



Future State: Phys Track - Transitions - Patient Deceased

Cerner Workflow ID: 298 (v. 13.0) Client Workflow ID: 765

Last updated by Tina Van Egmond, May 09, 2024 1:53pm (UTC -4 hours)

Workflow Details:

Workflow Name: Phys Track - Transitions - Patient Deceased

Workflow State: Future State

Workstream: Discharge/Check Out

Venue: Acute Care
Critical Care

Client Owner:

Cerner Owner:

Standard: Yes

Related Workflow(s):

Tags:

Workflow Summary:

Service Line:

Related Solution(s): Cerner Millennium EMR - Acute

Project Name: Niagara Health System:OPT-0297674:NIAG_CD Niagara HIS RFP

TestBuilder Script(s):

Cerner Workflow ID: 298 (v. 13.0)

Client Workflow ID: 765

Workflow Notes:

Introduced By: WS 6

Validated By: WS 8

Swim Lane:

Role(s): Prescriber [Custom]

Department(s):

Security Position(s):

Decision [10191]

Description: Pronounce death (if nurse not present)

Comments: If death is anticipated, efforts should be made to get the funeral home, the SDM, the POA, and executor information documented in the chart to assist with planning after death.

Work Step [10146]

Description: Notify family of death (if nurse not able)

Comments: Prescriber also contacts nurse to notify TGLN and document TGLN number in Trillium Gift of Life Notification iView section

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Decision [10273]

Description: Is this a Coroner's Case?

Decision [10309]

Description: Autopsy needed or requested?

Comments: Autopsy can be requested by prescriber, family or the coroner.

Work Step [10203]

Description: Complete Medical Certificate of Death (Form 16) paper form

Comments: This form needs to be completed on paper as there is no electronic Ministry version for prescribers to be utilized in the hospital setting.

Work Step [10291]

Description: Place "Discharge Patient" order with appropriate disposition (if nurse/clerk hasn't already done this)

Comments: Appropriate discharge dispositions include "Died in facility", "Died while on pass/leave", and "Died with MAiD".

If a nurse/clerk is placing the Discharge Patient order on behalf of the physician, the Communication Type that should be used is "Medical Directive" because an instruction indicating that nurses/clerks can place this order on behalf of prescribers will be included in the End of Life PowerPlan.

Document [10277]

Description: Click on "Death Summary" hyperlink on the Discharge Workflow MPage to create and sign note

Work Step [10279]

Description: Place "Notify Coroner" order in the End of Life PowerPlan

Method: PowerChart

Comments: Policy information: Coroner Notification DOCUMENT ID: 360-010-020 and 360-010-021

The MRP or delegate shall document in the patient's chart contact with the Coroner, reason for

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contact, and specific instructions, if any.

The Nurse can also notify the coroner without the direction of the MRP.

Physician and nurse to document that coroner was contacted in their notes.

Work Step [10324]

Description: Obtain consent and notify nurse

Swim Lane:

Role(s): Inpatient Nurse

Department(s):

Security Position(s):

Start/Stop [10267]

Description: Pronounce death (if prescriber not present)

Step Impact: Policy/Procedure

Comments: If death is anticipated, efforts should be made to get the funeral home, the SDM, the POA, and executor information documented in the chart to assist with planning after death.

Work Step [10268]

Description: Notify family of death (if prescriber not able)

Work Step [10264]

Description: Place "Discharge Patient" order with a disposition of "Died in Facility" (if prescriber hasn't done this already)

Step Impact: Training

Comments: This serves as notification to bed mgmt that a bed could be opening up soon.

Follow up: Which communication type should nurses use if they need to place the Discharge Patient order on behalf of the physician? There is a Medical Directive option, but a Medical Directive would need to be written for this specific

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situation.

Work Step [10212]

Description: Document Notification of Death section in the Death Record form.

Method: PowerForm

Decision [10153]

Description: Is this a Coroner's Case?

Comments: If decision has been made that this case should be discussed with the Coroner, do not move or touch the body. Coroners in Ontario investigate certain deaths in order to determine the facts surrounding the death, and to make recommendations to prevent future deaths in similar circumstances. Health Care Professionals have a legal and professional responsibility to notify the Coroner of cases which may require investigation.

Work Step [10230]

Description: Document in Autopsy section of Death Record Powerform.

Method: PowerForm

Work Step [10155]

Description: Removes Lines, Tubes, Drains if appropriate & documents accordingly

Method: Interactive View

Step Impact: Policy/Procedure

Work Step [10160]

Description: Gather belongings and document Valuables/Belongings on paper form.

Method: PowerForm

Comments: This form remains on paper as has to accompany the deceased patient to the Funeral Home.

Work Step [10176]

Description: Label body and prepare per policy. Ensure Belongings/Valuables paper form is completed, signed and sent with the body to the morgue

Step Impact: Policy/Procedure
Training

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Comments: NH paper form: Belongings/Valuables of Deceased – Form PT6.

HDS paper
form: Personal Property and Valuables sheet

Off Page Reference [10256]

Workflow Link: Cap Management - NH and HDS: CareAware Patient Flow: Patient Transport request

Work Step [10179]

Description: Discharge patient with PM conversation "Discharge Encounter" and appropriate disposition

Value Impact: Patient Safety
Quality

Comments: Automatically marks bed empty and dirty, takes out the patient from Cap Man and requests for EVS sent out to clean bed/room.

This discharge encounter conversation sends discharge message to Pyxis Automated Dispensing Cabinet once patient is discharged so medication can no longer be dispensed.

Work Step [10295]

Description: Notify TGLN and document TGLN number in Trillium Gift of Life Notification iView section

Step Impact: Training

Comments: Trillium Gift of Life must be called for all patients 79 and younger. For infants and neonates, only those that are greater or equal to 36 weeks corrected gestational age. Critical Care and ED, call regardless of age.

Complete TGLN routine notification worksheet and next steps form.

In iView, nurse is to document the TGLN number and outcome of the call.

Work Step [10157]

Description: Document Coroner section of Death Record form.

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Method: PowerForm

Comments: Once the patient has been pronounced dead, and the decision has been made that this case should be discussed with the Coroner, do not move or touch the body (including cleaning up body fluids, removing tubes or lines) without the Coroner's permission. Follow directions as given by the Coroner.

Swim Lane:

Role(s): HIM Department

Department(s):

Security Position(s):

Off Page Reference [10363]

Workflow Link: HIM - Deficiency Management: Analysis

System [10362]

Description: Chart is checked for existing Death Summary. If not found, an anticipated document notification sent to Attending Prescriber

Off Page Reference [10384]

Workflow Link: HIM - Enterprise Document Management - Document Library Single Document Capture

Off Page Reference [10364]

Workflow Link: HIM - Coding: Inpatient/Outpatient Coding Task

Swim Lane:

Role(s): Transport Technician

Department(s):

Security Position(s):

Work Step [10178]

Description: Assist in transport of body to morgue

Comments: Security will escort Nurse/transport technicians when transporting the deceased from the unit to the Morgue facility.

At HDS, security isn't 24/7, so the nurse would transport the deceased from the unit to

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the Morgue facility. Transport technicians aren't used at HDS.

Start/Stop [10228]

Description: Release body by morgue to medical examiner or funeral home

Swim Lane:

Role(s): Coroner [Custom]

Department(s):

Security Position(s):

Decision [10285]

Description: Does the Coroner accept the patient?

Comments: If the Coroner decides not to accept the case or as directed, the MRP will complete the Medical Certificate of Death (Form 16), request a hospital autopsy, if indicated (for which family consent would be required), and release the body as per hospital protocols.

Work Step [10286]

Description: Completes assessment of patient

Decision [10154]

Description: Is an autopsy determined to be necessary?

Work Step [10299]

Description: Complete Medical Certificate of Death (Form 16) paper form

Comments: If Coroner has not yet completed death certificate and a temporary one needs to be completed by MRP, use Form 1- Certificate of Death which is provided to HIM Department and goes with the chart to Medical Records.

Work Step [10335]

Description: Releases patient

Work Step [10314]

Description: Consent obtained

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Work Step [10318]

Description: Autopsy completed

Work Step [10346]

Description: Complete warrant to bury

Swim Lane:

Role(s): Registration [Custom]

Department(s):

Security Position(s):

Work Step [10371]

Description: Receives printed order requisition for "Discharge Patient" order as death notification

Work Step [10373]

Description: Start Death Checklist

Comments: HDS Process: Checklist is completed, the ward clerk calls the FH when the body is ready to go. The body is brought to the morgue. The funeral home presents at switchboard, they call the nursing unit and the registered staff meet the FH at the morgue with the paper work.

Work Step [10375]

Description: In PM Office go into the last encounter and add "Estate of" before the patient's last name in the Guarantor section.

Work Step [10377]

Description: When Death Checklist is complete, call the Funeral home (FH) to release the body.

Comments: HDS Process: Checklist is completed, the ward clerk calls the FH when the body is ready to go. The body is brought to the morgue. The funeral home presents at switchboard, they call the nursing unit and the registered staff meet the FH at the morgue with the paper work.

Work Step [10379]

Description: Security picks up Morgue Record and Death Cert/Warrant from Reg, and returns Morgue Record once body has been released to FH

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Work Step [10381]

Description: Remaining paperwork to HIM for scanning.

Facilities:

Facility Name: Niagara Health System (All five acute hospitals) and Hotel Dieu Shaver

Status: Pending Approval

Facility Cerner Owner: Baker, Chrissy M

Facility Client Owner: Van Egmond, Tina

Authorize Date:

Facility Comments: