

Norfolk & Waveney Local Medical Committee

2008 DEATH GUIDANCE

In May 2003 the LMC issued guidance, drawn up by Secretary Peter Harvey, entitled: "Deaths in the Community - Guidance for GPs". It was agreed by the Norfolk Constabulary, the Coroner, the Out-of-Hours Service and the Medical Protection Society. However it has become increasingly obvious that the Coroner's Officers now either work to different rules or are interpreting the rules differently. We recently met Mr William Armstrong, the Norfolk Coroner, and one of his Officers. It became clear during quite a lengthy meeting that it would be very difficult to cover every possible eventuality in LMC guidance. We did not touch on cremation issues; also the office has learned of some new protocols to do with sudden death in children. But some useful themes emerged.

A common situation, that causes concern to the Coroner and his Officers, is delay in them being made aware of a death that, ultimately, they have to investigate. I have certainly been guilty of assuming that a colleague would be willing to do the death certificate in an elderly person they have seen fairly recently - but they later feel they can not; on occasion that doctor has been on holiday - resulting in delay. This situation is difficult for the Coroner's Officers and, no doubt, for the family. When GPs do this I know it is with the intention of saving the family stress and upset - in the belief that the Coroner's process, generally started by a uniformed police officer and ending in a postmortem, would be extremely upsetting for the family. We were strongly reassured that the police officers (who carry out the work on behalf of the Coroner when the Coroner's Officers are not available) are both very well trained and compassionate. Also, many Coroner's cases do not end up with a postmortem.

So, the rule of thumb for the first doctor involved has changed from: "I am pretty sure someone else will be able to sign the death certificate - so lets hang on and see", to asking him or her self: "am I going to sign the death certificate?" If the answer is "no", the next question is: "am I 100% certain that another doctor will be signing the death certificate?" If not, and it is not possible to check with that doctor there and then, the Coroner's Officers should be informed (in-hours), or the police (out-of-hours). It is no longer correct to authorise the removal of the body unless you **know** there is a GP who will be able and willing to sign the certificate. This dilemma is more likely out-of-hours. The Coroner plans to talk to the OOH Service separately. We were able to explain about the list of palliative care/expected deaths that the out of hours service is likely to hold - so there can be circumstances where the doctor working for the OOH service, while having no personal knowledge of the patient, can be confident that there will be no problem with certification. Even then there could be problems - if the information that the OOH service has is quite old.

During the working day, we agreed that it would be reasonable to allow a few hours to check with the doctor who should be able to sign the death certificate; but we also agreed that, if the appropriate doctor cannot be contacted, then the Coroner's Officer must be told **that day**. One practice helpfully sent us the flow chart that they use in these circumstances. The GPs, if they are away for a few days only, have agreed to accept contacts via their mobile 'phones - to confirm that they will be prepared to sign the certificate. The Coroner's Officer thought that this was a good model but, as stated above, wants the matter settled one way or the other on the same working day. **This means that the Coroner's Officers must be informed by 3.00 pm that there could be a problem.** So, if the doctor can't be contacted, even though the practice has no reason to believe that there will be a problem, the Coroner's Officer should be made aware that afternoon. They will then put the family in the picture. The family may, of course, elect to wait in the hope and expectation that the certificate will be issued.

The Coroner's Officers request that we telephone and discuss cases more than we have been - whenever there is any uncertainty in our minds. They accept that this will increase their workload but feel that it is correct and likely to be best for all concerned. For complicated issues out-of-hours there is an on-call officer, but it is difficult to know what sort of query it would be worth disturbing them for. The default position is that, if out-of-hours you are the first doctor advised of a death and you cannot be 100% certain that you, or a colleague, will be able to certify, the appropriate action is to advise the police.

There was also some discussion about confirming death. I think it is appropriate here to reiterate the guidance given in the previous LMC paper, which has not changed, that the GP should act compassionately and professionally and, even if **confirmation of death does not require the GP**, we have a pastoral duty to bereaved relatives. The Coroner's Officer shared a case with us where, on the face of it, the doctor did not act compassionately, leaving an elderly and infirm husband, who thought his wife had died, to deal with the matter entirely on his own. Of course this may not be an entirely accurate account but, nevertheless, in a situation this sensitive we would urge doctors to be prepared to visit, even out of hours. SRL