

	DEPARTMENT OF PUBLIC SAFETY CORRECTIONS ADMINISTRATION POLICY AND PROCEDURES	EFFECTIVE DATE: 12/29/08	POLICY NO.: COR.10.1A.10
		SUPERSEDES (Policy No. & Date): COR.10A.1A.10 (4/21/2005)	
	SUBJECT: PROCEDURE IN THE EVENT OF AN INMATE DEATH		Page 1 of 5

1.0 PURPOSE

All deaths are reviewed to determine the appropriateness of clinical care; to ascertain whether changes to policies, procedures, or practices are warranted and to identify issues that need further study and to establish the next of kin notification procedures.

2.0 REFERENCES AND DEFINITIONS

.1 References

- a. Hawaii Revised Statutes, Section 26-14.6, Department of Public Safety; and Section 353C-2, Director of Public Safety, Powers and Duties.
- b. National Commission on Correctional Health Care, Standards for Health Services in Prisons and Jails, (2008).

.2 Definitions

- a. Health Authority: The Clinical Section Administrator responsible for the provision of clinical services at a correctional facility.
- b. Medical Director: A medical doctor responsible for the provision of medical services at all Departmental correctional facilities.
- c. Medical Examiner: A Physician with the City and County Government whose chief duty is to determine by inquest or other means the causes of death not obviously due to natural causes.
- d. Postmortem Examination Autopsy: An examination of a body after death to determine the cause of death or the character and extent of changes produced by a disease.
- e. Administrative Review: An assessment of correctional and emergency response actions surrounding an inmate's death to identify areas where facility operations, policies, and procedures can be improved.
- f. Clinical Mortality Review: An assessment of the clinical care provided and the circumstances leading up to the death to identify areas of patient care, policies or procedures that may need to be improved or to ensure that preventable deaths are avoided in the future.

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- g. Psychological Autopsy: A written reconstruction of the individual's life with an emphasis on factors that may have contributed to the death.

3.0 POLICY

- .1 The Medical Examiner's office shall be notified of all deaths.
- .2 There shall be prompt and sensitive notification of next of kin in the event of a death or serious injury or illness.
- .3 An administrative review by the Health Care Division Administrator or designee and clinical mortality review completed by a facility physician not involved in the care of the inmate, the Medical Director, or an independent consultant including a psychological autopsy when necessary, shall occur within thirty days (30) after a death occurs.
- .4 The clinical mortality review is done separate and apart from other formal investigations that may be required to determine the cause of death.

4.0 PROCEDURE

- .1 Contact information on the next of kin or other individuals to be notified in case of death, serious illness or injury shall be obtained from the inmate at the time of admission and shall be maintained in the inmate's institutional record.
- .2 Prior to the disclosure of information concerning an inmate's death, serious illness, or injury, the identity of the person to whom the message is relayed shall first be verified.
- .3 Notification of the next of kin shall be accomplished as soon as possible following a death or after determination by the health authority that the inmate is in imminent danger of death or serious disability due to illness or injury. The Warden shall determine the method of initial notification to the inmate's next of kin. If at all possible, notification of death to the next of kin should be in person. An official letter of notification for the purpose of written instruction and documentation shall follow the initial notification of death.

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- .4 The official letter of notification of death shall be sent by the Warden to the next of kin within 48 hours after the initial notification of death has been completed. The letter shall contain at least the following information:
- a. The nature of the crisis and expressions of appropriate concern for the situation.
 - b. Disposition of the deceased personal assets and property and disposition of the body and funeral arrangements/expenses.
 - c. The name and phone number of a facility contact the family can call if they have inquiries.
- .5 Notification of death to the inmate's next of kin on a neighbor island can be accomplished using that Island's facility administrator, a community Chaplin or the local police department. The neighbor island facility administrator shall be responsible for insuring that the proper procedures for the notification of death, serious illness or injury are followed.
- .6 Facility policies and procedures shall explicitly detail the following:
- a. The Chain of Communication of designated individuals who shall be notified in the event of an inmate's death or serious illness or injury.
 - b. The individual(s) responsible for calling HPD, the Medical Examiner, the next of kin and Department officials.
 - c. The individual responsible for requesting a copy of the autopsy report and proper distribution of copies.
 - d. The proper procedures and documentation required when discovering a deceased inmate. Except for rescue efforts, the body shall not be moved without the Medical Examiner's permission.
 - e. Detailed procedures for the management of an inmate who is in imminent danger of death or serious disability due to illness or injury.
- .7 An administrative review shall be conducted by the Health Care Division Administrator or designee. The review shall:
- a. Assess the correctional and emergency response actions surround the inmate's death.

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- b. Identify areas where facility operations, policies, and procedures can be improved.
- .8 The Medical Director or a designee will conduct a mortality review. The review shall determine:
- a. Appropriateness of the clinical care provided.
 - b. Effectiveness of the facility's policies and procedures and staff training relative to the circumstances surrounding the death.
 - c. The occurrence of patterns or symptoms surrounding multiple deaths or closely related deaths.
 - d. Patterns of symptoms that might have resulted in earlier diagnosis and intervention.
 - e. Corrective action shall be taken based on the mortality review findings and shall be implemented and monitored via the continuous quality improvement process and integration into patient safety procedures when appropriate.
- .9 Results of the mortality review shall be shared with the treating staff. A modified clinical mortality review process may be used for expected deaths. Corrective action is taken when necessary.
- .10 All media inquiries shall be referred to the Director's office. Facility policies and procedures shall state in detail the management of media inquiries.
- .11 Visitation of family to seriously ill or injured inmates in the infirmary, or in a hospital, shall be arranged by the health authority and approved by the Warden. Security shall be notified prior to the approved visit. Details of the next of kin visiting procedures shall be explicit in the facility policies and procedures.
- .12 The Health Care Division office shall maintain a death registry. The Clinical Section Administrator shall complete Form NPS-4A, Deaths in Custody (Attachment A) and shall forward the report to the HCO within 72 hours of a death.

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5.0 SCOPE

This policy and procedure applies to all correctional facilities and their assigned personnel.

APPROVAL RECOMMENDED:

<i>Kay Abama MD, MPH</i>	<i>12/22/08</i>
Medical Director	Date
<i>[Signature]</i>	<i>12/23/08</i>
Correctional Health Care Administrator	Date
<i>[Signature]</i>	<i>12/24/08</i>
Deputy Director for Corrections	Date

APPROVED:

<i>[Signature]</i>
Director
<i>12/29/08</i>
Date