**Death In the Community in Nottinghamshire Guidance for GP OOH providers ( NEMS, CNCS)**

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| **EXPECTED DEATH/DEATH IS NOT UNEXPECTED**  **Definition**  There is documentary evidence that the patient was nearing the end of life and in receipt of end of life care in the form of end of life (EOL)/advanced care plans held in the patient’s medical records at their GP Practice (often recorded as Gold Standards Framework ‘yellow/amber’ status)  Or Primary Care Records  Or Special Patient Notes held by the GP OOH provider  Or on the EPaCCS register.  **Note: DNA CPR is not evidence that death is expected/not unexpected.** | **UNEXPECTED DEATH**  **Definition**  No documentary evidence as in box opposite.  **Note: DNA CPR is not evidence that death is expected/not unexpected.** |
| No need to inform the Police | Police must be informed |
| Establish whether the deceased was subject to a Deprivation of Liberty Safeguarding Authorisation (DOLS).  If **YES** GP OOH to inform deceased’s GP so they can report to Coroner’s Office on the next working day | Establish whether the deceased was subject to a Deprivation of Liberty Safeguarding Authorisation (DOLS).  If **YES** GP OOH to inform deceased’s GP so they can report to Coroner’s Office next working day |
| GP OOH to establish whether appropriately qualified person can ‘pronounce death’ or confirm death e.g. paramedic/nurse including a nurse in a nursing home. | Appropriate qualified person may ‘pronounce’ or confirm death e.g. GP/paramedic /nurse. This will include a nurse in a nursing home. |
| If not, GP OOH clinician visits to confirm death | If not, GP OOH clinician visits to confirm death |
| Family funeral Director can be called to remove the body to their premises. | Police determine whether or not a Funeral Director can be called to remove the body or whether the body needs to be removed by the Co-Op for transportation to QMC mortuary. |
| GP OOH consultation notes sent back to the patient’s own GP practice. | GP OOH consultation notes sent back to the patient’s own GP practice. |
| HM Coroner is prepared to take calls on the emergency phone (weekends, bank holidays and weekdays between 5pm and 8am) to provide advice on any specific if required. Before making a call, please read the guidance relevant to your role/organisation. Remember that this is an emergency service and not for general enquiries. | |

***DOL + expected death/death not unexpected = no police ; Unexpected death , with or without DoL = police required.***

**Death In the Community in Nottinghamshire Guidance for EMAS**

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| **EXPECTED DEATH/DEATH IS NOT UNEXPECTED**  **Definition**  There is documentary evidence that the patient was nearing the end of life and in receipt of end of life care in the form of end of life/advanced care plans held in the patient’s medical records at their GP Practice (often recorded as Gold Standards Framework ‘yellow/amber’ status  Or Primary Care Records  Or Special Patient Notes held by the GP OOH provider  Or on the EPaCCS register.  **Note: DNA CPR is not evidence that death is expected/not unexpected.** | **UNEXPECTED DEATH**  **Definition**  No documentary evidence as in box opposite.  **Note: DNA CPR is not evidence that death is expected/not unexpected.** |
| During normal GP surgery opening hours, contact the GP practice of the deceased to establish the position in terms of evidence. |  |
| If you think that NEMS GP OOH service may hold this information, ring NEMS on 0115 8462397. This number is answered 24/7. |  |
| If the deceased’s own GP practice or NEMS hold documentary evidence that death was expected/not unexpected, there is no need to inform the Police. | Police must be informed – EMAS to remain on the scene until the police arrive |
| Establish whether the deceased was subject to a Deprivation of Liberty Safeguarding Authorisation (DOLS) and document this on the death report that is sent back to HM Coroner’s Office | Establish whether the deceased was subject to a Deprivation of Liberty Safeguarding Authorisation (DOLS) and document this on the ‘death form’ that is sent back to HM Coroner’s Office. |
| Family funeral director can be called to remove the body to their premises. | Police determine whether or not a Funeral Director can be called to remove the body or whether the body needs to be removed by the Co-Op for transportation to the QMC mortuary. |
| HM Coroner is prepared to take calls on the emergency phone (weekends, bank holidays and weekdays between 5pm and 8am) to provide advice on any specific if required. Before making a call, please read the guidance relevant to your role/organisation. Remember that this is an emergency service and not for general enquiries. | |

***DOL + expected/not unexpected death = no police ; Unexpected death , with or without DoL = police required.***

**Death In the Community in Nottinghamshire Guidance for GP Practices**

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| **EXPECTED DEATH/DEATH IS NOT UNEXPECTED**  **Definition**  There is documentary evidence that the patient was nearing the end of life and in receipt of end of life care in the form of end of life/advanced care plans held in the patient’s medical records at their GP Practice (often recorded as Gold Standards Framework ‘yellow/amber’ status ;  Or Special Patient Notes held by the GP OOH provider  Or Primary Care Records  Or on the EPaCCS register.  **Note: DNA CPR is not evidence that death is expected/not unexpected.** | **UNEXPECTED DEATH**  **Definition**  No documentary evidence as in box opposite.  **Note: DNA CPR is not evidence that death is expected/not unexpected.** |
| No need to inform the Police | Police must be informed |
| GP/Nurse/Paramedic to ‘pronounce’ or confirm death. | GP/Nurse/Paramedic to ‘pronounce’ or confirm death. |
| Establish whether the deceased was subject to a Deprivation of Liberty Safeguarding Authorisation (DOLS). | Establish whether the deceased was subject to a Deprivation of Liberty Safeguarding Authorisation (DOLS). |
| If **YES**, the death must be referred to HM Coroner’s office and it will not be possible to issue a Medical Certificate of Cause of Death, even if the cause is known. | If **YES**, the death must be referred to HM Coroner’s office and it will not be possible to issue a Medical Certificate of Cause of Death, even if the cause is known. |
| Family funeral director can be called to remove the body to their premises. | Police determine whether or not a Funeral Director can be called to remove the body or whether the body needs to be removed by the Co-Op for transportation to QMC mortuary. |
| If there is no DOLS authorisation, a death may be certified by a medical attendant who treated the patient during their last illness. The doctor may issue a death certificate when he/she has seen the patient within 14 days of death **OR** if the doctor has treated the patient during their last illness and seen the patient after death. If there is no GP in the practice who has treated the patient in life, the death must be reported to the coroner. The death ought to be reported electronically in the first instance by completing the coroner’s referral form and sending the form via secure e-mail to the coroner’s office. <http://www.nottinghamcity.gov.uk/coroners> | The Coroner will give advice on whether the GP who has attended the patient can provide a medical certificate |
| HM Coroner is prepared to take calls on the emergency phone (weekends, bank holidays and weekdays between 5pm and 8am) to provide advice on any specific if required. Before making a call, please read the guidance relevant to your role/organisation. Remember that this is an emergency service and not for general enquiries. | |

***DOL + expected/not unexpected death = no police ; Unexpected death , with or without DoL = police required.***