Verification of deaths in the community

Agreed view of Senior Coroners in London

The Senior Coroners in London have become aware that the following information has been circulated by LMCs to GPs in London:

Verification of Death.

There is a lot of confusion about verifying death. It is important to be clear on what the law requires as opposed to what has been done due to custom and practice.

It is obviously up to you what you choose to do, but the requirements are as follows:

Anyone can verify death. Absolutely anyone. There is no need for any special training despite what some may say.

The organisation, Red Whale has also issued information to GPs confirming the following:

Verification of death can be done by ANY "suitably qualified" person. It doesn't have to be a doctor. This includes:

- Nursing home staff
- Nurses or paramedics
- And in the current situation, a funeral director or family member

The above guidance has resulted in many calls being made to Coroner's offices and to the London Ambulance Service ("LAS"), from GPs and others, seeking clarification around verification of death. Funeral directors who have been requested to verify deaths have raised concerns with Coroner's offices about this. The LAS have reported receiving a number of calls from confused funeral directors, requesting guidance on how to pronounce life extinct. This is placing an inappropriate burden upon the ambulance service at this very critical time.

The Senior Coroners in London do not consider that above circulated view reflects required professional practice, for death verification. We set out within this document, our view of the required professional practice.

General Background

The systems in place for managing deaths in the community must seek to protect the public from harm and to expose the wrongdoing of others. Death management processes commence with a robust verification of death. This requirement has not diminished as a result of the COVID-19 pandemic.

The Law and Guidance

It is correct that there is no legal requirement for a doctor to verify death. There is no legal requirement for any specified individual to verify death.

There is however a multitude of professional and governmental guidance around death verification (including from Hospice UK, Royal College of Nursing, ambulance and police services).

The Royal College of Nursing has for example updated its guidance on the verification of death, to take account of the COVID-19 pandemic:

https://www.rcn.org.uk/clinical-topics/end-of-life-care/covid-19-guidance-on-dnacpr-and-verification-of-death

This guidance provides the following:

Nurses with appropriate competency can verify death; this will formally be in line with national guidance. We expect nurses verifying death to be trained and supported in the procedure and in the aftercare required by families and staff.

COVID-19 Emergency Legislation and Guidance

It is recognised that during the COVID-19 pandemic, extra action needs to be taken to enable bodies to be moved through the death management process as speedily as possible. This must be achieved whilst retaining dignity for the deceased and ensuring that checks are in place to prevent and to detect anything untoward.

Emergency Legislation has been passed in the form of the Coronavirus Act 2020. This Act relaxes some of the usual death management processes. For example, the MCCD process has been reviewed to remove the requirement of attendance for the certifying doctor. There are also relaxations in the Cremation form process.

Important safeguards, however, remain in place. These include the need for coronial review where the deceased person has not been seen by a doctor within 28 days or after death.

There is nothing within the legislation or the formal guidance, that we have seen, that relaxes the requirements of professional death verification.

Indeed, the HM Government Guidance entitled Managing the Deceased During a Pandemic (17 March 2020), provides:

2.28 The doctor completing the MCCD will specify the cause of death and not the fact. The concept of "life extinct, ie the fact, can be declared by a doctor, a police forensic medical examiner, or suitably qualified clinicians and paramedics. 2.32 Pandemic Influenza: Guidance on the management of death certification and cremation certification states the completion of a MCCD must be distinct from verification that a person has died. Such verification allows the body to be moved from the place of death to the mortuary, body storage facility or the premises of a funeral director, once suspicious circumstances have been excluded.

2.33 Efficient verification of "life extinct" is important for ensuring an effective and seamless process towards disposal. Deceased persons should not be taken to hospital for verification of death. Local consideration should be given to making sure that there is clear agreement on which individuals, and in which circumstances, can verify death.

In addition to the above, we have had sight of the Death Verification (confirmation of death) of expected deaths during the COVID-19 pandemic guidance issued by the NHS (12.4.20). This guidance would appear to permit verification of death by family members or funeral directors, but with guidance being offered by GPs remotely (by telephone or video).

Community Deaths and P-MART

In London, P-MART teams have been set up to attend likely COVID-19 deaths in the community. It has been agreed, as part of the process, that a paramedic will attend to verify life extinct before the P-MART team attends. In nursing home deaths, verification of life extinct will be carried out by trained nurses, or if they are not available, by a paramedic.

Expected deaths from natural causes, other than from COVID-19 will not be attended by the P-MART team. These deaths will still need to be verified, to enable the body to be moved from the place of death to the funeral director and ultimately to the place of burial or cremation.

It is acknowledged that, in light of the emergency legislation and GRO Guidance (No 5 - 27 March 2020), that many doctors are no longer attending community deaths to verify life extinct. This should not prevent an alternative independent professional check of the deceased. Nurses who are trained to recognise death are also able to undertake the role. It may be that the number of nurses can be increased by use of retired and student nurses to attend. Indeed, the recent RCN Guidance states that doctors do not have to see the deceased in order to certify death and that it will be more likely that nurses will be called to certify death. It is our understanding that the RCN are in the process rapidly developing condensed training for nurses to be able to verify death.

Conclusion

The Senior Coroners in London are in agreement that the verification of death should be undertaken by a healthcare professional who has undertaken the appropriate training. In the majority of areas this is restricted to doctors, nurses and paramedics. There are specific, prescribed circumstances where police officers may verify life extinct. Police officers receive specific training in relation to this. We do not consider that it is an acceptable position for untrained funeral directors or family members to verify life extinct. Indeed, this would be contrary to HM Government Guidance.

Diagnosis of death is a clinical one undertaken by a competent adult with the appropriate skills and training. It is, in our view, inappropriate for a person who is not suitably trained to recognise death. This would result in the body being moved from the place of death without any independent check of the body.

We also have reservations in relation to the NHS Guidance issued on the 12 April 2020. The Guidance would allow a GP to guide a family member by telephone using only the checks of body movement or breathing (chest moving up and down). The LAS have advised us that there are some clinical conditions whereby patients are deeply unconscious, with very shallow irregular respirations. The checks set out in the Guidance may fail to correctly diagnose these patients. It is also noteworthy that the Government has not authorised post-mortem checks (as opposed to in-life consultations) by doctors to take place by video link. This is likely to be due to the limitations of such checks.

We recognize that verification of death is principally a duty of trained professionals and not of coroners. We share our understanding of the requirements, to inform people that where they are not complied with, London coroners may seek further statements or actions, which would be distracting for clinical staff, or could even lead to an investigation, all of which would be distressing to the family.

We are aware that different Coroner areas are taking different approaches to death verification and hope that this letter clarifies the position within the London Area as a whole.

Reviewed and agreed by:

HM Senior Coroner Alison Hewitt HM Senior Coroner Andrew Harris HM Senior Coroner Andrew Walker HM Senior Coroner Chinyere Inyama HM Senior Coroner Fiona Wilcox HM Senior Coroner Mary Hassell HM Senior Coroner Nadia Persaud HM Senior Coroner Sarah Ormond-Walsh

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