

PRIAE *Policy Research Institute on Ageing & Ethnicity*

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PRIAE POLICY RESPONSE to draft paper

*‘Modernising Pathology: Developing a
Mortuary Service Responsive to Individual
Needs’*

*Submitted to Modernising Pathology Team,
NSFs and Service Reviews, Department of
Health*

June 2006

PRIAE Response to '*Modernising Pathology: Developing a Mortuary Service Responsive to Individual Needs*'

Introduction

PRIAE is the leading body specialising in ageing and ethnicity in the UK and across Europe. Established as an independent charitable Institute in 1998, PRIAE seeks to improve health, social care, housing, income and pensions, and employment and quality of life for current and future generations of black and minority ethnic (BME) elders at the national and European level. For this submission we use in most cases the term 'minority elders' to refer to those who have worked, lived, aged and are ageing in Europe due to being a traditional/national minority; as a result of economic migration within the Union; as a result of colonial connection and/or refugee background.

The Institute works with BME elders and age organisations, with clinical and non-clinical professionals and researchers, across sectors to influence, inform, develop and strengthen the knowledge base, capacity and practice in ageing and ethnicity.

PRIAE welcomes the opportunity to respond to '*Modernising Pathology: Developing a Mortuary Service Responsive to Individual Needs*'. This submission is based on PRIAE's understanding of the health and social care needs of BME elders, the needs of their families and carers, and the diversity of cultural and religious beliefs that need to be understood in order to provide adequate health and social care services. This submission also draws on a

real life example known to PRIAE of the experience of a deceased BME elder in the Mortuary Service. To protect the confidentiality of the individuals concerned no specific details are provided about this case although the policy implications brought to PRIAE's attention as a result of this case are considered. PRIAE does not argue that this case is representative of the Mortuary Service as a whole, nor expects that the issues relating to the case are responded to as an outcome of this consultation.

PRIAE's previous flagship work in the field of health and social care includes PRIAE's report to the Royal Commission on Long Term Care for the Elderly – *Perspectives on Black and Minority Ethnic Elders in the UK*; and the Minority Elderly Care (MEC) project – empirical research undertaken as part of the EC Fifth Framework Research Programme – this research is highlighted for it is the largest research project in the area of ageing and ethnicity in the UK and across Europe, and a first for the European Commission in its 24 years of research framework funding.

During this response unless otherwise stated the examples mentioned and recommendations refer to policy in the UK.

PRIAE Response to *Modernising Pathology: Developing a Mortuary Service Responsive to Individual Needs*

Executive Summary of Recommendations

- ✚ PRIAE welcomes the eight key principles of good practice for all staff working in NHS mortuaries stated in *Modernising Pathology: Developing a Mortuary Service Responsive to Individual Needs* and many of the specific recommendations outlined relating to these principles
- ✚ The training of Mortuary Service staff in different religious, cultural and spiritual beliefs, and a culture-shift in the way the Mortuary Service is seen, in order that the treatment of deceased individuals is viewed as a key stage in the treatment and care of individuals, is essential in order to ensure that the Mortuary Service can be responsive to individual needs
- ✚ Consultation with individuals from different ethnic and religious groups is essential in order to ensure that different religious and cultural perspectives are adequately understood. PRIAE would argue that the health service considers its information base relating to cultural and religious perspectives, and the adequacy of its consultation strategies
- ✚ Although it is important for Mortuary Service staff to have an understanding of different cultural, spiritual and religious perspectives, PRIAE would also stress that it is not sufficient for staff to cater for individuals based solely on an assumed or actual religious or cultural affiliation. It is essential that Mortuary Service staff take the trouble to understand the preferences of individuals, carers and families, as no two individuals or cases will be identical

- ✦ PRIAE would suggest that Mortuary Service professionals develop a partnership approach with the families of deceased individuals, should this wish be expressed, for religious or other reasons

- ✦ PRIAE welcomes the statement in the draft paper that 'Policy and practice in the mortuary will demonstrate respect towards those who have died, towards bereaved relatives and in the way bodies are cared for' but would argue that additional training of staff is required in order to ensure that the principle of showing respect is put into practice

- ✦ It is essential that a sufficient number of staff are available to move bodies safely and respectfully

- ✦ It is essential that Mortuary Service staff show sensitivity to the families of deceased individuals. Training in inter-personal skills is therefore important

- ✦ PRIAE would argue that designated routes and lifts of sufficient size are used when transporting individuals to a mortuary. PRIAE would argue that the same level of care, attention, dignity and respect should be applied to the transportation of an individual from hospital bed to mortuary as is generally provided in a traditional funeral procession and other funerary rituals of different religious traditions

- ✦ It is essential that rigorous safety and security protocols and procedures are put into place in the Mortuary Service

- ✦ It is essential that trolleys used to transport individuals to mortuaries are safe and secure, and that there are clear protocols in place relating to the transportation of bodies from one trolley to another or other location. Regular safety checks for trolleys are required and should be officially recorded to ensure that all equipment is in full working order

- ✦ It is essential that a sufficient number of staff are available to move bodies safely and respectfully. The Mortuary Service should have a clear and explicit policy regarding the management of the transportation of deceased individuals where there is *not* a sufficient number of staff available and/or where staff are working alone
- ✦ Family members of a deceased individual may wish to be informed where an accident has occurred during the transportation or treatment of a deceased individual. PRIAE would suggest that policies, procedures and monitoring systems relating to such incidents are given consideration in the development of a Mortuary Service strategy designed to meet individual needs
- ✦ Mortuary Service staff need to be familiar with different cultural and religious beliefs in order to communicate effectively with family members and friends of deceased individuals and ensure that their needs, and the needs of deceased individuals are met
- ✦ Mortuary Service staff need to develop active listening skills, as well as good communication skills, in order to assess the needs of deceased individuals and their family members
- ✦ Mortuary Service staff are an integral part of the health service and play a key role in the health and social care of individuals. They work in an environment which can be stressful, distressing and physically demanding. Staff must therefore be supported by the Mortuary Service and the health service generally. Adequate training must be provided, clear protocols must be instigated, and sufficient resources need to be provided in order to ensure that Mortuary Service staff can carry out their roles effectively and ensure that the principles outlined in the draft paper *Modernising Pathology: Developing a Mortuary Service Responsive to Individual Needs* can be realised

Responding to the eight principles of good practice for all staff working in NHS mortuaries

This response focuses on some of the eight key principles of good practice for all staff working in NHS mortuaries stated in *Modernising Pathology: Developing a Mortuary Service Responsive to Individual Needs*. These eight key principles are

1. A service responsive to individual needs
2. A service that shows respect
3. A service that is safe and secure
4. A service that is confidential
5. A reflective service committed to improvement
6. A service which values effective communication
7. A service that is fit for purpose
8. A service which values its staff

PRIAE would suggest that numerous examples of good practice can be found in today's Mortuary Service and, for the vast majority of people, their experience of the Mortuary Service will be a positive one. In the case known to PRIAE however, there are numerous examples of bad practice, relating to many of the eight principles listed above. Although PRIAE does not argue that this one case is representative of the Mortuary Service as a whole, these examples of bad practice are discussed below, as they help to identify what would constitute good practice in the Mortuary Service, and the issues that need to be addressed by the health service in order to make the eight principles listed above a reality in practice.

A service responsive to individual needs

PRIAE welcomes the following statements made in the draft paper relating to *Principle One: A service responsive to individual needs*

1. 'Each person's response to death and bereavement is influenced by their beliefs, culture, values and experience. Mortuary Service staff will be alert to individual needs based on culture, religion, sexual preference, life-style or social diversity and be flexible in attempting to meet them'
2. 'Where families have cultural, religious or individual preferences concerning the storage, handling, transportation or presentation of the body, these need to be carefully documented and accommodated wherever possible. Families will be asked about their needs or preferences and if these cannot be met, or difficulties occur, the reason explained and a compromise sought...If there is a conflict between the wishes of the person who has died and the bereaved family, this will need to be discussed with the family so that some kind of solution can be found'
3. 'While most families will wish their relative's body to be cleaned, some may not. Some relatives may wish to see the body in the state it arrived in the mortuary, some may wish to clean at least some parts of the body themselves, or their religion may dictate that the washing is done as part of a religious ritual'

There are many religious and cultural beliefs relating to death and the treatment of bodies after death. The death of a family member or friend can be such a powerful event in the life of an individual that it frequently brings religious, spiritual or cultural beliefs to the fore. For example, speaking about the Muslim tradition, Sheikh and Rashid Gatrad (2000: 100) state

'When a Muslim dies the eyes and mouth should be closed and the limbs should be straightened. His body should ideally face in the direction of Mecca. It is a religious requirement that the dead be buried as soon as possible and considerable family distress can be avoided by speedy production of the death certificate. The body will be washed and shrouded in simple, unsewn pieces of white cloth ...'

In the case known to PRIAE, a BME elder's family were initially denied access to a mortuary in order to be with and support a deceased family member – this request for access was based largely on religious beliefs relating to treatment of the body after death (including washing and prayer), and the relationship between the treatment of the body prior to burial and the well-being of the spirit of the deceased. From many cultural and religious perspectives death does not lead to an instant separation of body and spirit. Care of the body of the deceased is therefore an important stage in the care of the individual.

PRIAE argues that training of Mortuary Service staff in different religious, cultural and spiritual beliefs, and a culture-shift in the way the Mortuary Service is seen, in order that the treatment of deceased individuals is viewed as a key stage in the treatment and care of individuals, is essential in order to ensure that Principle One can be realised. Consultation with individuals from different ethnic and religious groups is essential in order to ensure that different religious and cultural perspectives are adequately understood. PRIAE would recommend the health service considers its information base relating to cultural and religious perspectives, and the adequacy of its consultation strategies.

Although it is important for Mortuary Service staff to have an understanding of different cultural, spiritual and religious perspectives, PRIAE would also stress that it is not sufficient for staff to cater for individuals based solely on an assumed or actual religious or cultural affiliation. It is essential that Mortuary Service staff take the trouble to understand the preferences of individuals, carers and families, as no two individuals or cases will be identical.

Many family members will feel an ongoing sense of duty to care for a deceased family member, and this belief is often underpinned by religious beliefs relating to the relationship between the treatment of the body and the well-being of the spirit of the deceased person (until burial for example). It is important therefore that Mortuary Service professionals develop a partnership approach with the families of deceased individuals, should this wish be expressed, for religious or other reasons.

A service that shows respect

PRIAE welcomes the following statements made in the draft paper relating to *Principle Two: A service that shows respect*

1. 'Policy and practice in the mortuary will demonstrate respect towards those who have died, towards bereaved relatives and in the way bodies are cared for'
2. 'When mortuary staff meet bereaved families, they will treat them with respect, avoiding judgements, assumptions or stereotyping. It is important that staff are aware of diversity in the community they serve and are able to respect and accommodate the diverse cultural and religious needs of the groups and individuals within that community'
3. 'All procedures involved in the receipt, storage and release of the body must be carried out respectfully. This means that people's bodies should be cared for, handled and stored in a way which preserves the dignity of the deceased person at all times – allowing for the fact that some procedures (most obviously a post mortem examination) are invasive'
4. 'transport is appropriate. Ideally, for transportation to the mortuary, a specially adapted trolley should be used so that the body is completely concealed'

5. 'there are always sufficient staff available to move bodies safely and respectfully'

In the case known to PRIAE, the following examples of bad practice were apparent

- An insensitive remark was made by a member of staff in the Mortuary Service regarding the weight of the deceased to the deceased's family members. There were additional examples of poor and insensitive communication
- The above incident related to an insufficient number of staff being available to transfer the body of the deceased

PRIAE welcomes Statement 1 above but would argue that additional training of staff is required in order to ensure that the principle of showing respect is put into practice.

It is essential that staff and equipment are available and sufficient to move bodies safely and respectfully in order to ensure Statement 1 is implemented in practice.

It is essential that Mortuary Service staff show sensitivity to the families of deceased individuals. Training in inter-personal skills is therefore important. A training gap was acknowledged by a Hospital Trust in the example known to PRIAE, particularly relating to dealing with bereaved families from different religious backgrounds.

Further to Statement 4 above, PRIAE would argue that designated routes and lifts of sufficient size are used when transporting individuals to a mortuary. This was not the case in the example known to PRIAE which made the experience more difficult for family members. PRIAE would argue that the same level of care, attention, dignity and respect should be applied to the transportation of an individual from hospital bed to mortuary as is generally

provided in a traditional funeral procession and other funerary rituals of different religious traditions.

A service that is safe and secure

PRIAE welcomes the following statements made in the draft paper relating to *Principle Three: A service that is safe and secure*

1. 'High standards of security are essential to protect the bodies of those who have died and to ensure that the needs of bereaved families can be met...The mortuary service environment will be properly secure and the highest possible standards of care delivered to the deceased and their bereaved families'

2. 'As a result of the isolated location of most mortuaries and the shift patterns maintained by staff, a risk assessment will usually be undertaken and adherence to a Lone Worker policy encouraged among all mortuary staff. Detailed guidance is set out in *Not Alone: A Good Practice Guide for the Better Protection of Lone Workers in the NHS*'

In the case known to PRIAE, there were several examples of bad practice relating to safety and security

- The trolley carrying the deceased elder was let go of whilst being transported to a mortuary, resulting in the injury of another individual
- Family members transferred the body of their deceased relative given difficulties experienced by Mortuary Service staff and poor communication, putting their health and safety at risk

- There was evidence of faulty equipment in a mortuary, putting the deceased and family members at risk and causing emotional distress

Poor safety and security procedures can have serious physical and emotional consequences for all those involved in the treatment and care of a deceased individual. It is essential that rigorous safety and security protocols and procedures are put into place in the Mortuary Service.

It is essential that trolleys used to transport individuals to mortuaries are safe and secure, and that there are clear protocols in place relating to the transportation of bodies from one trolley to another or other location. Regular safety checks for trolleys are required and should be officially recorded to ensure that all equipment is in full working order.

As stated above, it is essential that a sufficient number of staff are available to move bodies safely and respectfully. The Mortuary Service should have a clear and explicit policy regarding the management of the transferring of deceased individuals where there is *not* a sufficient number of staff available and/or where staff are working alone.

Family members of a deceased individual may wish to be informed where an accident has occurred during the transportation or treatment of a deceased individual. PRIAE would suggest that policies, procedures and monitoring systems relating to such incidents are given consideration in the development of a Mortuary Service strategy designed to meet individual needs.

A service which values effective communication

PRIAE welcomes the following statements made in the draft paper relating to *Principle Six: A service which values effective communication*

1. 'Patient care does not end with a person's death. Mortuary services provided by NHS trusts are integral to the patient care pathway.'

They will be part of trusts' communication network, with good communication between mortuary staff, the staff who use their services and users of those services and their carers'

2. 'Mortuary staff who have contact with families are likely to be talking to them about sensitive, difficult issues and will be with them at a time of great distress. They need good communication and interpersonal skills, and some understanding of the experience of loss. Appropriate training to develop these skills and attributes will be helpful'
3. 'Mortuary services should have in place a policy on communicating with bereaved families. This may cover access to appropriate services if there are communication difficulties of some kind'

As noted above, in the case known to PRIAE there were numerous examples of poor and insensitive communication from Mortuary Service staff to the family of a deceased BME elder. PRIAE therefore welcomes the above three statements but would emphasise that training on communication and interpersonal skills cannot take place in a cultural vacuum. It is essential that Mortuary Staff

- Are familiar with different cultural and religious beliefs in order to communicate effectively with family members and friends of deceased individuals and ensure that their needs, and the needs of deceased individuals are met
- Develop active listening skills, as well as good communication skills, in order to assess the needs of deceased individuals and their family members
- Develop a partnership approach with the families of deceased individuals should this wish be expressed

Mortuary Service staff are an integral part of the health service and play a key role in the health and social care of individuals. They work in an environment which can be stressful, distressing and physically demanding. Staff must therefore be supported by the Mortuary Service and the health service generally (see *Principle Eight: A service which values its staff*). Adequate training must be provided, clear protocols must be instigated, and sufficient resources need to be provided in order to ensure that Mortuary Service staff can carry out their roles effectively and ensure that the principles outlined in the draft paper *Modernising Pathology: Developing a Mortuary Service Responsive to Individual Needs* can be realised.

ENDS

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