



The Death of a Service User Policy

Revised March 2013

Policy and Procedure in the Event of the Death of a Service User

Care home name: The Wellbeing Residential Group

Aim of the Policy

This policy is intended to set out the values, principles and practices underpinning the Wellbeing Residential Group's approach to service users who die while in the care of the home or in hospital.

The policy should be used with reference to the Wellbeing Residential Group's Policy on End-of-life Care.

Policy Statement

The Wellbeing Residential Group's policy fully adheres to the new outcomes Essential Standards of Quality and Safety which consist of 28 regulations and its associated outcomes. They are set out by the Health and Social Care Act 2008 for regulated activities.

It is the Wellbeing Residential Group's policy to make sure that in the event of a death, either expected or sudden, it follows all required procedures and provides support to bereaved relatives, friends and other service users who may be affected.

The key actions to be taken include the following.

1. Recording the date and time of death.
2. Notifying the GP.
3. Notifying the CQC through a Notification form.
4. Identifying a responsible person to complete the laying out procedures.
5. Identifying a responsible person to complete the necessary legal procedures, such as registering the death.
6. Contacting next of kin and other relatives.
7. Recording any unusual circumstances surrounding the death that might need further investigation.
8. Determining if there is likely to be a post mortem or coroner's inquest and following the required procedures in the event.
9. Identifying any bereavement support and counselling needs of staff or service users who are emotionally affected by the person's death.
10. Identifying who will be responsible for resolving any outstanding financial affairs and receiving any property and valuables and taking steps to address these.

Procedures

1. If the resident does not have an appropriate person (N.O.K/ close friend/representative) to undertake the guidance then the senior person on duty contacts the resident's own GP to arrange to certify the death. If the death has been expected or the GP has seen the service user in the last 14 days and if the

doctor can certify the cause of death he or she will issue the person in charge with:

1. a medical certificate that shows the cause of death (this will be in a sealed envelope addressed to the registrar)
2. a formal notice that states that the doctor has signed the medical certificate and tells you how to go about registering the death.
2. If the death is sudden or the service user has not been seen by a GP for 14 days or more the service user's GP will inform the coroner's office and the body should not be moved until the coroner has been notified.
3. The death must be registered in the district where it took place.
4. The manager or key worker contacts the relatives of the dead person immediately or as soon as is practically possible, depending on any agreements with them that have been made with them.
5. It should be noted that the Wellbeing Residential Group attempts to find out the service user's wishes on their funeral arrangements well in advance and these should have been recorded. If a cremation is required, two separate doctors sign the cremation form.
6. If the resident does not have an appropriate person (N.O.K/ close friend/representative) to undertake the guidance then the manager or key worker contacts the service user's minister of religion or spiritual adviser if there is any uncertainty about whether there are any particular procedures or rituals which should be carried out or observed after death, according to the deceased service user's religion or customs
7. At an appropriate time the manager or key worker arranges for the person's personal belongings to be collected by the next of kin or relatives acting on their behalf. Relatives sign a receipt for the personal belongings and this is filed with the service user's notes. Furniture and other effects are also dealt with in similar ways once it is known how they should be dealt with.
8. Out of respect for the dead person and other service users, the Wellbeing Residential Group does not reallocate the dead person's room until the full notice period has expired, all effects are cleared and the room is made fit for purpose for someone else.
9. The Wellbeing Residential Group is able to offer relatives of the dead person support, including any emotional support they need, over the arrangements surrounding the death.
10. The Wellbeing Residential Group also provides its staff too who are affected by a service user's death emotional support and bereavement counselling if needed.
11. The Wellbeing Residential Group routinely reviews its policies and practice in respect of any service user who has received end-of-life care to identify if they need to be changed or improved in future cases. (See the home's [End-of-life Care Policy](#)).
12. In cases where service users have no next of kin or relatives who can be contacted, the Wellbeing Residential Group contacts the local authority to find out about the proper procedures to follow.
13. The Wellbeing Residential Group makes arrangements for staff and other service users to attend the funeral if they wish. It always sends at least one representative to attend a funeral as well as sending a condolence card or letter to the relatives.
14. At an appropriate time, the Wellbeing Residential Group's administrative staff prepare a final statement of account to go to the person responsible for dealing with the dead person's estate.

15. The Wellbeing Residential Group retains all the service user's care notes and records along with any other relevant documentation for at 20 years.

Training

The Wellbeing Residential Group provides staff with training and support on bereavement and loss as part of its ongoing training program. Counseling service such as CRUSE can be accessed.

Training focuses on how people cope with death, personally and culturally and in respect of religious and non-religious beliefs. It also focuses on the diverse customs and practices used to mark a person's death and how to provide emotional support to people who are grieving.

Signed: _____

Date: _____

Policy review date: _____