ALEXANDRIA POLICE DEPARTMENT

Directive 11.6

DEATH CASES

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CONTENTS

11.6.01 POLICY AND PURPOSE
11.6.02 RESPONSIBILITIES
11.6.03 PROCEDURES
11.6.04 ASSISTANCE TO SURVIVORS
11.6.05 DEATHS AT THE LYNN HOUSE
11.6.06 DURABLE DO NOT RESUSCITATE (DDNR)
11.6.07 DEATHS FROM INDUSTRIAL ACCIDENTS

11.6.01 POLICY AND PURPOSE

It is the policy of this Department to hold the value of human life above all else. The death of any person will be thoroughly investigated to determine the cause of death. If the cause is determined to be a death at the hands of another, this Department will expend all legal means to identify and gather evidence for the prosecution of the perpetrator.

The purpose of this directive is to establish procedures for the investigation of death cases.

11.6.02 RESPONSIBILITIES

A. The officer assigned to a death case is responsible for conducting a thorough preliminary investigation and documenting the results of that investigation. (See also Police Directive 10.10, Criminal Investigations) It is not unusual for a death case to be reclassified as a homicide when suspicious wounds or circumstances are discovered during the follow-up investigation or during an autopsy. This makes the officer’s preliminary report invaluable during the follow-up investigation.
C. In death cases in which the deceased was under the care of a physician for a previously diagnosed medical condition, the investigating officer will contact the treating physician and determine if he/she will sign the death certificate. If the treating physician agrees to sign the death certificate, a CSI investigator does not need to respond to process the scene. *When a treating physician cannot be contacted or will not sign the death certificate the CIS commander will be notified.*

D. A patrol supervisor must respond to the scene of all death cases (this is not discretionary), except cases at the Lynn House, *and cases involving a DDNR* for which the need to respond to the scene is left to the discretion of the supervisor. The supervisor will coordinate the preliminary investigation and assist in coordinating any follow-up investigation when requested, ensuring that investigating officers are provided all necessary resources, *The responding patrol supervisor has scene responsibility. There are situations where the patrol supervisor initially controls the scene and then yields control to the CIS supervisor while the death is being investigated and then resumes control after CIS has cleared the scene. The scene supervisor is the only person authorized to make decisions regarding the following issues:*
F. There have been cases where the death was changed from a non-medical examiner case to a medical examiner case, after additional information was brought to light that changed the status of the death; or, the attending physician changed his/her mind about signing the death certificate.

G. In all death cases occurring during normal Criminal Investigations Section (CIS) working hours, the patrol supervisor will ensure notification of an on-duty CIS supervisor, and will also ensure notification of the on-duty watch commander, who will determine if a command page is necessary. In all confirmed homicides and all other cases involving deaths under suspicious circumstances occurring outside normal CIS working hours, the watch commander will use existing call-back procedures to request that the appropriate CIS personnel respond to assist in the investigation. In all cases involving homicides or suspicious deaths, regardless of the hour, the CIS commander will ensure notification of the Commonwealth’s Attorney.

H. CIS detectives will respond to death scenes when available or when assigned, and will assist in the preliminary investigation. They are encouraged, if circumstances permit, to take the opportunity to help train patrol officers in death investigations. The assigned detective will complete the follow-up investigation once the preliminary investigation is complete.

11.6.03 PROCEDURES

A. An offense/incident report (APD-7) is required for each case in which a death has occurred. The investigating officer should document in the original report (APD-7) whether the case is a Medical Examiner’s case, or the death certificate will be signed by a treating physician who will state the death was the result of a diagnosed life threatening illness or disease. If there is any doubt about the cause or circumstances of a death, it will be handled as a Medical Examiner’s case.
C. When a preliminary investigation occurs between 10:00 p.m. and 8:00 a.m. and the deceased is alleged to be under a physician’s care, it is doubtful if the physician will have ready access to patient information, and therefore should not be contacted. Such a case will be handled as a medical examiner’s case until Criminal Investigations can make contact with the treating physician during the follow-up investigation.

D. Medical examiner’s cases defined in the Code of Virginia § 32.1-283.
   The death of any person from:
   1. Trauma,
   2. Injury,
   3. Violence,
   4. Poisoning,
   5. Accident,
   6. Suicide
   7. Homicide, or
   8. Suddenly when in apparent good health, or
   9. When unattended by a physician, or
   10. While in jail, prison, other correctional institution, or
   11. While in police custody, or
   12. While a patient or resident of a state mental health or mental retardation facility, or
   13. Suddenly as an apparent result of fire, or
   14. In any suspicious, unusual or unnatural manner, (including finding bones/skeletal remains) or
   15. The sudden death of any infant less than eighteen months of age, whose death is suspected to be attributable to Sudden Infant Death Syndrome (SIDS),

E. All suicides or suspicious deaths are to be treated as potential homicides until proven otherwise.

F. The preliminary investigating officer will, if possible, determine and document in the APD-7 the following information:
J. In all death cases, employees will maintain professional conduct and deal with the next of kin, relatives and friends of the deceased in a considerate manner.
11.6.04 ASSISTANCE TO SURVIVORS

Providing basic support and crisis assistance to survivors is the responsibility of both responding officers, detectives and investigators. The nature of such assistance must be dictated by the circumstances, but officers should use the following as a guide in these instances.

A. Officers should not leave the scene of a death where survivors are present until reasonably assured that the survivors have adequate personal control and/or family or close friends readily available to provide support. In gauging the need for assistance, officers will consult with the on scene supervisor and consider the following:
   1. The emotional reactions and physical condition of the survivors;
   2. Availability of other adults in the home or immediate area;
   3. Responsibility of the survivors for infants or small children;
   4. Home environment, if apparent, (e.g. evidence of excessive alcohol use or drug use, lack of means of financial support, shortage of food, problem with shelter, etc.); and
   5. Availability of a support system (e.g. including friends, family, close neighbors, access to clergy, means of transportation, etc.)

B. Officers should remain alert to the need of survivors for emergency medical assistance (e.g., in cases of physical or emotional collapse or related problems).

C. Officers should be aware of confusion on the part of survivors. They should speak slowly and deliberately, and write down any pertinent information that survivors may need. This may include such matters as the following:
   1. Contacting a funeral home for removal and disposition of the body;
   2. Locating personal effects;
   3. Meeting identification requirements/procedures; and
   4. Providing notifying officers' names, agency, and telephone numbers.

D. Officers should assess the physical and emotional well-being of survivors and confirm their assessment with the on scene supervisor before departing. Officers should be reasonably assured that survivors can take care of themselves and those for whom they may be responsible. In addition to concerns noted in item A and C above, officers should be able to answer "yes" to the following types of questions:
   1. Are the survivors thinking clearly? That is, do individuals:
      a. Seem aware of your presence?
      b. Have some grasp of time and space?
      c. Demonstrate a progressive ability to express himself/herself? and/or
      d. Begin to demonstrate some grasp of the reality of the death?
2. Do the survivors have reasonable control over emotions? Officers should assess whether or not the survivors display shock (no apparent emotion), furious hostility, or the desire to commit suicide.

3. Can survivors cope physically? Survivors who have fainted, displayed debilitating weakness, or emotional collapse could be an indication of survivors not coping. Do survivors have an adequate support system that can be relied upon?

4. Officers should not leave a lone survivor unattended until all reasonable efforts have been made to garner first-hand support from the survivor's family, friends, co-workers, neighbors, family, clergy, crisis counselors, or other community social service agency.

5. When assigned to notify next of kin, officers will:
   a. Make the notification in person if practical.
   b. Notify the next of kin promptly and in a considerate manner.
   c. If unable to contact the appropriate person, note their actions in the report or supplement.

### 11.6.05 DEATHS AT THE LYNN HOUSE

When the death of a patient occurs at the Lynn House (a Christian Science facility that cares for a number of patients who are terminally ill), a staff member will contact the police and an officer will be dispatched to handle the report. The staff member will supply the officer with an information sheet on the resident, with all the basic information needed to complete an APD-7.

A. This type of death, with no doctor in attendance, is a medical examiner's case. However, the above procedure, which has been accepted by the medical examiner, eliminates some of the information normally obtained in a medical examiner's case.

C. It is not necessary to have personnel from the Crime Scene Investigation Section (CSI) or Criminal Investigations Section (CIS) respond to the scene. However, the investigating officer must ensure that a patrol supervisor has been notified of the death as soon as possible after arriving on the scene.

### 11.6.06 DURABLE DO NOT RESUSCITATE (DDNR)

A. Virginia's Do Not Resuscitate (DNR) Order allows emergency medical services providers and qualified healthcare providers to honor a patient's request for
humane comfort measures, while avoiding resuscitation in the event of cardiac or respiratory arrest.

B. “Durable Do Not Resuscitate Order” means a written physician's order issued pursuant to §54.1-2987.1 to withhold cardiopulmonary resuscitation from a particular patient in the event of cardiac or respiratory arrest. Cardiopulmonary resuscitation includes cardiac compression, endotracheal intubation and other advanced airway management, artificial ventilation, defibrillation and related procedures.

C. A Durable Do Not Resuscitate (DNR) Order may be issued by a physician for his patient with whom he has a bona fide physician/patient relationship as defined in the guidelines of the Board of Medicine, and only with the consent of the patient, or, if the patient is a minor or is otherwise incapable of making an informed decision regarding consent for such an order, upon the request of and with the consent of the person authorized to consent on the patient’s behalf. (§54.1-2987.1, Code of Virginia)

D. Authorized Durable DNR Orders that can be honored by EMS providers include, the Virginia Department of Health Durable DNR Order Form, an “Other” DNR Order (used when the person is within a qualified health care facility or during transport between health care facilities when attended by qualified health care personnel (i.e. by ambulance), or receiving hospice or health services at home pursuant to §54.1-2987.1, and DDNR approved bracelets or necklaces.

E. When a call for the death of a person is dispatched to a home and the officer is advised there is a DNR order, only one officer will respond to the scene. Lights and sirens will not be utilized. The response of the patrol supervisor will be left to the discretion of that supervisor. Unless requested by the on-scene officer or a supervisor, additional units, to include Police Training Officers and recruits, should refrain from responding to keep the police presence from being overly obtrusive to grieving family or friends in a difficult and stressful situation.

G. If the treating physician agrees to sign the death certificate, a CSI investigator does not need to respond to process the scene. However, the investigating officer must ensure that a patrol supervisor has been notified of the death as soon as possible after arriving on the scene.
H. Legislation does not require that a person be in a terminal condition to obtain a DDNR Order. If the treating physician does not agree to sign the death certificate, the case will be handled as a Medical Examiner’s case and the officer will follow the procedures outlined in section 11.6.03 as warranted by the situation.

11.6.07 DEATHS FROM INDUSTRIAL ACCIDENTS

To deal specifically with workplace deaths, the Department of Labor and Industry has established fatality teams to investigate, along with local authorities, all occupational safety and health fatalities that occur in this area. Personnel from this department will promptly notify them of any workplace fatality that occurs in our jurisdiction. This does not include an apparently natural death of an office worker who was not engaged in physical labor and/or use of equipment that may have led to the death, or a death in the workplace resulting from criminal activity.

A. Any workplace death from an injury, inhalation of any toxic substance or apparently natural death while engaged in physical labor will be treated as an industrial fatality.

2. The CIS supervisor will also ensure notification of the Labor and Industry Department at (703) 392-0900 during normal work hours. After normal hours and on weekends and holidays, notification should be made to Virginia State Police at (804) 674-2000. The person making this notification should be prepared to provide the date, time, and exact location of the industrial accident, as well as the name and phone number of the person reporting the incident. The State Police duty sergeant will immediately notify a Fatality Investigation Team to respond to the scene.
By Authority Of:

Earl L. Cook
Chief of Police