

# Adult Care Services



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## Table of contents

<b>Title</b>	<b>Page</b>
Introduction	3
Aims and Objectives	3
1. Death Management Process	4
2. New Measures and Working Arrangements	8
3. Bereavement Services	8
4. Communications	9
5. Monitoring and reporting	9
Appendix 1: Key Policies and Documents	9
Appendix 2: HCC contract with care providers	10
Appendix 3: HCC Press Release guidance in response to enquiries regarding Care Home Deaths	10
Death Verification Eastern Region Coroners Group letter	11

## Introduction

I have been incredibly impressed with the resilience, resourcefulness and compassion seen from care providers in Hertfordshire. Whilst many of you will have well-established procedures in place, it's a sad reality that we will see an increase in deaths from our care home residents; and partners will be adapting and changing their policies and procedures. Our aim with this guide is to share best practice and put everything in one place as a supportive resource. Please continue to feedback to us with your experience and share anything that others may find useful.



Iain MacBeath

Director of Adult Care Services

## Aim and Objectives

In response to Hertfordshire County Council's plans to manage the risks around COVID-19, the purpose of this document is to inform HCC and partners in managing increased deaths within Adult Care Service Providers. This includes care/nursing home, home care, sheltered accommodation and supported living providers.

To develop a robust plan with key service providers to manage the increase in deaths within a provider which may occur in a short period of time in more than one setting. A severe pandemic is the incident most likely to create a need for an increased deaths capability and this will have major implications for local service providers for managing the deceased. It is important that steps are put in place to relieve this pressure, whilst also maintaining the welfare of staff and maintaining the dignity and respect of the families and carers of the deceased.

Please note that this document contains links to national guidance. Providers are encouraged to follow links to the source documents for the most up to date information in case of subsequent changes.

This plan will be guided by the following key processes:

1. **Death Management Process:** Statutory guidelines in managing deaths within a provider during a pandemic, management of the deceased who have died from COVID-19 and ensuring that the welfare of staff and appropriate level of dignity and respect for families of the deceased are well-maintained.
2. **New measures and working arrangements:** The need for adequate capacity for services involved in managing the deceased to operate under pressure with adjustments being put in place for COVID-19.
3. **Bereavement Services:** The bereaved families and carers should be treated with care and compassion and their wishes for the deceased be respected wherever possible. Bereavement counselling services should also be offered to staff, carers and families. For staff and volunteers, HCPA have an Employee Assistance Programme in place ([eap@hcpa.info](mailto:eap@hcpa.info) or 07520 649 448).

4. **Communications:** Clear and consistent communications to inform and engage with service providers and the public to ensure that plans are well-known and approved by all stakeholders.
5. **Monitoring and Reporting:** Ensure robust risk assessment processes are in place to monitor severity and impact on services with mitigation measures.

## 1. Death Management Process

1.1 This section should be read in conjunction with:

- [‘Guidance for the care of the deceased with suspected or confirmed Coronavirus \(Covid-19\)’](#) that sets out how bodies and bereaved family are treated with sensitivity, dignity and respect, and that people who work in services and mourners are protected from infection
- [CQC guidance on confirmation of death processes](#)
- Death Verification Guidance from ENHCCG and HVCCG [www.hcpa.info/eol](http://www.hcpa.info/eol)

1.2 As part of the death management process, please ensure end of life discussions are held and advanced care plans are completed and then updated when changes are required by the person. This will ensure each person’s wishes for their end of their life are known and can be supported.

1.3 At all points in the process providers should consider the most appropriate way to communicate with the family of the deceased, ensuring the usual high standards of dignity and respect. Visits at the end of life are important both for the individual and their loved ones and should continue. Guidance on this is given on page 21 of [Admission and care of residents during Covid-10 Incident in a Care Home](#).

Process for managing a death in within a provider:

1.4 Two distinct stages are required to verify and certify a death: verification that life is extinct and the issuing of a Medical Certificate of Cause of Death (MCCD).

### *Verification*

1.5 Updated guidance has been produced to clarify the existing practice for verifying deaths outside of hospitals and to provide a framework for safe verification of death during the coronavirus emergency. [Updated Guidance for Coronavirus \(COVID-19\): verification of death in times of emergency for Care Homes](#).

1.6 This update only applies to Older People Care Homes in Hertfordshire; other providers should continue to follow existing practice. East & North Hertfordshire and Herts Valley have agreed their approach and support during this period.

1.7 This updated guidance means that **where a death is expected**, the GP/clinician can request for the verification to be done via video calling with the care homes support. The verification will be led by the GP/clinician on the video call. The Care Home staff

do not need to be signed off as competent, but do need to be familiar with the process and feel comfortable to support.

1.8 During core hours the verification (remote or Face to Face) should be conducted by a clinician from the residents own GP practice and out of hours by a clinician from the NHS111.

**1.9 Important- Remote verification is not the only option for verification and Face to Face verification will still take place if the GP/ Clinician does not want to complete via Video Call or the Care Homes does not feel comfortable with a remote verification.**

1.10 Verification of death is required before the deceased can be moved to a mortuary, a body storage facility or the premises of a Funeral Director. When contacting the Funeral Director, please state whether the person is Covid-19 positive, is deceased from other causes, or could be a possible Covid-19 death which was untested. This will enable the Funeral Director staff to take the necessary measures to protect themselves.

1.11 Once the death has been verified a medical professional can complete the MCCD (details below).

1.12 Any death related to COVID-19 is a reportable death (and must be reported as a notifiable disease).

1.13 If the cause of death is known it is only reportable to the coroner under specific criteria. It is the responsibility of the GP who the deceased is registered to, to refer the death to the coroner if it meets the criteria. The Hertfordshire Coroner Service will appoint a specific Coroner Officer to the case (Herts Coroner Service Tel: 01707 292707).

1.14 Death Registration & Medical Certificate of Cause of Death (MCCD): new guidance has been received around the registration of death.

#### *Signing of the medical certificate of cause of death*

1.15 A medical certificate can be accepted from any medical practitioner so long as they are able to state to the best of their knowledge the cause of death. This responsibility cannot be delegated to a non-medical practitioner.

1.16 Registrars can accept MCCDs without referral to the coroner, provided it contains an acceptable cause of death, and indicates that a medical practitioner has seen the deceased either within the 28 days prior to death, or after death (this does not need to be the certifying medical practitioner).

1.17 While these provisions are in force, if it is indicated that a patient was seen in the 28 days prior to death by video link (such as skype) this should be accepted as seen. This (video link) does not however meet the requirement for seen after death.

## *The Registration*

- 1.18 Permission has been granted to remove the requirement for a death informant to attend and provide details in person and the requirement for them to sign the register where a local authority can no longer offer face to face service registrations or where this is needed by way of additional contingency. Hertfordshire Registrars have chosen to adopt this option and all death registrations will be via telephone. Family members of the deceased should be advised to contact the Registration Service on 0300 123 4045.

## *Qualified Informants*

- 1.19 The list of qualified informants is temporarily extended to include a funeral director (where they are acting on behalf of the family).

## *Electronic transmission of documents*

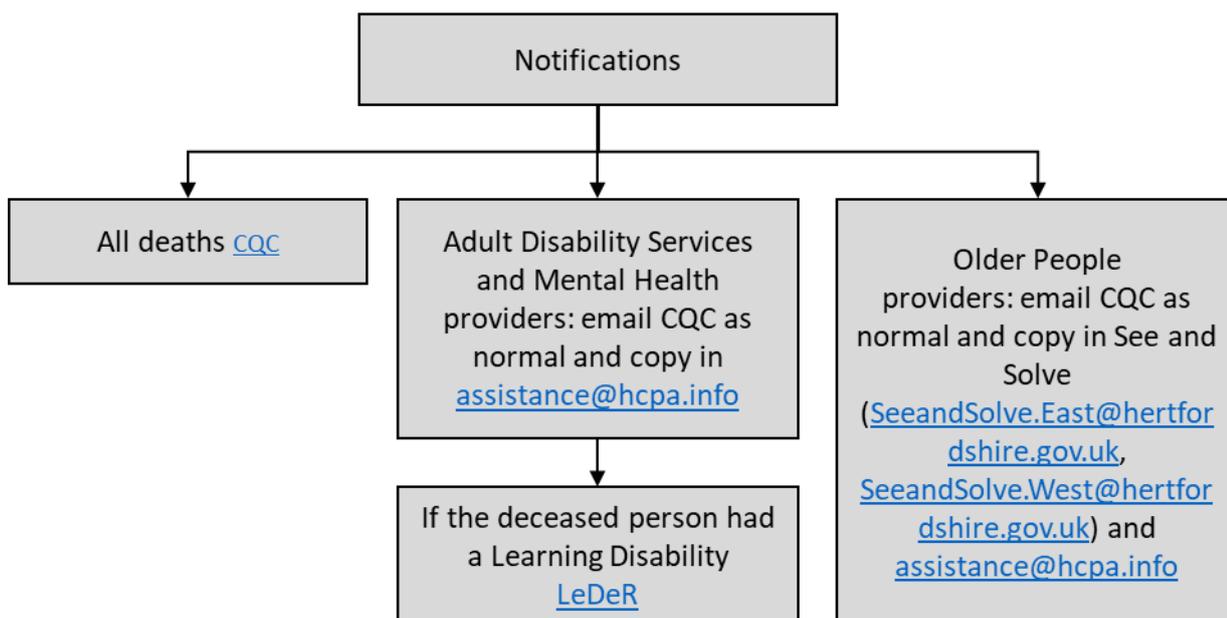
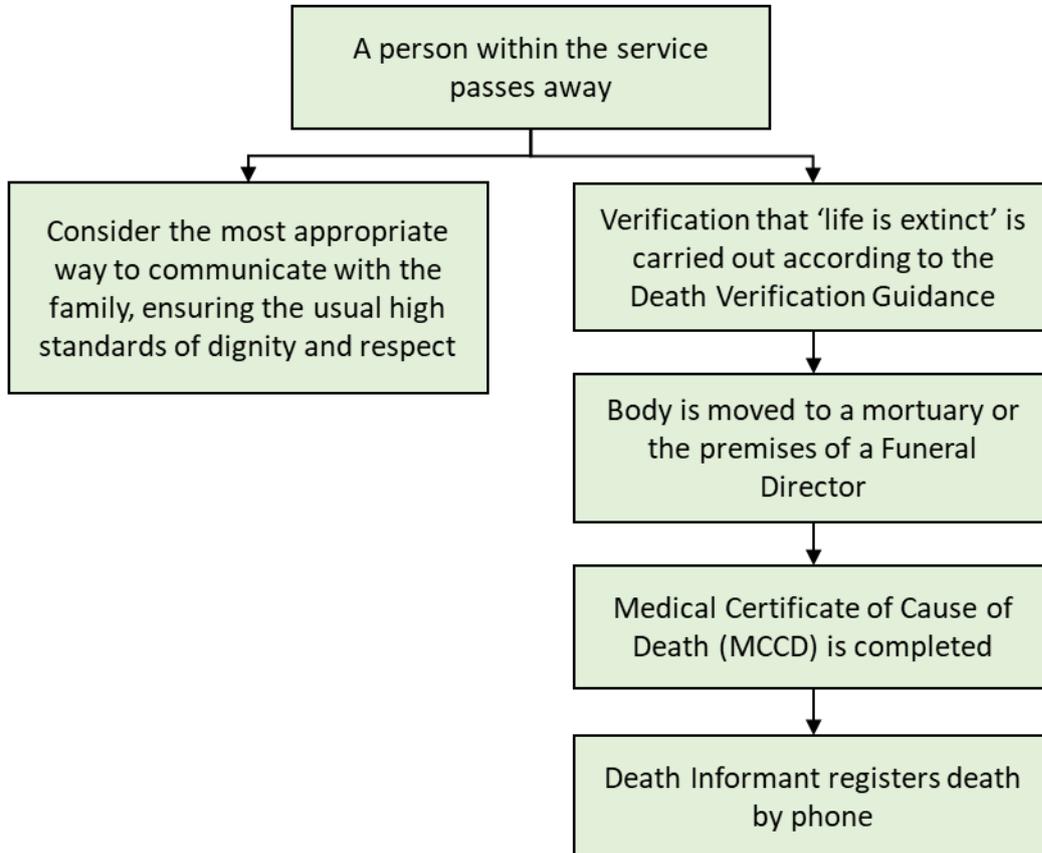
- 1.20 The provisions also allow for the electronic transfer of documents relating to the certification and registration process (e.g. transfer of the MCCD from the medical practitioner to the registrar and the form for burial or cremation (the Green), from the registrar to the relevant authority). Families of the deceased should not be given the MCCD. Contact the Registration Service for the Registrar Office email address to send the scanned MCCD to.

## *Notification*

- 1.21 Providers who have a contract with HCC should note the requirement stated in the contract: "Providers shall notify the council of any of the above and any Regulation 16 & 18 Notices by sending or faxing a copy of the form at the same time as CQC is notified". These notifications should be sent to the email addresses below.
- 1.22 The [CQC notification](#) form has been updated to include Covid-19 as a cause of death
- 1.23 Death notifications within Adult Disability Services and Mental Health providers: email CQC as normal and copy in [assistance@hcpa.info](mailto:assistance@hcpa.info). This information will be logged by the provider hub. If you are an Learning Disability provider also notify LEDER- <http://www.bristol.ac.uk/sps/leder/about/detailed-review-process/notification-of-a-death/> and the relevant ADS locality team.
- 1.24 Death notifications within Older People providers: email CQC as normal and copy in See and Solve ([SeeandSolve.East@hertfordshire.gov.uk](mailto:SeeandSolve.East@hertfordshire.gov.uk), [SeeandSolve.West@hertfordshire.gov.uk](mailto:SeeandSolve.West@hertfordshire.gov.uk)) and [assistance@hcpa.info](mailto:assistance@hcpa.info). This information will be logged by the provider hub.

1.25 Death verification, certification and notifications are summarised in the flowchart below:

Process following the death of a person



### *Other considerations*

- 1.26 Specialist cleaning services may be required especially for cases of COVID-19 (see section on New measures and working arrangements).
- 1.27 Arrange bereavement counselling for families and staff. It is advised that the home should avoid mass-mourning to take place in the home to comply with social distancing measures.

### *Client Finance Team*

- 1.28 Appointee/Deputy: if the deceased person has no known relatives and has an Appointee or Deputy to manage their finances, HCC's Client Finance Team should be contacted with regard to finances to cover funeral arrangements, by emailing [acs.clientfinance@hertfordshire.gov.uk](mailto:acs.clientfinance@hertfordshire.gov.uk).

## **2. New measures and working arrangements**

- 2.1 There is government Guidance on Managing the Deceased During a Pandemic (March 20). This has been published to partners to support their response to COVID-19. It offers advice to local planners on ways to augment their collective capacity to manage the deceased when normal capacity could be overwhelmed.
- 2.2 [Guidance for the care of the deceased with suspected or confirmed Coronavirus \(Covid-19\)](#) that sets out how bodies and bereaved family are treated with sensitivity, dignity and respect, and that people who work in services and mourners are protected from infection
- 2.3 Care Homes to follow Government guidance on [COVID-19: Guidance on residential care provision](#).
- 2.4 [Government guidance for Supported Living and Home Care providers](#)
- 2.5 Government guidance '[Admission and care of residents during COVID-19 crisis Incident in a Care Home](#)' sets out guidance and requirements around managing people depending on their COVID-19 status, including admission and care.
- 2.6 The Government are asking social care providers to inform them if an employee or volunteer has died. Guidance can be found here [Infoming DHSC of the death of a worker in social care](#)

### 3. Bereavement Services

3.1 Bereavement services are offered from all hospital sites and each care home should also have their own bereavement services or links to external services.

[Information for ENHT bereavement services](#)

3.2 Providers and staff will be able to access counselling support through an Employee Assistance Programme (EAP) which has been secured through HCPA. If you think that you have a staff member who needs some extra support during this time, please ask them to contact our friendly team on [eap@hcpa.info](mailto:eap@hcpa.info) or send a text message to 07520 649 448.

3.3 HCC staff should continue to use the EAP and support available through the [intranet wellbeing page](#) (HCC staff only)

### 4 Communications

4.1 A Provider hub has been established that will deliver support for providers by phone and through the HCPA website: [www.hcpa.info/covid-19](http://www.hcpa.info/covid-19)

4.2 We are recommending that care homes take advice from the HCC press office ([Press.Office@hertfordshire.gov.uk](mailto:Press.Office@hertfordshire.gov.uk)) if they receive any enquiries from the press. Any direct contact with the press should recognise sympathy with friends and family of the deceased, thanks to those working to protect people, and steps that have been taken to follow national best practice guidance in infection control, end of life care and support for resident and staff wellbeing. Please see Appendix 3 for more detail.

4.3 Communications will include letting the bereaved know where they can access bereavement and other support (e.g. financial and legal) including HCC's Money Advice Unit Factsheet "Bereavement and Benefits" available at [www.hertfordshire.gov.uk/benefits](http://www.hertfordshire.gov.uk/benefits).

### 5. Monitoring and Reporting

5.1 Activity is taking place across ACS and partners to monitor and report on the situation. This includes a RAG rating proforma to log risks and mitigations within provider organisations, daily capacity check with providers and risk assessment of residents and incident reporting to maintain a log of all COVID-19 residents including deaths.

## Appendix 1: Key documents and policies

- CQC procedures in notification of deaths – [Regulation 16: Notification of death of service user](#)
- Gov Guidance - Managing the Deceased During a Pandemic (Mar 20)
- [COVID-19: Guidance on residential care provision](#)
- COVID-19 Guidance for infection prevention and control in healthcare settings
- [COVID-19: Guidance for care of the deceased with suspected or confirmed coronavirus COVID-19](#)
- [CQC guidance on confirming a death](#)
- [Admission and care of residents during COVID-19](#)
- [Guidance for doctors completing medical certificates of cause of death Covid-19](#)

## Appendix 2: HCC contract with care providers

The contract reference is Schedule 2, clause 10 notifications to the council. The full wording is: (yellow highlight for death of the service user)

10.1 Without prejudice to its responsibilities under the Health & Social Care Act the Provider will be responsible for notifying the responsible area team within the Council as soon as it is practical to do so, if any or the following occur:

- (1) Any circumstances where the Service User has consistently refused provision of the service, medication, or medical attention.
- (2) Serious accident, serious illness or serious injury to the Service User.
- (3) Death of the Service User.
- (4) Outbreak of notifiable infectious disease in the Home.
- (5) Any emergency situation e.g. fire, flood.
- (6) Legacy or bequests to Provider and/or staff.
- (7) Unplanned absence of the Service User.
- (8) Hospital admission.
- (9) An investigation related to Safeguarding of Vulnerable Adults
- (10) change of manager.

Providers shall notify the council of any of the above and any Regulation 16 & 18 Notices by sending or faxing a copy of the form at the same time as CQC is notified to See and Solve email addresses for the west and east for older people funded clients and area locality teams for ADS funded clients.

### **Appendix 3: HCC Press Release guidance in response to enquiries regarding Care Home deaths**

Hertfordshire County Council's (HCC) Press Office have sought guidance from the Coroners Office who have advised that they do not anticipate having to report on any Covid-19 cases as it is not classed as an unexpected or suspicious cause of death.

HCC has made some proactive and reactive press statements around care homes. This has focused on the support in place for providers, staff and residents from Public Health England, the provider hub, CQC and our Public Health team. The focus is on support for residents and family, infection control, testing, use of PPE and staff wellbeing.

HCC's advice to care providers is to agree with the family **IF** they want the information to be made public. We would expect that the family would not want to make the information public, but if the care provider did want to prepare a reactive statement for press, please contact the HCC press office for advice.