

THE MEDICAL EXAMINER SYSTEM IS COMING TO THE COMMUNITY.....

What does the Medical Examiner do?

How do we do it?

How WILL it affect YOUR GP Practice?

An opportunity to get to know us & ask questions.

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What we'll cover...

- What is the Medical Examiner Service – the history behind it.
- What it does currently in Acute Trusts.
- What is happening in the community this year.
- How it will affect you.....

What is it?

- Non-statutory for 'Acute' deaths since April 2019.
- Result of high profile 'horror' cases – Mid-Staffs, Morecambe Bay, Shipman.
- Public enquiries demanded better controls.
- ME Service in place – detection of problems at an earlier stage.

Purpose.

- Provide greater safeguards for the public by ensuring independent scrutiny of all non-coronial deaths.
- Ensure the appropriate direction of deaths to the coroner.
- Provide a better service for the bereaved allowing them to raise concerns.
- Improve the quality of death certification.
- Improve quality of mortality data.

Structure of ME Service.

- 130 Medical Examiner Offices in acute trusts in England; 4 regional hubs in Wales.
- 7 Regional Medical Examiners.
- National Medical Examiner – Dr. Alan Fletcher

Medical Examiner Office

- Staffed by Medical Examiners (ME) & Medical Examiner Officers (MEO).
- MEs are senior doctors.
- MEOs are from allied health professional backgrounds.
- E-learning, face-to-face, RCPATH, Good Practice Guidelines.
- ME is **independent**
 - Funded by NHS England
 - Reporting lines are external & within NHSI.

How does it work?

- ME scrutinises the notes.
- ME & Qualified Attending Practitioner (QAP) discuss & agree the proposed cause of death for Medical Certificate Cause of Death (MCCD).
- MEO – will discuss the cause of death with the N.O.K./informant & establish if they have any concerns with care (but also any compliments too!).

Governance

- Positive & negative feedback.
- Safeguarding concerns.
- Improvements in awareness, training & process.

Positive Feedback

- Relatives:

“we feel greatly helped that there was nothing we could do to predict the deterioration or help...until the conversation with the ME we had a sense of guilt”

“the fullness of your report, & the depth, decency & honesty of your opinions..was hugely appreciated. It has immediately given ‘closure’...we are able to focus on the future, while remembering the past.”

- Medical staff:

“Getting feedback that the family understood the process & were comforted by our team really helps – it lets us know that when we shift our emphasis to providing a good death, that we achieved that for them & their family“

Positive feedback 2

- Coroner

“the referrals we have seen have decreased in number but improved in quality, we now get only necessary ones & no longer ‘I might need advice’. This has saved us a great deal of time & unnecessary computer entry as all conversations had to be recorded.”

- Registrar:

“dramatic improvement in accuracy of MCCDs, return rate approx 1/month compared to 7/month”

- Trusts

- CQC

The Future - How will this affect me?

- Initially focused on deaths occurring within the Acute trust.
- 100% scrutiny of all hospital deaths.
- Increase the service to cover the certification of ALL deaths within a specified geographical area:
 - Other NHS & independent settings (care homes, hospices etc).
 - Deaths in the community.
- Health Service Safety Investigations Bill.

How will it work in Barnsley?

- Hospice deaths first.
- Other community deaths:
 - 6 x Primary Care Networks – one at a time

The Process



The Process 2

ME scrutinises
notes &
completes ME1

ME discusses
cause of death
with GP

GP completes
MCCD &
cremation form

The Process 3

MCCD scanned &
emailed to MEO

MEO phones
family to discuss
MCCD

Family attends GP
practice to collect
MCCD/ emailed
to Registrar

Conclusions

- Its coming, whether we like it or not....
- It will be statutory.
- We have a year to sort out ‘teething problems’..
- It sounds complicated but its not...
- It will make things easier – coroners referrals/speaking to relatives/someone else to discuss MCCD with.
- Job opportunities!

Questions

