



Death in Service Procedure

Contents

1	Statement of Aims and Objectives.....	2
2	Scope.....	2
3	Responsibilities	3
4	Death on Duty	4
5	Audit and Review.....	4
6	Financial Checkpoint	5
7	Equality Analysis.....	5
9	Appendix A.....	6
	Appendix B	6



South East Coast Ambulance Service

Statement of Aims and Objectives



NHS Foundation Trust

- 1.1. In the unfortunate event of a colleague's death, South East Coast Ambulance Service (the Trust) must sensitively and compassionately support colleagues whilst balancing the practical need for administrative and operational matters during a very difficult time for the colleague's next of kin.
- 1.2. This document aims to ensure that there is consistency in these challenging cases as well as support Line Managers with guidance and clear direction.
- 1.3. Administrative requirements such as reports relating to work-related disease and accidents, or responsibilities regarding pension provision will be managed in a sensitive manner, so as to cause as little distress to the bereaved individuals involved as is practicable.

2 Scope

- 2.1. This procedure covers death in service which is defined as:
 - Death on duty
 - Death outside of working hours
- 2.2. The procedure applies to all colleagues of the Trust but does not apply to:
 - Interim staff or Contractors
 - Agency staff
- 2.3. Where the individual who has died is on secondment, every effort should be made to inform the partner organisation as soon as possible. Primacy for the associated administrative arrangements remains with the partner organisation although the Trust is committed to assisting and supporting in any way in which the Chief Executive feels appropriate.
- 2.4. Where the individual who has died is an affiliate of the Trust such as a Student Paramedic, the Trust will contact the partner agency as soon as possible and work with them to ensure that all necessary arrangements are undertaken.
- 2.5. Where the individual who has died is a Trust volunteer such as a Community First Responder, the relevant sections of this procedure will be applied. There is an acknowledgement that certain administrative processes such as pension applications etc. will not be applicable in these situations.



Responsibilities

3.1

The following responsibilities should be used in conjunction with the immediate action check lists found in the [Death in Service – Guidance for Leaders' document \(Appendix B\)](#).

The Chief Executive Officer

- 3.2 The Chief Executive will ensure that appropriate condolences are expressed at a senior level from the Trust to the next of kin and deceased colleague's team.

The Line Manager

- 3.3 It is recognised that the Trust may become aware of the colleague's death in several ways. The Line Manager should refer to the Death in Service – Guidance for Leaders document and follow the communication cascade checklist in the first instance.
- 3.4 Respond appropriately to the requests of the deceased colleague's next of kin.
- 3.5 Arrange support for colleagues affected by the bereavement.
- 3.6 Complete a Leavers Form. It is vital the words 'Death in Service' be written on the leavers form to prevent any unwanted communication with the deceased's next of kin. This will also prevent an exit questionnaire being sent to the deceased's address.

Human Resources Department

- 3.7 Support the deceased colleague's Line Manager in the administrative processes.
- 3.8 If the deceased colleague was a member of the NHS pension scheme, on receipt of the leavers form, the relevant HR Advisor will send any claim form to be completed so that pensions administration can be processed.
- 3.9 Conduct an annual review of leavers forms to identify areas of good practice and for improvement regarding cases of death in service.

Payroll Department

- 3.10 To stop payment upon notification of a death in service until the correct monies owing can be calculated.
- 3.11 Upon receipt of the details of the deceased colleague's Executor, a calculation of any salary due will be made payable to the Executor of the estate (named person).

Communications Team



The Communications Team and Head of Department will be responsible for cascading notification of a death in service to the wider Trust workforce in a sensitive manner.

- 3.13 Where there is likely to be press interest in a death, the Communications Team and Head of Department will liaise to agree an appropriate strategy for dealing with media interest.

Risk Team

- 3.14 Where a death on duty has occurred the Head of Risk will be required to review the case and may need to inform the HSE (RIDDOR) and a decision will need to be made as to whether to declare a Serious Incident Requiring Investigation (SIRI).

4 Death on Duty

- 4.1 Where a colleague has died whilst at work for the Trust care must be taken to limit the information cascade prior to the next of kin being informed.
- 4.2 The Tactical Commander must work with the relevant Police or other authority to ensure next of kin are notified as soon as possible, ideally face-to-face. It may be appropriate for this action to be delegated to the deceased colleague's Line Manager or other appropriate person.
- 4.3 In addition to normal reporting, all incidents of death on duty should be recorded by completion of a DIF1 on the Datix system. This should be sensitively handled, and consideration should be given to restricting access to this report.
- 4.4 Early escalation to the Communications Team should be prioritised as incidents of this nature may generate significant media interest.
- 4.5 If the death results in a criminal or forensic investigation, the Trust will fully support the investigating agency.

5 Audit and Review

- 5.1. All procedures have their effectiveness audited by the responsible Management Group at regular intervals, and initially six months after a new policy is approved and disseminated.
- 5.2. Effectiveness will be reviewed using the tools set out in the Trust's Policy and Procedure for the Development and Management of Trust Policies and Procedures (also known as the Policy on Policies).



This document will be reviewed in its entirety every three years or sooner if new legislation, codes of practice or national standards are introduced, or if feedback from colleagues indicates that the policy is not working effectively.

- 5.4. All changes made to this procedure will go through the governance route for development and approval as set out in the Policy on Policies.
- 5.5. The HR Department will review all leavers forms every 12 months in order to identify episodes of death in service and review in order to identify any areas of good practice or areas for improvement.

6 Financial Checkpoint

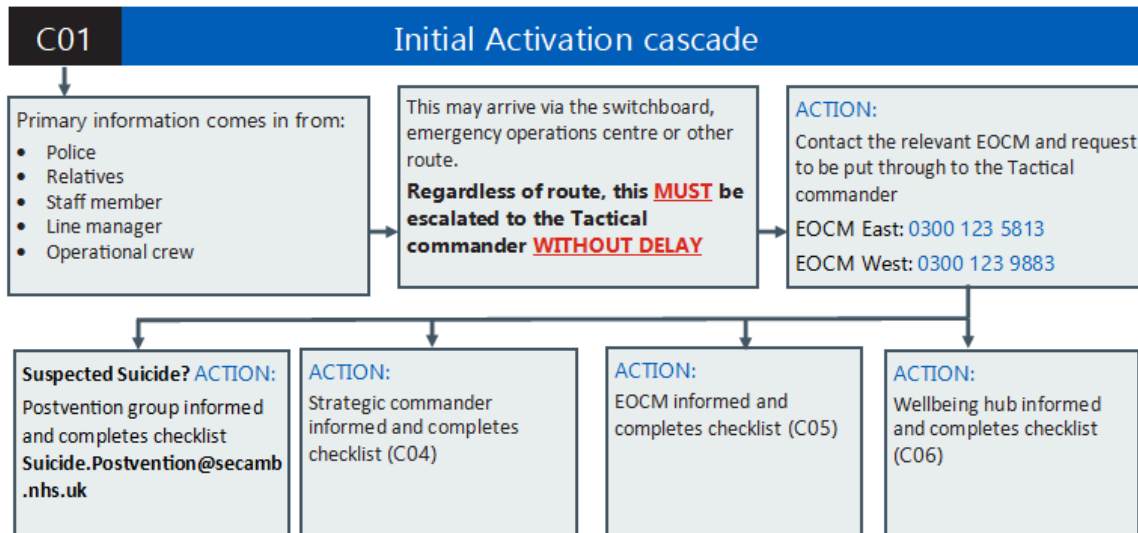
- 7.1 To ensure that any financial implications of changes in policy or procedure are considered in advance of document approval, document authors are required to seek approval from the Finance Team before submitting their document for final approval.
- 7.2. This document has been confirmed by Finance to have no unbudgeted financial implications.

7 Equality Analysis

- 7.1. The Trust believes in fairness and equality, and values diversity in its role as both a provider of services and as an employer. The Trust aims to provide accessible services that respect the needs of each individual and exclude no-one. It is committed to comply with the Human Rights Act and to meeting the Equality Act 2010, which identifies the following nine protected characteristics: Age, Disability, Race, Religion and Belief, Gender Reassignment, Sexual Orientation, Sex, Marriage and Civil Partnership and Pregnancy and Maternity.
- 7.2. Compliance with the Public Sector Equality Duty: If a contractor carries out functions of a public nature then for the duration of the contract, the contractor or supplier would itself be considered a public authority and have the duty to comply with the equalities duties when carrying out those functions.



Appendix A



Appendix B



Death in Service
Guidance for Leaders

Please see below for Death in Service Document.



Death in Service

Guidance for Leaders



1. Introduction

Bereavement in the workplace is an extremely sensitive issue. Grief impacts on the emotional, physical, spiritual and psychological wellbeing of all those involved. Whilst this is a uniquely personal experience a compassionate and flexible workplace approach in the immediate aftermath, and longer term will have lasting benefits for those affected.

This guidance aims to help leaders manage this difficult situation via checklists and relevant sign posting. Whilst every situation will be different and should be managed on a case by case basis, this document will assist in standardising practical considerations and communication to ensure that everyone who has a part to play in assisting those affected by the loss are in a position to do so.

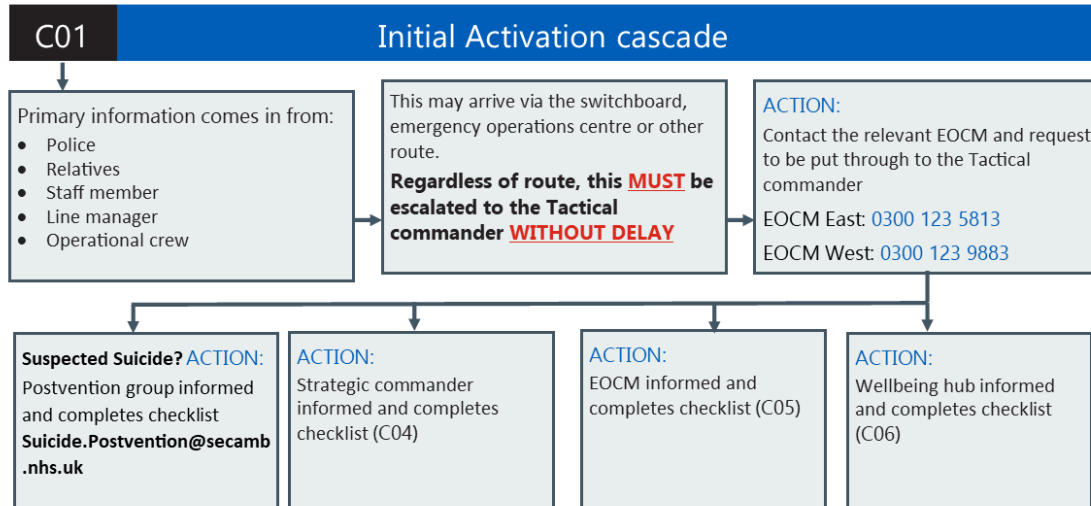
Dealing with and supporting others through the death of a colleague can be one of the most challenging experiences for any leader. It is of paramount importance that you recognise and make provision for your own mental wellbeing and support.

2. Notification

When an employee has died, the Trust may be notified by the colleague's family or next of kin. Whoever is initially notified should ensure that the Tactical Commander is made aware immediately. The Tactical Commander should be contacted via the Emergency Operations Centre Manager (EOCM).

To prevent close friends and colleagues learning of the individual's death in an inappropriate way, anyone notified should avoid circulating the news until those closest to the colleague have been made aware and appropriate support is in place.

There may be an occasion where the Trust is made aware of the death of a member of staff before the employee's next of kin. In such instances, it is important that as far as reasonably possible disclosure of the death is not made until the employee's next of kin has been contacted. In this situation it is important to be diligent in mitigating the risk of news being shared on social media prior to the colleague's family and friends being made aware.



3. Please note

The following checklists are designed to ensure that a standard set of actions are undertaken following the death of a colleague. Depending on the nature of the situation they may contain actions which are not relevant. In reviewing the checklists please use judgement as to which actions should be omitted.



NHS CONFIDENTIAL - STAFF (WHEN COMPLETED)

C02	Situation Report
Name of colleague	<input type="text"/>
Location and role	<input type="text"/>
Circumstances of death ▼	
<input type="text"/>	
How were we informed of their death? ▼	
<input type="text"/>	
Are the next of kin aware?	<input type="text"/>
Who is currently aware of this information? ▼	
<input type="text"/>	
A summary of your next actions ▼	
<input type="text"/>	



C03

Checklist: Tactical Commander

- ☐ Verify the information (this could be via Police EOC, ROLE form, information from the informant)
- ☐ Confirm who is currently aware of this information
- ☐ If possible, consider the wishes of the next of kin in terms of communication cascade
Special consideration should be given to situations where the individuals next of kin may work for the Trust
- ☐ Contact the Strategic Commander with a sitrep
- ☐ Contact Comms on call with a sitrep
- ☐ Contact the relevant EOCM and advise them to utilise EOCM Action Card
- ☐ Make the senior manager of the colleague e.g. OUM or Head of Department aware
If unable to contact senior manager, contact the colleagues line manager e.g. OTL
- ☐ Review welfare support in place for those involved
(e.g. If the death was attended by SECamb colleagues, are they currently stood down? Are local support mechanisms functioning or does the area require additional support?)
- ☐ Make the Wellbeing Hub aware and signpost to the Wellbeing Hub checklist
- ☐ Consider attending the OU/base of work of the colleague to provide support to the local management teams
- ☐ Death on Duty
Work with relevant police force to ensure the next of kin is informed as soon as possible, ideally face-to-face
- ☐ Associated Employees
Where the individual involved in not a direct employee (e.g. A secondment from another organisation, a student, or a volunteer) prioritisation must be given to informing the relevant organisation/university as soon as possible

C04

Checklist: Strategic Commander

- ☐ Contact the Executive on call with a sitrep
- ☐ Contact the Director of the colleague to make them aware
- ☐ Liaise with the Communications team regarding messaging and media interest
- ☐ Consider the need for a conference call with stakeholders (Tactical Commander, Local Manager, EOCM, Communications team) to:
 - Consolidate information agree a communication cascade;
 - Consider the impact on frontline services as a result of the information being shared
 - Agree actions moving forward



C05

Checklist: EOCM

- ☐ Restrict access to the incident on the CAD
- ☐ Make EOC colleagues aware of the need for discretion and confidentiality until the next of kin are aware and the information is made public
- ☐ Undertake a welfare check of EOC colleagues who are involved in the incident (consider requesting additional welfare support if you yourself are involved in the incident)
- ☐ Consider the immediate and long-term impact of vehicles or resources being stood down if involved with the incident (consider contacting the Tac Ad for advice if a specialist asset such as HART or HEMS is stood down for a prolonged period)

C06

Checklist: Wellbeing Hub

- ☐ Signpost staff to available support
- ☐ Consider provision to be available to provide additional cover in the short time
- ☐ Contact the local senior manager to discuss support options

C07

Checklist: Line manager

- ☐ Liaise with Communications team around local messaging
- ☐ Consider which individuals were close to the colleague and are likely to need an increased level of support
- ☐ Review wellbeing support available locally (line manager availability, advertising the Wellbeing Hub etc.)
- ☐ Identify any additional support required for the locality and escalate this to the appropriate line manager
- ☐ Consider working with the scheduling team to move the individual into the 'Holding Area' on GRS. This will prevent them appearing on running sheets prior to HR processing the leavers paperwork.
- ☐ Make local HR advisor aware
- ☐ Work with HR advisor to complete leavers paperwork as soon as possible
- ☐ Consider the potential implications of a high proportion of staff attending a funeral and consider a plan to mitigate this



4. Death on Duty

Where a colleague has died whilst at work for the Trust please be mindful of limiting the information cascade prior to the next of kin being informed. The Tactical Commander and/or line manager should work with the relevant Police force to ensure that the next of kin is informed as soon as possible, ideally face-to-face.

The death may result in criminal or forensic investigations, these will be fully supported by the Trust.

Colleagues who witnessed or were involved in the incident should be signposted to the Trust's Wellbeing support.

Early escalation to the Communications Team is vital as incidents of this nature generate significant media interest.

5. Communications

Sharing news of a colleague's death should be handled with compassion and care. Priority should be given to those individuals who were close to the colleague. It is likely that the local management team will be able to identify these individuals and recommend a package of support for them.

Suggestions for speaking with employees in a sensitive situation such as this may include:

- Discussing the matter away from the busy office, in a private and quiet area;
- Speaking to particularly close colleagues individually, where possible;
- Allowing colleagues time to digest the news before returning to work
- Offering them advice on the services offered via the Wellbeing Hub and encouraging them to access this support if they feel it may be of benefit;
- Keeping the news consistent from person to person and sharing the information which the colleague's family are happy is discussed;
- Committing to updating them on any further news from the family, including funeral arrangements.

Leaders should be mindful of the need make contingency arrangements to cover any essential service where those affected are too distressed to cover their duties in the immediate aftermath of the news.

It may be appropriate to send a locality or departmental email to share the news, please be mindful that this should only be done once the colleagues next of kin have confirmed that they are content with this course of action.

It is likely that once shared the news will be posted to social media accounts relatively quickly. Please therefore,

ensure that the colleagues next of kin have informed everyone they wish to prior to this announcement being made.

When constructing the message please contact the on-call communications team who will be able to aid and support. All communications regarding the death of a colleague should be managed sensitively and should be in keeping with the wishes of the next of kin where possible. Please work alongside the Communications team when releasing this manner of information.

6. Liaising with family members

The Trust, wherever possible, will aim to assist family members of the employee in whatever way is appropriate. The employee's line manager would normally be the direct link between the Trust and the family, through which any Trust department should liaise.

Aside from offering the Trust's immediate condolences and offering words of comfort and support, the line manager should:

- Confirm the arrangements for passing any condolences from staff members;
- Receive details of any funeral arrangements and passing these to employees;
- Explain the Death Benefits Scheme (if the employee was a member);
- Organise the cataloguing and return of any personal effects.
- It is of note that the time frame for these actions is flexible and the conversations should be completed at the discretion of the line manager.



7. Wellbeing

Wellbeing and staff welfare are of paramount importance following a bereavement. Colleagues may need to take time off unexpectedly; find their performance impacted or be temporarily unable to perform certain roles.

Taking this into consideration; sadness, grief and shock are normal reactions to an abnormal event. Feedback from previous events has highlighted the potential for colleagues can feel overwhelmed by offers of support from other services, it is important that grief is validated and acknowledged rather than attempt to be fixed or cured.

Ultimately, it is the management team at the locality who are best placed to identify the additional supportive measures required for the team. **This may include:**

- Increased senior management visibility on site
- A quiet reflective space
- A memorial book
- A memorial service
- Support from the Chaplaincy team

In addition to this staff should be signposted towards the Wellbeing Hub who are able to offer a range of services and support mechanisms.

[Your guide to Wellbeing in SECAmb](#)

Document detailing Wellbeing hub contact details and general information on services available.



▲ Scan here if this is a printed copy

8. Funeral Arrangements

Trust involvement in the funeral of a colleague must only occur at the invitation of the individual's family.

If requested, the Trust is likely to be able to provide services such as coffin drapes and flag bearers.

The local team will often be responsible for the coordination of requested eulogies and guards of honour. For organisation of a flag bearer or coffin drape please contact the Communications Team.

Consideration should be given to the continued provision of operational cover during funerals, other departments or neighbouring operating units are likely to help. Please escalate any concerns regarding the continuation of services during this time as soon as possible.

8. Final note

It is of note that this guidance does not cover every eventuality or provide strict rules regarding actions that must be taken following the death of a colleague.

The situation is likely to be dynamic and challenging; it must be managed with flexibility and compassion. In all instances dignity and care must be considered alongside providing an going service to our patients.