**D11 & D12 Death of a Person we are Supporting**

**Appendix 1 Checklist**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of Person We are Supporting:** | | **Room No (if applicable):** | | | |
| **Tick / N/A** | **Comments** | **Signature** | **Date** |
| 1 | Refer to the Person-centred advanced care statement and / or the person centred care plan. |  |  |  |  |
| 2 | Was a Deprivation of Liberty Safeguards in place, follow procedure. |  |  |  |  |
| 3 | Did the death occur following a fall and if so follow specific procedure. |  |  |  |  |
| 4 | Inform staff on duty. |  |  |  |  |
| 5 | Inform other people we support as appropriate. |  |  |  |  |
| 6 | Inform Adult and Local Services and enter on the home’s register where applicable. |  |  |  |  |
| 7 | Log all medication following the appropriate medication policy. |  |  |  |  |
| 8 | Inform the pharmacist. |  |  |  |  |
| 9 | Remove MAR chart and place on the file of the person you are supporting. |  |  |  |  |
| 10 | Remove daily / records and place on the file of the person we are supporting in date order. |  |  |  |  |
| 11 | Log all belongings and valuables on the Personal possessions checklist A10. |  |  |  |  |
| 12 | Archive the file by following the archiving procedure unless there is to be a coroner’s inquest. This must be sealed and nothing amended in the file once archived. |  |  |  |  |
| 13 | On closure of the personal monies and property book the front sheet must be signed and copied as a receipt. |  |  |  |  |
| 14 | List all clothes and none valuables for the family to sign for on collection. |  |  |  |  |
| 15 | Allocate the cleaning of the room ready for next person. |  |  |  |  |
| 16 | Cancel newspapers and agree any outstanding bills with the next of kin / preferred contact. |  |  |  |  |
| 17 | Arrange for collection of belongings with the family. Ensure all belongings are stored appropriately for collection. |  |  |  |  |
| 18 | Cancel all diary appointments. |  |  |  |  |
| 19 | Any aids etc on loan should be returned and relevant people informed. |  |  |  |  |
| 20 | All Health Care Professionals to be informed. |  |  |  |  |

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