# Verification of Expected Death with clinical remote support for a care worker during **Covid-19 time of emergency**

The Coronavirus Act 2020 makes special arrangements for verifying an expected death in a community setting, such as care home, supported living accommodation or when a person is supported in their own home by a care worker or personal assistant.





You must be able to answer 'yes' to every question to proceed. If at any point the answer is 'no', refer to the person's GP practice, out of hours service or NHS 111.

Verification of Expected Death (VOED) is carried out to confirm and record that a person has died. Once the verification has taken place, the GP can issue the death certificate at a later stage.



This process is only for verification of expected death when resuscitation has been ruled out.

Has resuscitation been ruled out? Does the person have an Advance Care Plan/DNACPR in place?



You must not take part in verifying an unexpected death, if the death requires reporting to the coroner, if the death is sudden or suspicious, there has been an accident, or if you are aware of or have any doubts or concerns about safeguarding and/or criminal activity.

Have you confirmed that this is an expected death?



Ensure safety at all times of yourself and those involved in the process using the required PPE, in line with infection control and Covid-19 guidance.

Do you have the right equipment available and safe disposal method?

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Follow your organisation's guidance how to care for the deceased person and ensure support for the family, respecting any spiritual or faith practices, where possible in line with the latest Covid-19 safety guidelines and that it is safe to



It is important that no-one feels pressured to verify a death.

Do you feel comfortable and have been deemed competent by your organisation to carry out VOED? Are agreements in place with your organisation and local health and care systems?



An expected death follows acute or gradual deterioration in a person's health often following a long illness and under the Coronavirus Act 2020, an expected death also covers deaths believed due to Covid-19, both confirmed and unconfirmed.

Is this an expected death? Has the person been seen by a healthcare professional within 28 days?



Ensure that you can carry out the VOED in a private, dignified and person-centred way with clinical remote support. Compassionate VOED is a part of good end of life care and must not be seen as a standalone process.

Do you have sufficient time to ensure a compassionate VOED?



After the verification, complete the documentation straight away, factually and accurately.

Do you have the necessary paperwork available?



Make time to reflect on how you and others feel, what went well or was difficult. Ensure good staff care, support and supervision is available.



## How to Verify an Expected Death with clinical remote support



This process assumes that resuscitation has been ruled out!

This guide does not replace existing practice and agreed local pathways for verifying a death in the community but provides an opportunity for safe, timely and clinically supported process during this period of crisis.

If you are not comfortable, have any doubts or concerns or are not equipped to verify, speak to your manager and refer to the person's general practice, another provider of primary medical services or NHS 111.

#### Obtain clinical remote support by calling the person's GP practice or Out of Hours / NHS 111 to report the death

### **Before**



Introduce yourself, ask who they are (It is important to document who was present at the time of death)



Offer your condolences and explain the need to confirm the death



Offer the opportunity for the family to wait outside of the room and ask if they have any concerns or questions



When you are ready, call the GP / healthcare professional for remote video support



Enter the room of the person, introduce yourself 'Hello Mr/Mrs .....my name is ......I am your care worker'.



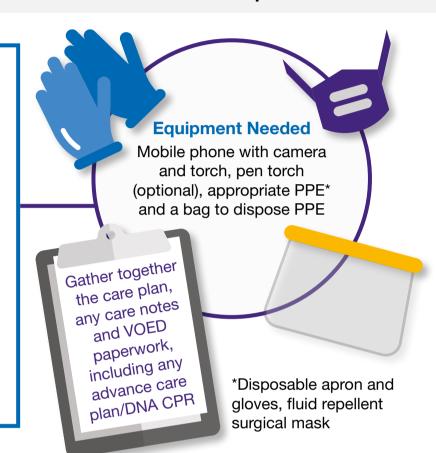
Confirm the identity of the person



Look for any obvious signs of life, check skin colour, are they breathing?



Try to ensure that the person is lying flat (It may not be possible to move them if Rigor Mortis has already set in)



## During - with guidance from a clinician



Check the person's pupils by shining the pen torch into the eyes. The pupils should not react to light and will appear black, fixed and dilated.

Check there is no response to painful stimuli. If you squeeze the muscle between the neck and the shoulder (the trapezius), do they respond?

**Observe:** There should be no response, sound or movement.



Check the chest wall movements for 3 minutes.

**Observe:** Breathing is not present and the chest is not rising and falling. Place one hand on the person's chest. There should be no breath sounds or movement of the deceased person. When a person is moved after death, sometimes there is an exhalation of residual air and a sound can accompany this. This is natural. If a breath occurs, repeat the process.



Locate the carotid pulse on the person's neck to the side of the windpipe using your index and middle fingers. Check that the pulse is absent for at least one minute.

**Observe:** No pulse can be found. The body feels cold to touch. The person has obvious pallor (obvious in all skin tones).

Wait 10 minutes and repeat the above actions



#### After verification



Complete accurate records as required



Ensure care of the deceased and care of the family



Take care of yourself and others involved