



UNITED STATES CAPITOL POLICE OFFICE OF INSPECTOR GENERAL

Applying Agreed-Upon Procedures: United States Capitol Police Restricted Duty Program

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REPORT RESTRICTION LANGUAGE

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INSPECTOR GENERAL

PREFACE

The Office of Inspector General (OIG) prepared this report pursuant to the Inspector General Act of 1978, as amended. It is one of a series of audits, reviews, and investigative and special reports OIG prepares periodically as part of its oversight responsibility with respect to the United States Capitol Police (USCP) to identify and prevent fraud, waste, abuse, and mismanagement.

This report is the result of an assessment of the strengths and weaknesses of the office or function under review. It is based on interviews with employees and officials of relevant agencies and institutions, direct observation, and review of applicable documents.

We developed our recommendations based on the best knowledge available to OIG and discussed the draft with those responsible for implementation. It is my hope that the recommendations will result in more effective, efficient, and/or economical operations.

I express my appreciation to those contributing to the preparation of this report.

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Inspector General

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Abbreviations

Agreed-Upon Procedures	AUP
Assistant Chief of Police	ACOP
Department of Labor	DOL
Employee Services Section	ESS
Fiscal Year	FY
General Order	GO
Government Accountability Office	GAO
Office of Human Resources	OHR
Office of Inspector General	OIG
Office of Professional Responsibility	OPR
Performance of Duty	POD
Non-Performance of Duty	non-POD
Restricted Duty	RD
United States Capitol Police	USCP or the Department

EXECUTIVE SUMMARY

According to United States Capitol Police (USCP or the Department) guidance,¹ the Department provides a restricted duty assignment when available to personnel unable to perform their primary duties as a result of a temporary disability. Although restricted duty assignments are not essential to the Department's mission, the intent is to allow eligible personnel to perform meaningful and constructive functions rather than having to use leave or being placed in a non-pay status pending return to full duty. There are two categories of injuries and illnesses involved in the restricted duty program—performance of duty (POD) and nonperformance of duty (non-POD).

As the Department works toward achieving efficiency and effectiveness of its programs as well as reducing costs, the Assistant Chief of Police (ACOP) requested that the Office of Inspector General (OIG) conduct agreed-upon procedures (AUPs) related to its restricted duty program. With ACOP concurrence, we agreed to the following: (1) assess controls and compliance with applicable guidance pertaining to restricted duty decision-making, (2) examine years of service and leave balances related to trends in the population of restricted duty beneficiaries and benefit payments, and (3) suggest options for revising the restricted duty benefit. OIG analyzed data the Department provided for Fiscal Year (FY) 2013 through March 31, 2015—the most recent years available. OIG reviewed applicable Federal laws, regulations, and program policies, reviewed a non-statistical sample of restricted duty beneficiaries and assignments, and interviewed Department officials, including representatives of the Office of Human Resources (OHR).

Overall, the Department did not comply with the guidance nor did it have adequate controls to ensure the integrity of the restricted duty program. The Department needs to improve the quality and management of procedures for restricted duty assignments, which would improve reporting of manpower availability. For example, the Department did not have up-to-date or finalized policies and procedures for the program. Documents were missing and evidence such as medical professional visited or the healthcare provider's name used to support assignments was not complete. In addition, evidence of supervisory approval of assignments was missing in several instances. Several employees remained in restricted duty status after a medical professional cleared the employee for full duty. Further, more than 80 percent of employees in a restricted status either failed to clock in or out in any given day. Failure to properly clock in or out occurred primarily because of a lack of oversight and follow-up by responsible officials. When employees know that the Department is not monitoring the program, there could be an incentive to obtain or prolong a restricted duty assignment to avoid other less desirable duties. As a result, this program is potentially subject to waste, fraud, and abuse.

¹ The Department reissued USCP General Order [REDACTED] dated May 31, 1996, and [REDACTED], dated July 1, 2004. [REDACTED] effective date "Per Attached Policies." The Directive states, "upon completion of the Directive review process, the content in the attached Directives will be reissued in the new Written Directive System format."

As a result of lax controls and noncompliance with guidance, USCP employees may have misused the restrictive duty program, as shown by the correlation of data; including comparison of years of service to low or negative leave balances, multiple restricted duty assignments, and employees continuing outside employment while in a restricted duty status. While these instances do not in and of themselves indicate abuse of the program, they indicate an increased risk that employees could abuse the program. Because we believed instances occurred in which potential abuse of the restricted duty program was taking place, OIG referred the information to the Office of Professional Responsibility (OPR) for action.

Opportunities exist for the Department to improve its restricted duty program. Identifying an individual accountable and maintaining a list of positions available for its restricted duty program could result in more efficient and effective utilization of manpower in such assignments. Revoking the police powers of sworn officers consistently during restricted duty assignments could reduce requests for restricted duty as well as the length of such assignments. In addition, modifying the maximum length of time for restricted duty assignments could result in cost savings. As of August 12, 2015, the Department had a draft directive under review that would reduce assignments for non-POD restricted duty from a maximum of 12 months to 6 months. Had the length of assignments for the 30 months reviewed been reduced from 12 months to 6 months, we estimated that the Department would have saved about \$2 million, excluding overtime. The Department also would reduce costs if it eliminated non-POD injury cases from the restricted duty program. Employees would be required to use their own leave, which would motivate individuals to return to work more quickly; thereby, eliminating the need to backfill their positions.

To develop more efficient and effective controls over accountability of the program, we recommend that the Department immediately implement its draft guidance for the restricted duty program. The draft guidance, if fully implemented, would provide for a restricted duty program manager within OHR who would be accountable for reviewing the accuracy and completeness of medical documentation, assigning employees to available positions, and following up on the status of employees. The draft guidance would also help clarify the practice of revoking police powers and reduce restricted duty assignments from a maximum of 12 months to a maximum of 6 months. According to Department representatives, as of August 12, 2015, the proposed guidance had been in draft since December 2014, with no projected implementation date. See Appendix A for a complete list of OIG recommendations.

OIG provided a draft report for comment on September 2, 2015, and conducted an exit conference with Department officials on September 28, 2015. We incorporated the Department's comments as applicable and attached their response to the report in its entirety in Appendix B.

Background

As the Department works toward achieving efficiency and effectiveness of its programs as well as reducing costs, the Assistant Chief of Police (ACOP) requested that the Office of Inspector General (OIG) apply the agreed-upon procedures (AUPs) related to its restricted duty program.

The Department provides restricted duty assignments to personnel (sworn and civilian) unable to perform regular duties as a result of a temporary disability. Although restricted duty assignments are not essential to the Department's mission, they do allow eligible personnel an opportunity to perform meaningful and constructive tasks rather than having to use accrued leave or be placed in a non-pay status pending return to full duty. According to General Order (GO) [REDACTED], dated May 31, 1996, when directed, sworn employees must:

1. Relinquish possession of issued handgun(s), ammunition, I.D. [identification] folder, badge(s) and cap plate in accordance with General Order [REDACTED]; and
2. Sign a [REDACTED]; and
3. Ensure receipt of a [REDACTED], for the relinquished items.

USCP Special Directive No. [REDACTED] dated July 1, 2004, states that employees who incur injuries or suffer from illness retain police powers and police credentials while in limited/restricted duty status, if that injury or illness does not preclude the safe handling of the issued service weapon. The Department consolidated and reissued GO [REDACTED] and Special Directive No. [REDACTED] under USCP Directive [REDACTED], effective date "Per Attached Policies." As of August 12, 2015, the Department has not reissued the directive, although the Directive states, "upon completion of the Directive review process, the content in the attached Directives will be reissued in the new Written Directive System format."

There are two categories of injuries and illnesses involved in the restricted duty program—(1) performance of duty (POD) and (2) nonperformance of duty (non-POD). POD is any line-of-duty injury or illness caused or aggravated by specific work factors and non-POD is any injury or illness that is not considered POD. The non-POD category includes pregnancy and nursing.

An employee requests a restricted duty assignment upon receiving an "Illness/Injury/Pregnancy Report," and submitting a [REDACTED] with supporting documents to the immediate supervisor. Supporting documents include the following:

- a. Signed temporary disability certificate from the appropriate health care professional, specifically describing any limitations on the performance of duty or the number of hours that may be worked.
- b. [REDACTED].
- c. Appropriate Department of Labor (DOL) forms if the condition is a performance of duty injury or occupational disease.

Other than pregnancy, the employee submits an updated [REDACTED] with medical documentation every 14 days unless the medical documentation specifies that a longer follow-up time is appropriate. For pregnancy, an updated [REDACTED] is required every 30 days. Restricted duty limits employees to 12 months for each injury.

To ensure compliance with guidance, the parent element supervisor is responsible for reviewing paperwork and supporting documents. If the paperwork is acceptable and a restricted duty assignment authorized, the supervisor arranges an assignment by contacting the Operations Division if restricted duty status is expected to last 5 days or less, or if OHR is closed. Because the guidance is dated, the Directive refers to OHR as Employee Services Section (ESS). The policy states:

Upon an employee's return to full duty status, complete a [REDACTED], and distribute as follows:

- a. Give one copy to the employee.
- b. Attach the original to the [REDACTED] and forward to the Section Commander.
- c. File one copy in the employee's Unit Personnel Jacket.

Employees can extend assignments beyond the 12-month limit with approval of the Chief of Police. An employee returns to full duty by submitting a [REDACTED] with medical documentation stating the doctor's recommendation that the employee return to full unrestricted duty.

OBJECTIVES, SCOPE, AND METHODOLOGY

OIG applied the three procedures outlined in the paragraph below, to which the ACOP agreed, to assist the Department in evaluating its restricted duty program for a 30-month period—beginning with FY 2013 (October 1, 2012) through March 31, 2015. Management is responsible for the policies and procedures of the programs. OIG applied AUPs in accordance with attestation standards established by the American Institute of Certified Public Accountants and *Government Auditing Standards* issued by the Comptroller General of the United States. The sufficiency of these procedures is solely the responsibility of those parties specified in this report. Consequently, we make no representation regarding the sufficiency of the procedures described below and in Appendix C either for the purpose for which this report has been requested or for any other purpose.

OIG (1) assessed controls and compliance with applicable guidance pertaining to restricted duty decision-making; (2) examined years of service and leave balances and related trends in the population of individual restricted duty beneficiaries; and (3) suggested options for revising the restricted duty benefit if needed. OIG analyzed October 1, 2012, through March 31, 2015, data the Department provided—the most recent years available—and reviewed applicable Federal laws,

regulations, and program policies; reviewed a non-statistical sample of restricted duty beneficiaries and assignments; and spoke with Department officials and OHR representatives.

According to data provided by OHR, 205 employees had restricted duty assignments during our scope. Of those 205 employees, 162 employees had non-POD injuries and 51 employees had POD injuries (8 employees had both a POD and non-POD injuries) as shown in Table 1. For the same period, 33 employees had multiple restricted duty assignments, which resulted in a universe of 238 assignments.

Table 1: Universe of Employees in Restricted Duty Assignments		
	Assignments	Employees Assigned
Non-POD	185	162
POD	53	51
Employees on both lists		(8)
Total	238	205

Source: OIG generated from OHR listing of restricted duty beneficiaries for the period of October 1, 2012, through March 31, 2015.

OIG selected a non-statistical sample of 61 employees for detailed testing. Through discussion with Department officials, we determined that the employees with multiple restricted duty assignments constituted a higher risk, so we selected employees who had multiple assignments, whose assignments were longer than 6 months, or frequent users of the program. Our sample of 61 employees included 33 individuals with multiple assignments resulting in testing 99 restricted duty assignments. To test controls and compliance, we conducted attribute testing of the restricted duty assignments to determine if files and forms were properly completed, reviewed, and followed up on in a timely manner, and if medical evidence was complete. We then reviewed time clock swipe reports to determine if employees in a restricted duty status were clocking in and out of the timekeeping system [REDACTED]

We compared sick leave balances prior to the beginning of a restricted duty assignment to the number of years of employment with the Department. In an effort to determine the number of restricted duty positions, OIG requested a listing from OHR. As OHR did not maintain a listing of restricted duty positions, OHR surveyed the 10 largest bureaus of the Department for the information. We also reviewed assignments that exceeded 12 months along with potential waivers. We further requested [REDACTED]

[REDACTED] from OHR to corroborate the information provided on the [REDACTED]. To determine compliance, we reviewed the following guidance:

- United States Government Accountability Office (GAO), *Standards for Internal Control in the Federal Government* (GAO/AIMD-00-21.3.1), dated November 1999
- September 2011 [REDACTED]
dated September 20, 2011
- USCP Directive [REDACTED]
[REDACTED] May 31, 1996, and [REDACTED]

- [illegible]

We reviewed the interim time and attendance guidance to determine if employees recorded daily reporting times using the Department's [REDACTED] time clocks. For multiple users of the program, we reviewed social media Web sites to determine if employees were complying with medical instructions. Using payroll data from the FY 2014 financial statement audit and information provided in the *Statement of Disbursements of the U.S. Capitol Police for the Period October 1, 2014, through March 31, 2015*, we estimated each employee's daily cost to the Department to calculate potential cost savings from backfilling vacant positions as the result of such an injury or illness.

We did not conduct an audit, the objective of which would be the expression of an opinion on the restricted duty program. Accordingly, we do not express such an opinion. Had we performed additional procedures, other matters might have come to our attention that would have been reported to you. ~~This report is intended solely for the information and use of USCF and is not intended to be and should not be used by anyone other than the specified party.~~

On September 2, 2015, we provided a draft copy of this report to Department officials for comment. On September 28, 2015, we conducted an exit conference. We incorporated Department comments as applicable and attached its response to the report in its entirety as Appendix B.

RESULTS

The Department did not have adequate controls in place that would ensure compliance with its restricted duty program. As a result of lax controls and noncompliance with Department guidance, USCP employees may be misusing the program, as suggested by the correlation of data; including the low or negative leave balances compared to years of service, multiple restricted duty assignments, and engaging in outside employment while in a restricted duty status. Options exist for the Department to improve its restricted duty program. For example, decreasing the length of assignments from a maximum of 12 months to a maximum of 6 months could easily result in cost

² Directive [REDACTED]
[REDACTED] May 31, 1996, and [REDACTED]
[REDACTED] dated July 1, 2004.

savings. OIG estimated that the Department could have saved about \$2 million, excluding overtime, if USCP had implemented a 6-month assignment period over the 30 months reviewed.

Inadequate Controls and Noncompliance with Guidance

Overall, the Department did not comply with the guidance nor did it have adequate controls in place that would help ensure the integrity of the restricted duty program. The Department needs to improve the quality and management of procedures for restricted duty assignments, which would improve reporting of manpower availability. For example, the Department did not have up-to-date or finalized policies and procedures for the program. Documents were missing and evidence such as medical professional visited or the healthcare provider's name used to support assignments was not complete. In addition, evidence of supervisory approval of assignments was missing for several assignments. Several employees remained in restricted duty status after a medical professional cleared the employee for full duty. See Table 2 for details.

Table 2: Missing or Incomplete Data Related to Restricted Duty Assignments			
<i>Missing or Incomplete Evidence to Support Restricted Duty Assignments</i>	<i>Exceptions Noted</i>	<i>Total Assignments OIG Reviewed</i>	<i>Percentage</i>
Missing Files (no documentation available)	7	99 ³	7%
Incomplete Medical Evidence	25	92 (7 missing)	27%
Supervisor Approval - Signature(s) missing	18	92	19%
Employee Remained in restricted duty status after receiving medical clearance to return to full duty	10	92	11%
Untimely follow-up ensuring employee obtain recurring medical waivers (every 14 or 30 days)	43	92	47%
Documentation either did not indicate the healthcare provider visited or the medical professional's name was illegible	7	92	8%
Documentation did not list healthcare facility visited	4	92	4%

Source: OIG generated from documentation OHR provided related to restricted duty assignments from October 1, 2012, through March 31, 2015. OIG selected a non-statistical sample of 61 employees for detailed testing. Multiple restricted duty assignments constituted a higher risk, so we selected all employees who had multiple assignments during our scope, assignments longer than 6 months, and frequent users of the program. Our sample of 61 employees included 33 individuals with multiple assignments resulting in OIG testing 99 restricted duty assignments.

Further, more than 80 percent of employees in a restricted status either failed to clock in or out in any given day. Failure to properly clock in or out occurred primarily because of a lack of oversight and follow-up by responsible officials. When employees know that the Department is not monitoring the program, there could be an incentive to obtain or prolong a restricted duty

³ October 1, 2012, through March 31, 2015, the Department provided 205 beneficiaries with 238 restricted duty assignments. There were employees with multiple assignments to the restricted duty program, which accounted for the difference between beneficiaries and assignments. We selected a non-statistical sample of 61 of 205 employees, which included 99 restricted duty assignments for further attribute testing. Of the 99 restricted duty assignments in our sample, the Department was unable to provide us with a restricted duty file related to 7 of the assignments. Therefore, we tested 92 restricted duty files.

assignment to avoid other less desirable duties. As a result, this program was potentially subject to waste, fraud, and abuse.

Outdated and Incomplete Policies and Procedures

The Department had outdated and incomplete policies and procedures governing its restricted duty program. For example, the guidance did not identify prevailing organizational elements responsible for monitoring its program. Although GO [REDACTED] was issued May 31, 1996, and Special Directive [REDACTED] was issued July 1, 2004, the Department reissued an undated Directive [REDACTED] which was intended as a reissuance of the two previously issued policies. That new guidance states, “it would be reissued in the new Written Directive System format.” As of August 31, 2015, that guidance was still in draft and no date of when it will be issued or implemented was available.

In the current guidance, employees are directed to forward requests for restricted duty, as well as other documents through the chain of command and to the “Employee Services Section,” which is now OHR. Most importantly, the guidance for restricted duty assignments does not mention civilians as beneficiaries in the program except in the case of POD injuries or illnesses. The Department, however, has allowed civilians to participate in the program for non-POD injuries and illness. The proposed draft guidance does include civilians as beneficiaries in the restricted duty program in both POD and non-POD assignments.

Better Documentation Needed to Oversee its Restricted Duty Program

The Department needs better supporting documentation to oversee its restricted duty program. Department officials stated they use various types of documents⁴ for overseeing employees placed in the program, but documentation was often missing or not readily available. For employees that OIG reviewed, there was at least one or more instances in which documentation used for overseeing the employee was either missing or not readily available—either missing entirely, lacked medical evidence to support the injury or illness, or was not readily available to approving officials involved in the oversight of the program. Of the 99 assignments OIG reviewed, OHR could not produce 7 of the restricted duty assignments for October 1, 2012, through March 31, 2015. According to OHR officials, it provided all of the files in their possession, reiterating that various Bureaus were responsible for collecting the documents and forwarding them through the chain of command for approval before submitting the files to OHR. Directive [REDACTED] requires that the Employee Services Section⁵ should, “Maintain a listing of temporary disability restricted duty assignments, and . . . monitor employees assigned in a temporary disability restricted duty status for continued eligibility and manpower purposes.”

Effective internal controls require that organizations create and maintain files that allow a third party, such as an auditor, to “follow the paper trail” from program initiation through closeout. GAO’s *Standards for Internal Control in the Federal Government*⁶ states that documentation

⁴ DOL, CA-17, *Duty Status Report*; [REDACTED]

⁵ OHR replaced the Employee Services Section.

⁶ GAO/AIMD-00-21.1, dated November 1999.

should be readily available for examination and all documentation and records should be properly managed and maintained. A variety of reasons contributed to why restricted duty assignment documentation was missing or not readily available—including outdated or lack of program-specific guidance, oversight, and accountability.

Without obtaining accurate documentation in a timely manner, OHR is often unaware that a restricted duty assignment has occurred until after the assignment ends. The restricted duty file is a repository for documentation and includes documents such as the report of temporary disability [REDACTED], doctor's notes, or other applicable documentation. Lack of supporting documentation increases the likelihood that employees can abuse the program. Furthermore, without proper documentation of information used to oversee employees and assignments, the Department runs the risk that it does not have the information needed to provide sufficient oversight of the program and manpower availability.

Incomplete Medical Evidence

The Department did not obtain appropriate medical evidence for employees placed on restricted duty. Directive [REDACTED] states employees must provide, “a signed temporary disability certificate from the appropriate health care professional, specifically describing any limitations on the performance of duty or the number of hours that may be worked.” In addition, Directive [REDACTED] states along with the appropriate DOL forms, “employees are required to specifically describe the condition or the exposure/suspected exposure ... and supportive medical documentation.”

Yet, of 92 files reviewed, 25 files, or 27 percent, did not contain complete medical support documentation. The documentation deemed incomplete included either missing listings of the employee's restrictions, estimated date of return to full unrestricted duty, or condition causing injury.

According to officials, the Department's draft directive would require that the employee:

Provide the following information on the [REDACTED] CA-17, and/or documentation from a healthcare provider on signed letterhead: (i) An assessment of the nature, severity, and duration of the injury or illness, including any movement, lifting, standing, or other restrictions; (ii) The treatment and restrictions related thereto; (iii) The probable duration of the restrictions; (iv) A prognosis for recovery; and (v) An assessment of whether the employee can perform the essential functions of his/her present position with reasonable accommodations.

Documents did not include Healthcare Provider or Name was Illegible

Directive No. [REDACTED] states that the employee should, “Request a temporary disability restricted duty assignment for a disabling condition by submitting a [REDACTED] Report, with supporting documentation, to your immediate supervisor.” However, employees did not submit completed forms to include the names of medical professionals visited. For example, of 92 files reviewed, 7 either did not contain the names of the medical professionals or the names were illegible. OHR officials stated that they had only what employees provided. And of those 92 files, 4 did not list the healthcare facility visited.

The Department's proposed draft guidance states that the employee must "submit a fully completed [REDACTED] and any other relevant documentation to his/her immediate supervisor, to be routed to the employee's Section Commander/civilian equivalent." The draft guidance further states that upon receipt of the [REDACTED], the restricted duty program manager will "review the documentation for sufficiency and completeness."

Employees Remained in Restricted Duty Status after Healthcare Provider Cleared the Individual to Return to Full Duty

Employees remained in a restricted duty status after their healthcare provider cleared them to return to full duty. Directive [REDACTED] states that the employee should

Upon approval by a health care professional to return to full duty: (a) Immediately notify your parent element and the assigned restricted duty element. (b) Submit a completed [REDACTED], with supporting documents, to an immediate supervisor in your parent element. (c) Obtain a [REDACTED], from your supervisor and ensure completion in accordance with instructions listed on the form. (d) Retrieve items listed in step #2 in accordance with General Order [REDACTED]. (e) Return the completed and signed [REDACTED] to your supervisor.

Yet, of the 92 cases reviewed, 10 cases, or 11 percent, of the assignments contained information indicating that those assignments exceeded the date that the doctor said the employee could return to full unrestricted duty.⁷ For example, a healthcare provider's note of March 12, 2014, states that the employee could return to full duty on that same day. However, the "Confirmed End Date" that OHR provided indicated that the restricted duty assignment continued until April 28, 2014—more than 6 weeks after the physician stated the individual could return to full duty.

As to why an employee would remain on restricted duty after their healthcare provider cleared them, an official in OHR stated that it often has trouble obtaining adequate documentation from the various Bureaus in a timely manner. As a result, OHR has difficulty recording the precise timing of an employee's return to unrestricted duty. OHR stated that employees could take leave after doctors cleared them to return, which could result in OHR not recording the employee return to full unrestricted duty until after the individual returns from leave.

The proposed draft guidance states that, "Upon receipt of a [REDACTED] releasing an employee to full unrestricted duty, the RD [Restricted Duty] Program Manager will take the following action: (a) Notify the PE [parent element], and (b) Coordinate the employee's return to the PE in accordance with the USCP assignment policies and procedures."

⁷ OIG used the "Confirmed End Date" OHR provided to determine when the employee returned to unrestricted duty.

Inadequate Supervisory Review

Supervisors did not properly review restricted duty documentation. Directive No. [REDACTED] states that supervisors should, “Review supplemental [REDACTED] to determine that there is no change in the individual’s status, then forward the report to the individual’s parent element where it will be signed and forwarded.” The Section Commander section of the directive goes on to say, “(1) Review the [REDACTED] to ensure that the appropriate duty category and status are indicated. (2) Sign the [REDACTED] and forward to the Division Commander.” The Division Commander section states, “Review and sign the [REDACTED] and forward to the Employee Services Section.”

Of 92 assignments OIG tested, 18 assignments or 20 percent were missing supervisor signatures on the [REDACTED], indicating a lack of proper management review. In many instances, only the employee and the immediate supervisor had signed the [REDACTED], and in several instances, only the employee signed the form. OIG identified multiple copies of a [REDACTED] in files with numerous signatures. In those instances, we used the [REDACTED] with the most signatures for the purpose of this test.

The proposed draft guidance states that after reviewing and validating that the [REDACTED] is complete and correct, the restricted duty point of contact forward the [REDACTED], CA-17, and other documentation through the Section Commander/civilian equivalent directly to the restricted duty program manager to approve an employee’s eligibility for an restricted duty assignment. Documents submitted in a sealed envelope must remain sealed when forwarded to the restricted duty program manager.

Nevertheless, current guidance requires that the [REDACTED] be forwarded to the supervisor, the Section Commander, the Division Commander, and the ESS. The form often did not make its way completely through this process. As a result, the Department did not have a complete record of the chain of command approvals on applicable forms. According to the GAO *Standards for Internal Control in the Federal Government*, authorizations should be clearly communicated to managers and employees. Proper approvals assist management in controlling operations and making manpower decisions.

Lack of Monitoring and Untimely Follow-up

The Department did not appropriately monitor its restricted duty program to ensure that assignments were followed up on in a timely manner. Directive [REDACTED] states that the employee should “provide updates on a [REDACTED], to include a description of the specific limitations from the attending health care professional at least every 14 calendar days (at least every 30 calendar days for pregnancy). If a health care professional determines that appointments are not required within that time frame, the employee will provide an explanatory statement of that fact on the [REDACTED].”

The current restricted duty guidance requires that employees follow up with their medical professional every 14 days and provide an updated [REDACTED] unless the restricted duty assignment is for a pregnancy in which case the follow up period is every 30 days. Yet, of the 92 cases

reviewed, 43 cases⁸ or 47 percent did not have a timely follow-up. For example, one employee submitted a [REDACTED] with a report date of June 9, 2014. OHR did not receive a follow-up [REDACTED] until May 7, 2015, almost a year later. Employees did not always comply with the requirement to provide medical documentation to remain on restricted duty. The Department's proposed draft guidance would require:

To remain eligible for a RD assignment, an employee must provide additional documentation as follows: (a) Every 30 days, submit a [REDACTED] (Performance of Duty employees may submit a [REDACTED] or CA-17) to the RD program manager that includes a description of specific limitations—including those related to pregnancy or nursing—from the attending healthcare provider. (i) This submission is made every 30 days unless the employee's healthcare provider specifically addresses a longer time period in a previously submitted [REDACTED], or CA-17. (ii) The RD program manager may request additional documentation at any time as necessary. (iii) Failure to submit timely updates to the RD program manager may result in removal from a RD assignment.

Utilizing Time Clock for Time and Attendance

Employees also did not always account for their time and attendance while in the restricted duty program. For example, employees in restricted duty assignments did not consistently clock in and out (swipes) as Department guidance requires. According to the September 2011 interim time and attendance guidance, employees must record their daily reporting times using the Department's [REDACTED] time clocks. Yet, of the 97⁹ assignments, 81 assignments, or 83.5 percent, had at least one missed swipe during the assignment. The OHR listing of missed and no swipes included some explanations for not clocking in and out. If the explanation appeared reasonable, such as off-site training, the missed swipe was not included in our total. Table 3 is a breakdown of missed swipes and no swipes.

Table 3: Missed Swipes While in a Restricted Duty Status			
Missed Swipes	Assignments	No Swipes	Assignments
0	16	0	44
1 – 5	50	1	25
6 – 10	15	2	11
11 – 15	4	3	3
16 – 20	8	4	2
21 and Greater	4	5 and Greater	12
Unknown	2 ¹⁰	Unknown	2
Total	99	Total	99

Source: OIG generated from data OHR provided related to missed and no swipes from October 1, 2012, through March 31, 2015.

⁸ If the doctor indicated that the employee should remain on restricted duty until the next appointment and the next appointment was more than 14 days away, we did not note the instances as exceptions. In addition, if the doctor noted that the employee should be on restricted duty for the remainder of the pregnancy and there was not a follow up every 30 days, we did not note these instances as exceptions.

⁹ OIG obtained missed swipes and no swipe reports from OHR from September 30, 2012, through March 31, 2015. These reports from OHR indicated any time an individual was missing a swipe in, swipe out, or both. We considered a "missed swipe" to be any day that an employee was missing either an in or out swipe. If the employee was missing both swipes in the same day, we considered it a "no swipe." Two of the assignments began after March 31, 2015, and therefore, OIG did not include these missed swipes, which were outside our scope.

Conclusions

The Department needs better documentation to ensure adequate accountability and compliance with its restricted duty program. Specifically, the assignment files had missing documents, incomplete medical evidence supporting restricted duty assignments, and a lack of supervisory approvals for assignments resulting in employees remaining in a restricted duty status long after a healthcare professional cleared the individual for full duty. Furthermore, employees in restricted duty assignments did not consistently clock in and out as Department guidance requires. Lax controls and noncompliance with directives creates an environment in which employees believe that the Department is not properly monitoring its manpower or program. Such a lack of oversight and monitoring could result in employees obtaining restricted duty assignments without visiting a valid or legitimate medical professional. When employees are aware that the Department is not appropriately monitoring its program, it runs a high risk of waste, fraud, and abuse. If fully implemented, the proposed draft guidance should provide better oversight and monitoring of the restricted duty assignments and supporting evidence. Thus, OIG makes the following recommendations.

Recommendation 1: We recommend the United States Capitol Police immediately update and implement its draft guidance for restricted duty to include updated information about organization elements and determine whether civilians should be beneficiaries of such a program in both Performance of Duty and Non-Performance of Duty cases.

Recommendation 2: We recommend that the United States Capitol Police immediately implement its draft guidance for restricted duty to ensure more transparency and accountability of its program by requiring one individual to be held accountable for the controls and compliance of the restricted duty program, which will assist in ensuring compliance and the integrity of the program. The draft guidance specifically provides the Office of Human Resources, restricted duty program manager, the authority to monitor the restricted duty program, ensuring that employees submit complete forms and appropriate medical documentation, and coordinating employees return to full unrestricted duty in a timely manner.

Recommendation 3: We recommend that the United States Capitol Police enforce the September 2011 draft [REDACTED] to ensure that employees are utilizing the [REDACTED] time clocks; thereby, appropriately monitoring employees in a restricted duty status and ensuring individual time and attendance.

Probable Misuse of the Restricted Duty Program

As a result of lax controls and noncompliance with Department guidance, USCP employees may be misusing the restricted duty program as shown by the correlation of data; including low or negative leave balances compared to years of service with the Department, multiple restricted duty assignments, and engagement in outside employment while in a restricted duty status. In addition, opportunities exist for restricted duty assignments to go unreported to OHR. In those cases where

we noted specific instances that were high risk for misuse and abuse of the restricted duty program, OIG referred them to the Office of Professional Responsibility (OPR).

Comparison of Leave Balance to Years of Service

To determine employee sick leave balances as of the pay period prior to the employee's restricted duty assignment, we obtained information from OHR related to years of service and sick leave balances for the 99 (included missing files information obtained from [REDACTED] assignments in our sample. We reviewed the sick leave balances for only 97 assignments because, of the 99 assignments, 2 began after March 31, 2015, and were, therefore, outside of the scope of our AUP. We independently applied the sick leave balances and employee years on the job prior to a restricted duty assignment to determine the average and median sick leave balances to years of service as shown in Table 4. Employees earn 13 days or 104 hours per year of sick leave. The median years of service prior to a restricted duty assignment was 10.79; yet, only 2.92 hours of sick leave was carried forward from year to year.

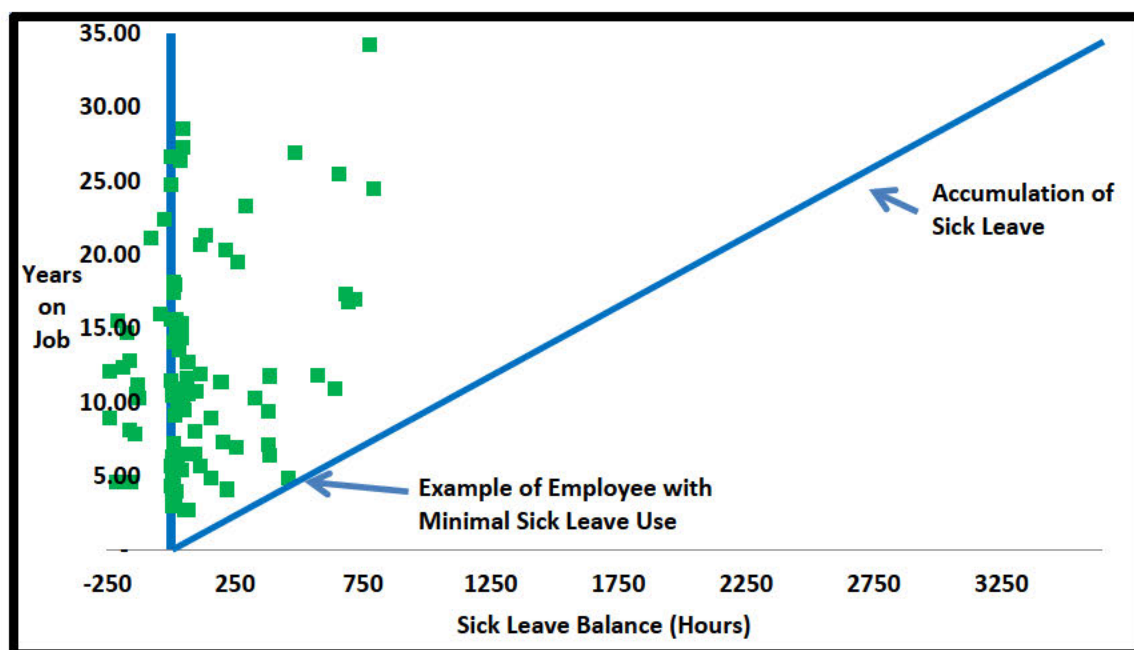
Table 4: Comparison of Leave Balance to Years of Service			
Category	Sick Leave at Start of Restricted Duty (in hours)	Years on Job Prior to Restricted Duty (in years)	Sick Leave Balance per Year on Job (in hours)
Average	102.92	12.29	8.37
Median	31.5	10.79	2.92

Source: OIG generated from data OHR provided for employees in our sample. The sick leave balances and employee years on the job prior to the employee's first restricted duty assignment.

A significant number of employees in our sample had low or negative sick leave balances at the beginning of the restricted duty assignment. For example, employees related to 21 of 97 assignments had sick leave balances of 0 hours or negative balances at the beginning of their restricted duty assignment. Another 39 of 97 assignments began with sick leave balances between 1 and 50 hours.

We charted a graph for each restricted duty assignment onto a scatter chart using the sick leave balance prior to the restricted duty assignment compared to the length of employment with USCP. We expected to see a pattern of employees with fewer years on the job to have lower leave balances and employees with more years on the job to have greater leave balances. However, regardless of the years of service, nearly all employees had relatively low leave balances at the beginning of a restricted duty assignment. As shown in Figure 1, the diagonal line indicates the accumulation of sick leave earned throughout the employee's career. A plot on the line or close to it would indicate an employee who has minimally used their sick leave while a plot further above the line signifies the extent to which an employee has used sick leave and signifies sick leave balances incongruent with years of service. The vertical line indicated a leave balance of zero, and anything to the left of the line indicates a negative sick leave balance,

Figure 1: Sick Leave Balances Incongruent With Years of Service



Source: OIG generated from data OHR provided. Plots represent sick leave balances at the beginning of 97 restricted duty assignments.

Employees with Multiple Restricted Duty Assignments

Civilian and sworn employees had multiple restricted duty assignments from October 1, 2012, through March 31, 2015, which included both non-POD and POD assignments. In fact, 23 employees had multiple non-POD assignments, and 2 employees had multiple POD assignments. Eight employees had both non-POD and POD restricted duty assignments. Of 205 employees with restricted duty assignments, 33 employees or 16 percent had multiple assignments from October 1, 2012, through March 31, 2015, as shown in Table 5. While the presence of multiple assignments does not in and of itself indicate abuse of the program, it indicates an increased risk that employees could be abusing the program.

Table 5: Listing of Employees with Multiple Restricted Duty Assignments

Category	Restricted Duty Assignments	Employees Assigned	Employees with Multiple Assignments
Employees on non-POD List	185	162	23
Employees on POD list	53	51	2
Employees on both non-POD and POD lists		(8)	8
Total	238	205	33

Source: OIG generated from data OHR provided for the period of October 1, 2012, through March 31, 2015.

Restricted Duty Assignments not Reported to OHR

As previously stated, during interviews Department officials informed OIG that there could be instances when Bureaus did not report restricted duty assignments to OHR. For example, when Bureaus assign officers to restricted duty for short periods, it is possible that the Bureau/supervisor did not notify OHR until after the officer has returned to full unrestricted duty. However, because OHR is the source for the data of restricted duty assignments and any data regarding Bureaus not reporting does not exist. Therefore, we were unable to identify specific instances in which the Department did not notify OHR of a restricted duty assignment. The draft directive addresses this issue by requiring the OHR restricted duty program manager to approve all restricted duty assignments.

Employees Engaged in Outside Employment While in a Restricted Duty Status

Some employees engaged in outside employment while in a restricted duty assignment. We reviewed the [REDACTED] for 61 employees to determine if any of those employees engaged in outside employment while in a restricted duty assignment. The [REDACTED] has a field where the employee checks “yes” or “no” in response to outside employment. Of the 61 [REDACTED] reviewed, 4 employees noted outside employment.

We requested [REDACTED] from OHR to corroborate the information provided on the [REDACTED]. SOP No. [REDACTED] requires that employees complete a [REDACTED] when engaging in outside employment and then forward the form through the chain of command. The SOP further requires that the Director of OHR ensure the original [REDACTED] is filed in the employee’s central personnel file. We noted that OHR had a record of only two [REDACTED] submitted relative to our sample. However, two individuals noted outside employment on [REDACTED] but did not submit a [REDACTED].

In addition to the four employees who engaged in outside employment and had restricted duty assignments from October 1, 2012, through March 31, 2015, another employee’s social media profiles indicated that the individual had an additional job as a firearms instructor during the period under review. Nevertheless, the employee checked “no” regarding outside employment on each of the [REDACTED] for multiple assignments. OHR did not have a record of a [REDACTED] related to this employee.

Examples of Potential Misuse and/or Abuse

We observed data correlations that appeared to indicate employees with low leave balances and multiple restricted duty assignments potentially misused or abused the restricted duty program. Additionally, one individual approaching the 12-month limit for restricted duty assignments sent an email to OHR inquiring, “If an officer is cleared and released by his or her doctor to resume full duty and later (1-2 months) the officer suffers another injury to the same leg or body part is that considered by OHR to be a new injury or a continuation of the first injury . . . If it is considered by the doctor to be a new injury does the officer’s restricted duty status start over?” One day prior to reaching the 12-month limit, the officer submitted a new [REDACTED] describing a new injury and remained on restricted duty for another full year. The officer returned to full unrestricted duty 1 year later, but suffered a re-injury 5 months later and stayed on restricted duty until retirement in

2015. A subsequent review of the individual's social media profile indicated a status update in which the officer complained of age discrimination related to the mandatory retirement age and noted, "When you know that you are physically and mentally still able to fulfill all the required qualifications of your duties, its [sic] a little hard to understand."

The Department provided a civilian employee restricted duty assignments on four separate occasions from October 1, 2012, through March 31, 2015. On May 24, 2013, the employee visited a doctor and obtained a note, which stated, "remain on desk duty and refrain from weight bearing activities and long standing." On June 9, 2013, while still on restricted duty, the employee posted a picture to social media in which the employee was standing and holding two large fish [REDACTED]

In addition to the 4 restricted duty assignments, the individual used 364 hours of sick leave and 508 hours of leave without pay from October 1, 2012, through March 31, 2015. A subsequent review of the employee's personnel file included multiple references to leave abuse.

Various additional instances of potential abuse included an example in which the Department originally placed another individual on restricted duty as a result of head trauma from an automobile accident. Explanations on [REDACTED] seemed to evolve throughout the restricted duty assignment that included sleep apnea, high blood pressure, upset stomach, and diarrhea. Another individual remained on restricted duty for more than 1 year because of an injury caused by prolonged sitting. Yet, the doctor's recommendation for this injury included "seated office work only." In another case, an employee submitted a [REDACTED] that stated, "I was seen by my doctor and she stated that my condition is not reversible this condition is permanent." Shortly thereafter, the employee submitted a signed letter stating an intent to return to unrestricted duty without any explanation for recovery from the previously diagnosed "permanent" condition. The Department appropriately extended the restricted duty assignment until the employee provided further medical documentation supporting a return to full unrestricted duty.

While the presence of low leave balances, multiple assignments, outside employment, and potential misuse does not in and of itself indicate abuse of the program, 3 of the 5 examples discussed were civilians¹¹ who worked in the same organizational unit. Yet, there was a lack of progressive monitoring to detect potential abuse of the program.

¹¹ Two of 3 civilian employees were non-POD beneficiaries of the program. The remaining civilian claimed a POD injury, yet as described above had contradicting documentation in the file.

Conclusions

While the presence of low leave balances, multiple assignments, outside employment, and potential misuse does not in and of itself indicate abuse of the program, the presence of several employees with multiple assignments in a 30-month period could indicate misuse or abuse. Thus, as the *Government Auditing Standards* require, OIG Audits referred the issues to OPR. Although OIG was reviewing the AUP and not conducting an audit, some potential misuse and/or abuse conditions noted in this report may be more serious than reported, and other matters might have come to our attention that OIG would have reported. Thus, OIG makes the following recommendation.

Recommendation 4: We recommend that the United States Capitol Police consider leave balances, multiple restricted duty assignments, and outside employment when assigning employees to restricted duty status. Furthermore, the Department should ensure that the Office of Human Resources receive restricted duty documentation to support assignments and provides consistent monitoring and employee enforcement of compliance with the program, which would identify any abusers of the program.

Options to Improve the Restricted Duty Program

Opportunities exist for the Department to improve its restricted duty program. Because the Department did not identify or designate positions available for restricted duty assignments, it is not receiving maximum benefit from employees in restricted duty assignments. Furthermore, the Department did not consistently revoke police powers from sworn officers during restricted duty assignments. In addition, limiting the maximum length of restricted duty assignments would create an opportunity for the Department to save money.

Identifying Restricted Duty Positions

Directive [REDACTED] indicates that restricted duty assignments are granted when positions are available at the time of injury. The directive states, “The Department will provide a temporary disability restricted duty assignment when one is available, to personnel unable to perform their primary duties due to a temporary disability.” We requested a listing of restricted duty positions to determine positions available for accommodating requests. We received a response from the Department’s Audit Liaison stating, “According to OHR, under the current directive, there is no list of identified restricted duty positions. Rather, under the proposed draft guidance, the Restricted Duty Program Manager will work with the employee’s parent element to place the employee with the same Division or Bureau and, if nothing is available, will contact other Bureaus and Offices to identify an available assignment.”

The proposed draft directive should provide the restricted duty program manager with authorization to assign restricted duty assignments based on the availability of positions. Although OHR queried the 10 largest Bureaus to determine the positions available, the listing had only 11 positions. Yet during our scope, the Department had approximately 30 individuals on restricted duty at any given time. USCP should identify all of the restricted duty positions and document

tasks associated with those positions to maximize its manpower and ensure the most efficient and effective use of individuals assigned to restricted duty status.

Inconsistent Revocation of Police Powers

The Department did not consistently remove police powers from officers on restricted duty. The directive regarding police powers on restricted duty is USCP Directive [REDACTED] and states, “Sworn employees who suffer injuries or illness will retain their police powers and police credentials while in limited/restricted duty status if their injury or illness does not preclude the safe handling of the issued service weapon. Sworn employees may retain their issued credentials and weapon unless there is an administrative reason to suspend police powers. Supervisors will continue to monitor the circumstances surrounding employees who suffer injuries or illness to determine if the condition warrants the revocation of police powers.” The directive also requires that the parent element supervisor distribute the [REDACTED] as follows: (a) give one copy to the member, (b) attach the original to the [REDACTED] and forward to the Section Commander, and (c) file one copy in the employee’s Unit Personnel Jacket.

We reviewed 92 restricted duty assignment files of which 83 were for sworn officers and 9 were for civilian employees. We reviewed the 83 sworn officer files to determine if there was evidence the Department revoked the officer’s police powers while on restricted duty. We noted that only 9 of the 83 officer files had a [REDACTED] indicating a revocation of police powers, but only 17 had a [REDACTED] indicating a reinstatement of police powers. An OHR official stated that no policy existed requiring the Department to place [REDACTED] in the restricted duty folder.

USCP’s draft revised Directive [REDACTED] states, “Unless there is an operational reason not to revoke police powers, sworn POD or non-POD employees will have their police powers revoked while in a RD [restricted duty] status and will be required to turn over their law enforcement credentials and their issued service weapon. Supervisors will complete a [REDACTED] when revoking police powers and a [REDACTED] when police powers are restored upon an employee’s return to full unrestricted duty.”

Reducing Maximum Restricted Duty Assignments Could Result in Cost Savings

According to Department officials, the restricted duty program is a benefit for employees and not an entitlement, and as such, the Department has considered shortening the maximum restricted duty assignment to 6 months. For the period October 1, 2012, through March 31, 2015, there were 238 restricted duty assignments for 205 individuals. Of those assignments, 57 assignments for 53 employees exceeded 6 months, and 101 assignments for 91 employees exceeded 3 months. The restricted duty directive limits assignments to 12 months without a waiver from the Chief of Police. The proposed draft directive would, however, limit non-POD restricted duty assignments to 6 months for each 12-month period. Based on such changes, the Department could have saved about \$2 million, excluding overtime, if USCP had implemented the draft directive for the 30 months analyzed.

When employees obtain restricted duty assignments, there is often a need for the employee’s normal duties to be backfilled. The calculations in Table 6 assume that all restricted duty

assignments resulted in backfilled positions. Therefore, actual savings may vary from the figures provided.

Table 6 provides a comparison of the financial impact of the program on USCP resources. Using payroll data from the FY 2014 financial statement audit and information provided in the *Statement of Disbursements of the U.S. Capitol Police for the Period October 1, 2014, through March 31, 2015*, we estimated each employee's daily cost to the Department. We did not include overtime pay in our estimates. For the 30 months we conducted the AUP, we estimated the Department spent more than \$10 million on employees assigned to restricted duty.

Using the proposed draft directive, which limits non-POD restricted duty assignments to 6 months, we estimated the cost would have been roughly \$6.3 million for the same period, creating an estimated \$2.2 million in savings. For cost comparison purposes, we also calculated an estimate limiting restricted duty to 3 months. This would have resulted in an estimated \$4.5 million in savings as shown in Table 6. Additionally, the Department would reduce costs if it eliminated non-POD injury cases from the restricted duty program. Employees would be required to use their own leave, which would motivate individuals to return to work more quickly; thereby, eliminating the need to backfill their positions.

Table 6: Potential Cost Saving by Limiting the Maximum Non-POD Restricted Duty Assignments					
Period of Time	Calculated Current Cost	Estimated Cost (6 months)	Potential Savings (6 months)	Estimated Cost (3 months)	Potential Savings (3 months)
30 Months	\$8,616,688	\$6,326,944	\$2,289,743	\$4,070,429	\$4,546,258
Annual Savings ¹²	\$3,446,675	\$2,530,777	\$915,897	\$1,628,171	\$1,818,503

Source: OIG calculated potential cost savings using payroll data from the FY 2014 financial statement audit and information provided in the *Statement of Disbursements of the U.S. Capitol Police for the Period October 1, 2014 through March 31, 2015*. We did not include overtime pay in our estimates. Calculations are rounded to the nearest dollar.

Conclusions

The Department has drafted guidance that may address some of the issues reviewed. USCP could improve its restricted duty program by identifying and designating positions or assignments throughout the Department. Maintaining an active list of positions available for restricted duty assignments would allow eligible employees to perform meaningful and constructive support functions to assist USCP in lieu of employees using accrued leave or being placed in a non-pay status pending return to full duty. The Department also should enhance its practice of revoking and restoring police powers during restricted duty assignments by establishing a consistent process including required forms, applicable supporting documents, and signatures stored in personnel files when a sworn employee is able to resume full unrestricted duty. The Department could have potential costs savings by reducing the maximum length of restricted duty assignments and ensuring

¹² Annual savings were calculated by dividing our 30-month scope period by 30 and then multiplying the monthly amount by 12 in order to obtain an annual savings figure.

that employees do not exceed the established requirements, and eliminating non-POD injury cases from the program.

Recommendation 5: We recommend that the United States Capitol Police immediately identify restricted duty positions throughout the Department and document duties associated with such positions ensuring that the number of employees in restricted duty status does not exceed the number of available positions/assignments and employees are held accountable for performing meaningful and constructive tasks for the organization.

Recommendations 6: We recommend that the United States Capitol Police establish a consistent process, which includes supporting evidence for revoking and restoring police powers, and that such documentation is placed in the employee's personnel file.

Recommendations 7: We recommend that the United States Capitol Police consider reducing the maximum length of restricted duty assignments, ensuring compliance with established time requirements, and eliminating non-POD injury cases from the restricted duty program, which could potentially result in cost savings to the organization.

Recommendations 8: We recommend that the United States Capitol Police implement consistent monitoring and enforcement of employee compliance with restricted duty guidance, which should assist in identifying potential misuse or abuse of the program.

APPENDICES

List of Recommendations

Recommendation 1: We recommend the United States Capitol Police immediately update and implement its draft guidance for restricted duty to include updated information about organization elements and determine whether civilians should be beneficiaries of such a program in both Performance of Duty and Non-Performance of Duty cases.

Recommendation 2: We recommend that the United States Capitol Police immediately implement its draft guidance for restricted duty to ensure more transparency and accountability of its program by requiring one individual to be held accountable for the controls and compliance of the restricted duty program, which will assist in ensuring compliance and the integrity of the program. The draft guidance specifically provides the Office of Human Resources, restricted duty program manager, the authority to monitor the restricted duty program, ensuring that employees submit complete forms and appropriate medical documentation, and coordinating employees return to full unrestricted duty in a timely manner.

Recommendation 3: We recommend that the United States Capitol Police enforce the September 2011 draft [REDACTED] to ensure that employees are utilizing the [REDACTED] time clocks; thereby, appropriately monitoring employees in a restricted duty status and ensuring individual time and attendance.

Recommendation 4: We recommend that the United States Capitol Police consider leave balances, multiple restricted duty assignments, and outside employment when assigning employees to restricted duty status. Furthermore, the Department should ensure that the Office of Human Resources receive restricted duty documentation to support assignments and provides consistent monitoring and employee enforcement of compliance with the program, which would identify any abusers of the program.

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DEPARTMENT COMMENTS

PHONE: 202-224-8886



UNITED STATES CAPITOL POLICE
 OFFICE OF THE CHIEF
 119 D STREET, NE
 WASHINGTON, DC 20510-7218

September 23, 2015

COP 151071

MEMORANDUM

TO: Ms. Fay F. Ropella, CPA, CFE
Inspector General

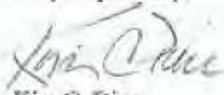
FROM: Kim C. Dine
Chief of Police

SUBJECT: Response to Office of Inspector General (OIG) draft report *Agreed Upon Procedures: United States Capitol Police Restricted Duty Program* (Report No. OIG-2015-08).

The purpose of this memorandum is to provide the United States Capitol Police response to the recommendations contained within the Office of the Inspector General's (OIG's) draft report *Performance Audit of USCP Restricted Duty Program* (Report No. OIG-2015-08).

The Department generally agrees with all of the recommendations and anticipates having the Restricted Duty Program Directive implemented by the end of the year which should resolve and close most of these recommendations. The Department will assign Action Plans to appropriate personnel regarding each recommendation in effect to achieve long term resolution of these matters.

Thank you for the opportunity to respond to the OIG's draft report. Your continued support of the men and women of the United States Capitol Police is appreciated.

Very respectfully,

 Kim C. Dine
 Chief of Police

cc: Matthew R. Verderosa, Assistant Chief of Police
 Richard L. Braddock, Chief Administrative Officer
 [REDACTED], USCP Audit Liaison

Nationally Accredited by the Commission on Accreditation for Law Enforcement Agencies, Inc.

Agreed-Upon Procedures

Assess Controls and Compliance with Applicable Guidance

1. Obtain a list of all employees assigned to administrative restricted duty status for October 1, 2012, through March 31, 2015
2. Generate a non-statistical sample based on analytical procedures
3. Verify a [REDACTED] was completed and reviewed by the parent element supervisor
4. Verify the following information was provided:
 - a. Signed disability certificate from a healthcare professional
 - b. Appropriate DOL forms
5. Verify updates were provided to the [REDACTED] every 14 calendar days unless healthcare professional states the period of disability will last longer than this time
6. Identify employees with multiple cases
7. Verify any employees in restricted duty for longer than 12 months received a waiver
8. Identify employees with cases extending beyond 6 months
9. Using the cases that exceed 6 months determine the cost savings had the revised draft policy been in place. Using the same cases determine cost savings if the policy was 3 months.
10. Of the samples selected, identify the nature of the injury, the doctor, and healthcare facility.
11. Identify the activity that caused the injury.
12. Analysis employee compliance with clocking in and out [REDACTED]

Trend Analysis of Years of Service and Leave Balances

13. What were the leave balances prior to the injury
14. Determine how many years with the USCP
15. Identify the restricted duty positions and tasks performed
16. Identify any outside employment while in restricted duty status.
17. Determine if there are cases of restricted duty not reported by OHR

Options to Improve Restricted Duty Program

18. Research Best Practices. Identify items that could be added to USCP guidance.

CONTACTING THE OFFICE OF INSPECTOR GENERAL

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1-866-906-2446

Write us at:

*United States Capitol Police
Attn: Office of Inspector General, Investigations
119 D Street, NE
Washington, DC 20510*



Or visit us – we are located at:

*499 South Capitol Street, SW
Suite 345
Washington, DC 20003*

You can also contact us by email at: OIG@USCP.GOV

**When making a report, convey as much information as possible such as:
Who? What? Where? When? Why? Complaints may be made anonymously or
you may request confidentiality.**

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