

**SECTION - MEDICAL/NURSING SERVICES
ADMINISTRATIVE DIRECTIVE NO. 528
(Replaces A.D. No. dated 4/13/06)**

Effective Date: March 8, 2007

SUBJECT: INDIVIDUAL DEATH

I. PURPOSE

To provide procedures in the case of an Individual's death.

II. AUTHORITY

California Welfare and Institutions Code 5328.8, Penal Code 5021(a), Department of Mental Health (DMH), and the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

III. POLICY

It is the policy of Coalinga State Hospital (CSH) to investigate any Individual death as fully as is required by state Law and the JCAHO. The death of any Individual at CSH is defined as a coroner's case; JCAHO requires that any death requires review by the Morbidity and Mortality Committee. A root cause analysis is required for any unexpected death.

IV. METHOD

A. In the event of any death, the unit staff will do the following immediately:

1. Notify Nurse of the Day (NOD), Executive Director, Standards Compliance Director, Police Services and the Medical Director.
2. Ensure that the chart is secured by Police Services; late entries may be made by contacting the Investigations Unit.
3. Ensure that, except for lifesaving procedures the body is not moved without the approval of the coroner and Police Services.

B. The Medical Physician on Call (MOC) will,

1. Respond to a call of suspected death. Examine, treat if appropriate, and pronounce death. A physician's progress note will be written, noting official time the Individual was pronounced dead and complete AT 2525.4 of the Death Investigation Packet.

2. Write specific orders for transportation of the body to Coalinga Mortuary after #5 below.
3. Review the Individual's chart, any other documents, and potential organ donor list as appropriate to ascertain whether or not the Individual is an organ or tissue donor.
4. Do not request an autopsy from relatives or guardian. This is unnecessary and can cause confusion.
5. Document all calls, and actions in chart.
6. Inform Coalinga Mortuary if the Individual is suspected or diagnosed as having an infectious disease process.
7. Refer further inquiries concerning the death of an Individual to the Medical Director or designee.

C. Nurse of the Day (NOD):

1. After-hours, NOD will notify the attending physician/MOD/chaplain.
2. NOD will have individual death packets available.
3. Initiate the death packet.
4. Initiate death notification procedure, i.e., Executive Director, Medical Director, Hospital Administrator, Clinical Administrator, Director of Standards Compliance, Public Relations Officer, Program Director and complete AT 2525.3 of the Death Investigation Packet.
5. Notify the Reception Desk, Trust Office, Health Information Management Department (HIMD), and Patients' Rights Advocate Office as soon as possible.

D. Department of Police Services (DPS):

(The following to be supervised by a DPS Sergeant or designee):

1. Police Services will have individual investigative death packets available.
2. Initiate investigative death packet, secure area, fingerprint, photograph, collect evidence, notify all involved staff to remain at CSH until interviewed, conduct interviews, complete Preliminary Death Report (MH 201) and Crime Report or Misdemeanor Incident Report.
3. Notify the Senior Special Investigator (SSI) Office.

4. Notify the coroner within two hours of the discovery of death. This notification must be transmitted by telephone, direct contact, or written notification. Notification shall also include the existence of any organ or tissue donation document. Transmit coroner's instructions to staff of the Individual's unit and/or DPS.
5. Make certain that, except for lifesaving procedures the body is not moved without the approval of the coroner, DPS Investigator, or SSI. Under unusual circumstances, the coroner may be requested by DPS to give permission to move the deceased prior to the arrival of the coroner.
6. Secure all medical records and property of the deceased Individual. Medical records shall be turned over to the SSI upon arrival, and property shall be turned over to the Trust Office as soon as possible.
7. The SSI shall deliver the deceased Individual's medical records to the HIMD. The current hospital medical record shall be photocopied in its entirety. Once photocopied, the original current hospital medical record shall be returned to the SSI. The photocopied medical record shall be organized into chart folders, identified appropriately, and delivered to the Medical Director's Office where it may be checked out as required for completion of required hospital reports. All other medical records pertaining to the deceased patient (prior hospitalization records, Reserve Chart) are to remain in custody of the HIMD Director.
8. Within two (2) hours of any death which occurs within the facility, the Chief of Police Services or designee shall report its discovery to the City of Coalinga Chief of Police, Fresno County Sheriff, and the District Attorney's Office. The initial report of the death may be transmitted by telephone, direct contact or written notification, and shall outline all pertinent facts known at the time of the report and all persons to contact, in addition to any other information the reporting officer deems pertinent. In all cases where the Individual is also an inmate under the jurisdiction of the California Department of Corrections and Rehabilitation (CDCR), the Watch Commander at Pleasant Valley State Prison will be notified and provided with the above information. If the Individual is currently on parole status, the on-grounds state parole office shall be notified.
9. Ascertain Coroner's case number, time, and place of the autopsy.
10. Respond with a level-of-care employee to witness the Body Release Form (AT 2510) which must be signed with the name of the undertaker or representative, and the name of the funeral home represented.
11. The completed Body Release Form (AT 2510) will be placed in the medical record. Release of the body after authorization by the coroner will be documented in the I.D. Notes.

12. The body should be removed from the hospital as discreetly and expeditiously as possible, via Unit I.
- E. Program Director or Designee:
1. Program Director/Designee will arrive at the hospital as soon as possible.
 2. Program Director/Designee is responsible to provide Headquarters Reportable Special Incident information to the Director of Standards Compliance to ensure the incident is reported to Sacramento within the 24-hour time frame.
 3. Program Director/Designee will assist the Hospital SSI, DPS, and Mortality Review Committee, as needed.
 4. If the death occurs at a community hospital, the Program Director should ensure that all appropriate notifications are made and necessary procedures are implemented. If the Individual's death at a community hospital is such to require management involvement, the Program Director/Designee will arrive at the hospital as soon as possible.
 5. Subsequent to physician's notification of the Individual's death, family contact will be provided only from an employee designated by the Program Director to function as liaison between the hospital and the family.
- F. Senior Special Investigator (SSI):
1. Initiate preliminary death investigation into the cause and circumstances of death. Only "unusual, suspicious, or unexpected" deaths require an intensive investigation.
 2. Review all the forms in the Death Investigation Packets for completeness, and retain them until investigation is concluded.
 3. Conduct interviews, collect necessary information, obtain and secure photographs, medical record, and other written material.
 4. Assist the Coroner's investigator.
 5. Make the medical record(s) available to the HIMD and medical/clinical staff during the course of the investigation, and release the record(s) to the HIMD Director upon conclusion of the investigation.
 6. Attend autopsy to furnish relevant information to the pathologists and obtain relevant information for investigation.

7. Attend Mortality Review Committee meetings as announced, providing any investigative findings which are required to facilitate Committee response to the Executive Director.
8. Submit a completed death investigation report to the Executive Director on each death to include all findings of the investigation, Resident Death Form, the Mortality Review Committee Report and conclusion of facts.

G. Director of Standards Compliance:

The Director of Standards Compliance will fax a Headquarters Reportable Incident Brief to DMH Headquarters, Long Term Care Services Division, by the next working day. Additionally, the Director of Standards Compliance will notify the Department of Health Services, according to their required protocol.

H. Medical Director:

1. Within eight (8) hours of the notification of a death, the Medical Director will ensure a written report is submitted to the County Sheriff, Fresno Coroner and the County District Attorney. This report shall include all circumstances and details of the death known at the time the report is prepared, and shall include the names of all the persons involved in the death, and all persons with knowledge of the circumstances surrounding the death.
2. Within 24 hours, the Medical Director will prepare a preliminary report of the circumstances of the death, and if possible, potential causes, to the Executive Director.
3. In all cases where the Individual is also an inmate under the jurisdiction of the CDCR, a copy of the report will be forwarded to the Legal Section, HIMD and then forwarded to the appropriate CDCR or Parole office.
4. The Morbidity and Mortality Committee will review the case within 72 (working day) hours and prepare a preliminary report (that is, before the autopsy results are available) within 7 days and the Medical Director or will review the preliminary report and preliminary recommendations of the Mortality Review Committee and forward it to the Executive Director and Governing Body within 7 working days.
5. In any case in which a CDCR inmate or parolee dies during hospitalization at CSH, or during transfer/treatment from CSH to a community medical facility, the Medical Director or designee shall contact the Chief Medical Officer (CMO) of the sending CDC institution by telephone within 24 hours.
6. Written notification shall also be made within 24 hours after the death occurs, and shall provide all facts regarding the death in possession of the Medical Director at the time of the report.

I. Executive Director:

The Executive Director will review the investigation report from the Hospital Investigator and then forward it to the Chief of the Department's Investigations Unit.

J. Public Information Officer (PIO):

1. The PIO is responsible to notify the DMH Headquarters' Assistant Director, External Affairs, the media: all local community elected officials, including Assembly and Senate Representatives (attached list): and the hospital Advisory Board according to established time frames.
2. Information requests from the news media regarding significant events regarding Individuals receiving services shall be directed to the PIO.
3. The PIO shall consider all requests from the media as public information requests and shall limit the release of information to following:
 - a. Confirmation that a significant event did occur and the approximate time.
 - b. Confirmation that the proper authorities have been notified.
 - c. Confirmation that an internal investigation of the event will be conducted by the state hospital.
 - d. A statement that no further information about the Individual will be release from the hospital or facility in accordance with Privacy laws and regulations.
 - e. Other information not specific to an Individual receiving care may be deemed appropriate for release to the media in certain situations.
 - f. General information and responses to questions from the media and community about the incident or event must receive advance authorization from DMH Headquarters' Assistant Director, External Affairs, and be consistent with restrictions set forth by laws and regulation concerning privacy, investigation, and investigatory procedures.

K. Trust Officer:

1. Make available to the doctor contacting relatives or guardian all the information about available funds or other means for burial.
2. Make necessary arrangements with relatives or guardian about disposition of valuables, bills, money, estate, clothing, and other possessions.

3. In cases where the responsibility for funeral is left to the state, make necessary financial arrangements for disposition of the body.

L. Chaplains:

A chaplain may speak with the immediate family by phone, and meet with them if they come to CSH, to provide spiritual support and guidance.

M. HIMD:

1. Take custody of all records released by the SSI, placing them in a "locked cabinet" until the case is closed, then in usual storage.
2. Furnish copies of the Death Certificate to the SSI.
3. Notify Parole if the Individual is a parolee.
4. Provide written notification to identified agencies for Individuals under the jurisdiction of the CDCR or WIC 6600 Series commitments.

N. Mortality Review Committee:

1. Perform medical/clinical review of each deceased Individual's clinical record and other documents relevant to the circumstances of the death. The committee's review shall be completed in no more than 72 working day hours, and be completed no more than 7 working days after receipt of the autopsy report.
2. Within 30 days after the autopsy, give written or verbal notice to the Infection Control & Tissue Committee Chairperson if autopsy of deceased Individual revealed any infectious disease process at the time of death.
3. In the event a mortality review is required as part of the analysis for pending litigation, the Chair will be notified of an expedited timetable by the Director of Standards Compliance.

V. CORONER

A. Autopsy:

1. In those cases when an autopsy is not required by the Coroner, the Medical Director may authorize an autopsy when the hospital has a compelling interest to determine pathology.
2. The SSI and a hospital physician will be available by telephone to the pathologist during the autopsy to furnish any relevant information to the pathologist and to obtain any information relevant to investigation and mortality review.

B. Death Certificate:

1. To be completed by the coroner.
2. The coroner furnishes a copy of the autopsy report to the hospital upon request of the SSI.
3. The HIMD requests the death certificate on all Individual deaths.

C. Pathologist's Report:

A copy of the pathologist's report will be furnished to the Medical Director when it is complete.

VI. FUNERAL ARRANGEMENTS

- A. Sections of 7100 and 7200-7208 of the Health and Safety Code specify the custody of remains and duties of interment.
- B. Legal guardianship ceases at the time of death. When the coroner has released a body, arrangements for burial or cremation are to be made by the nearest relative. If no relative can be located, the guardian may be requested to make the necessary arrangements.
- C. Relatives are to receive information about available money and insurance benefits from the Trust Officer. They may make arrangements directly with the mortuary where the body has been placed by the coroner or they may authorize arrangements to be made by a mortuary of their choice.
- D. To the extent possible and economically feasible, such disposition shall be in accordance with the Individual's religious beliefs. Normally, the arrangements will be cremation and burial in a local cemetery with a single registry marker. Cremation requires written authorization, usually in the form of a certified telegram from next of kin, if available.



W. T. VOSS
Executive Director

Cross Reference(s):

- A.D. No. 154 Public Relations
- A.D. No. 354 Organ and Tissue Donation
- A.D. No. 830 Special Incident Reports

Attachment A – Public Information Officer Notification List

Public Information Officer

Notification List

SENATE

Dean Florez
16th District
Term expires w/General Election 11/2010

Capitol Office

(916) 445-4641
(916) 327-5989 Fax

Fresno Office

(559) 559-264-3070
(559) 559-445-6506

ASSEMBLYMEMBER

Nicole Parra
30th District
Term expires w/General Election 11/2008

Capitol Office

(916) 319-2030
(916) 319-2130 Fax

Bakersfield Office

(661) 334-3475
(661) 334-3796 Fax

Hanford Office

(559) 585-7170
(559) 585-7175 Fax

CITY OF COALINGA MAYOR

Trish Hill
City Offices
935-1533
935-5912 Fax
Residence
935-3214