

National Medical Examiner's Good Practice Series No. 17

Supporting bereaved people

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About the National Medical Examiner's Good Practice Series

Medical examiners are senior doctors providing independent scrutiny of non-coronial deaths in England and Wales, with the role becoming a statutory requirement from 9 September 2024.

While there is extensive guidance available on a wide range of topics for NHS and public sector staff, the National Medical Examiner's Good Practice Series highlights how medical examiners and medical examiner officers can better meet the needs of local communities and work more effectively with colleagues and partners.

The <u>Good Practice Series</u> is a topical collection of focused summary documents, designed to be easily read and digested by busy front-line staff, with links to further reading, guidance and support.



Introduction

The death of a someone important is one of the most difficult things to go through. Some people respond to their grief in a pragmatic way, while others may exhibit a more emotional response. There is no 'right' way to experience grief. Anyone may find themselves needing additional support at some point in their grief journey.

According to the NHS,¹ some of the most common expressions of grief include numbness, an overwhelming sadness and crying, tiredness or exhaustion and anger or guilt.

Bereavement can also have a temporary psychological effect, causing people to be concerned about their mental health, but it is perfectly normal to experience a wide range of unfamiliar and overwhelming emotions.

Medical examiners and officers have a unique position in being able to provide independent scrutiny of a death to offer explanations and give a voice to bereaved people, which may help with the grieving process.

¹ NHS. *Grief after bereavement or loss*. Available at: <u>https://www.nhs.uk/mental-health/feelings-symptoms-behaviours/feelings-and-symptoms/grief-bereavement-loss/</u>



Facts and figures

In June 2021, working in partnership with several third sector organisations and university researchers, an independent UK Commission on Bereavement was established to investigate the topic of bereavement support through research and consultation across all 4 nations of the UK.

The July 2022 report, <u>Bereavement is Everybody's Business</u>, took information from the last 5 years to learn about bereavement.² The key findings were:

- over a quarter (28%) of adult respondents to the Commission's consultation received no support from family and almost half (46%) received no support from friends following bereavement.
- 61% of adult respondents had difficulties with at least 1 practical or administrative task following bereavement.
- 33% of respondents wanted to access bereavement services but indicated no support was available and 37% said they did not know how to access support.
- over 40% of those who wanted formal bereavement support did not get any.

² The UK Commission on Bereavement. *Bereavement is everyone's business*. Available at: https://bereavementcommission.org.uk/media/xube5elb/ukbc_summary_report_low-res.pdf



Recommendations for medical examiners and medical examiner officers

Medical examiners and officers have a unique position in being able to provide independent scrutiny and to give bereaved people a voice and enable their feedback to be passed to care providers.

Medical examiners and officers should:

- signpost bereaved people to bereavement services, online help and resources or their GP as they feel appropriate
- not take on roles they are not trained or staffed for, such as counselling
- not 'overload' bereaved people with too many options for support but give enough information for people to make an informed choice themselves
- consider that many, such as bereaved parents, may also be experiencing trauma as well as sadness³
- consider whether a video call rather than a telephone call may be better for some bereaved people
- consider the needs of those with a visual/hearing impairment or learning disability or for those who do not speak English as their first language
- consider and communicate accordingly with the elderly and vulnerable individuals, such as people who are alone during difficult times
- recognise that sometimes people may not be ready to discuss bereavement; it may be suitable to refer their support needs to bereavement services or patient advice and liaison services.
- consider their own wellbeing and take time out to pause and reflect, if needed, and seek further support, if necessary.

³ NHS. Losing your partner or child in pregnancy. Available at: <u>https://www.nhs.uk/conditions/baby/support-and-services/losing-your-partner-or-child-in-pregnancy/</u>



Context and background

This guidance paper focuses on supporting bereaved people after they have been in contact with a medical examiner or a medical examiner officer.

Medical examiners and officers can clearly play a key role in ensuring appropriate support is offered to bereaved people and to help provide them with the best experience at a very difficult time.

Bereaved people are often very positive about the quality of care of the deceased and the support the family received; there are many examples of excellent care that can be fed back to treating teams. However, there can be problem areas in a minority of deaths.

The sections below set out some specific areas to consider but are not exhaustive.



Supporting bereaved people

Grief affects us all. Bereaved people are at the centre of the medical examiner system, and they will be at an early point of their journey in terms of loss. It is important that their contact with the medical examiner officer is a positive experience and does not add further stress or upset at such a challenging time.

Medical examiners and medical examiner officers can help to answers questions about the care and cause of death of the deceased and work together with bereavement services to find a suitable individual approach for bereaved people.

Medical examiners and medical examiner officers may find themselves pulled in different directions, but they should focus on their role while working with bereaved people with compassion and understanding. They are not expected to provide counselling or bereavement services themselves but to signpost to other services. They should be wary of overwhelming bereaved people with information at this early stage. Bereaved people from different faiths and cultures may have different expectations; medical examiners and officers should be mindful of this and know where to signpost. The needs of bereaved people may change over time and emotional support may be better placed later on in the grieving process.

Bereavement services

There is a wide variety of support available for bereaved people, from self-help resources to support groups and in-person grief counselling. There are available bereavement telephone helplines and online support, such as community groups and forums.

The Grief Support Guide⁴ (2023) from the National Bereavement Alliance has a useful and comprehensive contact list for local and national services, as well as cultural and faith group contacts.

Bereavement services may vary locally and regionally; consideration should be given to changes since COVID-19, as many now only offer remote services. There may be

⁴ National Bereavement Alliance. *Grief support guide*. Available at:

https://nationalbereavementalliance.org.uk/wp-content/uploads/2023/11/Grief-Support-Guide_Eng3-Nov-23.pdf



variations in services in primary care and bereaved people may be waiting some time for counselling; their mental health may deteriorate during this time. It may be useful to signpost to online resources and helplines until direct support becomes available.

Bereavement support is often available in secondary care or hospices, but this may not be the case in the community so signposting may be needed in these cases.

Some bereaved people may need practical rather than emotional support, so it is important to listen before offering a 'one size fits all' option.

Bereaved parents

The death of a child is a devastating loss that profoundly affects bereaved parents as well as siblings, extended family and the professionals involved in caring for the child. Families experiencing such a tragedy should be met with empathy and compassion.

When a child dies, parents can suffer from trauma as well as grief and sadness.⁵

The National Bereavement Care Pathway launched its <u>9 bereavement care standards</u> during Baby Loss Awareness Week in 2018, setting out standards for NHS trusts including having a parent-led bereavement care plan in place for all families.

The National Medical Examiner's Good Practice Series papers, <u>Medical examiners and</u> <u>child deaths</u> and <u>Maternal deaths</u>, offer further guidance.

Sudden or unexpected deaths

Sudden and unexpected deaths can have a profound effect on bereaved people, causing trauma and anger as part of their grief, known as traumatic grief or traumatic bereavement.

Sometimes, mental health conditions are a cause or contributor to death in these cases. Mental health conditions are common and affect people of all ages including children. They can have a significant impact on those who experience them, as well as their relatives, carers or those around them.

⁵ NHS. Losing your partner or child in pregnancy. Available at: <u>https://www.nhs.uk/conditions/baby/support-and-services/losing-your-partner-or-child-in-pregnancy/</u>



The National Medical Examiner's Good Practice Series paper, <u>Mental health and eating</u> <u>disorders</u>, offers further guidance in this area.

Support for medical examiners and medical examiner officers

It is important that medical examiners and medical examiner officers – as well as all professionals involved with bereaved people – feel supported and can offer each other support and understanding, taking time to pause and reflect as necessary.

There are supervision and reflective practices available at Child Bereavement UK for a range of different professionals, as well as training on managing the impact of this type of work,⁶ and a freephone helpline for professionals and families on 0800 0288 840.

The Foundation of Nursing Studies offers courses on 'Resilience-based Clinical Supervision',⁷ which has received positive feedback from bereavement staff who have used it within team training in hospitals and hospices.

The National Bereavement Care Pathway also offers a staff wellbeing resource toolkit⁸ that professional staff may find useful, which looks at the 4 components of staff wellbeing: balance and boundaries, healthy workspaces, self-awareness and looking after yourself.

 ⁷ Foundation of Nursing Studies. *Resilience-based clinical supervision*. Available at: <u>https://www.fons.org/programmes-development-opportunities/clinical-supervision/</u>
⁸ National Bereavement Care Pathway. *Staff wellbeing*. Available at: <u>https://www.nbcpathway.org.uk/toolkit/staff-wellbeing-resource-toolkit/</u>



⁶ Child Bereavement UK. *For professionals – supporting yourself and your colleagues*. Available at: <u>https://www.childbereavementuk.org/supporting-yourself-and-colleagues</u>

Conclusions

Grief can affect people in different ways and there is no formula for all. Different cultures have different traditions and customs, so it is important to consider individual needs and engage with people to find out what they need to help support them.

It is also important to consider health, disability, gender and sexuality; what relationship the bereaved person had with the deceased, whether they were a parent, a child, a carer; and/or whether the death was sudden or expected. All of these may have a bearing on how someone grieves and what they might need as an individual.

Medical examiners and officers have an important role in interacting with bereaved people at a very important time early in their bereavement. They can signpost bereaved people to services and organisations that can offer further support; many of these can be found in the 'Find out more' section of this paper.



Find out more

AtaLoss: AtaLoss.org is the UK's signposting and information website for bereaved people

Child Bereavement UK: <u>Support and resources for families and professionals</u>

Cruse Bereavement Support: <u>https://www.cruse.org.uk/</u>

Foundation of Nursing Studies: <u>Reflective practice and support</u>

Gov.UK: What to do after someone dies: Tell us once

Gov.UK: What to do when someone dies: step by step

Gov.Wales: National framework for the delivery of bereavement care

Gov.Wales: National bereavement care pathway

Hospice UK: I need support with a bereavement

Hospice UK: Mind the grief gap report

Mind: Losing someone to suicide

Muslim Bereavement Support Service: It's okay to grieve

National Bereavement Alliance: Grief support guide

National Bereavement Care Pathway: National Bereavement Care Pathway

National Bereavement Care Pathway: NBCP Standards

National Bereavement Care Pathway: NBCP Toolkit

National Bereavement Service: Free support for bereaved people

National Bereavement Service: Staff wellbeing resource toolkit

National Bereavement Care Pathway: NBCP Toolkit

NHS: Get help with grief after bereavement or loss

NHS: Losing your partner or child in pregnancy

Royal College of Pathologists: Good Practice Series 15 – Maternal deaths



Royal College of Pathologists: <u>Good Practice Series 6 – Medical examiners and child</u> <u>deaths</u>

Royal College of Pathologists: <u>Good Practice Series 7 – Mental health and eating</u> <u>disorders</u>

UK Commission on Bereavement: <u>bereavementcommission.org.uk</u>

UK Commission on Bereavement: Bereavement is Everyone's Business Report 2022



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