

Verification of Expected Death (VoED) in Leeds During the COVID-19 Pandemic.



- When people die, It is important that their needs and the needs of their families are prioritised and that they are cared for with the same dignity, respect and high standards in death as they were in life . Health care staff should feel supported to do that.
- There is also a duty to ensure that the risk of exposure to COVID-19 is minimised for other residents/patients, health care staff and the wider public through social distancing and appropriate use of PPE.
- In recognition of this, this document sets out an amended process for the verification of expected death in Leeds. It incorporates national guidance from DHSC, BMA and RCN; the notable changes being the use of VC to support VoED and RNs being able to self-certify competence in VoED following training.
- Family members will not be expected to support any health care professional to verify death. In some instances, it will still be necessary for the HCP to attend to verify death in person. The more holistic needs of the patient and family should be balanced against the wider risk to health from potential exposure to COVID-19.
- At present Funeral Directors are not trained to verify expected death. Funeral Directors expect the death of a person to be verified before they accept that person into their care in West Yorkshire.
- If the registered staff member leading the VoED via VC has any concerns regarding the validity of the checks at any point during the VoED procedure, they will, using their clinical judgement, revert to a face to face visit.
- This is a guide and all health care professionals (including carers) involved should use this in conjunction with their professional judgement and organisational policies at all times.

VoED must be carried out and can be performed by an appropriately trained Nurse, GP or paramedic. Professional groups should refer to the specific clinical requirements expected of them as described by relevant national bodies. If the registered staff member leading the VoED via VC has any concerns regarding the validity of the checks at any point during the VoED procedure, they will, using their clinical judgement, revert to a face to face visit.

Order	VOED to be performed by:	Nursing Home	Residential Home	Own Home	CCB
In Hours					
1st line	Own Nurse trained and either assessed as competent or self-certified as competent.	Y	N	N	Y
2nd	Immedicare VoED pathway. VC supported by clinician in hub. *only If care home is part of Immedicare scheme*	Y*	Y*	N	N
3rd	a - LCH EOL care home facilitators F2F or via VC where appropriate. b - LCH Neighbourhood Team F2F or via VC where appropriate	Y, a	Y, b	Y, b	Y, b
4th	GP from patients practice supporting Nurse (or other on site professional as appropriate) to verify death using video link (not telephone)	Y	Y	Y	Y

Order	VOED to be performed by:	Nursing Home	Residential Home	Own Home	CCB
Out of Hours					
1st line	Own Nurse trained and either assessed as competent or self-certified as competent.	Y	N	N	Y
2nd	Immedicare VoED pathway. VC supported by clinician in hub. *only If care home is part of Immedicare scheme*	Y*	Y*	N	N
3rd	LCH Neighbourhood Nights team F2F or via VC where appropriate on 0300 003 0045 from 21.30-07.00	N	Y	Y	N
4th	GP from LCD (OOH provider) supporting Nurse (or other onsite professional as appropriate) to verify death using VC. OOH services should only be used where the wait for in house/in hours services would be unacceptably long.	N	Y	Y	N

Verification of Expected Death in a Nursing Home

In Hours

Out of Hours

Is there a qualified Nurse on site who is trained and self-assessed as competent to verify death?

Is there a qualified Nurse on site who is trained and self-assessed as competent to verify death?

Yes

No

No

Yes

Verify the death according to the standards set out by the RCN or a local policy.

Call the LCH EOL care team on who will verify death F2F or via VC as appropriate.

If you are part of Telemedicine scheme, contact Immedicare for support to verify death via VC.

Will there be a Nurse on site within a reasonable timeframe who can verify the death?

Verify the death according to the standards set out by the RCN or a local policy.

No

Yes

Contact OOH GP through 111

Await arrival and verify the death according to the standards set out by the RCN or a local policy.

At the earliest opportunity, inform the patient's GP of the death to enable the certification and registration of death processes and any reporting to PHE as indicated by the cause of death.

Verification of Expected Death in a Residential Home

In Hours

Is there a registered Nurse on site who is trained and self-assessed as competent to verify death?

Yes

Verify the death according to the standards set out by the RCN or a local organisational policy.

No

Call the LCH Neighbourhood care team on who will verify death F2F or via VC as appropriate.

If you are part of the Telemedicine scheme, contact Immedicare for support to verify death via VC.

Out of Hours

Is there a registered Nurse on site who is trained and self-assessed as competent to verify death?

No

Call LCH Neighbourhood Nights team who will verify death F2F or via VC as appropriate.

Yes

Verify the death according to the standards set out by the RCN or a local organisational policy.

At the earliest opportunity, inform the patient's GP of the death to enable the certification and registration of death processes and any reporting to PHE as indicated by the cause of death.

Verification of Expected Death in Own Home

In Hours

Is there a qualified Nurse on site who is trained and self-assessed as competent to verify death?

Yes

Verify the death according to the standards set out by the RCN or a local organisational policy.

No

Call the LCH Neighbourhood care team on who will verify death F2F or via VC as appropriate.

Out of Hours

Is there qualified Nurse on site who is trained and self-assessed as competent to verify death?

No

Call LCH Neighbourhood Nights team who will verify death F2F or via VC as appropriate.

Yes

Verify the death according to the standards set out by the RCN or a local organisational policy.

At the earliest opportunity, inform the patient's GP of the death to enable the certification and registration of death processes and any reporting to PHE as indicated by the cause of death.

Verification of Expected Death in Continuing Care Bed

In Hours

Is there qualified Nurse on site who is trained and self-assessed as competent to verify death?

Yes

Verify the death according to the standards set out by the RCN or a local organisational policy.

No

Call the LCH Neighbourhood care team who will verify death F2F or via VC as appropriate.

Out of Hours

Is there qualified Nurse on site who is trained and self-assessed as competent to verify death?

No

Will there be a Nurse on site within a reasonable timeframe who can verify the death?

No

Contact OOH GP through 111

Yes

Yes

Verify the death according to the standards set out by the RCN or a local organisational policy.

At the earliest opportunity, inform the patient's GP of the death to enable the certification and registration of death processes. and any reporting to PHE as indicated by the cause of death.

Health care professionals will be working together to verify expected death and there may be some discrepancy between the requirements expected by associated professional bodies. In anticipation of this, the procedure below references the most stringent requirements so that neither professional risks not adhering to minimum expected standards where a GP is supporting a Nurse without VoED training to verify a death using video consultation (VC).

VoED Clinical Procedure – Equipment you will need: a stethoscope, a pen torch, a watch/clock, blood pressure cuff, pulse oximeter and appropriate [PPE](#)

Role	Heart Sounds	Neurological	Respiratory	Central Pulse
RN Standards	Using a stethoscope, through clothing to confirm absence of cardiac output.	Using Pen torch, confirm absence of pupillary response to light in both eyes.	Observe for any signs of respiratory effort over five minutes.	Palpate for a central pulse and if necessary through the clothing.
GP Standards	Option to use stethoscope to confirm absent heartbeat.	Using pen torch, confirm both pupils are dilated and do not respond to light.	Check no chest wall movements for 3 minutes by observing the chest. Absence of breath sounds using a stethoscope may provide further confirmation.	Locate site of carotid pulse and check that pulse is absent for at least 1 minute.
Video Consultation Standard (for agreement at time of VoED)	RN standard Using a stethoscope, through clothing to confirm absence of cardiac output.	GP standard Using pen torch, confirm both pupils are dilated and do not respond to light.	RN standard Observe for any signs of respiratory effort over five minutes.	GP standard Locate site of carotid pulse and check that pulse is absent for at least 1 minute.
	Non-registered standard Show person's body including a close up of their face	Non-registered standard Use a pen torch to confirm both pupils are dilated and do not respond to light	Non-registered standard Show absent chest movement via VC	Non-registered standard Use a pulse oximeter to confirm absent breathing Use an automatic blood pressure cuff to confirm absent circulation
Repeat steps after 10 minutes				

Medically or Nursing Qualified staff

Use a stethoscope over clothing to confirm absent heartbeat

Confirm absence of central pulse over clothing.

Observe for signs of breathing for over 5 minutes.

Use a pen torch to confirm both pupils are dilated and do not respond to light

Repeat after ten minutes

Medically or Nursing qualified staff supported by non-registered staff

Show person's body including a close up of their face

Use an automatic blood pressure cuff to confirm absent circulation

Use a pen torch to confirm both pupils are dilated and do not respond to light

Show absent chest movement via VC

Use a pulse oximeter to confirm absent breathing

Ensure [appropriate PPE](#) is worn and that equipment used is cleaned appropriately, as set out by [PHE](#), using;

- a combined detergent/disinfectant solution at a dilution of 1,000 parts per million available chlorine (ppm available chlorine (av.cl.)); or
- a general purpose neutral detergent in a solution of warm water followed by a disinfectant solution of 1,000ppm av.cl

Minimum Record Keeping Requirements

1. Full name, date of birth, address and NHS number (if available) of person whose death is being verified
2. Confirmation that the person whose death is being verified has been confirmed
3. Name of person verifying
4. Role of person verifying
5. Who is present
6. Circumstances of death (location, who first noted it, anyone present at the time of death)
7. Outcome of verification, including time of death
8. Any discussions with staff or relatives
9. Any concerns from staff or relatives

*Check local policy for any additional requirements

Additional Information

Wider Requirements for Care leading up to and After Death

This information should be considered alongside the amended requirements for cremation forms, death certification and registration as set out in the Coronavirus bill. Information available here :

<https://www.leedsccg.nhs.uk/about/covid-19-primary-care/resources-for-professionals/end-of-life-resources/registration-of-deaths/>

https://elearning.rcgp.org.uk/pluginfile.php/149457/mod_page/content/35/COVID%20Community%20symptom%20control%20and%20end%20of%20life%20care%20for%20General%20Practice%20-%20Word%20FINAL%20v3.pdf?time=1589368447206

Protecting Health Care Staff and the Public – Social Distancing and PPE

Face to face VoED should only take place when there is no alternative or there is a compelling reason to attend.

Where face to face contact takes place, appropriate **PPE** should be worn at all times :

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/880094/PHE_11651_COVID-19_How_to_work_safely_in_care_homes.pdf

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/878750/T2_poster_Recommended_PPE_for_primary_outpatient_community_and_social_care_by_setting.pdf

Additional Information

Clinical Standards

<https://www.rcgp.org.uk/-/media/Files/Policy/A-Z-policy/2020/covid19/RCGP-guidance/BMA-RCGP-Guidelines-For-Remote210420.ashx?la=en>

<https://www.hospiceuk.org/what-we-offer/publications>

Training and Guidance to support you with the amended VoED process in Leeds

1. To access remote VoED training, please contact:
 - saustin4@nhs.net 0798529177
2. To access Microsoft Teams training:
 - **Ctrl + Click on links below for information on using Microsoft Teams.** NHSmail is a [secure email service](#) which you can use to communicate with health and social care colleagues. For the duration of Covid-19, all NHSmail users have free access to [Microsoft Teams](#).

This document was developed in conjunction with Leeds commissioners, primary care, community health care, care home, Immedicare and city council support and is correct of May 2020.