

Registrar's COVID-19 Update

Preparing for the surge

**Removals of Deceased from
Hospitals and Long-Term Care facilities**



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CEO/Registrar

April 10, 2020



New Provincial Procedure for Removals of Deceased from Hospitals and Long-Term Care facilities

- ❖ Thank you for joining us on this statutory holiday
- ❖ Key information for your today to absorb and follow
- ❖ We will send you the BAO Guidance document as a follow up, for you to read, refer to, share and print for your staff.
- ❖ **This procedure applies to all deaths**
 - not just those from COVID-19

Step-by-Step Guide

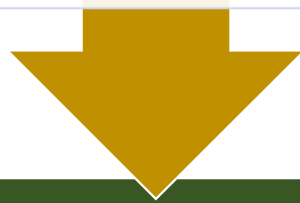
Removals of Deceased from Hospitals and Long-Term Care facilities

Context

- ❖ Yesterday – Ontario’s Chief Coroner prepared new instructions on the release of dead bodies for **Hospitals and Long-Term Care Facilities (LTC)**
- ❖ Hospitals and LTCs have implemented **Expedited Death Response Teams (EDRT)** or have designated people to expedite the release of the body from the hospital to the funeral and transfer service providers (funeral professionals).
- ❖ In keeping with the **Registrar’s direction to accelerate the disposition of the deceased and to minimize storage between death and disposition.**

1. What's Changed?

Hospitals and LTCs have changed their procedures for releasing bodies.
FUNERAL HOME/TRANSFER SERVICE STAFF WILL NO LONGER BE PERMITTED TO ENTER THE HOSPITAL OR LTC.

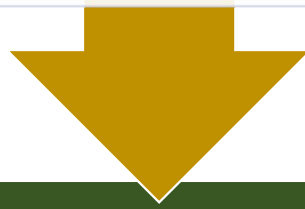


2. What's changed?

Each facility has **designated a waiting area outside its building** where hospital/LTC staff will **transfer the deceased** to waiting funeral professionals. Funeral professionals must be prepared to give their stretcher to hospital/LTC so that they may transfer the deceased from their care into yours.

3. What's Changed?

When a patient dies, the **family of the deceased** will be instructed by hospital/LTC staff to **contact a funeral or transfer service provider**. For hospitals, this will take place within an hour of the death. For LTCs it will be a within a maximum of 3 hours.

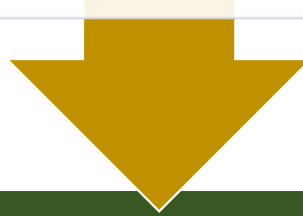


4. What's changed?

EDRT will contact funeral providers to alert them of the death and advise that the family will also be in touch. They will explain the release procedure, give you the family's contact information and will tell you where the designated waiting area is for their facility. They will also **inform you whether or not the death was due to COVID-19**.

5. What's Changed?

Funeral professionals should be ready to go to the hospital/LTC **within an hour (hospitals) or three hours (LTCs)** after taking the first call.



6. What's changed?

When picking up from a hospital, **the hospital will supply the body pouch.**
In the case of LTC, the funeral professional will supply the pouch.

7. What's Changed?

Instruct the EDRT that you do not accept responsibility for personal effects and request that they be removed from the deceased during their preparation for release of the body.



8. What's changed?

Where possible, **the hospital/LTC will provide a Medical Certificate of Death**. In cases where the MCOD cannot be completed/provided at the time of the removal, the OCC Team will provide one **electronically** to the funeral/transfer service provider. It can then be printed by the funeral professional for use in the death registration process.

1. What has not changed?

You will still be expected to **confirm the identity of the deceased.**



2. What has not changed?

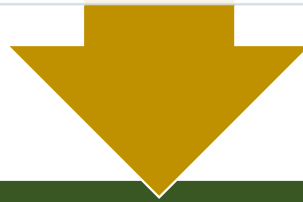
When you get the deceased back to the funeral home/holding room, **re-confirm the identity of deceased and check all tags/bracelets.**

3. What has not changed?

You will still be expected to **provide your own and correctly use PPE.**

1 & 2. What are your responsibilities?

1. The stretcher cover should be removed from the stretcher before going to the hospital/LTC.
2. Have a body pouch available.

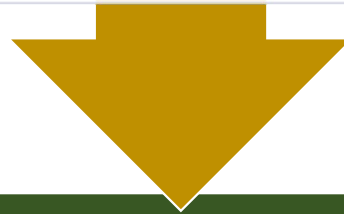


3 & 4. What are your responsibilities?

3. Make sure you have personal protective equipment (PPE) with you and use it. This includes gowns, gloves, hair cover, masks, shoe covers. Many funeral professionals are double gloving.
4. Perform hand hygiene before and after putting on or taking off PPE.

5 & 6. What are your responsibilities?

5. You will not be permitted to enter the hospital/LTC so hand washing may not be possible.
You must bring your own alcohol-based hand sanitizer.
6. It is your responsibility to **ensure that you are following the instructions of EDRT** at the facility from which you are removing the deceased.

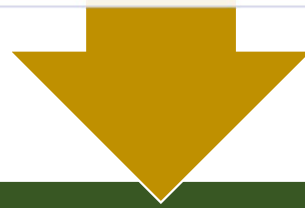


7. What are your responsibilities?

7. Before you hand over **your stretcher** to the facility's staff, **give the facility staff instructions on its use** before they take it away. Remember, these people are already trained in moving people, but may not be familiar with operating your stretcher.

8. What are your responsibilities?

8. Your vehicle should be stocked with **disinfectant or bleach solution** for spraying the stretcher and exterior of the body pouch and plastic cover if using one.



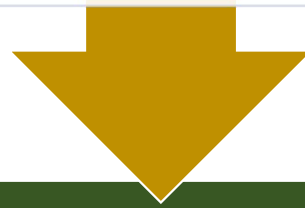
9. What are your responsibilities?

9. Remove **PPE** and dispose of it safely. If no receptacle is available at the facility, ensure that you have an adequate container in which to put used PPE or **proper disposal** back at your facility.

10 & 11. What are your responsibilities?

10. Use hand sanitizer.

11. Bring the deceased back to your facility.








12. What are your responsibilities?



12. **Whether the death was due to COVID-19 or not**, assume the possibility for infection exists and disinfect all equipment used during the transfer, including the stretcher and interior of your vehicle. Use PPE when completing this task.

13. What are your responsibilities?







13. Once in your facility and while wearing **PPE**, **re-confirm the identity of the deceased** by checking all hospital tags.

13. What are your responsibilities? PPE

PUTTING ON PERSONAL PROTECTIVE EQUIPMENT		
1	PERFORM HAND HYGIENE	
2	PUT ON GOWN	
3	PUT ON MASK OR N95 RESPIRATOR	
4	PUT ON EYE PROTECTION	
5	PUT ON GLOVES	

 
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REMOVING PERSONAL PROTECTIVE EQUIPMENT		
1	REMOVE GLOVES	
2	REMOVE GOWN	
3	PERFORM HAND HYGIENE	
4	REMOVE EYE PROTECTION	
5	REMOVE MASK OR N95 RESPIRATOR	
6	PERFORM HAND HYGIENE	

EXPEDITED DEATH RESPONSE

OCC TEAM - Toll Free: 1 (833) 915-0868
Toronto: 1 (647) 792-0440
Email: occteam@ontario.ca



Dedicated hospital/LTC staff (EDRT) facilitates contact with family and Funeral Home within 1 hour (3 hrs for LTC). EDRT ensures MCOD is available or notifies OCC Team.



OCC team is advised and prepares EMCOD (in case one is not with decedent).



FH attends hospital/LTC staging area and gives stretcher to hospital/LTC staff. (FH supplies pouch to LTC.) FH receives disinfected, pouch with deceased & takes into their care.



Transfer to FH. Disinfect stretcher and equipment



At FH, confirm identity of body. Prepare decedent for disposition.



FH obtains EMCOD if one not provided at hospital. FH completes Form 15 and transmits docs to local registrar to obtain Burial Permit



FH transfers to final disposition

EDR Process

Key advantages of this strategy:

- i. Dignity and respect of decedents and families; important for families to keep death care as “normal” as possible. All religions hold the body as sacred.
- ii. Moves decedents from healthcare to funeral sector without delay to place them into care of people best-trained and equipped to handle them.
- iii. Relieves burden on healthcare – devote their attention on the living
- iv. Limits movement/transfer of bodies to prevent redundant handling,
- v. Reduces risk to healthcare & deathcare staff (by reducing exposure), reduces use of PPE.
- vi. Opportunities for mistakes in identification and transfer are reduced
- vii. Avoids mass storage of decedents in alternative facilities (trailers, arenas etc.)
- viii. Deathcare remains local vs centralized outside community

How will the Hospital/LTC Staff ensure the process is safe and runs smoothly?

- | | |
|---|---|
| 1 | The deceased will be placed in a body pouch by hospital/LTC staff in his/her room*. |
| 2 | Hospital/LTC staff will ensure the deceased is labelled. |
| 3 | The deceased will be transferred to a stretcher**. |
| 4 | The body pouch will be disinfected using protocols set out by the institution. |

How will the Hospital/LTC Staff ensure the process is safe and runs smoothly?

- | | |
|---|---|
| 5 | The identity of the deceased will be confirmed by hospital staff using a tag/bracelet affixed both to the deceased and to the body pouch. |
| 6 | Body pouches containing a deceased who died from confirmed or suspected cases of COVID-19 will be tagged by hospital/LTC staff. |
| 7 | The deceased will be transferred from their room/morgue to the pre-determined, designated area and received by the funeral professional. |

How will the Hospital/LTC Staff ensure the process is safe and runs smoothly?

- | | |
|-----------|---|
| * | Funeral professionals should be prepared to provide their own body pouch, especially in the case of LTCs. The handoff of the decedent enclosed in the body pouch will take place in the pre-determined, designated area outside of the facility. |
| ** | The funeral professional will need to provide their stretcher to the hospital/LTC staff upon arrival at the predetermined, designated waiting area. The hospital/LTC staff will bring the stretcher to the patient's room or morgue and transfer the deceased onto the funeral professional's stretcher. |

Be prepared to inter - no stockpiling

- ❖ Ensure you have the ability to inter **now**
- ❖ **Don't wait** to find out that the contractors are busy with your peers.

April 7 - Registrar's Directive

10 MAX or LESS

- in the entire funeral home

- ❖ April 7, 2020 – This directive adds a greater limitation on the number of people who can be at funeral homes, not counting funeral home staff.

April 7 - Registrar's Directive – Qs&As

Q1. Can I have 10 people in one visitation room and another 10 in the chapel room?

A1. No. The 10 maximum directive means 10 people for the entire funeral home facility, not counting funeral home staff. This is a strict rule by necessity. Public and staff safety are paramount. Try to have fewer than 10 in your funeral home.

Remember, funeral homes are subject to the **government's law and risk of civil lawsuits** if they are not complying fully with the 10-max directive and law of the land.

Consider what happened in Newfoundland, where 75 per cent of COVID-19 cases in the entire province have been traced to one funeral home. **Now all funerals and visitations have been banned there.**

April 7 - Registrar's Directive – Qs&As

Q2. Can people wait outside in their cars, or in a line six feet apart until 10 people leave the funeral home?

A2. No. That would enable potential spreading of COVID-19 in cars, or in lines. This is a tough directive. A necessary one. Please stick to it rigidly. Thank you.

Q3. Do babies count as one person or half, toward the 10 maximum?

A3. Each baby or child counts as one person. Please aim for 10 or fewer in your funeral home. This is about minimizing the risk of spreading COVID-19. It spreads easily.

Worth repeating: We can handle the surge...but it depends on YOU.

- 24/7 response – if you haven't already -- **get this organized now !**
- How will you obtain authorization from family?
 - Burial, cremation, or alternate disposition
 - **to occur as soon as possible**
 - Have back-up plan for everything you do
- Communicate with your cemetery and crematorium; you can share cause of death info with them
- Remember we're in a "State of Emergency"

Government – Electronic Death Registrations & Medical Certificates of Death

Electronic Transmission or Faxing of Death Registration Documents

As a temporary measure, outlined below is an interim process to facilitate the issuance of a burial permit during these challenging times.

Effective immediately, funeral homes and municipalities may transmit death registration documents electronically (e.g., encrypted email) or by fax for the purpose of obtaining a burial permit. Please ensure funeral homes continue to work with their municipal partners as operational changes may be required to implement the temporary process described below:

- An amendment has been made to Regulation 1094 of the Vital Statistics Act to allow a copy to be made of the medical certificate of death. Effective immediately, a copy of a medical certificate of death may now be sent between coroners, funeral directors and division registrars (including deputy division registrars and sub-registrars) for the issuance of a burial permit.
- A funeral home may send a copy of the statement of death and medical certificate of death and/or coroner's warrant to bury through a secure electronic method or by fax to the municipality; and the municipality may send the burial permit and acknowledgement of death through a secure electronic method or by fax to a funeral home. Original registration documents will need to be sent to the municipality weekly, on a best effort basis, for processing.

Support for the Sector

- **You are essential – officially and otherwise**
- I have asked the Ontario government
 - To treat the bereavement sector as they do health care right now
 - Specifically, this means I've asked for funding for funeral homes, crematoriums, alternate disposition, transfer services
 - **We know they are working hard at this.**
 - For much more PPE for the bereavement sector

Support for the Sector

Funding Sources Available Now:

- Federal Government 75% wage subsidy program
- Canada Emergency Business Account (CEBA) - small business loans, zero interest, 25% forgivable

Questions?

Thank you all for the professional, caring work you do everyday – especially now!

❖ Ready Together - BAO COVID-19 info page

<https://thebao.ca/covid-19-update-links/>