# Guidance for Medical (Crematorium) Referees in preparation for completing professional annual appraisal

# Purpose of this role

The Medical Referee visits the crematorium to inspect all the official medical certificated documentation (known as Forms1-11) regarding the deceased, and if in order he/she gives written consent that a cremation can take place. Without this consent the cremation will not go ahead.

# How you are connected to UKHSA/DHSC for Revalidation

Your connection to a 'designated body' for revalidation purposes is defined by statute and is described by the <u>GMC Online Help Tool</u>. You are connected to UKHSA/DHSC for your revalidation because you do not do this job as a practising GP, nor through being on a performers list. You have no other contracted sessions with other healthcare providers, and because you are employed and paid to do this job by a local authority/county council (*i.e.*, you are not self-employed). If you have no other employment and are self-employed in this role and are also a current member of the Faculty of Public Health (FPH), it is likely that your prescribed connection is to the FPH. If any of this does not apply to you, please contact <u>revalidation@ukhsa.gov.uk</u> or <u>revalidation@fph.org.uk</u>.

## What you need to do

You must follow the same GMC requirements for revalidation and provide the same types of supporting information as any other medical doctor and reflect on how your work demonstrates the four domains of Good Medical Practice. Remember that the scope of your supporting information is related to the scope of your practice – see appendix 1. If you have any other roles within your scope of practice then these should also be covered by the supporting information. Your regional appraisal lead will contact you with details of your allocated professional appraiser.

# What this looks like in practice – what you can provide as supporting information

# **Continuing Professional Development (CPD)**

What do you do to keep up to date? Your CPD must be relevant to your work and can be demonstrated by writing reflective notes on activities you already undertake. You should contact your local appraisal lead for further advice if you are solely a crematorium referee working on a very part-time basis. Your Responsible Officer (RO) requires documented evidence of an agreed number of CPD hours with appropriate reflection.

If you are a member of the Faculty of Public Health CPD Scheme, you should complete between 3 to 6 reflective notes linked to your PDP. Please note there will no longer be a requirement to complete a minimum of 50 CPD credits per year, and no longer a requirement to record the number of 'hours' of CPD activity.

# **Examples of CPD:**

- Reading Ministry of Justice updates and bulletins
- Revising/referring to cremation regulations
- Reading BMJ or other journals
- Learning from discussing clinical details with certifying doctors
- Attending meetings and workshops *e.g.*, for funeral directors and bereavement officers
- Reading the various reports related to Shipman and reflecting on the implications for your practice
- Participating in the medical referees google group forum (details available on request)
- Any reflection/actions taken in response to problems such as avoiding delay to funerals, dealing with doctors who fail to comply with the regulations
- Knowledge of the new role of Medical Examiner, the new legislation and its future implementation
- e-Learning for Healthcare have a suite of programmes specifically for medical examiners to use as a resource for CPD. More information can be found <a href="here">here</a>.

# **Quality Improvement Activity**

 What have you done to improve the quality of service you provide? Details about this requirement can be found in the Faculty of Public Health Specialty Specific Guidance

### Examples of quality improvement:

- Offered feedback or training/workshop to doctors or funeral directors
- Streamlined processes
- Improved communication (with Crematorium Staff, Coroners etc)
- Taken action which resulted in a change in practice in a hospital, GP practice or funeral service
- Taken action which has resulted in an improved quality of information received by service users
- An audit of practice or process
- Case review with Crematorium Referees from other crematoria, or with their deputies