

Developmental Disabilities Administration Actions for Residential Providers to Take Before and After Someone Passes Away

This suggested process is for contracted residential agencies related to a client's death. We understand that each provider may have additional or alternate processes established.

Plan Ahead

- Have a written protocol for staff to follow if a death occurs in the home.
- Encourage end-of-life planning
 - Encourage individuals with chronic health issues to consider a Physician's Order for Life-Sustaining Treatment (POLST), describing what treatment they would like to receive in an emergent healthcare situation.
 - Train staff routinely on how to implement a POLST, if one exists.
 - See the DDA [Advance Care Planning Care Provider Bulletin](#) for more information and resources.
- Plan ahead with client/guardian for their preferences:
 - Advance directives
 - Funeral home Funeral plan
 - Cultural or religious preferences
- Provide information and assist clients to pre-purchase funeral services to reduce difficult, last-minute decisions or determine how to work with limited funds. Remember to add this as a resource to the Individual Financial Plan. (Burial services must be considered irrevocable or have no cash value in order to not be counted as assets.)
- Ensure contacts, including after-hours phone numbers of guardians/family and medical providers are easily accessible to staff in the client's home and staff on-call who respond to emergent needs.
- Ensure staff are routinely trained on life-sustaining measures, and related medical equipment.

During an Incident

Actions taken during an incident will vary depending on an individual's needs. The process may be influenced by a hospice care plan, a POLST, or by client preferences. When no other specific instructions are given, these actions are recommended:

- Call 911 and follow any directions given.
- Perform any life-sustaining measures that are needed (Heimlich, CPR, etc.), unless limited by the POLST.

- Staff should be ready to provide the following documents to paramedics, law enforcement, coroner, or medical examiner:
 - POLST
 - Medical history
 - Medication list
 - Client contacts
- Responding paramedics or other professional entities with the authority to do so, must “declare” the death.
- The police and coroner must be notified in some situations ([RCW 74.34.035](#) and [RCW 68.50.010](#)):
 - The death is sudden, such as an individual that appeared in good health 1-2 days before their death;
 - Death following medical procedures;
 - The death is suspected to be caused by abuse, neglect, or abandonment;
 - The circumstances indicate the death was caused by unnatural or unlawful means, such as a fall resulting in recent head injuries or significant pressure injuries;
 - The death occurs under suspicious circumstances;
 - The death is caused by violence;
 - The death results from unknown or unclear causes;
 - The death is caused by alleged rape or other sexual crimes;
 - The death is due to a contagious or suspected contagious disease, such as a sudden illness with a high fever or rash right before death;
 - The death may be due to drowning, hanging, exposure, strangulation, starvation, alcoholism, suffocation or smothering; or
 - The death occurred due to a client suffering burns, assault or was in an accident resulting in physical injury.
- If the individual was a tissue or organ donor, inform the responding parties and the funeral home. If this was arranged earlier, the contact numbers should be listed in the client record.
- If the person is declared deceased while still in the home, the body may be left at the home.
 - If it is determined by the coroner or medical examiner that an autopsy will be conducted, they will arrange for the body to be transported.
 - If no autopsy will be conducted, the agency or guardian should contact the identified funeral home to arrange pickup of the remains (see above about planning ahead).
 - Consider a plan for the clients who also live at the home to visit friends or family while the deceased housemate is waiting for transport.
- Staff should document all details leading up to, during, and after the incident, including date and time.
- Complete an incident report, and submit it to DDA.

Actions Following a Death

- Make notifications, as appropriate:
 - Legal representative (guardian, Power of Attorney, etc.)
 - Family
 - DDA Case Resource Manager (or after-hours contact)
 - Nurse Delegator
 - Primary physician (ask if they will complete death certificate if the coroner is not involved)
 - Residential Care Services' Complaint Resolution Unit per RCW 74.34
 - Service providers (employment provider, dentist, counselor, etc.)
 - Employer
 - Landlord
- Notify other staff who may be coming on shift.
- Ensure emotional support is provided to any other individuals who were in the home at the time of death and staff working in the home. Consider grief counseling for housemates or staff.
- Discuss with family/guardian if there will be a memorial service.
- Complete a DDA [Mortality Review Provider Report](#) and send to DDA Case Manager within 14 days of the individual's death. Include as much information possible about conditions that may have contributed to the death such as, diagnosis, dates, and reasons for care (hospice or other health services). Be sure to sign the Mortality Report. Ensure the applicable documents requested in the report are attached, including:
 - Most recent IISP, Nursing Plan of Care, Treatment Plan, or Negotiated Care Plan (if applicable)
 - Progress notes from the previous 48 hours (prior to death or hospitalization)
 - Bowel program or protocol
 - Seizure protocol
 - Specialized diet (if history of swallowing problems)
 - Client refusal of Healthcare Services
 - Physician's Order for Life Sustaining Treatment (POLST) or Do Not Resuscitate order (DNR)
- Contact financial institutions the individual may have been involved with, as appropriate:
 - [Social Security Administration](#)
 - [DSHS](#) (food, cash, or medical benefits)
 - Bank (wait to close account until all final bills have been received and paid)
 - Trust-fund agencies
 - Credit bureaus (Equifax, Experian, TransUnion – notification helps avoid possible identify theft)
- Cancel services that are no longer needed:
 - Cell phone plans.
 - Utilities and other bills (if the individual lived alone).

- Remove client's name from rental agreement or lease.
- Forward remaining funds within 90 days of death, as described in [Washington Administrative Code 388-101D-0275](#).