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Death Procedures

Summary: The Death Procedures provide instructions for support workers and managers to follow when a person dies





Death Procedures

Document name	Death Procedures
Policy	Health and Wellbeing Policy
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Approval date	January 2016
Policy manual	Health and Wellbeing Policy and Practice Manual, Volume 2
Approved by	Deputy Secretary, ADHC
Summary	The Death Procedures provide instructions for support workers and managers to follow when a person dies.
Replaces document	Client Death Policy and Procedures 2012
Authoring unit	Contemporary Residential Options Directorate
Applies to	People receiving support in ADHC operated and funded non-government accommodation support services, centre-based respite, drop-in support and assisted boarding houses.
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Version control

The first and final version of a document is version 1.0.

The subsequent final version of the first revision of a document becomes version 1.1.

Each subsequent revision of the final document increases by 0.1, for example version 1.2, version 1.3 etc.

Revision history

Version	Amendment date	Amendment notes
V1.0	January 2016	Replaces the Client Death Policy and Procedures 2012
V1.1	November 2016	Amended to update reporting of Category 1 incidents to Performance Improvement

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1 Death of a person

The ADHC Death Procedures (the Procedures) embody the principles of legal and human rights found in the New South Wales Disability Service Standards (the Standards), the commitment to deliver culturally responsive services to Aboriginal and Torres Strait Islander people under the Aboriginal Policy Statement and the person centred guiding principles of the ADHC Health and Wellbeing Policy.

The following section provides direction to support workers in the event of a person becoming unresponsive, or if an unresponsive or deceased person is found.

The **Procedures are mandatory** for ADHC operated accommodation support services, centre-based respite, drop-in support, Large Residential Centres and Specialist Supported Living, and must be followed in sequence. Flowcharts are provided at the end of these Procedures to assist support workers and managers, and reflect the contents of the following sections.

Some of the response and reporting requirements are binding under the law and apply to ADHC funded non-government accommodation and other support services, including assisted boarding house¹ (Section 1.1). ADHC funded non-government service providers should familiarise themselves with the sections that apply to them. Assisted Boarding Houses are required to follow these Procedures as specified in the Assisted Boarding House Authorisation and Monitoring Manual².

1.1 Legal and Legislative Framework

The key relevant laws in relation to these procedures are set out below. Table A summarises the responsibilities of service providers under the legislation.

Mandatory reporting requirements, of the death or suspected death of a person with disability, to the NSW Police and State Coroner are covered under the following sections of the *Coroners Act 2009*. They apply to both **ADHC operated** and **ADHC funded non-government disability support services** and **Assisted Boarding Houses**. The legislative requirements are detailed in the following tables.

¹ Under the [Boarding Houses Act 2012](#), all boarding houses that have two or more 'persons with additional needs' must be authorised and licensed by FACS, and are known as assisted boarding houses.

² http://www.adhc.nsw.gov.au/publications/policies/policies_a-z/?result_237652_result_page=A

Coroners Act 2009	
Section 24	<p>Jurisdiction concerning deaths of children and disabled persons</p> <p>Section 24(1) gives jurisdiction for a senior coroner to hold an inquest into the death or suspected death of any person with disability who at the time of their death were receiving support from an accommodation support service that is funded non-government or operated by ADHC under the <i>Disability Inclusion Act 2014</i> or an assisted boarding house under Part 4 of the <i>Boarding Houses Act 2012</i>.</p> <p>This includes a person who, at the time of death, was temporarily absent from an ADHC operated or funded non-government accommodation support service, centre-based respite or an assisted boarding house, for example, in hospital.</p>
Section 35	<p>Obligation to report death or suspected death</p> <p>Requires that a death or suspected death of a person under Section 24(1) must be reported to a police officer, a coroner or an assistant coroner as soon as possible after becoming aware of the death.</p>
Section 36	<p>State Coroner to inform the NSW Ombudsman about certain child or disability deaths</p> <p>Requires the State Coroner to provide to the NSW Ombudsman all relevant material regarding the death or suspected death of any person under Section 24(1).</p>
Section 38	<p>Medical practitioner must not certify cause of death if death is reportable</p> <p>An attending medical practitioner is not permitted to issue death certificates for people who are under the care of an accommodation support service as per Section 24(1), or who are temporarily absent from an accommodation support service at their time of death, such as a person who dies in hospital.</p>

Mandatory reporting requirements of a death or suspected death of a person with disability to the NSW Ombudsman are covered under the following sections of the *Community Services (Complaints, Reviews and Monitoring) Act 1993* and apply to both ADHC operated and ADHC funded non-government support services as well as assisted boarding houses.

Community Services (Complaints, Reviews and Monitoring) Act 1993

Section 35	<p>Application of Part</p> <p>1) This Part applies in respect of the deaths of the following persons (in this part referred to as “reviewable deaths”):</p> <ul style="list-style-type: none">a. a child in careb. & c. repealedd. a child whose death is or may be due to abuse or neglect or that occurs in suspicious circumstances,e. a child who, at the time of the child’s death, was an inmate of a children’s detention centre, a correctional centre or a lock-up (or was temporarily absent from such a place),f. a person (whether or not a child) who, at the time of the person’s death was living in, or temporarily absent from, residential care provided by a service provider or an assisted boarding house (in this Part referred to as a “person in residential care”),g. a person (other than a child in care) who is in a target group within the meaning of the <i>Disability Inclusion Act 2014</i> who receives from a service provider assistance (of a kind prescribed by the regulations) to enable the person to live independently in the community. <p>2) In this Part</p> <p>“Assisted boarding house” includes premises that were a residential centre for handicapped persons (within the meaning of this Act before it was amended by the <i>Boarding House Act 2012</i>) at the time of the death concerned.</p> <p>"Child" means a person under the age of 18 years.</p>
Section 6	<p>Service provider means:</p> <ul style="list-style-type: none">a. the Department of Family and Community Services (FACS)b. an implementation company under the National Disability Insurance Scheme (<i>NSW Enabling Act 2013</i>) while the company is a public sector agency of the State under that Act orc. a person or organisation funded by the Minister for Family and Community Services, the Minister for Ageing or the Minister for Disability Services to provide a service, ord. a person or organisation authorised or licensed by the Minister for Family and Community Services, the Minister for Ageing or the Minister for Disability Services to provide a service, ore. the Home Care Service of NSW or a person or organisation funded by the Home Care service to provide a service orf. a person or organisation that is covered by an arrangement

Community Services (Complaints, Reviews and Monitoring) Act 1993	
	<p>made after 7 April 1994 (the date of commencement of this section) between a Minister of the State of New South Wales and a State or Commonwealth Minister, under which arrangement that State or Commonwealth Minister agrees to the person or organisation being a service provider for the purposes of this Act³, or</p> <p>g. an authorised carer or designated agency within the meaning of the <i>Children and Young Persons (Care and Protection) Act 1998</i>, or</p> <p>h. the proprietor or occupier of premises that consist of an assisted boarding house.</p>
Section 37 (2) & (4)	<p>The Deputy Secretary of ADHC must provide the Ombudsman with copies of any notification received by the Deputy Secretary relating to a reviewable death not later than 30 days after receiving the notification.</p> <p>The Deputy Secretary of ADHC means the person employed by FACS as the Deputy Secretary of ADHC, or if there is no such person, the Secretary of the Department.</p>

All staff have a legal duty to provide assistance to an unresponsive person under Section 44 of the *Crimes Act 1900*.

Crimes Act 1900	
Section 44	<p>Failure of persons to provide necessities of life</p> <p>1) A person</p> <p>a. Who is under a legal duty to provide another person with the necessities of life, and</p> <p>b. Who, without reasonable excuse, intentionally or recklessly fails to provide that person with the necessities of life, is guilty of an offence if the failure causes a danger of death or causes serious injury, or the likelihood of serious injury to that person.</p> <p>Necessities of life refer to those things necessary to preserve life, such as food, shelter, medical attention and protection from harm.</p>

Mandatory reporting requirements of a death or suspected death of a person with disability to the Deputy Secretary (formerly the Director General) are covered under the following sections of the *Boarding House Act 2012*.

³ **Note:** There is a Ministerial arrangement made under paragraph (f) which means that service providers includes those who provide services to recipients in the NDIS trial site).

Boarding House Act 2012

Section 83	<p>Notification of deaths, sexual assaults and other incidents involving residents of authorised boarding houses</p> <ol style="list-style-type: none">1) The manager of an authorised boarding house must, as soon as is reasonably possible after becoming aware of any of the following incidents, report the incident to the Deputy Secretary:<ol style="list-style-type: none">a. the death of a resident of the assisted boarding house,b. (not relevant to these Procedures)c. (not relevant to these Procedures)d. (not relevant to these Procedures)2) The manager must also report the death (or the sexual assault or the making of an allegation of sexual assault) of a resident of the authorised boarding house to a police officer as soon as is reasonably practicable after becoming aware of the incident concerned.3) A manager of an assisted boarding house who contravenes this section is guilty of an offence.
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Mandatory reporting requirements of any Police officer attending a death or suspected death must be reported to FACS are covered under the following sections of the *Boarding Houses Regulation 2013*.

Boarding Houses Regulation 2013

Regulation 27	<p>Reporting police attendances</p> <ol style="list-style-type: none">1) The manager of an authorised boarding house must report to the Deputy Secretary the attendance of any police officer at the boarding house as soon as is reasonably practicable after the attendance if the reason for the attendance was to investigate an incident involving an additional needs resident.
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1.2 Application of Procedures: Table A

These procedures are mandatory for ADHC operated accommodation support services including centre-based respite services and other support services, unless otherwise stated.

Some sections are mandatory for ADHC funded non-government support services and assisted boarding houses. They must be completed as part of the responding and reporting requirements under the service's administrative processes.

Section		AHDC funded non-government	Assisted boarding house
1	Death of a person	Mandatory	Mandatory
1.1	Legal and legislative framework	Mandatory	Mandatory
2	Unresponsive person	Mandatory	Mandatory
2.1	Apply first aid and call an ambulance	Mandatory	Mandatory
2.2	Notify the next line manager	Mandatory	Mandatory
2.3	Attendance of ambulance	Mandatory	Mandatory
2.4	Admission to hospital	Mandatory	Mandatory
3	Deceased person	Mandatory	Mandatory
4	Response within 1 to 2 hours of the death	Mandatory and adapt to align with service's processes	Mandatory and adapt to align with service's processes
4.1	Notify management	Mandatory and adapt to align with service's processes	Mandatory and adapt to align with service's processes
4.2	Notify next of kin or guardian	Mandatory and adapt to align with service's processes	Mandatory and adapt to align with service's processes
4.3	Report the person's death to NSW Police	Mandatory	Mandatory
4.4	Letters for NSW Police and State Coroner	Mandatory and adapt to align with service's processes	Mandatory and adapt to align with service's processes
4.5	Report death to Work Cover	Mandatory	Mandatory
4.6	Transportation of the deceased	Mandatory	Mandatory
5	Response within 24 to 48 hours	Mandatory	Mandatory
5.1	ADHC operated disability services	NA	NA
5.2	Other ADHC operated services	NA	NA

Section		AHDC funded non-government	Assisted boarding house
5.3	ADHC funded non-government services	Mandatory	NA
5.4	Assisted boarding house	NA	Mandatory
5.5	Briefing note	Mandatory	NA
5.6	Attachments to the Briefing Note	Mandatory	Mandatory
5.6.1	Incident report form	Mandatory and adapt to align with service's processes	Mandatory and adapt to align with service's processes
5.6.2	Client death notification form	Mandatory	Mandatory
5.6.3	Letter provided to State Coroner and NSW Police	Mandatory	Mandatory
5.6.4	Documentation	Mandatory	Mandatory
6	Response after 48 hours of death	Partial requirement	Partial requirement
6.1	ADHC operated accommodation services	NA	NA
6.2	Reporting to the NSW Ombudsman	Mandatory	Mandatory
6.3	Notifying internal FACS services	If applicable	If applicable
6.4	Notifying external services	Mandatory	Mandatory
6.5	Internal review of the death	Mandatory and adapt to align with service's processes	Adapt to align with service's processes
7	Responding to the NSW Ombudsman	Mandatory	Mandatory
7.1	ADHC operated disability services	NA	NA
7.2	ADHC funded non-government disability services and assisted boarding house	Mandatory	Mandatory
7.3	Strategic Change ADHC	Mandatory	Mandatory
8	Bereavement support	Mandatory and adapt to align with service's processes	If applicable
8.1	Informing other people	Mandatory	If applicable
8.2	Supporting the family	Mandatory	If applicable
8.3	Supporting support workers	Mandatory and adapt to align with service's	Adapt to align with service's processes

Section		AHDC funded non-government	Assisted boarding house
		processes	
8.4	Supporting other people with disability	Mandatory and adapt to align with service's processes	Mandatory and adapt to align with service's processes
9	Post death requirements	Mandatory	Mandatory
9.1	Cultural and linguistic diversity	Mandatory	If applicable
9.2	Aboriginal and Torres Strait Islander people	Mandatory	Mandatory and adapt to align with service's processes
9.2.1	Consent consideration and protocol	Mandatory	Mandatory and adapt to align with service's processes
9.2.2	Ceremonies and practices	Mandatory	Mandatory and adapt to align with service's processes
9.2.3	Notifying the family of the death	Mandatory	Mandatory
9.2.4	Support	Mandatory	Mandatory
10	Funeral arrangements	Mandatory	Adapt to align with service's processes
11	Estate management	Mandatory and adapt to align with service's processes	Mandatory and adapt to align with service's processes
12	The person's bedroom and assets	Mandatory and adapt to align with service's processes	Mandatory and adapt to align with service's processes
13	Explanation of terms	Observe	Observe
14	Policy and practice contact details	If required	If required
Flowcharts 1-3		Mandatory and adapt to align with service's processes	Mandatory and adapt to align with service's processes

2 Unresponsive person

When a person is found to be unresponsive or unusually unwell, the following steps must be followed.

2.1 Apply First Aid and call an Ambulance

If the person is not breathing, the support worker holding a current first aid qualification starts first aid and dials 000 to request an ambulance. If two people are on shift, one calls the ambulance while the other gives first aid.

Continue first aid until the ambulance arrives.

If the person has a current medically authorised Resuscitation Plan or Advance Care Directive, the caller must provide that advice when they dial 000.

2.1.1 Ambulance paramedics implementing Advanced Care Directives and authorised Resuscitation Plans

The current NSW Ambulance protocols:

- Do not support ambulance paramedics to follow instructions in a patient's advanced care directive.
- Allow ambulance paramedics to act on authorised Resuscitation Plans. Resuscitation Plans are plans developed in a hospital by an attending medical officer in consultation with the person or their person responsible.

Refer to <http://healthlaw.planningaheadtools.com.au/advance-care-plans-and-the-law/>.

2.2 Notify the next Line Manager

A support worker at the scene notifies the relevant manager, the direct line manager, senior manager or on call manager (for after hours) of the situation.

2.3 Attendance of Ambulance

When the ambulance arrives, first aid responsibility is handed over to the attending ambulance officers.

If the person has an Advance Care Directive and/or Resuscitation Plan, this is given to the ambulance officers as soon as they arrive to inform them of the person's wishes regarding resuscitation.

For further information about Advance Care Directives and Resuscitation Plans, refer to the End of Life Care Planning Guidelines in Volume 2 of the Health and Wellbeing Policy and Practice Manual and/or <http://healthlaw.planningaheadtools.com.au/advance-care-plans-and-the-law/> .

2.4 Admission to Hospital

If the person is admitted to hospital, notify the relevant manager, and the person's family.

Provide the hospital with the person's **Hospital Support Plan**. Any disability support required by the person is negotiated between the hospital and ADHC, according to the Hospitalisation Guidelines and the person's Hospital Support Plan (in Volume 2 of the Health and Wellbeing Policy and Practice Manual).

If the person has any type of documentation about end of life care decisions, support is provided to ensure that the person's wishes concerning end of life care are followed.

3 Deceased person

The person's death is reported to the local police, and the caller advises the NSW Police that the death is reportable under the *Coroners Act 2009 s24*.

If a person dies in their accommodation service the death is declared by the attending ambulance officers or a medical practitioner, if one is present. As far as possible the support worker ensures that the scene is unaltered.

If the person dies after being admitted to a health facility such as a hospital or aged care facility, the accommodation support service manager must ensure that the doctor in charge is advised not to issue a death certificate (see Fact Sheet, Other resources).

A death certificate can only be issued by the State Coroner.

4 Response within 1 to 2 hours of death

Refer to section 15 of these Procedures (page 36) for a flow chart of the immediate actions and response required **within 1 to 2 hours** of a person's death.

4.1 Notify management

The death of the person must be reported to the manager or on call manager immediately.

All deaths must be reported, regardless of the circumstances of the death, and including a person who died in a hospital or aged care facility.

The Manager, Accommodation and Respite, or on-call manager, reports the death to the Director Disability Operations who notifies the relevant Executive Director Disability Operations or equivalent position.

Senior management considers the circumstances and provides advice and support to the appropriate manager to complete the next steps, including

notifying next of kin or guardian, the NSW Police and developing the briefing note to the Executive Director Disability Operations or equivalent (see Section 5.5).

The Manager, Accommodation and Respite is the central point of contact and delegates areas of responsibility to the Coordinator Accommodation and Respite, and Team Leader as appropriate.

4.2 Notify next of kin or guardian

If the deceased person's next of kin or guardian is not present at the time of death, the manager is responsible for notifying them of the death. While not always possible, **notification is preferably done in person.**

Where the notification of the next of kin is given in person, the manager rings before coming over to see them, informs them a situation has occurred and they need to come and speak with them, and asks and whether they can arrange a support person of their choosing to be present whilst they have this discussion.

Where the notification is done over the phone, the manager rings prior to inform the person that a situation has occurred and whether they could arrange a support person of their choosing to be present whilst they have this discussion.

When an Aboriginal and Torres Strait Islander person dies, it is important to identify the senior member of the family to advise on matters surrounding the death, as it is a breach of cultural protocol to inform the family directly. This may also apply in other cultures and it is important to ask the family if there are any cultural protocols to be observed (see End of Life Care Planning Guidelines – Section 1.4 Cultural and Linguistic Diversity for more information)

At the time of notification, the following information is provided by the manager:

- when and where the person died (provide information about the circumstances of the death to assist the family to understand what has occurred in the case of an unexpected death)
- that the death will be reported to NSW Police who will inform the State Coroner
- that the death will be reported to the NSW Ombudsman.

Refer to end of life care planning documentation the person has in place stating their preferences or wishes in the event of death. If the person does not have an end of life care plan, the manager will ascertain with the next of kin or guardian:

- if they require an interpreter service
- the need to observe any cultural or religious practices or taboos
- whether the family or others wish to view the deceased person
- a suitable time to view the deceased person before transportation to the State Coroner. Alternatively, viewing times may be arranged with the State Coroner or funeral director.

The person's family and friends may choose to visit the house to view the person's bedroom and belongings. To facilitate this, ensure the person's bedroom and belongings remain how they were left.

4.3 Report the person's death to NSW Police

The manager ensures that the person's death is reported to the local NSW Police, and they understand that the death is reportable under the *Coroners Act 2009* s24.

The manager is to:

- ensure that the name, rank and station of the attending NSW Police officer is recorded and retained by the service
- organise support for another person with disability if the NSW Police indicate they wish to interview this person. Support includes an advocate or person of their choice, and if necessary, legal representation
- confirm who will identify the person to the NSW Police, that is family, a friend, the manager, or an ADHC employee who knows the person.

If the NSW Police wish to interview an ADHC support worker, contact ADHC FACS Legal for assistance, or if outside business hours, the on call manager.

Note: The manager of an Assisted Boarding House is required under the *Boarding House Act 2012* to inform FACS as soon as is reasonably possible (preferably within 24 hours), about the death of a person from an Assisted Boarding House, as outlined in the Assisted Boarding House Authorisation and Monitoring Manual.

4.4 Letters for NSW Police and State Coroner

Unit managers are to ensure that standard letters are sent notifying the NSW Police and the State Coroner of the person's death. A different letter is required if the person was temporarily absent from their residence at their time of death (see Tools and templates).

The manager is to:

- retain copies of the completed letters
- hand over the original letters for the State Coroner and NSW Police to the attending Police Officer and request that they be lodged with the State Coroner when the deceased is transported to the morgue.

When a person is **temporarily absent** at their time of death, for example, in a hospital, or aged care facility or staying with family or friends, the manager completes the letters. The manager immediately informs the relevant person, where the deceased was staying at the time of death, that the death is reportable. The manager can then complete the letters for that person to give to the NSW Police when the deceased is transported to the morgue.

4.5 Report the death to WorkCover

The *Work Health and Safety Act 2011 (WH&S Act 2011)* require the regulator (WorkCover) to be notified immediately of deaths and serious incidents which occur in the workplace.

Serious incidents can be serious illnesses or serious injury of a person, dangerous incidents (an incident that exposes a worker or any other person to a serious risk to health or safety) or the death of a person arising out of work carried out by a business undertaking or workplace. This includes all deaths or serious injuries to people living in an ADHC operated or funded non-government support service, or in an Assisted Boarding House.

The *WH&S Act 2011* also requires the site of the incident to be preserved until an inspector arrives or directs otherwise (subject to some exceptions).

If a person dies in an **ADHC operated or funded non-government support service, or an Assisted Boarding House**, the manager responding to the death must report the death to WorkCover at the same time as they report the death to the NSW Police. The WorkCover officer responding to the phone call will ask the manager the following of questions about the incident:

- a description of what happened
- when it happened
- where it happened
- who was involved
- the legal and trading name of the ADHC operated or funded non-government service, or Assisted Boarding House
- whether the NSW Police have been contacted and are attending the scene
- whether the body of the deceased will be transported to the State Coroner
- the name of the manager notifying WorkCover.

If the manager is unable to provide all of the information requested at the time of notification, the remaining information will be collected by WorkCover at a later time.

After the phone call, the manager is to document:

- the time they notified WorkCover
- the name of the WorkCover officer they spoke to
- advice or directions provided by the WorkCover officer during the phone call.

This information will be required for a briefing note to the Executive Director Disability Operations or equivalent.

The manager is responsible for ensuring that the site where the incident occurred is left undisturbed, so far as possible. An incident site may be disturbed however to:

- assist an injured person
- remove a deceased person
- facilitate a Police investigation
- make the site safe or to minimise the risk of a further 'notifiable incident'
- follow direction given either in person or by telephone by a WorkCover officer.

Refer to flowchart 1 of this document and to the **WorkCover Fact Sheet – Incident Notification** (see Tools and templates) or for further advice on notifiable incidents contact NSW WorkCover on 131050.

4.6 Transportation of the deceased

The NSW Police are responsible for placement of an identification tag and arranging transportation of the deceased person to the State Coroner.

5 Response within 24 to 48 hours of death

Refer to section 15 of these Procedures (page 37) for a flow chart of the following actions required **within 48 hours** of a person's death (flow chart 2).

5.1 ADHC operated accommodation support services

In all ADHC operated accommodation support and centre-based respite services, the person's death is classified as either **expected** or **unexpected**, depending on the circumstances (see Section 13).

In both cases the manager completes a Client Information System (CIS) Incident Report form either electronic or paper version (see FACS Incident Reporting and Management Policy and Guidelines for people accessing Ageing and Disability Direct Services, November 2014) and enters it in CIS.

- Unexpected Death – Category 1 Report
- Expected Death – Category 2 Report.

Where the death was unexpected, ADHC staff are to follow these procedures and prepare the briefing note and attachments to the Executive Director Disability Operations or equivalent (see section 5.5).

5.2 Other ADHC operated services

When a person dies unexpectedly in an ADHC operated disability support service, other than an accommodation support service or centre-based respite, a **Category 1 Incident – Executive Briefing Form** (see Tools and templates) is completed and scanned and emailed to Deputy Secretary Disability Operations at CrossCluster.PerformanceImprovement@facs.nsw.gov.au and ADHC.ReportableIncidents@facs.nsw.gov.au

Refer to the FACS Incident Reporting and Management Policy and Guidelines for people accessing Ageing and Disability Direct Services, November 2014 for assistance when completing the **Category 1 Incident – Executive Briefing Form** for an unexpected death.

In all ADHC operated accommodation support and centre-based respite services, whether the death is expected or unexpected, the manager prepares and forwards a Briefing Note and attachments to the Executive Director Disability Operations or equivalent.

5.3 ADHC funded non-government disability support services

Within 24-48 hours of the death of the person, ADHC funded non-government support services are to provide verbal advice of the death to the Executive Director Disability Operations or equivalent in their District.

ADHC funded non-government support services are required to complete a briefing note and attachments (see below sections 5.5 and 5.6.1-4). The documents are scanned and emailed to Deputy Secretary Disability Operations at CrossCluster.PerformanceImprovement@facs.nsw.gov.au

Assisted Boarding Houses

ADHC staff or staff of ADHC funded non-government support services are to advise the manager of an Assisted Boarding House that, on the death of a person living in their service, the Client Death Notification form contained in the Assisted Boarding House Practice Guide is to be completed and emailed to Deputy Secretary Disability Operations at CrossCluster.PerformanceImprovement@facs.nsw.gov.au as soon as is reasonably possible, preferably within 24 hours.

5.4 Briefing Note

The content of the Briefing Note to the Executive Director Disability Operations or equivalent and for funded non-government disability services to the Deputy Secretary should include the following information:

- the person's name, date of birth, address
- date of death

- whether the death was expected or unexpected
- if an expected death, the person's diagnosis (if known)
- length of time at facility
- contact details of 'next of kin' or guardian
- record of contact with 'next of kin' or guardian
- record of contact with the NSW Police and/or State Coroner
- record of contact with WorkCover and the advice provided
- communication assistance
- general medical issues
- medication
- identified disabilities
- mobility
- height and weight
- events surrounding an unexpected death and police advice.

5.5 Attachments to the Briefing Note

5.5.1 Incident Report Form

The **Incident Report Form** is completed by a support worker and the manager who was notified at the time of the person's death. Information for completing the Incident Report Form can be found in the FACS Incident Reporting and Management Policy and Guidelines for people accessing Ageing and Disability Direct Services November 2014. The **Incident Report Form** is completed in either electronic or paper format.

ADHC funded non-government services will use their services' incident report form.

5.5.2 Client Death Notification Form (CDN)

The CDN form is available on the ADHC intranet, and on the Service Provider Portal for ADHC funded non-government accommodation support services and assisted boarding houses.

5.5.3 Letter provided to the State Coroner and NSW Police

ADHC operated and funded non-government accommodation support services are to attach copies of the letters written to the NSW Police and the State Coroner (see Tools and templates) to the briefing note.

5.5.4 Documentation

Copies of specific documentation relating to the deceased person are required in their most current format. This documentation includes the person's:

- **Nutrition and Swallowing Risk Checklist**
- **Mealtime Management Plan**, if applicable
- **Enteral Nutrition Plan**, if applicable
- **My Health and Wellbeing Plan** or any other health care plan
- **Lifestyle Plan**
- plans for chronic and other health conditions for example epilepsy, asthma, diabetes, bowel care, and respiratory management
- **My Safety Profile** and **My Safety Plan**
- **Behaviour Support Plan**, if applicable
- Palliative Care Plan or other treatment plan, if applicable
- any document that has been developed by the person, with the person or on behalf of the person that contains end of life care decisions, including Advance Care Directives or Resuscitation Plan, if applicable.

6 Response 48 hours after death

6.1 ADHC operated accommodation support services

The Executive Director Disability Operations or equivalent, endorses the briefing note, incident report and attachments and forwards the documents to the Deputy Secretary Disability Operations at CrossCluster.PerformanceImprovement@facs.nsw.gov.au.

If the death is unexpected, a copy of the briefing note, incident report and attachments is sent to FACS Legal for information.

The Performance Improvement Unit forwards all briefing notes and attachments to the NSW Ombudsman to notify of the person's death.

6.2 Reporting to the NSW Ombudsman

When a person dies in an accommodation support service (funded non-government or operated by ADHC), centre-based respite service, or an Assisted Boarding House, it is mandatory to report the death to the NSW Ombudsman through the Performance Improvement Unit using the CDN form.

Section 7 of these Procedures provides guidance for responding to the NSW Ombudsman following the death of a person from a disability service.

6.3 Notifying internal FACS Services

The manager informs relevant FACS business areas of the death of the person. This can either be done verbally or in writing.

Business areas and systems that may require notification include:

- Aids and Equipment in Supported Accommodation (AESA) Committee to return items purchased through this scheme to the AESA aids and equipment pool
- Business Services to cancel residency charges
- internal therapy appointments
- CIS to register the date of death of the person.

6.4 Notifying external services

The Manager informs relevant external services of the death of the person. This can either be done verbally or in writing, depending on the requirements of the external service.

External services that require notification include:

- day / work program
- financial Institutions and managers
- NSW Trustee and Guardian (formerly known as the Office of the Protective Commissioner) for people under banker arrangements, or for people under financial guardianship
- dentist
- doctor
- allied health professionals
- health fund - Medicare
- clubs/groups and
- subscriptions.

The death certificate may be required as evidence of the person's death when notifying external services.

6.5 Internal review of the death

The NSW Ombudsman requires ADHC to conduct an internal review following the death of a person. Districts must review all deaths whether the person was at their usual residence or temporarily absent, for example in hospital, visiting family, on holidays or in the community. All reviews must be conducted in

accordance with the ADHC Operational Guidelines for the Review of the Death of People with Disability.

The review process is documented and the outcome, including recommendations, are recorded as required in the Operational Guidelines for the Review of the Death of People with Disability and submitted to the relevant Executive Director Disability Operations and to Deputy Secretary, Disability Operations.

7 Responding to the NSW Ombudsman

The NSW Ombudsman is concerned with systemic issues and how deaths might be prevented. The Ombudsman specifically:

- monitors and reviews deaths of people with disabilities and certain children to identify patterns and trends
- analyses the circumstances of reviewable deaths, and makes recommendations for reviewing policies and practices relating to the support and safety of children, and people with disabilities
- creates and maintains a register of reviewable deaths in NSW
- undertakes research and projects focusing on strategies to reduce or remove risk factors associated with deaths that are preventable
- tables a report relating to reviewable deaths to the NSW Parliament every two years.

The protocol for responding to a complaint or request for information from the NSW Ombudsman depends on whether the subject is an ADHC operated or funded non-government disability service, or an assisted boarding house.

Flow chart 3 and the following sections outline the responsibilities of all disability service providers when responding to the NSW Ombudsman (section 15, page 38).

Note that in addition to requests for information from the NSW Ombudsman, ADHC operated and funded non-government services may also receive requests for information from the State Coroner. Requests from the State Coroner are referred to FACS Legal for action at FACS.LegalInbox@facs.nsw.gov.au.

7.1 ADHC operated accommodation support services

If the Ombudsman's request is about an ADHC operated accommodation support service it will be managed by the Performance Improvement Unit.

The Performance Improvement Unit will forward the documents to the relevant Executive Director Disability Operations, with a copy sent to FACS Legal. The Performance Improvement Unit will liaise with the relevant Executive Director Disability Operations and arrange for the request to be investigated, and can

seek advice from FACS Legal about the information the District is legally required to provide. The response is submitted to the Deputy Secretary, Disability Operations.

Copies of all original documents are to be retained in a temporary file at the service where the deceased person resided.

7.2 ADHC funded non-government disability support services and Assisted Boarding Houses

When the NSW Ombudsman requests information about a reviewable death, the ADHC funded non-government disability support service or Assisted Boarding House is required to provide a response to the Executive Director Disability Operations or equivalent by the due date.

If the Executive Director Disability Operations or equivalent receives correspondence directly from the NSW Ombudsman about an ADHC funded non-government disability support service or Assisted Boarding House, the Executive Director Disability Operations, an equivalent or a delegated person, refers the correspondence on to the funded service or the Assisted Boarding House.

The funded non-government disability support service or Assisted Boarding House provides a response, which must be endorsed by a senior manager of the funded service, or the licensee of the Assisted Boarding House, and sends it to the Executive Director Disability Operations or equivalent. The appropriate District manager drafts the following documents to accompany the response to the Ombudsman:

- an assessment of compliance with ADHC policy, conditions of funding agreement or in the case of Assisted Boarding House, the *Boarding House Act 2012*, *Boarding Houses Regulation 2013* or *Conditions of License* (legal advice can be sought from FACS Legal to help with this assessment)
- the original response provided by the funded service or the assisted boarding house.

Copies of these two documents are marked confidential, flagged as a Reviewable Death Matter and forwarded to the Executive Director Disability Operations or equivalent position. In the case of an Assisted Boarding House, it may also be appropriate to provide a copy to the Executive Director who has oversight of Boarding House Compliance Officers.

The Executive Director Disability Operations or equivalent position should then forward these documents to the Deputy Secretary Disability Operations at CrossCluster.PerformanceImprovement@facs.nsw.gov.au.

Copies of all original documents requested by the Ombudsman are to be retained in a temporary file at the service where the deceased person resided.

7.3 Performance Improvement Unit

All correspondence received from the NSW Ombudsman relating to the death of a person who receives an ADHC accommodation support service or centre-based respite service is managed by the Performance Improvement Unit CrossCluster.PerformanceImprovement@facs.nsw.gov.au.

The Performance Improvement Unit registers the correspondence on TRIM and links it to the CDN TRIM number.

The Performance Improvement Unit forwards all correspondence from the NSW Ombudsman to the Executive Director Disability Operations or equivalent of the District where the deceased person resided.

To ensure that FACS Legal is aware of ongoing inquiries, the Performance Improvement Unit also sends copies of requests for information from the Ombudsman, and responses from ADHC to the Ombudsman's inquiries, to FACS Legal (FACS.LegalInbox@facs.nsw.gov.au).

8 Bereavement support

Grief is a normal response to loss and can occur at any time, even before the person dies. People experiencing grief are often supported by family and friends and sometimes external support is needed.

8.1 Informing other people

The line manager should ask the family's consent to inform others about the person's death and how they would like it done. Others might include:

- people who lived with the person
- friends and support workers at day programs
- work colleagues at the person's place of employment
- community groups that the person is involved with.

8.2 Supporting the family

In consultation with the family, an employee of an operated or funded non-government can make a referral to the Bereavement Care Centre or a bereavement care service that is available in the local area for bereavement counselling services (see Other resources).

Bereavement counselling is available from many organisations, such as places of worship e.g. church, synagogue, temple etc., registered psychologists, or services such as Lifeline or Barnardo's etc. Talk with the family to find out if they require bereavement counselling and if so, what type of service they would prefer.

Consideration should be given to families and others in the event of the death of their loved ones, including:

- responding in a prompt and dignified manner
- respecting and being sensitive to cultural and religious beliefs and practices of the person and family
- ensuring the deceased person's bedroom is left intact so that the family, friends and support workers have the opportunity to visit the bedroom
- assisting with funeral preparations where possible (see Section 10)
- maintaining contact with the family after the funeral, this is especially important if family were actively involved in activities at the disability service, and had formed relationships with other people with disability, their families and support workers
- providing relevant information to the family where action has been taken to improve service as a result of the death of their family member.

8.3 Supporting support workers

The loss of a person also affects support workers. They often have a difficult time dealing with their loss, and it is the managers' responsibility to support them through this process. An individual counselling or group debriefing may be beneficial, as well as giving support workers the opportunity to talk about how they are feeling immediately after the event and over time.

Debriefing can be done by managers organising an informal discussion amongst the team in a supportive, safe and accepting environment, or by formal debriefing with a skilled counsellor.

In ADHC operated accommodation support services, formal debriefing or individual counselling is available for individuals and teams through the Employee Assistance Program on telephone 1300 687 327. This is a free service provided by registered psychologists.

8.4 Supporting other people with disability

Arrangements can be made, where required, for the bereaved person/s to receive support with communication and bereavement counselling. This may include making a referral to allied health specialists such as a psychologist for counselling. A speech pathologist can develop communication aids such as social stories to assist the bereaved person to understand and cope with the death of the person.

There are resources available to support workers in considering how they can work best with others who are affected by a death. When assisting a person with disability to deal with grief and loss, support workers should consider the following points:

- be honest, include and involve the person
- listen, and be present for the bereaved person
- actively seek out nonverbal rituals
- respect photos and other mementos the bereaved person may have
- minimise changes in routine, accommodation or caregivers
- assist searching behaviour
- support the observance of anniversaries
- seek specialist help if behavioural changes persist.

There are resources that support workers can use to support other people with disability to help them deal with the death of their friend (see Other resources).

9 Post death requirements

9.1 Cultural and linguistic diversity

Cultural sensitivity is important at this time. Around one in three NSW residents were born overseas, and one in five speaks a language other than English. Each person and family is unique.

A culture and language assessment may be needed to establish the family's requirements after death. If an interpreter is required, refer to the ADHC Language Service Guidelines (see Other resources).

It is important to know if the deceased person and the family had developed an end of life care plan, before any arrangements are made. If end of life planning was done, confirm with the contact person that they want to implement the plan as it is, or make some changes.

If end of life planning was not completed, even if the family is making its own funeral arrangements, it is important to establish if they have any rituals, ceremonies or taboos around the death of a person.

The manager or a delegate can seek information from the family about the following:

- the spiritual and religious beliefs, practices and taboos they wish to observe
- how the person and the family communicate, such as the need for an interpreter, or the acceptability of certain words when discussing illness and dying
- which member of the family or community is the contact person for problem solving and decision making, and the particular roles the family and community members have after the person dies.

9.2 Aboriginal and Torres Strait Islander People

Aboriginal and Torres Strait Islander people have a number of customary practices at the time before death, when the person dies, and following death. Each family and community is unique, and this is dependent on his or her links and experiences. It cannot be assumed that all people follow the same practices.

Significant impacts for Aboriginal and Torres Strait Islander people around death are included below however are not limited to the following.

9.2.1 Consent considerations and protocol

Culturally appropriate consent

Ask the person and their family member who in the family is the contact person to discuss issues around death and who provides consent. Record the name(s) and their roles and contact details on the person's records.

Issues of a sensitive nature and practices that are taboo

Ask the person and their family member to explain what issues around death and dying are sensitive. Record this information on the person's records.

9.2.2 Ceremonies and practices

Ceremonies and practices around the death and dying

Ask the family what and when they perform the ritual or practice. Record these ritual and/or practices in the person's records so support workers are aware.

Family and friend roles and responsibilities around death practices and ceremonies.

Ask the person and/or their family who will be involved in the practice and/or ceremony. Record this information on the person's records.

The gathering of the family is part of the ceremony to help the spirit leave the person and move away. When the family gathers, the extended family gatherings may be large, and requires enough space and privacy and time for this to occur.

Use of images and naming of the deceased

Saying the person's name or the putting up photos of the person is taboo as some Aboriginal and Torres Strait Islander people believe that it calls the spirit back.

9.2.3 Notifying the family of the death

Cultural protocol for notifying the designated family member

It may be inappropriate for a non-Aboriginal person known or unknown to the family to discuss any issues about the person and the death with the family member directly.

The time of death is very significant for Aboriginal and Torres Strait Islander people. Cultural protocol is extremely important at this time. The designated family member must be contacted by the nominated service representative or an Aboriginal Liaison Officer.

Coronial inquests may interfere with the practice of taking the deceased back to their land. Where possible, the family must be informed in advance that it is required by law everyone for receiving a disability service (even if they are absent at the time of death for example in a hospital or at the family home) to be the subject of a coronial enquiry. This will not stop the family's rituals however it may delay some aspects.

The way a person dies has different meanings for Aboriginal and Torres Strait Islander people. A sudden and unexpected death has a very different meaning to a slow and expected death.

9.2.4 Support

When a person is accessing a service such as a hospital ask if they would like a referral to the Aboriginal Liaison Officer. If so, record this in the person's records and support the person and their family member to access this service.

Funding barriers may occur with the rituals the family wishes to practice, for example, gathering of the family, taking the body back to their land or the cost of the funeral. Discuss these issues with the designated family representative and refer the person, or support them to access Burial Assistance funding. For information and financial assistance regarding funeral services, the NSW Aboriginal Lands Council can also be contacted.

Loss and grief support. If the family has access to an Aboriginal Liaison Officer they will ensure they are receiving support. (See Other resources for alternative support options).

Where possible it is best practice to contact Aboriginal Liaison Workers or Community Workers to assist with planning and preparation for the funeral and associated ceremonies.

10 Funeral arrangements

Families are generally responsible for arranging the funeral. If the person has a **Lifestyle Plan** or end of life care plan that outlines the person's or the family's funeral wishes, this should be followed.

If the deceased does not have a family, guardian or advocate, support workers are responsible for arranging the funeral and advising friends, work associates, day placement, recreation services and service providers of the death of the person and the funeral arrangements.

In cases where the family cannot afford the cost of the funeral, and the person's estate cannot cover funeral costs, the manager can make a referral to the local Police and/or the NSW Aboriginal Lands Council for information and financial assistance.

If the unit Manager contacts the NSW Aboriginal Lands Council, the Manager has responsibility to oversee the process.

If the Manager makes a referral to the local police, the NSW Police are responsible for contacting the NSW Ministry of Health for financial assistance with burials and cremations for a person without means.

The NSW Police advise the funeral director of the person's death and that it is a destitute burial. The NSW Police complete the appropriate forms and forward them to the NSW Ministry of Health along with the funeral director's invoice. The NSW Ministry of Health arranges payment to the funeral director.

The line manager supports the person's peers and other support workers to attend the funeral and may:

- liaise with families about funeral arrangements
- transport other people with disability to and from the funeral and post-funeral gathering
- consider the option of other people with disability and support workers to view the deceased person if this is available and applicable
- provide, and organise for communication tools and strategies to be developed to assist other people with disability to understand what to expect at the funeral.

11 Estate management

In cases where the person does not have a will, the manager will seek direction from the NSW Trustee and Guardian.

If the person made a will, the person's solicitor and Executor manage the closure of any financial business on behalf of the person. For ADHC operated accommodation support services and other services refer to the Personal Finance Procedures - estate management for further information.

ADHC staff can seek further advice from FACS Legal if they are unsure about estate management for a person who was receiving ADHC services.

12 The person's bedroom and assets

The deceased person's belongings are to be secured by closing or, if possible, locking the person's door. If any of the deceased person's possessions are elsewhere in the house they are returned to the person's room. Nothing is to be removed from the person's bedroom until after the NSW Trustee and Guardian or Executor has given instructions.

Support workers are not to clean the bedroom or change it in anyway.

After the death, the parents and family may wish to spend time in the person's room as part of their grieving.

After the funeral the manager will be required to complete an asset stock take against the existing asset register. When the stock take has been completed the person's assets are placed in a secure storage facility until instructions are given by the NSW Trustee and Guardian or the Executor of the will.

A copy of the asset register is placed in storage with the deceased person's possessions. If the person has a will, the original copy is placed on the person's file and a copy is provided to the solicitor.

13 Explanation of terms

Term	Explanation
Accommodation support services	This term refers to Large Residences, Specialist Supported Living centres, Assisted Boarding Houses, group homes, centre-based respite and in-home support for ADHC operated and funded non-government accommodation support services.
Advance Care Directive (ACD)	<p>An ACD records the person's preference for future care and appoints a substitute decision-maker to make decisions about health care, and personal life issues management.</p> <p>ACDs have legal status and are recognised under the law. The ACD comes into effect when the person loses the capacity to make decisions e.g. the person is in a coma.</p> <p>In NSW an ACD usually contains details of a person's health management preferences:</p> <ul style="list-style-type: none"> • any values and beliefs that may guide future treatment instructions regarding the future use or restriction of particular medical treatments • details of who the person wants to make decisions for them when they are no longer able.
Advance Care Plan (ACP)	An advance care planning discussion will often result in an ACP. The ACP records the person's preferences about health and preferred outcomes. It may be developed on the person's behalf, and is prepared from the person's perspective to guide decisions about treatment and care. It may be verbal or written. It should inform a Resuscitation Plan or Palliative Care Plan.
Assisted Boarding House	<p>Under Section 37 of the <i>Boarding Houses Act 2012</i>, an assisted boarding house is:</p> <ul style="list-style-type: none"> • a boarding house premises that provide beds, for a fee or reward, for use by 2 or more residents who are persons with additional needs • a boarding premises that are declared to be an Assisted Boarding House by a notice in force under section 39 of the Act.

Term	Explanation
Bereavement, bereavement support and counselling	<p>The support provided to people who are experiencing bereavement or grief following the death of a significant person.</p> <p>Bereavement is the response to a loss and includes the process of 'recovery' or healing from loss. Each person will grieve and recover in his or her own way.</p> <p>Bereavement counselling is provided to people who have experienced the death of someone close to them.</p>
Client Death Notification (CDN) form	<p>The CDN form is to be completed as a mandatory requirement of ADHC funded and operated accommodation support services, and Assisted Boarding House, to notify the Ombudsman of the death of a person.</p>
Child	<p>A person under the age of 18 years (as per Section 24(3) of the <i>Coroners Act 2009</i>).</p>
Conditions of License	<p>The set conditions or requirements prescribed to an assisted boarding house with which they are legally required to comply. Each Assisted Boarding House has a set of conditions that are issued in accordance with the <i>Boarding Houses Act 2012</i> and the <i>Boarding Houses Regulation 2013</i>.</p>
CS CRAMA 1993	<p><i>Community Services (Complaints, Reviews and Monitoring) Act 1993</i></p>
Performance Improvement (PI) Unit	<p>When an unexpected death occurs, PI oversees the internal review process and provides advice as required. PI is responsible for liaising with the NSW Ombudsman on the death of a person including providing their office with copies of the relevant reports. PI also has a lead role in responding to systemic recommendations through remedial actions and identifying opportunities to prevent and respond to deaths of people with disability in ADHC operated accommodation and centre-based services.</p>
End of life care planning	<p>End of life care planning is a process of planning for future care whereby the person's values, beliefs and preferences are made known, so they can guide decision-making at a future time when the person is unable to make or communicate decisions. This allows the person to choose the type of care and support to live and die well in their preferred place.</p> <p>The planning process allows the person with disability to understand dying and death, as part of a natural cycle of life and to develop self determined wishes.</p> <p>Where a person has limited capacity to make decisions, families can assist the person to make plans through supported shared planning.</p>

Term	Explanation
Expected death	An expected death is when a person has a progressive, advanced disease or terminal illness, or the person chooses not to pursue curative treatment.
Health Care Plan	A plan prescribed by a health professional such as the person's usual general practitioner which outlines advice, recommendations and timeframes for the completion of health actions for the person. In ADHC operated accommodation support services, the health care plan is known as the My Health and Wellbeing Plan .
Lifestyle Plan	A 'living' plan that belongs to the person and which represents the person's wishes and lifestyle choices. The Lifestyle Plan includes an Action Plan which describes all the actions that are needed to help the person achieve their goals and dreams.
Mandatory reporting	The CS CRAMA requires reviewable deaths to be reported to the NSW Ombudsman. The <i>Coroners Act 2009</i> requires certain deaths or suspected deaths to be reported to the NSW Police and State Coroner.
Manager	In ADHC operated disability services this term refers to Team Leaders, Coordinators Accommodation and Respite, Registered Nurse Unit Managers, Nurse Manager Accommodation and Nursing Services, and any manager in the reporting line.
Ombudsman	The NSW Ombudsman is an impartial watchdog who is independent of the government of the day and accountable to the public through the NSW Parliament. The Ombudsman carries out his role under the <i>Community Services (Complaints, Reviews and Monitoring) Act 1993</i> , <i>Ombudsman's Act 1974</i> and the <i>Commission for Children and Young People Act 1998</i> . The Ombudsman's role includes reviewing the deaths of certain children, young people and people with disabilities in care (called 'reviewable deaths').
End of Life Care Plan	A written plan developed with the person, the family or guardian, the person responsible and the services involved in providing care to the person. The End of Life Care Plan is a person centred approach to planning the person's care. It aims to support the person, their person responsible and family or guardian, to direct and influence the person's treatment and quality of life.

Term	Explanation
Person responsible	<p>A person responsible is someone who has the authority to consent to medical or dental treatment for an adult who is unable to give or refuse consent for their own treatment.</p> <p>As stated in the <i>Guardianship Act 1987</i>, a 'person responsible' only exists where the person is unable to give informed consent.</p> <p>The person responsible is not necessarily the person's next of kin. There is a hierarchy of people who can be the person responsible.</p> <p>Refer to the Decision Making and Consent Policy (in the ADHC Lifestyle Policy and Practice Manual) for information on the person responsible.</p>
Police	<p>The NSW Police attend the death of a person under the care of an accommodation support service even if at the time of the death the person was temporarily absent from their usual residence, such as, in hospital. The NSW Police are required to place an identification tag on the body and report the death of a person with disability to the State Coroner. The NSW Police are also required to arrange transport of the deceased to the State Coroner.</p>
Resuscitation Plan (previously known as No CPR Orders)	<p>A Resuscitation Plan is a medically and legally enforceable, authorised order to use or withhold resuscitation measures, and documents any other time critical clinical decisions related to end of life.</p> <p>For more information and template see Other resources – <i>Resuscitation Plans in End of Life Decisions – NSW Health</i>.</p>
Reviewable Disability Death Team	<p>The Reviewable Disability Death Team within the Community Services Division of the NSW Ombudsman.</p>
State Coroner	<p>The State Coroner considers each death to determine the manner and cause of death and to decide whether an inquest is necessary. Section 36 of the <i>Coroners Act 2009</i> requires the State Coroner to inform the NSW Ombudsman about certain child or disability deaths. These requirements are in addition to the requirements of Part 6 ('reviewable deaths') of the CS CRAMA.</p>
Senior Manager	<p>In ADHC this refers to the manager who has the authority to act in a given situation.</p>
TRIM	<p>FACS' current document tracking system.</p>
Unexpected death	<p>An unexpected death is when a person dies suddenly and unpredictably.</p>

14 Policy and Practice Unit contact details

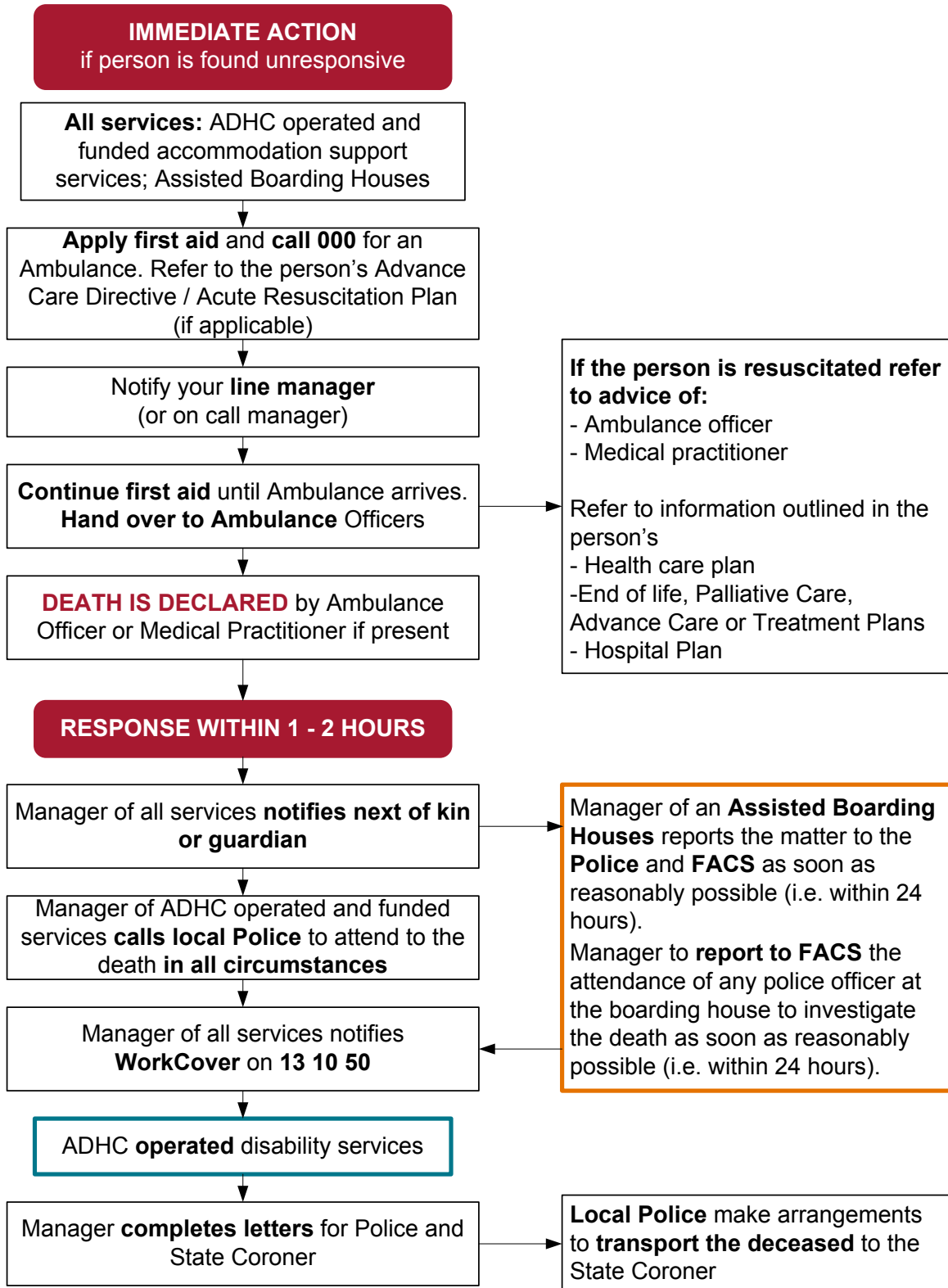
You can get advice and support about this Policy from the Policy and Practice Unit, Contemporary Residential Options Directorate.

Policy and Practice Unit
Contemporary Residential Options Directorate
ADHC
policyandpracticefeedback@fac.s.nsw.gov.au

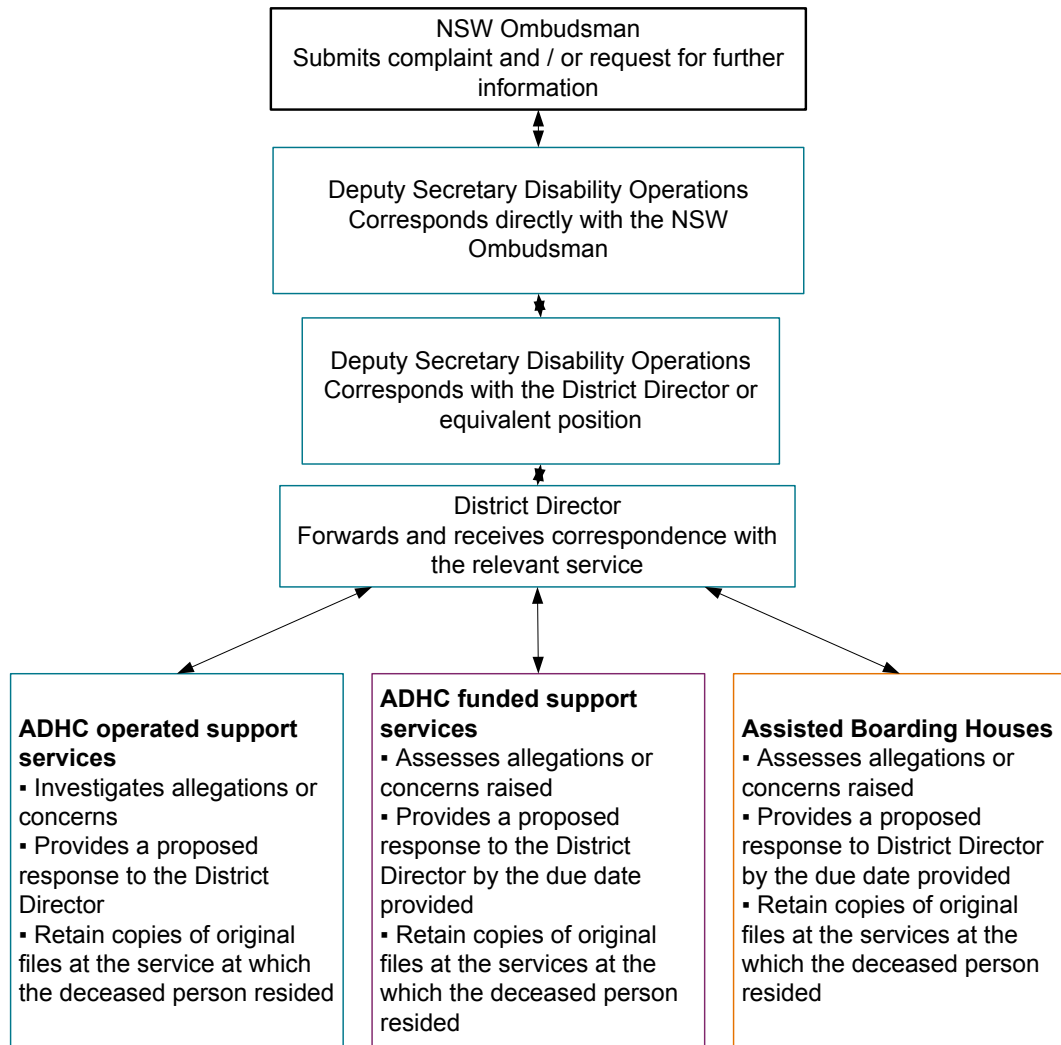
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15 Index of flowcharts

Flow chart 1: Immediate action and response required *within 1 to 2 hours* of a person's death



Flow chart 2: Action required when the NSW Ombudsman submits a complaint or requests further information



Flow chart 3: Action required *within 48 hours* of a person's death

