MARYLAND DIVISION OF CORRECTION INMATE DEATH CHECKLIST

Inmate Name:	DOC #	
Date:	_ Time of Death:	IIU Case#:

SHIFT COMMANDER		ASK PLETED
	Time	Initials
1. Establish the incident location as a crime scene, assign a supervisor to secure the scene, establish a crime scene log of persons entering/exiting.		
2. Call DPSCS IIU Monday – Friday, 410-724-5742, between 8:00 a.m. and 10:00 p.m. After 10:00 p.m. and on holidays, call 410-333-8732 or		
443-263-3807 and ask for the CHDU duty lieutenant, who will notify the DOC duty officer and IIU duty officer.		
3. Call the local MSP Barracks.		
4. Notify the DOC public information officer and the HQ Serious Incident Reporting Line at 410-585-3456. On holidays and after hours, call CHDU at 410-333-8732 or 443-263-3807, if CHDU was not called in step 1 above.		
5. Ensure that the office of the chief medical examiner has been notified by either the MSP or IIU.		
6. Notify the warden.		
7. Notify the assistant warden, the chief of security and the facility chaplain.		
8. Notify the DPSCS Director of Inmate Health Care Services.		
9. Notify the chief psychologist.		
10. Notify the DPSCS health care administrator (business hours only).		
11. Notify the regional health care administrator.		
12. Ensure notification of facility administrative staff.		
13. Fax a preliminary serious incident report to HQ the same day or by 8:30 a.m. the next day (410-358-4178). On weekends and holidays, fax on		
the first day of normal business by 8:30 a.m.		
14. If the inmate was hospitalized, ensure that the attending officer at the time of death identified the inmate, using the inmate's "E" card DOC ID badge, submitted a written report in regard to the attendant death, and obtained a body receipt from the attending physician.		
 15. Ensure the deceased inmate's property is inventoried and stored in the institutional property room. A copy of the inventory sheet shall be forwarded to the warden's office. 		
16. Ensure facility chaplain notifies the inmate's designated emergency contact person, if he/she is available on site. If not, the shift commander is to conduct the notification. Attempt to determine funeral director who will be handling the remains (address, telephone number, etc.).		
17. Prepare the serious incident report.		
18. Have the family contact the funeral director and inform HQ of body pick-up. If they cannot be reached or do not make arrangements with a funeral home, call the State Anatomy Board at 410-547-1222 to make the necessary arrangements.		
19. Advise medical staff to forward a copy of the medical file to the warden's office.		
 20. Ensure OBSCIS, Screen 02 Maintain Alerts, is reviewed and if inmate had a victim alert (Code 41), submit this information, in writing, to the warden. 		
21. Submit to the chief of security, along with the serious incident report, a report summarizing all information pertaining to the death.		

Appendix 1 to DCD 270-1

MARYLAND DIVISION OF CORRECTION INMATE DEATH CHECKLIST

WARDEN/DESIGNEE		TASK COMPLETED		
		TIME	INITIALS	
1. Contact the finance office to obtain a record of the inmate's account.				
2. Prepare written notification to inmate's designated emergency contact person (emergency contact)				
for release of property and account. Advise him/her to contact the local office of the register of				
wills to obtain a copy of the death certificate.				
3. Forward data on the deceased to CJIS.				
4. Request a copy of the death certificate from the Division of Vital Records. Place the original in				
the inmate's base file and a photocopy with the serious incident report.				
5. If the family notifies the institution of indigence, refer them to the social work department.				
6. Hold property for 30 days to allow family members to pick up the property. If property is unclaimed				
after 30 days, dispose of property in accordance with DCD 220-004.				
7. Forward base file to the case management unit after the warden's review is complete.				
8. Prepare written notification to the commitment office supervisor/manager on the next business day				

COMMENTS: _____

SIGNATURE AND TITLE

DATE

(Rev. 05/08)