

Response ID ANON-UT55-RRZD-N

Submitted to Introduction of Medical Examiners and Reforms to Death Certification in England and Wales: Policy and Draft Regulations Submitted on 2016-06-13 16:27:33

Introduction

i What is your name?

Nasima Begum

ii What is your email address? Email: mediaoffice@mcb.org.uk

iii Please choose the capacity in which you are responding Religious Faith Groups If other,

:

Muslim Council of Britain

v Please also say what your role is?

Media Officer

1 Do you agree that an individual should be prescribed in legislation as being responsible to pay, or to arrange to have paid the medical examiner fee?

No

2 Should the person prescribed be the individual that collects the MCCD from the medical examiner, or the death registration informant?

No

3 Should the regulations exempt an official or employee who acts as an informant, as being responsible to pay, or to arrange to have paid the medical examiner fee?

Yes

4 Should there be a 28 day or three month period for payment of the medical examiner fee?

Yes 3 months

5 The proposed model contract is to facilitate an agreement between a local funeral service to collect the medical examiner fee on behalf of a local authority, for a small administrative charge. The bereaved would see the fee itemised in the funeral director's bill. As a funeral service provider would you be supportive of this proposed arrangement?

No

6 Do you believe the provision of "administrative and clinical information" set out in schedule 1 is necessary and sufficient for all deaths, either for a medical examiner's scrutiny or for a coroner's investigation? If not, what would you add or delete and why?

No

Please add your comments:

Early release of the deceased body is necessary on religious ground. To ensure that the process runs without difficulty this need should be indicated prominently on all documents to ensure that there is no delay in the release of the body.

7 Do you agree that the medical examiner should have discretion about whether an independent non-forensic external examination of the body is necessary?

No

8 In your view, are there sufficient safeguards if a person without a medical qualification but with suitable expertise and sufficient independence carries out a non-forensic external examination of the body on behalf of the medical examiner?

No

Please add comments:

From a religious perspective it is important that examination of the deceased body is kept to an absolute minimum and undertaken only when essential. It would be a matter of concern for the Muslim community if examination of the deceased body was carried out by non-medical personnel. Please also note sensitivities with respect to gender ie a deceased body being examined by a member of the opposite sex - it would be a matter of great concern if a deceased female body was examined by a male and vice versa . This is extremely sensitive for the community.

9 Under regulation 26, do you agree that the medical examiner process should be suspended during a period of emergency?

Yes

10 Do you agree that during a period of emergency any registered medical practitioner could certify the cause of death in the absence of a qualified attending practitioner?

Yes

11 Are the proposed certificates and medical examiner forms set out in schedules 2- 7 fit for purpose?

No

If not, please say why.

Please add comments:

There should be a designated area on the form to indicate the need to meet religious requirements and documentation that they have been considered:

- early release of the body,
- in case of referrals for Coroner PMs, there should be a facility to indicate whether the family has been offered the option of non-invasive PM.
- document family wishes and whether that has been met
- if external examination is to be conducted by non-medical staff, there should be documentation that gender considerations have been observed.

12 In relation to regulation 5 of the NME regulations, what other aspects should standards cover for monitoring medical examiners' levels of performance?

Please provide details:

There is a need to conduct regular audits to ascertain that the religious and other requirements are being implemented.

13 Do you agree with the estimates of costs and benefits of the death certification reforms set out in the consultation impact assessment?

Yes -

Please add comment:

Agree with the figures but the requirement to pay charges will be an additional burden on Muslim communities who always bury their deceased.

14 Do you agree that a death should be notifiable if it is “otherwise unnatural”?

Yes

15 Do you believe there is sufficient understanding between members of the medical and coronial professions as to the meaning of “unnatural” and that further definition is not required? If not, we would be grateful for suggestions as to what the guidance may include.

Yes

Please add comment:

16 Do you agree that provision needs to be made with regard to poisoning, given that cases of poisoning are rare?

Yes

17 Do you believe that “poisoning, the use of a controlled drug, medicinal product or toxic chemical” sufficiently covers all such circumstances of death? If not, should the guidance be broadened?

Yes

Please add comment:

18 Do you believe there is a sufficient understanding of “neglect”? If not, should this be made clearer in the draft regulations rather than guidance?

No

Please provide details:

There should be clarity on what constitutes ‘neglect’ both in the guidance and draft regulations.

19 Do you agree that regulation 3(2)(e) - “occurred as a result of an injury or disease received during, or attributable to, the course of the deceased person’s work” - is clear that it includes any death that has occurred as a result of current or former work undertaken by the deceased, including cases such as mesothelioma or other asbestos related cases? If not, we would be grateful for alternative suggestions.

No

Please add comments:

20 Do you agree that it should be possible to make notifications orally; but that where an oral notification is made the information must be recorded in writing and confirmed?

Yes

21 Do you agree that regulation 3(6) should prevent duplication of notification? We would be particularly grateful for views on how this would work in a surgical environment.

Yes

Please provide details:

22 Do you have any other comments about the draft Regulations?

Yes

Please provide comments: There should be a fixed time line between when a GP examines a body and a medical examiner being available. We can envisage problems in the sense that a GP will be available but a Medical Examiner may not. It should state in a more emphasized manner the need to be sensitive about faith requirements.

23 In relation to the guidance, do you agree with the examples used under each category of death? If not, we should be grateful for further examples or suggestions for definitions.

Yes

Please provide comments:

24 Also in relation to the guidance, do you agree that no specific reference is needed as to whether certain deaths will be subject to jury inquests or not (such as those that have occurred under state detention)?

No

25 Do you have any other comments about the guidance?

Yes

Please provide comments:

It is noted that there was no representation from faith communities on the Steering Group. There is a need for assurance that the new system will meet the requirements of faith communities. A more robust impact assessment and engagement with faith communities is recommended.

26 After the changes are brought in, there will be no provision for medical examiners to be involved in the certification of the cremation of body parts. Do you agree that the requirement to complete a statutory application form and provide a registration document and a certificate from the hospital trust or other authority holding the body parts will provide sufficient scrutiny prior to the cremation of body parts? If not, what further scrutiny do you think would be needed, in the absence of medical referees?

Not Applicable

Please add comments:

No comment

27 Do you agree that this proposal will provide a sufficient level of scrutiny in stillbirth cases? If not, what further scrutiny do you think would be needed, in the absence of medical referees?

Not Answered

MoJ - Cremation regulations questions:

No comment.

Adequate training of staff and appropriate monitoring will be necessary to ensure implementation. Many hospitals include this as part of their induction process for new appointees including junior doctors but there are inconsistencies among hospitals. This need to be addressed.

28 Do you agree that investigation and clearance for cremation by a coroner provides sufficient assurance for cremation to take place without a further check by a medical referee based at the crematorium? If not, what further scrutiny do you think would be needed, in the absence of medical referees?

Not Applicable

Please add comments:

No comment