and emergency preparedness trainings, seminars, and conferences to local first responders, emergency support function liaison officers, senior leaders, and public and private stakeholders, to enhance emergency management capabilities of the District of Columbia and NCR. Tabletop, functional, no-notice, and full-scale field exercises are also conducted to provide opportunities for applied training, as well as, practical evaluation of the District and NCR's response and recovery capabilities.

Table 11.4. Training Statistics					
	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Number of trainings provided to first responders, District employees, and the public[1]	70	47	44	36	33
Number of individuals trained by HSEMA	1834	698	680	953	1,095

[1] Includes training provided to foster parents, children, senior groups, neighborhood associations, colleges and universities, Business Improvement Districts, faith-based organizations, and deaf and hard of hearing residents, etc.

Source: Homeland Security and Emergency Management Agency

Disaster Recovery

Following a federally declared disaster, HSEMA is responsible for the administration of post-disaster recovery, mitigation, and restoration programs involving public infrastructure. HSEMA also coordinates disaster related interstate agreements with neighboring states through the Emergency Management Assistant Compact and mutual aid.

Special Events

The District of Columbia Government provides essential municipal services in support of special events to ensure events occurring on public space in the District of Columbia are conducted in a manner that protects public health and safety. HSEMA manages the administration of the Mayor's Special Events Task Group (MSETG), a body responsible for organizing the City's public safety planning efforts for events requiring interagency coordination. The MSETG meets the second and fourth Monday of each month, except on government holidays, to review presentations of proposed special events. The organizers of proposed special events are required to

present event proposals to the MSETG and receive the concurrence of the group prior to the issuance of permits or licenses by the permit-granting agencies.

HSEMA is also responsible for the administration of the Community Events Funding Assistance Program. The Community Events Assistance Fund provides limited financial assistance to District of Columbia community-based, nonprofit organizations that are engaged in programs fostering the development of quality activities in local communities. When these organizations conduct special events on public roadways under the jurisdiction of the District, they must be processed by the MSETG. Funding is for the exclusive purpose of offsetting some of the costs of city services requirefor conducting such special events, and is provided through direct reimbursement to city agencies providing public services that are necessary to protect public health and safety, as determined by relevant city agencies.

Table 11.5. Special Event Information					
	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Number of special events that have been processed by the Mayor's Special Events Task Group (MSETG).	100[2]	113	104	91	109

[2]In 2010 through 2012, this measure was the "[n]umber of Special Events that have been approved by the MSETG." (Emphasis added). The measure changed in 2013 to the current measurement of "events that have been processed."

Source: Homeland Security and Emergency Management Agency

Table 11.6. Grants Information					
	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Homeland security grant dollars managed	$330,149,608	$318,976,519	$268,284,524	$196,680,927	$188,119,910
Number of grant projects managed	523	349	518	456	390

Source: Homeland Security and Emergency Management Agency

Grants Management

HSEMA serves as the State Administrative Agent (SAA) for several local and regional grant programs administered by the U.S. Department of Homeland Security (DHS), including the State Homeland Security Program, Urban Areas Security Initiative, Emergency Management Performance Grant, National Special Security Event Grant Program, and the Securing the Cities Grant Program. The SAA provides programmatic oversight to hundreds of individual grant-funded homeland security projects in the District of Columbia and the NCR to

ensure that the projects are making progress, meeting milestones, and are in compliance with applicable grant guidance. The SAA tracks the financial status of sub-grants and authorizes reimbursement payments for the allowable expenses that these projects incur. The SAA provides programmatic and financial status updates for these grant programs to local and regional governance bodies.

Homeland Security Commission

In 2013, the Homeland Security Commission was established by the Homeland Security, Risk Reduction, and Preparedness Amendment Act of 2006. The core function of the HSC is to make recommendations for improvements in security and preparedness in the District of Columbia. Specifically, the Commission is tasked by the Mayor with gathering and evaluating information on the status of homeland security in the District, measuring progress and gaps in homeland security preparedness, recommending security improvement priorities in consultation with major public and private entities, and advising the District Government on the homeland security program. As a result of this broad statutory agenda, the Commission determined that it would be most effective by concentrating on one topic in greater depth, rather than undertaking a cursory overview of the many subjects within its purview. The Commission meets on a quarterly basis throughout the year to discuss and evaluate the status of a particular homeland security topic within the District and creates an annual report on the new focus each year.

Metropolitan Police Department

The Metropolitan Police Department provides crime prevention and response services through patrols, investigations, and homeland security services. To support customized community policing throughout the city, the District of Columbia is divided into seven police districts (Map 11.1). Each district is further divided into 5-8 Police Service Areas (PSAs), for a total of 56 PSAs citywide. The PSA is the basic building block of customized community policing. The Patrol Services and School Security Division delivers community policing

to the District's neighborhoods through 56 police service areas in seven police districts and oversees the provision of security services to the District of Columbia Public Schools. The Investigative Services Division investigates violent, property, and narcotic crimes and provides forensic support for those cases. The Homeland Security Division coordinates domestic security and intelligence operations as well as traffic safety and for special events. The Internal Affairs Bureau investigates use of force incidents, potential equal employment opportunity violations, and other complaints against MPD officers and employees. The Strategic Services Bureau and Corporate Support Bureaus support the work of the entire department through research, crime analysis, strategic direction, recruitment, hiring and training personnel, fleet management, procurement, and other administrative support services.

Every year, the Metropolitan Police Department produces a comprehensive annual report that highlights the Department's successes from the previous year and compiles its data into a single publication. Annual reports dating back to 1998 are available on the MPD's website at http://mpdc.dc.gov/annualreports.

Police Protection

The Metropolitan Police Department (MPD) protects the lives and property of 658,853 District residents (2014 U.S. Census estimate), as well as a daytime population, including commuters, which swells to over 1,000,000. MPD also provides escort services for the president of the United States and visiting foreign dignitaries, and provides police support at the numerous demonstrations conducted by those who come to petition the federal government. The MPD is organized into seven police districts.
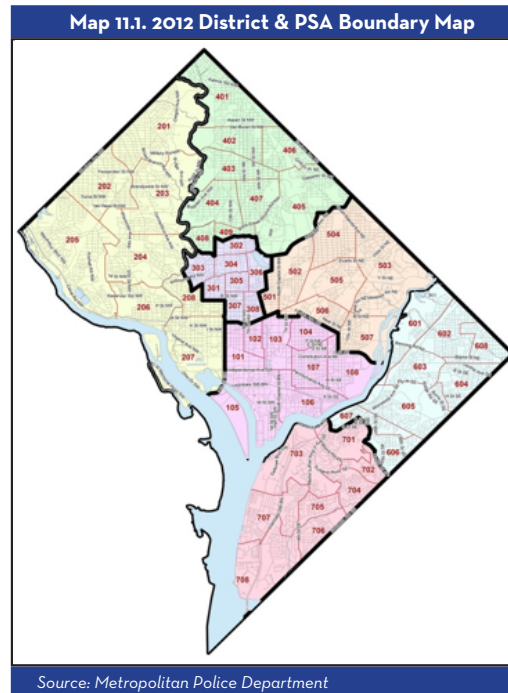 In addition to the Metropolitan Police Department, more than 30 other public law enforcement authorities operate in the District including the U.S. Secret Service, with responsibility for guarding the White House and the president and the U.S. Capitol Police, with responsibility for protecting the Capitol building and grounds and members of Congress.

In addition to the public law enforcement authorities operating in the District, there are other special police officers, private detective agencies, and security guards registered with the Metropolitan Police Department. Reorganization Plan No. 4 of 1988, issued by the mayor, granted the MPD responsibility for administering applications and investigating, certifying and licensing of security officers and private detectives.

Crime in DC

Overall, District residents were significantly safer in 2014, with a decrease in violent crime of nine percent. The reduction of violent crime in the District of Columbia is a key focus for the entire police department and all of our partners. In the past year, the reduction in violent crime was driven by an 18 percent reduction in robbery, the most frequent serious crime of violence. This reduction was felt citywide, with every single police district experiencing fewer robberies.

In 2014, the total number of homicides increased from 104 to 105. While one is a small number in many instances, it is tragic when counting lives. The number of homicides has hovered around 100 for the past couple of years. Through tenacious police work and strong partnerships with the community, the MPD continues to work toward to reducing the number of homicides in the District of Columbia.

Map 11.1. 2012 District & PSA Boundary Map

Source: Metropolitan Police Department

Community Outreach

One of the ways that MPD is working to prevent future violence is through our proactive engagement of youth and young adults through many programs. This includes our Youth Creating Change (YCC) program launched in 2014. Thirty youth from some of the District's neighborhoods facing the greatest challenges with persistent violence participate in the three-month program. The program helps young adults aged 15-20 develop skills and abilities in the areas of leadership, teamwork and community development.

MPD's Junior Cadet Program, which is sponsored by the DC Police Foundation, works with 125 students at five participating elementary schools, on a 40-week program that includes lessons on safety, civics, history, life skills development, and academic achievement. Moreover, the program provided school supplies, Thanksgiving baskets, and Christmas toys to students and hosted field trips to the Air and Space Museum, Gettysburg Battleground, Luray Caverns, and the US Capitol where they met US Delegate Eleanor Holmes Norton. As a result of the initiative, teacher assessments of the overall behavior and academic achievements of participants increased.

An Asian outreach coordinator was hired in 2014 in efforts to expand the Department's outreach with the Asian community. The outreach coordinator's responsibilities have been to overcome the language access barriers in services offered by the MPD, identify crime trends that are unique to the Asian community (e.g. mail, credit card, and identity frauds), and educate the Asian community on public safety issues and reporting practices. The outreach coordinator has successfully utilized her public relations and language skills to identify the community needs, promote awareness, find volunteers, and organize events that benefit the agency. The initiative has enhanced partnership and allowed MPD to work closely with the members of the Asian and Pacific Islander community to educate the importance of public safety.

The Metropolitan Police Department's presence on social media also continues to grow. In addition to the Department's very popular YouTube channel, Facebook page, and Twitter feed, the MPD has a

number of specialized pages that focus on particular interests. The MPD Cadet Corps Facebook highlights the activities of these young adults who are not old enough to join the MPD, but are confident of their desire to become police officers. The Recruiting Division is actively using social media to broaden our reach to potential candidates across the country. Finally, in April 2014, a dog named Sam – the only bloodhound in the MPD's Canine Unit – started following something new: friends on Facebook, Twitter and Instagram. Originally bred for hunting, most bloodhounds now track people. Sam's job at DC MPD is to help police solve crimes and find missing persons. Since Sam got online, this tech-savvy pooch has posted photos of his first day on the job, an unwanted bath from his handler, and his favorite toy. He also regularly posts photos of critical missing persons and other news of his friends and colleagues in the animal world.

Police Initiatives

In October 2013, the Metropolitan Police Department established the Nightlife Unit, based on a comprehensive economic development analysis on recent and planned developments throughout the city. Ninety officers were deployed in the H Street NE Corridor, Adams Morgan, Columbia Heights, Dupont Circle, and the U Street NW Corridor. This unit continues to have a substantial impact on robberies and other violent crimes in the Districts. Other neighborhoods benefited indirectly from this unit as well, because having a dedicated unit allows patrol officers to stay in neighborhoods instead of being deployed to address the high volume of incidents and calls in the entertainment areas. All Nightlife officers received targeted training on de-escalating incidents in the entertainment areas. The unit provided high visibility patrols on foot, bicycle, and Segways during the nightlife hours and worked with nightclubs and liquor-licensed establishments to provide a safe environment. Based on the first year of operation, all five nightlife areas experienced significant reductions in violent crimes, including a decrease in robberies of at least 40 percent in each area.

In 2014, MPD hired 10 highly-qualified individuals to establish the Real-Time Investigative Center. All members possessed an understanding of investigations and analysis, and each had diverse knowledge of law enforcement applications and technology. The members attended a 12-day training program at the Police Academy and also worked weekly rotations with several investigative units in order to better understand their roles and responsibilities. The investigative support unit has since been deployed 24 hours a day, 7 days a week. The unit has assisted in the preliminary investigation of over 5,000 cases/reports of serious incidents (e.g., homicides, shootings, robberies, carjackings, weapons offenses, sex assaults, aggravated/felony assaults, burglaries, kidnapping, etc.). There have also been many examples of detectives quickly closing cases after the investigative support unit was able to assist in identifying the suspect and/or making a connection to another offender or prior incident. The Real-Time Crime Center has allowed the Department to quickly identify and apprehend violent offenders and remove illegal weapons off the streets. Moreover, all investigative units have come to rely on the real-time service and support provided by the investigative support staff.

The MPD's Pawn Investigations and Enforcement Unit helped reduce robbery and theft of small personal electronics by improving data collection for criminal investigations of electronics that are stolen, transported, or trafficked within the District of Columbia. The unit trained and created the district pawn liaison officers who were tasked with communicating with the citizens in their districts and gathering intelligence information on pawn and fencing trends. In addition, the unit utilized social media and online websites in efforts to track stolen electronics and conduct undercover operations based on leads received from the pawn liaison officers and district detectives. In FY14, 37 pawn liaison officers and 273 Criminal Investigative Division (CID) personnel were trained to use the MPD's new pawn database where the serial numbers of more than 220 stolen devices were monitored by the Pawn Unit. In addition, the Pawn Unit conducted 10 undercover operations based on leads and recovered $10,605 worth of stolen properties. Follow ups with victims by the Pawn Unit members to obtain vital information such as complete property descriptions and serial numbers also proved to assist in the search for and recovery of their property.

As of September 1, 2014, all pawn shops and secondhand dealers have been required to report electronics into MPD's pawn database, and thereby transactions conducted are immediately recorded and readily available for search by law enforcement. Victims now stand a greater chance of having their stolen devices returned to them.

Technology and Training

The Metropolitan Police Department continues to be at the forefront on technology in policing. Investments that have made routine police work more efficient are even more important than cost benefits derived from the implementation. Laptops and handheld devices have enabled officers and detectives to do more work from the field – completing reports, identifying suspects, and solving crimes without having to go back to a desk. New applications designed to streamline the policing process are being developed on a regular basis. Existing resources are also regularly evaluated and upgraded to ensure members are using the best tools available on their devices.

The MPD completed the integration of the District's Closed Circuit Television (CCTV), Shot Spotter gunshot detection system, License Plate Recognition (LPR) cameras, and the Computer Aided Dispatch (CAD) systems so that cameras can automatically turn towards the area of an event. This technology was used numerous times during 2014. In one shooting incident, the gunshot detection system triggered a CCTV camera to move, and MPD officers were able to respond two minutes before the first 911 call and identify potential suspects and witnesses from the CCTV camera footage. In addition to having a significant impact in assisting investigations and prosecution of crimes, the integration of CCTV, gunshot detection, LPR, and CAD systems has also enabled faster responses by emergency personnel.

In April 2014, the MPD developed a new situational awareness and investigative tool to help officers and detectives better familiarize themselves with the realities of the scene prior to their arrival. The

tool, known as "AWARE," has two components — the Threat Console and the Investigation Console. Known as AwareTC and AwareIC, these well-designed, intuitive modules provide the kinds of valuable information that officers need prior to arriving on the scene in order to better prepare themselves for what they might encounter or as they begin their investigation. Among other things, with AWARE TC, users can: get a real-time display of CAD alerts on a map and the ability to filter these alerts by District and/or PSA; send email alerts to mobile devices for CAD calls, LPR hits and ShotSpotter alerts; view patrol vehicle locations and assignments on the map; and see CCTV footage of nearby events. In December 2014, the MPD was named the recipient of the 2015 IJIS Institution Innovation Award for their work on AWARE. This award recognizes technical innovation in a justice, public safety, or homeland security project.

MPD began piloting its Body-Worn Camera program in October 2014. Use of the cameras enhances service to the community by accurately documenting events, actions, conditions, and statements made during citizen encounters, traffic stops, arrests, and other incidents. In addition, the use of the cameras will help ensure the safety of both MPD members and the public. The cameras will work like this: As an officer approaches a scene — either as a result of a radio assignment for a call for service or because he or she has witnessed something requiring action — the officer will turn on the camera to begin recording. The camera records continuously throughout the officer's handling of the incident. Each system records clear audio and high-quality video for later review and possibly as evidence in a criminal or civil matter. Once the incident is concluded, the officer clears the scene and turns off the recording. At the end of his or her shift each day, the officer will upload the contents of the camera's recordings to a remote evidence management system for processing and storage. These body-worn cameras benefit the community and MPD members by improving police services, increasing accountability and enhancing public safety.

The MPD's Tactical Training Center, is a training facility designed to provide an environment in which members of the Department participate in realistic simulations of emergency situations. In 2014,

members engaged in highly participatory and rigorous scenario training programs at the MPD's tactical village. MPD recruit officers participated in team building exercises to improve their preparation and situational awareness while veteran officers completed the newly designed active shooter training. The Tactical Training Center was also used to initiate the Rescue Task Force Drills where 473 members from MPD and the District of Columbia Fire and Emergency Medical Services Department (DCFEMS) trained on incident and scene management. Other ancillary MPD units such as the Crime Scene Investigation Division and Major Narcotics Branch also used the center for work specific training. All training sessions received high accolades from veteran members on a regular basis. As a result of the initiative, the public has benefited from police officers having improved situational awareness, decision making skills, and delivery of service.

Defining Criminal Offenses

Like most other jurisdictions, the Metropolitan Police Department reports crime two different ways. Primarily, the Department reports crimes that are defined in the District of Columbia Criminal Code (DC Code Index Offenses). This is according to local law and is how officers classify offenses and make arrests.

The MPD also generates crime data using uniformly established guidelines that were developed by the Federal Bureau of Investigation as the Uniform Crime Reporting System (UCR).

The MPD relies on the DC Code Index Offense information for daily operational and deployment decisions. Residents access this same information to make informed decisions. The DC Code Index Offenses provide a clear picture of crime trends as they are actually happening in the District of Columbia, and it is how crime is reported to the MPD by residents. It is also how crime information is shared with the residents of the District of Columbia. See Tables 11.6 to 11.8. UCR crime information is also included so that residents have access to that standardized crime data as well. To compare crime trends to other jurisdictions using UCR data, please visit the FBI website at http://www.fbi.gov/ucr/ucr.htm.

Table 11.7. MPD Index Crimes Offenses, 2010-2014					
	2010	2011	2012	2013	2014
Homicide	132	108	88	104	105
Sexual Abuse	141	174	259	302	316
ADW	4,026	4,256	4,304	2,323	2,405
Robbery	2,621	2,213	2,312	4,085	3,368
Violent Crime	6,920	6,751	6,963	6,814	6,194
Burglary	4,221	3,968	3,689	3,375	3,187
Motor Vehicle Theft	9,104	10,870	2,871	2,682	3,141
Theft F/Vehicle	6,999	9,302	9,502	10,166	11,352
Theft Other	4,133	3,414	12,515	12,938	14,670
Arson	44	44	35	35	26
Property Crime	24,501	27,598	28,612	29,196	32,376
Total	31,421	34,349	35,575	36,010	38,570

Homicide, Sexual Abuse, ADW, and Robbery are categorized as "Violent Crimes;" Burglary, Motor Vehicle Theft, Theft from Vehicle, Theft (other), and Arson are categorized as "Property Crimes."

Source: Metropolitan Police Department

Table 11.8. MPD FBI UCR Citywide Crime Trends, 2010-2014					
	2010	2011	2012	2013	2014
Criminal Homicide	132	108	88	104	105
Rape	184	172	236	393	470
Robbery	3,914	3,756	3,725	3,661	3,232
Aggravated Assault	3,238	2,949	3,399	3,725	4,004
Burglary	4,224	3,849	3,519	3,315	3,463
Larceny/Theft	18,050	20,124	22,196	22,987	25,881
Motor Vehicle Theft	4,864	4,339	3,549	3,147	3,683
Arson	49	61	50	N/A	N/A
Total	34,655	35,358	36,762	37,332	40,838

Note: As of 2013, arson UCR cases are no longer reported by the MPD.

Arrest Data

ARREST CATEGORY	2012			2013			2014		
	Adult	Juvenile	Total	Adult	Juvenile	Total	Adult	Juvenile	Total
Assault with a Dangerous Weapon	1,256	139	1,395	1,302	148	1,450	1,362	125	1,487
Aggravated Assault	324	44	368	307	42	349	296	43	339
Liquor Law Violations	2,193	3	2,196	1,516	5	1,521	1,501	7	1,508
Assaults Against Police Officer	836	108	944	1,068	123	1,191	1,091	140	1,231
Arson	13	1	14	9	1	10	11	1	12
Burglary	252	78	330	265	65	330	261	60	321
Counterfeiting	1	0	1	2	0	2	2	0	2
Damage to Property	609	77	686	641	106	747	750	93	843
Disorderly Conduct	1,767	83	1,850	2,107	107	2,214	2,362	124	2,486
Driving while Impaired	1,475	1	1,476	1,648	0	1,648	1,671	3	1,674
Embezzlement	1	0	1	1	0	1	2	0	2
Crimes Against Family & Children	324	1	325	286	1	287	217	2	219
Forgery & Uttering	19	1	20	16	1	17	23	3	26
Fraud	186	4	190	183	2	185	242	8	250
Fugitive Unit	1,101	4	1,105	1,275	38	1,313	884	21	905
Gambling Violations	130	9	139	141	5	146	201	9	210
Homicide	68	6	74	71	8	79	69	3	72
Kidnapping	*	*	*	23	0	23	37	3	40
Motor Vehicle Theft	48	8	56	42	119	50	41	14	55
Narcotics Violations	6,194	161	6,355	5,614	240	5,733	5,187	93	5,280
Other Crimes	1,684	354	2,038	1,926	126	2,166	1,588	96	1,684
Property Crimes	733	152	885	688	4	814	693	132	825
Prostitution	619	4	623	871	458	875	589	3	592
Robbery	730	437	1,167	770	16	1,228	579	328	907
Sex Offenses	190	19	209	250	5	266	297	26	323

Table 11.9. Arrest Data

Table 11.9. Arrest Data (cont.)									
ARREST CATEGORY	2012			2013			2014		
	Adult	Juvenile	Total	Adult	Juvenile	Total	Adult	Juvenile	Total
Sex Abuse	74	7	81	89	5	94	78	11	89
Simple Assault	5,470	536	6,006	5,994	721	6,715	6,535	687	7,222
Theft from Auto	72	11	83	96	11	107	100	14	114
Theft/Other	1,492	191	1,683	1,569	170	1,739	2,080	137	2,217
Traffic Violations	5,573	54	5,627	4,627	36	4,663	4,581	54	4,635
Vending Violations	998	2	1,000	288	1	289	197	0	197
Warrant Charges	3,691	388	4,079	4,142	483	4,625	4,049	604	4,653
Weapon Crimes	814	125	939	630	123	753	630	136	766
Grand Total	**38,937**	**3,008**	**41,945**	**38,457**	**3,173**	**41,630**	**38,206**	**2,980**	**41,186**

NOTE: Non-homicide data available includes arrests made by MPD and other law enforcement agencies in the District of Columbia.The term "juvenile" used in the data is defined as individuals under the age of 18 years (· 17 years of age) at the time of arrest. The "juvenile" totals may include Title 16 cases where juveniles are tried as adults.The data above does not include expunged cases. Due to the data migration project in September 2012 and regular changes in the DC Criminal Code, the 2012-2014 arrest categories will not match the categories listed in reports from prior years. Therefore, year-to-year comparisons of specific arrest categories is not recommended. Arrests for "Kidnapping" fell under "Other Crimes" in 2012

Source: MPD ILEADS Production/Data Warehouse system data. A person may be booked on more than one arrest charge; the totals presented in this report are based solely on the top (most serious) arrest charge.

Fire and Emergency Medical Services Department

The mission of the Fire and Emergency Medical Services Department (F&EMS) is to promote safety and health through excellent pre-hospital medical care, fire suppression, hazardous materials response, technical rescue, homeland security preparedness and fire prevention and education in the District of Columbia.

With a commuter population of 540,000 workers and more than 18 million annual visitors, the District of Columbia's daytime population routinely exceeds 1 million people, including 159,000 Federal workers.

F&EMS provides emergency medical services (EMS), fire suppression, homeland security and special operations response for the District of Columbia, including planned events and activities unique to the nation's capital. The Department is responsible for fire and life safety code enforcement, along with

community based education and prevention programs. F&EMS is the lead first-response agency for managing consequences resulting from natural disasters or other catastrophic events impacting the national capital region.

F&EMS is one of the busiest fire and EMS departments in the United States. During 2014, the Department responded to more than 179,000 emergency incidents, resulting in more than 360,000 emergency vehicle responses (please refer to Table 11.9). Services are provided from 33 neighborhood fire stations and a number of other buildings and locations. The Department operates 33 fire engines, 16 ladder trucks, 39 ambulances, three heavy rescue squads, one hazmat squad, a fire boat and a variety of command and support vehicles.

The majority of the Department's workload involves EMS. During 2014, more than 109,000 District residents and visitors were transported to local hospitals by ambulances

(please refer to Table 11.10). In 2014, the Department responded to more than 2,600 reported structure fire calls. As the primary agency responsible for fire and life safety code inspections and enforcement, the Department conducted more than 11,000 occupancy inspections during 2014 (see Table 11.11).

Community outreach and education continue to be a major focus of the Department. Fire prevention education is provided to District residents through both school based and neighborhood level programs and more than 1,200 smoke alarms were installed in local homes during 2014. Also, the Department provided CPR instruction to more than 1,000 residents and installed more than 750 child safety seats in privately owned vehicles during 2014.

The Department operates a training academy, a fleet maintenance and repair facility, a logistics warehouse and a variety of other support services, all contributing to the public safety mission. The Department employs 2,000 personnel including 1,800 uniformed firefighters, emergency medical technicians (EMTs) and paramedics.

Table 11.10 Fire/EMS Department Incidents and Responses[1]			
	FY 2012	FY 2013	FY 2014
Total Incidents	167,940	167,335	179,319
Fire/Rescue	30,293	29,823	32,313
Medical	137,647	137,512	147,006
Total Responses	347,612	344,195	360,818
Fire Units	191,373	179,504	187,556
EMS Units	156,239	164,691	173,262

[1] Incident and response information is tabulated from computer aided dispatch (CAD) data provided by the Office of Unified Communications (OUC). An incident is one event. A response is one unit responding to an event. Most incidents require more than one unit to respond.

Source: DC Fire and EMS Department

Table 11.11 Medical Transports[2]

	FY 2012	FY 2013	FY 2014
Total Transports	103,358	101,409	109,915
Critical ALS	30,599	36,597	36,438
Non-Critical BLS	72,759	64,812	73,477

[2] Transport information by patient service level (ALS-1, ALS-2 and BLS) is tabulated from billing data provided by a contractual billing company. Total transports, critical ALS and non-critical BLS represent patient accounts billed by service level during each fiscal year.

Source: DC Fire and EMS Department

Table 11.12 Fire Prevention Division Activities[3]

	FY 2012	FY 2013	FY 2014
Total Inspections	11,120	13,803	12,872
Fire Scene Investigations	771	771	710
Structure Fires	422	433	352
Auto Fires[4]	257	296	230
Junior Fire Setter Intervention	57	49	54
Smoke Alarms Given Away	3,475	972	1,769

[3] Fire prevention, fatality and loss information is tabulated from data provided by the Office of the Fire Marshal. Fire loss information (in dollars) is estimated.

[4] Structure and auto fires counts are tabulated from fire investigation reports provided by the Office of the Fire Marshal. Only fires that were investigated are counted.

Source: DC Fire and EMS Department

Table 11.13 Fire Fatalities By Ward[3]

	FY 2012	FY 2013	FY 2014	Total
Ward 1	0	1	1	2
Ward 2	0	0	0	0
Ward 3	0	0	0	0
Ward 4	1	1	2	4
Ward 5	1	2	2	5
Ward 6	1	1	1	3
Ward 7	0	2	1	3
Ward 8	2	1	2	5

Source: DC Fire and EMS Department

Table 11.14 Fire Losses[3]

	FY 2012	FY 2013	FY 2014
Civilian Injuries	60	71	90
Civilian Fatalities	5	8	8
Firefighter Fatalities	0	0	0
Fire Loss in Millions of Dollars	13.7	22.5	17.9

Source: DC Fire and EMS Department

The Office of Unified Communications

Serving a population of over 640,000 residents, and over 2 million people during core business hours, the OUC is located in the Unified Communications Center (UCC) on the East Campus of the St. Elizabeth's Hospital site in the historic Anacostia neighborhood of Southeast Washington, D.C. The UCC is a state of the art secure government center measuring 128,000 square feet, with 12,600 square feet designated for call center operations.

The mission of the OUC is to provide a fast, professional, and cost-effective response to 911 calls for public safety and 311 calls for city services in the District of Columbia. The OUC also provides centralized, District-wide coordination and management of public safety voice radio technology and other public safety wireless and data communication systems and resources. Currently, the agency employs over 300 operations employees who manage the agency's call volume 24 hours a day and 365 days a year. In Fiscal Year (FY) 2014, OUC answered approximately 1.3 million 911 calls for service and created over 800,000 computer aided dispatch (CAD) events. The 311 Operations Division answered 1.2 million city service calls and created over 400,000 service requests.

Summary of Services

The OUC is organized into five distinct divisions, each with their own responsibilities:

- Emergency (911) Operations Division
- Non-Emergency (311) Operations Division
- Technology Division
- Transcription Division
- Agency Management

The 911 Operations Division develops and enforces policy directives and standards regarding public safety communications. The 311 Operations Division processes city service requests and handles telephone reporting of specific crimes. The Technology Operations Division operates and maintains public safety voice radio technology and oversees all land and mobile radio systems tied to the response network. The Transcriptions Division provides audio transcribing for MPD, FEMS, and the 311 Operations Division. Agency Management administers programs supporting the call center and public safety communications. In addition, Agency Management oversees the employee performance management system, new employee training, and in-service training for OUC personnel.

Emergency (911) Operations Division

The 911 Operations Division receives and processes 911 calls accurately and efficiently. Highly skilled call takers and dispatchers use specialized technologies, enhanced with computerized mapping and analytical features, to track and display automatic vehicle

location/global positioning system-equipped FEMS and MPD units. This information is used to make recommendations about the closest and best-equipped units to respond to any given emergency, whether police, fire, or emergency medical services related. Emergency Operations personnel receive ongoing training and updates through the Agency's Training Unit. All calls to 911 are answered by trained universal call-takers at the Office of Unified Communications. For emergency calls, the call-taker takes the information and forwards it via computer to police or fire and emergency medical services dispatchers, also within the call center. The center's CAD system helps with the dispatch of first responders.

Callers to 911 need not reveal their names, addresses, or phone numbers if they wish to remain anonymous when reporting a crime or incident. Callers can simply tell the call-taker that they wish to remain anonymous. At times of unusually high call volume, 911 callers will be placed in a queue. While in the queue, callers will receive

a hold message asking them to stay on the line. Staying on the line allows callers to maintain their place in the queue and be connected to a call taker as soon as possible.

In addition, callers who do not speak English, or who feel more comfortable communicating in a language other than English, can still access 911 services. OUC employs call takers at the UCC who speak Spanish, Vietnamese, Amharic, Japanese, Russian, Korean, and Yoruba. Further, call-takers have immediate access to a language translation service through which translations can be made available in more than 100 different languages and dialects. To access these translation services, callers can simply tell the call-taker they want or need a language translator to help facilitate the call. The District's 911 services are completely accessible to persons who are deaf or hard of hearing and can accept TDD calls, without a separate TDD number, for police or fire and emergency medical services.

Table 11.15. OUC Emergency Operations					
	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Total number of inbound 911 calls	1,357,928	1,431,952	1,428,429	1,368,582	1,276,943
Percent of 911 calls answered within 5 seconds	97.8%	97.4%	96.1%	92%	92%
Percent of calls in which call to queue is 90 seconds or less	25.7%	53.5%	51.5%	55%	77.2%
Source: Office of Unified Communications					

Non-Emergency (311) Operations Division

The 311 Operations Division provides a one-stop service experience for constituents, residents and visitors searching for DC government services, numbers, and information. The 311 Operations Division was designed to make the public's interaction with the city government less frustrating. Residents can dial 311, 24 hours a day, 365 days a year, to request scheduled services such as trash removal, pothole repair, bulk pick-ups, and recycling collection. Callers can also use this number to report a missed scheduled service, inquire about city agency phone numbers and hours of operation, and for other customer service-related questions. 311 customer service representatives also answer 211 calls, the three-digit telephone number

assigned by the Federal Communications Commission for the purpose of providing referrals for health and human services like food, shelter, and financial assistance. Currently, there are 157 service request types for a number of District agencies, including, just to name a few:

- Department of Public Works
- District Department of Transportation
- District Department of Energy
- Department of Motor Vehicles
- Metropolitan Police Department
- Fire and Emergency Medical Services
- Homeland Security and Emergency Management Agency
- Department of Health
- Department of Human Services

OUC also recently implemented Call Back Assistance (CBA). CBA allows callers to schedule a call back during periods of high call volume, when the wait time is longer than average. Call backs can be scheduled at the callers' convenience, up to 7 days out from their initial call. In addition to calling 311, users can also reach 311 services by downloading the DC311 Mobile Application in Google Play or iTunes, submitting a request online via 311 Online at www.311.dc.gov, or tweeting 311 at @311DCgov.

Table 11.16. OUC Non-Emergency Operations					
	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Total Number of inbound 311 calls	1,669,542	1,854,201	2,070,106	1,272,290	1,201,351
Percent of 311 calls answered within 90 seconds	52.4%	75.2%	77%	82%	61%

Source: Office of Unified Communications

Technology Division

The Technology Division of the OUC provides centralized, District-wide coordination and management of public safety and other city services communications technology, including voice radio, 911/311 telephones, CAD systems, citizen interaction relationship management (CIRM) systems, mobile data computing systems, and other technologies such as wireless and data communication systems and resources.

The Division's mission includes the following:

- Development and enforcement of policy directives and standards regarding public safety and non-public safety communications

- Operation and maintenance of public safety and non-public safety voice radio technology

- Management of the building facilities that support public safety voice radio technology and call center technology

- Review and approval of all agency proposals, purchase orders, and contracts for the acquisition of public safety voice radio technology and call center technology systems, resources, and services

Communications interoperability makes it possible for emergency response agencies responding to catastrophic accidents or disasters to communicate effectively with one another. Within the Technology Division, the District of Columbia Communication Unit/Radio Cache is responsible for providing interoperable communication between federal, local, District government, and neighboring state agencies. Interoperable communications include the use of voice, data and

video applications to provide Communication Liaisons (COML) and Communications Technicians (COMT) with the tools needed to contact each other during planned or un-planned events.

Table 11.17. OUC Technology Operations Division					
	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Percent of time radio system is fully functional	99%	99%	99%	99%	99%
Percent of time 911/311 telephony system is fully functional	99%	99%	99%	99%	99%
Source: Office of Unified Communications					

Key Initiatives

Next Generation 911

The OUC has developed a plan to support the continued availability of reliable and robust 911 telecommunication services. Over the next 2 years, the Agency will replace aging computer components and expand the capabilities of the existing 911 telecommunication equipment to support Next Generation 911 (NG911). One key innovative component of the NG911 initiative will be Text-to-911, which will launch in the District in early FY16. Once the project is complete, the District will have fully interoperable, public-safety grade NG911 Regional Call Processing Network, compliant with NG911 standards, with 100% of NCR public-safety answering points (PSAPs) transitioned off the current 911 Verizon Network.

Next Generation 311

The OUC is also replacing its aging 311 CIRM application with best in class next-generation 311 solutions (NG311). Although the current system provides the OUC with the ability to manage all city requests, systemic issues have impacted performance and led to thousands of open service tickets. The new cloud-based system is built on a more reliable

infrastructure that will enhance end-user/customer experiences, and provide the OUC with a greater ability to manage city service requests using the enhanced platform. The NG311 initiative also includes call handling application upgrades and text to 311.

Transcription Division

The Transcription Division provides audio transcriptions of conversations between first responders, call takers, dispatchers, and callers requesting services of DCMPD, DCFEMS and other public safety and governmental organizations. Annually, the Division fulfills between 7,000 to 10,000 requests for recorded 311 non-emergency and 911 (police/fire and EMS) emergency calls, radio communications and chronologies to both federal and District Government agencies. Requesting agencies include the United States Attorney Office (USAO), Office of the Attorney General (OAG), Office of Police Complaints (OPC), MPD, and FEMS as well as other law enforcement agencies. The Division is staffed by trained telecommunications transcriptionists. The transcriptionists receive most their requests through a specialized tracking system and are often asked to testify in court on behalf of OUC to authenticate the 911 calls and/or to explain the summary of a chronology under direct examination by OAG and USAO attorneys.

Table 11.18. OUC Transcription Division					
	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Assistant United States Attorney package completion within mandated timeline	95%	100%	100%	100%	100%
Office of the Attorney General package completion within mandated timeline	97%	100%	100%	100%	100%
Completion of internal investigation complaints within 72 hours	97%	100%	100%	100%	100%
Source: Office of Unified Communications					

Agency Management

Agency Management administers programs supporting call center and public safety communications. In addition, Agency Management oversees the employee performance management system, new employee training and in-service training for OUC personnel. OUC is also responsible for working closely with other District agencies and managing the Telephone Calling Systems Fund at the carrier/provider level. Frequently referred to as the 911 Fund, the Fund was established as a means to defray technology upgrade costs incurred by OUC at the District's PSAP in providing the 911/311 call system. Each provider is responsible for remitting 911 Fund assessments to the District on a monthly or quarterly basis and may include the amount assessed from each customer as a separate line item on the customer's invoice. All providers of local voice services, including wire line, wireless, and Voice-over-Internet-Protocol Service Providers, providing services in the District of Columbia are required to contribute to the Fund.

OUC is actively engaged with the public in a number of ways, including District-wide community outreach events that reach out to every ward and residents of all ages. OUC continually strives to improve the quality of its services and encourages the public to provide feedback by filling out at short survey at www.grade.dc.gov. Social media platforms like Twitter and Facebook also provide insights; "reviews", and other feedback that is applied to the overall agency grade rating. OUC has consistently received high marks for customer satisfaction, maintaining a B or better rating since the inception of this program. OUC has proudly hosted numerous international and national groups, dignitaries, and public safety officials from as far away as Australia, Korea, and China. Further, Washington DC's cutting edge PSAP has supported the benchmarking efforts of both 911 and 311 centers locally and around the world.

Table 11.19. OUC Agency Management					
	FY 2010	FY 2011	FY 2012	FY 2013	FY 2014
Number of Community Engagement Events	--	--	--	41	82
Percent of time OUC's grade.dc.gov customer satisfaction rating is rated "B" or better	--	--	--	100%	100%
Source: Office of Unified Communications					

The DC Department of Corrections

The D.C. Department of Corrections (DOC) is an integral part of the Public Safety and Justice system in Washington D.C. The mission of the DOC is to ensure public safety for the citizens of the District of Columbia by providing an orderly, safe, secure, and humane environment for the confinement of pretrial detainees and sentenced inmates, while affording those in custody meaningful rehabilitative opportunities that will assist them to constructively re-integrate into the community. A small number of felons with sentences of 18 months or less are also housed, as well as parole violators awaiting hearing, inmates awaiting release to other jurisdictions (holds), and inmates incarcerated elsewhere whose presence is required to resolve legal matters under consideration in the District (writs).

The capacity funded at the 6 facilities that comprise the DOC exists to serve the detention requirements of the residents of the District of Columbia in support of Public Safety and Justice. The Central Detention Facility is fully operated by the Department of Corrections. Contractually funded bed space exists at The Correctional Treatment

Facility, an ACA accredited adult detention center operated by the Corrections Corporation of America, and 4 halfway houses through February 6, 2014: Efforts for Ex Convicts, Hope Village, Fairview House for Women, and Extended House, each of which house individuals in a community setting. DOC contracted with 3 Halfway Houses during the period from February 7, 2014 through the end of 2014, Hope Village, Fairview House for Women, and Extended House.
The DOC operates one of the nation's largest jail systems and has recently operated in the range of 62% of available capacity. Approximately 60% of DOC inmates are District residents, 20% are from out of state, and 5% declare themselves homeless. The remaining inmates offer incomplete or incorrect address information. Of District residents in custody, 50% hail from wards 7 and 8, and another 15% from ward 5. Approximately 10% each are from wards 4 and 6; and 7% from ward 1. About 7% of self-declared District addresses had no match on the DC GIS system and could not be geo-coded. The remaining District residents in custody are from wards 2 and 3.

Capacity utilization is a function of detention requirements determined not only by the volume and rate of US Attorney's Office originated litigation; but also by average case processing time (which affects length of stay or the length of time for which existing bed space is occupied); enforcement policy of agencies such as the US Parole Commission (USPC); staffing levels at the Public Defender's Service, US Attorney's Office, and Courts; sentencing policy at the Courts, as well as bed space availability at other jurisdictions such as Drug Treatment Programs, and the Federal Bureau of Prisons (FBOP). Bed space at the DOC exists to serve the public safety and justice needs of District residents. Roughly 40% of all intakes remain in custody a week or less; of those who remain in custody 30 days or more the average length of stay is roughly 240 days. Roughly 60% of all individuals who pass through DOC return directly to the community each year; another 23% are sent to federal facilities, and the remaining 17% are released to external jurisdictions. The 12 month re-incarceration rate for DOC inmates is 23%, and the 3 year re-incarceration rate is 46.5%.

Ninety percent of individuals in custody are male, ten percent are female; ninety two percent are black, 5% Hispanic, 2% white and 1% are Asian or other race. Over 50% of all individuals in custody have fewer than 12 years of formal schooling. Most are functionally illiterate. Inmates range in age from 18 – 80; the average inmate is 36 years old. One in three requires some form of mental health services.
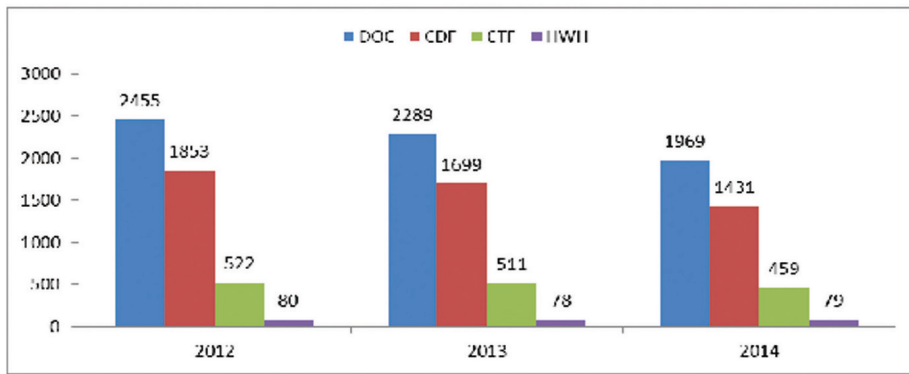
One of the key strategies to reducing the community's detention capacity requirements is to act early to identify individuals with special needs and learning challenges to provide them with family based, faith based and community based means to living a productive, dignified, and community integrated life based on their skills and talents. By working together it is possible to expect 100% of young people to have the opportunity to live a happy, productive, dignified, and community integrated life as full contributing members of a vibrant and peaceful society.

Information helpful to understanding the Department of Corrections' mission, service based budget allocation, and characteristics of the inmate population is presented in the following pages.
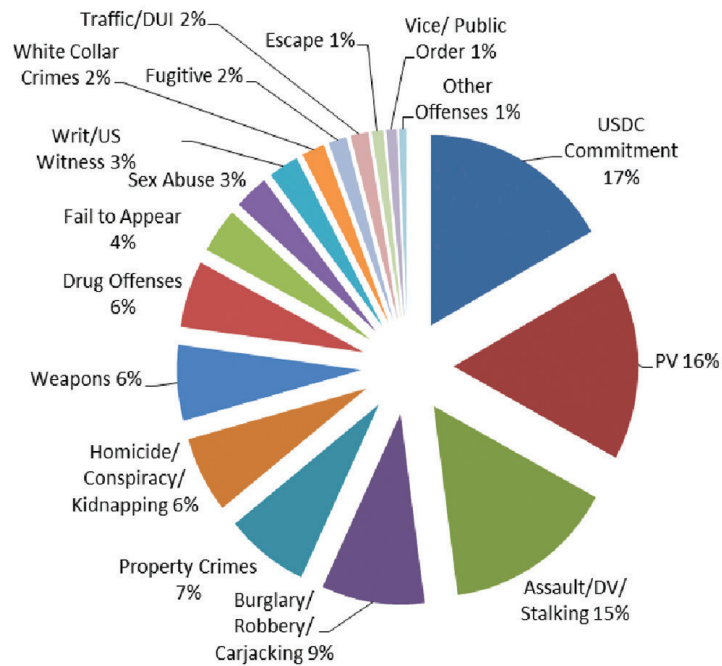
Detention

During calendar years 2012 through 2014 inmate population at

all facilities decreased steadily over time from a 2012 DOC level of approximately 2455 inmates, to a 2014 level of fewer than 2000 inmates. The average daily population (ADP) at the Central Detention Facility, CDF, decreased from 1853 to 1431; at the Correctional Treatment Facility, CTF, the ADP decreased from 522 to 459; and, at the halfway houses, HWH, remained steady at around 80 inmates.

Figure 11.1. Average Daily Inmate Population for the Department of Corrections System
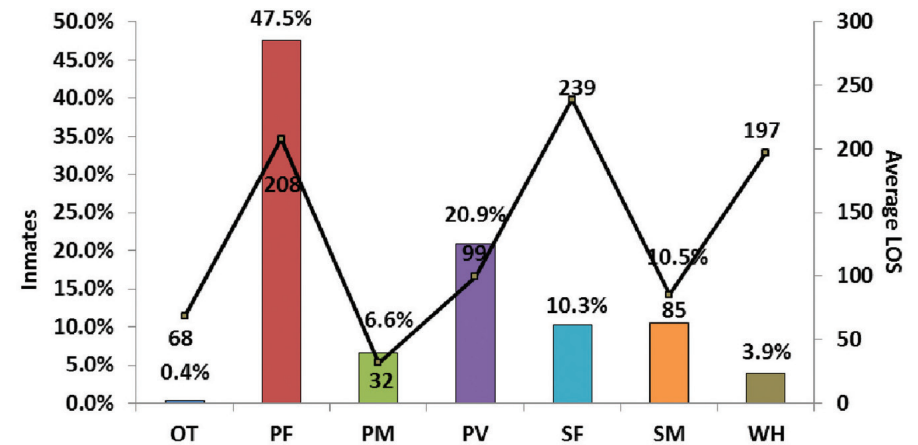

Source: Office of the Chief Financial Officer USMS = US Marshall's Inmate Court Transport security.

Figure 11.3. Charges by Most Serious Offense for Inmates in Custody

Source: Office of the Chief Financial Officer USMS = US Marshall's Inmate Court Transport security.

Figure 11.2. Legal Status of Inmates in Custody and Average Length of Stay in Days

Source: Office of the Chief Financial Officer USMS = US Marshall's Inmate Court Transport security.

Figure 11.4. Annual DOC Intakes by Calendar Year

Source: Office of the Chief Financial Officer USMS = US Marshall's Inmate Court Transport security.

Figure 11.5. Annual DOC Releases by Calendar Year

Source: Office of the Chief Financial Officer USMS = US Marshall's Inmate Court Transport security.

Figure 11.7. FY 2014 Budget by Service

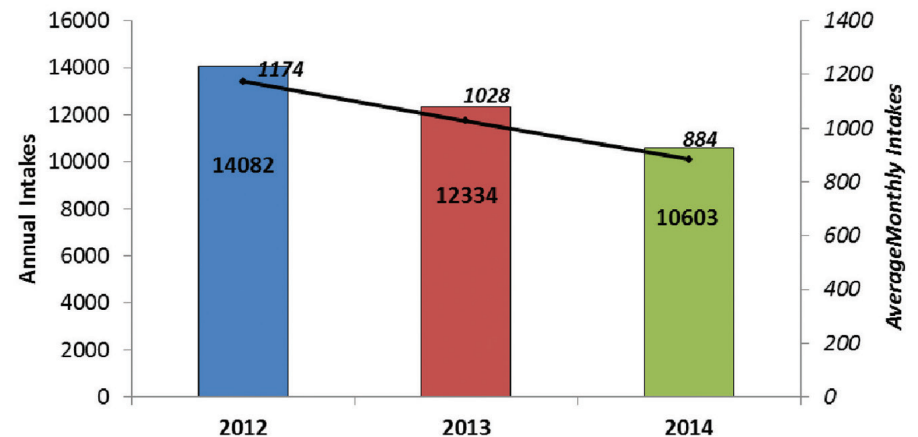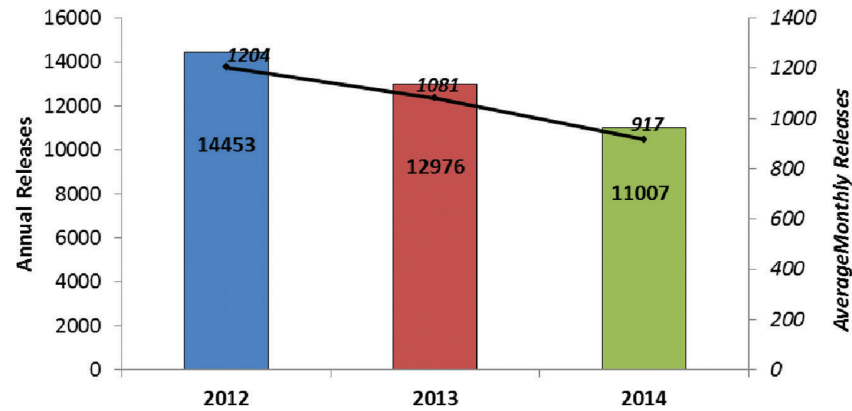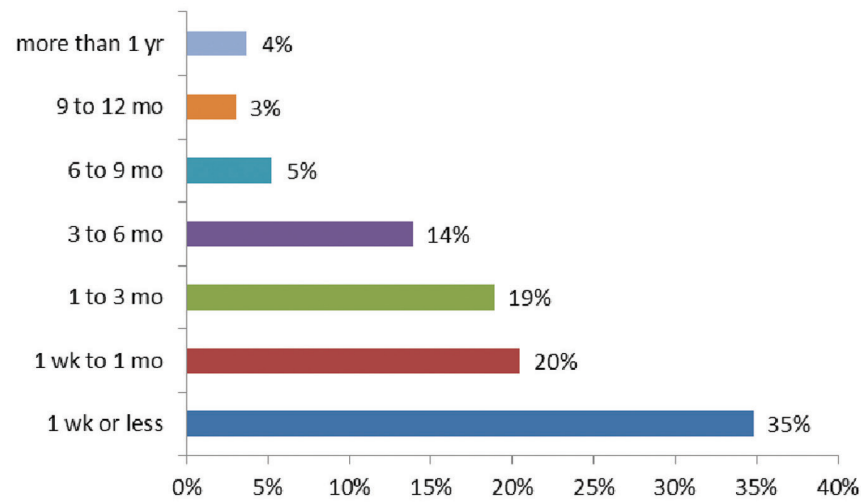

Source: Office of the Chief Financial Officer USMS = US Marshall's Inmate Court Transport security.

Figure 11.6. Releases by Length of Stay

Source: Office of the Chief Financial Officer USMS = US Marshall's Inmate Court Transport security.

Inmate Legal Status and Charges

Like most other large urban jails in the USA approximately 75% of all inmates on any given day have one or more legal matter pending. Inmates are most frequently incarcerated on drug related offenses, parole or supervised release violation, and assault, domestic violence or stalking related charges. Violent and dangerous offenses are the most serious charge for approximately 30% of the inmate population. The charge distribution does not vary by population segment and is fairly constant across cohort groups.

Intakes and Releases and Lengths of Stay

The resources required to operate a system of detention facilities depend not only on the number of individuals who must be cared for on a daily basis but also the number of intakes and releases to the system. About 9,000 individuals passed through DOC in 2014, some of them several times. This required over 30,000 inmate movements to and from the DOC, and the processing of over 30,000 legal documents.

The DC Department of Corrections, like the nation's other large jails serves at least two distinct inmate populations. Approximately 55% of releases stay 1 month or less, another 34% stay between 1 and 6 months. Of inmates in custody on any given day the average inmate has been in custody for approximately 6 months. Lengths of stay generally increase with number and severity of charges.

Operating Costs per Average Daily Population (ADP) and Intake and Expenditure by Service

Operating costs can be considered in 2 ways: per intake, or per inmate per day (annual cost per ADP).

Figure 11.7 depicts the portion of each budget dollar required to provide various agency services.

Operating Expenditure and Costs

Providing the infrastructure, facilities, and services required to commit and release 10,000 individuals a year, transport them to and from court, and ensure health care, food, clothing, and a variety of services are provided to approximately 2000 inmates each day, and operate on a 24x7x365 basis is challenging and not inexpensive. The DOC operating budget was 134 million dollars in FY 2012, of this roughly 50% was associated with personal services expenditures. On a national basis 70-80% of the costs associated with corrections agencies are personal services related according to the National Institute of Corrections.

Table 11.20. Annual Cost Per Inmate Per Day: FY 2014		
	Annual Cost per ADP	Average Daily Cost per ADP
DOC System	**DOC System ADP 2041**	
DOC Housing	$66,484.75	$182.15
DOC Health Care	$14,289.75	$39.15
DOC Food	$ 1,894.35	$5.19
CDF	**CDF ADP 1490**	
	$66,484.75	$182.15
CDF Housing	$14,289.75	$39.15
CDF Health Care	$1,894.35	$5.19
CDF Food		
CTF	**CTF ADP 472**	
	$39,894.50	$109.30
CTF Housing	$14,289.75	$39.15
CTF Health Care	$1,894.35	$5.19
CTF Food		
Halfway Houses	**Halfway Houses ADP 79**	
Halfway House Housing Costs	$26,290.25	$72.03
Source: DC Department of Corrections		

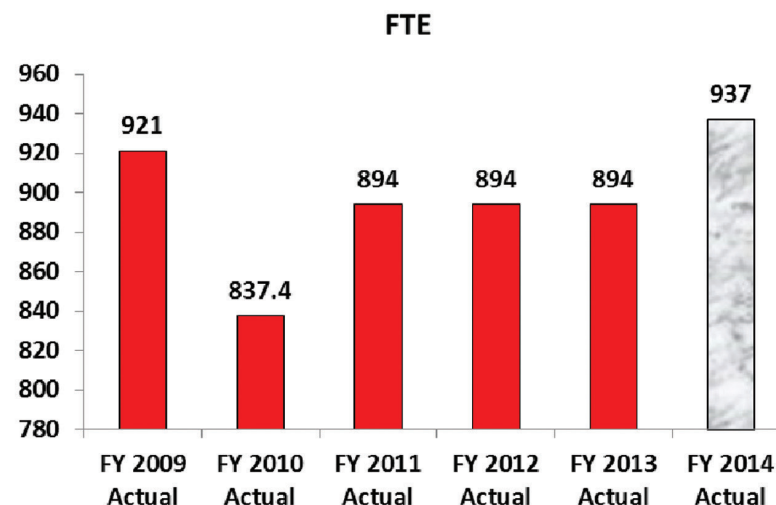| Table 11.21. Annual Cost Per Intake: FY 2014		
	Annual Cost per Intake	Average Daily Cost per Intake
DOC System	**DOC System Intakes** 11245	
DOC Housing	$12,652.39	$34.66
DOC Health Care	$2,593.65	$7.11
DOC Food	$343.83	$0.94
Source: DC Department of Corrections		

Figure 11.8. Agency Budget and Expenditure by Fiscal Year

Source: DC Department of Corrections

There are 937 Full Time Employees (FTE) authorized at the Department of Corrections. In October 2013 DOC assumed operations of the Central Cell Block at 300 Indiana Avenue. This resulted in a transfer of positions from MPD to DOC. Nearly 70% of all FTE and 65% of all PS budget supports 671 frontline correctional officers who conduct the day to day operations at the CDF and CCB.

Figure 11.9. Full Time Employees

Source: DC Department of Corrections

Youth Rehabilitation Services

Summary

Research shows that the best way to improve long-term public safety is to give court-involved youth the tools they need to become successful adults. To help prepare youth to succeed, every aspect of DYRS' culture-from staff training, to youth programs, to our methods of staying accountable-reflects the belief that youth can change. This approach is called Positive Youth Development because it puts emphasis on youth becoming successful adults.

Using this approach, we are improving public safety and changing the lives of the youth in our care. Year after year fewer of our youth are being re-arrested and re-convicted. These improvements are happening even as we met our legal mandate to place youth in the least restrictive, most homelike environment consistent with public safety.

Population Statistics and Trends

In FY2014, the average daily population of youth committed to DYRS was 470 (Table 11.21). This figure includes committed youth placed in secure facilities, in community-based residential facilities, and at home. The average daily population of detained youth was 73. Throughout FY2014, DYRS served a total of 681 committed youth and 591 detained youth. Also in FY2014, there were 156 total new commitments to DYRS.

Table 11.22. DYRS Average Daily Committed Population, FY2007-FY2014	
Fiscal Year	Average Daily Population
2007	418
2008	606
2009	826
2010	977
2011	1,005
2012	850
2013	604
2014	470
Source: Department of Youth Rehabilitation Services	

Population Demographics

The demographic characteristics of new commitments has remained relatively stable since FY2004. However, in FY2014, the percentage of newly committed females increased to its peak percentage at 16% (Table 11.22).

Table 11.23. New Commitments, Demographic Breakdown, FY2004-FY2014					
Fiscal Year	Male	Female	Black	Latino	Other
2004	87%	13%	93%	7%	0%
2005	88%	12%	97%	3%	0%
2006	91%	9%	96%	3%	0%
2007	87%	13%	98%	2%	0%
2008	92%	8%	99%	1%	0.3%
2009	90%	10%	96%	4%	0.3%
2010	91%	9%	98%	2%	0.3%
2011	86%	14%	96%	4%	0%
2012	88%	12%	95%	4%	1%
2013	86%	14%	95%	3%	1%
2014	84%	16%	99%	1%	0%
Source: Department of Youth Rehabilitation Services					

The committed and detained populations are demographically similar, though the detained population has a higher percentage of females than the committed population and a lower percentage of males (Table 11.23).

Table 11.24. Committed and Detained Populations		
	Committed	Detained
Male	86.34%	69.20%
Female	13.66%	30.80%
Black	97.50%	97.63%
Latino	2.35%	2.37%
White	0.15%	0.00%
Total Youth	681	591
Source: Department of Youth Rehabilitation Services		

Population by Offense Type

The percentage of youth committed on a felony offense is declining. In FY2008, 70% of all newly committed youth were brought to DYRS with a felony conviction, while in FY2014 only 40% of new commitments had a felony conviction (Table 11.24).

Table 11.25. New Commitments: Committing Offense Breakdown FY2004-2014		
Fiscal Year	Felonies	Misdemeanors
2004	65%	35%
2005	62%	38%
2006	64%	36%
2007	68%	32%
2008	70%	30%
2009	57%	43%
2010	49%	51%
2011	47%	53%
2012	44%	56%
2013	43%	57%
2014	40%	60%
Source: Department of Youth Rehabilitation Services		

Population by Placement Type

On any given day during FY2014, over half of all committed youth would be living in the community, either in a community-based residential facility (e.g. group home), an independent living program, a foster home, or in their family home (Table 11.25).

Table 11.26. Placement Types by Average Daily Population, Average Length of Stay, and Gender, FY2014					
		Average Daily Population	Average Length of Stay (days)	Male	Female
Community Based Placements	Home	133	144.7	87%	13%
	Community Based Residential Facilities	71	57.5	88%	12%
	Foster Homes	21	157.2	55%	45%
	Independent Living Programs	12	148.6	88%	12%
	Total	**237**			
Non-Community Placements	Detention Center or Jail	48	150.6	95%	5%
	Residential Treatment Center	85	169.8	77%	23%
	New Beginnings	49	194.2	100%	0%
	Youth Services Center*	17	5.5	85%	15%
	Awaiting Placement	20	14.9	82%	18%
	Psychiatric Residential Treatment Facility	0	0.0	-	-
	Total	**219**			
Abscondence	Abscondence	25	29.1	83%	17%

*Committed youth only; all enrollments, regardless of length
Source: Department of Youth Rehabilitation Services

Table 11.27. DC YouthLink Enrollment Data, FY2010-FY2014

		FY2014		FY2013		FY2012		FY2011		FY2010	
		#	%	#	%	#	%	#	%	#	%
Engagement	DC YouthLink (unique youth)	522	-	609	-	682	-	777	-	580	-
	% of Total Commitments	-	77%	-	67.40%	-	59%	-	61%	-	45%
Lead Agencies Enrollment	East of the River Clergy Police Community Partnership	310	59%	386	63.38%	451	66%	514	66%	377	65%
	Progressive Life Center	210	40%	223	36.62%	255	37%	294	38%	220	38%
	NCCF	2	0%	-	-	-	-	-	-	-	-
Gender	Boys	441	84%	522	85.71%	605	89%	689	89%	527	91%
	Girls	81	16%	87	14.29%	77	11%	88	11%	53	9%
Age at Enrollment	12	1	0%	0	0.00%	2	0%	2	0%	1	0%
	13	1	0%	4	0.66%	6	1%	9	1%	6	1%
	14	11	2%	17	2.79%	19	3%	24	3%	24	4%
	15	39	7%	48	7.88%	52	8%	75	10%	55	9%
	16	95	18%	102	16.75%	137	20%	163	21%	119	21%
	17	115	22%	171	28.08%	211	31%	215	28%	146	25%
	18	138	26%	134	22.00%	170	25%	186	24%	135	23%
	19	71	14%	84	13.79%	122	18%	126	16%	74	13%
	20	42	8%	48	7.88%	68	10%	56	7%	27	5%
	21	9	2%	1	0.16%	-	-	-	-	-	-

Source: Department of Youth Rehabilitation Services

Table 11.28. Youth Services Center Population by Demographics, FY2009-FY2014

Fiscal Year	Average LOS (days)	Gender		Age					Number of Youth
		Male	Female	14 and Under	15	16	17	18+	
2009	22.6	87%	13%	18%	21%	27%	27%	7%	1573
2010	22.9	86%	14%	17%	22%	27%	27%	6%	1367
2011	22.6	79%	21%	17%	22%	27%	24%	10%	1149
2012	19.0	80%	20%	14%	18%	25%	27%	15%	1385
2013	26.5	78%	22%	16%	18%	23%	28%	16%	1981
2014	25	76%	24%	19%	20%	20%	24%	24%	1684
	*all stays less than 2 days removed.								

Source: Department of Youth Rehabilitation Services

Table 11.29. DC YouthLink Service Connections By Types of Service, FY2010-FY2014									
	FY 2014		FY 2013		FY 2012		FY 2011		FY 2010
Type	#	%	#	%	#	%	#	%	#	%
Relationships	360	78%	433	86%	521	79%	518	81%	214	71%
Work	246	53%	236	47%	324	49%	194	31%	62	20%
Education	383	83%	180	36%	190	29%	253	40%	86	28%
Health	207	45%	279	55%	278	42%	192	30%	75	25%
Creativity	0	0%	10	2%	29	4%	13	2%	10	3%
Community	124	27%	21	4%	65	10%	2	0%	3	1%
Average Services per Enrollment	2.86	-	2.3	-	3.6	-	2.4	-	1.8	-

Source: Department of Youth Rehabilitation Services

Table 11.30. Outcomes for Youth Committed to DYRS				
Number Education Milestones Achieved				
Milestone	FY 2011	FY 2012	FY 2013	FY 2014	Grand Total
Advancement to Next Grade Level*			34	71	105
GED/High School Diploma*	28	48	18	32	126
Post-Secondary Enrollment	6	8	24	22	60
TOTAL	34	56	76	125	291
Number of Workforce Development Milestones Achieved				
Milestone	FY 2011	FY 2012	FY 2013	FY 2014	Grand Total
Certificates Earned**	23	117	106	92	338
25 Hours of Community Service Completed			7	31	38
Paid Work	5	51	38	35	129
TOTAL	28	168	151	158	505

* These data primarily reflect outcomes reported by service providers with DC YouthLink.
**Examples include Food Handler's License, A+ Technology Certification, and Microsoft Office Proficiency.

Source: Department of Youth Rehabilitation Services

Population at the Youth Services Center

During FY2014, the average daily population at the Youth Services Center was 81.3 youth (67.7 detained youth, 13.7 committed youth; overnight youth excluded). With a capacity of 88 youth, the Youth Services Center spent much of the year at or below capacity after a population surge in FY2013.

After remaining fairly stable over the last three fiscal years, the average length of a youth's stay at the Youth Services Center declined during FY2012, from about 23 days to 19 days. While the average length of stay increased to its peak at about 27 days in FY2013, it is on the decline again with an average of 25 days spent at Youth Services Center in FY2014. Over the past six fiscal years, the percentage of female residents at the Youth Services Center has risen from 13% to 24%. The population has also grown increasingly older, with the percentage of residents aged 18 or older rising from 7% in 2009 to 24% in FY2014 (Table 11.26).

2014 YouthLink Data

DC YouthLink, which began in 2009, has grown from serving 45% of DYRS youth to serving 77% of the total DYRS population, most of whom are between 17 and 19 years old (Table 11.27).

In FY2014, DC YouthLink youth were connected to an array of services across the six Positive Youth Justice domains. More than 75% of youth were enrolled in relationship-building service, such as mentoring, while over half received job readiness training. Close to half of DC YouthLink participants were enrolled in physical or behavioral health services and more than 80% received education assistance (Table 11.28).

With the continued growth of DC YouthLink, DYRS youth are achieving impressive milestones in educational and workforce development – acquiring the necessary skills to transition into adulthood as positive members of society (Table 11.29).

Office of the Chief Medical Examiner

Mission Statement

The mission of the Office of the Chief Medical Examiner (OCME) is to investigate all deaths in the District of Columbia that occur as the result of violence (injury), as well as those that occur unexpectedly, without medical attention, in custody or pose a threat to public health.

OCME provides forensic services to government agencies, health care providers and citizens in the Washington DC metropolitan area to ensure that justice is served and to improve the health and safety of the public.
The OCME was established in 1971. The system began as a coroner system in the early 1870's and existed as such for 100 years before becoming a medical examiner system. Dr. Roger A. Mitchell, Jr., current Chief Medical Examiner is the 12th Chief Medical Examiner for the District of Columbia.

The OCME serves the families of residents and visitors in our nation's capital. This service comes at a time when families are most at need due to the loss of their loved one. Whether a gunshot wound, homicide, a hanging suicide, a slip and fall of the elderly, or a sudden expected death in infancy, the OCME is here to serve. We operate 24 hours a day, 7 days a week, and 365 days a year. We investigated nearly 3,009 deaths that occurred in Calendar Year (CY) 2012 and 3,200 in CY 2013. The OCME performed 706 autopsies in CY 2012 and 754 autopsies in CY 2013. We intend to serve our community and stakeholder groups through timely and accurate death investigations that ensure 90% of our reports are completed within 90 days.

Summary of Findings for all Manners of Death – 2012

During the Calendar Year (CY) 2012, 3,009 cases were reported to and investigated by the District of Columbia - Office of the Chief Medical Examiner (DC OCME).

Table 11.31. 2012 Medical Examiner Cases by Manner of Death

Manner	Full Autopsy Examination	Partial Autopsy Examinations	External Examina-tions	Review of Medical Records	Total
Accident	176	2	80	10	268
Homicide	96	0	0	0	96
Natural	341	44	201	7	593
Stillbirth	4	0	1	0	5
Suicide	43	0	1	0	44
Undeter-mined	46	0	1	1	48
Total	703	46	284	18	1054

Note: The above table does NOT include the following cases that were reported to OCME for further investigation: Nineteen (19) cases were "Non-Human Remains; and four (4) cases were remains that were disinterred from an historical burial site.

Source: Office of the Chief Medical Examiner 2012 Annual Report

Table 11.32. HOMICIDES - Homicides by Cause of Death

Cause	Number of Homicides	% of Total Homicides
Firearms	59	61.46%
Sharp Force	16	16.67%
Blunt Impact	9	9.38%
Other	8	8.33%
Poisoning	3	3.13%
Asphyxia	1	1.01%
Total	96	100%

Note: The percentages for this homicide table are not rounded because values when rounded do not equal 100%

Source: 2012 Office of the Chief Medical Examiner Annual Report

HOMICIDES

The OCME investigated 96 Homicides in the CY 2012. This report reveals that homicides continued to be more prevalent in black males and in persons between the ages of 20-29 than any other category. The weapon of choice was firearms. The peak incidents occurred in June, November and December.

Toxicology Findings: Toxicology testing was requested on all 96 Homicide cases investigated. Drugs were present in 67 of the homicide cases investigated. The most commonly detected drugs in homicide cases were: Ethanol (N=25), Marijuana Metabolites* (23); Phencyclidine PCP (9), Morphine (8). Cocaine (7), and Pentobarbital (4)

*Marijuana metabolites are not confirmed in homicide cases.

SUICIDES

The OCME investigated 44 suicides in the CY 2012. This report reveals that suicides were more prevalent in black males and in persons between the ages of 40-49. Overall blacks represented 48% of the decedents (N=21) this year. Peak incidents occurred in October.

Toxicology Findings: Toxicology testing was requested for 43 of the 44 Suicide cases investigated. Overall, drugs were present in 27 of the suicide cases investigated. The most commonly detected drugs were: Ethanol (N=17), Cannabinoids (6); Venlafaxine (6); Cocaine (4); and Promethazine (4).

Table 11.33. SUICIDES - Suicides by Cause of Death		
Cause	Number of Suicides	% of Total Suicides
Hanging	15	34.09%
Firearms	9	20.45%
Blunt Impact Trauma - Jump from height (3) - Metro (2)	5	11.36%
Intoxication	5	11.36%
Poisoning	2	6.82%
Sharp Object	3	6.82%
Suffocation (Plastic Bag over head)	3	4.55%
Carbon Monoxide Poisoning	2	4.55%
Total	**44**	**100%**

Source: 2012 Office of the Chief Medical Examiner Annual Report

ACCIDENTS

The OCME investigated 268 accidents in the CY 2012. Of the 268 cases investigated, 140 were the result of blunt force trauma, of which 43 were traffic-related deaths. Also, 84 of the accidental deaths occurred as a direct result of prescription and/or illicit drug use. Peak incidents for accidental deaths overall occurred in July.

Toxicology Findings for Accidents: Toxicology testing was requested for 178 of the 268 Accident cases investigated, and drugs were present in 133 of these cases. The most commonly detected drugs were: Morphine (N=55), Cocaine (54), Ethanol (52), 6-acetylmorphine (29), Methadone (20), Marijuana Metabolites (19), Oxycodone (12), Phencyclidine (11) and Citalopram (10).

Traffic-related Accidents

The majority of traffic accident deaths occurred in the following categories: males, blacks, and drivers between the ages of 20-29. Peak incidents for traffic accidents only occurred in January.

Toxicology Findings for Traffic-related accidents: Toxicology testing was requested for 35 of the 43 Traffic-related Accidents, and drugs were present in 18 of these cases. The most commonly detected drugs were: Ethanol (N=8); Marijuana Metabolite (7); Cocaine (1) and PCP (1).

In the 8 traffic deaths positive for ethanol, 5 were greater than twice the legal limit (0.16 g/100 mL) for driving under the influence in the District of Columbia. The legal limit for Blood Alcohol Concentration in the District of Columbia is 0.08% while driving.

Table 11.34. ACCIDENTS - Accidents by Cause of Death		
Cause	Number of Deaths	% of Total Accidents
Blunt Injury - Fall (95) - Traffic (43) - Other (2)	140	52.24%
Intoxication	84	31.34%
Thermal	15	5.60%
Other	7	2.61%
Hyperthermia	5	1.87%
Hypothermia	5	1.87%
Therapeutic Complications	5	1.87%
Drowning	3	1.12%
Asphyxia	2	0.75%
Electrocution	2	0.75%
Total	**268**	**100%**

Source: 2012 Office of the Chief Medical Examiner Annual Report

Table 11.35. TRAFFIC ACCIDENTS - Role of the Decedent in Traffic Deaths		
Cause	Traffic Deaths	% of Traffic Deaths
Driver - Motor Vehicle(12) Motorcycle (7) Moped/Scooter(1)	20	46.51%
Pedestrian - Metro Bus (1) Dump truck (1) Motor Vehicles (13)	15	34.88%
Passenger - Motor Vehicle (5) Utility Vehicle (1)	6	13.95%
Unknown - Role Unknown	2	4.65%
Total	**43**	**100%**

Source: 2012 Office of the Chief Medical Examiner Annual Report

NATURAL DEATHS

The OCME investigated 593 Natural deaths in CY 2012. This report reveals that the leading cause of death in Natural cases is Cardiovascular Disease with 367 deaths, followed by Central Nervous System (Brain) with 29 deaths. It is important to note that for the first time in last 10-years Alcoholism is not the second leading cause of death amongst Natural deaths.

Toxicology Findings: Toxicology testing was requested for 342 of the 593 Natural cases investigated. Drugs were present in 162 Natural cases investigated. The most commonly detected drugs were: Ethanol (N=64), Acetone (21), Marijuana Metabolites (20), Morphine (19), Diphenhydramine (16), Methadone (11), Cocaine (10), Oxycodone (8) and Codeine (7).

Table 11.36 NATURAL DEATHS - Natural Deaths by Cause		
Cause	Number of Deaths	% of Total Natural Deaths
Cardiovascular Disease	367	61.89%
Central Nervous System (Brain)	29	4.89%
Respiratory Disease	28	4.72%
Alcoholism	27	4.55%
Cancer	25	4.22%
Infection	18	3.04%
Other	18	3.04%
Therapeutic Complications	18	3.04%
Diabetes	17	2.87%
Infectious Disease	11	1.85%
Gastrointestinal Disease	10	1.69%
Pulmonary Embolism (PE)	10	1.69%
Blood Disease/Hemopoietic System	3	0.51%
Complications of Drug Abuse	3	0.51%
Genetic Disorder	3	0.51%
Obesity or Complications of Obesity	2	0.34%
AIDS	1	0.17%
Complications of Pregnancy	1	0.17%
Connective Tissue Disease	1	0.17%
Immune System Disease	1	0.17%
Total	**593**	**100%**

Source: 2012 Office of the Chief Medical Examiner Annual Report

UNDETERMINED

The OCME investigated 48 cases where the manner of death was concluded to be "Undetermined." An "Undetermined" manner of death is a result of inconclusive evidence as to the circumstances of the death at the time and/or inconclusive examination results. As additional information is received, the death may be appropriately re-certified. Note: Sudden Unexpected Deaths in Infancy (SUID) carry an "Undetermined" manner of death.

Toxicology Findings: Toxicology testing was requested for 44 of the 48 Undetermined deaths investigated. Drugs were present in 21 of the Undetermined cases investigated. The most commonly detected drugs were: Ethanol (N=11), Cocaine (3); Fentanyl (3); Morphine (2) and Sertraline (2).

Table 11.37. UNDETERMINED - Undetermined by Cause of Death		
Cause of Death	Number of Deaths	% of Total Accepted Cases
Asphyxia	1	2.08%
Blunt Impact Injuries	7	14.58%
Drowning	4	8.33%
Drug Overdose/Poisoning	5	10.42%
Other	2	4.17%
SUID	9	18.75%
Thermal Injury	4	8.33%
Undetermined	16	33.33%
Total	**48**	**100%**
Source: 2012 Office of the Chief Medical Examiner Annual Report		

STILLBIRTHS

The OCME investigated 4 Stillbirth deaths in CY 2012. Toxicology Findings: Toxicology analysis was performed on all four of the Stillbirth cases. No cases were positive for drugs.

Summary of Findings for all Manners of Death – 2013

During the Calendar Year (CY) 2013, 3,221 cases were reported to and investigated by the District of Columbia - Office of the Chief Medical Examiner (DC OCME).

Note: The above table includes the following "Bone" cases: "Non-Human Remains" (11 cases) and one External examination, which was a tooth fragment.

Table 11.38. 2013 Medical Examiner Cases by Manner of Death						
Manner	Full Autopsy Examination	Partial Autopsy Examination	External Examination	Review of Medical Records	Non-Human	Total
Accident	211	1	94	10	0	316
Homicide	108	0	0	0	0	108
Natural	296	48	208	7	0	559
Stillbirth	2	0	2	0	0	4
Suicide	51	0	1	0	0	52
Undetermined	37	0	0	1	0	38
Other (Bones)	0	0	1	0	11	12
Total	**705**	**49**	**306**	**18**	**11**	**1089**
Note: The above table includes the following "Bone" cases: "Non-Human Remains" (11 cases) and one External examination, which was a tooth fragment.						
Source: Office of the Chief Medical Examiner 2013 Annual Report						

HOMICIDES

The OCME investigated 108 Homicides in the CY 2013. This report reveals that homicides continued to be more prevalent in black males and in persons between the ages of 20-29 than any other category. The weapon of choice was firearms. The peak incidents occurred in September.

Toxicology Findings: Toxicology testing was requested on all 108 Homicide cases investigated. Drugs were present in 70 of the homicide cases investigated. The most commonly detected drugs in homicide cases were: Ethanol (N=41), Marijuana Metabolites2 (23); Phencyclidine PCP (8), Cocaine and metabolites (6), Promethazine (4) and Morphine (3).

Table 11.39. HOMICIDES- Undetermined by Cause of Death		
Cause	Number of Homicides	% of Total Homicides
Firearms	79	73.15%
Sharp Force	12	11.11%
Blunt Impact	8	7.41%
Asphyxia	5	4.63%
Other	3	2.78%
Poisoning	1	0.93%
Total	**108**	**100%**

Source: Office of the Chief Medical Examiner 2013 Annual Report

SUICIDES

The OCME investigated 52 suicides in the CY 2013. This report reveals that suicides were more prevalent in black males and in persons between the ages of 40-49. Overall whites represented 50% of the decedents (N=26) this year. Peak incidents occurred in August.

Toxicology Findings: Toxicology testing was requested for all 52 Suicide cases investigated. Overall, drugs were present in 36 of the suicide cases investigated. The most commonly detected drugs were: Ethanol (N=11), Zolpidem (5); Morphine (5); and Oxycodone (4).

ACCIDENTS

The OCME investigated 316 accidents in the CY 2013. Of the 316 cases investigated, 164 were the result of blunt force trauma, of which 51 were traffic-related deaths. Also, 98 of the accidental deaths occurred as a direct result of prescription and/or illicit drug use. Peak incidents for accidental deaths overall occurred in December.

Toxicology Findings for Accidents: Toxicology testing was requested for 214 of the 315 Accident cases investigated, and drugs were present in 177 of these cases. The most commonly detected drugs were: Ethanol (N=61), Morphine/Heroin (57), Cocaine and metabolites (51), Marijuana

Metabolites (18), Phencyclidine (16), Methadone (11), Diazepam (8), Oxycodone (7), and Acetone (7).

Table 11.40. SUICIDES – Suicides by Cause of Death		
Cause	Number of Suicides	% of Total Suicides
Blunt Impact Trauma • Bridge – 2 • Building –2 • Metro - 1	5	9.62%
Drowning	2	3.85%
Firearms	8	15.38%
Hanging	17	32.69%
Intoxication	2	6.82%
Poisoning	3	6.82%
Sharp Object	3	4.55%
Suffocation (Plastic Bag over head)	2	4.55%
Thermal Injury	44	100%
Total	**52**	**100.00%**

Note: The percentages in the "Pie Chart" are rounded up or down to nearest whole number.

Source: Office of the Chief Medical Examiner 2013 Annual Report

Traffic-related Accidents

The majority of traffic accident deaths occurred in the following categories: males, blacks, and drivers between the ages of 20-29. Peak incidents for traffic accidents only occurred in February.

Toxicology Findings for Traffic-related accidents: Toxicology testing was requested for 45 of the 51 Traffic-related Accidents, and drugs were present in 28 of these cases. The most commonly detected drugs were: Ethanol (N=13); Marijuana Metabolite (8); Cocaine and metabolites (3) and Phencyclidine PCP (2).

In the 13 traffic deaths positive for ethanol, 6 were greater than the legal limit (0.08 g/100 mL) for driving under the influence in the District of Columbia

Table 11.41. ACCIDENTS – Accidents by Cause of Death		
Cause	Number of Deaths	% of Total Accidents
Blunt Injury • Due to Fall (104) • Due to Other (9)	164	52.06%
Intoxication	98	31.11%
Hypothermia	14	4.44%
Asphyxia	13	3.81%
Thermal	12	3.81%
Hyperthermia	7	2.22%
Other	6	1.90%
Cardiovascular	1	0.32%
Therapeutic Complications	1	0.32%
Total	**316**	**100%**

Source: Office of the Chief Medical Examiner 2013 Annual Report

Table 11.42. TRAFFIC DEATHS – Role of Decedent in Traffic Death		
Role	Traffic Deaths	% of Traffic Deaths
Pedestrian	16	31.37%
Driver • Motor Vehicle(13) • Motorcycle (3)	17	33.33%
Passenger Motor Vehicle (11)	11	21.57%
Bicyclist	4	7.84%
Other • Role Unknown (2) • Skateboarder (1)	3	5.88%
Total	**51**	**100.00%**

Source: Office of the Chief Medical Examiner 2013 Annual Report

NATURAL DEATHS

The OCME investigated 559 Natural deaths in CY 2013. This report reveals that the leading cause of death in Natural cases is Cardiovascular Disease with 371 deaths, followed by Alcoholism with 29 deaths. The majority of Natural deaths occurred in March for 2013.

Toxicology Findings: No toxicology reporting for natural deaths is being provided for 2013.

Table 11.43. NATURAL – Natural by Cause of Death		
Cause/Disease	Number of Deaths	% of Total Natural Deaths
Cardiovascular Disease	371	66.37%
Alcoholism	29	5.19%
Respiratory Diseases	23	4.11%
Gastrointestinal Disease	17	3.04%
Other	16	2.86%
Pulmonary Embolism (PE)	16	2.86%
Cancer	15	2.68%
Central Nervous System Diseases (CNS)	11	1.97%
Infection	11	1.97%
Therapeutic Complications (TC)	11	1.97%
Diabetes	9	1.61%
Obesity or Complications of Obesity	8	1.43%
Complications of Drug Abuse	7	1.25%
Connective Tissue Disease	4	0.72%
Blood Disease/Hemopoietic System	3	0.54%
Infectious Disease	3	0.54%
Complications of Pregnancy	2	0.36%
Genetic Disorder	2	0.36%
AIDS	1	0.18%
Total	**559**	**100%**

Source: Office of the Chief Medical Examiner 2013 Annual Report

UNDETERMINED

The OCME investigated 38 cases where the manner of death was concluded to be "Undetermined." An "Undetermined" manner of death is a result of inconclusive evidence as to the circumstances of the death at the time and/or inconclusive examination results. As additional information is received, the death may be appropriately re-certified. Note: Sudden Unexpected Deaths in Infancy (SUID) carry an "Undetermined" manner of death.

Toxicology Findings: Toxicology testing was requested for 36 of the 38 Undetermined deaths investigated. Drugs were present in 23 of the Undetermined cases investigated. The most commonly detected drugs were: Ethanol (N=9), Morphine (5), Cocaine and metabolites (3); Phencyclidine (3); and Oxycodone (2).

Table 11.44. UNDETERMINED – Undetermined by Cause of Death		
Cause of Death	Number of Deaths	% of Total Accepted Cases
Undetermined	14	36.84%
Sudden Unexpected Infant Death (SUID)	8	21.05%
Drowning	6	15.79%
Intoxication/Poisoning	5	13.16%
Blunt Impact Injuries	3	7.89%
Blunt Injury Due to Fall	1	2.63%
Neurologic Disorders	1	2.63%
Total	**38**	**100%**

Source: Office of the Chief Medical Examiner 2013 Annual Report

STILLBIRTHS

The OCME investigated 4 Stillbirth deaths in CY 2013. *Toxicology Findings*: No toxicology findings are being reported for stillbirth deaths in this annual report.

Department of Forensic Sciences
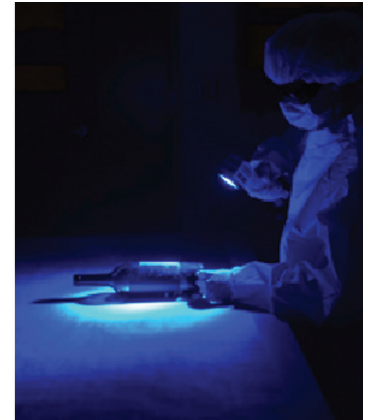
Mission

The mission of the Department of Forensic Sciences (DFS) is to produce high quality, timely, accurate, and reliable forensic science with the use of the best available technology and practices, unbiased science, and transparency with the overall goal of enhancing public health and safety. The Council of the District of Columbia (the Council) enacted the "Department of Forensic Sciences Act of 2011" and transferred the responsibility and authority of all forensic activities formerly conducted by the Metropolitan Police Department to DFS. As of October 1, 2012, DFS became operational and began providing independent analysis of evidence and samples submitted by agencies within the District of Columbia and its federal neighbors. Co-located in the District's LEED Platinum Consolidated Forensic Laboratory (CFL), DFS consists of three major science divisions: the Forensic Science Laboratory Division (DFS-FSL); the Public Health Laboratory Division (DFS-PHL); and the Crime Scene Sciences Division (DFS-CSS). Between May 2013 and August 2014, DFS employees completed approximately 190 hours of training, and captured as an indicator of performance.[5] DFS is currently headed by Interim Director, Dr. Roger A. Mitchell Jr., MD, FASCP.

Internship Program

DFS offers a select number of diverse unpaid internship positions across all agency divisions. In the past, students from the following degree programs have participated in our internship program: Forensic Science, Public Health, Law, Information Technology, Social Sciences, Business Administration and Economics. Students enrolled in Baccalaureate, Masters, and Doctoral programs are encouraged to work with DFS scientists on research or thesis projects and enjoy the benefits of collaborative research opportunities. Employees from other local, state, or federal agencies are also encouraged to participate. Internships with DFS are competitive and coincide with the fall, spring, and summer university semesters.

Forensic Science Laboratory Division

The Forensic Science Laboratory Division (DFS-FSL) analyzes evidence submitted from criminal cases, including DNA, fingerprints, firearms, materials, and digital evidence.[6] The DFS-FSL also provides expert witness testimony in defense of their analytical reports in the District's courts of law. In 2013, the DFS-FSL achieved accreditation for forensic testing by the American National Standards Institute-American Society of Quality (ANSI-ASQ) National Accreditation Board.

The two main key performance indicators for DFS-FSL are; (1) number of reports produced, and (2) turnaround time (TAT). Turnaround time is measured in the days from the date evidence was submitted to DFS to the date a report was generated.
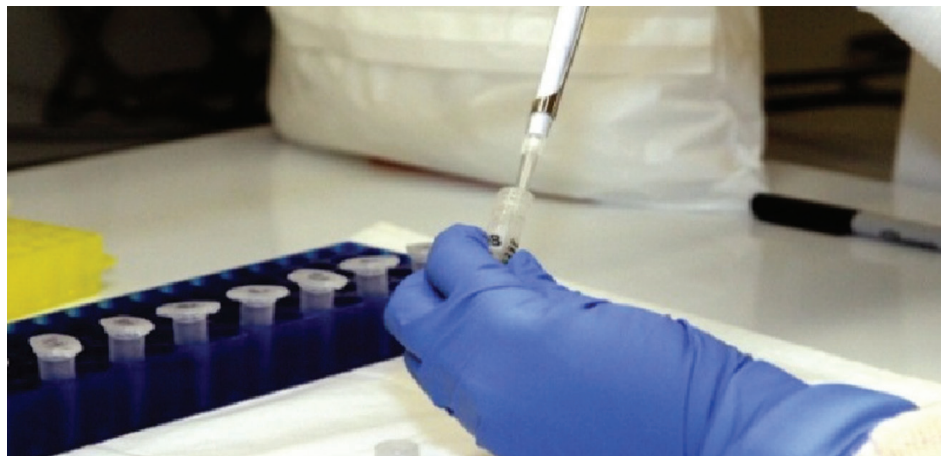
Between 2013 and June 2014, over 6,500 evidence cases were submitted by DFS stakeholders to DFS-FSL, resulting in an average of 376 case reports (see Figures 11.10 and 11.11) compiled per full-time employee. As overall crime in the District of Columbia continued to decline between 2013 and 2014, the number of cases submitted to DFS-FSL for analysis also decreased (Metropolitan Police Department 2015 Performance Plan and DFS 2015 Performance Plan).

[5]Performance metric is in the OCFO's Fiscal Year 2016 Operating Budget Book, in the Department Forensic Sciences chapter, C-157; http://cfo.dc.gov/sites/default/files/dc/sites/ocfo/publication/attach-ments/fr_dfs_chapter_2016a.pdf.
[6]The Digital Evidence Unit began processing evidence in early 2015.
[7]Aging backlog cases are worked as the caseload for each unit becomes more manageable. As backlog cases are older, they significantly skew the turnaround time KPI calculation.

Source: DFS 2015 Performance Plan[8]

The average turnaround time for each unit between 2013 and June 2014 is shown in Figure 3. During this time period, DNA evidence cases were completed on an average of 103 days, latent fingerprint evidence cases were completed on an average of 138 days, and firearms evidence cases were completed on an average of 70 days (DFS 2014 Performance Accountability Report).[7]

Source: DFS 2015 Performance Plan[9]

[8]At time of publication, statistics were only available through June 2014.
[9]At time of publication, statistics were only available through June 2014.

Crime Scene Sciences Division

The Crime Scene Sciences Division (DFS-CSS) is an all civilian unit that provides the collection, analysis, processing, and preservation of evidence found at crime scenes in the District. On January 2015, DFS-CSS began independently responding to crime scenes, with the exception of homicides. The main key performance indicators for the DFS-CSS are also number of crime scene reports produced and turnaround time. [11]

Prior to independent crime scene response, DFS-CSS was co-responding to crime scenes along with the Metropolitan Police Department's Crime Scene Investigation Division. During that year, DFS-CSS workload measures consisted of processing 517 crime scenes, vehicles, and autopsies, collecting over 1,000 pieces of evidence (see Figure 11.13).

[10]At time of publication, statistics were only available through June 2014.
[11]Given DFS-CSS was not responding independently to crime scenes until January 2015, KPIs statistics are currently unavailable.

Public Health Laboratory Division

The Public Health Laboratory Division (DFS-PHL) provides diagnostic and analytical testing for biological pathogens and chemical agents from clinical, environmental, or food sources and provides emergency response testing. DFS-PHL
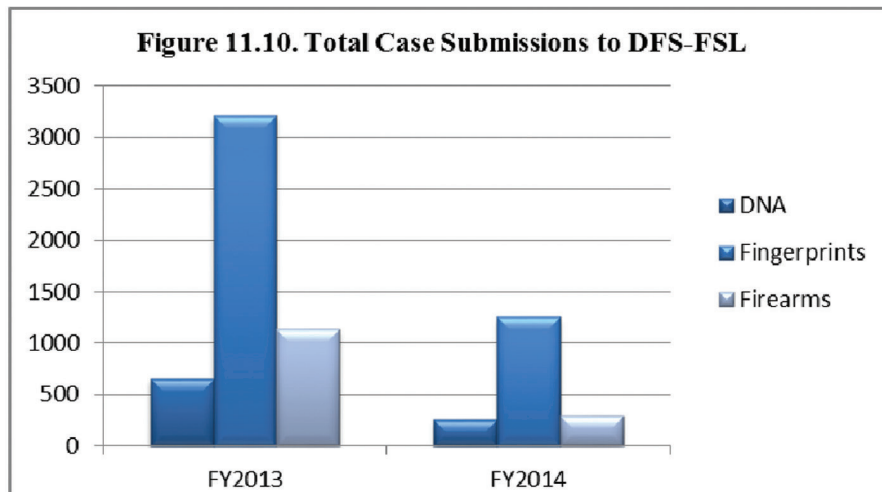
received approval in 2013 from the Centers for Disease Control and Prevention (CDC) to operate the first Biosafety Level 3 laboratory in the National Capital Region. By October 2014, DFS-PHL achieved the necessary proficiency level to test for Ebola by completing the testing materials and evaluations required by the CDC.

In January 2014, the CDC approved DFS-PHL to be a Tier 1 laboratory for biological terrorism samples, one of only a handful of facilities in the nation capable of handling/testing these materials.

Key performance indicators for DFS-PHL include number of reports generated and number of hospital tests performed.[13] Between 2013 and June 2014, just over 6,400 tests were conducted on more than 7,000 samples submitted to DFS-PHL by DFS stakeholders (see Figure 11.14).

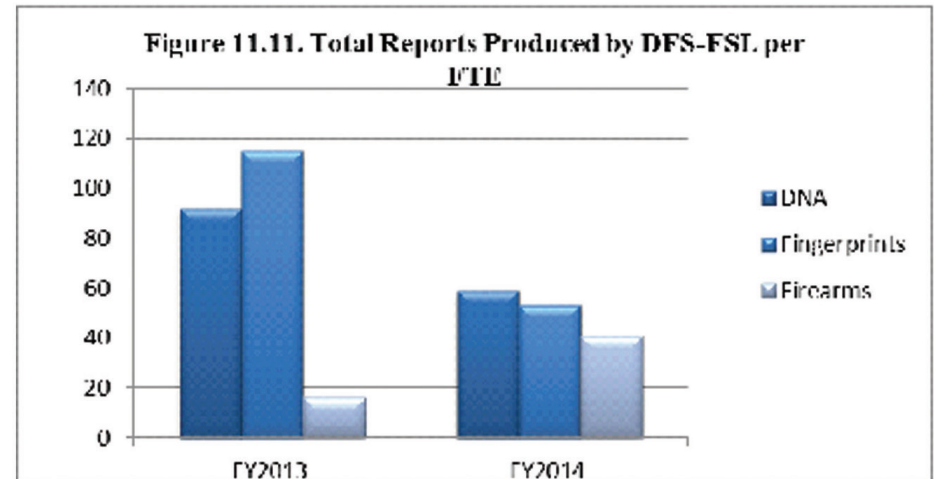*Figure 11.10. Total Case Submissions to DFS-FSL*

Source: Department of Forensic Science

Figure 11.11. Total Reports Produced by DFS-FSL per FTE

Source: DFS 2015 Performance Plan[9]

Figure 11.12. Average Turnaround Time for DFS-FSL

Source: DFS 2015 Performance Plan[9]

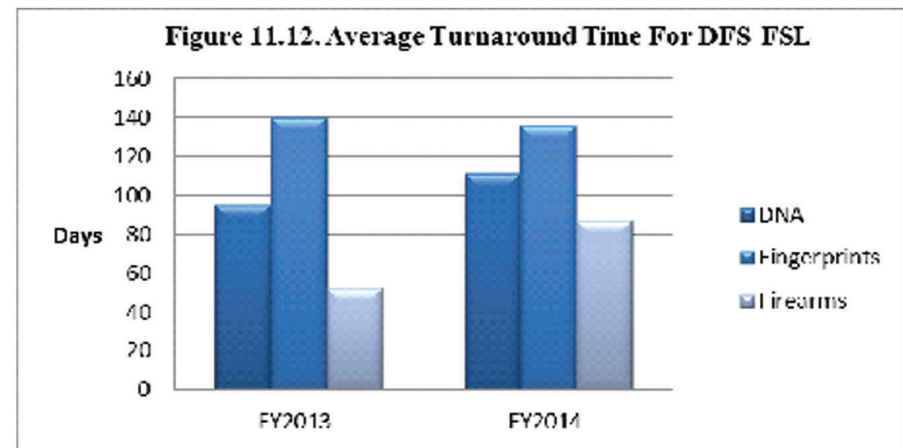[12]At time of publication, statistics were only available through June 2014.
[13]DFS-PHL has no control over the number of specimens received from District hospitals which affects the number of tests performed and reports generated.

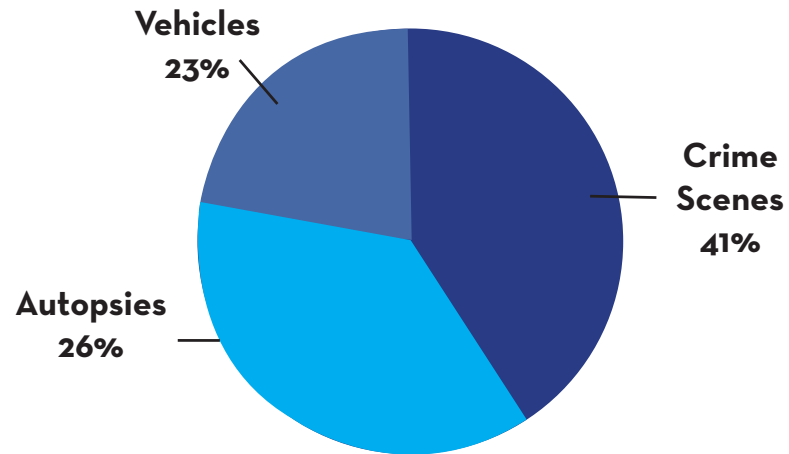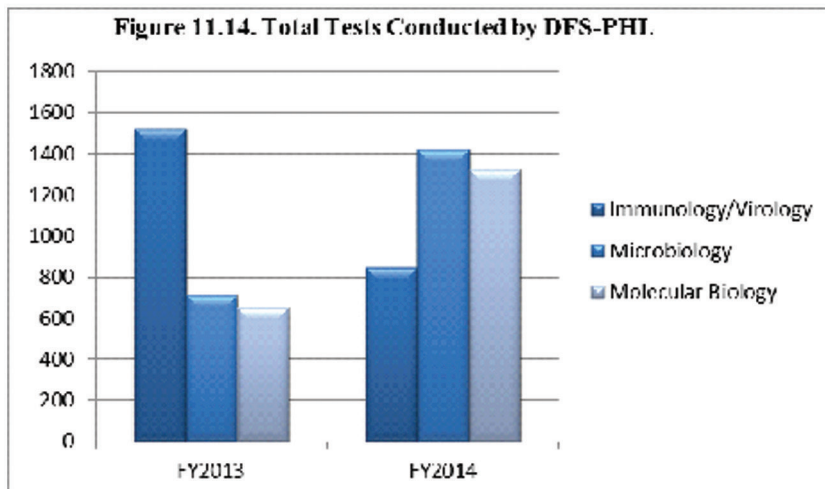*Figure 11.13. Workload Measures Processed by DFS-CSS through June 2014*

Vehicles 23%

Crime Scenes 41%

Autopsies 26%

Source: DFS 2015 Performance Plan[9]

Figure 11.14. Total Tests Conducted by DFS-PHL

Figure 11.14. Total Tests Conducted by DFS-PHL.

- Immunology/Virology
- Microbiology
- Molecular Biology

FY2013   FY2014

Source: DFS 2015 Performance Plan[9]