

THE CORONER'S OFFICERS ASSOCIATION RESPONSE TO THE GOVERNMENT'S DRAFT BILL ON CORONERS REFORM

The Coroner's Officers Association (COA) has serious concerns about the Draft Bill on Coroners Reform

Numerous public inquiries have centred on the actions of NHS doctors (Bristol Royal Infirmary, Alder Hey, Manchester, Isaacs and Shipman). Shipman also included an extensive review of death certification and coroners' investigation; and both it and Luce's 2003 Fundamental Review recommended a national service with scrutiny of all deaths. It is therefore ironic that the Government has decided not to proceed with such scrutiny and that the Bill reforming the coroners service is "the best way forward". It also suggests that the reforms proposed in the Draft Bill on Coroners Reform will be "...complemented by initiatives the Government is developing aimed at improving patient safety and promoting quality in the NHS".

The Government's rationale for the Bill, set out in the Regulatory Impact Assessment (RIA) of 12th June 2006 (paragraphs 7 to 10 inclusive on pages 2 and 3) diverts attention from the serious inadequacies in the death certification, the primary object of the Shipman Inquiry's criticisms, onto the weaknesses of the coroners service and wrongly suggests that its proposals for coroners address those weaknesses.

The COA believes that the proposals in the Draft Bill clearly does not address the fundamental weakness of the system namely, that the death certification process has not changed so a Shipman scenario can recur; and does not correct the weaknesses of the coroners system namely, that all deaths are not reported for scrutiny and that there are insufficient appropriately trained coroners officers.

The key role of the Coroners Service is to protect society. To that end, the COA believes that an effective coroners service to the bereaved and general public requires that all deaths are reported to the service and that if an investigation into a death is needed then:

- The investigation is independent, thorough and meaningful.
- The investigators have the resources, training and expertise to that end.
- The bereaved are kept informed and involved in the process.
- On completion of the investigation, the inquiry is brought to a conclusion as speedily as possible.

The COA is dismayed that there is no mention or acknowledgement of the role of coroners officers in the Draft Bill when it is acknowledged by the Coroners Society that coroners officers are the eyes and ears of the coroner; locally available to families and, as such, have the frontline day to day contact with the bereaved.

Coroners officers are employed, not by Coroners, but by police authorities or local authorities and this hybrid situation has long been a cause of friction in some areas as to who - the coroner or the employer - has the final say in directing the coroners officer's work. A continuance of this unsatisfactory arrangement has to be at odds

with the independence of the service and can only perpetuate the inconsistencies in the levels of service to the bereaved.

The COA, like the Coroners Society, hoped for a national Coroners service; that coroner's officers would come under one independent employer; and that the service would, at last, be appropriately resourced with mandatory accredited training and national standards . Sadly, coroner's officers are to remain with their current employers who may or may not decide to negotiate a transfer to another employer thereby reinforcing for the foreseeable future the uncertainty which has blighted the service and which has been the motive for further under-investment in resources and training.

According to the RIA "the Bill is not expected to change directly or indirectly the total numbers of coroners officers or staff for the new service. The COA can not see how, without further investment in front line staff and their appropriate accredited training, the new service will better serve the bereaved.

The Draft Bill does not include provision for the mandatory accredited training of coroner's officers and staff. Although we acknowledge the benefits of a Chief Coroner who will, amongst his/her many other functions "prepare and maintain appropriate arrangements for training and guidance" of coroners and any persons assisting them, the COA does not believe that the Chief Coroner will have the power to compel employers to provide sufficient resources and training for coroner's officers. This was confirmed to us at the first of the DCA's regional workshops in London on Friday 23rd June 2006.

The COA has long had concerns about the lack of training available for coroners officers and staff. As a result of initiatives by the COA in partnership with the University of Teesside, three accredited courses for coroners officers and staff have been developed.

The COA is dismayed that there will be no national funding made available to ensure that coroners officers currently in the service and those coming in to the service cannot expect to receive what training there is currently available, especially when there are no development costs involved as the courses are already available. The total course fees per officer for all three courses is at present £2150.

In summary, on detailed consideration of both the Draft Bill and the Regulatory Impact Assessment, it seems to the COA that the purpose of the current proposals is not to improve death reporting and investigation but to divert attention away from the deficiencies in the death certification process and the lack of scrutiny. Nothing in this Draft Bill would help detect or prevent another "Dr Shipman"

Without proper investment in resources and appropriate national and accredited training of frontline staff; the investigation and inquest procedures can not provide a more effective service for bereaved families and others who are touched by it

Christine Hurst
Chair