

From the Chief Medical Officer
Dr Michael McBride



Department of
**Health, Social Services
and Public Safety**

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AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

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Police Service for Northern Ireland
Coroners Service for Northern Ireland
Regulation and Quality Improvement Authority
National Association of Funeral Directors for distribution to
Funeral Directors

Dear Colleagues

VERIFYING AND RECORDING LIFE EXTINCT BY APPROPRIATE PROFESSIONALS

Background

When a person dies, a number of steps need to be completed to allow legal registration of the death and for a funeral to take place. These steps are:

1. **Verifying life extinct.** This first step has no formal legal term and is referred to in a number of ways including Recognition of Life Extinct (ROLE), verification of death, pronouncing death, confirming death.
2. **Certifying the medical cause of death or referral to the Coroner.** A doctor who had treated the patient in the last 28 days for a natural illness that caused their death may issue a Medical Certificate of Cause of Death (MCCD). If a doctor cannot complete an MCCD, either because the cause of death was not natural or because

they were not treated in the final 28 days of life, then the death must be referred to the Coroner.

3. **Registering the Death.** The family (or certain other people) will provide the person's details to the local registrar, with either the MCCD or the Coroners form giving the cause of death.
4. **Obtaining a burial or cremation order.** The registrar or coroner can issue a burial or cremation order. Cremation requires the completion of special forms by doctors in addition to the MCCD or coroners forms.

This circular focuses on the first step in this process, verification of life extinct.

Verification of life extinct has traditionally been carried out by doctors, but it can be carried out by any doctor, nurse or ambulance clinician who has had appropriate training. If an appropriately trained health professional is present at the time of death they should verify life extinct.

The Department's response to the recommendations contained in Shipman Inquiry Reports 3, 4 & 5 "Improving Patient Safety: Building Public Confidence", included a commitment to issue guidance on appropriate verification and recording of the fact of death. This guidance has been drafted by a small multiprofessional group with representation from primary care, secondary care, the ambulance service and the Coroners service and is attached to this circular. Trusts may find it a useful basis for developing protocols. Trusts are asked to undertake the following:

Actions

1. Develop or update an organisational policy in relation to deaths of patients/ clients.
2. Clarify protocols regarding verification life extinct to include provision for doctors, nurses and ambulance clinicians to undertake this role. The protocols should include:
 - Examination and recording of verification of life extinct.
 - How this information is passed to a doctor qualified to complete a Medical Certificate of Cause of Death (MCCD) or the Coroner.
 - Training provided in verifying and recording life extinct, including legal issues, exemptions to normal verification of life extinct and appropriate onward referral.
 - Agreement with Trust clinicians and with local GPs, GP out-of-hours services and Police Forensic Medical Officers about verification of life extinct in different situations.
3. Trusts should ensure that training and protocols are in place by 1st August 2008 in hospitals and 1st February 2009 in community settings.

Yours sincerely



Dr Michael McBride
Chief Medical Officer



Mr Martin Bradley
Chief Nursing Officer

GUIDELINES FOR VERIFYING LIFE EXTINCT

The purpose of this document is to provide guidance to the HSC on verifying life extinct. This task can be undertaken by all doctors and in situations where there is an organisational policy, associated protocols and appropriate training and assessment, it can also be undertaken by nurses and ambulance clinicians.

BACKGROUND

When a person dies, a number of steps need to be completed to allow legal registration of the death and for a funeral to take place:

- **Verifying life extinct.** This first step has no formal legal term and is referred to by different phrases including Recognition of Life Extinct (ROLE), verification of death, pronouncing death, confirming death.
- **Certifying the medical cause of death or referral to the Coroner.** A doctor who had treated the patient in the last 28 days for a natural illness that caused their death may issue a Medical Certificate of Cause of Death (MCCD). If a doctor cannot complete an MCCD, either because the cause of death was not natural or because they were not treated in the final 28 days of life, then the death must be referred to the Coroner.
- **Registering the Death.** The family (or certain other people) will provide the person's details to the local registrar, with either the MCCD or the Coroners form giving the cause of death.
- **Obtaining a burial or cremation order.** The registrar or coroner can issue a burial or cremation order. Cremation requires the completion of special forms by doctors in addition to the MCCD or coroners forms.

LEGAL POSITION

The legal position for registering a death is set out in Births and Deaths Registration (Northern Ireland) Order 1976 para 25 (2).

"Where any person dies as a result of any natural illness for which he has been treated by a registered medical practitioner within 28 days prior to the date of his death, that practitioner shall sign and give forthwith to a qualified informant a certificate in the prescribed form stating to the best of his knowledge and belief the cause of death, together with such other particulars as may be prescribed"

More simply, the law

- Does expect a doctor issue a certificate detailing the cause of death (unless the death is referred to the Coroner)

However, the law

- Does not require a doctor to confirm death has occurred or that life is extinct
- Does not require a doctor to view the body of a deceased person
- Does not require a doctor to report that a death has occurred

PROFESSIONAL REQUIREMENTS

All doctors registered with the General Medical Council can verify life extinct.

Nurses can undertake this task within certain parameters. The advice on verifying life extinct given to nurses by the Nursing and midwifery Council (NMC, 2006) is that *"in the event of death, a registered nurse may confirm or verify life extinct, providing there is an explicit local protocol in place to allow such an action, which includes guidance on when other authorities, e.g. the police or the coroner, should be informed prior to removal of the body. Registered nurses undertaking this responsibility should only do so providing they have received appropriate education and training and have been assessed as competent. They must also be aware of their accountability when performing this role."*

Ambulance Clinicians, when responding on behalf of the Northern Ireland Ambulance Service, can verify that death has occurred in accordance with the Joint Royal Colleges Ambulance Liaison Committee (JRCALC) Clinical Practice Guideline for the Recognition of Life Extinct (ROLE). Ambulance Clinicians include Emergency Medical Technicians and Paramedics in training who possess the relevant ASA/IHCD professional qualification, and Paramedics registered with the Health Professions Council.

PRINCIPLES FOR PRACTICE

- All doctors and appropriately trained registered nurses and ambulance clinicians can verify life extinct.
- The feelings and wishes of the family should be explored and respected. They must be communicated with at all times throughout the process of dealing with the death.
- Organisations must have in place an overarching policy, written protocol and staff training for dealing with the process following a death.
- There should be awareness of the roles of Health and Social Care, the Police Service of Northern Ireland and the Coroner's Office in the process of dealing with death.
- After verifying life extinct, the healthcare professional must consider the next step and make contact with either a doctor who can provide a Medical Certificate of cause of Death (MCCD), the Police or the Coroner.

TRAINING AND COMPETENCE REQUIREMENTS

All staff whose role it is to verify life extinct should have education and training in this area. In addition nurses and ambulance clinicians require assessment of competence in this task. Education and training for this role must include:

- Accountability
- Ethics
- Legislation
- Role of other agencies / personnel
- Skills and knowledge to determine the physiological signs of death
- Process for pronouncing life extinct including documentation
- Professional responsibilities

CLINICAL CHECK TO VERIFY LIFE EXTINGUISHED

In order to verify life extinct, cessation of circulatory and respiratory systems and cerebral function must be confirmed and documented in the patient's notes.

N.B. this applies in all cases whether it is a doctor, nurse or ambulance clinician who undertakes the task.

Certain situations can make the clinical confirmation of life extinct more difficult, in particular **drowning, hypothermia, drug overdose and pregnancy**. In these situations active resuscitation should continue until an experienced doctor has verified life extinct.

There are some special circumstances, including brain-stem death in ventilated patients, where medical consultants will be involved in verifying life extinct under more detailed protocols.

Life extinct must always be verified by examining all of the following systems:

1. Cessation of circulatory system e.g.

- No pulses on palpation.
- No heart sounds (verified by listening for heart sounds or asystole on an ECG tracing)

2. Cessation of respiratory system e.g.

- No respiratory effort observed
- No breath sounds (verified by listening for one full minute)

3. Cessation of cerebral function e.g.

- Pupils dilated and not reacting to light
- No reaction to painful stimuli

The documentation recording the examination undertaken and verifying life extinct should be completed and put in the patient's notes.

A Model form is attached which Trusts could use to create their record of verification of death documentation.

ACTION TO BE TAKEN AFTER A DEATH

Following the verifying life extinct, the practitioner needs to determine the next step, which will depend on the circumstances of the death. Although most deaths, even sudden deaths, are not suspicious, it is important that the professional who has verified life extinct considers the general circumstances of the death. If there are concerns about the death, the body and the area around it should be secured and not disturbed, the Police should be contacted and they will direct how the death should be handled.

The flowchart attached provides a protocol for action to be taken after the verification of life extinct.

MODEL LIFE EXTINCT RECORD SHEET

Patient's Name: _____

Record Number: _____

I have checked for cessation of:

CIRCULATORY	✓	RESPIRATORY	✓	CEREBRAL	✓
No pulse felt		No respiratory effort		Pupils dilated and not responding to light	
No heart sounds or asystole on ECG		No chest sounds		No reaction to painful stimuli	

I have confirmed the death of the patient named above following the Guidelines for Verifying Life Extinct on:

Date: _____ **Time:** _____

Signature: _____

Print Name: _____

Contact details: _____

EITHER

I have concerns about the circumstances of this death and have contacted the Police and the doctor (see below). I have advised them that I think this death may need referred to the coroner.

OR

The circumstances of this death do not appear suspicious and I have informed doctor (see below) of that the death has occurred

DOCTOR INFORMED:

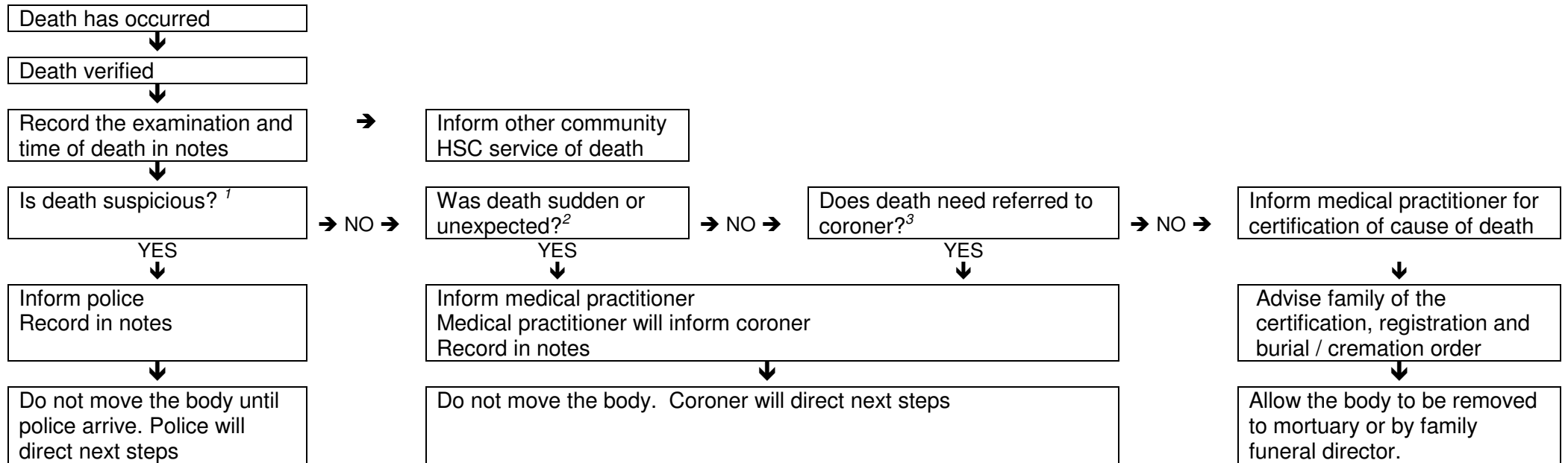
Name of doctor: _____

Date Informed: _____ **Time Informed:** _____

How have you made contact (delete as appropriate)?

Spoke to doctor/contacted Out of Hours Service/other _____

Protocol for Actions to be taken after a Death



¹ **Death involving suspicious circumstances** e.g. injuries, apparent suicide, scene of death raises concerns about break-in, fire, struggle. *The body must not be moved. Do not disturb the scene.* There must be immediate contact with the Police and the appropriate medical practitioner (GP, Out-of-Hours Service or hospital medical staff). The Police or medical practitioner must contact the Coroner. The body will require Post Mortem examination by State Pathology. The Police will arrange transfer to a mortuary.

² **Sudden/unexpected death without suspicious circumstances** e.g. person found dead at home, or initial resuscitation is unsuccessful but circumstances do not raise concerns. Contact the appropriate medical practitioner who must contact the Coroner. The coroner may direct a post mortem examination either by a hospital pathologist or by State Pathology. If the coroner is content that post mortem examination is not required a pro-forma letter to the coroner can be completed by the doctor, and the body released to the family's funeral director. If the medical practitioner and coroner cannot immediately deal with the death (e.g. if the coroner needs to wait until the persons normal GP is available to discuss the case) the body should be taken to the designated hospital mortuary. The Police will arrange transfer to a mortuary on behalf of the coroner.

³ **Death related to specific conditions which need referred to the Coroners Service.** In addition to suspicious and unexpected deaths there is a statutory requirement to refer to the Coroner any death due to: Industrial disease such as asbestosis or mesothelioma, during or shortly after an anaesthetic, any injury, including fractures, neglect Contact the appropriate medical practitioner who must contact the Coroner. The coroner may direct a post mortem examination either by a hospital pathologist or by State Pathology. If the coroner is content that post mortem examination is not required a pro-forma letter to the coroner can be completed by the doctor, and the body released to the family's funeral director. If the medical practitioner and coroner cannot immediately deal with the death (e.g. if the coroner needs to wait until the persons normal GP is available to discuss the case) the body should be taken to the designated hospital mortuary. The Police will arrange transfer to a mortuary on behalf of the coroner.