



**Public Health England (PHE) and Faculty of Public Health (FPH) joint Revalidation Briefing #12: 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 Forms 1-11) 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. Some doctors connected to Public Health England (PHE) or the Faculty of Public Health (FPH) act in this capacity alongside wider role(s) and some act only in this role, in which case it may be on a very part-time basis.

**How you are connected to PHE for Revalidation**

Your connection to a 'designated body' for revalidation purposes is defined by statute and is described by the GMC Online Help Tool<sup>1</sup>. You are connected to PHE 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 FPH, it is likely that *your* prescribed connection is to FPH. If any of this does not apply to you please contact [revalidation@phe.gov.uk](mailto:revalidation@phe.gov.uk) or [revalidation@fph.org.uk](mailto:revalidation@fph.org.uk) (see appendix 2).

**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 (including evidence of your participation in quality improvement activity and colleague/stakeholder based 360 multi-source feedback – see below), and reflect on how your work demonstrates the four domains of Good Medical Practice (GMP) – see appendix 1.

***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. A suggested template<sup>2</sup> for recording reflective notes is also attached here as Appendix 3.

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 RO requires documented evidence of an agreed number of CPD hours with appropriate reflection.

You should keep a CPD diary or log, including reflective notes, and provide evidence of between 20 and 50 CPD hours per year, depending on whether you have other roles.

Examples of CPD:

- Reading Ministry of Justice updates and bulletins;

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<sup>1</sup> [http://www.gmc-uk.org/doctors/revalidation/designated\\_body\\_tool\\_landing\\_page.asp](http://www.gmc-uk.org/doctors/revalidation/designated_body_tool_landing_page.asp)

<sup>2</sup> <http://www.fph.org.uk/uploads/CPD%20policy%20from%201%20April%202014.pdf>



- Revising/referring to cremation regulations;
- Reading BMJ or other journals;
- Learning from discussing clinical details with certifying doctors (perhaps looking up afterwards too);
- 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 referee forum (details available on request);
- Providing evidence of formal 360 multi-source feedback using the Public Health specific version of the GMC paper colleague questionnaire – see further information under ‘Colleague & Stakeholder Feedback’ below;
- 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;

#### **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 Speciality Specific Guidance

Examples of quality improvement:

- Offered feedback or training/workshop to doctors or funeral directors;
- Streamlined processes;
- Improved communication (with Trust Medical Directors, 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 improved quality of information received
- An audit of practice or process;
- Case review with Crematorium Referees from other crematoria, or with their deputies.

**Significant Events** There may not have been any, but examples could include:

- An issue that could have resulted in a possible delay to a funeral and consequent distress to relatives;
- Difficulty securing the correct paperwork and signatures from (a) doctor(s);
- A misunderstanding or failure of communication with a coroner’s officer that had, or could have had, an impact on cremation decision or funeral date.

You should provide reflective notes on any documented significant events.



### **Complaints & Compliments**

These will probably be received verbally. They could be from doctors, funeral directors, the coroner, the coroner's officer, or Ministry of Justice officials. You might get compliments from relatives but in terms of feedback this group should not actively be contacted for obvious reasons at this distressing time. You should provide reflective notes on any documented complaints.

### **Colleague/Stakeholder Feedback**

You are required to collect formal colleague based 360 feedback using the "RMS UK Public Health Doctor" online questionnaire. Both PHE and the FPH recommend the use of this questionnaire.

When you are thinking about your raters, we understand you may work in a very narrow field, but please think as widely as you can about who you approach to rate you. You should always include your line manager or supervisor. Others could be people such as:

- Crematorium Staff – one of these must be your line manager
- Bereavement Services Manager
- Funeral Directors;
- Solicitors (if this group of raters charge for a response to a questionnaire we can contact them for you to clarify the statutory nature of your request and ask them to waive such a charge);
- General Practitioners;
- Nursing staff / professional carers.
- Fellow Medical Referees who you may cover leave for

Please note in both cases we will require you to obtain a minimum of 6 responses. Therefore it is advisable a questionnaire is sent to in excess of this number to ensure this absolute minimum is met. If this is not possible please contact your regional revalidation office for further advice.

Remember to describe any actions you have taken in light of the feedback in the colleague feedback section of your input form and in your Personal Development Plan.

### **Patient Feedback**

You definitely won't have any! But you could include feedback from relatives here if it is available. Obviously, please do not actively approach recently bereaved relatives – this is not appropriate.

### **Academic/Research/Education/Training**

If you have any publications, or you have performed any educational activities relevant to this role, please include evidence of this as part of your supporting information. It is unlikely that, in this role, you will have a formal education and training role. This year's PDP



May look very like last year's! It doesn't matter as long as you can show you have a plan for keeping up to date. If you have completed a colleague feedback exercise you may have identified some development themes that could be added. Some examples of development needs could include:

- keeping up to date with clinical practice;
- improving your ability to undergo reflective appraisal;
- more formal personal quality assurance and feedback systems;
- Personal preparation around establishing the new arrangements and how you support your organisation/s for that change (and also how you support yourself) regarding the new role of medical examiner.
- Update knowledge of medical conditions and diagnostics tests

### **Achievements and Challenges and Aspirations**

You may wish to repeat information you have used for quality improvement. You may have built a successful working relationship with a difficult colleague. You may have worked effectively despite constraints around office space/equipment/administrative support etc.

Some medical referees are working beyond the usual retirement age. Typical aspirations might include 'staying engaged and up to date and doing a good job until I retire'; 'supporting a succession plan'; 'supporting the transition to the role of medical examiner'.



## APPENDIX 1

### **What to reflect on in domain 1-4 summaries of Good Medical Practice (GMP)**

#### *Domain 1: Knowledge, skills and Performance*

Describe how you keep up to date through CPD. Refer to evidence, such as audit or feedback about your performance.

Keeping up to date via the Ministry of Justice (MoJ) website to maintain knowledge of the law around cremation

#### *Domain 2: Safety and Quality*

You could argue that the main purpose of your role is safety and quality – the cremation regulations are ultimately there to protect patients and their families. You can refer to anything you have included in your quality improvement section here.

Include any advice given to funeral directors on dealing with bodies with serious communicable diseases.

You can describe how you protect the service from any risks posed by your health. E.g. did you have the flu vaccine? If you have ill health or stress - how do you ensure that your work is not affected? What systems do you have in place to make sure you don't forget important items? E.g. paper, or electronic check-list and reminders.

Describe around the need for awareness of checking for battery powered and other implants that could cause problems during cremation

#### *Domain 3: Communication, partnership, teamwork*

You should reflect on the feedback conversation based on the analysis from the 360 questionnaires that went out to your colleagues (see earlier section on colleague feedback). Refer to any areas in which you were rated highly particularly around communication, partnership and teamwork that have meant in the last year you have achieved this domain, but also and more importantly areas that you were rated in as weaker, around which you now have specific development needs. Describe how you will act on them – most obviously build them into your next year's PDP. You may want to mention other items supporting information from quality improvement that you can reflect on also.

#### *Domain 4: Maintaining trust*

Mention your professional indemnity cover. Refer to any equality and diversity training you have undertaken in the last year. Refer to any feedback about how you treat your colleagues (see above)

State how you ensure honesty and integrity in any statements you make or sign and in the cremation system.



Appendix 2

You can access help, advice and support by contacting the PHE regional revalidation teams across England, and from the Faculty of Public Health, in London – if they are your designated body, as follows:

North of England	Midlands and East of England	South of England	London	The Faculty of Public Health
<b>Names:</b> ➤ Neil Squires ➤ Adele Ward	<b>Names:</b> ➤ Giri Rajaratnam ➤ Christine Butler	<b>Names:</b> ➤ Judy Curson ➤ Nicola Wong	<b>Names:</b> ➤ Cat Davies	<b>Name:</b> ➤ Revalidation Team
<b>Address:</b> Public Health England, North Region, Blenheim House, Duncombe Street, Leeds, LS1 4PL	<b>Address:</b> 1st Floor, 5 St Philip's Place, Birmingham, B3 2PW	<b>Address:</b> 2 Rivergate, Temple Quay, Bristol, BS1 6EH	<b>Address:</b> PHE Victoria, 151 Buckingham Palace Road, London, SW1W 9SZ	<b>Address:</b> 4 St Andrews Place, London, NW1 4LB
<b>Email:</b> <a href="mailto:NORTHrevalidation@phe.gov.uk">NORTHrevalidation@phe.gov.uk</a>	<b>Email:</b> <a href="mailto:MEErevalidation@phe.gov.uk">MEErevalidation@phe.gov.uk</a>	<b>Email:</b> <a href="mailto:Appraisal.south@phe.gov.uk">Appraisal.south@phe.gov.uk</a>	<b>Email:</b> <a href="mailto:LondonRevalidation@phe.gov.uk">LondonRevalidation@phe.gov.uk</a>	<b>Email:</b> <a href="mailto:revalidation@fph.org.uk">revalidation@fph.org.uk</a>
<b>Telephone:</b> 0300 303 8395	<b>Telephone:</b> 0121 232 9279	<b>Telephone:</b> 03300 245792	<b>Telephone:</b> 020 7811 7408	<b>Telephone:</b> 020 3696 1453

Nationally, the revalidation process within PHE is overseen by the team in the Office of the Responsible Officer (ORO). The members of the team are:

- **Dr Imogen Stephens**, Consultant in Public Health Strategy and Deputy Responsible Officer
- **Nigel Woods**, Revalidation Programme Manager
- **Matthew Skinner**, Revalidation Programme Advisor
- **Anna McNeil**, Revalidation Programme Coordinator
- **Jackie Sowerbutts**, Consultant in Public Health Strategy - Medical and Dental Professional Performance
- **Nikki Morris**, Personal Assistant to the Responsible Officer

Email: [revalidation@phe.gov.uk](mailto:revalidation@phe.gov.uk)



APPENDIX 3

**Portfolio Section 5: REFLECTIVE NOTES (KEEP FOR YOUR OWN RECORD)**

<b>Personal CPD – Reflection</b>	
Use this sheet to help reflection on each CPD activity. Whenever undertaking an educational activity time should be spent reflecting on your learning. Complete this sheet whenever possible and keep in your CPD folder. There is no need to submit it to the Faculty unless you are included in the annual audit.	
<b>Title of educational activity:</b>	
<b>Date:</b>	<b>Number of credits claimed:</b>
<b>Which PDP item does this relate to?</b>	
<b>Why did I choose this activity for my CPD?</b>	
<b>What did I learn from this activity or event?</b>	
<b>How am I going to apply this learning in my work?</b>	
<b>What am I going to do in future to further develop this learning and/or meet any gaps in my knowledge, skills or understanding?</b>	

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**THE FPH MAY SAMPLE YOUR RECORDS IN THE ANNUAL CPD AUDIT, but you don't need to send this form in unless you have been included in the audit.**