



# Interior Health

## HEALTH PROTECTION

### Healthy Community Care Facilities Report of Expected Deaths in Hospice Care

By reporting the death of a person in care listed here, I confirm that:

- The cause of each death was expected as part of the normal progression of the disease or medical condition for which the individual was receiving Hospice care; and
- Each death was reported immediately to:
  - the parent, representative or contact person of the person in care, and
  - the medical practitioner or nurse practitioner responsible for the care of the person in care

Deaths meeting both criteria must be reported to the Medical Health Officer, using this form, within 30 days of the death. The funding program (if any) must also be notified. See Section 77(3) of the Residential Care Regulation.

**All other deaths must be reported immediately using the Interior Health Incident Report.**

**Facility Name** \_\_\_\_\_

Person in Care Name	Sex	Date of Birth	Date of Death
Form Completed by (name and position)			Date