

# SevernSide

Integrated Urgent Care

## Guidance “Supported Verification” of Life Extinct

## SOP Title

<b>Version:</b>	<b>Owner:</b>	<b>Created:</b>
2.3	Tania Ribeiro	1 <sup>st</sup> January 2014
<b>Published:</b>	<b>Approving Director:</b>	<b>Next Review</b>
1 <sup>st</sup> December 2022	Anne Whitehouse Deputy Medical Director IUC	1 <sup>st</sup> December 2024

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## 1. Introduction

This process may be used by community nurses and allied healthcare professionals to verify life extinct when they have not yet undertaken specific training for autonomous verification of life extinct (VLE) but have the core clinical skills required to examine the patient. Remote support is provided by the Severnside clinician.

If a verifying clinician is trained/ qualified to verify life extinct there should be no requirement for Severnside support or intervention. In this situation, the verifying clinician should ensure that the patient's registered practice is informed of the patient's death.

If a verifying clinician is not trained to undertake VLE, they can phone through to the Severnside Professional Line during the 'out of hours period' to advise that the patient has died. With access to the VLE form, the clinician can undertake the required physical examination and record the findings on the form with support from the Severnside clinician. The Severnside clinician's logs the VLE examination findings provided by the examining clinician on AdastrA, and these case notes act as the formal record of VLE.

## 2. Role of the Severnside Call Handler

- To identify Professional Line calls relating to expected deaths and ask the caller "Is there a nurse/ allied healthcare professional present who is qualified to verify life extinct?"
  - If YES then thank nurse for notification and advise them that they can proceed to verify the patient then contact the undertaker directly, and that the caller must ensure that the GP surgery is contacted the next day. Confirm they are willing and able to do this.
  - If NO, then ask them to complete the "Supported Verification" form and advise them that a Severnside GP/ clinician will call them back to discuss the information recorded on the form. Add the case to the IUC Advice queue, with a 2-hour timeframe and the relevant HCP case tag. The form can be emailed if the HCP does not already have a copy of the form. Advise the clinician to undertake the required examination and complete the form prior to the Severnside clinician's call back.

## 3. Role of the Severnside GP/ clinician

To speak with the Healthcare Professional with the patient and

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- discuss the circumstances leading to death, using EMIS to confirm background information
- confirm that the death was expected, or unexpected but not a surprise
- confirm the presence of the clinical parameters which confirm that death has occurred, as detailed on the form.

If the Severnside clinician is satisfied that the death is expected and there is no cause for concern or doubt

- provide assurance to the community clinician
- provide your name and GMC/ professional registration number for the community HCP's records
- document the examination findings in the Adastra case record, plus the name of the community clinician and the names of anyone else present at the time of death. It is this Adastra record which is the formal documentation of verification of death. The community clinician does not have to return the completed VLE form to you
- close the case using the clinical code "Expected death" or "Death administration", and the informational outcome code "Expected death"
- Select 'yes' for the Practice Liaison Service, and then 'expected death' from the drop-down list. BrisDoc will telephone the practice the next working day to alert them that the patient has died, so that the practice can make arrangements for the death certificate +/- cremation form.

If the Severnside clinician identifies concerns that the death was truly unexpected (ie not 'expected', or 'unexpected but not a surprise') or suspicious, remote or face to face verification should not be undertaken by Severnside. Instead, the death must be referred to the police (as the coroner's representative).

If the Severnside clinician is assured that the death was expected, or unexpected but not a surprise, but has not been able to obtain the required information from the community clinician to enable remote verification, a Severnside home visit for face-to-face verification should be arranged.

### **4. Role of the community clinician examining the deceased patient**

These instructions should be used to support the community clinician

- Only use the form if they have not yet acquired the training and competency to Verify Life Extinct.
- Complete parts 1 and 2 prior to speaking with the Severnside clinician

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- Complete the clinical examination steps outlined in part 2. If you do not feel confident to complete any of these clinical observations then write 'don't know'.
- When the Severnside clinician calls back (usually within 2 hours) to discuss the case with you, they will seek the information you have logged on the form including the examination findings which confirm death. If everything is straightforward, the Severnside clinician will provide details to complete part C

After the call with the Severnside clinician and once the form is complete, you may contact a Funeral Director to arrange for removal of the deceased to the funeral home of choice.

Should the family wish to speak to a clinician over the phone, then this can be offered and may be a useful way to provide extra support to the family and carers.

Severnside will telephone the GP Practice the next working day to ensure that they are aware of the patient's death to make arrangements for the death certificate.

## 6. Related Documents

BrisDoc/ SevernSide Support form for Verification of Life Extinct

## 7. Change Register

Date	Version	Author	Change
08/01/2014	2	BD	Change of format.
30/01/2014	2.1	BD	Updated PLS and PEM information.
01/03/2019	2.2	AW	General Updates
19/10/2022	2.3	AW	General Updates