

Policy and Procedure

Title:	Notification of Patient Death <i>(formerly Deceased Patient Notification)</i>
Policy Number:	02.020 <i>(formerly 03.01.61)</i>
Effective Date:	January 30, 2009
Revised Date:	September 30, 2015
Approving Body:	President and CEO
Authority:	CancerCare Manitoba Act
Responsible Officer:	President and CEO
Delegate:	Chief Medical Officer
Contact:	CMO Office
Applicable to:	CCMB Staff and Physicians

1.0 **BACKGROUND:**

- 1.1 CancerCare Manitoba is committed to improving communication and looking after the well-being of its patients and their family members, as well as its staff. Timely and accurate information regarding the death of a patient will reduce the likelihood of phone calls regarding appointments, etc., to grieving family members.
- 1.2 Accurate and timely information regarding patients' deaths will also improve the efficient use of clinic appointments and may be useful as additional tracking and outcomes data.

2.0 **PURPOSE:**

- 2.1 To ensure information received by CancerCare Manitoba (CCMB), Community Cancer Program Network (CCPN) and Winnipeg Regional Health Authority Oncology Program (WRHA OP) staff regarding a patient death is verified and is entered into the CCMB patient health record accurately and as timely as possible.
- 2.2 Note: This policy does not apply to CCMB Screening Programs where patients are not registered in the CCMB electronic health record. These programs receive information in monthly updates from the Manitoba Health population register.

3.0 **DEFINITIONS:**

- 3.1 **EHR:** CCMB's electronic health record.
- 3.2 **MAXON:** CCMB's cancer registry application.
- 3.3 **CR#:** CCMB's Cancer Registry number; a unique identifier for patients registered within MAXON.
- 3.4 **PHIN:** Personal Health Information Number; a unique identifier assigned to an individual within the provincial healthcare system.

CANCERCARE MANITOBA GOVERNING DOCUMENTS Policy and Procedure
Title: Notification of Patient Death
Page: 2 of 6

4.0 **POLICY:**

- 4.1 Any CCMB, CCPN or WRHA OP staff member notified of the death of a patient registered within the CCMB EHR will check the EHR for verification that it has been previously recorded. If not already recorded, the staff member will follow the procedure for notification to ensure the EHR is updated accurately and as soon as possible.

5.0 **PROCEDURE:**

5.1 Clinical or Administrative Staff with Access to ARIA upon Receiving Notification of Patient Death (See Flowsheet - Appendix A):

- 5.1.1 Check the EHR (both Medical Oncology and Radiation Oncology records, as applicable) to verify whether the death has already been reported and recorded.

- 5.1.2 If the record does not indicate the patient is deceased or a date of death, notify CCMB's Vital Stats Registry through one of the following methods:

- E-mail – ccmbvitalstatsregistry@cancercare.mb.ca – with subject title "CCMB Notification of Patient Death";
- Phone – CCMB Vital Stats Analyst at 204-787-2299;
- Fax – Vital Stats Registry at 204-786-0628

- 5.1.3 Information that **must be** included in full with any of the above:

- Patient's initials, date of birth, CR# and PHIN;
- Patient's date of death and date notification received;
- Place of death (e.g. which hospital, home), if known and who provided the information (e.g. family member, care provider, medical facility, obituary);
- Sender's contact information, i.e. your name, department/program/facility, and contact e-mail or phone number.

- 5.1.4 Contact appropriate providers to ensure all appointments and tests are cancelled.

- 5.1.5 Document notification of CCMB Vital Stats and notification of other providers in the EHR.

5.2 CCMB Vital Stats Registry Analyst:

- 5.2.1 Receive and review e-mail, phone call or fax messages and verify patient identifiers with the EHR.

- 5.2.2 Enter the patient's date of death into MAXON. This will automatically update the EHR within 5 days through the MAXON/EHR interface.

CANCERCARE MANITOBA GOVERNING DOCUMENTS
Policy and Procedure

Title: **Notification of Patient Death**

Page: 3 of 6

5.3 Health Records Data Quality Analyst:

5.3.1 At the beginning of each month, run a Mortality Report in MAXON for the prior month.

5.3.2 Reserve the paper copy health records from the Mortality Report for records processing completion.

5.4 Health Records Processing Clerk:

5.4.1 Receive the Mortality Report for records processing completion and prepare each of the paper copy health records for completion.

5.4.2 Following completion, return the paper copy health record to permanent file storage in the Health Information Services, Health Records Department.

5.4.3 After seven (7) years following a patient's death, the patient's paper copy health record is pulled and processed for transfer to an offsite, long-term storage facility for a total of twenty-five (25) years, in accordance with provincial and regional retention and destruction regulations.

6.0 **REFERENCES:**

6.1 CCMB Retention and Destruction of Health Records, Policy No. 06.008.

Policy Contact:

All enquiries relating to this policy should be directed to:

Name: Gail Noonan

Title/Position: Manager, Registry

Phone: 204-787-2157

E-mail: gnoonan@cancercare.mb.ca

Address:
(if required):

CANCERCARE MANITOBA GOVERNING DOCUMENTS
Policy and Procedure

Title: **Notification of Patient Death**

Page: 4 of 6

DOCUMENTATION

Policy Location:

This policy is located (hard and e-copy formats):

1. The original signed and approved policy is on file in the Executive Office, CCMB
2. The e-copy is on file in the CCMB Governing Documents Library, SharePoint
- 3.

Revision History:

Date	Version	Status	Author	Summary of Changes
dd/mm/yyyy	#	Initial, Draft Final Minor/Major revision		
30/01/2009	1	Initial		
12/02/2012	2	Revision		
23/06/2015 30/09/2015	3	Revision	PC Wkg Grp Policy Team CPMT	Minor revisions made by working group. Development of Appendix A and B.
28/03/2018	3	Minor revision	S.Friedenberger	Reformatted to new template

Approvals Record:

This Policy requires approval by:

Approval	Date	Name / Title	Signature
		Not required.	

FINAL APPROVAL:

Date	Name / Title	Signature
Oct 7 2015	Dr. S. Navaratnam President and CEO, CCMB	<i>Original signed by Dr. S. Navaratnam</i>

CANCERCARE MANITOBA GOVERNING DOCUMENTS
Policy and Procedure

Title: **Notification of Patient Death**

Page: 5 of 6

Appendix A
Procedure for Staff Receiving Notification of Patient Death

CCMB, CCP or WRHA OP clinical or administrative staff receives notification that patient is deceased.

Check electronic health record. If record does not indicate patient is deceased proceed with the following steps:

Notify CCMB's Vital Statistics Registry through **one** of the following methods:

- 1) Email: ccmbvitalstatsregistry@cancercare.mb.ca with subject title "CCMB Notification of Patient Death"
- 2) Phone: CCMB Vital Stats Analyst at 204-787-2299
- 3) Fax: Vital Stats Registry at 204-786-0628 → *Use Death Notification Form (see Appendix B)*

Include the following information:

- Patient Initials, date of birth, CR# and PHIN
- Date of death and date notification received
- Place of death, if known (hospital, home, personal care home, etc.)
- Who provided the information (family, care provider, medical facility, obituary, etc.)
- Sender's contact information – name, department/program/facility, contact email or phone number

Cancel all future appointments in ARIA within your area of responsibility. Ensure imaging and other tests are cancelled. Notify providers/departments involved in patient's care, which could include:

- Other care providers at CCMB (radiation oncology, medical oncology, surgical oncology psychosocial oncology, clinical investigations)
- Community Cancer Program
- WRHA Cancer Program site
- Palliative Care Program
- Home Care Program
- Primary Care Provider

Document death, notification of CCMB Vital Stats and notification of other providers in the electronic health record.

CANCERCARE MANITOBA GOVERNING DOCUMENTS
Policy and Procedure

Title: **Notification of Patient Death**

Page: 6 of 6

Appendix B: Patient Death Notification Facsimile Form



PATIENT DEATH NOTIFICATION - FACSIMILE FORM

NOTE: All fields must be completed where information is available. Please type or print clearly.

1. **Date Information Received** (mm/dd/yyyy): ____/____/____

2. **Patient's CR #:** _____

3. **Patient's Initials:** _____

4. **Patient's Date of Birth** (mm/dd/yyyy): ____/____/____

5. **Patient's PHIN:** _____

6. **Place of Death:**

___ Home

___ Hospital (specify name): _____

___ PCH (specify name): _____

___ Other: _____

___ Unknown

7. **Date of Death** (mm/dd/yyyy): ____/____/____

8. **Information Source** (please specify where applicable):

___ Family Member (spouse/parent/child): _____

___ Medical Provider / Facility: _____

___ Other (e.g. Newspaper): _____

9. **Information Sent to CCMB Vital Stats by:**

Name: _____

Department / Program / Facility: _____

Phone Number: _____

➤ **Fax completed form to:**

CCMB Vital Stats Analyst, Cancer Registry

Fax # 204-786-0628

➤ **If emailing information:** ccmbvitalstatsregistry@cancercare.mb.ca – subject title "CCMB Notification of Patient Death"

➤ **If phoning information:** call CCMB Vital Stats Analyst at 204-787-2299