

WEST NORTHAMPTONSHIRE COUNCIL

CABINET

19th September 2023

**Cabinet Member with Responsibility for Corporate Services:
Cllr Mike Hallam**

Report Title	Coroner's Service contractual spend
Report Author	Sadie Nightingale, Head of Coroners and Registration, Sadie.nightingale@westnorthants.gov.uk

List of Approvers

Monitoring Officer	Catherine Whitehead	30/08/2023
Chief Finance Officer (S.151)	Martin Henry	30/08/2023
Communications Lead/Head of Communications	Nina Cebotari	30/08/2023

List of Appendices

None

1. Purpose of Report

- 1.1. The purpose of this report is to explain and seek approval for the procurement of new contracts to support HM Coroner to meet her statutory duties.

2. Executive Summary

- 2.1 This report sets out the legal requirements which sit with HM Coroner as well as set out the contracts that we require to enable the Coroner's Service to support HM Coroner to meet those duties. There are additional costs arising from the renewal of those contracts and the contracts sit within the context of the Council's need to update and improve facilities for excess deaths.

3. Recommendations

- 3.1 Cabinet is requested to approve the proposed procurement of contracts to deliver a range of services to support HM Coroner to deal with sudden, unnatural, violent, or unknown deaths

4. Reason for Recommendations

- 4.1 To enable HM Coroner to carry out her statutory duties.

5. Report Background

- 5.1 Under Section 1 of the Coroners and Justice Act 2009 (CJA 2009) it cites that it is “A Senior Coroner who is made aware that a body of a deceased person is within that Coroners area must as soon as practicable conduct an investigation into the persons deaths if subsection (2) applies:

- (a) the deceased has died a violent and unnatural death
- (b) the cause of death is unknown, or
- (c) the deceased died while in custody or otherwise in state detention”

- 5.2 Local Authority Statutory Responsibility Section 24 (1) of CJA 2009 it states that it is the LA responsibility to provide the Coroner with her service:

The relevant authority for a coroner area:

- (a) must secure the provision of whatever officers and other staff are needed by the coroners for that area to carry out their functions;
- (b) must provide, or secure the provision of, accommodation that is appropriate to the needs of those coroners in carrying out their functions;
- (c) must maintain, or secure the maintenance of, accommodation provided under paragraph Northamptonshire Coroner’s Service

- 5.3 Northamptonshire Coroner’s Service is a county wide service as the Coronal area combines the areas of the two new local authorities. The Chief Coroner is responsible for this decision not the Councils and therefore this is not a shared service but a single service under the order of the Chief Coroner.

- 5.4 The management of the Coroner’s Service is carried out by West Northamptonshire Council (WNC) with a 48/52 charge back basis to North Northamptonshire Council (NNC) for the operational costs of the Coroner’s Service.

- 5.5 WNC as the lead authority has the responsibility to provide support to the HM Coroner for her to fulfil her judicial function.

- 5.6 This report relates to costs for body transport, body storage/ post-mortem facilities, pathologists, and toxicology contractual spend.

- 5.7 Referrals into the service are largely made by a Medical Practitioner either from the Medical Examiner’s Office at Kettering General Hospital (KGH) or Northampton General Hospital (NGH), or by a General Practitioner (GP). Following a sudden unexpected death in the community a referral into the service is made by Northants Police.
- 5.8 The Medical Examiner Service (ME) was introduced by the Department Health Social Care on a non-statutory basis but is due to become statutory from April 2024. This has been piloted in Northamptonshire since October 2019. It is responsible for scrutiny of all cases that are not directly reported to HM Coroner. The expected benefit of scrutiny of these deaths by the NHS is to reduce the total number of referrals to HM Coroner.
- 5.9 However, with added scrutiny cases, that had not been referred previously are now being referred. By nature, these cases tend to be more complex, and as a percentage of coroners’ casework, the PM rate and the number of inquest hearings has increased. Ordinarily, not all coroners’ casework required a PM or an inquest.
- 5.10 The increased complexity of these cases increases workload for the HM Coroner and WNC staff. As a result, it is necessary to engage medical expert opinion there can also be longer hearings and additional pre-inquest court hearings. This has combined to increase the workload on the Coroner’s Service and the cost of the service.

Transportation

- 5.11 The below table shows the referrals into the service and post-mortems:

Year	PM total	Total annual referrals into service
2019	922	2542
2020	1022	2555
2021	1129	2326
2022	1131	2502

- 5.11.1 WNC has in place two contracted funeral directors to move the deceased between place of death and mortuary or mortuary to mortuary on behalf of HM Coroner.
- 5.11.2 For North Northamptonshire the Co-Operative Funeralcare based in Corby provide this service. Deceased are normally taken to KGH.
- 5.11.3 For West Northamptonshire, Cooksleys Funeral Directors provide this function. Deceased are taken to either NGH or KGH dependant on the place of death.
- 5.11.4 Leicester Royal Infirmary (LRI) currently provide specialist support for specific cases for the service.
- 5.11.5 When a specialist pathologist cannot be identified locally, HM Coroner can instruct a pathologist/ hospital outside of our local hospital contractual arrangements, to determine a medical cause of death.

- 5.11.6 The current cost is per transfer. The contracted funeral directors undertake a combined total of approximately 120 removals per month from the place of death, into hospital.
- 5.11.7 We are charged per removal or transfer. The charge is £120 per journey. An annual cost for body transport is £170k and over 3 years is at least £510k
- 5.11.8 The Head of Service supported the procurement team have carried out an Expressions of Interest exercise in relation to the Body Movement Contract. Our two current providers have declared a continued interest in supplying the service as a three-year term.

Mortuaries

- 5.12 WNC do not have a public mortuary. WNC is therefore reliant on the NHS facilities to store the deceased and carry out post-mortem examinations. Coroners PM examinations (PME) must be carried out by a registered and licensed pathologist. WNC currently has contracts with KGH and NGH NHS Trusts mortuaries on behalf of HM Coroner to deliver the provision.
- 5.13 The costs for this service are charged per deceased, for the relevant period of time of the storage. The total contracted costs for last year were £382K. The combined contract is due to expire and this request is to extend the current contract for a total of three years (1+1+1). This will see a contract value for three years of £1,150,000 if all three years are required. The Head of Service supported by procurement colleagues has issued an Expression of Interest. NGH/ KGH and LRI have all expressed an interest in continuing with supporting this service provision.

Post-Mortem (PM) arrangements for Northamptonshire

- 5.14 HM Coroner's PM examinations (PME) must be carried out by a registered and licensed pathologist. A pathologist must already be a medical doctor registered with the General Medical Council having undertaken specialist training and accreditation with the Royal College of Pathologists.
- 5.15 PM is no longer a mandatory part of pathologist training and there is a declining number of pathologists trained for this work.
- 5.16 Many NHS Trusts do not support pathologists to perform coroners' PMEs in NHS contract time and since the nationally set fee for PMs has not increased since 2007, many NHS pathologists will not undertake coroners' PMEs. The statutory fee is £96.80 for a standard post-mortem. For a special post-mortem the fee is £276.90
- 5.17 NGH do not employ PM trained pathologists and KGH have one, but they do not undertake HM Coroner PM's. The Coroner Service is reliant on directly appointing their own pathologists and have five pathologists that support the PME work at KGH and NGH. The service has a business continuity plan for agency pathologists and the cost is approximately 3.5 times the statutory fee.
- 5.18 The cost per PME was agreed locally in 2018/2019 at £150 per standard PM including the supply of the final post-mortem report. The fee was above the statutory fee, to attract pathologists to

undertake Northamptonshire's PME's. Additional charges were made by pathologists for histology (biopsies) and court attendance.

- 5.19 To remain competitive and retain our pathologists the charge per standard PM is set to increase from September 2023 to £250 per PM.
- 5.20 Based on last year's PME's (1131) the new rate will introduce a pressure of £113K per annum, of this figure, £59k relates to West Northamptonshire Councils 52% share. The ongoing funding requirement will be reviewed as part of 2024/25 budget setting exercise.
- 5.21 The Service has a Memorandum of Understanding between Pathologist/ HM Coroner and WNC which sets out HM Coroners expectations and standards for timely final PM report.

Toxicology

- 5.22 In certain circumstances a pathologist may require toxicology to ascertain a medical cause of death and if the death was due to Natural or Unnatural Causes. If the death was natural, the death can be registered. If the death is unnatural, an Inquest is required before death registration takes place. On average 25-30 cases per month require a toxicology test. This service is provided by Toxicology UK and service intends on going out to tender for a three-year contract. The cost per case for toxicology is per case £425.
- 5.23 Subject to tender and using the current values the cost for a three-year contract will be £459k

6 Issues and Choices

- 6.1 The proposal is to carry out a procurement exercise to select suppliers to deliver a service between now and 2025. It is proposed to provide flexibility within the contract to terminate earlier if alternative delivery arrangements are established between now and 2025. The contract is therefore on the basis of 1 year with the potential to extend until 2025.

7 Implications (including financial implications)

7.1 Resources and Financial

- 7.1.1 This is a niche service with limited choice in available provisions that meet our requirements of an accredited facility by the Human Tissue Authority who are licensed premises for storage and to undertake post-mortem. For the Body Movement contract, we had no interest from a soft marketing exercise, only the current providers following the Expressions of Interest. The service is demand led and the costs may increase from the previous contractual arrangements. The ongoing financial implications of the latest cost assessment of service demand will be carefully monitored throughout the year, and considered as part of 2024/25 budget setting process.

7.2 Legal

- 7.2.1 The contracts are being entered into with the benefit of advice from procurement colleagues and in accordance with the Council's Contract Procedure Rules, where appropriate waiving

requirements because of the lack of suppliers in the market. Expressions of interest have been used to test market interest prior to determining the appropriate procurement route.

7.2.2 This is a statutory service and there is legislation set out in the body of the report which explains the Council's statutory obligations.

7.3 Risk

7.3.1 The service is a critical service for the local authority.

7.3.2 Without approval the service would not be able to deliver this critical function and would cause delay to families in death registration or funerals

7.3.3 The service would not be able to respond to a mass casualty incident

7.4 Consultation and Communications

7.4.1 There has been consultation with some current providers to inform the specification. General engagement takes place on a regular basis with Pathologists, Funeral Directors, and the Mortuaries KGH and NGH as part of ongoing liaison and partnership working.

7.5 Consideration by Overview and Scrutiny

7.5.1 This report has not been considered by Overview and Scrutiny.

7.6 Climate Impact

7.6.1 The transportation elements of the contract do have impacts on carbon footprint of the service and every effort is made to limit the unnecessary transportation of deceased and to deliver services locally. However due to the shortage of mortuary space, pathologists, and specialist facilities it is necessary to transport deceased in order to comply with statutory obligations within relevant timescales.

7.7 Community Impact

7.7.1 The proposals will not have a direct impact on the bereaved and specific communities however it will help to avoid delay in death management which is key to the experience of those impacted by the service.

8 Background Papers

8.1 None