

Mortuary Assistance (Out Of Hours)

This guidance does not override the individual responsibility of health professionals to make appropriate decision according to the circumstances of the individual patient in consultation with the patient and/or carer. Health care professionals must be prepared to justify any deviation from this guidance.

Introduction

This policy is to be used as an aid to the 401 and 0903 bleep holders when they are requested to facilitate a viewing of a deceased person out of hours, as in evenings, weekends and bank holidays when the mortician for each site is not on duty.

This guideline is for use by the following staff groups :

All Matrons and Senior nurses who carry the 401 and 0903 Bleeps.

Lead Clinician(s)

Sheryl Thomas

Mortuary Manager
WRH/Alexandra Hospital

Approved by Senior Nurse and Clinical Professionals
Forum

31st March 2021

Review Date:

This is the most current document and is to be used until a revised version is available

17th March 2025

Key amendments to this guideline

Date	Amendment	Approved by:
September 2008	Guideline approved	Senior nurses, midwife & AHP forum
October 2008	Reviewed by Clinical Lead and extended with no amendments made to content	Jane Smith
July 2014	Reviewed by clinical leads and amendments made to pathway to exclude mortician with out of hours viewings unless the police are involved.	Senior nursing team, Mortuary teams, Steve Clarke & Martin Long
November 2016	Documents extended for 12 months as per TMC paper approved on 22 nd July 2015	TMC
November 2017	Document extended whilst under review	TLG
December 2017	Sentence added in at the request of the Coroner	
March 2018	Document extended for 3 months as approved by TLG	TLG
June 2018	Document extended for 3 months as per TLG recommendation	TLG
July 2020	Document extended for 6 months during COVID 19 period	QGC/Gold Meeting
February 2021	Document extended as per Trust agreement 11.02.2021	
March 2021	Document approved for 3 years	SCSD Governance
17 th September 2024	Document extended for 6 months whilst under review.	Sheryl Thomas

Mortuary Assistance (Out of Hours)

Introduction

This policy is to be used as an aid to the 401 bleep holder at the Worcester Royal Hospital (WRH) site and the 0903 bleep holder at the Alexandra Hospital (ALX) site when they are requested to facilitate a viewing of a deceased person out of hours, as in evenings, weekends and bank holidays.

Competencies Required

All Matrons, Senior Nurses/Midwives who carry the 401 Bleep (WRH) and the 0903 Bleep (ALX), and porters to complete mortuary training/refresher training

Patients Covered

This policy will apply to any patient who has died on an acute ward or Unit within a hospital site and has been transported to the hospital mortuary.

Guideline

Porters (those working for WAHT and ISS) will be available to assist the Senior Nurse in making deceased patients placed within the Mortuary, available for "family viewing" with the following provisos in place:

Out of Hours Viewings will only be conducted at the discretion of the Senior Nurse carrying the relevant Bleep. The viewing will be arranged by them and assisted by the portering team. If the viewing can be undertaken on the ward before transfer to the mortuary this must be considered in the first instance.

A diary will be held by the senior nurse on each site and relatives of the deceased can be instructed to phone 01905 763333 (main switchboard) to contact either the 401 bleep holder for WRH or the 0903 bleep holder for ALX, to make an appointment to view either on that day or the following day.

Before the chapel viewing is booked, the senior nurse will ascertain whether the death is a hospital death and the location of the deceased. * Attention is made to deceased who are accommodated in bariatric fridges or temporary fridge units.

Before any chapel viewing can take place in the mortuary department, an **LF-U-MOR-Identification for Viewing** form must be completed. The Senior Nurse will liaise with the next of kin, family or friends of the deceased (usually by telephone) at the time of booking the appointment. It is at this point that the nursing staff will explain to the next of kin, relatives/friends that they will need to complete an identification form (**LF-U-MOR-Identification for Viewing**) prior to entering the chapel of rest/viewing room. This is to ensure that the details given to the nursing staff/porters match the deceased ready for viewing in the chapel of rest/viewing room. The details requested include name, address and date of birth of the deceased. These must match that on the patient pathway and/or death card that accompanies the deceased to the mortuary department.

(The 'out of hours' **LF-U-MOR-Identification for Viewing forms** are in the front of a folder located on the shelf outside of the Chapel of Rest waiting area). Once completed, this form is left on top of the folder so that the mortuary staff can acknowledge that a viewing has taken place outside of 'normal working hours'.

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These viewings must only be offered in extreme circumstances only of sudden unexpected deaths – not as a routine viewing.

Relatives are to be instructed to present themselves to Aconbury Reception at WRH or A&E reception at ALX. The details of the deceased and the name of the relative viewing are to be entered into the diary.

The Senior Nurse (Bleep holders 401 or 0903) will hold the communications in the diary and review at the beginning of her/his early shift on call (Sat, Sun and bank holidays only) to ascertain if relatives need to be contacted or if a viewing has been booked. The Senior Nurse can co-ordinate whether it is necessary for he/she to accompany the relatives.

Ideally a member of staff from the ward should escort the relatives in order to offer continuity.

The Senior Nurse will contact the porters and inform them who needs to be placed in the Chapel of Rest/ Viewing Room and at what time.

The Senior Nurse will then advise the Aconbury Duty Porter on bleep 210 or the Duty Porter at the ALX on bleep 0205 to expect the relatives at the specified time.

The Porter(s), must accompany the Senior Nurse / Ward Nurse to the Mortuary, and must then be supervised at all times whilst in the Mortuary.

The Porter(s) under supervision will take the deceased to the Chapel of Rest/ Viewing Room where the Senior Nurse/Ward Nurse will ensure that the deceased is ready for viewing.

The Senior Nurse will make any judgements concerning the sensitivities of viewing deceased patients and ensure the deceased is covered in a dignified manner. Also that the correct transfer equipment has been used to transport the deceased to the mortuary.

- The deceased must then be laid out in a respectful manner as follows:
 - Place a pillow under the head (this is achieved by nursing staff carefully lifting the head of the deceased and putting the pillow under the head).
 - Place the chapel drapes over the deceased.
 - Turn on the dimmer lights.
 - Ensure the chapel is tidy.
 - Ensure that the chapel door leading to the main mortuary is locked.

It is up to both porters and nurse in attendance to assure themselves that the patient they are transferring to the chapel of rest is the correct patient.

On the arrival of the relatives at Aconbury main reception (WRH) or the A&E reception (ALX), they will be met by the Duty Porter, who will bleep the Senior Nurse on duty (bleep 401 or bleep 0903) and advise that the relatives have arrived. The visiting relatives are requested to complete an **LF-U-MOR-Identification for Viewing** form **PRIOR** to being escorted to the mortuary Chapel of Rest/viewing room. The three points of unique identification is matched to that of the deceased who has been prepared for viewing. Once the form is completed, the nurse will hand it to the porter staff assisting with the viewing. Completed forms are filed alphabetically in the folder. Once completed, this form is left on top of the folder so that the mortuary staff can acknowledge that a viewing has taken place and will then be filed correctly.

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Any requests for viewings out of hours will be for exceptional circumstances only. This will be decided by discussions between the Senior Nurse/Midwife and ward staff and at the discretion of that Senior Nurse/Midwife on duty. Ward staff must not indicate to relatives that this will definitely be possible until the Senior Nurse has agreed and liaised with the relevant Portering team to arrange a suitable time. This is particularly important as the Senior Nurse or Night Nurse Practitioner will have competing commitments during their shift. On call mortuary staff are available through switchboard if needed.

The Trust must accept that whilst Porter(s) are carrying out these duties, other duties cannot be undertaken. Therefore judgements will need to be taken by the Senior Nurse with regard to priorities.

Please Note

All baby and paediatric viewings must be dealt with by specialty nurses in their areas, as the bereaved relatives will need specific support from experienced nurse/midwife who deals with these issues as part of their role.

All babies and children who have died in A&E

Prior to agreeing to any SUDIC viewings, the A& E matron will liaise with the SUDIC team to confirm if this is possible. Parents and close relatives who have the parent's permission to view these babies and children must be accompanied to the mortuary by a member of A&E nursing staff. This has been agreed by A&E Matron in order to maintain continuity of care for the bereaved families. The A&E nurse that accompanies them must stay with the family throughout their time in the mortuary. Mortuary staff are available if needed for such cases. All requests for these viewings should go through the 401 bleep holder or 0903 bleep holder as usual. The 401 and 0903 bleep holders will liaise with A&E staff to arrange the viewing. Property must not be removed and taken unless agreed by the SUDIC team.

Relatives who wish to photograph the deceased.

As long as the relative making this request is the deceased 'next of kin' then we must allow their request to be agreed to.

Children viewing the deceased

There is no age limit on children viewing their deceased relatives. This decision must be made by the parents of the child and if they wish for their child to view the deceased we can agree to their request.

Training

Relevant training for the senior nurses and portering staff can be arranged on an individual basis with the mortuary manager at either the WRH or ALX site. Refresher training is carried out every TWO years. Bereavement support for families is available and information on the Trust website.

All bleep '401' s who follow this policy must have attended training in the mortuary department to comply with HTA guidelines (as an area of best practise).

All porters who partake in assisting with viewings out of hours must attend mortuary training to comply with HTA guidelines (certificate and training register completed).

Procedures

- All out of hours viewings are for hospital deaths ONLY.
- All staff must sign in and out of the mortuary visitors book (so we are aware of any mortuary 'out of hours' events).

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- The mortuary 'Identification for Viewing' form must be completed by the relatives/NOK BEFORE any chapel viewings take place. These are located in the body store area of the mortuary . Bleep '401' & '0903' & site managers will be familiar with these forms if they have attended mortuary training sessions. These are completed to comply with HTA guidelines. (HTA – Human Tissue Authority).
- **WRH ONLY**- When the temporary fridge unit is in use (winter pressures), the Chapel of Rest is not in use.
- Bariatric viewings cannot be accommodated out of hours due to Health & Safety /Manual Handling.
- Under **NO CIRCUMSTANCES** are viewings carried out in the fridge/body store area of the mortuary department.
- Deceased that are accommodated in the temporary units, cannot be viewed due to Health & Safety /Manual Handling.
- There may be limitations to bariatric viewings.
- The mortuary staff **MUST** be made aware of any requests for early release. This is to ensure that there is no coronial involvement.
- If police make ANY requests regarding deceased, please contact the on-call mortuary technician for advice. No access is given unless mortuary staff are aware of the reason.
- There is an on-call mortuary technician available for assistance 24/7 via switchboard.

REQUESTS FOR VIEWING OF DECEASED BY POLICE

All requests from any Police Officer to view a deceased individual that has not been an inpatient on a ward or died in A&E must be directed to the on call mortuary technician on the relevant site in the first instance who will liaise with the Police and Coroner. The coroner has very strict guidelines as to how identification and viewing must be carried out and the Coroner will liaise with the on-call pathologist.

Hospital nursing staff must not get involved in these cases. Please advise any Police Officer that requests a viewing or identification to contact the Coroner.

Contribution List

Key individuals involved in developing the document

Name	Designation
Celina Eves	Interim Deputy CNO
Matrons @ WRH and ALX	
Martin Long	Head of Facilities
Sheryl Thomas/Jessica Arnold	Mortuary Dept.
Divisonal Directors of Nursing /Midwifery	

Circulated to the following individuals for comments

Name	Designation
All 401 and 0903 Bleep holders	Sisters/Charge nurses

Circulated to the following CD's/Heads of dept for comments from their directorates / departments

Name	Directorate / Department
Sheryl Thomas/Jessica Arnold	Mortuary Department
Martin Long	Head of Facilities

Circulated to the chair of the following committee's / groups for comments

Name	Committee / group
Senior Nurse Forum	
Clinical Professionals Forum	

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Supporting Document 1 - Equality Impact Assessment Tool

To be completed by the key document author and included as an appendix to key document when submitted to the appropriate committee for consideration and approval.

Please complete assessment form on next page;



Herefordshire & Worcestershire STP - Equality Impact Assessment (EIA) Form
Please read EIA guidelines when completing this form

Section 1 - Name of Organisation (please tick)

Herefordshire & Worcestershire STP		Herefordshire Council		Herefordshire CCG	
Worcestershire Acute Hospitals NHS Trust	X	Worcestershire County Council		Worcestershire CCGs	
Worcestershire Health and Care NHS Trust		Wye Valley NHS Trust		Other (please state)	

Name of Lead for Activity	
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Details of individuals completing this assessment	Name	Job title	e-mail contact
	Sheryl Thomas	Mortuary Manager	Sheryl.thomas1@nhs.net
Date assessment completed	31 st March 2021		

Section 2

Activity being assessed (e.g. policy/procedure, document, service redesign, policy, strategy etc.)	Title: Mortuary Assistance (Out of Hours)- WAH-PAT-002
What is the aim, purpose and/or intended outcomes of this Activity?	To be used as an aid to the 401 bleep holder at the Worcester Royal Hospital (WRH) site and the 0903 bleep holder at the Alexandra Hospital (ALX) site when they are requested to facilitate a viewing of a deceased person out of hours, as in evenings, weekends and bank holidays.

Who will be affected by the development & implementation of this activity?	<input checked="" type="checkbox"/> Service User <input type="checkbox"/> Patient <input type="checkbox"/> Carers <input type="checkbox"/> Visitors	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Communities <input type="checkbox"/> Other _____ <input checked="" type="checkbox"/>
Is this:	<input checked="" type="checkbox"/> Review of an existing activity <input type="checkbox"/> New activity <input type="checkbox"/> Planning to withdraw or reduce a service, activity or presence?	
What information and evidence have you reviewed to help inform this assessment? (Please name sources, eg demographic information for patients / services / staff groups affected, complaints etc.)	Guidelines - regarding bariatric viewings. HTA- Guidelines- LF-U-MOR Identification for viewing document added to the policy as a HTA area of best practice.	
Summary of engagement or consultation undertaken (e.g. who and how have you engaged with, or why do you believe this is not required)	Document circulated to following groups for comments; <ul style="list-style-type: none"> • Mortuary manager • Matrons @ WRH and ALX • CNO • Head of Facilities 	
Summary of relevant findings	All comments received were actioned.	

Section 3

Please consider the potential impact of this activity (during development & implementation) on each of the equality groups outlined below. **Please tick one or more impact box below for each Equality Group and explain your rationale.**

Please note it is possible for the potential impact to be both positive and negative within the same equality group and this should be recorded. Remember to consider the impact on e.g. staff, public, patients, carers etc. in these equality groups.

Equality Group	Potential <u>positive</u> impact	Potential <u>neutral</u> impact	Potential <u>negative</u> impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Age	X			This policy takes age into account. All bleep '401' s who follow this policy have attended training in the mortuary department to comply with HTA guidelines (as an area of best practise). All porters who partake in assisting with viewings out of hours have attended mortuary training to comply with HTA guidelines (certificate and training register completed).
Disability		X		This guideline takes disability into account. All bleep '401' s who follow this policy have attended training in the mortuary department to comply with HTA guidelines (as an area of best practise). All porters who partake in assisting with viewings out of hours have attended

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Equality Group	Potential <u>positive</u> impact	Potential <u>neutral</u> impact	Potential <u>negative</u> impact	Please explain your reasons for any potential positive, neutral or negative impact identified
				mortuary training to comply with HTA guidelines (certificate and training register completed).
Gender Reassignment		X		This policy refers to anyone regardless of gender.
Marriage & Civil Partnerships		X		This policy takes marriage and civil partnerships into account. All bleep '401' s who follow this policy have attended training in the mortuary department to comply with HTA guidelines (as an area of best practise). All porters who partake in assisting with viewings out of hours have attended mortuary training to comply with HTA guidelines (certificate and training register completed).
Pregnancy & Maternity		X		This policy is not specific to pregnancy & maternity services.
Race including Traveling Communities		X		This policy takes race and travelling communities into account. Out of hours viewings and early releases can be facilitated following relevant procedures. All bleep '401's who follow this policy have attended training in the mortuary department to comply with HTA guidelines (as an area of best practise).
Religion & Belief	X			This policy takes religion and belief into account. Out of hours viewings and early releases can be facilitated following relevant procedures. All bleep '401's who follow this policy have attended training in the mortuary department to comply with HTA guidelines (as an area of best practise).
Sex		X		
Sexual Orientation		X		
Other Vulnerable and Disadvantaged Groups (e.g. carers; care leavers; homeless; Social/Economic deprivation, travelling communities etc.)		X		

Equality Group	Potential <u>positive</u> impact	Potential <u>neutral</u> impact	Potential <u>negative</u> impact	Please explain your reasons for any potential positive, neutral or negative impact identified
Health Inequalities (any preventable, unfair & unjust differences in health status between groups, populations or individuals that arise from the unequal distribution of social, environmental & economic conditions within societies)		X		

Section 4

What actions will you take to mitigate any potential negative impacts?	Risk identified	Actions required to reduce / eliminate negative impact	Who will lead on the action?	Timeframe
How will you monitor these actions?				
When will you review this EIA? (e.g in a service redesign, this EIA should be revisited regularly throughout the design & implementation)	This EIA will be reviewed alongside the agreed policy review date.			

Section 5 - Please read and agree to the following Equality Statement

1. Equality Statement

1.1. All public bodies have a statutory duty under the Equality Act 2010 to set out arrangements to assess and consult on how their policies and functions impact on the 9 protected characteristics: Age; Disability; Gender Reassignment; Marriage & Civil Partnership; Pregnancy & Maternity; Race; Religion & Belief; Sex; Sexual Orientation

1.2. Our Organisations will challenge discrimination, promote equality, respect human rights, and aims to design and implement services, policies and measures that meet the diverse needs of our service, and population, ensuring that none are placed at a disadvantage over others.

1.3. All staff are expected to deliver services and provide services and care in a manner which respects the individuality of service users, patients, carer's etc, and as such treat them and members of the workforce respectfully, paying due regard to the 9 protected characteristics.

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**Worcestershire
Acute Hospitals**
NHS Trust

Signature of person completing EIA	Sheryl Thomas
Date signed	10/06/2021
Comments:	
Signature of person the Leader Person for this activity	Sheryl Thomas
Date signed	10/06/2021
Comments:	



Supporting Document 2 – Financial Impact Assessment

To be completed by the key document author and attached to key document when submitted to the appropriate committee for consideration and approval.

	Title of document:	Yes/No
1.	Does the implementation of this document require any additional Capital resources	NO
2.	Does the implementation of this document require additional revenue	NO
3.	Does the implementation of this document require additional manpower	NO
4.	Does the implementation of this document release any manpower costs through a change in practice	NO
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	NO
	Other comments:	

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval