

National Medical Examiner update

October 2020

Welcome

While 2020 continues to be one of the most challenging years we have faced, it is a pleasure to hear about the progress being made with the medical examiner system across England and Wales. Colleagues in Wales have established offices in each region. In England, almost all acute trusts that require medical examiner offices have one established, and others are close to doing so. I wish to pay tribute to colleagues from NHS providers in both England and Wales whose determination and hard work have made this possible. I am very conscious that whether directly or indirectly, the pandemic response has placed exceptional demands on your time and attention in recent months, making recent progress all the more remarkable.

Of course, it is not possible for medical examiner offices to provide independent scrutiny of all non-coronial deaths immediately. There will be incremental growth of capacity and a period during which processes bed in. This is an important moment – I would encourage new medical examiner offices to use their initial months to ensure the [good practice guidelines](#) are fully implemented locally. I am particularly keen that all medical examiners continue to focus on our core objectives. They should provide the bereaved every opportunity to ask questions and raise concerns, as this is fundamental to the medical examiner system.

COVID-19 may raise new questions at times, but guidance for notifying coroners is clear. If there is reason to suspect a death where COVID-19 is involved may be unnatural, this must be notified to a coroner as for any other cause. Deaths due to COVID-19 where there is concomitant respiratory disease potentially acquired during previous employment, such as a death of a former miner with pneumoconiosis, should be notified. Medical examiners should play their part in ensuring analysis of causes of death in the future is based on the best possible data.

Dr Alan Fletcher, National Medical Examiner

What's included in this update

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Good Practice Series

As mentioned in our previous bulletin, the National Medical Examiner convened the first medical examiners' Good Practice Series discussion in September. With core representation from Ministry of Justice, the Chief Coroners' Office, the Department of Health and Social Care, Welsh Government, General Register Office, and Office of National Statistics, this series will brief focused guidance for medical examiners on discreet topics.

The focus of the first meeting was medical examiners and BAME communities, and we were delighted that Dr Habib Naqvi MBE, Director of the NHS Health and Race Observatory, was able to join the discussion. The resulting good practice series paper will be published on the [national medical examiner](#) webpage shortly.

In coming weeks and months we plan to produce briefings for medical examiners around learning disabilities and autism, and the interface between medical examiners and the statutory child death reviews process.

Review of the Coronavirus Act

You have been asking about the excess death easements in the Coronavirus Act, and how these might be affected by the regular reviews of the Act's provisions. A review of the provisions takes place twice monthly, with the first six-monthly parliamentary review taking place in September 2020. The outcome was to retain the easements relating to death certification and registration. This means the [guidance](#) published in March 2020 remains in place at present.

Implementation in Wales

In line with our previously reported plan, the medical examiner service for Wales, provided on behalf of all health boards and trusts in Wales by Shared Services Partnership, opened its remaining hub offices in September and now has coverage across the whole of Wales. Each of the four regional hub offices has a core team of 1 WTE medical examiner supported by 1 WTE senior medical examiner officer and 3 WTE medical examiner officers.

Given the current uncertainty around a COVID-19 second wave, it has been decided that the second round of recruitment to fill the remaining medical examiner and medical examiner officer posts will be put on hold until the fourth quarter of the year when the situation will be reviewed again. The service will continue to monitor the impact of COVID-19 on care providers and will provide a graded response to demand in line with changing circumstances and the lessons learned from the first wave.

Each regional hub office is able to scrutinise all deaths that occur within the region and will be working with local health, registration and coroner services to develop the systems and processes necessary to provide a full service for all deaths not referred directly to the coroner from April 2021.

Each regional hub office is able to record cases on a digital system which provides the required quarterly reporting for the National Medical Examiner and is also able to provide analysis and reporting that is integrated with health board governance systems. This will continue to be refined through the rest of 2020/21 in line with service developments.

The Lead Medical Examiner for Wales and Lead Medical Examiner Officer for Wales continue to contribute to the national training programmes via the relevant faculties.

Implementation in England

In September, more than 120 acute trusts reported having established medical examiner offices. Progress since July 2020, when we asked acute trusts to reinvigorate implementation, has been remarkable given the NHS is working to re-activate so many areas of work after the initial response to the pandemic. The new quarterly reporting arrangements (see next item) will provide an opportunity to provide more information on the deaths scrutinised by the growing number of medical examiners, and to start to identify areas for improvement.

Medical examiner funding and reporting in England

Reimbursement for costs from April 2020 to September 2020

As we mentioned in our previous update, temporary COVID-19 financial arrangements were in place from April 2020 to September 2020. For this period, invoicing by trusts for all services, including medical examiners, was suspended. Therefore, your trust finance teams should have claimed reimbursement for medical examiner office costs for April to September 2020 via the trust-level block and retrospective top-up process.

In October 2020, invoicing resumes for costs from October 2020 onwards. As we have previously mentioned, we will not be able to reimburse any medical examiner costs for April

to September 2020 through invoicing. Contact funding.nme@nhs.net if you have any queries.

Reimbursement for costs from October 2020 to March 2021

As noted above, we are returning to the purchase order and quarterly invoicing process from October 2020. Though this is the same process as was in place in 2019/20, cremation form 5 remains suspended (as noted earlier in this bulletin - Review of the Coronavirus Act). The National Medical Examiner team will confirm to each medical examiner office their funding envelope, purchase order number and quarterly invoicing arrangements in due course. For medical examiner offices that submitted their estimated activity by end of September 2020, funding confirmation should be provided by the end of the first week of November 2020. Funding confirmations for estimates received after September 2020 will be provided within six weeks of the estimates being received.

Quarterly reporting – data for quarter 1 (April 2020 to June 2020)

Any medical examiner offices that have not supplied their Quarter 1 data should do this as soon as possible using the template that was previously provided. Email funding.nme@nhs.net if you need a copy of this.

Quarterly reporting – data for quarter 2 (July 2020 to September 2020)

We wrote in previous bulletins about the new quarterly reporting dataset and submission method in place from October 2020. Detailed guidance on this, including technical information on accessing the portal, was cascaded to trusts in late September 2020. If you have not received this, please email reporting.nme@nhs.net. The deadline for submission of data for the July to September 2020 period is 23 October 2020.

Training and events

We are extremely grateful to Suzy Lishman, Daisy Shale and the training team at the Royal College of Pathologists, who adapted face-to-face training using Zoom.

Zoom events for both medical examiners and medical examiner officers have been a great success. This brings the total number of medical examiners trained to 800, with a further 210 doctors booked on future sessions between November 2020 and March 2021.

Medical examiner officer face-to-face training was successfully delivered by Zoom on 16 September 2020 with 55 delegates. The training session on 3 December 2020 is nearly full but additional sessions will be added in the New Year.

Training sessions in 2020 will continue to be held via Zoom. When circumstances allow the reintroduction of in person face-to-face training, sessions will alternate between Zoom and face-to-face as some delegates have found the virtual format helpful. CPD for medical examiners and medical examiner officers is being developed, and we expect this to be held monthly, and to be based on real life scenarios.

Contact details

We encourage you to continue to raise queries with us and share your thoughts on the introduction of medical examiners, through the [contacts list](#).

The page contains contact details for the national medical examiner's office, the medical examiner team in Wales, and regional medical examiner contacts in England.

Further information

Further information about the programme, including previous editions of this bulletin, can be found on the [national medical examiner](#) webpage.

NHS Wales Shared Services Partnership also has a web page for the [medical examiner system in Wales](#).

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