

LRI Children's Hospital

RAINBOWS REFERRAL (Childrens Hospital)

Staff relevant to:	Clinical staff working in all areas of the Childrens Hospital in UHL
Team approval date:	February 2025
Version:	2
Revision due:	February 2028
Written by:	Lindsay Ryan & Kim Sanger
Reviewed by:	David Mathers
Trust Ref:	C50/2021

1. Introduction and who this guideline applies to

This guideline provides information regarding the process that needs to be followed to enable smooth transfer of the deceased Infant, Child or Young Person from the Children's Hospital setting to Rainbows Children's Hospice when this is requested by the next of kin. This document has been developed to support clinical staff working in all areas of the Childrens Hospital in UHL.

The guideline does not cover the Paediatric Emergency Department or Neonatal and Maternity Services.

Related documents:

- [Child Death and CDOP Process \(0-18 years\) UHL Childrens Hospital Guideline](#) (Trust Ref D3/2021)
- [Last Offices Care of the Deceased UHL Policy](#) (Trust Ref: B28/2010)
- [Medical Examiners UHL Policy](#) (Trust Ref; B49/2017)
- [Deceased Urgent Certification and Release Outside Normal Hours UHL Policy](#) (Trust Ref: B12/2013)
- [ReSPECT Leicester Leicestershire Rutland Policy](#) (Trust Ref: E1/2020)

2. Routine Referral following death – Where referral to Coroner not required /accepted

If Coroner referral accepted and family would benefit from Rainbows transfer, please contact Bereavement Support Nurse ext 17742 / 16776 (normal office hours), who will discuss with Coroner. The Coroner may in some circumstances consent to transfer e.g. where Post Mortem not required or post PM. *(If anticipated death, discuss with Rainbows ahead of time/ liaise with Rainbows Clinical Nurse Specialist)*

Consultant will discuss circumstances of child's death with Medical Examiner to determine whether referral to Coroner required



REMINDER- If planned withdrawal of care, discuss with Medical Examiner during office hours



If Coroner referral not required/ referral not accepted, ring Rainbows to see if they can accommodate

Call 01509 638000



Offer Rainbows service to families and if accepted, confirm transfer with Rainbows team and provide referral information



Contact family's chosen funeral director (where known) to arrange transport or

Anstey funeral directors who will transport for free 0116 2340548



Follow Child Death Paperwork ([Trust Ref: D3/2021](#)) + provide handover to Child Bereavement Team (ext 17742 / 16776 / or Child bereavement mailbox)



Prior to transfer, the doctor must complete:

Medical Certificate of Cause of Death (MCCD)

The Medical Examiner will countersign the MCCD.



Child has to leave via mortuary

Inform mortuary team (ext 15596) and document 'Transfer to Rainbows' on Notification of Death Form



Ring Rainbows with estimated time of arrival

Information from Rainbows

Process of Routine Transfer — where referral to Coroner not required / accepted

- The Death will have been verified at hospital.
- Contact the hospice to see if there is capacity to take the child/young person (Y.P). Ask for a member of the Family Support Team or the shift co-ordinator. It is also useful to know how many families members would hope to be resident at the hospice during the stay.
- The Death Certificate should be completed prior to transfer. The UHL Bereavement Services Officers will send this electronically to the Registrar's Office. The family do not need to collect.
- Complete all legal documentation to relevant agencies e.g. Child Death Overview Panel ECDOP (all child deaths), MBRRACE (if required) before transfer.
- Confirm that the body can be transferred to another care facility and that there is no Coroner's investigation preventing transfer.
- We can accept children/Y.P after a post mortem.
- I.V cannulas, catheters etc. should be removed pre transfer unless the family identify this as part of the child/Y.P identity and ask it to be left in.
- The hospital can arrange transport of the body, usually this is through local funeral directors. Rainbows can also assist following conversations with the hospital team.
- Please inform the hospice of the approximate time of arrival to the hospice.

3. Education and Training

There are no specific education requirements to implement the guideline. Awareness raising and information for staff will be provided for all clinical areas by the Bereavement Support Nurse and ward Bereavement Champions.

4. Monitoring Compliance

Family may feedback via Child Death Review Process, Child Bereavement Team or Patient Information and Liaison Service.

5. Key Words

Bereavement, Coroner, Cremation, Death, Deceased, Hospice, Mortuary

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. As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.

CONTACT AND REVIEW DETAILS	
Guideline Lead David Mathers - Bereavement Support Lead Nurse.	Executive Lead: Rebecca Broughton- Head of Outcomes and Effectiveness.
Details of Changes made during review: Hyperlinks updated Telephone numbers updated Information regarding Cremation Forms removed	