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Dear Colleague,

19 APR 2011

Improving the Process of Death Certification

I am taking the opportunity to write to you personally to thank you for your hard work in support of the Department's Programme to design and implement improvements to the process of death certification, and to confirm a change to the timetable for implementing the reforms.

As you know the Government wants to reform the process of death certification as part of the response to the recommendations of the Shipman Inquiry. The improved process, that has been developed with your input and tested in eight different communities in England and Wales, should improve the accuracy of Medical Certificates of Cause of Death and increase transparency for the bereaved. The introduction of the reforms, along with the creation of Public Health England, also provides an important opportunity to improve national and local surveillance of mortality using death certification data.

As you will be aware, the Health and Social Care Bill currently before Parliament transfers responsibility for appointing medical examiners, and other related matters, from Primary Care Trusts to local authorities. The detail of the new death certification process will be set out in regulations, and in order for the regulations to be debated and made in Parliament, the Bill needs first to have received Royal Assent. Unfortunately, the likely timetable for the Bill to receive Royal Assent will not now allow sufficient time for this to happen and for the regulations to commence in April 2012 - previously identified as the preferred implementation date for the reforms.

Taking also into account the need to allow local authorities a sufficient period to plan properly for the introduction of the medical examiner service, I have decided reluctantly to delay implementation of the reforms by 12 months to April 2013. Whilst I appreciate that the decision to delay implementation of the reforms will be disappointing, the prospective parliamentary timetable for the Health and Social Care Bill means that such a delay is unfortunately inevitable.

Once again, thank you for the support you have provided to the Death Certification Programme and I hope that you will be able to continue to contribute to the successful implementation of the reforms.

If you wish to discuss the implications of the delay to implementation of the reforms, can I please ask you to speak directly to Simon Bennett in the Department's Medical Directorate (0113 2545813).

My best wishes



ANNE MILTON