 **NHS Education for Scotland**

**Transcript of ‘Body Donation in Scotland – Understanding when a person dies’ webinar**

**Speakers:** Graham Whyte, Associate Postgraduate Dean, NHS Education for Scotland and Consultant in Palliative Care Medicine, Glasgow. Catherine Chadha, Vivienne McGuire, Laura Shiels and Agnieszka Kruk-Omenzetter.

**GW:** Good evening. My name is Graham Whyte. I'm the Associate Postgraduate Dean with the Grief and Bereavement team at NES, and also a Consultant in Palliative Medicine at Marie Curie Hospice in Glasgow. Apologies you can't see my face. We've had some issues with my camera this evening, but

if we can rectify that we will but if not, I'll just carry on regardless, shall we say. So, yeah, so as I said welcome to what's now the, the 20th NES bereavement webinar. I'd like to extend a warm welcome to our speakers, Catherine Chadha, Vivienne McGuire, Laura Shiels and Agnieszka Kruk-Omenzetter, from various universities around Scotland. We've got representation from University of Edinburgh, University of Dundee, and University of Aberdeen anatomy departments here. So, I'm, I'm delighted that they're able to join us for this webinar this evening. Just to give you a little bit of background about the, the structure to the webinar. We'll be looking to have approximately 40 minutes of a PowerPoint presentation from Catherine and Vivienne. And amongst that, we're going to launch the new body donation film that we've been working on recently. And so we look forward to letting and sharing that with you. And then the remainder of the session will be, question and answer session. So I would encourage you to have a think of any questions during the presentation that you would like to, like to ask. Just for a little bit of housekeeping. We will, all your cameras are, are turned off and, and, and your mics will be muted. So any questions you do want to submit, if you can do it via the Q and A function in the, in the chat, or the, sorry, the Q and A function on the, not question mark that you can see there. And then we'll look, look to work through the questions at the end of the, of the presentation. I think we'll endeavor to answer all the questions if we can, but if for any reason we're unable to answer any questions and you would still like to, get an answer, then please contact us at the support around death website and then email supportarounddeath@nes.scot.nhs.uk but we'll maybe put that in the chat just so that you've got, got that as well. And likewise, if there's any other questions after the webinar finishes or any queries about the recording, please just, contact us at the same email address. We will be posting a recording of the webinar on the SAD website and I think what you'll also be emailed, a feedback questionnaire following the, the webinar just to get your thoughts about the webinar and also any topics that you might want to be covered in, in future webinars. With regard to the recording, obviously we would look to edit the Q's and A, the Q and A sorry. And, so we won't feature any names or identifying information so please feel free to ask, any questions that you do, you do have. So I think that covers most I think from the introduction so without further ado, I'll, I'll hand you over to Catherine and Vivienne for the rest of the, the webinar.

**CC:** Good evening. Thank you so much for spending some time with us. I'm Catherine Chadha. I'm a Senior Anatomy Technician at the University of Edinburgh, previously Bequest Coordinator at the University of Glasgow. We've been really excited to share this project with you and hear a little bit more tonight about how we can support you with body donation for your service users, residents, and patients. As Graham mentioned, this webinar will cover an overview of the body donation programme in Scotland, consent processes and documentation and the role of health and social care following a person's death and what happens after a person's body is released. These are the team of speakers that we have today. It's myself, Vivienne, Laura, and Aggie and all the respective institutions and job titles available for you to have a look at there so you'll know who to contact if you need to. So yeah, well, there are five universities in Scotland and again, their locations are highlighted here. Before we kind of kick off, I would really like to just ask and see if Becky might be able to run the poll for us, please, to say have you been involved in supporting body donation before? It would be really helpful for us to get a bit of an idea about whether everybody on the call has experience of supporting anyone with body donation. And I hope I'll be able to see the results, yeah I do. Great, a nice mix of responses. So yeah, please keep responding if you can. Another question we wanted to ask as well is how confident do you feel in supporting someone with body donation? So that could be something you have a think about across the presentation today. So this will hopefully give us a bit more opportunity to explain to those who have been involved before just about any changes or kind of a reminder of the processes. And we'd really welcome your insights and questions if you have or if you haven't had experience before. So what is body donation? When someone leaves their body to a Scottish university, it's a generous decision that supports the training of students, medical professionals and scientists. Body donation improves students' knowledge and understanding of the structure and function of the human body and it enables healthcare professionals to own their surgical techniques. It also contributes towards the future development of medical research. It may be something that if you are in healthcare that you experience when you were at university. You may have worked in dissection labs or with our donors in various other forms across your surgical training perhaps. So when somebody donates a body to us, there is a few routes that their body may be used. And we thought it might be helpful to give you a bit of an idea, about how somebody's body might be used and, and whether that's anatomical examination, training or medical research. Anyone who donates their body to us is cared for by experienced and compassionate team of licensed anatomists and technicians. And the further teaching team. These people ensure that donated bodies are treated at all times with respect and dignity they deserve whilst overseeing and approving all of their educational and research activities that our donations support. So we are governed, under the Scottish Law and the Anatomy Act 1984, and Human Tissue Act Scotland 2006. And we regulate the use of bodies, sorry, who regulate the use of bodies for anatomical examination, education and training. This provides us with our legal framework for the removal, retention and lawful use of human remains and body parts. And the license from the Scottish Government allows us to perform this activity for education, training and research. To be able to donate your body it's really important that we have appropriate consents and there are, is a very established process for that in each university. It's important that the individual and the next of kin or their executors, as well as their health and social care providers understand what's involved in consenting to body donation. There are a few steps that must take place to register while the person is living and that includes completing, signing, and submitting the required documentation. We will refer to this as the Declaration of Bequest Form. Also just to mention, maybe one of our myth busters is that there is no upper age limit for donation. Anyone over the age of 12, with parental consent until they're 18, can choose to donate. A lot of questions that we have from healthcare and social staff, social care staff are that they wouldn't know if somebody was registered to be a body donor and having conversations with those who are living and expressing an interest is something that people frequently might call a Bequest Coordinator to enquire about. So you might have a patient or service user who expresses an interest in donating their body and a person may mention that they're planning on going to science or that they're giving their body to science. Often, however, many people haven't taken the steps to actually complete this and their intention isn't recorded, whether with the university or perhaps with their solicitor. And so perhaps when you are having those end of care, end of life care discussions, body donation is mentioned by a patient or their family member, it can be important to check if the evidence of their intention to donate is in place. And this can help to ensure as far as possible that a person's wishes are carried out and to avoid disappointment by the family members at the time of death. Also important to encourage conversations with families to ensure that they support the person's decision as we require their consent. So how does somebody register to donate their body? This is our common consent form and if you're involved in the care of someone it can be helpful to know what process they need to follow. So the person themselves, their next of kin or their carer or healthcare professional could contact the relevant university to request an information pack. This would usually be the university with a medical school that is nearest to where the person lives. And the relevant Bequest Coordinator will send an information pack and, to the contact details that you provide. Some universities also have packs available to download from their websites but it is advisable to contact the Bequest Coordinator directly if you have any questions. And the Bequest Coordinator is the dedicated member of staff within the university who is responsible for the body donation programme. They are your best person to contact with any queries. Anyone can contact the Bequest Coordinator and have an informal discussion about the process and what to do when a potential donor dies. If however, there are any questions about whether or not someone is registered, whether there's paperwork in place, it would usually need to be the next of kin as noted on the paperwork or the person themselves who gets in touch for data protection and confidentiality reasons. It is important that a donor provides informed consent for the, for the donation themselves and it's not possible for somebody else, for example, power of attorney or executor to do so exclusively on their behalf. So these are some of the questions that we ask of our potential donors, just to ensure that they know exactly what's involved. They'll have opportunity to discuss any of these with the Bequest Coordinators at the time. And if after careful consideration, the potential donor decides to proceed, all copies of the Declaration of Bequest must be signed by the person themselves in the presence of a witness who must also sign and date the forms. Ideally, the witness should not be related to the person but it may be if somebody is not available. They should keep at least one copy with their personal records and possibly give a copy to their solicitor or next of kin. You can return an original hard copy to the anatomy Bequest Coordinator and they will then lodge the details on file. It is strongly recommended that the donor discuss the next of the, their intention with the next of kin because without their cooperation it's not possible to proceed with the donation process at the time of death. They may wish to inform their GP or any healthcare or social care people that are involved in their care. And a, a copy of that Declaration of Bequest may be retained in their, with their medical records or their notes. It's not possible for someone to donate their body if they've not either completed this or made a, a statement of intent with a solicitor that has been lodged and signed. It's always recommended that it's not just the will that's completed, if at all possible, if there is an option for somebody who is, has capacity to consent, that they do complete a new Declaration of Bequest form rather than relying on a will. So the Bequest Coordinator will contact the person who has registered to confirm safe receipt and they are now on the register. So if you've supported somebody with that process, that would be the confirmation that that has, has all been put in place. And that often puts patients and service users at, at a great deal of, of comfort to know that that paperwork has been received. And they will possibly check again across the time that they're still living to see if they're still on the register. And, they, they shouldn't worry too much but it can be a really a good opportunity to just be reminded of the process and, and contact the Bequest Coordinator again. And I just wanted to maybe make a statement just before I pass over to Viv, just to say, you know, that our Bequest Coordinators understand it can be really difficult to discuss body donation at a time when someone is terminally ill. And it can be really helpful to have these conversations early while a person is able to express what matters to them about their end of life care and what they would like to happen when they die. When everyone is aware of what needs to happen when the person dies, this can support an efficient process at the time of death for all involved. And being prepared and having paperwork in place that is accessible to those who might be involved can really help. In a social care or hospital setting staff may consider body donation as part of anticipatory care planning as a means of having conversations about what matters to people and how they want to be cared for and what they would like to happen. And I'd just like to pass over now to my colleague Vivienne, to talk about a little bit more about the role of social and healthcare staff when the person dies.

**VM:** Thanks, Catherine. Yes, my name is Vivienne McGuire and I'm the Bequeathal Manager at Dundee University. So we think that your role, as health and social care staff following a donor's death is vital to us. The information that you can give us, at the time of a person's death and how quickly you can get the information to us, could be the difference between us being able to accept someone or not. So it's essential that we are contacted as soon as possible when a donor dies. We always say the onus is on the families to do this but obviously they might ask you to do this on their behalf. Just a note that all of us kind of find that if a death takes place in a hospital setting, especially at a weekend, sometimes notes are removed from the ward and so by the time we've called on a Monday morning notes have gone. So hopefully the information that you get from this webinar will let you know the kind of information that we need. Should that, should that be the case. A frequently asked question is if a donor could be a, if a person rather can be registered as an organ as well as a body donor. We always say there's no problem with this. We just advise donors to have the discussion with their families as to what they want to take precedence at the time of their death. Obviously we would advocate organ donation but if organs don't prove useful to be transplanted then we have the option of, of body donation to consider. Conversely, if a person has donated organs, unfortunately that would negate a body donation because we require bodies to be intact for embalming. The only exception is corneas. Corneas can be transplanted at the time of death and it doesn't interfere with the, the body donation programme. So universities can accept, can accept bodies for up to three to five days after death. And obviously, in between time of us, the person dying and us being informed they should be kept under refrigerated conditions. If a person dies in a hospital then obviously a mortuary will be where the, the person will go. But if a donor was to die in say, a nursing home, a care home setting, or even indeed at their own home, then care staff and families would, may want to contact a funeral director to have the person taken into their care under refrigerated conditions until such time as we can make a decision.

We could always arrange for families to visit the deceased in the time before they arrive at the university but obviously that will depend on circumstances and, and timings. So the decisions regarding acceptance, can only be made obviously after for speaking to, after speaking to medical staff. But what we will see is that there's no need to wait until the official death certificate has been issued. That may delay the process somewhat. All we need is a verbal assurance that the MCCD has been signed and what's been written on it and that's suffice for us to, to move forward. Each donor is considered on a case by case basis and we can only accept once the licensed teacher of anatomy at the university, at each university has, has given their, has given their permission. So yes, of course we'll be taking a medical history and we will ask for a short medical history of the deceased at the time we phone or you phone us. So obviously the attendant doctor, GP or nursing care staff are best placed to give us the information we are looking for. And if you could give us as detailed a summary of the person's condition at the time of their death then obviously it helps us, it helps us with the decision making process. And I would always say it's best to discuss each case with the Bequest Coordinator. Each university has different accepting criteria and, and it may well be that you've had experience of a patient being declined previously for something whereas now that condition might be accepted. So always best to chat to us just to, to make sure. So the questions that we might ask you. Obviously cause of death and the events leading up to the cause of death, infectious or transmittable diseases such as HIV, Hepatitis C, height and weight. Now height and weight is very, very important to us in the decision making process. Now, we understand that not all patients are weighed and measured and sometimes information in patient notes can be well out of date. But if you could provide us with an accurate as possible estimate of a person's height and weight at the time of their death, it really does help us in the decision making process. We'll also ask about recent surgeries, anything that's left an open wound, again, which might affect embalming process. We will ask about cancers present and previous cancers that a patient may have had. We will also ask about the presence of any jaundice, edema, dementia and vascular disease. Now, not cases to decline, but it's always useful to know if a patient was wearing a pacemaker and if they had any joint replacements, any hips, joints, hips, or knees rather. So obviously the main reason for collating the information quickly is to support the families during this difficult, during the difficult time. These people are not only processing the grief, the death of their loved one, they're also processing the fact that their, their loved one wanted to donate their body for, for medical research and that can be quite difficult. So any help you can give us in this process is greatly appreciated, not only by the families but certainly by us too. So once a body's been accepted by university, we will make transport arrangements to bring the person to our institution. We will discuss paperwork requirements with the family at that time but they should go ahead and register the death in the normal way after receiving the MCCD. Now, obviously not everyone could be accepted and if a person can't be accepted for non-medical reasons, and if consent is in place on their form then we can refer to one of the other universities to see if they're in a position to accept. And if we've exhausted all routes and decide that we cannot accept, we will let the family know this. And at that time they'll have to make private funeral arrangements. So universities can retain bodies for up to but no more than three years. And at that time the university will arrange the cremation of the donor at the university's expense. Now families can elect to have the ashes returned to them for private interment or scattering in a place that's significant to them. And if they don't want to do this then the universities can arrange to scatter ashes in the garden of remembrance at the local crematorium. Families can have bodies returned for private burial and that we can do in coordination with the family and a funeral director but families will be made aware that that will be borne by either themselves, the cost of that rather, will be borne by themselves or by the deceased's estate. So each university holds a memorial service to which the friends and family of the donor is, is invited to. And I always think this is quite a poignant service because it gives the family, I think it's the point at which the family kind of understand why their loved one has donated, donated their remains for medical research. The family and friends get the chance to meet staff and more importantly, the students who have benefited from the generous bequest of their loved ones. In fact, the students often refer to the donors as their silent teachers. Each university has a remembrance book which contains the names of all the donors and families are welcome to come and view this at any time. In fact, whether it's a person who's thinking about signing up for donation or it's the family of, of someone who's already donated, our doors are always open for people to come and discuss the process at any time. And of course, your help in making this happen is invaluable to us. Thank you. So I'll hand over to Catherine who's gonna give a quick synopsis of what we've discussed so far.

**CC:** Thanks Viv, I just really wanted to provide a very short summary of the information just to really kind of hammer home a couple of points that we think an awful lot of people would really benefit from having just as sound bites to take away from today. So crucial, it's not possible for someone else to register another person for body donation. They must do that themselves when they're living. A person can at any time remove themselves from the bequest register if they change their mind. Just contact the university and they will remove the person. Any copies of the Declaration of Bequest should be destroyed. We would prioritise organ donation if possible. So where somebody has consented for organ donation and body donation, please discuss that the way that you normally would for organ donation with the families at the time. And just a reminder that the short medical history is required at the time of death. So keep that in mind. Keep medical notes on the ward or a note of the details as far as possible just for the few days after a death, especially over the weekend. And we do require the next of kin consent to be able to move forward with body donation. So having discussions with them and letting them know that their involvement is required is really helpful too. And just want to make sure that the family know that it's themselves that have the ultimate responsibility to contact the university. And if they think that you're going to do that please confirm with them that it's important that they do and you are welcome to contact us at any time as well. We will need to speak to both family and medical staff or social care staff at the time. And thank you so much. There is a slide next that just discusses all of the contact information for how to get in touch with your local universities. So you'll see each university has an email address and telephone number there so please do make a note. All available online as well, the Scottish Government website for body donation also contains this information and each university has a, a specialised webpage with FAQs and information you can find about individual processes. And I think now we might pass over to Becky to please share with the, the group tonight the animation that we've created, especially for yourselves. That is an, is a, a lovely little permanent video of the processes we've just outlined with some absolutely stunning graphics and visuals that NES have kindly supported us to, to create. We really hope that that will be something that you're able to revisit and really benefit from and share with any of your colleagues who you think might find it useful. When someone wishes to donate their whole body to medical science at a Scottish University, it's important to know what needs to happen when they die. This will help increase the opportunity that their donation would be accepted. There's no upper age limit but to be considered, a person must have formally recorded in writing their wish to be a body donor themselves. Ideally, you'll know before they die if someone wishes to donate their body, they might have discussed it with you. This can allow time to ensure the appropriate paperwork and contact numbers are accessible and can mean the process runs more smoothly when the person dies. But you might only find out about their intention later. Body donation is time sensitive. You need to establish as soon as possible after death whether someone wanted to donate their body and if they had completed the necessary registration paperwork. A Declaration of Bequest or Bequest Form might have been completed but not returned to the university. A person's next of kin or their solicitor may hold a copy with their will. Their wish to donate may also be on their medical record. It's important to communicate sensitively and effectively with families. Most will be aware of their relative's wishes but not everyone will have chosen to discuss it. Five universities in Scotland accept body donations. Each has an anatomy Bequest Coordinator who works with staff and families to facilitate the process. Bequest Coordinators will seek to establish that a person's next of kin are in agreement and guide them through the necessary paperwork. A body can only be donated with the agreement of the next of kin. They can also help facilitate conversations and provide support if anyone has questions or concerns about donation. People can be considered for organ, tissue and body donation. Unfortunately, it isn't possible to donate organs or tissues for transplantation and then have your body donated for medical science. There may be an exception for the donation of corneas in some circumstances. Where a person is eligible for both, organ donation will normally take precedence. Universities need to receive a donor's body within three days of death but some will accept up to five. Any delay could jeopardise the donation and cause additional distress to relatives and friends who are bereaved. Universities are not automatically informed of a registered donor's death so the Bequest Coordinator must be contacted as soon as possible. It's important to establish who will do this so it's not overlooked. This could be done by the person's family or a member of staff. Telephone contact details can be found on the Scottish Government website and also those of universities who handle donation. If you don't know which university a donor has registered with, the nearest will be able to put you in touch with the correct Bequest Coordinator. Each university requires certain information to consider a donor's suitability. The Bequest Coordinator will need to speak to a member of the clinical team with access to and familiarity with the donor's notes as soon after their death as possible. It's preferable for this to be the certifying doctor. In hospital, it doesn't have to be a consultant. They will be asked about the cause of death, the donor's physical condition, height, and weight and a brief medical history. Clinical staff may be concerned about confidentiality but it's permissible to share this information with a university to facilitate body donation. Some staff may think a donor's body won't be accepted, perhaps based on previous experience or unfamiliarity with the process. But decisions are made on a case by case basis and the Bequest Coordinator should always be contacted. Until a decision on acceptance has been made and transport arranged, care of the deceased and family visits can take place as normal. It's important that the person's body is transferred to refrigerated facilities as soon as possible and preferably within eight hours of death. The Medical Certificate of Cause of Death should be completed by the certifying doctor and processed in the normal way or the death should be reported to the Procurator Fiscal if required. Unfortunately, not everybody registered will be accepted for donation when they die. Delays, logistics, medical details, or family disagreements can all prevent a donation going ahead. If a donation is declined, this can have a significant impact on families who are grieving. It could also have practical implications as they will need to make funeral arrangements which they might not have been anticipating. Universities always treat people who have donated their body with dignity, respect and professionalism. They are often referred to as silent teachers, reflecting their contribution to medical education to enhance the training of the next generation of healthcare staff, researchers and scientists. Health and social care staff can play a key role in supporting body donation through effective and timely communication with colleagues and families and by undertaking the practical tasks required following a person's death efficiently and effectively. They can help ensure that wherever possible donors wishes are respected, families who are bereaved are supported and the educational training and research benefits of the body donation programme continue.

**GW:** Thanks very much Becky for playing that and hopefully you found that useful just to summarise some of the, the points from the, from the webinar and, and thank you very much to Catherine and Viv. That was a really helpful overview. I mean, often you don't, when you do come across it, you don't necessarily do it that often. So it's really helpful to get that reminder of the process and, and what best to, best to do and I think hopefully the video will provide a good resource for people to refer back to in the, in the future. So, so that was good, good timing. So I think we've got another maybe 15 minutes or so depending on, on the questions to, to maybe look, look at that. So, we will just have a look in the chat here just to see if we've got any, any questions. One here saying I have a patient who's asked us to look into this process on his behalf. I suspect his body was not taken, declined. He would find that very upsetting that his, his last wishes were not followed and next of kin have little input in his life. And I suspect if this happened, funeral arrangements would involve the local council. So I'm not sure if there's a question linked to that but I suppose it does, does rate, I suppose, the situations where maybe things are declined and how it can be quite upsetting for, for families. And do you have anything more to say about that or anything about family disagreements? So with your experience it might be helpful to maybe talk a bit more about that? Laura, do you want to take that one?

**LS:** Yeah, just, just to touch on the, the people not anticipating being declined. I certainly, and I know some of my colleagues are experiencing a high number of people who are registering for body donation to avoid funeral debt for their families. So this is a big thing at the moment for people who are, you know, not financially comfortable and worry about leaving that debt to their family. So this, they see body donation is, is an option to kind of relieve that stress. So, yeah, so if we, if we are having to decline someone for whatever reason that may be that, that can cause, you know, terrible distress for the, for the people that are left behind who, who then have to then think about how they're going to organise a funeral, how they're going to pay for that. So again, that's another another reason to, for us to get everything that we need in a timely manner so that at least if we are declining, it's not anything to do with time lapse or not getting information that we need.

**GW:** Thanks. That's, that's helpful. We have another question here. Can a baby or child's body be donated? I know you said there's no age limit, so there's the, the, is that useful in terms of those situations for, for medical science if it's a young, young child or baby? Yeah. Laura, do you want to take that one again? Sorry, yes just jump in there again.

**LS:** So I think what we were saying there's no upper age limit. So you know, there, there, there's certainly no people think if they're beyond a certain age that they can't donate, but there certainly is a lower age limit which is 12. So 12 is the youngest donor that we would be able to consider. And I think Catherine had mentioned that we do need parental consent for someone aged between 12 and 18. So there's additional consents and witnesses we need but definitely 12 would be the, be the youngest, we would be able to consider. Thank you for that.

**GW:** I was wondering this myself so that'll be interesting to get your answers but in terms of managing expectations, I mean is there rough figures for how many donations are accepted each year and what, what is possible?

**LS:** I think it depends on university. Like we, in Aberdeen we accept between 35-45 donors a year. We teach mostly, (inaudible) section. So, that, this number is sufficient for us, but I know from my experience other university have different figures. Viv, would you like to say about your university?

**VM:** Yes, Dundee, we can accept about 100 typically per year. So as Aggie says, each, each institution has it's storage capacity. We can only accept as many donors as we can store on the premises. So as I said, each one's got different storage capacities.

**GW:** And that possibly links in, I don't know if you're able to answer that, but in terms of, in terms of the number of people that are wishing to donate, how the, how often our body's declined, I mean, is there a, a percentage or something of people who try to donate that end up being declined or if you have any comments regarding that.

**CC:** I could probably answer this one for my time at Glasgow. Although I'm no longer in, in post there. I think it worked out approximately most years to be unfortunately close to around 50%. We are doing our very best and changing criteria along with kind of changes in, in the way that people are dying to, to always try to accept where possible. It will always be the priority to try to accept and it's only where there are no storage capacity or potentially a donor poses a, a risk to the health of the staff and students or where there's just no practical way that the university could make use of that donor. So that if there's any other major illness that, that stops useful body donation taking place, we would have to decline. But it is always done as, as sensitively as we possibly can. We understand the distress where somebody was hoping that, you know, they've heard their relative talk about it, their, their whole adult life that this was what they wanted and they just wanted to help. And, and we do, do have those conversations with families at, at the time of registration sometimes and definitely at the time of death to support them through that process.

**GW:** I suppose just on the back of that, I don't know if there's any situations where if for example, Glasgow didn't have capacity, would other universities take the body or does that, does that happen or.

**VM:** It does yeah. If it's for, if it's for a nonmedical reason. As I said before, yeah, if it's a, a question of capacity where, where we're at capacity storage, then yes, we can, we can refer the case on. We just like to give everyone the optimum chance of being accepted.

**GW:** Yeah and I suppose that partly feeds into some of the discussions about anticipatory care planning, advanced care planning because I suppose it's something that, particularly talking about body donation and maybe, organ donation as well is perhaps something that we're not very, very good at.

And I suppose if, if people then start asking lots of, lots of people if they wanted that, what they just, I suppose being realistic about what the capacity is. But no, that's, that's really helpful to have that, have that background. Another question here about can a solicitor be named as next of kin? Certainly have some experience for that has, has, has happened with people are dealing with that?

**AK-O:** Yes, in Aberdeen we allow the solicitor to be, act as an executor. So it could be, take, taking role of a next of kin because sometimes people have no family left. So in this situation, this is quite good, helpful for us to have it. Yeah, that’s fine.

**LS:** Could I, could I just add to that, I don't want to open a can of worms, but it is actually possible for a potential donor to nominate someone as their next of kin for body donation who is not actually their next of kin for their estate. So that can sometimes happen where there's fractions in the family or a family member is not particularly on board with what this person wanted to do. And I had had a situation where there was a gentleman who wanted to do this, family were not overly keen and spoke to the Scottish Government and they said that, that that person could on the, the bequest form nominate a next of kin who was someone separate to, you know, the next of kin that would be dealing with their, their estate, etc. So that is a possibility for donors.

**GW:** Thank you for that. Next question we've been looking into more about reasons why bodies are declined. Quite a few people were wanting to know if there's specific reasons why a body are declined and, and possibly even right at the very beginning. Are there any absolute contraindications when people are maybe applying to donate their body whilst they're still living? Is there anything that would be an absolute no no, from, from the outset? And, and who would like to take that one? Well, Laura, do you want to take?

**LS:** So, so would there be a reason that we, that we wouldn't be able to consider the, the outset? Is that the question?

**GW:** I think somebody asked if there's any absolute contraindications maybe from, so when somebody's applying that you would say no at that point or, and then maybe when they have died, what are the reasons that you maybe decline donations. Okay. So I, I can't think, one of my colleagues would be able to, to, to comment.

**LS:** I can't think of anything that would mean they would stop someone from applying to donate their body to be on the register. We always say to people regardless of your medical conditions, any procedures you've had to register and then we make the decision at the time of death. Often we talk about things like BMI, weight, height and weight. If someone is extremely obese, that could be a reason for declining. However, when they register they could have a really high BMI, but then at the time of death, their BMI could have fallen into an acceptable, you know, range. So I certainly can't think, of any reason that we would say no, unless someone is very open and said maybe they have HIV that would be possibly a, a reason for us to be, or, you know, a bit more cautious. And, and saying to them there might be the possibility that we wouldn't be able to accept purely on the back of that. But I, I, I would always say to people, regardless of any health conditions you have had in life to register and the decision would be made at the time of death. You mentioned reasons that we might decline there, there's a, there is a long list of them. We could potentially accept someone who has a particular condition and then, you know, the next week decline someone with the exact same condition but there might be other factors that that person has had. So that's when we talk about it case by case and it's a very individual thing. So we, we tend to build up a picture for that person. But things like having a postmortem, that would mean we wouldn't be able to take it forward. If someone has cancer with, you know, extreme nets and it's, it's spread to, to lots of, different tissues and organs, that, that potentially could be a reason for us to, to decline. Obesity, but also if someone's, you know, particularly emaciated, which can often be the case, where they've got a lot of muscle wastage, recent surgeries, so I think we, there is, there is, in our information booklets we all kind of touch on the types of things that we might need to decline for. But again, it's, it, the list isn't exhaustive and we also can sometimes consider people even if they have some of these things on these lists. So I think it's, it's important that people understand that if they see that, they don't rule that donor or that patient out. That they still have the conversations with us at the time of death, because we, we, we sometimes still can accept. I hope that answers the question.

**GW:** No, thank you. That, that's helpful. I think that gave a lot, a lot more information to it. Yes. And I think you've probably partly answered one of the next questions, but is there possibility for only part bodied donation, maybe for limb or, or other smaller body parts which might facilitate organ donation as well? But I think, I think what's been, said at the beginning it tends to be one or the other except for corneas. Is that, yeah.

**CC:** The only thing I might add to that Graham is just that if somebody was considering maybe donating their brain only, there are brain banks, another kind of sort of tissue donation organisations that are not body donation and not organ donation. The Edinburgh Brain Bank for example, although there are others, so it might be worth somebody considering that they maybe had a particular neurological condition that they wanted research. That's, that's always an option, but not, not limbs and other body parts as far as I'm aware.

**GW:** No, thanks for clarifying that. There's another question here asking that do you accept people with disabilities? And I suppose that could be quite wide ranging, so I suppose it might be taken an individual case basis. Anything you want to say about that or?

**VM:** I would only would like to add that, you know, we will have to make sure that the person has the capacity to understand what they're doing. So if we are talking about mental disability, this is a, a huge question, you know, because they have to understand what they're doing. So, any other physical disability is on the, as you mentioned, on a cases basis.

**GW:** Yeah. Okay. That's helpful. And somebody asked, can people request what their body is, is used for, whether that be for anatomy dissection or surgical training or do you have any say on what, what happens with it?

**VM:** Unfortunately, no they don't get to make a choice. It depends on the condition of the body as to what that, that body is used for. And that, well in most cases would be up to, to the technician of the, then the body allocation. But, no, I have had families actually ask afterwards what their relative, you know, had, you know, what was the relative used for. And I'm always up for telling them, you know, exactly, exactly what, what they were used for. And some of it can be very interesting. We do, I, I don't know about other ones, but certainly in Dundee we do quite a lot of surgical courses and medical device testing courses. So if they find out that their loved one's being used for some kind of, you know, study that's, that's meant a medical device could be put into production, they're always very, very happy about it.

**GW:** And another question here, it was whether you can, can you only donate to your local university? I suppose you could see a scenario maybe where someone, I don't know, previously went to Glasgow and wants to donate their body to there, but now living in Edinburgh. But if that was the case, who would cover the cost of transferring the body maybe over or that. Is that something you've come across before?

**LS:** Yeah, yeah. You can, you can donate to any of the universities in Scotland. You can register with any of the universities in Scotland regardless of where you actually live. Some, as you say, some people will have a preference, maybe they studied at a particular university but are living in another city. But they, they want to donate to, a university outwith their catchment area. The, each university will have its own policy on this. I believe Glasgow, and Viv, correct me if I'm wrong, Dundee will cover the cost of transportation up to, so I think is it, is it 50 miles? Would I be right in saying I think? I, I think the, if it, if it's beyond that, then we would, we would request that the families cover the cost of transportation, which, which can be a minimal amount, that the, the funeral director would charge. But, I think most of the universities will cover a set amount of mileage free of charge and then anything beyond that, the family would have to, to cover that.

**GW:** No, that's, that's helpful, thank you. A question here relating to, are there any resources for explaining body donation potentially to children, and young people in a family maybe if someone has chosen this, maybe something for us to consider, but it's just, if you're aware of any examples that would be, explaining the process to younger people?

**LS:** I don't think that we, we don't have anything, but we did have, we did have a family who brought in the grandchildren of one of our donors and just having those, those girls in the university and having kind of like a, a chat with them and they had done cards for their grandfather and you know, we gave them a little tour of our museum and, and, but we don't have anything. But it is maybe something that, as you say, that needs to be looked at. But yeah, I think, I think all of the universities have an open door policy where we would invite people in to support them how they want to be supported. So if they want to bring in younger members of family, we can, we can have them in and, and you know, just adapt or chat, you know, appropriately to whoever it is we're, we're talking to. Because I think the person asking the question there says, yeah, we do tend to obviously talk to children about funerals, burials, cremation but probably not body donation. So it may, it might be something that we need to, to think about to, whether that would be helpful to develop that, that type of thing. Okay.

**GW:** Looking between the Q and A and the chat here, just cause the, the, the questions in different areas, but does body donation, I think you've probably answered this, but prevent a traditional funeral at the time of death? So, spoke about how you'd potentially have the body for up to three years and then what would happen afterwards but.

**CC:** I, I'd be happy to answer that one. So not the actual funeral service itself that could take place. It just means that the person wouldn't be at their, at the funeral service. Their body would likely be in the care of funeral directors or at the university already by that time. We do have a lot of families who still find it really important and useful to them to have, you know, their own memorial service, as they often refer to it rather than a funeral service. And especially if somebody's religious, the church or, you know, kind of other venue may wish to still host an event and, or even just families getting together and having tea and coffee, just to make sure that those kind of grief rituals are still observed. It just means that the body won't be present while those are taking place. And we would encourage people to do that if that was something that was important to them because it can sometimes be a little while before a memorial service takes place at the university and that can be a long time for some people to be really, still sitting with that grief without their, you know, kind, kind of any kind of, closure is the, the term often used. But, yeah.

**GW:** No, well I think that's us coming close to the end of time. I think there, there may be one or two questions that we haven't quite managed to answer. So apologies if we’ve missed your question, but certainly as we said before, if you, if you're still looking for an answer then certainly get, get in touch with us and we can do our best to facilitate that through the email address that we mentioned before. So just wanted to, to mention a few things certainly that, that obviously, on the Events page of the Support Around Death website, we’ll have more information about registration links for upcoming webinars and, and it'll have links to the, the video that we spoke about and, and, we'd certainly encourage you to, to share the animation with, colleagues and, and certainly help promote that. So, so we've, I think there's been, that's been put in the chat as well, the link, the link to that. And if you are interested in listening to previous webinars, they're also available on the SAD, SAD website. We'd like to take this opportunity to remind people that registration is now open for the NES annual bereavement conference. This is called The Grief We Carry and will be held on Tuesday the 28th November. So this is a free, free conference open to all health and social care professionals. The morning's going to focus more on providing bereavement support in different circumstances, so maybe people with learning disabilities, supporting children following a sudden death, for example. And then the afternoon will focus more on staff wellbeing and, and bereavement in the workplace. So, more information is available on the, on, on the website, and the NES Events page if you wanted to look at that. And, and there's also opportunities to submit a posted abstract if, if that would be of interest to, to people. And if you would like to receive information generally on bereavement related training resources certainly would encourage you to sign up to our quarterly bereavement newsletter and I think Becky might help and provide the link to, to that. So no, just in closing, I think, it's been a really excellent webinar this evening. So thanks to Catherine, Aggie, Laura and Viv, that that's a really good overview of, of, of what we should do and hopefully people are much more aware of, of what's going on and, and encourage you to maybe to recommend watching the, the webinar to, to colleagues if, if, if they haven't been able to come along tonight. So, thanks again and, and we'll wish you all a good, good evening.

The film was produced in August 2023 and can be found at <https://www.sad.scot.nhs.uk/> or <https://vimeo.com/870611002>

For more information visit [www.sad.scot.nhs.uk](http://www.sad.scot.nhs.uk/) or contact supportarounddeath@nes.scot.nhs.uk

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