

Transcript of 'Talking with bereaved parents about their choices for burial or cremation after the death of their baby'

Introduction

Talking to parents who are bereaved about the key decisions they need to make after the death of their baby can feel daunting, and professionals may feel upset too. Before discussing these choices make sure that you are informed, prepared, and that you also have support. It may be appropriate to discuss the options with parents prior to the delivery of their baby. Some parents may choose to complete the necessary permissions in advance.

The conversation

Sit down with parents (or next of kin), ensuring that you provide them with privacy and adequate time for discussion without interruption. Get to know their names and use them. Express sympathy and sadness. Ask parents if they have given their baby a name, and if they have, use the baby's name. Treat all families with sensitivity, kindness, respect, and compassion, and allow them time to make decisions. It may be difficult for them to think clearly. They may have lots of questions and should be allowed space to reflect and, if necessary, make changes to their initial decisions.

The choices

Following the death of a baby at any gestation, parents are themselves able to make the arrangements for a burial or cremation, usually through a local funeral director if they wish. Some parents find this a helpful part of the grieving process. However, others may feel that they do not want to be involved as this may feel overwhelming. In this situation they may choose for the hospital to make the arrangements. Explain clearly to parents that whatever they choose, their baby's remains will be treated with dignity and respect at all times.

Are there differences for babies who die before and after 24 weeks' gestation?

Parents who lose their baby after 24 weeks' gestation will need to register the baby's death and they will be provided with a Certificate of Stillbirth by the hospital. There are no statutory forms to be completed for babies who die before 24 weeks; however, a baby who has shown signs of life after birth is considered liveborn for registration purposes, irrespective of the number of weeks of the duration of the pregnancy; in this case, a Medical Certificate of Cause of Death is required.

Before parents make their choice whether to make arrangements themselves or request that the hospital does so, there are some additional pieces of information that you should discuss. All cremations for babies born over 24 weeks' gestation, whether organised by the family or the hospital, will be carried out individually: therefore, inform parents that it is very likely that ashes will be recovered and returned to them if they wish to receive them.

Parents can choose to arrange burial or cremation themselves for babies born before 24 weeks: this will be performed individually and therefore they would be able to receive the ashes. However, if

the parents choose a hospital-arranged cremation for babies born before 24 weeks, the cremation will be collective or shared and therefore in this circumstance no ashes can be returned to parents.

Recovery of ashes

Parents choosing cremation must be advised that the accepted definition of 'ashes' means the material (other than any metal) to which human remains are reduced in cremation.

All crematoria in Scotland use baby trays or other recognised practices to maximise the recovery of ashes. Parents are then free to choose what they then do with the ashes – whether they scatter or inter them, or whether they would prefer the crematorium to do this for them.

Ashes will almost always be recovered following the cremation of a baby (although they will not be able to be returned to the parents following a shared hospital cremation). If, on a very rare occasion, ashes are not recovered, the inspector of crematoriums and the parents must be informed within 48 hours. The cremation authorities must undertake a review to understand what occurred, and in due course the parents and the inspectorate should be provided with an explanation.

A hospital-arranged shared cremation is only available for the cremation of pre-24-week gestation pregnancy losses. In this situation, a baby's remains will be placed in an individual casket, within a larger container which is shared with other pregnancy losses. The babies will be transported from the hospital and cremated together. Following this kind of cremation, it is not possible to return ashes to the parents. Any remaining ashes will be scattered or interred in a local communal garden of remembrance. Some crematoria provide a service before a shared cremation which parents can choose to attend.

What if parents can't decide or change their mind?

Parents should be given adequate time and should not be rushed to make decisions following the death of their baby. Eventually, written consent will be needed to indicate their wishes; however, this is not required immediately. In particular, no decision must be made before parents leave hospital. In this situation, hospital staff should communicate and liaise closely with community health professionals who may be visiting the family, to ensure that the necessary paperwork is completed in due course. It is important to ensure that the information provided to families about their options is the same, whether it is from healthcare professionals, funeral directors, or crematorium staff.

Parents may find it difficult to remember much that has been discussed after the death of their baby. It is good practice to provide written information which they can refer to later. This should include a telephone number and contact name, in case they change their original decision, which they can do within 7 days of the pregnancy loss or if they have any further questions. If they cannot make a decision within 6 weeks of a pregnancy loss, below 24 weeks a shared cremation will be arranged by the hospital.

Some professionals such as community midwives, funeral directors, or crematorium staff may require to visit bereaved parents at home, or care for them and their baby in the community. All professionals who are involved in the care of a baby who has died must acknowledge the individuality of the situation and treat the parents and their loss with respect and dignity regardless

of the gestation. They should also be provided with up-to-date and consistent verbal and written information about the services that can be offered by the hospital, the funeral director, and crematoria staff.

Record keeping

All professionals should keep good records, ensuring seamless care. Accurate records should be maintained, stored, and secured electronically, ensuring the parents' (or next of kin's) privacy. Records should set out the options available with regards to burial and cremation, including the recovery and return of ashes. Any decisions made by parents should be clearly recorded, displaying their signature and where the baby's remains will be located after cremation or burial. A copy of any form or record signed by the parents should be given to them at the time of signing for their own personal records.

Local policy development

All NHS Health Boards now have a Pregnancy and Infant Loss Multi-Agency Working Group that aims to ensure that the highest standards of care are provided to women and their families, at the time of and following a pregnancy and infant loss. This working group will take the responsibility for leading the implementation of the recommendations from the Bonomy Report, as well as any other relevant Scottish Government policies and guidance such as the Burial and Cremation (Scotland) Act 2016.

In summary:

- Understand the important issues prior to talking to parents
- When parents are ready to hear, explain the options that are available for their baby with regards to burial and cremation
- Complete appropriate documentation
- Provide parents who are bereaved with your department's contact details
- Consistent messages should be communicated to parents from all caregivers
- Records should be clear and stored appropriately by all professionals involved
- Processes to maximise ashes must be used at all times
- Parents should be informed that following a shared cremation for a baby who died pre-24 weeks, no ashes will be returned to them. Instead these will be scattered or interred in a local garden of remembrance.

The film was produced in May 2017 and can be found at www.sad.scot.nhs.uk or <https://vimeo.com/295358413>