

Federal Deaths in Custody Reporting Program (FDCRP)

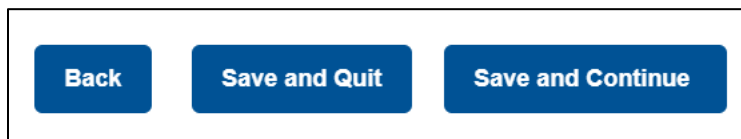
Question Guide

CJ-13B – Detention or Incarceration Death Incident Report

One CJ-13B – Detention or Incarceration Death Incident Report should be completed for every death reported in CJ-13 – FDCRP Annual Summary, FY 2024.

Navigating the web-based form

You can navigate through the web-based CJ-13B using the buttons on each page.



BACK allows you to return to the previous question. It can be used as often as needed to return to a previous question. To ensure your data are saved properly, we strongly recommend using the **BACK** button within the survey to navigate, instead of your browser's back button. Note that using **BACK** to return to a previous question does not automatically save the response.

Example 1: You have just completed Item 13 but have not clicked **SAVE & CONTINUE**. You realize that you need to edit Item 11. You return to Item 11 by clicking **BACK** two times. You edit Item 11, advance forward in the survey and arrive at Item 13, where your previous response was not saved.

Example 2: You have just completed Item 13 and have clicked **SAVE & CONTINUE** to advance to Item 14. You realize you need to edit Item 11. You return to Item 11 by clicking **BACK** three times. You edit Item 11, advance forward in the survey and arrive at Item 13, where your previous response was saved.

SAVE AND QUIT allows you to save your place in the survey and return later. You can click **SAVE AND QUIT** from any page, and your responses to previous questions for which you clicked **SAVE AND CONTINUE** will be saved. When you return to the form, you will return to the page on which you selected **SAVE AND QUIT**. Note that using **SAVE AND QUIT** does not automatically save the response on the page on which you select **SAVE AND QUIT**.

Example 1: You have just completed Item 13 but have not clicked **SAVE & CONTINUE**. You need to consult some files in order to answer the remaining survey questions, so you click **SAVE AND QUIT** to save your place in the survey. When you return to the survey, you will pick up where you left off on Item 13, but your responses will not be saved.

Example 2: You have just completed Item 13 and have clicked **SAVE & CONTINUE** to advance to Item 14. You need to consult some files in order to answer Item 14, so you click **SAVE AND QUIT** to save your place in the survey. When you return to the survey, you will pick up where you left off on Item 14. If you use the **BACK** button to navigate to Item 13, you'll see that your responses have been saved.

SAVE AND CONTINUE allows you to save your answers and navigate forward in the survey. After answering the survey item(s) on a page, you will click **SAVE AND CONTINUE** to advance to the next item. If you select **BACK** to navigate to a previous question before saving the responses on the screen, they will not be saved. If the item is required, you won't be able to advance without a response. Note that clicking **SAVE AND CONTINUE** is strongly recommended to ensure your responses are saved before clicking **BACK** or **SAVE AND QUIT**.

When you have reached the end of the survey, you will be directed to the following page:

You have reached the end of the survey. Your responses have been saved.

If you would like to return to this survey later to revise or complete your answers, you may close this window or click **SAVE & QUIT**. When you re-access this survey, you will return to this page. You can use the **BACK** button below to navigate back through the survey to make edits. If you select this option, please remember to return later to finalize and submit your survey.

If your responses are complete, and you would like to submit this survey, please click **SAVE & CONTINUE** below.

Back **Save and Quit** **Save and Continue**

You can save your progress and keep the report open, in case you need to review before submission, or make changes later. To do so, you can close the window when you reach this page or click **SAVE AND QUIT**.

If the form is complete, and you don't need to make any changes, you may submit your responses. Once you submit, you won't be able to revise the form in the system. If you need to edit a previously submitted form, contact us; we'll work with you to make those changes. To submit your responses, click **SAVE AND CONTINUE**. You'll be directed to a confirmation page:

You are about to submit this survey.

Once submitted, you will not be able to revise your answers without contacting us. If you find you need to edit your responses after submission, please contact the FDCRP Help desk toll-free at 1-877-475-7039 or by email at doj-dcra@rti.org. If you are ready to submit your answers, click **SUBMIT** below.

If you aren't ready to submit, you may use the **BACK** button to revise your responses or close this window and return later.

Back **Submit**

From here, you can **SUBMIT** the survey, which will lock your answers. If you aren't ready to submit, you can click **BACK** to return to the previous page(s) to make changes or review.

****Note:** Clicking **SAVE AND QUIT** from any page in the survey will allow you to pick up where you left off when you return to the survey later. The only exception is if you have navigated through the entire survey. If you've reached the end of the survey, but don't submit your answers, you will always return to the "You have reached the end..." page- even if you navigate back through the survey and revise your answers.

Example: You have completed the survey and reach the "You have reached the end..." page. You realize that you need to make changes to your responses in Item 15. You use the **BACK** button navigate back through the survey to Item 15, make your changes, and click **SAVE AND QUIT** so that you can return later. When you revisit the survey later, you are directed to the "You have reached the end..." page – because you previously navigated through the survey to the end. You can still use the **BACK** buttons to navigate to previous items and revise your answers and **SAVE AND CONTINUE** to navigate forward.

Which agency are you reporting this death on behalf of?

If you indicated on *CJ-13 – FDCRP Annual Summary* that your agency reports on behalf of any other agency(ies), please select which agency you are reporting this death on behalf of.

If you indicated on the *CJ-13 FDCRP Annual Summary* that you would not report on behalf of any other agency(ies), you will not be asked this question.

Decedent information

Decedent Name*

Please provide/confirm the decedent's legal name (last, first, and middle initial).

Date of Death*

Please provide/confirm the **official** date of death. The **official** date of death indicates when the decedent was pronounced dead by either medical personnel or another authorized official. The official date of death may be different from the date of the fatal event. If the official date of death is unknown, estimate the time and date of when the fatal injury was sustained, or the fatal medical condition presented.

Example: The decedent sustains a life-threatening injury (e.g., gunshot wound, blunt force trauma) on one date, but does not die until days, or weeks later. The most appropriate response to this item would reflect the date life ceased rather than the date the injuries were sustained.

Time of Death*

Please provide/confirm the **official** time death. The **official** time of death indicate when the decedent was pronounced dead by either medical personnel or another authorized official. The official time of death may be different from the time of the fatal event. If the official time of death is unknown, estimate the time as when the fatal injury was sustained, or the fatal medical condition presented.

Example: The decedent sustains a life-threatening injury (e.g., gunshot wound, blunt force trauma) at one time, but does not die until hours later. The most appropriate response to this item would reflect the time life ceased rather than the time and date the injuries were sustained.

Decedent characteristics and time in the facility

This section asks about the decedent's demographic characteristics, their legal status and the facility in which they were being held at the time of the death.

Item 1: What was the decedent's sex?*

This item is required.

Item 2: What was the decedent's date of birth (DOB)?*

Please indicate the decedent's date of birth (DOB). If the DOB is not known, indicate the decedent's approximate age at time of death on the following page.

Item 3: Was the decedent Spanish, Hispanic, or Latino?*

Please indicate whether the decedent was Spanish, Hispanic or Latino. If ethnicity is not known, mark "Unknown."

Spanish, Hispanic or Latino. A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

Item 4: What was the decedent's race? (Mark all that apply)*

In addition to ethnicity, please specify the decedent's race. There are six race categories: "White," "Black or African American," "American Indian or Alaska Native," "Asian," "Native Hawaiian or Other Pacific Islander," and "Some other race". The categories in this classification are social-political constructs and should not be interpreted as being scientific or anthropological in nature.

If the decedent's racial background is of two or more races, mark all races that apply. If race is unknown, mark "Unknown."

White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

Black or African American: A person having origins in any of the black racial groups of Africa.

American Indian or Alaska Native: A person having origins in any of the original peoples of North and South America (including Central America) who maintains tribal affiliation or community attachment.

Asian: A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific islands.

Some other race: A person having origins that do not meet the definitions for any of the other five race categories. If so, please specify.

Unknown: Use if the decedent's race is not known.

Item 5. On what date was the decedent committed to his/her current period of detention or incarceration?

Indicate the date the decedent was committed to the current incarceration. If unknown, leave blank.

Item 6. On what date was the decedent admitted to the correctional facility where they were housed when the death occurred?*

Indicate the date the decedent was admitted to the correctional facility where the death occurred. If unknown, leave blank. If the date of admission to the correctional facility where the death occurred is the same date the decedent was committed to the current period of detention, please mark the check box. The date the decedent was admitted to the correctional facility where the death occurred (Q6) must be the same as or later than the date the decedent was committed to his/her current period of detention or incarceration (Q5).

If the date the decedent was admitted to the correctional facility where they were housed when the death occurred is not known, mark "Unknown."

Item 7. What is the name of the correctional facility where decedent was housed when the death occurred? If the death occurred in a medical center outside the correctional facility, please list the correctional facility where the decedent was most recently housed.*

Indicate the correctional facility name, city, state and ZIP code where the death occurred. Correctional facility name, city, and state are required; ZIP code is not.

Item 8. For what offenses or violations was the decedent being held?

Select from the drop-down menu the offenses or violations for which the decedent was being held at the time of death. Drop-down menu options are listed in order of decreasing severity. Please select the most serious offense first. If the decedent was being held on more than 5 offenses, select the 5 most serious offenses, one on each page. If the information is not known as the time the form is being completed, mark "Unknown". Once you have indicated all of the relevant offenses or violations, select "no other offenses to report" from the drop-down menu.

Item 9. What was the decedent's legal status at the time of death?

Indicate the decedent's legal status at the time of death. If the legal status is not listed, indicate "Other" and specify the legal status. If the decedent had more than one status, report the status associated with the most serious offense.

Item 10. Where did the decedent die?

Indicate where the decedent died (e.g., when his/her death was officially pronounced). If the location of the decedent's death is not listed, mark "Elsewhere" and specify the location.

Cause of death

This section asks about the decedent's cause and manner of death.

Item 11. What was the manner of death?*

Indicate the manner/ cause of death. The manner of death is how the person died, typically illustrated by a one-word description of intentions and circumstances that led to the stated medical cause of death. Essentially, the manner of death is the way in which death was caused (e.g., homicide, accident, suicide, natural). Note that the response options here may not be identical to the manners/ causes of death listed on a death certificate or an autopsy.

Illness: Includes long-term illnesses (such as cancer) as well as death from sudden natural causes (such as heart attacks).

Acquired Immune Deficiency Syndrome (AIDS): If the cause of death is in any way attributable to AIDS, select this option.

Accidental: If the manner of death was accidental, indicate whether it was an accidental alcohol or drug intoxication, an accidental injury to self, or an accidental injury by other, and specify the details of the accident.

Suicide: Includes instances of intentional alcohol or drug overdoses. Describe the details of the incident.

Homicide: If the manner of death is homicide, indicate whether the homicide was caused by facility personnel, another inmate, or another individual. If you indicate "Other" for another individual, specify the details.

Other causes: If the manner/ cause of death is not listed (such as Undetermined/ Could not be determined), indicate "Other causes" and include with as many details as possible. Note the difference between "Could not be determined" and "Unknown." "Could not be determined" (sometimes written as "Undetermined") is an official manner of death; a ruling by a coroner or medical examiner made after their investigation has been completed. "Unknown" indicates that the information is missing, or unknown at the time the form is being completed.

Unknown: If the investigation is complete, but the information is not known at the time the form is being completed, mark "Unknown."

Unavailable, investigation pending: If the investigation is not yet complete and the information is forthcoming, mark "Unavailable, investigation pending."

Additional information

Is there any additional information you would like to provide about the decedent or incident? Enter any additional notes about the incident or decedent here. This item is optional.

Need more help?

Contact the FDCRP Help Desk toll-free at (877) 475-7039 or by email at doj-dcra@rti.org.