

Policy & Procedure

ACCMHS

Allegan County Community Mental Health Services
P.O. Box 130, 3283 122nd Avenue, Allegan, MI 49010

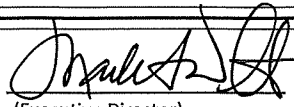
POLICY/PROCEDURE TITLE: Death Reporting

POLICY/PROCEDURE #: 1308

Section: Recipient Rights

Developed and maintained by: Recipient Rights Officer

Scope: ☒ ACCMHS Staff ☐ MH/IDD, ☐ Housing, ☐ SUD,
☐ Integrated Health, ☒ ACCMHS Contract Providers
☐ Other _____

Approved By: 

(Executive Director)

Approved By: _____

(Medical Director; as applicable)

DATES

First Effective

12/2014

Revised

03/2020

Supersedes

03/2019

POLICY

The purpose of the following procedure is to guarantee a timely, objective review of all deaths of ACCMHS consumers and to ensure that the rights of the consumers are protected, as well as to make certain that the deaths are tracked and reviewed in accordance with applicable rules, regulations, laws, and standards.

PROCEDURE

- I) All deaths of ACCMHS consumers will be verbally reported to the Office of Recipient Rights as soon as notification of the death is received. The verbal report will include the name of the person making the report, name of the consumer, location of the death, cause of death (if known), and any unusual circumstances related to the death.
 - A) The Office of Recipient Rights will maintain a Death Log that will record all necessary information pertaining to the death of a consumer.
 - B) The Office of Recipient Rights will maintain Death Files for each deceased recipient which will be commenced upon notification of death. The Death Files will be maintained in the secured Rights Office and shall not become part of the clinical file.
 - C) The Office of Recipient Rights will, as needed, sequester the recipient's ACCMHS case file and gather and log all documents received after the recipient's death.
 - D) When applicable, the Office of Recipient Rights will contact the provider and sequester their records in accordance with the ACCMHS Contract for Services.
- II) The Office of Recipient Rights will inform relevant ACCMHS staff of the death immediately after sequestering all records.
 - a. Supervisors of ACCMHS employees who provided services and supports to the deceased recipient will be contacted by ORR and take responsibility for notification of the staff & clinicians in the manner they deem appropriate.
 - b. The ORR will inform the Executive Director, Management Team, and Quality Improvement Coordinator of all deaths via email. Additional staff will be notified of the death as needed dependent on the services received by the recipient (i.e. Contract Manager, Medical Office Manager, Residential Coordinator, Employment Services Supervisor, etc...).

- III. The Office of Recipient Rights will request that the primary clinician complete an incident report, the ACCMHS Death Report, and complete the Discharge Summary in EMR. The incident report, Death Report, and Discharge Summary are to be completed and submitted to the Rights Office as soon as possible, but no later than 2 business days following notification of the death.
 - A. The Office of Recipient Rights will request the recipient's EMR record be "inactivated" 2 business days following the notification of death.
 - B. The Office of Recipient Rights will request a death certificate from the appropriate county clerk immediately upon receipt of the Death Report. The Office of Recipient Rights will request autopsy reports, pathology findings, police reports, and dispatch (i.e. 911) logs as needed for a comprehensive review of the death. All such documents will be maintained in the Death File.
- IV. The Office of Recipient Rights will complete a review of the deaths of all ACCMHS recipients. This review will be initiated immediately and include reviewing at least the following:
 - A. Death certificate, death report, and incident report;
 - B. Current Individual Plan of Service and Primary Assessment;
 - C. At least 6 months of ACCMHS Service Notes;
 - D. If the death occurred during service delivery, interviews with staff present.
- V. For all deaths, the Quality Improvement Coordinator shall classify the death as a critical incident or sentinel event per ACCMHS policy. In cases of death by suicide, homicide, or other unexpected event, the Quality Improvement Coordinator will determine whether a root-cause analysis shall take place. In the event a root-cause analysis is necessary, the Quality Improvement Coordinator will convene a root-cause analysis committee in accordance with ACCMHS policy.
- VI. The ORR will submit the completed Death Review to the ACCMHS Executive Director. The ORR will determine, as part of the Death Review, the need for further investigation.
 - A. The ORR will initiate a Rights Investigation if information gathered during the review process involves an apparent or suspected rights violation.
 - B. The ORR will initiate a Rights Investigation for all suicides of individuals receiving community mental health services.
 - C. The ORR will initiate a Rights Investigation for all accidental deaths which occurred under program supervision.
- VII. Upon completion of the Death Review (and Rights Investigation, if applicable), the ORR will file original paperwork relevant to the death (i.e. death certifications, autopsy findings) in the Death File. Death Files will be maintained by fiscal year in the secure Rights Office.
 - A. Copies of the Death Review and Death Certificate will be placed in the ACCMHS record prior to releasing the record for closure and filing.