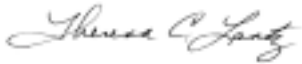
 <p>State of Connecticut Department of Correction</p> <p>ADMINISTRATIVE DIRECTIVE</p>	Directive Number 8.2	Effective Date 12/15/2005	Page 1 of 7
	Supersedes Inmate Death, dated 2/21/1997		
Approved By 	Title Offender Death		

1. Policy. The Department of Correction shall ensure an appropriate and respectful response in the event of an offender death.
2. Authority and Reference.
 - A. Connecticut General Statutes, Sections 4a-16, 17b-84, 18-81, 19a-270 and 19a-406 through 19a-409.
 - B. Public Act 05-81, An Act Concerning Disposition of Unclaimed Cremated Remains by Funeral Directors.
 - C. American Correctional Association, Standards for the Administration of Correctional Agencies, Second Edition, April 1993, Standard 2-CO-4E-01.
 - D. American Correctional Association, Standards for Adult Correctional Institutions, Fourth Edition, January 2003, Standards 4-4395 and 4-4425.
 - E. American Correctional Association, Performance-Based Standards for Adult Local Detention Facilities, Fourth Edition, June 2004, Standards 4-ALDF-4D-12 and 4-ALDF-4D-23.
 - F. National Commission on Correctional Health Care, Standards for Health Services in Prisons, 2003, Standards P-A-10, P-G-05, P-I-04 and P-I-07.
 - G. National Commission on Correctional Health Care, Standards for Health Services in Jails, 2003, Standards J-A-10, J-C-04, J-G-05 and J-I-04.
 - H. Administrative Directives 1.10, Investigations; 4.1, Offender Records; 4.4, Access to Inmate Information; 6.6, Reporting of Incidents; 6.9, Control of Contraband and Physical Evidence; and 8.10, Quality Assurance and Improvement.
3. Definitions. For the purposes stated herein, the following definitions shall apply:
 - A. Community Death. The death of an offender living in the community under the supervision of the Parole and Community Services Unit, regardless of where the death occurred.
 - B. Death. The condition in which a person's bodily functions have ceased irreversibly, including but not limited to, the cessation of pulse, respiration, heartbeat and pupil reaction.
 - C. Direct Admission Facilities. A correctional facility designated to receive inmates committed by the courts. The following facilities are designated as direct admission facilities: Bridgeport Correctional Center; Corrigan-Radgowski Correctional Center; Hartford Correctional Center; Manson Youth Institution; New Haven Correctional Center; and, York Correctional Institution.
 - D. Disposition of the Body. The burial, cremation or legal anatomical donation of the body of a deceased offender.
 - E. Facility Death. The death of an inmate assigned to a Department of Correction facility, regardless of where the death has occurred.

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- F. Hospice Death. The expected death of an inmate with a terminal or chronic illness housed in the infirmary of a designated facility.
 - G. Next of Kin. The spouse, partner in a civil union, guardian, closest living relative, a person designated by the offender or person designated by a probate court to have custody of the body, pursuant to a legal petition.
 - H. Pronouncement of Death. The determination that an offender has died and that no further medical attention is to be rendered.
4. Pronouncement of Death. A physician shall be the only person to pronounce the death of an offender. If the Office of the Chief Medical Examiner informs the Department's physician that a Medical Examiner shall not respond to the scene to investigate the death, a Department physician or contract physician shall pronounce the death in a timely manner. The physician who has made the determination of death shall complete the death certificate.
5. Notification. Upon the death of an offender either in a facility or in the community, the following notifications shall be made:
- A. Facility Death. Notifications of an inmate death in a correctional facility shall be made promptly and in accordance with the following:
 - 1. A Department employee having knowledge of the death of an inmate shall immediately notify the Shift Commander or designee who shall continue notification of the appropriate staff and who shall ensure completion of all incident reports in accordance with Administrative Directive 6.6, Reporting of Incidents.
 - 2. The Health Services staff member on duty shall complete the appropriate incident reports and notify the following personnel: physician consultant on-call and the Correctional Health Services Administrator, who shall notify the Director of Health and Addiction Services immediately of any unexpected death, but no later than the next business day of an expected death.
 - 3. If there is no Health Services personnel on duty, the Shift Commander shall notify the on-call Correctional Health Services Administrator who shall make the notifications listed in Section 5(A)(2) of this Directive.
 - 4. The physician consultant shall report the death to the Office of the Chief Medical Examiner (1-800-842-8820 or 1-860-679-3980) and inquire if a Medical Examiner will respond to the scene to investigate the death. The Medical Examiner shall provide instructions to the physician consultant regarding the disposition of the body. The physician consultant shall notify the Unit Administrator of the action to be taken. The body shall remain under the authority of the Unit Administrator.
 - 5. The Unit Administrator or designee shall notify the Inmate Trust Office of the inmate's death.
 - 6. In the event of a suspicious, violent or untimely death, the Department employee or contractor shall immediately notify the Connecticut State Police and the Office of the Chief Medical Examiner for direction and shall ensure that all instructions are followed.

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- B. Community Death. Notifications of an offender death in the community shall be made promptly and in accordance with the following:
1. A Department employee or contractor having knowledge of the death of an offender shall immediately notify the appropriate Parole Officer and physician consultant. The Parole Officer shall continue notification of the appropriate staff and completion of all incident reports in accordance with Administrative Directive 6.6, Reporting of Incidents.
 2. The physician consultant shall report the death to the Office of the Chief Medical Examiner (1-800-842-8820 or 1-860-679-3980) and inquire if a Medical Examiner will respond to the scene to investigate the death. The Medical Examiner shall provide instructions to the physician consultant regarding the disposition of the body. The physician consultant shall notify the Director of Parole and Community Services of the action to be taken. The body shall remain under the authority of the Director of Parole and Community Services.
 3. In the event of a suspicious, violent or untimely death, the Department employee or contractor shall immediately notify the Connecticut State Police and the Office of the Chief Medical Examiner for direction and shall ensure that all instructions are followed.
6. Staff Responsibilities. The death of an inmate, assigned to a Department facility and who is not a patient in a community hospital, shall be handled in accordance with Administrative Directive 6.9, Control of Contraband and Physical Evidence, if the death occurs on the facility property or at work/assignment location. CN 6901, Physical Evidence Tag and Chain of Custody shall be completed.
7. Next of Kin Notification.
- A. Upon the death of an offender in a Department facility or the community, whether the death has occurred in the facility or in a community hospital, immediate telephone notification to the next of kin shall be made by the facility Chaplain, Unit Administrator or Director of Parole and Community Services, regardless of the time of day or night. If the individual attempting to notify the next of kin is not immediately successful in contacting the next of kin, a diligent effort to do so shall be continued for a period of at least 24 hours following the initial contact attempt. The identity of the deceased shall not be disclosed to the media until the next of kin have been notified.
 - B. Upon contact with the next of kin, the individual making contact shall inform them of the death and relate the relevant facts of the death, as provided by the attending physician and/or investigating officials. The individual making contact shall consult with the next of kin regarding the disposition of the body and provide the following information:

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1. if the Medical Examiner has taken possession of the body to perform an autopsy, the next of kin shall be advised to contact the Office of the Chief Medical Examiner for further information;
 2. if the body is in a Department facility or the community and has been released by the Medical Examiner, the body may be removed from the facility by a Funeral Director designated by the next of kin, provided the removal is timely, as stipulated by the Unit Administrator, otherwise, the Unit Administrator shall contact a predetermined local Funeral Director and arrange for the prompt removal of the body to a funeral home; or,
 3. if the offender has died in a community hospital and the body has been released by the Medical Examiner, the next of kin may arrange for the removal of the body to a funeral home.
- C. At the time of the death notification, the next of kin shall be advised of the procedures to collect the personal effects of the deceased. If the next of kin do not wish to come to the facility, the Unit Administrator shall forward a letter to them within one (1) week of the death, to express appropriate concern and to address the aforementioned matters. If there is no claim for the property, the Unit Administrator shall determine the disposition of the property in accordance with Administrative Directive 6.10, Inmate Property.
8. Transporting and Disposition of the Body.
- A. Medical Examiner. The Medical Examiner shall take possession of a body for autopsy if the death was: violent; sudden or unexpected; occurred under suspicious circumstances; or, if in the judgment of the Medical Examiner, an autopsy should be performed. The Medical Examiner shall arrange for the transfer of the body from the scene of the death to the Office of the Chief Medical Examiner for autopsy. When the autopsy and inquest have been completed, the Medical Examiner shall release the body to a Funeral Director designated by the next of kin, Unit Administrator or the Director of Parole and Community Services.
 - B. Next of Kin. Upon notification by the Unit Administrator, Director of Parole and Community Services or the Office of the Chief Medical Examiner that the body has been released, the next of kin shall be responsible to arrange with a Funeral Director to remove the body from the specified location to a funeral home for final disposition.
 - C. Transfer of the Deceased. If the next of kin cannot be located immediately, or if upon notification, the next of kin is unable to arrange the timely removal of the body from the applicable facility in accordance with Section 7 of this Directive, the Unit Administrator or Director of Parole and Community Services shall arrange with the designated Funeral Director for the transfer of the body from the facility to a funeral home, or if the next of kin has refused to claim the body, or if after a diligent effort by the Unit Administrator/Director of Parole and Community Services the next of kin cannot be contacted/located, the Unit Administrator or the Director of Parole and Community Services

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shall instruct the Funeral Director to carry out the final disposition of the body.

- D. Financial Responsibility. Payment for services provided on behalf of a deceased inmate shall be the responsibility of the next of kin unless there is a claim of indigence. If the next of kin cannot be located or there is no next of kin, the responsibility for final disposition shall default to the Department. The Unit Administrator or the Director of Parole and Community Services shall coordinate the arrangements with an approved Funeral Director for the final disposition of the remains in accordance with applicable state statutes. The Fiscal Services Unit shall coordinate payment of the funeral arrangements and disposition of any monies remaining in the inmate's account.

9. Community Death. The Director of the Parole and Community Services Unit, in conjunction with the Deputy Commissioner of Operations, shall ensure that each Parole and Community Services office and Department contract facility maintains written policy and procedure to address staff duties and responsibilities in the event of an offender death.

Upon receiving information of the death of an offender in the community, the Parole Officer who shall ensure the appropriate incident reports are completed and the incident is reported in accordance with Administrative Directive 6.6, Reporting of Incidents. Additional notification and disposition procedures regarding an inmate death in a in the community shall be as follows:

- A. Responsibility for disposition of the body of an offender who has died in the community shall be the same as if the offender had been residing in the Department facility. Immediate notification of the death to the next of kin shall be made by a Department Chaplain or the Director of Parole and Community Services in accordance with Section 7(A) of this Directive.
- B. The appropriate Parole and Community Services staff member shall ensure that the offender's financial account and other property are transferred from the community to the nearest direct admission facility by the next business day. The Unit Administrator shall arrange for the disposition of the offender's property, as specified in accordance with Administrative Directive 6.10, Inmate Property.

10. Inmate Records and Documentation Upon Death.

- A. Master File.

1. Facility Death. Copies of incident reports and other Department documentation pertaining to an inmate death shall be filed in the inmate master file and health record. The Shift Commander shall ensure that the appropriate Department documentation has been entered in the file and shall deliver the file to the Unit Administrator for review. Following the review, the record shall be maintained in secure storage in the facility records unit.
2. Community Death. The death certificate and if applicable, police reports, shall be secured and distributed with the incident report summary, utilizing the appropriate chain of command, in accordance with Administrative Directive 6.6,

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Reporting of Incidents. Copies of these documents and all other Department reports pertaining to the death shall be transferred to the appropriate Parole and Community Services Records Specialist for inclusion in the offender master file with instructions to bring closure to the case and prepare the file for storage. The Records Specialist shall forward the master file of each offender who died in Transitional Supervision or Community Release status to the Department facility that released the offender, for storage in accordance with Administrative Directive 4.1, Offender Records.

B. Health Records.

1. Facility Death. Pertinent medical incident reports shall be completed as specified in accordance with Administrative Directive 6.6, Reporting of Incidents, and filed in the health record. Copies shall be provided to the Shift Commander as required.

The appropriate Health Services staff member shall document in the health record the health-related circumstances surrounding the death and the fact that the death has occurred. If the Medical Examiner has taken possession of the body, the appropriate staff member shall clearly document such in the health record. When the Department documentation has been completed, the health record shall be reviewed by the Correctional Hospital Nursing Supervisor or designee, who shall seal, mark as "Confidential", and immediately deliver the record to the Unit Administrator for conservancy and arrange for delivery of the health record to the Director of Health and Addiction Services by the next business day after the death. The Director of Health and Addiction Services or designee shall review the health record, in accordance with Administrative Directive 8.10, Quality Assurance and Improvement.

2. Community Death. The Parole and Community Services Records Specialist shall arrange for delivery of the health record to the Director of Health and Addiction Services by the next business day after the death. The Director of Health and Addiction Services or designee shall review the health record, in accordance with Administrative Directive 8.10, Quality Assurance and Improvement.

- C. Access to Records. Access to offender records shall be in accordance with Administrative Directive 4.4, Access to Inmate Information. The Medical Examiner shall have access to all offender records as required for the performance of the duties of the Medical Examiner, including pertinent medical information provided upon notification of the death. Health information shall be provided to the Funeral Director, as required by law.

- D. Investigation. Instances of offender death, whether determined as expected (i.e., Terminally ill/Hospice death) or untimely occurring within a correctional facility, halfway house or hospital; to include the death of any inmate committed to the Commissioner of Correction and under the care of Correctional

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Managed Health Care (CHMC) shall result in a joint Security Division/CMHC Investigation and/or Medical Panel Review in accordance with Administrative Directive 1.10, Investigations. Such review may extend to the policies and practices of each organization as deemed necessary and appropriate by an approving authority.

11. Exceptions. Any exceptions to the procedures in this Administrative Directive shall require prior written approval from the Commissioner.