

Policy and Procedures for the Urgent Certification and Release of the Deceased outside of ‘office hours’

“Out of Hours Urgent Certification Policy”

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CONTENTS

Section	Page	
1	Introduction and Overview	4
2	Policy Scope	4
3	Definitions and Abbreviations	4-5
4	Roles and Responsibilities	5-7
5	Standards and Process.	7-9
6	Education and Training	9
7	Process for Monitoring Compliance	10
8	Equality Impact Assessment	10
9	Supporting References, Evidence Base and Related Policies	10-11
10	Process for Version Control, Document Archiving and Review	11

REVIEW DATES AND DETAILS OF CHANGES MADE DURING THE REVIEW

December 2023 – This Policy has been rewritten to reflect the various changes that have been made to the process for organising urgent certification of the deceased out of hours and also release of the deceased from the Mortuary since the Policy was last reviewed.

These changes have already been implemented into the working practices of both the Corporate and Clinical teams involved in the care of a deceased patient before and after death

This includes:

- Change of Senior Responsible Officer for this Policy and Executive Lead
- Clarification on the scope of the policy being primarily focused on out of hours requests for urgent Certification and release of the deceased to facilitate burial same/next day or the transfer of deceased children to Rainbows Hospice
- The need to refer to the recently approved “Taking a deceased child home (where registerable birth)” Policy
- Change of Bereavement Services Office ‘office hours’ which have been extended to between 08:30 to 17:00
- The Head of Learning from Deaths (HoLFD) taking on responsibilities previously assigned to the Duty Managers
- HoLFD being a point of contact for Bereaved Family Members and Funeral Directors
- Possibility of requests for urgent certification by UHL doctors being requested following fast track discharge
- Use of the ‘Last Days of Life’ field in NerveCentre for identifying patients where urgent certification likely to be requested
- Changes made to the process of sending the completed MCCD to the Registrar and their out of hours working arrangements
- Out of Hours releases will now be routinely facilitated by the On Call Mortuary team (previously facilitated by the Duty manager)

January-April 2019 – Policy has been reviewed and revised to include details of the process for Certifying Doctors to speak to the Medical Examiner to agree the cause of death or need for referral to the Coroner.

The review in July 2016 was a routine review, and included the following changes:

- Reference to the newly set up Medical Examiner role
- Reference to the newly established UHL Bereavement Support Service
- Inclusion of Coroner requirements regarding referral for still-born babies

KEY WORDS

Death, deceased, body release, Coroner, Muslim, Jewish, urgent burial, cremation, religious requirement, urgent release, out of hours Duty Manager, MCCD, death certificate, mortuary; bereaved; funeral directors

1 INTRODUCTION AND OVERVIEW

- 1.1 This document sets out the University Hospitals of Leicester (UHL) NHS Trust's Policy and Procedures for 'outside working hours':
- urgent discussion of cause of death with the Medical Examiner;
 - completion of death certificate
 - release of the body of a deceased patient
- 1.2 Death certification and release of the deceased out of hours is required urgently by some relatives of deceased patients (adults, children and liveborn babies). This may be for religious, cultural or other reasons.
- 1.3 The most common reason for the request for out of hours release of a deceased patient is to meet the religious need for a burial same or next day after death or where a deceased child is being released to Rainbows Hospice for Bereavement Care.
- 1.4 Any other requests for out of hours urgent certification and release of the deceased must also be considered on their individual merits.

2 POLICY SCOPE

- 2.1 The policy applies to all deceased adult, children and live-born babies where urgent out of hours discussion of the cause of death; completion of the Medical Certificate of Cause of Death (MCCD) and urgent release of the deceased from a UHL mortuary for burial is requested in order to facilitate same/next day burial or transfer to Rainbows Hospice. Completion of the Cremation Form of adults, children and live-born babies cannot be managed out of hours.
- 2.2 The policy covers all three hospital sites within UHL.
- 2.3 During the normal Bereavement Services working hours (8:30 am to 17:00 Monday to Friday excluding public holidays) all urgent body release requests are managed by Bereavement Services in consultation with the Mortuary staff
- 2.4 This policy does not apply to stillbirths and fetal remains. For these see: Certification of Stillbirth and Neonatal Deaths on Labour Ward (C33/2010) and Policy for the Sensitive Disposal of Fetal Remains (Up to 16 weeks gestation) (B3/2007).
- 2.5 In respect of Child and Neonatal Deaths, this policy should be read in conjunction with the Taking a deceased child home (where registerable birth) Policy (B17/2022)

3 DEFINITIONS AND ABBREVIATIONS

Bereaved Family Member – Next of Kin, Family Member, or Friend who has been identified as the point of contact in respect of arranging the funeral

Medical Examiner Officer (MEO) Officer who supports the Medical Examiner by collating relevant clinical information prior to discuss about cause of death with the certifying doctor both in hours and on call

On Call MEO Point of contact for Duty Managers and Clinical Teams in respect of arranging urgent out of hours discussion with the Medical Examiner

Medical Certificate of Cause of Death (MCCD) - the certificate that must be completed by a doctor before a deceased patient can be removed from UHL for burial.

Cremation Forms – if the deceased is being cremated, a Cremation form must be completed before a deceased patient can be removed from UHL for cremation.

Fetal remains - the deceased products of conception before 24 weeks gestation where no signs of life after birth.

Stillbirth - a baby who has died at or after 24 weeks gestation, but who shows no signs of life after birth.

Live-born baby (or Neonatal death) - a baby of any gestation that shows signs of life (eg takes a breath) after birth.

Office Hours – 08:30 to 17:00 Monday to Fridays excluding Public Holidays

Out of Hours – for the purpose of this policy Out of Hours includes 17:00 to 21:00 Monday to Fridays (excluding Public Holidays) and 08:30 to 21:00 Weekends and Public Holidays (excluding Christmas Day)

Registrar – the Registrar of Births, Marriages and Deaths

On Call APT (Anatomical Pathology Technician – Mortuary point of contact for on call release of the deceased – contacted via the UHL Switchboard

4 ROLES

4.1 Responsibilities within the Organisation

- a) **The Board Lead** for this policy is the Medical Director
- b) **The Head of Learning from Deaths (HoLfd)** is the Senior Responsible Officer for this policy and is responsible for
 - overseeing the Out of Hours Urgent Certification and Release of the Deceased process
 - monitoring its effectiveness in collaboration with relevant stakeholders

- c) **On Call Medical Examiner Officer (On Call MEO) (currently covered by the Head of Learning from Deaths (HoLfd) to be delegated to Clinical / Lead Medical Examiner Officers (Clinical/Lead MEOs) on a rota basis once these staff are in post). Responsibilities include:**

To act as the primary co-ordinator of the process of urgent requests for discussion with the Medical Examiner and completion of the MCCD for emailing over to the Registrar of Births, Marriages and Deaths and for liaising with the On Call APT (Mortuary) for facilitating release of the deceased

To prepare relevant clinical information to support the Medical Examiner with their discussion with the certifying doctor

To support the certifying doctor with contacting the Medical Examiner, accessing Medical Cause of Death Certificate (MCCD) book and with the scanning of the completed MCCD

To being a point of contact for Bereaved Family Members and Funeral Directors where any difficulties with arranging out of hours urgent certification or release of the deceased

To provide additional advice and support to the ward staff or the Duty Manager out of hours (particularly where competing priorities for the Duty Manager).

To co ordinate the sending of the MCCD (via email) to the out of hours Registrar at the Town Hall and liaising with the Registrar in respect of to enable permission for burial

To contact the on call Anatomical Pathology Technician (APT) via UHL switchboard to facilitate release of the deceased from the mortuary outside working hours

To record details of Urgent Certification on the Bereavement Services database and sending confirmatory emails with details of the deceased patient to be released out of hours to the Duty Manager and Mortuary Mailbox

d) Consultant Medical Staff

To raise awareness amongst junior medical staff of their responsibilities with the accurate and timely completion of the Medical Certificate of Cause of Death (MCCD).

To liaise with the Bereavement Services and Medical Examiner teams if request for out of hours urgent certification likely to be requested in order to identify medical staff available for cause of death discussion and MCCD completion

e) All Doctors

Responsible for the effective handover to clinical colleagues of any patients nearing the end of life, with particular reference to anticipated urgent release including patients where UHL may need to support cause of death discussion and MCCD completion after 'fast track' discharge.

f) Registered Nurses/Midwives

Responsible for confirming patients' religious and cultural needs as part of end of life care and anticipating where requests for urgent cause of death discussion and certification and release of the deceased likely to be requested to then highlight to the Medical Team and Bereavement Services

Responsible for informing the On Call MEO or Duty Manager (or Women's Manager On-call for neonatal deaths) that the bereaved have requested the urgent death certification and release of the deceased patient if this has not already been organised

Responsible for highlighting where out of hours transfer to Rainbows may be required for a child death and liaising with the Children's Palliative Care Nurse and Bereavement Support Nurses/Duty Manager accordingly

g) Medical Examiners

On an agreed rota basis to act as the On Call Medical Examiner which involves being available by telephone between the hours of 17:00 to 21:00 Monday to Friday and between 08:30 and 21:00 at weekends and Public Holidays (excluding Christmas Day)

To provide advice to the certifying doctor to ensure accurate completion of the Medical Certificate of Cause of Death (MCCD).

To be a point of reference for the Registrar or Coroner for any queries relating to MCCDs issued out of hours

To provide advice and support to the Clinical Teams and Duty Managers where unclear if a death needs referral to the Coroner and family requesting urgent certification

h) **Bereavement Support Nurses**

Liaising with Children's Hospital on call clinical team, Medical Examiner, Duty Manager, On Call Mortuary team and Rainbows, to facilitate out of hours urgent certification and release of deceased children to Rainbows Hospice if required

i) **Bereavement Services**

Responsible for checking the 'Last Days of Life' list on NerveCentre and being a point of contact for Clinical Teams where patients recognised as being 'at end of life' and requests for urgent certification anticipated and for liaising with the Medical Examiner team as applicable.

j) **On Call Mortuary Staff**

To liaise with the On Call MEO or Duty Manager to facilitate release of the deceased
To follow Mortuary processes for checking and completing documentation associated with release of the deceased.

k) **Duty Managers**

To be a point of contact where clinical teams seek advice about contacting the on call Medical Examiner / ME Officer and to signpost accordingly

If requested and where capacity allows, to support the On Call ME Medical Examiner, On Call ME and Mortuary with the out of hours urgent death certification and release of the deceased process if the On Call MEO or On Call Mortuary Staff not readily available

l) **Porters** - Where supporting the Duty Manager with out of hours release of the deceased from the Mortuary responsible for

providing access to the mortuary and to secure the mortuary after release.

the use of storage and lifting equipment to remove the deceased onto a tray including the disinfection and return of the tray after release.

5. POLICY STANDARDS AND PROCESSES

There are two stages to urgent body release that are covered in this section.

5.1 Preparation for an urgent certification for expected deaths PRIOR TO THE DEATH OF A PATIENT

- a) When the staff caring for the patient become aware, or the family of a patient inform ward staff, that urgent certification and release after the death of the patient is likely to be requested, the Bereavement Services Office and Medical Examiner Office should be informed and the clinical team consider how to support with availability of a certifying doctor particularly if the patient dies out of hours
- b) Where appropriate an 'pre mortem' discussion can take place between the patient's Consultant and the Medical examiner to confirm whether there will be a need to refer to the Coroner or it should be possible to issue a death certificate after the patient dies and this information must then be documented in the patient's case notes

5.2 Out of Hours Process for Urgent Death Certification FOLLOWING THE DEATH OF A PATIENT

- a) Nurse caring for the patient / Nurse in Charge to contact the On Call MEO or Duty Manager (if On Call MEO not available) to advise of death and that urgent certification has been requested

b) On Call MEO

- i. confirms details of the patient and next of kin and clarifies if any doctors known to be on duty who will be available to discuss cause of death with the Medical Examiner
- ii. contacts liaises with clinical team and Duty Manager to arrange discussion re cause of death between certifying doctor and ME and prepares relevant information to support discussion re cause of death between the Medical Examiner and certifying doctor
- iii. keeps family and Funeral Director updated throughout the process and informs of any potential difficulties with meeting their request for urgent certification or release of the deceased
- iv. supports certifying doctor with completion of death certificate (if agreed can be issued) or with completion of the Coroner Referral (if required)
- v. emails the completed MCCD to the Registrar and updates the Bereavement Database and emails both the Mortuary mailbox and site Duty manager to confirm deceased can be released from the mortuary
- vi. contacts the On Call APT or Duty manager to arrange release of the deceased from the Mortuary and liaises with the Bereaved/Funeral Director accordingly
- vii. if referral to the Coroner indicated, liaises with the Medical Examiner about whether the On Call Coroner should be contacted and then feeds back to the Bereaved accordingly

c) On Call Medical Examiner

- i. Reviews the electronic clinical records of the deceased and the information provided in the ME proforma to confirm if any need to refer to the coroner
- ii. speaks to the certifying doctor to agree cause of death or advise of need to refer to the Coroner
- iii. speaks to the bereaved to confirm their understanding of the cause of death and if any questions or concerns about care
- iv. updates the ME proforma with the outcome of both discussions

5.3 Out of Hours Release of the Deceased from the Mortuary

- a) This process can be followed only when all relevant death certification paper work has been completed and will normally be carried out in the mornings
- b) Those requesting out of hours urgent certification and release of a deceased person will be treated with sensitivity and kept informed of progress. Where release is not possible until the next morning the rationale for this will be explained both the bereaved and Funeral Directors
- c) If release out of hours is required other than for burial, the Trust can only release those deceased who have a completed MCCD and Cremation Form. The only exception to this is where a child is released to Rainbows Hospice after cause of death agreed with the Medical Examiner and MCCD has been done, but where cremation paperwork is not yet completed.
- d) Following discussion with the Medical Examiner and completion of the MCCD the Bereavement Database will be updated to reflect that the deceased is ready for release from the Mortuary

- e) An email will be sent the Mortuary team via the PPDmortuary@uhl-tr.nhs.uk and Mortuary@uhl-tr.nhs.uk mailboxes confirming the patient's details and also that the deceased's body can be released (copying in the DutyManagers@uhl-tr.nhs.uk mailbox for information)
- f) The On Call APT will be contacted to agree availability for release and this information communicated to the Funeral Directors. Wherever possible, release will be arranged during times that the Mortuary staff are already in the mortuary. Requests to come in specifically to release the deceased should be avoided.
- g) If the On Call APT is not available for release of the deceased for same/next day burial or transfer to Rainbows, the Duty Manager will be asked if they are able to facilitate release of the deceased and this information communicated to the bereaved and funeral directors accordingly.

5.4 Registering a death

- a) The Registrar provides a 'remote working' out of hours service between 10:00 and 12:00 at weekends and public holidays (excluding Christmas Day and New Years Day)
- b) Upon receipt of the MCCD, the Registrar will phone the Bereaved as per details provided by UHL and will then email the 'Burial Order' (Green Form) to the Bereaved's nominated Funeral Director to allow the burial go ahead.
- c) The death will then need to be formally registered by the Bereaved in person during office hours

5.5 Proportionate Scrutiny of the Clinical Records

- a) Where out of hours urgent certification has taken place, proportionate scrutiny to include the paper clinical records will be carried out the next working day by the Medical Examiner on duty.
- b) Where this identifies a need to refer to the Coroner, the Medical Examiner will phone the Coroner's Office to seek further advice

5.6 Support for relatives by the Bereavement Support Service

Where urgent certification has taken place, relatives of the deceased will be contacted 6-8 weeks after death by the Bereavement Support Service, as with all other deaths in UHL.

6 EDUCATION AND TRAINING REQUIREMENTS

There is no additional training required as part of this policy – guidance in respect of procedures are included in the policy.

The standards and processes of this policy have already been adopted by relevant Corporate Teams

Details of the Revised Policy will be sent out by the Head of LfD to all Medical and Nursing staff via their CMG communication channels.

7 PROCESS FOR MONITORING COMPLIANCE

Element to be monitored	Lead	Tool	Frequency	Reporting Arrangements
Where urgent certification and release is requested the deceased patient should be ready for release to the next of kin or Funeral Directors as soon as practically possible, but certainly same day/next day of the death (unless referred to the Coroner)	Head of Learning from Deaths	Learning from Deaths and Bereavement Services Database	Quarterly	Via the Quarterly Learning from Deaths Report to Mortality Review Committee
Audit the numbers of urgent certification requests, to include breakdown by 'In Office Hours' and 'Out of Hours'	Head of Learning from Deaths	Learning from Deaths and Bereavement Services Database	Quarterly	Via the Quarterly Learning from Deaths Report to Mortality Review Committee
Monitor any formal complaints or concerns reported by the next of kin, Funeral Directors, faith groups, HM Coroner or Superintendent Registrar regarding delays or problems experienced with the release of the deceased out of hours	Head of Learning from Deaths	Datix / Learning from Deaths database	Annually	Via the Learning from Deaths Report to Mortality Review Committee

8 EQUALITY IMPACT ASSESSMENT

If the policy will have any impact on equality, this should be described here. Otherwise the statements below should be inserted (see section 6.6 of the UHL Policy for Policies for more detail):

- 8.1 The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs.
- 8.2 As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.
- 8.3 The policy supports the religious requirements of Jewish and Muslim communities who require urgent death certification and release of the deceased for religious reasons.
- 8.4 All requests for out of hours urgent certification will be considered on a case by case basis

9 SUPPORTING REFERENCES, EVIDENCE BASE AND RELATED POLICIES

9.1 Related Policies

Maternal Death - Guidelines for the Management of Maternal Death (UHL)
UHL Guideline Register No: C2/2007

Management of Patient Property - Policy and Procedure
Trust Reference: B24/2007

Care of the Deceased Patient (“Last Offices”)” policy
Trust Reference: B28/2010

Certification of Stillbirth and Neonatal Deaths on Labour Ward
Trust Reference: C33/2010

Policy for the Sensitive Disposal of Fetal Remains (Up to 16 weeks gestation)
Trust Reference: B3/2007

Taking a Deceased Child Home (where registerable birth) B17/2022
Medical Examiners UHL Policy B49/2017

9.2 **References**

Births and Deaths Registration Act 1953 (c.20)

9.3 **UHL Contact telephone numbers / useful links**

On Call Medical Examiner 07971 745188

UHL Duty Manager LGH / LRI / GH Bleep via UHL Switchboard

On Call Mortuary staff via On Call MEO/Duty Manager

On Call Chaplaincy via UHL Switchboard

Pathology Duty Manager Contacted via Duty Manager

9.4 **External Organisations**

Muslim Burial Council of Leicestershire <http://www.mbc.org.uk/>

07803240493 / 07801101786 – Available 7 days a week from 7am to 10pm

Rainbows Hospice 01509 638 000

Undertakers of Leicestershire

<http://www.uk-funerals.co.uk/funeral-directors/leicestershire.html>

10 PROCESS FOR VERSION CONTROL, DOCUMENT ARCHIVING AND REVIEW

10.1 The updated version of the Policy will be uploaded and available through INsite Documents.

10.2 This Policy will be reviewed in 2027.