



Date: June, 27, 2016

DQA Numbered Memo 16-008

To: [Emergency Mental Health Service \(DHS 34\)](#)
[Outpatient Mental Health Clinic \(DHS 35\)](#)
[CCS-Persons w/Mental Health and Substance Use Disorders \(DHS 36\)](#)
[Mental Health Day Treatment Services for Children \(DHS 40\)](#)
[Mental Health Inpatient-Adult/Adolescent \(DHS 61.71/61.79\)](#)
[Mental Health Day Treatment \(DHS 61.75\)](#)
[CSP for Persons w/Chronic Mental Illness \(DHS 63\)](#)
[Emergency Outpatient Services \(DHS 75.05\)](#)
[CSAS Medically Managed Inpatient Detox Services \(DHS 75.06\)](#)
[CSAS Medically Managed Residential Detox Services \(DHS 75.07\)](#)
[CSAS Ambulatory Detox Services \(DHS 75.08\)](#)
[CSAS Residential Intoxication Monitoring Services \(DHS 75.09\)](#)
[CSAS Medically Managed Inpatient Treatment Services \(DHS 75.10\)](#)
[CSAS Medically Managed Treatment Services \(DHS 75.11\)](#)
[CSAS Day Treatment Services \(DHS 75.12\)](#)
[CSAS Outpatient Treatment Services \(DHS 75.13\)](#)
[CSAS Transitional Residential Treatment Services \(DHS 75.14\)](#)
[CSAS Narcotic Treatment Services for Opiate Addiction \(DHS 75.15\)](#)
[Community-Based Residential Facilities \(DHS 83\)](#)
[Adult Family Homes \(DHS 88\)](#)
[Nursing Homes \(DHS 132\)](#)
[Facilities Serving People with Developmental Disabilities \(DHS 134\)](#)

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Via: Otis Woods, Administrator

Centralized Reporting of Client/Patient/Resident Death Determination

Purpose

The purpose of this memorandum is to provide information to health care facilities required to report deaths related to physical restraint/seclusion, psychotropic medications, or suicide via form F-62470 Client/Patient/Resident Death Determination. This memo provides information regarding the new centralized location for reporting purposes.

Background

Reporting of certain deaths to the Department of Health Services (DHS) is required by Wisconsin State Statute. A death must be reported to DHS within 24 hours after the death of a client/patient/resident, or learning of the death if there is cause to believe the death was related to the use of physical restraint/seclusion, psychotropic medications, or is a suicide.

On November 10, 2000, DSL-BQA memo 00-074 Reporting of Client/Patient Death Attributable to Suicide, Restraint, or Psychotropic Medication was issued to Nursing Homes, Facilities for Individuals with Intellectual Disabilities, Community-Based Residential Facilities and Certified Mental Health and AODA Programs. This memo outlined reporting requirements under Wis. Stat. §§ 48.60(5) (a), 50.035(5), and 51.64. This memo instructed entities to fax form F-26470 Client/Patient/Resident Death Determination reports to the appropriate DQA supervisor. This memo replaces Memo DSL 2001-32 issued December 26, 2001, and supplement DSL Info Memo 2000-14 dated December 7, 2000.

Reporting Requirements

Please see the following reporting requirements based on provider type:

- Community-Based Residential Facilities, Wis. Stat. § 50.035(5) (b). Special provisions relating to regulation of community-based residential facilities:
[http://docs.legis.wisconsin.gov/document/statutes/50.035\(5\)\(b\)](http://docs.legis.wisconsin.gov/document/statutes/50.035(5)(b))
- Nursing Homes, Wis. Stat. § 50.04(2t) (b). Special provisions applying for licensing and regulation of nursing homes: [http://docs.legis.wisconsin.gov/document/statutes/50.04\(2t\)](http://docs.legis.wisconsin.gov/document/statutes/50.04(2t))
- Treatment Facilities, Wis. Stat. § 51.64(2) (a). Reports of death required; penalty; assessment:
[http://docs.legis.wisconsin.gov/document/statutes/51.64\(2\)\(a\)](http://docs.legis.wisconsin.gov/document/statutes/51.64(2)(a))
- Adult Family Homes, Wis. Admin. § DHS 88.03(5) (e) 1. Changes to be reported to licensing agency:
http://docs.legis.wisconsin.gov/code/admin_code/dhs/030/88/03/5/e/1
- Hospital Restraint/Seclusion Deaths 42 CFR & 482.13(g) Deaths associated with restraint and/or seclusion are to be reported directly to the Centers for Medicare & Medicaid Services (CMS) Regional Office. See S&C: 14-27-Hospital-CAH/DPU: <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-14-27.pdf>

Centralized Reporting

The Office of Caregiver Quality (OCQ) within the Division of Quality Assurance (DQA) is the centralized reporting location for a variety of reports from entities regulated by DQA pertaining to certain reporting requirements specified in Wisconsin Administrative Code. The Office of Caregiver Quality refers reports that do not fall within the purview of OCQ to the appropriate Bureau, Office, Section, or Regional Office within DQA or to other governmental agencies for their review.

Effective July 1, 2016, the Office of Caregiver Quality will become the centralized reporting location for form F-62470 Client/Patient/Resident Determination for all entities required to report deaths related to physical restraint/seclusion, psychotropic medications, or suicide. OCQ will forward Client/Patient/Resident Death Determination forms to the appropriate Bureau, Office, Section, or Regional Office within DQA. Submit all F-62470 forms <https://www.dhs.wisconsin.gov/forms1/f6/f62470.pdf> by fax or secure/encrypted email to:

Division of Quality Assurance
Office of Caregiver Quality
Fax: 608-264-6340
Email: DHSCaregiverIntake@wisconsin.gov

Resources

Reporting of Client/Patient Death Attributable to Suicide, Restraint or Psychotropic Medication
<https://www.dhs.wisconsin.gov/regulations/report-death/proc-reportingdeath.htm>

Questions about Reporting Requirements

For questions regarding reporting requirements, please contact the Office of Caregiver Quality at 608-261-8319 or at DHSCaregiverIntake@dhs.wisconsin.gov.