

A Brief Summary Of UHL Policy On

Taking a Deceased Child Home

(where registrable birth)

Introduction

Crescent Funerals has been working closely for some time with UHL Bereavement Midwife, Rebecca Crook, providing vital input into the needs of bereaved families of infants, babies and young children.

The main policy "*Taking a Deceased Child Home (Where Registrable Death)*" has been developed BY UHL to provide information for their clinical staff regarding the process that needs to be followed to enable the smooth transfer of a deceased infant, child or young person from UHL directly to the family's chosen place where requested.

This guidance provides Funeral Directors and other service users with a brief summary of the main UHL policy.

As mentioned above, the intended purpose of the main policy is to facilitate a smooth transfer of a deceased infant, child or young person from UHL directly (where requested) to the family's chosen place, which will most likely be the family home. This is only where the child's death does not require coroner referral or where the Medical Certificate of Cause of Death (MCCD) can be issued by the hospital.

The same process can also be followed where the birth of an infant is registrable. For example where:

- A baby is born live (any gestation).
- A stillbirth or termination of pregnancy at or after 24 weeks (168 days) gestation,
- A baby (over 24 weeks) shows no identifiable signs of life at delivery.

All registrable deaths must be discussed with the Medical Examiner and therefore a potential delay must be factored in.

Roles – who does what

Please see main policy for list and description of the roles involved in the release process.

Hospital Post Mortem (HPM)

This is a post mortem carried by the hospital to understand more about why the child died. A HPM should not be confused with a coroners post mortem which has a more legal footing.

Where the death is not referred but a HPM is being considered the child may be taken home (under the supervision and care of the Funeral Director) for 24 hours. Cold transportation will be provided for such instances. There will also be an assessment carried out by senior clinicians before any arrangements are made.

The administration process undertaken will include a UHL Body Release form. See appendix 1 of the main policy document. This is a revised form and Funeral Directors should familiarise themselves with its use and function.

PLEASE NOTE: Whilst the Hospital Pathologist understands the importance of supporting the needs of the family, they are unable to endorse the taking of the child home when a HPM is being requested.

As part of the conversation and consent process with families for a HPM, the Pathologist may reserve the right to refuse to carry out a post mortem should they consider (on the return of the body to the hospital) that the lack of constant mortuary refrigeration will detrimentally affect the outcome of the post mortem.

In simple terms. If the family choose to take their child home, a HPM may not be possible.

If the family has made a decision to take the child home they will be provided with verbal and written details by the Senior Nurse/Midwife and Senior Doctor about what to expect and how to care for the body. See appendices 2 of the main policy document.

The appointed Funeral Director will also be included in any arrangements ensuring safe transfer of the child to and from the family home.

Cold transportation will be provided for such instances. A 'cold cuddle cot' (infants) or 'cold blanket' (larger child) is used to keep the child's body cool at home. This can be loaned from the hospital with an agreement in place for the return of the equipment to the hospital. Please see appendices 3 and 4 of the main policy document.

The family will be provided with a 24hr contact hospital number to call should the family have any concerns. Once at home and if the family feel that they are unable to manage and wish to take the child back to hospital earlier than scheduled, then the family must contact the Funeral Director to arrange this.

For more detailed information on any of the above or the main policy document please contact:

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