

Verification and certification of death in community palliative care

Effective: May 2021

**Gippsland Region
Palliative Care Consortium
Clinical Practice Group**

Policy No.

Title

Verification and Certification of Death in community
palliative care setting

Keywords

Guideline, Palliative, Care, Clinical, Practice, Death,
Certification, Verification

Ratified

GRPCC Clinical Practice Group

Effective Date

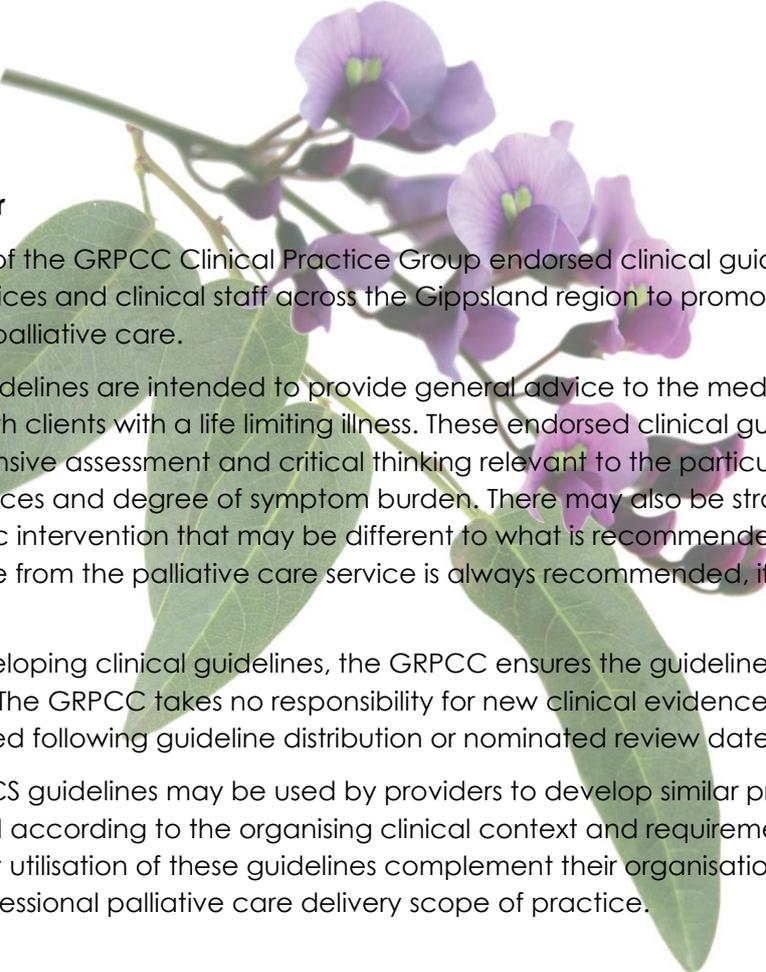
Review Date

Purpose

This policy has been endorsed by the GRPCC Clinical
Practice Group and is based on current evidence-based
practice and should be used to inform clinical practice,
policies and procedures in health services. The intent
of the policy is to promote region wide adoption of
best practice. Enquiries can be directed to GRPCC by
email enquiries@grpcc.com.au or phone 03 56230684

Pages

4



Disclaimer

The intent of the GRPCC Clinical Practice Group endorsed clinical guidelines is to make them available to health services and clinical staff across the Gippsland region to promote evidence-based practice in when delivering palliative care.

Clinical guidelines are intended to provide general advice to the medical, nursing, and allied health staff working with clients with a life limiting illness. These endorsed clinical guidelines are not a substitute to comprehensive assessment and critical thinking relevant to the particular patient's individual clinical circumstances and degree of symptom burden. There may also be strong clinical evidence for choosing a therapeutic intervention that may be different to what is recommended in these guidelines. Timely consultation and advice from the palliative care service is always recommended, if appropriate, when using these guidelines.

When developing clinical guidelines, the GRPCC ensures the guidelines content is accurate and based on evidence. The GRPCC takes no responsibility for new clinical evidence or information that become available or be published following guideline distribution or nominated review date.

The GRPCCS guidelines may be used by providers to develop similar protocols and procedures that can be customised according to the organising clinical context and requirements. Health organisations must also ensure that utilisation of these guidelines complement their organisational governance structure including health professional palliative care delivery scope of practice.

Purpose of this guideline

To facilitate timely verification and certification of death

To alleviate any unnecessary delay in the movement of the deceased person from place of death to a suitable location (funeral home, mortuary)

Definitions

Verification of death

Verification of death refers to establishing that death has occurred by undertaking a clinical assessment of a body (including VAD).

Under the Health Practitioner Regulation National Law (Victoria) Act 2009, the following registered health professionals (registered with relevant AHPRA board) can verify death:

- Medical Practitioner,
- Registered Nurse or Midwife
- Paramedic

Verification of death is a voluntary act, and is not mandated for nurses, midwives or paramedics. Health professions must follow their organisational policies and procedures with regard to verification of death. There is no legal requirement for the funeral industry to obtain written verification of death before moving the deceased body to a more appropriate location.

Certification of Death

Certification of death refers to the completion of a Medical Certificate of Cause of Death (MCCD) and subsequent notification of the Registrar at Births, Deaths and Marriages **by the doctor** who was responsible for the patient's medical care immediately before death, **or** who examines the body of a deceased person after death. The report to the registrar must be made within 48 hours of the death and must be on the prescribed form. The doctor who completed the MCCD is also required to give the certificate to the funeral director or other person who will be arranging for the disposal of the human remains (Births, Deaths and Marriages Registration Act 1996, section 37).

'Reportable Deaths' and 'Reviewable Deaths'

If a person has reasonable grounds to believe a death in Victoria is 'reportable' or 'reviewable', within the meaning of the Coroners Act 1985, the coroner should be contacted. Further information available from DHHS

<https://www2.health.vic.gov.au/about/publications/policiesandguidelines/verification-death>

Arrangements if patient has COVID 19 (confirmed or suspected)

DHHS provides guidance on handling the bodies of those suspected or confirmed to have COVID-19, irrespective of cause of death.

http://www.grpcc.com.au/wp-content/uploads/2021/02/COVID-19-guidance-handling-body-of-deceased-person_State_EmcOne_20-may-2020.pdf

This guidance may mean that not all religious traditions and practices for the deceased can be conducted safely. These measures, while distressing, protect workers and the broader community from further transmission of COVID-19. Religious groups are asked to carefully read this document and consider how their practices may be performed safely.

Additional information for health services and health professionals on care of the body

<https://www.dhhs.vic.gov.au/health-services-and-professionals-coronavirus-covid-19> (follow link to *Infection Control Guidelines, version 5, Oct 2020, p 46*)

Verification of death by Registered Nurse in a community setting

1.1. The community palliative care service needs to establish:

- If arrangements to nominate a community nurse for verification of the death of a community palliative care client are documented in the medical record (as per organisational policies and procedures; See Appendix 2)
- The LMO arrangements for verification of death and completion of MCCD to certify death, and notify death to the Registrar at Birth, Deaths and Marriages (see Appendix 1).
- There is no legal requirement for the funeral industry to obtain written verification of death before moving the deceased body to a more appropriate location. However, services need to enquire with the nominated funeral directors if they require verification prior to the removal of the deceased.

1.2. If a Registered Nurse is verifying death, they must examine the patient for signs of life. The suite of clinical determinants below act as a minimum guideline for the clinical assessment necessary to establish that death has occurred. Professional clinical judgement is required to make this determination and unique circumstances may warrant additional checks over and above the minimum guidelines provided below:

- No palpable pulse, and
- No heart sounds heard for 2 minutes, and
- No breath sounds heard for 2 minutes, and
- Fixed (non-responsive to light) and dilated pupils, and
- No response to centralised stimuli (e.g. trapezius muscle squeeze, supraorbital pressure, mandibular pressure or the common sternal rub), and
- No motor (withdrawal) response or facial grimace in response to painful stimulus (e.g. pinching inner aspect of the elbow)
- Optional: ECG rhythm strip shows no rhythm.

(See Appendix 2)

1.3. Documentation of verification of death by a Registered Nurse must be filed in the patient's history and include:

- Name and signature of the Registered Nurse verifying the death
- Professional title of the Registered Nurse verifying the death
- The clinical determinants used to verify the death (as above)
- The date of verification
- The time of verification
- The location of where the assessment took place.

(See Appendix 2)

- 1.4. Refer to organisational policies and procedures regarding reporting of verification of death, and ongoing support and debriefing for staff.

References

1. Births, Deaths and Marriages Registration Act 1996 Department of Justice, Victoria. Version No. 43 of 1996. Version incorporating amendments as at 1 December 2008.
<https://www.legislation.vic.gov.au/in-force/acts/births-deaths-and-marriages-registration-act-1996/039>
2. Guidance Note for the "Verification of Death" Department of Health and Human Services Victoria. September 2019
<https://www2.health.vic.gov.au/about/publications/policiesandguidelines/verification-death>
3. DHHS Victoria Infection Control Guidelines
<https://www.dhhs.vic.gov.au/health-services-and-professionals-coronavirus-covid-19>
4. DHHS Guidance for handling a body of deceased person with confirmed or suspected COVID 19
http://www.grpcc.com.au/wp-content/uploads/2021/02/COVID-19-guidance-handling-body-of-deceased-person_State_EmcOne_20-may-2020.pdf

Appendix 2

Health service logo	Surname:	UR:
	First Name:	DOB
	Address:	DR:
	AFFIX PATIENT ID LABEL	

Plan for verification and certification of death

To be completed by the client's treating General Practitioner on admission to the Community Palliative Care service and updated as required

When _____ dies

- I wish to be contacted at the time and I will verify death and complete Medical Certificate of Cause of Death (MCCD) to certify death
- I nominate that the community nurse verifies death and contacts me/the clinic to complete Medical Certificate of Cause of Death (MCCD) to certify death
- I wish to be contacted at the time and I will make arrangements for verification of death and completion of MCCD to certify death
- Please contact the 'on call' doctor at my clinic
- Other _____

Further instructions of care

Doctors Name _____ Clinic _____

Doctor's signature: _____ Date _____

Acknowledgements: Central Gippsland Health HOME NURSING: Doctors Specific Orders

Appendix 2

Verification of Death by Registered Nurse

Patient's Name _____ DOB _____

Address at which death is verified

Date and Time of Verification of Death

The Clinical Determinants used to verify the death

Clinical Determinant	Present (✓, X, N/A)	Initials
No palpable pulse, and		
No heart sounds heard for 2 minutes, and		
No breath sounds heard for 2 minutes, and		
Fixed (non-responsive to light) and dilated pupils, and		
No response to centralised stimuli (e.g. trapezius muscle squeeze, supraorbital pressure, mandibular pressure or the common sternal rub), and		
No motor (withdrawal) response or facial grimace in response to painful stimulus (e.g. pinching inner aspect of the elbow)		
Optional: ECG rhythm strip shows no rhythm.		

This verification of death is made by

Full Name of Registered Nurse _____

Signature of Registered Nurse _____