


Work Health Safety: Safe Work Practice: Personal & Medical

Responding to client death

 Risks	Risk rating	Risk Controls
Infection from contact with body fluids, waste or germs	Likelihood C Consequence3 Rating = HIGH	<input checked="" type="checkbox"/> Wear gloves <input checked="" type="checkbox"/> Do not approach body if danger to self is likely
Psychological distress to worker or volunteer	Likelihood C Consequence3 Rating = HIGH	<input checked="" type="checkbox"/> Do not enter home if you believe client is deceased <input checked="" type="checkbox"/> Do not enter area of a potential crime scene <input checked="" type="checkbox"/> Do not have a role in cleaning/packing up a deceased person's belongings (also protects against allegations of theft) <input checked="" type="checkbox"/> Coordinators/Nurses to ensure that education in dying, death and grieving for any staff who are likely to encounter a deceased client/resident in the course of their work. <input checked="" type="checkbox"/> Assistance provided by Mercy Services with grieving such as giving a copy of: Brisbane South Palliative Care Collaborative (2013) Bereavement Support Booklet for Residential Aged Care Staff, Brisbane: State of Queensland (Queensland Health) http://www.caresearch.com.au/Caresearch/Portals/0/PA-Toolkit/Bereavement_Support_Booklet_for_Residential_Aged_Care_Staff.pdf

Equipment required:.

<i>Mercy Services equipment</i>	<i>Others equipment</i>
Personal Protective Equipment required: gloves	

Activity	Worker behaviour	Client/other's behaviour
1. Clarifying if client living in the community is deceased	a) If staff have reason to believe the client may be deceased they should contact their Coordinator and not enter the home. b) If the house or area around the client show signs of disturbance or assault do not approach the area as it may be a crime scene, contact your Coordinator. c) Staff are to contact their Coordinator if the client does not answer the door. The Coordinator will activate the emergency plan and attend the scene ASAP. d) Approach the client and follow first aid checks (DRS) <i>e.g., a person with dementia may have left the gas on in the house all night, or be touching electrical appliances</i> ; seek a response from the client (shout and if necessary squeeze their hand); e) As part of "S" send for help – staff should ensure their Coordinator is aware of the situation f) If you believe the client has only recently lost consciousness and you feel confident and competent you may apply ABCD – unless you know the client does not want to be resuscitated	a) If the client's family/carer are present they are to be consulted before action is taken

Activity	Worker behaviour	Client/other's behaviour
<p>2. Coordinator role (for a client who was living in the community)</p>	<ul style="list-style-type: none"> a) Coordinator will phone the ambulance if this has not already been done b) Coordinator will phone the client's contact and will notify: (1) of the situation; (2) inform them of the current location of the body and of who is attending; and (3) ask if there are any religious or cultural practices to be observed. c) Coordinator will only ensure the Police are contacted if there were signs of possible: attack upon the client/disturbance to premises/suspicious circumstances. d) Coordinator will contact the GP to visit, certify death and issue a certificate for the body to be released to the funeral director (unless family are doing so). e) Coordinator will contact the Public Guardian - if the client has a public guardian. f) Coordinator will notify their Manager who will notify the Chief Executive Officer (CEO) of an unexpected client death. 	
<p>3. Wait at the scene (for a client who was living in the community)</p>	<ul style="list-style-type: none"> a) If emergency services have been called wait for their arrival and ensure easy access. b) Coordinator supports staff as required and assists emergency services as needed. c) Coordinator supports family and friends and provides practical support, sensitivity and reassurance d) Coordinator ensures the dignity and privacy of the deceased. e) Where required, Coordinator informs family/ friends of the need to engage a funeral director. f) Asks family if they want Coordinator to wait with them/the deceased until the removal of the body by the funeral director or public morgue staff. g) Ensure premises is locked when leaving if no family/ friends are present. h) Coordinator informs staff who assist this client of the client's death (not by text message). i) Prompts family of the need to notify other services that were involved with the client. 	
<p>4. Cleaning/ packing the deceased person's belongings</p>	<ul style="list-style-type: none"> a) Obtain the CEO's approval prior to any involvement of staff in assisting the estate of a deceased client (<i>All Government funding to assist clients ends when the client dies so other funds are need to pay for staff assisting in this role.</i>) 	<p>Families are responsible for cleaning/packing the belongings of a deceased person</p>
<p>5. Funeral</p>	<ul style="list-style-type: none"> a) If the deceased does not have a family, guardian or advocate, to organise a funeral staff are to consult with the CEO b) The Coordinator will notify staff who knew the client of the funeral arrangements. 	<p>Families are responsible for arranging the funeral. - In cases where the family cannot afford the cost of the funeral and the</p>

Activity	Worker behaviour	Client/other's behaviour
	<ul style="list-style-type: none"> c) The Coordinator will make arrangements for clients and staff wishing to attend the funeral (see Policy E.20 Deteriorating Client Health). d) The CEO will be consulted if staff participation at the funeral will result in the cancellation of a service. 	client's estate cannot cover funeral costs, the Coordinator will make a referral to the local police.
6. Assisting staff, volunteers and other clients deal with their grief	<ul style="list-style-type: none"> a) Where the client was a participant in a group program the staff will gently and respectfully inquire whether the group members want to attend the funeral or have their own ritual to farewell and/or celebrate the person. b) The Coordinator will offer to listen and provide support to grieving staff and volunteers. Provide staff and volunteers with a copy of "Bereavement Support Booklet for residential Aged Care Staff". c) Staff and volunteers will be reminded that free counselling is available to them (<i>Employee Assistance Program</i>). 	
7. Follow up	<ul style="list-style-type: none"> a) If necessary (e.g. HCP & Residential Aged Care) the CEO or DoC will notify the funding department of an unexpected client death b) In the days and weeks after the death the Coordinator will ask grieving staff and volunteers how they feel about the client death and remind them of the signs of a delayed grief/trauma reaction. c) Ensure incident report on the death d) Ensure Accounts are notified of the need to send a final invoice and clients name is removed from newsletter and other lists, e) Ensure the return of any equipment loaned by Mercy Services 	

As at 27/09/16 this Safe Work Practice is authorised for use in:

<i>Service</i>	<i>Position</i>
Brighton House	Support Worker
Community Transport	Driver and Coordinator
Community Nursing	Registered Nurse
Day Centre	Activity Officer, Activity Officer/Driver and Coordinator
Home Care Packages	Community Care Assistant and Coordinator
Home Support Program/NDIS	Community Care Assistant and Coordinator
Linen Service	Drivers
McAuley Outreach Service	Counsellor and Coordinator
Residential Aged Care	Nurse, Assistant in Nursing
Social Support	Coordinators and Volunteer
Support Coordination	Case Manager and Coordinator

Date for review of safe work practice: September 2019 (or if injury or changes require)

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COMPETENCY ASSESSMENT

Responding to client death

Employee _____

Assessor _____

Date _____

Desired Outcome:

Staff to be able to respond to the death of a client in ways that do not harm self or others. Staff able to support family; friends and each other, whilst respecting the dignity and privacy of the deceased.

Performance Criteria	Competence demonstrated	Comment
1. Clarifies if client living in the community is deceased		
a) Worker contacts Coordinator and does not enter the home if believes the client may be deceased.		
b) Does not approach the area if believes it may be a crime scene.		
c) Contacts Coordinator if door not answered.		
d) Contacts Coordinator and uses appropriate PPE (e.g.: gloves) if investigating whether a client might have died/lost consciousness at a Mercy Services centre or activity.		
e) Approaches the client and follows first aid safety checks (DRS).		
f) If feeling confident and competent activates (ABCD) first aid:		
<p>The infographic details the following steps for ABCD first aid:</p> <ul style="list-style-type: none"> D DANGER: Check for danger to yourself, bystanders and patient. (Illustrated with a person holding a red STOP sign.) R RESPONSE: Check for response, talk and touch. (Illustrated with a person saying "can you hear me?".) S SEND FOR HELP: Call an ambulance on 000 or 112 from mobiles. (Illustrated with a person using a mobile phone.) A AIRWAY: Clear and open airway. Adult/child – full tilt. Infant – neutral head position. (Illustrated with a person performing head-tilt.) B BREATHING: Look, listen and feel for breathing. If not breathing normally, start CPR. (Illustrated with a person performing rescue breathing.) C CPR: Perform 30 compressions followed by 2 breaths. If unwilling/unable to perform rescue breaths continue chest compression. (Illustrated with a person performing CPR, with a 30:2 ratio shown.) D DEFIBRILLATION: Attach automatic external defibrillator (AED) as soon as possible and follow it's prompts. (Illustrated with an AED device.) 		

Performance Criteria	Competence demonstrated	Comment
2. Coordinator's role (for a client who was living in the community)		
a) Coordinator will phone the ambulance (unless otherwise done).		
b) Phones the client's first contact: (1) notifies them appropriately of the situation; (2) informs them of the current location of the body and of who is attending; and (3) asks if there are any religious or cultural practices to be observed.		
c) Only phones the Police if there were signs of possible: attack upon the client/disturbance to premises/suspicious circumstances.		
d) Contacts the GP to visit to certify death and issue certificate for the removal of the body by the funeral director (unless family are doing so).		
e) Contacts the Office of the Public Guardian - if the client has a public guardian.		
f) Notifies notify their Manager who will notify the the CEO of an unexpected client death		
3. Waits at the scene (for a client who was living in the community)		
a) If emergency services have been called waits for their arrival and ensures easy access.		
b) Coordinator supports staff as required and assists emergency services as needed.		
c) Coordinator supports family and friends and provides practical support, sensitivity and reassurance.		
d) Coordinator ensures the dignity and privacy of the deceased.		
e) Where required, Coordinator informs family/ friends of the need to engage the funeral director.		
f) Asks family if they want Coordinator to wait with them/the deceased until the removal of the body by the funeral director or public morgue staff.		
g) Ensures premises is locked when leaving if no family/ friends are present.		
h) Informs staff who assist this client of the client's death.		
i) Prompts family of the need to notify other services that were involved with the client		
4. Cleaning/ packing the deceased person's belongings		
a) Obtains the CEO's approval prior to any involvement of staff in assisting the estate of a deceased client		
5. Funeral		
a) Consults with the CEO if the deceased does not have a family, guardian or advocate, to organise a funeral		
b) Coordinator notifies relevant staff of the client's of the funeral arrangements.		

Performance Criteria	Competence demonstrated	Comment
c) Coordinator makes arrangements for clients and staff wishing to attend the funeral (see Policy E.20).		
d) Coordinator consults with CEO if staff participation at the funeral will result in the cancellation of a service.		
6. Assisting staff, volunteers and other clients deal with their grief		
a) Where the deceased client was a participant in a group program the staff gently and respectfully inquires whether the other group members want to attend the funeral or have their own ritual.		
b) Coordinator offers to listen, provide support and give a copy of “Bereavement Support Booklet for Residential Aged Care” to grieving staff and volunteers.		
c) Staff and volunteers are reminded that they can access Employment Assistance Program		
7. Follow-up		
a) If necessary CEO/DoC notifies the funding department of an unexpected client death.		
b) Coordinator asks grieving staff and volunteers, in the days and weeks after the death, how they feel about the client death and remind them of the signs of a delayed grief/trauma reaction.		
c) Ensures incident report on the death		
d) Ensures Accounts are notified of the need to send a final invoice and clients name is removed from newsletter and other lists,		
e) Ensures the return of any equipment loaned by Mercy Services		

Is the worker assessed as being competent? YES NO

Any required follow up action/training: _____

Signature of employee Date.....

Signature of assessor Date.....