



Children's Health Ireland
at Crumlin

CARE OF THE CHILD WHO HAS DIED DURING THE COVID-19 PANDEMIC	
Version Number	<i>1st Edition</i>
Date of Issue	<i>June 2020</i>
Reference Number	<i>CCC19P-06-2020-V1</i>
Review Interval	<i>3 yearly or more frequently as national guidance changes</i>
Approved By Name: Mary Devins Title: Consultant Paediatrician with a Special Interest in Paediatric Palliative Medicine Name: Michael McDermott Title: Consultant Pathologist	Signature: _____ Date: _____  11 th June 2020 Signature: _____ Date: _____  21.5.20
Authorised By Name: Carol Hilliard Title: Assistant Director of Nursing Chair of the EOLC Committee	Signature: _____ Date: _____  15 th June 2020
Author/s	Name: Valerie Jennings Title: CNSp in Specialist Palliative Care Name: Julie Edwards Title: Clinical Nurse Facilitator
Location of Copies	<i>On Hospital Intranet and Internet</i>

Document Review History		
Review Date	Reviewed By	Signature
<i>June 2023</i>		

Document Change History	
Change to Document	Reason for Change

Children's Health Ireland at Crumlin		 Children's Health Ireland at Crumlin
Document Name: CARE OF THE CHILD WHO HAS DIED IN HOSPITAL DURING THE COVID-19 PANDEMIC		
Reference Number: CCC19P-06-2020-V1	Version Number: V1	
Date of Issue: June 2020	Page 2 of 8	

Table of Contents

1.0 Introduction	3
2.0 Definition of Guidelines	3
3.0 Applicable to	3
4.0 Objectives of the Guidelines	3
5.0 Definitions / Terms	3
6.0 Guidelines on the Care of a Child who has Died	4
6.1 Legislation and Standards	4
6.2 Communicating with parents	4
6.3 Memory-Making	5
6.4 Care of the deceased child on the ward/unit	6
6.5 Transporting and admission of the child to the mortuary	7
6.6 Leaving the hospital	7
6.7 Documentation of care	8
7.0 Special Considerations	8
8.0 Companion Documents & Resources	8
9.0 Implementation Plan	8
10.0 References	9

Children's Health Ireland at Crumlin		
Document Name: CARE OF THE CHILD WHO HAS DIED IN HOSPITAL DURING THE COVID-19 PANDEMIC		
Reference Number: CCC19P-06-2020-V1	Version Number: V1	
Date of Issue: June 2020	Page 3 of 8	

GUIDELINES ON THE CARE OF A CHILD WHO HAS DIED IN HOSPITAL DURING THE COVID-19 PANDEMIC

1.0 Introduction

During this COVID-19 pandemic, all deaths of children in hospital are treated as a potential risk of infection. As a result, while many of the usual procedures when caring for the child who is dying or has died, and their family, can still be carried out, there are some restrictions. These include, for example, restrictions in the time available when viewing the deceased child and the number of family members who can be present at any one time.

Nevertheless, it is important that a patient and family centred approach to care is adopted to help families at this time. Close liaison with the pathology technician (who can be contacted via Switch 24hours a day) is critical to support this approach. These guidelines outline the advice to support staff when caring for child who has died and their families.

2.0 Definition of Guidelines

These guidelines represent the written instructions about how to safely and effectively care for the child who has died in hospital and their families during the COVID-19 pandemic. Guidelines must be accurate, up to date, evidence-based, easy to understand, non-ambiguous and emphasise safety. When followed they should lead to the required standards of performance.

3.0 Applicable to

These guidelines are applicable to all staff of CHI at Crumlin who are involved in the care of children who are dying or have died and their families.

The guidance refers to the care of all children, irrespective of their Coronavirus status.

4.0 Objectives of the Guidelines

The purpose of this guideline is to ensure that when a child dies in CHI at Crumlin, that their body is safely cared for in a compassionate, sensitive and dignified manner while complying with health & safety and legal requirements, and that their family is supported in their bereavement.

5.0 Definitions / Terms

Memory making is a unique opportunity for parents to create some mementos of their child's life. Where possible the parents are offered the option of partaking in the creation of these mementos, for example assisting staff with taking of ceramic hand/foot prints. In so doing these mementos will allow a connection for parents to their deceased child.

Children's Health Ireland at Crumlin		
Document Name: CARE OF THE CHILD WHO HAS DIED IN HOSPITAL DURING THE COVID-19 PANDEMIC		
Reference Number: CCC19P-06-2020-V1	Version Number: V1	
Date of Issue: June 2020	Page 4 of 8	

6.0 Guidelines on the Care of a Child who has Died

6.1 *Legislation and Standards*

- 6.1.1.** Confirmed and suspected or possible COVID-19 related deaths are reportable to the Dublin District Coroner in every case via email dublincoroner@justice.ie. For urgent out of hours queries, contact coroner via switchboard.
- 6.1.2.** During the pandemic and its associated restrictions, and following the coroner's direction for a post mortem, the identification of the child's remains may be performed by a member of staff at the hospital prior to autopsy. Phone notification to local Gardaí is still required to be made at the time of identification so that they may log the circumstances of the death.
- 6.1.3.** All children who die that are suspected or confirmed to be COVID-19 positive must leave the hospital via the mortuary.
- 6.1.4.** The medical, nursing, social work and chaplaincy algorithms must be completed in respect of all children who die in CHI at Crumlin.
- 6.1.5.** A Social Worker will be allocated to the family. A referral should be sent to the Social Work Department for all children who are dying or have died, unless a social worker is already involved with the family.
- 6.1.5.1.** During working hours the social worker allocated to the family will assist/support family to plan and prepare for the next steps, for example sibling support, funeral arrangements, bereavement support etc. If after hours (weekends/nights), the social worker will follow up with the family on the next working day where appropriate.
- 6.1.6.** Every effort will be made to respect and protect the dignity of the deceased child, their cultural & religious traditions, and their families at this time.

6.2 *Communicating with parents¹*

- 6.2.1.** Clear, open and timely communication with families is critical to ensure they are aware of the restrictions which are in place in the hospital and to ensure that expectations can be met where possible.
- 6.2.1.1. *Note:*** This guideline reflects the current guidance within CHI at Crumlin and nationally. However, it must be acknowledged that the situation is fluid and circumstances may change. Therefore it is important to convey this uncertainty during discussions with parents. For example, the conversations could include: *'We understand that this is a difficult time and that the guidance is changing often. We will check to see how best we can accommodate your wishes for your child'*.
- 6.2.2.** The communication of COVID-19 test results (positive and negative) to parents is the responsibility of the primary consultant.

¹ 'Parent/s' is used to refer to parents, guardians or primary caregiver of the child.

Children's Health Ireland at Crumlin		 Children's Health Ireland at Crumlin
Document Name: CARE OF THE CHILD WHO HAS DIED IN HOSPITAL DURING THE COVID-19 PANDEMIC		
Reference Number: CCC19P-06-2020-V1	Version Number: V1	
Date of Issue: June 2020	Page 5 of 8	

6.2.3. Both parents are permitted to be with their child at end of life in any setting within the hospital. Siblings and extended family members are not permitted on the ward due to the COVID-19 restrictions. These restrictions apply even where a child is known to be COVID-19 negative.

6.2.4. Advise parents not to ask extended family members to visit.

6.2.5. Liaise with chaplaincy and discuss with parents about their wishes in relation to religious and spiritual interventions.

6.2.6. The Clinical Nurse Specialist(s) working within the child's clinical speciality will also engage with families before and after the child has died, and will link with families once they go home.

6.2.7. Provide parents with a named person they can contact to get information.

6.2.8. Provide parents with written materials which outline relevant information and also provide links to additional resources which may help them. These include:

6.2.8.1. *'Information following the death of your child'* booklet

6.2.8.2. Parent information leaflet entitled *'Information for parents of a child who died during a pandemic'*.

6.3 Memory-Making

6.3.1. Memory making can still take place with the consent of the parents and is an important part of supporting bereaved families.

6.3.2. In view of the restrictions in place at this time, it is not possible for siblings to visit or view the child who has died while on the ward. Therefore, there is an even greater importance in memory making which also acknowledges the place of siblings and extended family members.

6.3.3. Memory making activities could include, but are not limited to:

- Making of ceramic hand or foot prints (refer to information leaflet) and/or Ink prints
- Preparation of memory boxes or Feileacáin boxes for an infant.
- Taking a lock of hair
- Giving name band to families
- Taking of photographs - refer to guidance from *Now I Lay Me Down To Sleep*. Clinical Photographer in CHI at Crumlin will also take photographs of the child Monday-Friday if available. **Important:** Hospital staff must not take photos of a child on their personal phones.

6.3.4. Discuss with parents about what they would like to put in the coffin and to take home, and how to include siblings in memory-making. The social worker involved with the family will advise and support with this.

6.3.5. The hospital Memorial Book cannot be completed by hospital staff due to COVID-19 restrictions. However, a book may be given to parents for them to include their own memories in it. Extended family members and friends may also be able to contribute to this book under the section 'A message from family and friends' once COVID-19 restrictions are lifted.

Children's Health Ireland at Crumlin		
Document Name: CARE OF THE CHILD WHO HAS DIED IN HOSPITAL DURING THE COVID-19 PANDEMIC		
Reference Number: CCC19P-06-2020-V1	Version Number: V1	
Date of Issue: June 2020	Page 6 of 8	

6.3.6. Chaplaincy, where appropriate, will issue an *In Loving Memory Booklet*², on behalf of all the staff, at the time of death or shortly afterwards, and will be followed up after three months with a *Remembering with Love Card*.

6.3.7. If a child is suspected or confirmed to be COVID-19 positive, where reasonably practicable, memory making should be done during a single episode of care to reduce access to the child's body and to minimise the risks of infection.

6.4 Care of the deceased child on the ward/unit

6.4.1. Display the End of Life symbol in the ward or unit as per usual practice. This sign should be cleaned afterwards as per Infection Prevention and Control guidance.

6.4.2. Please refer to the specific guidance on the care of the child's body as outlined in the CHI at Crumlin *Guideline on the Management of the Death of a Child with a Potentially Contagious Infection* (Infection Prevention & Control Team 2020).

6.4.3. Where a child has suspected or confirmed COVID-19, hospital staff involved in caring for the child's body should wear PPE.

6.4.3.1. PPE makes communication more difficult. Consider using a laminated 'Hello my name is...' sign with a photo on your gown. Also to consider your tone of voice, body language and eye contact as these have never been more important.

6.4.4. Supporting a parent to assist with washing and dressing of their child who has died is an important aspect of many parents' bereavement journey. Refer to the EOLC folder for guidance on laying out the child.

6.4.5. Where a child has suspected or confirmed COVID-19, it is not necessary for the parent to wear PPE when assisting with washing and layout the child, providing this is being done in the child's own room. However, when the parent leaves the room, e.g. to go to the mortuary, they must wear a face mask.

6.4.6. Due to restrictions on access to the body following the death of a child from COVID-19 it is important to allow parents time and space with their child as this might be their only opportunity to see their child. Discussion with the pathology technician is advised in relation to access to the child's remains.

6.4.7. Note: If the child has a pacemaker in situ and the parents wish the child to be cremated, the pacemaker would need to be removed. Discuss with the pathology technician to determine if removal is feasible and appropriate.

6.4.8. If a child is confirmed to be COVID-19 negative, standard precautions apply

² This booklet is not restricted to a religious theme

Children's Health Ireland at Crumlin		
Document Name: CARE OF THE CHILD WHO HAS DIED IN HOSPITAL DURING THE COVID-19 PANDEMIC		
Reference Number: CCC19P-06-2020-V1	Version Number: V1	
Date of Issue: June 2020	Page 7 of 8	

6.4.9. Double bag the patient's belongs and place in an End of Life property bag before returning to the parents. These items should not be shared with others (for example, other family members) for a minimum of 4 days.

6.4.10. All children who die must be discussed and their death logged with the pathology technician.

6.5 Transporting and admission of the child to the mortuary

Please refer to the EOLC Committee Guidance on *Transferring a child who has died out of the hospital or to the mortuary* for further information in relation to transferring a child to the mortuary ([Click here](#)).

6.5.1. All children who die that are suspected or confirmed to be COVID-19 positive must leave the hospital via the mortuary.

6.5.2. The nurse caring for the deceased child must discuss the transfer to the mortuary with the pathology technician, highlighting the infection risk of the deceased child.

6.5.3. Transport of the deceased child to the mortuary is carried out in accordance with Infection Prevention and Control guidance: Refer to guideline on the *Management of the Death of a Child with a Potentially Contagious Infection* (Infection Prevention & Control Team 2020).

6.5.4. Where a child is suspected or confirmed to be COVID-19 positive, place a surgical mask on the child and place him or her in a body bag for transport to mortuary. PPE must be worn. Disinfect the outside of the body bag.

6.5.5. On arrival to the mortuary, the outside of the body bag is disinfected by the mortuary staff and the child is placed in the cool room, still in the body bag.

6.5.6. There is no access to the deceased child until a plan is in place with the pathology technician.

6.5.7. The pathology technician will discuss plans with the Pathologist and Microbiology Consultant/ Infection Prevention and Control. This may be done before the child's transfer to the mortuary. Discussion will involve Post-mortem Process/Coroner, viewing allowed, family wishes etc.

6.5.8. Where a child is confirmed to be COVID-19 negative, it may be possible for their siblings to view them in the mortuary. This is arranged on a case by case basis, and only following consultation with the Pathology Technician.

6.6 Leaving the hospital

6.6.1. All children who die that are suspected or confirmed to be COVID-19 positive must leave the hospital via the mortuary.

6.6.2. Discuss with the parents about how they wish their child to leave the hospital. They can contact their funeral director to make arrangements for the removal. Liaise with pathology technician in relation to such arrangements.

6.6.2.1. If a child is confirmed to be COVID-19 negative, they may go home in their parents' car. Ensure the parents are provided with a letter (template in EOLC folder) which they may be asked to produce if stopped by the Gardaí. Please refer to the EOLC Committee

Children's Health Ireland at Crumlin		 Children's Health Ireland at Crumlin
Document Name: CARE OF THE CHILD WHO HAS DIED IN HOSPITAL DURING THE COVID-19 PANDEMIC		
Reference Number: CCC19P-06-2020-V1	Version Number: V1	
Date of Issue: June 2020	Page 8 of 8	

Guidance on *Transferring a child who has died out of the hospital or to the mortuary* for further information in relation to transferring a child to the mortuary ([Click here](#)).

6.6.3. As parents prepare to leave the hospital, ensure they are provided with the phone number of the clinical area/ward where their child was cared for, so if they have any questions they may phone the hospital to clarify.

6.6.3.1. A member of the social worker department, if not already involved with the family, will follow up with the family.

6.6.4. Due to COVID-19 restrictions, formal wakes are not currently permitted. Families may want to bring their child home if even for a short while. If a family ask about this, safety must be uppermost, so discuss with pathology technician and encourage families to liaise with their undertakers

6.7 Documentation of care

6.7.1. Ensure algorithms are completed by relevant personnel.

6.7.2. All care to be recorded in the Healthcare Record by relevant staff members.

7.0 Special Considerations

This guidance was adapted with permission from the *Policy on care and management of the deceased person with confirmed or suspected COVID-19* (Mater Misericordiae University Hospital 2020 – Revision 3). We acknowledge the assistance and the original work of our colleagues in MMUH.

The national guidance in relation to restrictions and precautions arising from COVID-19 are constantly changing and being updated. This guideline will therefore be updated as the national guidance or local practices dictate. This guidance is current as of the date on which it was published. Users are asked to refer to the hospital intranet and internet for the most up to date version of this guideline.

8.0 Companion Documents & Resources

End of Life Care Committee (2020) *Transferring a child who has died out of the hospital or to the mortuary*. CHI at Crumlin, Dublin.

Infection Prevention and Control Team (2020) *Guideline on the Management of the Death of a Child with a Potentially Contagious Infection*. CHI at Crumlin, Dublin.

9.0 Implementation Plan

Communication and Dissemination: Guidelines will be posted on hospital Intranet and internet, and disseminated to relevant departments.

Training: Members of the EOLC Committee will support staff who are involved in the care of the child who has died and their family.

Children's Health Ireland at Crumlin		 Children's Health Ireland at Crumlin
Document Name: CARE OF THE CHILD WHO HAS DIED IN HOSPITAL DURING THE COVID-19 PANDEMIC		
Reference Number: CCC19P-06-2020-V1	Version Number: V1	
Date of Issue: June 2020	Page 9 of 8	

10.0 References

Department of Housing, Planning and Local Government (2020) *A Guide for the Bereaved during the COVID-19 Pandemic*. Department of Housing, Planning and Local Government, Dublin.

End of Life Care Committee (2020) *Transferring a child who has died out of the hospital or to the mortuary*. CHI at Crumlin, Dublin.

Health Protection Surveillance Centre (HPSC) (2020) *National Interim Guidelines for Funeral Directors on managing infection risks when handling deceased individuals with confirmed COVID-19*. HPSC, Dublin.

Infection Prevention and Control Team (2020) *Guideline on the Management of the Death of a Child with a Potentially Contagious Infection*. CHI at Crumlin, Dublin.

Copyright and Disclaimer @2020. Children's Health Ireland at Crumlin, Dublin 12. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system or transmitted in any form or by any means without the prior written permission of the copyright holder. Every effort has been made to ensure that the information provided is accurate and in accord with standards accepted at the time of printing.