North Carolina Department Of Correction Division Of Prisons SECTION: Administrative – Performance Improvement and Risk Management

POLICY # AD V-2

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References

Related ACA Standards

4th Edition Standards for adult Correctional Institutions 4-4395, 4-4425

Purpose

To provide procedures in case of the death of an inmate.

SUBJECT: Procedures In Case Of Death Of Inmate

Policy

The following procedures for notification/documentation/disposition will be initiated following the death of an inmate.

Procedure for Notification/Documentation/Disposition

Upon the death of an inmate, no person shall be authorized to disturb the body at the scene of death (**this excludes resuscitation participants**).

The Officer–In-Charge shall:

- 1. Notify as quickly as possible;
 - a. Facility Head
 - b. Director of Division of Prisons/designee
 - c. County Medical Examiner in county where inmate died. If inmate died in hospital in another county, notify ME of **that** county. All inmate deaths are Medical Examiner's cases.
 - d. Chief of Health Services/designee by next business day, if unexpected death such as suicide or the result of trauma notify immediately.
 - e. District attorney or other law enforcement agencies having investigative jurisdiction of the case if death unexpected.
 - f. Emergency contact(s) previously designated by inmate (see AD VIII-2)
- 2. Collect and forward **all medications (prescription and over-the-counter)** in inmate's personal belongings to medical staff at unit who secure with the inmate's medical record(s). These medications are not to be given to family. Document the medications on the DC 230 Inventory of Personal Effects of a Deceased Inmate and chain of custody noted.

The Nurse on duty at time of death shall:

- 1. Complete documentation of death in patient's medical record providing:
 - a. Time medical notified of "man down" and by what means notified
 - b. Time Emergency Medical Services notified and time EMS arrived on scene.
 - c. All resuscitative efforts by facility staff and medical staff, including CPR initiation, medications, oxygen given on the DC 387 C Emergency Response Progress Note.
 - d. Time patient transported out of facility by EMS or transport service

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- 2. Complete Medical Incident Report as per policy if unexpected death.
- 3. Collect **all** inmate **prescription medications** (those current and any brought in by custody) and secure with the patient's medical record(s). These medications are **not** to become part of the inmate's personal belongings inventory and are not to be given to family members. In cases of suicide, suspicious/unexplained deaths these medications become part of the investigatory evidence.
- 4. Before the end of shift, the medical record(s) and all documents that are available at the time are to be put in an envelope(s), sealed with tape, with your name written across to ensure it is not opened. The secured envelope(s) will be sequestered by the OIC. The envelope(s) will be forwarded to the Facility Head on the next business day. The highest ranking health care staff can review the medical record(s) and file documents received in the sequestered location. The original medical record(s) will be sealed in an envelope(s) and shipped to the Chief of Health Services no later than 14 days after death.

The attending Physician, highest ranking Nurse or Designee on duty at time of death shall:

- 1. Prepare the medical portions of the DC-135 Notice of Inmate Death and submit to Officer-In-Charge.
- 2. Complete the DC 136 Initial Report of Death. Fax a copy to Chief of Health Services/designee by next business day. File the original in Section VI Miscellaneous of the medical record.

The highest ranking Nurse in conjunction with the facility Physician shall:

- 1. Review medical record(s) and complete the DC 799 Mortality Review Form. The DC 799 will be faxed to the Chief of Health Services' office, Attention: Risk Manager within 14 days of death. Send the original via Courier, this form is not filed in the medical record.
- 2. Obtain Emergency Room Records or hospital discharge summary, if patient admitted to hospital prior to death and file in medical record.
- 3. Ensure documentation of patient's death is complete in medical record. If patient dies at outside facility i.e. hospital document in progress note date/time of death and where occurred.
- 4. Ensure original Medical Examiner's Certificate of Death is forwarded to medical records when received. Send a copy to the Chief of Health Services' office, Attention: Risk Manager.
- 5. Cooperate with the facility head, Health Services, and Medical Examiner in any investigation pursuant to the death.
- 6. Copy and fax medical records requested by the Medical Examiner

The Facility Head/designee where inmate died shall:

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- 1. Notify Director of Prisons or designee whenever it appears that the death of an inmate occurs as a result of non-natural causes. The Director or designee will initiate an investigation as required by GS 148-25 with a special request to the State Bureau of Investigation.
- 2. Arrange transport of body, in consultation with the local Medical Examiner, **after** body has been examined, for an autopsy. An autopsy must be performed on all deaths, unless a signed DNR is in place.
- 3. Prepare and forward through chain of command, three (3) copies of the completed form DC-135- Notice of Inmate Death and three (3) copies of signed Medical Examiner Certificate of Death and three (3) copies of the Certificate of Death completed by facility provider, if applicable (one copy for Regional Director's Office, one copy for Director of Division of Prisons' office, one copy for Chief of Health Services' office. An original death certificate will be forwarded to Medical Records to be maintained in patient's medical record.
- 4. Provide written notification to emergency contact as follows: "With regret, the Department of Correction officially notifies you of the death of your (relationship-name) on (date) at (designated prison facility/hospital and address). The body is being held at (name and address of body's location- usually the Chief Medical Examiner's Office in Chapel Hill). Please advise this office at once if you wish to claim the body. Details will be furnished upon request. (Signed Facility Head, Address, telephone number)"
- 5. Make reasonable efforts to contact relatives of the deceased or other persons who may wish to claim body for final disposition. Should the body be unclaimed for final disposition ten (10) days after death, the facility head shall contact the Director of Division of Prisons and Office of Chief Medical Examiner for final disposition.
- 6. Explain to persons claiming the body of a deceased inmate for burial that they must bear all expenses associated with the burial. In case of the inmate has been fatally injured in the performance of work duties, the individual claiming the body should contact the North Carolina Industrial Commission to determine if an award is available. Other agencies may assist in payments for final disposition including Social Security Administration and Veterans Administration.
- 7. Send copy of autopsy report forward through chain of command to the Director, Division of Prisons. The Chief of Health Services will receive autopsy report directly from Medical Examiner's office.

The Local Medical Examiner shall:

- 1. All deaths occurring in NCDPS, unless patient is a DNR, will receive an autopsy.
- 2. Ensure that the body is not embalmed or altered by any means prior to autopsy if required.
- 3. Upon completion of examination, arrange with Facility Head for the transport of body to Office Chief Medical Examiner, Chapel Hill. (Please note: The Chief Medical Examiner may designate Regional Medical Examiner to handle autopsy/mortality review.)
- 4. Sign the Medical Examiner Certificate of death in all instances of an inmate death.
- 5. Upon completion of autopsy/mortality review, communicate with the Office of Chief Medical Examiner who will send copy of autopsy/mortality review report to the facility head of unit where deceased was assigned. Facility Head will forward through chain of command to the Director, Division of Prisons. Office of Chief Medical Examiner will send additional copy directly to Chief of Health Services' office.

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6/30/12

Chief of Health Services

Date

June 2012

May 2010

SOR: Chief of Health Services Risk Management/Standards