Implementation of Death Certification Reforms – Q&A

This document sets out Q&A in relation to the implementation of the Death Certifications Reforms on 9 September 2024. The changes set out **will apply** <u>only</u> from the 9 September 2024 commencement date; until then, existing forms, guidance and processes will continue to apply.

This document should be read alongside the Cremation, Coroners and Notification of Deaths (England and Wales) (Amendment) Regulations 2024 (available <u>here</u>) and this overview of the Death Certification Reforms: <u>https://www.gov.uk/government/publications/changes-to-the-death-certification-process/an-overview-of-the-death-certification-reforms</u>.

Additional sources of information:

- <u>NHS England » The national medical examiner system</u>
- National_Medical_Examiner_- good_practice_guidelines.pdf (england.nhs.uk).

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The Death Certification Reform	ms: an introduction
What is a Medical Examiner (ME)?	A ME is a senior medical practitioner who is contracted for a number of sessions a week in the NHS to provide independent scrutiny of causes of death, outside their usual clinical duties. They are trained in the legal and clinical elements of death certification processes and will not have been involved in caring for the deceased person. When a death is notified directly to the coroner and the coroner then opens an investigation, MEs do not provide scrutiny. MEs may identify that coroner notification is required when carrying out scrutiny.
	MEs, supported by ME Officers (MEOs), carry out a proportionate review of relevant medical records and give bereaved people the opportunity to ask questions and raise concerns. MEs also review the causes of death with the Attending Practitioner (AP) (see page 15 of the <u>Good Practice</u> <u>Guidelines</u>). If MEs detect concerns about care, they refer the case for further review through established clinical governance processes.
	Medical examiners are currently operating on a non-statutory basis, which provides flexibility and has enabled the NHS to prepare for the statutory death certification reforms. From 9 September 2024 when the death certification reforms come into force, ME scrutiny must occur in relation to all deaths which are not investigated by a coroner, and regulations will set out the way ME must carry out this scrutiny.
	More information on the role of the ME can be accessed here <u>Good Practice Guidelines</u> and on the NME webpage.
Where are MEs based?	MEs are based in acute hospital trusts.
What are Medical Examiner Officers (MEOs)?	MEOs manage cases from initial notification to the ME through to completion and communication with the registrar. They are essential for the effective and efficient working of the ME function; they are a constant within the ME office, enabling consistency and continuity across MEs who will usually work in their role part-time and come from a range of specialisms.
	More information on MEOs can be accessed here <u>Good Practice Guidelines</u> and the <u>NME</u> <u>webpage</u> . Contact details for medical examiner offices for England and Wales can be found <u>here</u> .

What is an Attending Practitioner (AP)?	From 9 September 2024 when the death certification reforms come into force, an AP will be a medical practitioner that attended the deceased person in their lifetime. APs will propose a cause of death which will then be independently scrutinised by an ME. The agreed causes of death will be recorded on the MCCD, which will then be sent to a registrar, who will, in turn, register the death. From 9 September 2024 when the death certification reforms come into force, all MCCDs will require a signed declaration by a medical examiner in the NHS confirming the cause of death before the death can be registered.
	As part of the death certification reforms, the requirement for the AP to have seen the deceased person in the 28 days before death will be removed. This will introduce more flexibility and will reduce the instances when no attending practitioner can be identified. In exceptional circumstances when no attending practitioner can be identified in a reasonable time, senior coroners will be able to refer the death to a medical examiner to complete a ME MCCD which does not require AP input.
What will the Death Certification Reforms do?	From 9 September 2024, when the death certification reforms are implemented, all deaths in England and Wales will be independently reviewed by either an ME or a coroner. In all non-coronial deaths, in addition to providing independent scrutiny, ME offices will provide the bereaved family with an opportunity to ask questions or raise concerns with someone who was not involved in providing care for the deceased person.
What are the key changes being introduced by the Death Certification Reforms?	The incoming death certification reforms will ensure that, in all cases which are not investigated by the coroner, there is independent scrutiny of the cause of death. Although scrutiny is already in place for deaths followed by cremation, this will occur at a much earlier stage in the death certification process than under the current system for non-coronial deaths. An AP will propose a cause of death, which will then be independently scrutinised by an ME prior to the registration of the death. This process will be more robust than at present as the ME, unlike the medical referee (MR) (see page 10 of the <u>Good Practice Guidelines</u>), will, under the new system, be able to access healthcare records and use these to scrutinise the proposed cause of death.
Why is the Medical Examiner (ME) system being introduced?	 The introduction of MEs is designed to: provide bereaved families with greater transparency and opportunities to raise concerns; improve the quality/accuracy of medical certification of cause of death; ensure referrals to coroners are appropriate; support local learning/improvement by identifying matters in need of review through clinical governance and related processes;

	 provide the public with greater safeguards through improved and consistent scrutiny of all deaths which are not investigated by the coroner; and support healthcare providers to improve care through better learning.
What safeguards will be in place under the new system?	MEs provide independent scrutiny of causes of death and the care before death and facilitate feedback to bereaved people. The reformed statutory process will provide a new layer of scrutiny, and MEs will have a right to access healthcare records to inform their scrutiny. When the death certification reforms are implemented, independent scrutiny by MEs will be required for all non-coronial deaths.
	Regulations (<u>The Medical Certificate of Cause of Death Regulations 2024</u> and <u>the Medical</u> <u>Examiner Regulations 2024</u>) set out the requirements for MEs, both in terms of what they must do, and how they must maintain independence. The good practice guidance for MEs available at <u>National Medical Examiner - good practice guidelines.pdf (england.nhs.uk)</u> provides further information and is being updated to reflect the new statutory requirements and process.
	To provide an extra safeguard as the new system beds in, on 26 May 2022 the Government committed to retaining the role of MRs for a transitional period following implementation of the death certification reforms to ensure any issues concerning deaths followed by cremation which might arise can be worked through.

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What will happen now that a physical inspection of the deceased person is no longer required?	Under the existing system, an AP is required to undertake a physical inspection of the deceased person if they have not seen the deceased person prior to death. Under the death certification reforms, this requirement will be removed.
	The introduction of MEs will, however, strengthen safeguards when it comes to scrutinising cause of death – MEs will review the causes of death recorded by the AP and, unlike MRs, will be able to access the deceased person's medical records when doing so.
How are deaths scrutinised under the current system?	Before the introduction of the non-statutory ME system, the cause of death was only independently scrutinised if the death was investigated by a coroner or certificated documentation was scrutinised by an MR in the context of an application for cremation. Deaths which were followed by burial did not receive any additional scrutiny.
	Non-statutory MEs have been introduced since 2020 in acute, and increasingly, community settings. In those instances, they are already providing independent scrutiny on a non-statutory basis.
What is a Medical Certificate of Cause of Death (MCCD)?	A medical certificate of cause of death (MCCD) is a certificate that enables the deceased person's family to register the death. This provides a permanent legal record of the fact of death and enables the family to arrange disposal of the body, and to settle the deceased person's estate.
	More details, and guidance on completing the MCCD, can be found here <u>Completing a medical</u> <u>certificate of cause of death (MCCD) - GOV.UK (www.gov.uk)</u> .
	When the death certification reforms are implemented on 9 September 2024, a new MCCD will replace the existing certificate to reflect the introduction of MEs, who will scrutinise the proposed cause of death.
Who will families of the deceased person engage with under the new system?	MEs and MEOs offer the bereaved person, who is usually a relative of the deceased person, the opportunity to ask questions and raise concerns about the cause of death prior to registration.

The role of MRs in the new sy	stem
What is a medical referee	MRs are appointed by a Secretary of State and assigned to a crematorium. It is their job to review
(MR)?	cremation forms and decide whether or not a cremation should go ahead. If the forms are in order, he/she gives written consent that a cremation can take place. Without this consent the cremation cannot go ahead.
What will the role of the MR	On 26 May 2022, the Government committed to retaining the role of MRs for a transitional period
be under the new system?	following implementation of the death certification reforms to ensure that any issues which may arise can be worked through. It also committed to providing a minimum of 6 months' notice before the MR transitional period ends.
	Following the implementation of the death certification reforms, for deaths in England and Wales, MRs will no longer:
	 Be required to be satisfied that the fact and cause of death has been definitely ascertained - this scrutiny will take place earlier in the process by an ME; Be able to consider form Cremation 4, which is being removed; or
	 Be able to consider form Cremation 4, which is being removed, of Be able to commission a post-mortem examination of the body of the deceased person. Following feedback, form Cremation 11 (Certificate after post-mortem examination), will be removed for deaths in England and Wales.
	The Cremation (England and Wales) Regulations 2008 are being amended to reflect these changes, which will coincide with statutory ME implementation.
	MRs will, however, continue to carry out a key statutory function in the death certification process. They will authorise cremations, and as such will complete a slightly modified version of form cremation 10 (or the existing versions of 12/13 where relevant) to reflect that they will be required to confirm that the Certificate of Cremation (the 'green form') has been provided, and that the scrutiny of form cremation 1 has been completed. As at present, the cremation will not go ahead without the authorisation of the MR.
	 The role of the MR during the transitional period will be unchanged in relation to: stillbirths
	 coronial cases anatomical research cases

	 the cremation of body parts and;
	 deaths that occurred inside the British Islands (but outside of England and Wales)
	Remuneration for MRs during the transition period will be unchanged. Further information will be provided in due course.
What will happen when the MR transitional period ends?	In December 2023, the Ministry of Justice (MoJ) surveyed all crematorium managers and MRs in England and Wales to gain a fuller understanding of the operation of the current system, the scrutiny provided by MRs, the division of MR time between core functions, and how prepared the system is for the changes required by the death certification reforms. This survey closed on 31 January 2024, and the findings are being used to inform policy development going forward Further information will be provided in due course.
Will MRs still authorise cremations?	Under the new system, MRs will continue to play a vital statutory role: they will determine whether or not a cremation may go ahead, and will authorise cremations by means of an amended form Cremation 10. Authority to cremate will be determined by an MR reviewing the application for cremation (form Cremation 1); the Certificate for Cremation (the Green Form); (where relevant) form Cremation 6 or 7; and signing off the amended form Cremation 10 (or 12/13 as appropriate). The Cremation (England and Wales) Regulations 2008 are being amended on this basis.
Why are MRs no longer going to see the cause of death in non-coronial cases?	The cause of death will be proposed by the AP, which will then be scrutinised by the ME. Once both the AP and the ME have made their declarations, the MCCD will be sent to the registrar, who will then register the death. As scrutiny of the cause of death will take place earlier in the death certification/registration process (ie before the cremation application), the MR will no longer need to see the cause of death as the Certificate for Burial or Cremation (the 'green form') will provide the MR with evidence that the scrutiny of the cause of death has already taken place. MRs will be required to confirm that the green form has been provided, and that the scrutiny of form cremation 1 has been completed. Without authorisation from the MR, cremation will not go ahead. The MR will also be required to certify that the 2008 Regulations have been complied with.

	We strongly encourage MRs to work in partnership with local MEs and register offices as this will
	minimise delays and the distress caused to bereaved people.
Is there still a requirement to	As form Cremation 4 is being removed, so too is the right to inspect it. However, ME offices will
make cremation forms	provide a bereaved person with an opportunity to ask questions or raise concerns prior to the
available to the family to	completion of certification and registration of the death.
inspect them?	
What is the role of the ME in	The ME has no role in arranging cremations or burials.
arranging cremation or	
burial?	
Timings	
When will the death	The Government announced on 15 April that the death certification reforms will come into effect
certification reforms come into effect?	on 9 September 2024.
When will stakeholders be	Once the new system comes into effect through secondary legislation on 9 September 2024, all
legally bound to use the new	stakeholders involved in the death certification and registration process will be required to use the
system?	new system.
What happens in cases	The transitional arrangements are set out in The Cremation, Coroners and Notification of Deaths
where someone died before	(England and Wales) (Amendment) Regulations 2024. If a death has not been registered by the 9
the new system commences,	September 2024 commencement date (and if an MCCD has not been signed and there is no duty
but the case is still going	for a coroner to hold an inquest), the arrangements in place before the 9 September 2024 (i.e. the
through the system?	current system) apply.
	Regulation 26 of The MCCD regulations (<u>The Medical Certificate of Cause of Death Regulations 2024</u>
	(legislation.gov.uk)) states that:
	(2) This paragraph applies where, before coming into force of these Regulations -
	(a) the death has not been registered under Part 2 of the 1953 Act;
	(b) prior to the coming into force of these Regulations, a registered medical practitioner had not signed a certificate in the prescribed form in accordance with section 22(1) of the 1953 Act
	(Certificates of cause of death) in relation to the death; and
	(c) a senior coroner is not under a duty to hold an inquest into the death under section 6 of the
	Act.
Implants/medical devices	

How will an MR know that an implant or medical device has been removed where necessary?	Under the new system, information relating to implants/medical devices will be included on the MCCD which is sent to the registrar and then to the MR. There will be a free text box in the MCCD (for non-coronial cases) and in form Cremation 6 (for coronial cases) in which information about implants and devices should be included, including where they are located and what they are.
	Non-coronial cases The AP will be responsible for the completion of the MCCD and will be required to provide accurate medical information, including whether there is a medical device in the body of the deceased person, on that form. The AP will be required to state whether there is either a medical device or implant, and if so, whether it has been removed . In the case of an ME MCCD, the ME will complete the statement about implantable devices. This information will be transferred directly from the MCCD onto a page accompanying the Certificate of Burial or Cremation (the green form), which will be passed on to the MR.
	<u>Coronial cases</u> In coronial cases, where the coroner has information on medical devices or implants present in the body as a result of examining medical notes or completing a post-mortem examination, they should provide this in form Cremation 6.
What information will the MR get about the location and type of implant?	After the death certification forms are implemented, the MCCD will – in non-coronial cases - provide information on the presence of any medical implant/device, type of device and whether it has been removed. There will be a free text box in the MCCD to capture information about medical implants/devices.
	For coronial cases, form Cremation 6 is being amended to enable the coroner to provide any information they may have on medical devices or implants present in the body, where this is available from medical notes or a post-mortem examination.
	A list of battery-operated and other implantable medical devices which may cause problems during a cremation can be found at Annex B of the Guidance for Cremation Authorities and Crematorium Managers, which will be updated and will be available on 9 September 2024 at: <u>https://www.gov.uk/government/publications/crematorium-managers-guidance-on-cremation-regulations-and-forms</u>

What happens if the question on medical devices is blank on the form Cremation 6?	The coroner may have information on medical devices or implants as a result of examining medical notes or completing a post-mortem examination. Where such information is available, we expect that it will be provided in form Cremation 6. In cases where the question on the presence of medical devices is left blank, the MR should make enquiries with the coroner's office. If the coroner's office is not able to assist, the MR may find it useful to get in touch with the referring AP.
Which records will Medical Examiners review?	The <u>National_Medical_Examinergood_practice_guidelines.pdf (england.nhs.uk)</u> guidance explains that MEs offices will carry out a proportionate review of relevant medical records.
Other	
Is there an impact assessment you can point us to that addresses the impact of these changes on bereaved people?	On 15 April 2024, DHSC published an updated summary of the impact of death certification reform and introduction of medical examiners: this can be found at <u>Death certification reform and</u> the introduction of medical examiners: updated summary of impact - GOV.UK (www.gov.uk)
Under the new system, how does a family member object to a cremation taking place?	Currently, if a near relative or executor objects to an application for cremation, the cremation authority will invite the applicant to resolve the issue before applying for cremation. This will not change under the new system.