

SUDDEN OR UNEXPECTED DEATH

STANDARD OPERATING PROCEDURE/ACTION CARD
For Inpatient and Community
TRUSTWIDE

REFER STAFF TO THE SUDDEN OR UNEXPECTED DEATH POLICY (link below)

The dignity of the patient's body must be priority.

If the registered practitioner has suspicions that the death could be violent and suspicious police must be contacted via 999.

- Confirm that all emergency first aid actions have taken place and that the patient's death has been verified / confirmed by medical staff or a suitably trained healthcare professional. (Verification is simply confirming that the person has died, not determining the cause)

Where the unexpected death has been verified and there are no suspicious circumstances - (For example an unwell person who has died suddenly, but not unexpectedly) the police must be contacted by 101 and they will confirm whether they need to attend.

If the police are attending the following must be carried out:

- Following the completion of Verification of Death clinical examinations, the patient's body should not be moved and should be covered with a sheet.
- Ensure that all staff involved are wearing gloves to reduce contamination for police forensics
- Ensure all other service users are away from immediate area and supported
- Treat as a crime scene until the police rule otherwise; leave all equipment in place, leave any furniture and effects in the area as found, including any items that may have been used to cause harm including sharps, ligatures, empty tablet packets.
- All staff on duty must remain at the location and fully cooperate with the police including any requirement to give statements. Ensure support from their manager, or if not available the senior manager on call.
- Full documentation of the event must be made by all the staff present within the patients' electronic care record and any paper records should be secured as this might form part of any evidence.
- For all Mental Health Patients the On Call Psychiatrist must be informed, they will decide regarding notification of the on-call Executive.
- The patients own GP must be informed within working hours. (There is no need to contact Out of hours GP)
- A detailed timeline of events should be produced and given to the manager of the relevant clinical area. (As outlined in the policy and procedure for reporting incidents)
- Check staff welfare / make arrangements for other teams to support as staff may be with the police for an extended period / be distressed.
- Datix to be completed

If the police are not attending:

- Call the fire service control room during the Out of hours period as they will liaise directly with the coroner's office to decide if the patient needs to be transferred for review / postmortem.
- Once confirmed that a coroner's review is not needed arrangements can be made to transfer the deceased person to Funeral Directors as per individual or local arrangements.
- If there is no next of kin / no person to plan with, the following Funeral Directors may support
 - -Alexander Burn LTD (Funeral Directors), 436 High Street, Cheltenham, GL50 3JA 01242 245350
 - -B Sweet & Sons, 12A Oldbury Road, Oldbury House, Tewkesbury GL20 5LZ 01684 293 180

- **Inpatients:** Ward Doctor to contact Medical Examiner (ME) during working hours to inform them of patient's death
- A doctor can contact the coroner directly for advice [REDACTED] (0800 – 1700 Monday – Friday). During the OOH period contact should be via the Fire Service control room [REDACTED]. The Fire Service control room will:
 - Record the details for all unexpected deaths
 - Email the Coroner's office with the information provided
 - Arrange for the OOH funeral director to collect the deceased

For information:

- All communication should be documented in the patient's notes.
- Once police have completed their work the environment must be made clean and safe ensuring that areas are de-contaminated.
- Once police have seized all the evidence they require, remaining personal property should be searched, packed and stored in readiness for collection.
- All communication with the next of kin should be documented in the patient's notes.
- Release of the patient's personal belongings to the identified next of kin will be arranged with a property list given and a copy retained in the patient's health record.
- ECDOP notification of child death form to be completed (All deaths under 18 years)
<https://www.ecdop.co.uk/gloucestershire/live/public>
- A de-brief must be made available to staff possibly affected by the event.
- If required, then staff support via the Working Well services should be advocated.
 This will be coordinated by the Ward manager or their nominated deputy. Information on support available can be found on the Intranet: [Impacted by an adverse event? - Interact](#)

Definitions:

- **Expected death / Natural death:**
 As the result of an acute or gradual deterioration in a patient's health status usually due to an advanced progressive or incurable disease. There is no requirement to refer to the coroner. Any medical practitioner who has attended the deceased in their lifetime can complete a Medical Certificate of cause of death (MCCD). The GP must have seen the patient in their lifetime to be able to write MCCD if they can establish the cause of death to the best of their knowledge and belief.
- **Sudden death / Unexpected death:** is any violent or unnatural death, a death of which the cause is unknown, the death is unexpected, or the death occurred in custody or other state detention.
 - Death by self-harm, for example ligature or overdose
 - Sudden, unexpected death, for example cardiac arrest following arrhythmia, infarction or other sudden illness
 - Traumatic death such as road traffic collision or fall from height
 - Drowning or fire
 - Death following a criminal act
 - Unexpected death where the patient is discovered deceased in their place of residence.

Link to the Sudden or Unexpected Death Policy -

<https://2gethertrust.interactgo.com/Utilities/Uploads/Handler/Uploader.ashx?area=composer&filename=CLP240+Unexpected+Death+or+Sudden+Death+V9.2+issued+18.11.24.docx&fileguid=33d0b696-d449-4fb0-b949-ee5d64f57db3>

Link to Verification of Death Policy –

<https://2gethertrust.interactgo.com/Utilities/Uploads/Handler/Uploader.ashx?area=composer&filename=CLP113+VoD+for+Adults+and+Children+V5+issued+3.6.25.pdf&fileguid=1be3ab62-5a33-46b3-b362-31db9ab6a7bf>