

# SHIAWASSEE COUNTY COMMUNITY MENTAL HEALTH AUTHORITY

## POLICY AND PROCEDURE MANUAL

Section: Clinical  
Policy Number: 55  
Subject: Review and Reporting of Recipient  
Death

Effective Date: 4/1/92  
Last Revision Date: 7/27/09  
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### **Policy**

It is the policy of Shiawassee County Community Mental Health Authority (SCCMHA) that deaths of consumers having unusual circumstances or meeting MDCH sentinel event criteria will be formally reviewed and the findings of the review will be used to maintain or improve the quality of care provided to consumers.

### **Purpose**

To provide standards for the formal review of the circumstances and conditions related to the death of any consumer receiving identified services from the SCCMHA and living in a dependent residential setting, needing an array of services provided by a multiple service areas or having committed suicide.

To improve the quality of care for all recipients of services from SCCMHA.

To comply with all requirements of the Michigan Department of Community Health and other regulatory bodies.

### **Application**

All programs of SCCMHA

### **Death Review Criteria or Unusual Circumstances**

Reporting is required for CMHSP consumers who, at the time of their deaths, were the responsibility of CMHSP or its contractors/providers:

1. Living in 24-hour Specialized Residential settings (per Administrative Rule R330.1801-09) or in Child-Caring Institutions.
2. Living in their homes and receiving Community Living Supports.
3. Receiving Targeted Case Management (MI), ACT, Home Based, Children's Case Management, or Habilitation Supports Waiver.
4. ALL SUICIDES of consumer who were active cases know to the CMHSP.

5. Homicide

**Standards**

1. The consumer's primary clinician will notify his/her Program Director in writing (Report of Death Form) within 24 hours of the death of a consumer for whom a review of death is required by this policy, or within 24 hours of being informed of the consumer's death. (To access the "Report of Death" form select the button marked "Death Report" when filling out the Trigger Event form in the Trigger Event Database.) The Program Director will notify the Manager of the Medical Records Department of the death of the recipient. The Medical Records Manager will immediately sequester the recipient's chart. The Program Director will review the Notification of Death form and submit the original form to central files (Executive Assistant) within 24 hours. The Executive Assistant will forward a copy of the Report of Death to the Chief Executive Officer (CEO) and the Recipient Rights Officer.
2. A Death Review Committee will be appointed by the CEO to review the death of a consumer as specified in this policy.
  - a. Members of the Death Review Committee will include the CEO or designee, Performance Improvement Coordinator, Program Director and representatives of service areas providing services to the consumer, a physician, a registered nurse, and the Recipient Rights Officer.
  - b. The Death Review Committee will review the circumstances of the consumer's death, the consumer's Person Centered Plan, and the treatment/services provided. The Death Review Committee will provide a written report to the CEO containing the findings of its review and any recommendations resulting from the review.
  - c. The Death Review Committee's written report will include the following information:
    - i. Name
    - ii. Gender
    - iii. Date of birth
    - iv. Date, time, place of death
    - v. Client diagnoses, medical and psychiatric
    - vi. Cause of death

- vii. Recent changes in medical or psychiatric status including notation on most recent hospitalization
  - viii. Summary of condition and treatment (programs and services being provided to client) preceding death
  - ix. Medications prescribed by SCCMHA within last 30 days
  - x. Autopsy findings, if one was authorized by the county medical examiner or by the family of the deceased
  - xi. Review Committee Findings
  - xii. Recommendations
  - xiii. Signatures (exclude Rights Officer signature)
- d. The Death Review Committee will submit the original "Review and Report of Recipient Death" to Central files (Executive Assistant) within forty-five (45) days of notification to the agency of a consumer's death.
- e. The Executive Assistant will forward a copy of the Death Review Committee report to the CEO upon receipt of the report. The CEO will review recommendations and implement a plan of correction as needed
- f. The Executive Assistant will forward a copy of the Death Review Committee report to the Office of Recipient Rights.
- g. The Death Review Committee may request that the family of the deceased authorize an autopsy in cases when the county medical examiner has not elected to do so.
3. Upon completion of the "Review and Report of Recipient Death" report the CEO or designee will notify Medical Records that the record needs to be permanently sequestered. The Medical Records department will maintain the recipient's record in sequestered condition.
4. SCCMHA will provide a report as required to Access Alliance of Michigan (AAM), A Division of Bay-Arenac Behavioral Health. AAM will provide a quarterly report of expected and unexpected deaths to the Department of Community Health (DCH). Upon request from the DCH, SCCMHA will provide information about specific deaths. This information will be provided consistent with requirements of confidentiality and other guarantees of recipient rights as specified in the Michigan Mental Health Code and Administrative Rules.



