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| Managing Code Status, Witnessed & Un-witnessed Death | | | | NO. | |
| PURPOSE:  To provide specific guidelines regarding management of Resident’s code Status in the event of a witnessed or un-witnessed death.  STATEMENT OF POLICY:  It is the policy of this facility to respect the resident’s choice in regard to treatment as set forth per the advanced directives documented by the resident, legal guardian, health-care proxy, or representative (sponsor). This choice regarding treatment options includes, but is not limited to “DO NOT RESUSCITATE” directives.  It is furthermore the policy of this facility to respect this choice whether the respiratory or cardiac arrest is witnessed or un-witnessed. The facility will make every effort to coordinate a plan of care between the resident, the responsible party and the physician to ensure that the treatment choices are implemented as directed.  PROCEDURE:   1. Prior to or upon admission, the Admissions Coordinator/designee will ascertain information regarding the existence of an advanced directive from the family and/or responsible party. 2. Should the resident/responsible party indicate that the resident has issued advanced directives regarding his/her care and treatment, the facility will require a copy of such directives be included in the resident’s medical record. 3. The Director of Nursing/designee will review the resident’s Advanced Directive to determine the choice of the resident in regard to the “DO NOT RESUSCITATE” directive. 4. A “DO NOT RESUSCITATE” directive indicates that, in the case of respiratory or cardiac failure, the resident, legal guardian, healthcare proxy, or representative (sponsor) has directed that no cardiopulmonary resuscitation (CPR) or other life-saving methods are to be used. 5. In the absence of the above directive, the facility will provide cardiopulmonary resuscitation whether or not the respiratory or cardiac arrest is witnessed or un-witnessed. 6. The Director of Nursing will notify the attending physician of a resident’s “DO NOT RESUSCITATE” directive. 7. The attending physician will be responsible for issuing an appropriate order to coincide with the resident’s directive. 8. The physician’s order must be documented in the resident’s medical record and in the resident’s care plan. 9. Changes in or revocations of a “DO NOT RESUSCITATE” directive must be submitted in writing. If a verbal request is submitted, it will be honored and documentation of that change will be placed in the medical record within 3 working days. Two nurses must witness and sign the change in the directive and document this in the nurse’s notes. 10. The care plan team will be informed of changes and /or revocations so that appropriate changes can be made in the resident assessment (MDS) and care plan. 11. Copies of changes to a “DO NOT RESUSCITATE” directive must be filed in the resident’s medical record. | | | | | |
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| Managing Code Status, Witnessed & Un-witnessed Death | | | | NO. | |
| 1. The Director of Nursing/Social Services Director will ensure that information regarding “DO NOT RESUSCITATE” directives are documented in the Medical Record so that the direct care staff may access this information easily in the event of an emergency. 2. The Interdisciplinary Team will review the resident’s Advanced Directive quarterly to ensure completeness and accuracy of information. 3. The facility will place a visual cue on the spine of the chart and list in the medication Administration Record (MAR) of all residents designated as NO CODE STATUS. 4. Social Services Director/designee will be responsible for ensuring that a cue is present and the list in the Medication Administration Record is correct. 5. The facility will provide red dots for DNR and a green dot for full codes. These will be placed at the resident’s door and on the right side of any assistive device by utilizing a zip-tie.   ATTACHMENTS:  Blue Sky Alert  Blue Sky Alert Drill | | | | | |
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