

OA Reablement service	OA Day Care	OA Residential Care	Domiciliary Services	DMH Day Services	DMH Supported Living	DMH Residential Services	EIA'd
✓	✓	✓	✓	✓	✓	✓	✓

## D11

# DEATH OF A SERVICE USER - Unexpected POLICY

To ensure all staff are fully aware of their roles and responsibilities when a service user dies unexpectedly.

## PROCEDURE

### When an unexpected death occurs

1. Staff must never assume that death has occurred.
2. The emergency services must be telephoned immediately and their instructions followed. They must be informed if there is a DNACPR (Do not attempt cardiopulmonary resuscitation) in place if known. Follow the specific P15 person centred advanced care statement procedure for DNACPR.
3. The service user must not be moved. Ensure the service user's dignity and privacy is respected. If there is a Deprivation of Liberty Safeguards in place follow the DOLS policy and procedure. Specifically point 30 onwards of the procedure.
4. If a service user is sent to hospital following a fall and subsequently dies Follow the falls policy and procedure ensuring that all CQC notifications are completed and reported.
5. Other service users must be comforted and where possible moved from the room.
6. Once the emergency services are in attendance they will take the lead and continue with emergency procedures before confirming the death.
7. At this point the emergency services may contact the police.
8. The emergency services will advise on further actions to be taken. A post mortem may be required.
9. Contact the manager on duty (Reablement / Domiciliary Services contact the out of hour's social worker).
10. Ensure the next of kin / preferred contact is informed of the unexpected death of their relative / friend once the death has been confirmed.
11. If you are unable to contact the next of kin / preferred contact then Adult and Local Services must be informed.

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12. Regulated services must inform The Care Quality Commission (CQC) by using the appropriate notification form.
13. The police may return to take statements from staff on duty.
14. Retain medication as per the medication policy.
15. For Domiciliary and Reablement services - ensure all documentation is fully completed and a short statement from the carer concerned is taken. All documentation held in the home must be returned to the office and archived for audit purposes.

### After confirmation of death by a health professional

#### 1. SUMMARY

On confirmation of death the following must be applied: **Residential services only**

- Follow Appendix 1 checklist to ensure all is completed where applicable.
- Inform the manager or on call manager if out of hours.
- The service user's wishes must be followed
- The service user's cultural, spiritual and religious beliefs must be respected.
- Replace pillows / dirty linen / clothing.
- All personal care should be attended to.
- Lay the service users arms and fingers out straight where possible.
- Close the service user's eyes.
- Close the service user's mouth with their dentures in where possible.
- Tidy around the bed.
- Cover the body with a sheet.
- Lock the door and wait for the funeral director.
- Ensure all records are fully completed in the daily / communication records, including the time of death.
- Continue to keep the manager informed.
- Contact the appropriate health care professional to remove any medication devises.

2. In cases where the service user has no known relatives, the Adult and Local Services department will take responsibility.

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3. A funeral director will be requested to remove the deceased person after death has been certified by the GP. If any personal items are removed from the body this must be recorded in the supervisor's daily record book and added to the personal monies book by the senior member of staff on duty and securely stored. Any personal possessions that remain with the person should also be recorded in the daily / communication records.
4. Following the death of a service user the service user file must be sealed and nothing added or changed. The file must be archived in accordance with the archiving procedure.

### **Dealing with the service users' belongings, following their death.**

1. The next of kin / preferred contact have five days to collect any possessions. Two members of staff should compile an inventory of the service user's possessions.
2. If the next of kin / preferred contacts are unable to complete the removal of the service user's personal effects within the required time a discussion should take place with the family to agree how the belongings should be packed and stored prior to collection. In residential services cash should be banked in line with Cumbria Care's financial procedures in the service user's name and valuable possessions securely stored until authorised for release. (See financial procedures). For Day Services monies must be returned to the service user's representatives.
3. In Domiciliary / Reablement services house keys must be returned to the service user's representatives.

### **MANAGING BEREAVEMENT - STAFF**

1. Staff on duty must be offered the opportunity to discuss the matter and be provided with support and understanding as required.

### **MANAGING BEREAVEMENT - SERVICE USERS**

1. Other service users should be informed about the death of the service user.
2. Any request from other service users to visit the deceased should be facilitated by the staff if appropriate and in accordance with the deceased's wishes.

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3. Staff shall be aware of the feelings of other service users, be open with them and offer them support.
  
4. Confirmation should be sought from the family concerning attendance at the funeral by staff or service users.

The Appendix 1 D11 / D12 form must be used.

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