	STARBRIDGE **POLICIES & PROCEDURES MANUAL**
SECTION:	**Death of Individual Receiving OPWDD Services**
SITE(S) / PROGRAM(S):	ALL Services Certified or Funded by OPWDD
President/CEO Approval:	Date Approved: 05/27/2026
Board of Directors Approval: (Meeting Minutes)	Date Approved: 05/27/2026
Date(s) Reviewed and/or Revised: 05/22/2024, 05/15/2025, 05/19/2026	

Starbridge is responsible to report the death of all individuals who received services through the Office of People with Developmental Disabilities (OPWDD), regardless of cause. This includes all deaths of individuals who live in residential facilities certified by OPWDD and other deaths that occur/did not occur under the auspices of an agency. Starbridge will notify all appropriate individuals/entities and thoroughly investigate all deaths of individuals supported. This policy addresses additional notifications and investigative steps required when an individual that receives OPWDD services passes away.

If more than one (1) agency provided services to the individual supported; Starbridge, in collaboration with other agency(s), will determine the appropriate responsible agency. This determination will be made dependent on the circumstances of the supported individual's death and the services they received. The responsible agency shall be identified in accordance to order stated:

1. OPWDD certified or operated residential facility, including a family care home, but not a free-standing respite facility;
2. OPWDD certified or operated free standing respite facility, if the death occurred during the individual's stay at the facility, or was caused by a reportable incident or notable occurrence, that occurred during a stay at the facility within thirty (30) days of discovery of the death;
3. OPWDD certified or operated day program (if the individual received services from more than one certified day program, the responsible agency shall be the agency that provided the greater duration of service on a regular basis);
4. MSC or PCSS;
5. HCBS Waiver services;
6. Care at Home Waiver services;
7. Article 16 clinic services;
8. FSS or ISS;
9. Any other service operated by OPWDD.

PROCEDURES TO FOLLOW SUBSEQUENT TO THE DEATH OF AN INDIVIDUAL RECEIVING OPWDD SERVICES

STAFF RESPONSIBLE:	PROCEDURE:
All Staff	1. Following Reporting and Notification procedures, reports the death of the individual receiving services to the Manager / Coordinator and Program Director immediately.
Program Director	2. Upon discovery of a death of a person that receives services, immediately notifies Starbridge's Executive Leadership Team to include the President/CEO and the Chief Program Officer, as well as the Quality Improvement Director. 3. Upon discovery of a death of a person that receives services, determines the appropriate process for reporting the individual's death: o If the individual received **IRA Services** within thirty (30) days preceding death – call Justice Center at 1-855-373-2124 immediately upon discovery but in no case more than 24 hours of discovery. o File a **Serious Notable Occurrence** if the: o Death was **caused** by a reportable incident or notable occurrence that occurred under the auspices of the **Residential Certified IRA**. (Ensure Reportable Incident/Notable Occurrence has also been filed outlining the situation. If appropriate, ensure that appropriate notification to the Justice Center Hotline occurred) OR o Individual supported received **Residential Certified IRA Services** at the time of his or her death, or if the death occurred up to thirty (30) days after the individual supported was discharged from the IRA (unless the person was admitted to a different residential facility in the OPWDD system in the meantime) OR o The death **occurred** while the individual supported was receiving **non-certified services.** OR o File **Part 625 OPWDD 150 Form** if the: o The death of an individual who received OPWDD certified, or funded services, and the death did not occur under the auspices of Starbridge or another agency. 3. Completes all the required steps outlined in the Part 624 Reporting of Reportable Incidents/Notable Occurrences or Part 625 Policies and Procedures. 4. Forwards all information to Quality Improvement Department.
Assigned Investigator	1. Review 147/150 form to ensure that the death of the individual

STAFF RESPONSIBLE:	PROCEDURE:
(Quality Improvement)	has been classified appropriately.

2. Completes Report of Death Form section in IRMA within five (5) business days of the discovery of the death.

3. All suicides, homicides, accidental deaths, or deaths due to suspicious, unusual, or unnatural circumstances must be reported immediately by telephone, and later in writing, to the coroner/ medical examiner:

   Coroner/Medical Examiner
   740 East Henrietta Rd.
   Rochester, NY 14623
   (585) 274-7970

4. Obtain a copy of the death certificate and file in the investigative report. (Follow procedure on the New York State Department of Health website.)

5. If an autopsy will be completed, document in the investigative report where it will be done and if Starbridge obtained consent from the guardian/next of kin to receive a copy of the autopsy AND if the President/CEO and/or Developmental Disabilities State Operations Office (DDSOO) needs to request a copy from the Medical Examiner/coroner.

6. Once the autopsy is received:
   - For individuals that had received IRA services, submit a copy of to the Justice Center within sixty (60) working days of discovery of death. If unable, contact the Justice Center to extend the timeframe for good cause.
   - Enters the receipt of the autopsy in IRMA.

7. Completes the Investigative process as outlined in the Investigative Reports Policy and Procedure.