

	<b>Dimensions:</b> <b>Safety</b>	<b>HAO Standard:</b> <b>3.2a</b>	<b>Policy:</b> <b>Safety #11</b>
	<b>Original Approval Date:</b> <b>April 21, 2003</b>	<b>Date Revised:</b> <b>February 2, 2009</b>	<b>Revision Approval Date:</b> <b>August 31, 2009</b>

**TOPIC:                    DEATH IN THE HOME (EXPECTED, UNEXPECTED)**

**POLICY STATEMENT:**

In the event of a death of the client, the volunteer must act according to the instructions provided by the client/caregiver.

**PROCEDURE:**

1. Volunteer will:
  - Be aware of client/caregiver wishes regarding death.  
i.e. Advance Directive, D.N.R., or not calling 911, police or ambulance unless instructed by family member.
  - Inform the visiting nurse or agency of any significant change in client's condition.
  - Notify family or significant other of any significant change in client's condition.
  - Offer to remain with family pending arrival of professional support.
  - Respect the spiritual and cultural beliefs of the family.
  - Notify the NNPCN (N/PS) office of the client's death.
  
2. The Death Notice (Form 033) will be completed by the Team Leader/Program Administrator/Delegate upon notification of the death.

**REVISION HISTORY:**

<b>DATE</b> <b>mm/dd/yyyy</b>	<b>REVISED BY</b>	<b>REVIEW ONLY (✓)</b>	<b>COMMENTS / MODIFICATIONS</b>	<b>BOARD APPROVAL DATE:</b> <b>mm/dd/yyyy</b>

