



Deceased Management
Advisory Group



Protocol for care homes and funeral directors during COVID-19

Updated 22 May 2020

Introduction

This joint protocol has been developed to ensure that funeral directors and providers of care in a residential setting are fully aware of the risks posed when an individual dies in a residential care setting and is either confirmed to have had COVID-19 or is suspected to have had it. The protocol is endorsed by the Care Provider Alliance (CPA) and the Deceased Management Advisory Group (DMAG) – both groupings bring together 16 organisations from across the care and funeral sectors. Thanks to CPA member - the National Care Forum, and DMAG member - the National Association of Funeral Directors, for their support in developing this joint protocol.

This protocol is for England, Wales, Scotland and Northern Ireland collectively *unless* there are specific differences which are highlighted below.

Public Health England published [Guidance for the care of the deceased with suspected or confirmed coronavirus](#) (COVID-19) on 15 May 2020. This guidance has been developed to ensure that:

- The bodies of those who have died as a result of the coronavirus are treated with sensitivity, dignity and respect; and
- People who work to care for the deceased are protected from the infection.

This guidance is in place because it is believed there is a continuing risk of infection from the virus after death from body fluids and tissues.

The guidance also includes advice for individuals working in residential care homes and hospices where a death is **suspected** to have occurred from COVID-19.

The impact on other people living in the residential facility has also been considered by all involved.

Communication with funeral directors

When a resident dies, contact will be made with the funeral director to arrange collection of the deceased. It is important that the funeral director is provided with full information about the cause of death (if known) and the presence of COVID-19 in the care setting (if known) from the care provider to ensure that the staff responsible for collecting the deceased can prepare appropriately, specifically ensuring they have the appropriate level of PPE to protect themselves and the care home residents and staff.

Typical questions to be asked:

- Was the deceased tested and found positive as having COVID-19?
- Was the deceased diagnosed as having a respiratory infection or pneumonia?
- Have there been any confirmed (tested positive) or suspected (not yet tested) cases of COVID-19 in the care home in the last 14 days?
- Has death been verified by a suitably competent person? Please check the 'COVID-19 - Verifying death in times of emergency' guidance.
- Is a doctor able to issue a death certificate? (details of doctor required to ensure swift emailing of MCCD to registrar)?
- Did the person and/or have the family decided on burial or cremation?
- Did the person have a faith/religion/belief/non-belief position that the Funeral Director should be aware of?

Best practice is that these questions should be posed by the funeral director to the care home as part of the communication process when contact is first made. Equally, the care home provider should also be able to share this information to the funeral director when contact is first made.

The period between death and collection

Funeral directors will seek to arrange the collection of the deceased at the earliest opportunity. The estimated time of arrival will be communicated, with the names of the team attending. Care homes will need to refer to the [Guidance for the care of the deceased with suspected or confirmed coronavirus](#), specifically the section on guidance for residential care settings including care homes and hospices.

This is as follows:

- ensure that all residents maintain a distance of at least 2 metres (3 steps) or are in another room from the deceased person (noting the possible visual impact of the level of PPE worn by those collecting the body as well as the risk).
- avoid all non-essential staff contact with the deceased person to minimise risk of exposure. If a member of staff does need to provide care for the deceased person, this should be kept to a minimum and correct PPE used as set out in the guidance on [How to Work Safely in Care Homes](#)
- you should follow the usual processes for dealing with a death in your setting, ensuring that infection prevention and control measures are implemented as set out in the guidance on [How to Work Safely in Care Homes](#)

Collection of the deceased

A time for collection of the deceased will be agreed between the funeral director and the care home provider. Care should be taken to identify the best possible time for the funeral director to gain access to the Care Home and the room where the deceased lies. Particular consideration should be paid to:

- Minimising the likelihood of the funeral director encountering residents or staff moving around the home.
- Minimising the likelihood of residents witnessing the collection and movement of the deceased to the funeral director's vehicle.
- Ensuring that the type of vehicle and equipment used is appropriate.

The guidance regarding infection control during the period prior to collection of the deceased (see above) should also inform the agreed process for collection of the deceased. Care home staff should prepare for the arrival of the Funeral Director and advise them on arrival of the route to be followed whilst on the premises to ensure infection control protocols are respected.

The care home should seek to identify the best possible location for the funeral director's vehicle to be parked during the collection process. Whilst the nearest location is desirable, consideration should also be paid to ensuring the privacy and dignity of the deceased, so any public areas viewable from outside of the care home should be avoided.

Use of PPE by funeral directors

The use of appropriate PPE is important to protect vulnerable residents in care homes and staff from the possibility of infection from outside of the home. It is also important that funeral directors are not exposed to infection or the risk of infection when entering care homes to collect the deceased.

For this reason, all funeral directors will use the Public Health England recommended PPE when entering care homes, **irrespective of whether there is any evidence to suggest that COVID-19 is present** in the home or has been at any point in the previous 14 days. This is especially important now that PHE has declared that the whole of the UK is in a state of sustained transmission of COVID-19.

No comment or judgement will be made by the funeral directors on the level of PPE being worn by care staff unless a risk is clear and this will be reported back after collection.

Reference to the appropriate PHE guidance is contained in [Guidance for the care of the deceased with suspected or confirmed coronavirus](#).

| Public Health England Guidance on PPE requirements, as of May 2020 | | | | | |
|--|--------------------------------|--------------------------|-----------------|--------------------------------------|------------------|
| Activity | Disposable gloves (single use) | Disposable plastic apron | Disposable gown | Fluid resistant surgical mask (FRSM) | Eye protection** |
| Death verification | Yes | Yes | No | Yes | Risk assess |
| Moving the deceased | Yes | Yes | No | Yes | Risk assess |
| Washing the deceased | Yes | Yes | No | Yes | Risk assess |
| Preparing for transportation, for example shrouding, placing in a body bag/coffin | Yes | Yes | No | Yes | Risk assess |
| Transporting the deceased in a body bag/coffin/cloth wrapping | No | No | No | No | No |
| Travelling to a funeral | No | No | No | No | No |
| *the outside of the body bag/coffin may be wiped down with a combined detergent disinfectant solution as normally used within mortuary practice. Follow manufacturer's instructions for dilution, combination, application and contact times for all detergents and disinfectants. **Eye and face protection is recommended only if there is an anticipated/likely risk of contamination with splashes, droplets or blood or body fluids. | | | | | |

Management of funerals

Public Health England has published [Guidance for managing a funeral during the COVID-19 pandemic](#).

This advice is designed to assist people who are involved in managing or organising a funeral related to a death from any cause during the coronavirus (COVID-19) pandemic.

This guidance has been developed to ensure that funerals can be held safely during the pandemic. It includes advice on who is permitted to attend funerals and what steps should be taken to ensure that those attending and organising the funeral can do so safely.

Communities, organisations and individuals are strongly advised to take action to reduce the risk of spreading coronavirus (COVID-19) infection among mourners who are gathered to pay their respects, with a particular focus on protecting people who are clinically vulnerable and more likely to develop severe illness. These actions include:

- restricting the number of mourners to be as low as possible to ensure a safe distance of at least 2 metres (6 ft) can be maintained between individuals
- In England, PHE advise that, alongside the Funeral Director, Chapel Attendant, and funeral staff only the following should attend:
 - members of the person's household.
 - close family members.
 - or if the above are unable to attend, close friends.
 - attendance of a celebrant of choice, should the bereaved request this.

Please note that the list of persons who can attend a funeral in person differs in Wales. For funerals taking place in Wales, only the person arranging the funeral and anyone invited by that person (or any carer of any of those persons) may attend the funeral. This limitation operates alongside the same requirements that apply across the United Kingdom relating to places where funerals are held (i.e. that all reasonable measures must be taken to ensure attendees from different households can maintain a distance of 2 metres from each other).

Following on from a death in a residential care setting there may be a spouse or residents and staff who are likely to want to attend a funeral. Residents may also wish to attend funerals of friends and family who died outside of the care home. The

above guidance has to be borne in mind. Many venues are limiting the maximum number of attendees to a maximum of 10 people. Alternative ways of recognising and remembering the person within the care home could be arranged and offered where possible.

Care homes are encouraged to consult this guidance when considering facilitating the attendance of a resident at a funeral. They should also encourage staff to make the care home management aware if they plan to attend funerals.

Care homes should make the Funeral Director responsible for organising a funeral aware of the situation and circumstances of any residents or staff planning to attend a funeral in advance, ideally at least 48 hours beforehand. By doing so the funeral director will be able to advise and where possible make the necessary arrangements to ensure the safety of all mourners and staff within the prevailing conditions for the place of service. It could be that the funeral director may advise that attendance may not be possible because of limitations on the permitted number of people allowed at the service.

Mourners:

- should follow the advice on social distancing when travelling to and from the funeral gathering. Care home transportation arrangements should consider this.
- who are self-isolating for 14 days due to someone in their household being unwell with symptoms of coronavirus (COVID-19) but are not symptomatic themselves, may be facilitated to attend the funeral in person should they wish to do so, with processes put in place to minimise the risk of transmission. Please note that some funeral directors may have policies in place which would prevent individuals in this group attending.
- who are clinically vulnerable or in a shielded group should also be facilitated to attend, with processes put in place to minimise the risk of transmission.
- who are showing coronavirus (COVID-19) symptoms (a new continuous cough, a high temperature or a loss of taste and smell) should not attend the funeral as they pose a risk to others; remote participation should be considered.

On returning to the home, consideration should be given to ensure hands are washed using soap and warm water, to keep infection risk to a minimum. Alcohol gel should be carried with anyone attending from a care home if and where hand washing is not available at the venue.

Alternatives to funeral attendance

Where it is not possible or appropriate for a care home resident to attend a funeral they would normally have wished to attend, the funeral director may be able to facilitate a live stream of the funeral or record the ceremony. This largely depends on whether such webcasting services are available at the crematorium and the wishes of the family or applicant. If this is something care homes would like to participate in they should contact the funeral director at the earliest opportunity to ensure, where possible, that the necessary arrangements can be made.

Alternatively, an appropriately reflective ceremony at the care home, held at the same time, would allow residents who want to, the time to reflect and pay respects to the memory of the person who has died. These reflections can be tremendously powerful and very beneficial for residents and staff. Employers may also have contacts for bereavement support that should be made available.

Contacts

The [Care Providers Alliance](#) brings together the ten main national associations which represent independent and voluntary adult social care providers in England. As an alliance it represents the whole sector and ensures a co-ordinated response the major issues that affect it.

The [Deceased Management Advisory Group](#) brings together funeral directors and those who manage, provide and work in cemeteries and crematoria. It includes representatives of the National Association of Funeral Directors (NAFD) and the National Society of Allied and Independent Funeral Directors (SAIF) and other sector organisations.

[Care Provider Alliance](#) info@careprovideralliance.org.uk

[Deceased Management Advisory Group](#) via info@nafd.org.uk

[National Association of Funeral Directors](#) info@nafd.org.uk

[National Care Forum](#) info@nationalcareforum.org.uk

[CPA member associations](#) [Find all ten members](#)

Further information

[CPA information on coronavirus](#)