

10am, Thursday, 02 June 2016

Mortonhall Action Plan – Update

Item number

Report number

Executive/routine

Wards

All

Executive summary

This report provides the Council with an update on progress made on recommendations from Dame Elish Angiolini's Mortonhall Investigation Report, and actions from the Chief Executive's Multi-Agency Working Group Action Plan. This report outlines the good progress that has been made across all recommendations and actions, with many of these fully complete or well underway.

The report also provides an update on the refurbishment programme for the crematorium building, equipment and public facilities due for completion in November 2016.

Links

Coalition pledges: [P27](#); [P51](#)

Council priorities: [CP3](#); [CP5](#); [CP9](#); [CP13](#)

Single Outcome Agreement: [SOA2](#); [SOA4](#)

Mortonhall Action Plan - Update

Recommendations

The Council is asked to:

- 1.1 note the update on actions from Dame Elish Angiolini's Mortonhall Investigation Report and Chief Executive's Multi-Agency Working Group Action Plan, and the positive progress that continues to be made against all recommendations two years after the Action Plan was originally approved by Council, and one year after the presentation of an interim update report in June 2015;
- 1.2 note thanks to all affected parents, staff, partners and contributors in enabling the successful progress on actions;
- 1.3 note the successful completion of a memorial at Mortonhall;
- 1.4 agree to move to consult with all affected parents on design options for the Princes Street Gardens memorial in Summer 2016;
- 1.5 agree the revised City of Edinburgh Council Cremation Policy document;
- 1.6 note the continuing positive work of the Chief Executive's Multi-Agency Working Group in providing oversight of actions;
- 1.7 agree the revised policy position on disposal and recycling of metals recovered following cremation, with the intention that an equitable donation of monies received be gifted to SANDS Lothians and SiMBA;
- 1.8 note that the formal inspection of Mortonhall by HM Inspector of Crematoria took place on 5 May 2016, with no non-conformities identified and a compliant service report;
- 1.9 approve an additional capital expenditure of £200,000 for the mercury abatement works required as part of the refurbishment programme to ensure continued compliance with SEPA environmental regulations; and
- 1.10 agree to the adoption of the Scottish Government Code of Practice and guidelines formally published in December 2015.

Background

- 2.1 Following receipt of Dame Elish Angiolini's Mortonhall Investigation Report into historical practices at Mortonhall Crematorium, it was agreed at the City of Edinburgh Council's meeting of 26 June 2014 that the 22 specific recommendations contained in the report would be taken forward by the Council and other relevant agencies.

- 2.2 An Action Plan was developed through discussions at the Chief Executive's Multi-Agency Working Group and enabled ongoing focus on the key elements required to ensure successful programme delivery.
- 2.3 An implementation team, led by a Senior Manager in Place, officers seconded to support the delivery of the action plan and staff at Mortonhall has continued to work collaboratively implementing ongoing culture change at Mortonhall Crematorium. This work has also involved working with partners and stakeholders to ensure an informed and supportive approach from the range of service providers who meet directly with the bereaved.
- 2.4 As originally required by the Council, the majority of recommendations were successfully implemented within a period of one year, at which time an update report was submitted to the City of Edinburgh Council at its meeting on 25 June 2015.
- 2.5 The City of Edinburgh Council acknowledged the good progress made to date, while recognising that further work remained to be carried out, particularly in regard to national legislative changes being introduced by the Scottish Government, implementation of ongoing cultural change at Mortonhall, and the completion of suitable memorials for affected parents in Edinburgh.
- 2.6 With this in mind, a further update report was requested for the Council meeting in June 2016, as part of the agreed bi-annual reporting cycle.

Main report

Management of Mortonhall Crematorium

Team involvement and input

- 3.1 The Mortonhall Crematorium staff team and the Mortonhall Action Team have continued to work closely and positively together to ensure the continued delivery of required improvements. Managers have been encouraged to play a key role in local implementation of changes to working practices arising from the investigation and actions. Regular updates have been shared between teams, and benchmarking visits undertaken to other locations.
- 3.2 To support the Bereavement Service managers with the implementation of the Action Plan a Cremation Services Change Manager was appointed on a seconded basis in November 2015. However there have been two notable departures from the management team with the retirement of the Bereavement Services Manager and the resignation of the Crematorium Team Leader leading to significant operational management challenges.
- 3.3 The Senior and Change Manager and local staff team have continued to work together to ensure continuity of cremation services at Mortonhall in the ensuing period, with the Change Manager assuming operational responsibility for day-to-day service delivery. Additional professional support has been sought from the Federation of Burial and Cremation Authorities (FBCA) and Institute of Crematorium and Cemetery Management (ICCM) to ensure compliant operation and support delivery of on-site improvements. This has been supplemented

during March-April 2016 by some short-term consultancy to review and strengthen operational and health and safety procedures and working practices, which will be implemented in late 2016 following re-opening of the crematorium after refurbishment. A copy of the report is attached as Appendix 1.

- 3.4 An exercise to recruit a new Crematorium Team Leader was unsuccessful as it failed to attract candidates with the required skills and qualifications. The job role has since been re-designed as part of the Transformation Programme's Environment Service Review and a new job description and person specification has been produced (see section 3.5 below). A further recruitment exercise will take place as part of the implementation of the service structure.
- 3.5 In order to strengthen management resilience at the Crematorium moving forward, the new structure proposed under the Transformation Programme review proposes replacing the former Team Leader post with the creation of two new posts within the Crematorium team. A Senior Cremation Technician post (GR7) will support the day to day management and supervision of the technician team, ensuring operational compliance and awareness of current and emerging legislation and good practice. At the same time, a Bereavement Services Improvement Officer post (GR7) will support managers to ensure that the service is fully compliant with changes in legislation and regulatory requirements, the adoption of best practice developing policy and reviewing and updating procedures and engagement with stakeholders both locally and nationally. Additionally, the Senior Manager permanent appointment has now been made and the successful candidate will be responsible for overseeing the refurbishment and future development of the service.

Enhancing the customer experience

- 3.6 With the support of the Council's Business Improvement Team and the active participation of the staff team, the existing customer focussed approach continues to be strengthened at Mortonhall using the guiding principles of the CSE framework as a model. Led by the Senior and Crematorium Change Manager and incorporating active participation by the team, the service successfully achieved CSE compliance in November 2015. During the course of this visit the assessor recognised the work completed and planned to improve the customer journey, and indicated an intention to carry out a further visit in November 2016 to review progress.
- 3.7 A performance framework is being developed based on extensive desktop research and benchmarking with other cremation authorities and the ICCM and FBCA. This has helped identify potential key performance criteria which will be adopted for this service moving forward. Relevant examples have been considered for adoption by the Council to demonstrate a robust and responsive approach to performance measurement, to establish parity of approach with other service areas within the Council, and to enable early identification and resolution of emerging issues.

- 3.8 Customer survey sheets have been available online and in the Mortonhall Crematorium office, Chapel of Remembrance and Waiting Room since September 2015. These surveys seek to measure customer satisfaction with the environment of the Crematorium and its grounds, the quality of information provided, and the level of customer care received from staff. Results from these are regularly analysed by managers and suggested areas for improvement discussed by the staff team. Whilst feedback received from service users generally suggests a high level of satisfaction with the service provided, individual concerns and suggestions are now discussed by the team and where feasible, solutions identified to enhance the customer journey. Once a statistically meaningful set of data has been gathered, responses to feedback will also be used to inform the implementation of an agreed performance framework which will provide robust evidence of customer satisfaction with the crematorium.
- 3.9 A number of improvements have been carried out to the crematorium waiting room with a view to improving the customer experience. These have included:
- improvements to public toilets including the installation of a disabled toilet;
 - installation of a new roof;
 - installation of an automatic door;
 - external repainting; and
 - enhanced cleaning regime with cleaning carried out three times per day.
- 3.10 Further work to improve the waiting room will take place in summer 2016, including new more comfortable seating, and a feature wooden site map designed from reclaimed natural wood as an attractive centrepiece.
- 3.11 A number of affected parents have also raised concerns about the condition and maintenance of the Rose Garden at Mortonhall which is currently used as a location for interring babies' remains, and provides a focal point for affected parents to remember their loved ones. Previous rose planting on the site had historically been badly affected by rose blight, and the area is in need of development to ensure it is restored to a condition in keeping with the expectations of affected parents.
- 3.12 An outline improvement plan has been developed to refurbish and enhance the condition of the Rose Garden. Parents with an interest in this area were invited by way of notices placed adjacent to the Rose Garden to register any interest they had in working with the Crematorium Team in taking forward an improvement plan for this area.
- 3.13 A number of parents and stakeholders have come forward as a result of this work and have attended several meetings with Council staff to discuss their concerns and identify potential ways forward. The sensitivity of this area is recognised by all participants, including the need to ensure that consultation and discussion with parents takes accounts of a range of views.

- 3.14 Staff have also made contact with other local authorities who have recently carried out work to similar areas in their own crematoria and cemeteries, to learn from the experience and ensure the most sensitive and effective approach. With active input from stakeholders and parents, the focus group have recently completed an initial design specification document to inform the development of landscape improvement proposals. These designs will then form the basis of further dialogue and consultation with parents.
- 3.15 By working with parents, residents, partners and Council staff, these improvements will ensure that the Rose Garden is more visually appealing and a fitting area for families of babies who are buried there.

Training and qualifications

- 3.16 The FBCA and Institute of Crematorium and Cemetery Management (ICCM) have agreed to adopt recommendations of Lord Bonomy's report and have developed updated training and guidance. The FBCA's Training and Examination Scheme for Cremation Technicians now incorporates specific elements dealing with baby, infant and foetus cremations.
- 3.17 Mortonhall Crematorium staff are among the first in Scotland to have successfully completed updated modules in infant cremations. Currently these modules have been completed by four members of staff, with the remaining staff due to complete these during summer 2016. The assessments are carried out at an external centre of excellence identified by the FBCA, and have the additional benefit of enabling staff attending to experience best practice elsewhere and to network with colleagues in other locations.

Transformation Programme

- 3.18 As part of the Environment Service Review, a review of Crematorium Team Services structure took place in Spring 2016 with good engagement from staff. The review includes an appraisal of service functions and delivery, organisational structures, revised job descriptions and staffing levels in order to ensure enhanced service management, including the creation of two new posts designed to ensure operational compliance, good customer care and effective stakeholder engagement. The outcomes of this review will support delivery of a culture of continuous improvement and customer focus as per the original recommendations.

Quality management

- 3.19 A British Standards Institute (BSI) review session of Bereavement Services took place in March 2016 and resulted in a fully compliant report with no new non-conformities identified (Appendix 1). A further visit was scheduled for July 2016 to focus on Quality Management Systems, customer satisfaction and complaints, and burial processes. This is being rescheduled given the closure of the Crematorium.

- 3.20 Following on from Dame Elish Angiolini's recommendations, agreement has been reached around the process for recording the location of ashes when interred in the Crematorium grounds. The electronic Burial and Cremation Administration System (BACAS) has been upgraded to enable the accurate recording of the process, and therefore to support any requests made by relatives for this information.
- 3.21 A programme of visits to other crematoria involving staff and managers is ongoing. A visit to Kirkcaldy Crematorium took place in June 2015 to explore further benchmarking opportunities with other cremation authorities in Scotland, and team members attended training sessions in Inverclyde Crematorium in April 2016, with a further visit scheduled for Summer 2016.
- 3.22 Senior Manager and Mortonhall Action Team input to the Scottish Government's National Committee on Infant Cremation, and its various sub groups, has enabled the City of Edinburgh Council to maintain a proactive role in the review and development of good practice and the new legislation across Scotland.
- 3.23 Senior and Service Managers are attending regular meetings with NHS Lothian and representatives of the funeral industry to develop a greater shared clarity of understanding around the choices available to parents when faced with the loss of a child. This clarity will ensure that all practitioners are aware of operational practices at Mortonhall Crematorium, and therefore enable them to provide informed support to parents at a difficult time.
- 3.24 Managers have maximised networking opportunities with the National Benchmarking Group, and representatives from FBCA and ICCM, to enhance opportunities for shared good practice.
- 3.25 Ongoing discussions with multi faith communities and other equalities groups across the city, at service planning and as part of continuous feedback, will ensure the cremation service continues to be relevant and responsive to all beliefs and cultures, and fully adheres to the Council's view on equality and diversity.

Communications

- 3.26 A Communications Plan includes a commitment to ensuring that information on progress against the key actions is widely and publicly available across a range of platforms. The communications plan acknowledges the need to provide clear and open information on progress in plain English. Support from the Communications Team has also ensured that ongoing positive progress is regularly reported through the media.
- 3.27 The communications plan encompasses affected parents, all key stakeholders, staff and partners, and recognises the need for the wider public to be aware of positive progress. The plan also ensures that continuous engagement with the onsite staff team is maintained.

- 3.28 The team has continued to provide regular written and telephone support in responding to individual queries from affected parents, in particular respecting the approach of those parents who have not come forward until after the initial investigation was concluded. These have ensured that parents contacting the Council are updated on progress, while at the same time providing a sympathetic response to those parents who require additional reassurance and emotional support.
- 3.29 The communications plan recognises the need to ensure that key partners, such as NHS Lothian, Funeral Directors and support organisations, are kept fully informed on any changes to operational practice at Mortonhall that would impact on services to customers, and are able to share this information confidently and accurately with members of the public.
- 3.30 Ongoing dialogue has been held with NHS Lothian, with a view to developing a stakeholder workshop aimed at providing opportunities for all those involved in working with bereaved parents to understand the totality of the customer journey in these circumstances, and to ensure that the information provided to those affected is accurate and understood by those affected.
- 3.31 The Council [web page](#) on the Mortonhall Investigation has been regularly updated to incorporate the latest information on progress to date.

Information has also been provided to partner charities SANDS Lothians and SiMBA for sharing via their social media pages and networks.

Ensuring effective and compliant service delivery

Policy statements

- 3.32 Following the Corporate Policy and Strategy Committee's approval in November 2014 of the definition of ashes, as recommended by Lord Bonomy, this was incorporated into a wider Cremation Services Policy Document which was approved by the Council on 5 February 2015. This Policy Document has been made available to members of the public, industry and healthcare professionals and key elements of this document will be incorporated into wider service information which is currently under development. This document was revised in March 2016 to incorporate emerging legislative and practice changes as recommended by the Scottish Government. This is included as Appendix 3.
- 3.33 In line with the majority of crematoria nationally, a revised approach to the recycling of metals recovered following cremation is being developed, with the intention that this be implemented the reopening of Mortonhall after its refurbishment subject to Council approval.
- 3.34 The current approach involves the sensitive recovery of metals remaining after the cremation process including coffin parts and artificial medical implants, and the subsequent burial of these metals in the Garden of Remembrance, an approach of which applicants are made fully aware at the point of authorisation.

- 3.35 The revised approach being recommended involves the sensitive collection of these metals by agreed companies for recycling, with income received being donated to SANDS Lothians and SiMBA in recognition of their work in supporting those affected by the loss of a child.
- 3.36 It is intended that this approach be in place for an initial period of 3 years, and reviewed in partnership with these charities.

Process mapping

- 3.37 In response to recommendations from Dame Angiolini's report, a clearly defined process map for handling of all remains was developed with the active involvement of the Mortonhall staff team. This incorporates the recent legislative changes around Death Certification which were introduced in May 2015, and will ensure clarity and consistency of processes for local staff around this sensitive work. Process mapping is regularly reviewed as part of scheduled audits for BSI accreditation and also revised and clarified in response to feedback.
- 3.38 This documentation is incorporated in records required for BSI assessment. This will also enable the cremation service to provide clear information to partners, such as Funeral Directors and NHS Lothian, on its approach to the sensitive handling of remains which can in turn be communicated to the bereaved. The process map was also available for the Inspector of Crematoria during his initial introductory visit in late 2015, and the documentation was made available for his formal Inspection in May 2016.

Refurbishment

- 3.39 Following on from the significant fire in March 2015, work has been carried out to develop a £2 million programme of improvements and investment to ensure legal compliance, and to develop a modern and customer focussed facility moving forward. These improvements are being supported through the Asset Management Capital programme.
- 3.40 Key drivers for change are as follows:
- Delivery of the actions set out in the Dame Elish Angiolini and Lord Bonomy reports;
 - Building the trust and confidence of affected parents and the wider public;
 - Legal compliance (health and fire safety, environmental and cremation legislation requirements are fulfilled); and
 - Desire for a modern and fit for purpose facility, which is customer focussed.
- 3.41 This work commenced on 6 June 2016, and the building will be closed for all memorial services and cremations, until November 2016 when the building will be returned to the Council by the main contractor, Keir Construction. The Chapel and Garden of Remembrance and the burial grounds on site will be open to customers, and affected parents will be able to visit the memorial garden during this time. It is likely there will be some guided walkways in place to support these visits whilst construction is underway.

- 3.42 During the course of this work, which requires complete closure of the Crematorium Building and administration offices, temporary administration accommodation was established onsite to enable the service to retain a public-facing office facility. This high-quality accommodation incorporated reception area, private meeting room for the bereaved, staff administration area and storage for onsite records, and ensures that members of the public will continue to receive a high quality service in a welcoming environment.
- 3.43 The refurbishment work will comprise of a schedule of customer facing improvements including:
- additional furnishings and fittings in the waiting room improve the appearance and comfort of the waiting room;
 - a reconfiguration and refurbishment of the main office, using design principles applied in Maggie's Centres in Scotland, to create a welcoming and comfortable environment for the bereaved; and
 - refurbishment work of benches, carpets, lighting and curtains in the Main and Pentland Chapels.
- 3.44 In addition, there will be a range of technical and structural improvements, including:
- replacement of a previously fire damaged cremator;
 - complete removal of the timber framed roof, and replacement with a custom designed concrete roof above the cremator area;
 - reinstatement and improvements of the Mercury Abatement Plant;
 - relocation of the small scale infant cremator into the main building affording ease of supervision when commissioned;
 - major repairs to Main Chapel roof and window;
 - private meeting space and welfare facilities for the bereaved;
 - workstyle office based staff area allowing for greater flexibility and supervision;
 - introduction of a disabled access customer and staff toilet; and
 - a range of electrical and plant improvements.
- 3.45 The Council will maintain delivery of the statutory duties to carry out burials and to support customers who wish to access remembrance or memorials by continuing an office based presence on site. In addition, the Council requires to discharge the legal requirement for indigent dead (those without the means to pay) and has procured appropriate support for the cremation of those deceased at an alternative establishment within the city.
- 3.46 Stakeholder briefings, including members of the Chief Executive's Working Group, have taken place led by the Senior Manager to support awareness of the above changes. Liaison with the NHS has allowed agreement regarding specific services (collective cremations) which will no longer be carried out at Mortonhall. The Inspector of Crematoria, Scottish Government and SEPA are being briefed regularly on this project.

Environmental compliance

- 3.47 To support ongoing permit compliance, and to develop understanding of proposed works, meetings have taken place with the Scottish Environmental Protection Agency (SEPA) in February 2016 to outline the proposed refurbishment in detail. This work will incorporate refurbished mercury abatement equipment that will ensure the Council can successfully implement 100% abatement of flue gases. It is anticipated this position will also be much improved with the introduction of the new cremator.
- 3.48 Improved reporting has also been implemented in relation to emission testing and root cause analysis for any minor emissions breaches

Legislative documentation

- 3.49 Positive progress in revising statutory cremation application documents is being made by the National Committee sub groups, which City of Edinburgh Council managers attend on a regular basis. The draft work to the Form A – Application for Cremation -carried out internally by City of Edinburgh Council staff has also been passed to the Scottish Government for consideration and inclusion in ongoing dialogue around the design of the national statutory form. This work has been incorporated in statutory processes supporting the introduction of revised Burial and Cremation legislation.

Memorial

- 3.50 The Council continued to work with affected parents and collaboratively with SANDS Lothians and SiMBA in regards to the design and location of a fitting memorial to babies affected by historical practices at Mortonhall.
- 3.51 Following a number of consultations and meetings involving affected parents around the potential location, style and design of any memorial options, it was agreed by parents that a memorial should be developed at Mortonhall recognising the significant feedback received in support of this. It was also agreed that, in acknowledgement of feedback received from parents who would find it difficult to return to Mortonhall, that a second memorial be developed in an alternative location. Positive progress in this regard enabled this important piece of work to be completed in November 2015.
- 3.52 Following discussion with the Chief Executive's Working Group, it was agreed that an initial informal viewing opportunity be provided for key stakeholders and media in the morning of 4 December 2015, followed by a formal opening, to which all affected parents were invited, in the afternoon.
- 3.53 As previously reported an offer of dedication was received from the Church of Scotland Social and Community Interests Committee to rededicate land, should this be desired. Two sensitively worded dedications were offered at the stakeholder viewing and parents events on this day, allowing for quiet reflection and contemplation on a very emotional occasion for many.

Alternative memorial

- 3.54 Parents who did not wish to return to Mortonhall also requested that a further memorial location be identified from one of the alternative range of options they had suggested. A range of options for the alternative memorial location were suggested and following meetings with, and feedback from parents Princes Street Gardens was selected as the preferred location.
- 3.55 The location of the memorial within the Princes Street Gardens has subsequently been discussed through the Chief Executive Working Group and with parent representatives and Parks and Green-space staff. Design options are under final development and will be presented directly to affected parents through a consultation programme in summer 2016. This will enable them to select a fitting and appropriate design which reflects their feelings and views.
- 3.56 Given the nature of the location and to ensure the area remains welcoming to all users of the Gardens, it is intended that the memorial site will be managed on a daily basis. A policy for the management of the memorial has been implemented for the Garden at Mortonhall, with an intention to apply this to the Princes Street Gardens memorial. This policy explains that wreaths, flowers or mementos will be removed from the location and sets out how the memorial will be appropriately maintained.

Working with partner organisations

Scottish Government

- 3.57 The establishment of a standing National Committee on Infant Cremation was a key recommendation of the Rt Hon. Lord Bonython's Report of the Infant Cremation Commission, published on June 17, 2014.
- 3.58 The National Committee is chaired by Scottish Government, overseen by the Minister for Public Health, and has more than 20 members from multiple organisations and sectors including: clinical and neonatal experts; cremator manufacturers; crematoria and funeral directors representative organisations; bereavement organisations; private and local authority cremation authorities and policy officials from England and Wales, and Northern Ireland. The City of Edinburgh Council was invited to sit on this committee as a local authority representative. There are also parent representatives on the Committee to ensure that those who have been most affected by issues in the past have a real say in improvements to policy, practice and law now and in the future.
- 3.59 Good progress is continuing to be made on recommendations, including the publication of updated guidance from the Chief Medical Officer on the disposal of pregnancy loss, which was issued to the NHS in April 2014. As of November 2015, the Committee, its Sub-Groups and its member organisations have completed a substantial proportion the recommendations. Further recommendations will be completed by the coming into force of the Burial and Cremation (Scotland) Act, and associated regulations.

3.60 The National Committee drafted and agreed a Level 1 Code of Cremation Practice on Infant Cremations in June 2015. The agreed structure of the Code of Practice is for an overarching 'Level 1' Code of key principles that are applicable to all, supported by six sets of sectoral and information 'Level 2' Guidelines. Underneath these sit new or pre-existing organisational operational procedures, policies etc (a national 'Level 3') that organisations will ensure are aligned with and reflect the Level 1 and Level 2 Codes of Practice. The Code of Practice have now been published by the Scottish Government, and are presented in Appendix 5 of this report for formal adoption by City of Edinburgh Council.

Burial and Cremation Legislation

3.61 In recognition that previous Burial and Cremation legislation was very dated, and that a lack of clarity had contributed to historical poor practice in Mortonhall and other crematoria, the Scottish Government, following extensive stakeholder consultation, introduced a Bill to:

- restate and amend the law relating to burial and cremation;
- make provision about exhumation of human remains; and
- make provision in relation to the inspection and licensing of funeral directors.

3.62 The Burial and Cremation (Scotland) Bill was introduced by the Cabinet Secretary for Health, Wellbeing and Sport, Shona Robinson MSP, on 8 October 2015 and was passed by the Scottish Parliament on 22 March 2016.

3.63 The Scottish Government is in the process of arranging a number of stakeholder seminars which will explain what the new legislation will mean for specific sectors, as well as setting out an implementation timetable based on close interagency working.

3.64 The Act aims to ensure that a legal framework is developed which ensures that appropriate dignity and respect is shown when carrying out burials and cremations. These recommendations cover a wide range of issues, including the general management of graveyards, proposals to ease pressure on burial land and modernising the legal framework for burial and cremation. Collectively, these recommendations represent the most significant overhaul of burial and cremation practices for well over 100 years, and aims to provide a modern, fit for purpose legal framework.

Inspector of Crematoria

3.65 In March 2015, the Scottish Government appointed an Inspector of Crematoria. This appointment will fulfil one of the recommendations from the Infant Cremation Commission led by Lord Bonomy. The Inspector of Crematoria will:

- ensure Cremation Authorities in Scotland are adhering to current legislation and best practice;
- respond to complaints or queries from the public about cremations;

- inspect cremation registers and other statutory documentation to ensure they are being properly completed and maintained;
 - provide direction to crematoria managers and staff to ensure they are operating in line with the recommendations of the Infant Cremation Commission; and
 - support the development of future primary legislation on burials and cremations.
- 3.66 The Inspector of Crematoria, Robert Swanson, QPM undertook informal initial visits to Mortonhall during 2015, allowing for familiarisation and positive relationship building with managers and the team.
- 3.67 The Inspector carried out his formal Inspection at Mortonhall on 5 May 2016, resulting in a fully compliant assessment with no non-conformities identified. A copy of this report is attached as Appendix 6.

Infant Cremation: National Investigation

- 3.68 In June 2014 the Minister for Public Health announced in the Scottish Parliament the establishment of a National Investigation into infant cremations in Scotland. Dame Elish Angiolini's Mortonhall Investigation Report, published by the City of Edinburgh Council on April 30, 2014, provided specific answers to affected families in the Edinburgh area, as well as some wider recommendations. Lord Bonomy's Infant Cremation Commission Report, published by the Scottish Government on June 17, 2014, then provided national recommendations for future improvements.
- 3.69 The National Investigation provides every parent whose baby was cremated in Scotland with the same opportunity to have their concerns regarding their cases investigated.
- 3.70 The Investigation has now completed all interviews and gathered many hundreds of files and documents from the 14 crematoria involved. The extensive evidence review of files, documents and statements from witnesses and expert witnesses has been analysed, and Dame Elish Angiolini's formal national report is due to be published in summer 2016.

NHS Lothian

- 3.71 Ongoing dialogue continues with NHS Lothian and other partners to develop and refine training and guidance for those taking parents through the process of arranging their baby's funeral and supporting them to make the choices that are right for them.

Key achievements and moving forward

- 3.72 The Mortonhall team has continued to work hard in the continued delivery of all the recommendations. This is set against the wider national context of emerging legislative changes and Codes of Practice which are expected to be implemented in the course of the next 18 months, and against significant line management changes and preparation for a major refurbishment during 2016.

3.73 These actions have included:

- revised practices for infant cremation, with improved record keeping;
- continued collaborative engagement and input from all partners in response to the recommendations;
- strengthened approach to customer care using customer feedback and incorporating CSE as a delivery model, with successful compliance achieved in November 2015;
- strengthened benchmarking approach including regular site visits to other crematoria;
- training and qualifications progressed for technical and managerial staff;
- Transformation Programme successfully initiated and in progress, with active input from team members;
- strengthened quality assurance approach with successful BSI compliance achieved in March 2016;
- ongoing support provided to the National Cremation Investigation;
- strong continued communication and engagement approach with all parents, the bereaved and stakeholders;
- positive and proactive response to service non-compliance, including self-referral to Inspector of Crematoria and immediate resolution of issues;
- completion of memorial at Mortonhall, which opened in December 2015;
- continued strong partnership work with the Scottish Government as part of the National Committee on Infant Cremation; and
- Scottish Government published Code of Practice on Infant Cremation adopted by City of Edinburgh Council.

3.74 Similarly good progress has been made and is on-going on the following:

- A major refurbishment of the Crematorium building, plant and facilities;
- development of a performance framework;
- developing full environmental compliance in partnership with SEPA;
- design options and consultation development for a memorial at Princes Street Gardens; and
- implementation of a new staffing structure as part of the Transformation Programme, to ensure culture change continues to be embedded and delivered.

3.75 As forthcoming legislative changes are agreed and implemented over the course of the next couple of years, strong support will remain in place to ensure that these are adopted by the relevant service teams within timescales and to the required standards.

3.76 The Scottish Government's Inspector of Crematoria will continue to work with managers, staff and cremation authorities to ensure that all required changes are delivered in accordance to statutory and ethical requirements.

Ongoing support for affected parents

- 3.77 The Council has continued to receive a number of enquiries from affected parents, many of whom were not part of the original investigation. The Council has continued to work closely and collaboratively with the National Investigation team, the Council's Legal Services, NHS Lothian and other agencies in supporting parents to access historical records pertaining to their loss, and where necessary directing them to further sources of support and advice.

Measures of success

- 4.1 Successful delivery of Action Plan. If the measures taken are successful, no bereaved parent in future will suffer the same experience as the parents involved in the investigation.
- 4.2 Affected parents feel reassured that actions have been delivered to respond to the recommendations highlighted in Dame Elish Angiolini's report, and that they have had an opportunity to influence the outcomes on behalf of the baby lost to them and their families.
- 4.3 A Policy Document will clearly outline the framework and standard to which cremation services has been delivered. Reviewed practices and record keeping now in place.
- 4.4 The Mortonhall team will meet the required standard on an internal self-assessment against CSE criteria, including the adoption of required culture change, by November 2016.
- 4.5 Robust performance measurement against identified performance criteria will provide management information on ongoing performance.
- 4.6 Delivery of a suitable and sensitively designed memorial within Princes Street Gardens within an agreed timescale with affected parents.

Financial impact

- 5.1 The financial resources required to deliver the completed actions to date have been contained within existing Council budgets.
- 5.2 A capital budget of £1.8 million for the refurbishment work at Mortonhall has been identified as part of the Asset Management Programme. However a further detailed technical assessment of the mercury abatement plant has identified that in order to fully abate flue gases, and to future proof the plant, a further £200,000 is required to procure the most effective solution. It is proposed that this is funded through a realignment of budgets within the core capital programme. A further report on capital programme pressures together with details of how these can be managed will be subject of a separate report to Council in the autumn of this year.
- 5.3 The report outlines total capital expenditure plans of £2.0 million. If this expenditure were to be funded fully by borrowing, the overall loan charges associated with this expenditure over a 20 year period would be a principal

amount of £2.0 million and interest of £1.33 million, resulting in a total cost of £3.33 million. Based on a loans fund interest rate of 5.1%, the annual loan charges would be £0.17 million.

- 5.4 It should be noted that the Council's Capital Investment Programme is funded through a combination of General Capital Grant from the Scottish Government, developers and third party contributions, capital receipts and borrowing. The borrowing required is carried out in line with the Council's approved Treasury Management Strategy and is provided for on an overall programme basis rather than for individual capital projects. Following instruction from Members, notional loan charge estimates have been provided above, which it should be noted are based on the assumption of borrowing in full for this capital project.
- 5.5 An element of the capital expenditure outlined in this report (£1.8 million) forms part of the approved capital investment programme. Provision for funding the £1.8 million will be met from the revenue loan charges budget earmarked to meet overall capital investment programme borrowing costs.
- 5.6 The costs of the memorial at Princes Street Gardens have yet to be finalised, both the estimated cost and a funding proposal will be provided in the next update report.

Risk, policy, compliance and governance impact

- 6.1 Risks and issues of non compliance were identified at Mortonhall by Dame Elish Angiolini, DBE, QC during her original investigation, and nationally by Lord Bony, and have been addressed in recommendations and subsequent Chief Executive's Multi-Agency Working Group Action Plan. The suite of improvement actions has been delivered with clear oversight from the Council's Chief Executive, and within a strong governance framework and action plan incorporating clearly delineated milestones and responsible parties identified. The appointment of HM Inspector of Crematoria in March 2015, to include annual inspections of all crematoria nationally, will ensure a clear framework of compliant operation for these services.

Equalities impact

- 7.1 The activities listed in this report will contribute to a significant enhancement of rights, particularly in relation to Health, Individual, Family and Social Life, Participation, Influence and Voice, and Productive and Valued Activities.

Sustainability impact

- 8.1 Any change to process and equipment at Mortonhall will be fully discussed and agreed with the Scottish Environmental Protection Agency, to ensure compliance with all relevant environmental legislation. The refurbishment at Mortonhall taking place during 2016 will enable the Council to achieve 100% abatement of flue gases.

Consultation and engagement

- 9.1 Ongoing consultation and engagement has continued with a wide range of stakeholders, including affected parents, parent representative bodies (SANDS Lothians and SiMBA), NHS Lothian, Scottish Government, Funeral Directors and Edinburgh Crematorium Ltd (Seafield and Warriston crematoria); Mortonhall staff team, and taking account of guidance produced by industry professional bodies FBCA and ICCM.

Background reading/external references

Report from Mortonhall Investigation and Action Plan, City of Edinburgh Council 26 June 2014

Report of Infant Cremation Commission June 2014

[Scottish Government National Committee on Infant Cremation](#)

[Infant Cremations: National Investigation](#)

Andrew Kerr

Chief Executive

Contact: Natalie McKail, Senior Manager, Place

E-mail: Natalie.mckail@edinburgh.gov.uk | Tel: 07717 224843

Contact: Ewan McCormick, Mortonhall Change Manager, Place

E-mail: Ewan.mccormick@edinburgh.gov.uk | Tel: 0131 664 4314

Links

Coalition Pledges	P27 - Seek to work in full partnership with council staff and their representatives
Council Priorities	CP3: Right care, right place, right time CP5: Business growth and investment CP9: An attractive city CP13: Transformation; Workforce; Citizen & partner engagement; Budget
Single Outcome Agreement	SO2 - Edinburgh's citizens experience improved health and wellbeing, with reduced inequalities in health SO4 – Edinburgh's communities are safer and have improved physical and social fabric
Appendices	Appendix 1: ICCM Report, May 2016 Appendix 2: BSI Report, March 2016 Appendix 3: Cremation Policy Statement, updated 2016 Appendix 4: Scottish Government Code of Practice, December 2015 Appendix 5: Inspector of Crematoria's report



1st April 2016

Interim Report

Mortonhall Crematorium



Bill Stanley
PADCONSULTING

Mortonhall Interim Consultation Report

During my meeting with Natalie McKail in Edinburgh's City Council's main offices on 9th March 2016, the areas of support and associated tasks were discussed and agreed

Based on these areas, I have attended Mortonhall Crematorium on five occasions, namely the 15th 16th 23rd 24th and 30th March 2016.

After initially meeting with staff members and touring the crematorium, I had a long conversation with Ewan McCormick, the Crematorium Change Manager who provided me with an insight into the current situation as well as ongoing changes, proposed refurbishment within the crematorium and other proposed changes within Bereavement Services structure.

The staff are diligently getting on with their duties albeit reduced to some degree for some staff members based on the reduction of cremations currently being taken and the forthcoming refurbishment of the crematorium, while admin staff continue to provide a very detailed and concise service to the customer, particularly with the imminent changes to bereavement charges whilst focusing on their temporary move to a porto cabin where they can continue carrying out their essential functions.

So far I have looked at:

Policies and Procedures

Viewing all of the services current Policies and Procedures and have suggested several changes relating to working practices, signing in paperwork in etc., contact details and current legislative requirements and these have now been incorporated within the said documents etc. bringing them up to date.

Operations Guide

Again this document covers all of Bereavement Services, i.e. cemeteries, crematorium, mortuary, administration etc., and several changes require to be made to this which will be completed during April, based on the proposed service changes.

Administration Forms

The current crematorium forms in use are correct but will require changing when new forms for cremation are issued by the Scottish Government and I will advise on this in due course.

Staff

I have interviewed staff collectively as well as in groups of 2 to 3 and the general consensus is that they all enjoy working within the crematorium and the bereavement industry, they enjoy their working relationships with fellow employees, and this includes the temporary management team brought in to oversee the daily running of the service. A team they feel are fully supportive of them.

The staff feel that they are doing a worthwhile job assisting the bereaved but they have a slight uncertainty about what the next few months may bring with regard to the major refurbishments taking place from May onwards.

The general consensus from them is that they just want to put everything behind them and focus on the future.

Comments were made on staff training and it was acknowledged that training is being provided with regard to "Infant Cremation" as recommended by Lord Bonomy's Infant Cremation Commission Report of June 2014.

Equipment

I noted that the cremulator and cremated remains transfer unit were placed in an area where access was limited due to the installation of a large steel girder which is supporting the crematorium roof. It was suggested that these units could be moved further into the room therefore allowing additional safe access and egress for employees and omitting manual handling problems. This work was carried out the day after suggesting it by the external engineer working on the cremation equipment.

Workplace Inspection/Assessment

Several of these have been carried out in the crematorium building and also the external buildings of the Chapel of Remembrance and Waiting Room/Toilets. Issues of concern have been noted and reported to the Crematorium Change Manager who is compiling a report of these with the intent that these issues can be rectified during the crematorium closure.

Safe Systems of Work

After speaking to staff members, I have commenced the production of Safe Systems of Work for staff working within the crematorium and will draft copies to them for comments. These will range from accepting a coffin, charging a coffin, cremulating, to playing music as well as general housekeeping duties.

Traffic Management Plan

I observed the attendance of mourners at a large funeral and noted that mourners parked wherever they could due to no lining of bays etc.

In the event of a very large funeral, including those with coaches, I propose to produce a plan, which if accepted and implemented, should reduce these problems enabling mourners to arrive, park safely attend a funeral and leave with the minimum of anxiety.

Future Direction of Service

It became quite clear after discussions with Natalie, Ewan and other staff members that they want to focus on change. By asking what they wanted and what their aspirations were, and where they envisaged seeing the service in the future, they all agree with the same aim – **“to be the best.”**

This says a lot about them, considering what they and the service has been through and may still go through for some period of time.

I therefore intend to focus on areas where additional Policy, Procedures and Guidelines will enable them and the service to compete at a higher level and achieve a best service award for the staff and the crematorium.

Workplace Assessments and Inspections

These have been carried out with the assistance of Ewan and Lynne Smith (Project Officer) and included all areas of the crematorium, rooms, storage areas etc. as well as the Waiting Room, Toilets and the Chapel of Remembrance, all of which are located outside the crematorium.

Areas of concern have been noted and several of these will be picked up during the refurbishment programme.

Bill Stanley
PADconsulting



Assessment Report.

Edinburgh City Council Service For Communities Bereavement Service

Introduction.

This report has been compiled by Chris Hargrove and relates to the assessment activity detailed below:

Visit ref/Type/Date/Duration	Certificate/Standard	Site address
8259946 Continuing Assessment (Surveillance) 21/03/2016 1 day(s) Effective no. of employees : 55 Total no. of employees : 55	FS 67790 ISO 9001:2008	The City of Edinburgh Services for Communities Bereavement Services Mortonhall Crematorium 30B Howden Hall Road Edinburgh EH16 6TX United Kingdom

The objective of the assessment is to determine the effectiveness of the quality management system for Edinburgh Council Bereavement Services in relation to the requirements of the organisations management system and requirements of ISO9001:2008. Add value to the assessment process through constructive discussion and the identification of opportunities for improvement.

Management Summary.

Overall Conclusion

The audit objectives have been achieved and the certificate scope remains appropriate. Based on the results of this audit that Edinburgh Council Bereavement Services Mortonhall fulfils the requirement of the standard 9001 : 2008 and audit criteria identified within the audit report confirms that the management system continues to achieve its intended outcomes with many positive examples of performance and process controls identified, well done. Observations raised should be considered as part of continual improvement.

I would like to thank all the audit participants for their assistance and co-operation which enabled the audit to run smoothly and to schedule.

There were no outstanding nonconformities to review from previous assessments.

No new nonconformities were identified during the assessment. Enhanced detail relating to the overall assessment findings is contained within subsequent sections of the report.

Areas Assessed & Findings.

QMS Update - Changes - Improvements - Service Action Plans :

The Senior Manager, Community Safety; gave an update on the Transformation programme including possible outcome related to the service. A decision has been made to split Crematorium from Mortuary and Burial. The new re-structuring of the service is under review including affected resources and how the new service set up will be supported. It is anticipated by the next bsi assessment on the 21st July if not before, a clear expectation of the service including registration requirements will be established to enable a decision of future registration and scope to be confirmed.

Significant amount of work has been completed as part of the Dame Eilish recommendations with the action team formulating and implementing many positive changes including liaising with the newly appointed Inspection of Crematorium.

A draft policy statement revised March 2015 has been put forward to committee for approval, the excellent document comprehensively explains the policy intent, scope, content, reference to babies and infants, documents and records, resource, responsibilities, related documented references will support the direction and identification of the service requirements.

National committee dialogue has resulted in adoption of a new code of practice, change in procedures, refresher training and awareness. Current Burial & Cremation Legislation is under full review with plans to go to parliament this month.

A visit to the memorial garden for the parents affected by the cremation of the babies resulting in the Dame Eilish report was conducted. The impressive and sensitive design was concluded with full parent involvement as has been all aspects of the case.

Management Review - Customer Satisfaction - Service Objectives - Monitoring of Performance :

Several review meetings have been held including; Mortonhall Crematorium Management Meetings Dec, Jan, Feb March to review Actions and plans including progress. BSI audit management review meeting. Additional meetings include discussions on the restructuring of the service including significant investment to the facility planned from May to Nov in excess of 1.9mil.

Customer feedback was highlighted as a positive method to gain feedback including positive comments and identification of areas for improvement with feedback cards demonstrated.

Complaints are managed through Capture, positive evidence was demonstrated for the recording of 26 complaints from 2014 with discussions centred on method to fully close the complaints as not all complaints identified if the remedial / corrective actions had actually been closed meeting customer requirements

See Observation.

As part of the significant changes to the service, a review of performance measures will be included

See Observation.

Three incidents (two deemed as occurrences by the Inspector of Crematoria) were reported by the service. The documents information clearly and effectively includes the incidents, what occurred, full investigation by all parties, full correspondence with the bereaved parties. An open transparent approach is very evident from the discussions and documented evidence with on-going communication to determine closure to the satisfaction for the bereaved.

Observations.

Type	Area/Process	Clause
Observations	Management Review - Customer Satisfaction - Service Objectives - Monitoring of Performance	
Scope	FS 67790	
Details:	<p>- It was agreed by the next bsi visit, new key performance measures including objectives will be established.</p> <p>- For complaints 908318 - 828648 - 780 387 consideration should be given to how the loop of ensuring completion is recorded to effectively identify customer satisfaction.</p>	

Internal Audits - Corrective Action :

Audit plan covers 2015 to 2017. the audits have been planned to ensure all specific service areas including procedures are sampled. The audits sampled comprehensively identified conformance with some opportunities for improvement. Additional audits are completed if an area of concern / complaint indicates a review of the process would be advantageous.

Crematorium - Process Controls - Documentation :

The process was comprehensively and effectively explained and demonstrated through sampling several deceased records. Use of BACAS including the cremated remains log book, application of disposal, certificate of cremation, use of Form 14 were all sampled and controlled including records.

The process of cremation and cremulation was sampled and effectively demonstrated for two identified jobs.

The process included identifying ashes to be collected to the information on the deceased contained within BACAS and identification cards used to trace the deceased throughout the process; 109268 - 109265 - 109258 - 109259. All documented information was available, correctly completed and effectively controlled, well done.

Indigent Dead - Process Controls - Documentation :

The process was comprehensively and effectively explained and demonstrated through sampling several deceased records.

The process included notice to the council, place of death, establishing capability to pay, registration of the death, criteria what is covered by the service, a checklist to ensure all process areas are completed satisfactorily. Several completed records were sampled along with ashes awaiting collection; 109231 - 109225 - 109208. All records and areas of control were identified as being effectively controlled, well done.

During the course of the visit logos were found to be used correctly.

Assessment Participants.

On behalf of the organisation:

Name	Position
Natalie McKail	Senior Manager, Community Safety
Ewan McCormick	Crematorium Change Manager
Stephen Straiton	Project Officer - Performance & Quality
Alan Thomson	Crematorium Technician
Lesley Webster	Crematorium Technician
Danielle Gartland-Quinn	Support Assistant

The assessment was conducted on behalf of BSI by:

Name	Position
Chris Hargrove	Team Leader

Continuing Assessment.

The programme of continuing assessment is detailed below.

Site Address	Certificate Reference/Visit Cycle	
The City of Edinburgh Services for Communities Bereavement Services Mortonhall Crematorium 30B Howden Hall Road Edinburgh EH16 6TX United Kingdom	FS 67790	
	Visit interval:	6 months
	Visit duration:	1 Days
	Next re-certification:	01/01/2018

Re-certification by Strategic Review will be conducted on completion of the cycle, or sooner as required. The review will focus on the strengths and weaknesses of your Management System.

Certification Assessment Plan.

CITY O-0047119351-001|FS 67790

		Visit1	Visit2	Visit3	Visit4	Visit5	Visit6
Business area/Location	Date (mm/yy):	07/15	01/16	07/16	01/17	07/17	01/18
	Duration (days):	1.0	1.0	1.0	1.0	1.0	1.0
Management Systems - Service Update - Changes - Responsibilities - Preventive Action - Improvements		X	X	X	X	X	X
Management Review - Service Plans - Customer Focus - Performance Monitoring - Improvement Actions			X		X		X
Customer Satisfaction & Complaints		X	X	X	X	X	X
Internal Audit - Corrective Action			X		X		X
Resource - Training - Competency		X			X		X
Crematorium Facility Process Controls			X		X		
Memorials Process Controls							
Burials Facility Process Controls		X		X		X	
Mortuary Facility Process Controls							X
Indigent Dead Facility Process Controls			X				
Re-Certification by Strategic Review - Senior Management Interview							X

Next Visit Plan.

Visit objectives:

The objective of the assessment is to conduct a surveillance assessment and look for positive evidence to ensure the elements of the scope of certification and the requirements of the management standard are effectively addressed by the organisation's management system and that the system is demonstrating the ability to support the achievement of statutory, regulatory and contractual requirements and the organisations specified objectives, as applicable with regard to the scope of the management standard, and to confirm the on-going achievement and applicability of the forward strategic plan.

Due to significant transformation changes that include re-structuring of the service including resource, the CAV will be used as a planning day to ascertain what the scope of registration will look like creating a new plan.

Date	Assessor	Time	Area/Process	Clause
21/07/16	Assessor 1	0900	Opening Meeting	
			Management Systems - Service Update - Changes - Responsibilities - Preventive Action - Improvements	
			Management Review - Service Plans - Customer Focus - Performance Monitoring - Improvement Actions	
			Internal Audit - Corrective Action	
			Customer Satisfaction & Complaints	
			To be determined on the day or prior to visit due to reorganisation including possible change to scope of registration.	
		1500	Report Preparation	
		1600	Closing Meeting	

Please note that BSI reserves the right to apply a charge equivalent to the full daily rate for cancellation of the visit by the organisation within 30 days of an agreed visit date. It is a condition of Registration that a deputy management representative be nominated. It is expected that the deputy would stand in should the management representative find themselves unavailable to attend an agreed visit within 30 days of its conduct.

Scope of Certificate FS 67790 (ISO 9001:2008).

Main Scope

The provision of the facilities for mortuary, cremation and burial services.

The scope has been confirmed as correct.

Location	Scope
The City of Edinburgh Services for Communities Bereavement Services Mortonhall Crematorium 30B Howden Hall Road Edinburgh EH16 6TX United Kingdom CITY O-0047119351-001	Main Certificate Scope applies.

Notes.

The assessment was based on sampling and therefore nonconformities may exist which have not been identified.

If you wish to distribute copies of this report external to your organisation, then all pages must be included.

BSI, its staff and agents shall keep confidential all information relating to your organisation and shall not disclose any such information to any third party, except that in the public domain or required by law or relevant accreditation bodies. BSI staff, agents and accreditation bodies have signed individual confidentiality undertakings and will only receive confidential information on a 'need to know' basis.

'Just for Customers' is the website that we are pleased to offer our clients following successful registration, designed to support you in maximising the benefits of your BSI registration - please go to www.bsigroup.com/j4c to register. When registering for the first time you will need your client reference number and your certificate number (47119351/FS 67790).

This report and related documents is prepared for and only for BSI's client and for no other purpose. As such, BSI does not accept or assume any responsibility (legal or otherwise) or accept any liability for or in connection with any other purpose for which the Report may be used, or to any other person to whom the Report is shown or in to whose hands it may come, and no other persons shall be entitled to rely on the Report.

Should you wish to speak with BSI in relation to your registration, please contact our Customer Engagement and Planning:

Customer Services
 BSI
 Kitemark Court,
 Davy Avenue, Knowlhill
 Milton Keynes
 MK5 8PP
 Tel: +44 (0)845 080 9000

Email: MK.Customerservices@bsigroup.com

Regulatory Compliance.

BSI conditions of contract for this visit require that BSI be informed of all relevant regulatory non-compliance or incidents that require notification to any regulatory authority. Acceptance of this report by the client signifies that all such issues have been disclosed as part of the assessment process and agreement that any such non-compliance or incidents occurring after this visit will be notified to the BSI client manager as soon as practical after the event.

Expected Outcomes for Accredited Certification.

What accredited certification means:

The accredited certification process provides confidence that the organization has a management system that conforms to the applicable requirements of the certified standards covered within this assessment and scope of certification.

What accredited certification does not mean:

It is important to recognize that certification defines the requirements for an organization's management system, not for its products or services. It does not imply that the organization is providing a superior product or service, or that the product, service or performance itself is certified as meeting the requirements of an ISO standard or specification or that the organisation can guarantee 100% product, service or performance conformity, though this should of course be a permanent goal.

Mortonhall Crematorium

Policy Statement (Revised March 2016)

Policy statement

- 1.1 This Policy Statement sets out the range and quality of service that the bereaved can expect from services delivered at Mortonhall Crematorium, and outlines a commitment from the City of Edinburgh Council to deliver cremation services to the specified standards.
- 1.2 This Policy Statement takes into account good practice guidance and legislative requirements as set out in law and by regulation, produced by the Scottish Government National Committee on Infant Cremation, Institute of Crematorium and Cemetery Management (ICCM) and the Federation of Burial and Cremation Authorities (FBCA). The City of Edinburgh Council has corporate membership, and its staff individual membership, of these organisations.
- 1.3 This Policy Statement sets out key principles to achieve these aims, and details the Council's corporate and employee responsibilities required to ensure compliance.
- 1.4 This Policy Statement will be revised annually to reflect legislative changes and on the publication of the National Investigation report.

Scope

- 2.1 This Policy applies to Cremation Services currently delivered at Mortonhall Crematorium.
- 2.2 This Policy will be implemented by staff at Mortonhall Crematorium, supported by managers and industry partners, within a legislative framework and developing internal performance monitoring framework.
- 2.3 In working with third parties, we will promote the adoption of practices and arrangements consistent with the principles set out in this policy.

Definitions

- 3.1 **Cremation records** include all statutory documentation supplied to the crematorium, mainly but not solely by Funeral Directors, which ensure that the cremation can legally take place. These also include electronic and hard copy records maintained by crematorium staff of each cremation.
- 3.2 The **Cremation Authority** means the local authority with responsibility for the maintenance, operation and upkeep of Council-run crematoria in that area, in this case the City of Edinburgh Council. For the purposes of this document, this excludes privately operated crematoria.
- 3.3 **Ashes** mean “**all remains that are left in the cremator at the end of each cremation process and following the removal of any metal**”. **Recovered ashes from any cremation may include remains of the coffin and other materials from within the coffin.** There might be a small number of cases where there are no ashes remaining at the end of the cremation process. If this is the case our staff will contact the Applicant for Cremation, together with the HM Inspector of Crematoria, and advise them of this.
- 3.4 The **Cremation (Scotland) Regulations 1935**, and subsequent amendments, provide the legislative framework for the cremation process in Scotland.

As of March 2016, the legislative framework in Scotland is under review by the Scottish Government as part of the suite of recommendations arising from Lord Bonyon's Report of the Infant Cremation Commission (June 2014). This work is being progressed by the National Committee on Infant Cremation and its various subgroups, and has currently reached Stage 2 of Bill process with final parliamentary submission expected in March 2016. The National Committee recognised the distressing impact historical cremation practice has had on many families in Scotland, and that a key Committee objective is to ensure that future policy, practice and law provide sufficient clarity to prevent any re-occurrence of such distress.

Recommendations which are legislative will be subject to consultation and Bill timescales.

- 3.5 The **Federation of Burial and Cremation Authorities (FBCA)** represents approximately 90% of all cremation authorities in the United Kingdom. Membership of the Federation is open to all burial and cremation authorities and is the sole organisation dedicated to representing and furthering the interests of burial and cremation authorities.

- 3.6 The **Institute of Cemeteries and Crematorium Managers (ICCM)** has represented professionals working in burial and cremation authorities and companies throughout the UK since 1913. Their aim is to improve standards of services to the bereaved by providing professionals, authorities and companies with Policy and Best Practice Guidance and Educational and Training programmes.
- 3.7 The **Garden of Remembrance** is a tranquil, grassed area within the Crematorium grounds.
- 3.8 The national **Code of Cremation Practice** was first produced in 1945 and has been revised following multi-agency input by the Scottish Government through the work of the National Committee, and is essential in the maintenance of standards at crematoria. Observance of the Code is an obligation of membership of the Federation.

Policy content

4.1 Service Commitment statement

- 4.1.1 The City of Edinburgh Council recognises that the cremation of a human body is a highly emotional occasion. Our team will provide a professional and dignified cremation service supported by competent, caring staff, to meet all religious, secular, ethnic and cultural needs.
- 4.1.2 Our staff will support members of the public in a sympathetic, courteous and helpful manner, in line with professional industry guidelines, national and local Codes of Practice and the City of Edinburgh Council's policies.
- 4.1.3 Our staff recognise that this is the final service that the City of Edinburgh Council will provide for the deceased, and we will carry this out in such a way as to demonstrate our respect for the wishes of the deceased and their family.
- 4.1.4 The City of Edinburgh Council will ensure that complete and accurate records are maintained for all cremations carried out at Mortonhall Crematorium within legislative requirements, including the recording of final location of ashes when these have been buried in the Crematorium grounds.
- 4.1.5 The City of Edinburgh Council will ensure accurate and current information on the services we provide are available to members of the public, Funeral Directors, NHS and other partners, and on the City of Edinburgh Council website. This can also be provided in a variety of languages if requested.

- 4.1.6 Our staff will work closely with members of the public and all relevant health services, Funeral Directors and support groups in order to create a culture of continuous improvement in the services we offer and an understanding of the experience of the bereaved.
- 4.1.7 In line with the City of Edinburgh Council's policies, we will provide a clear complaints and suggestions procedure to enable us to improve our service based on feedback received from users.
- 4.1.8 We will measure customer feedback and our performance against agreed targets to ensure we continue to deliver a high quality, responsive service
- 4.1.9 We will ensure that in developing and delivering cremation services we will take the needs of ethnic and other minority groups into consideration.
- 4.1.10 We will regularly compare our quality of service with that of other crematoria to ensure that we deliver the best possible quality of service.

4.2 Cremations

- 4.2.1 All cremations **shall** be carried out according to the provisions of the Cremation (Scotland) Regulations 1935, and any amendments thereof. No cremation can take place without receipt of required legislative documentation and the written authority of designated Senior Cremation Authority staff.
- 4.2.2 **No** cremation shall take place unless clear, signed, instructions regarding the disposal of ashes have been received from the next of kin of the deceased.
- 4.2.3 All cremations in Mortonhall are carried out in accordance with all relevant Codes of Practice (including those produced by the Scottish Government and FBCA) and guidelines produced by the FBCA and ICCM as nationally recommended standards of best practice. A copy of relevant Codes of Practice will be publicly displayed in the Crematorium.
- 4.2.4 Each coffin given to the care of the Cremation Authority shall be cremated separately.
- 4.2.5 Families can witness the committal of their loved one to the cremator, by prior arrangement, if they desire to do so.

4.3 Policy Statement on Ashes

4.3.1 Whilst our employees might use the terms 'ashes' and 'cremated remains' we deem these to be one and the same and defined as '*all that is left in the cremator at the end of the cremation process and following the removal of any metal*'. There might be a small number of cases where there are no ashes remaining at the end of the cremation process. If this is the case our staff will contact the Applicant for Cremation and advise them of this. We will also notify the Inspector of Crematoria of this situation as outlined in 4.3.6 below.

4.3.2 We will offer relatives of the deceased a choice on what they would like to happen to the ashes of their loved ones. These are:

(a) To be taken away in a Casket within 28 days by the applicant or their designated representative

(b) Buried in the Garden of Remembrance at Crematorium; or

(c) Retained to await instruction (Period 28 days).

If, at the end of 28 days, no instructions have been received as to the disposal of these ashes, we will write to relatives giving them a further 14 days notice. If no clear instructions have been received after this time, the ashes will be respectfully buried in the Garden of Remembrance.

4.3.3 If ashes are scattered or buried within the grounds of the crematorium the final resting place will be registered along with any details of any person authorised by the applicant to remove/collect the ashes.

4.3.4 If applicants have indicated they wish to collect ashes the details of any person authorised by the applicant to remove/collect the ashes will likewise be recorded.

4.3.5 The policy of this Cremation Authority is designed to provide an audit trail from the receipt of initial funeral instructions to the final disposal of ashes, either by collection from the crematorium or by burying within the Gardens of Remembrance at Mortonhall.

4.3.6 In the event that ashes have not been recovered for any reason from a cremation, we will inform the applicant and their representative of this circumstance, together with referring the matter to the HM Inspector of Crematoria to enable a full independent investigation to take place. Affected families also have the right to request that the Inspector investigate specific cases. The City of Edinburgh Council will co-operate fully with any investigation carried out by the Inspector.

4.4 Babies and infants

- 4.4.1 In distressing situations where a baby has died, our staff will do everything possible to assist bereaved parents and families to support them in the decisions they have made.
- 4.4.2 As with adult cremations, the City of Edinburgh Council will ensure that our staff approach the cremation of a baby with sensitivity, and will take account of, and respect the wishes and needs of parents and families at this very difficult time.
- 4.4.3 The City of Edinburgh Council, in conjunction with industry representatives, has developed an approach to the cremation of babies and infants that is designed to maximise the recovery of ashes. This includes the use of a cremation tray designed to retain ashes, and the maintenance of operational conditions that will maximise the recovery of any ashes during the process of cremation.
- 4.4.4 Our staff will be vigilant during the cremation process and adjust operational conditions when necessary in order to protect the ashes of babies and infants and maximise the recovery of ashes. We will adhere to our identification procedure that guarantees that the ashes resulting from individual cremations returned to parents are those of their baby.
- 4.4.5 Where a shared cremation has been chosen by parents, and hence ashes are not individually identifiable, we will take the same care throughout the cremation process and will scatter/bury the ashes within the designated area. The location will be recorded for future reference.
- 4.4.6 In the case where a memorial service has been arranged for a shared cremation, we will work with partners to ensure that wherever possible, and if requested, affected parents are given the opportunity to attend.
- 4.4.7 In relation to the disposal of ashes in the case of a private cremation, this Cremation Authority will only act upon the written instruction of the parent who is acting as the "Applicant for Cremation". In the case of shared cremations we will only act on the written instruction of the designated person at the relevant hospital, who is acting as the "Applicant".
- 4.4.8 All cremations of babies and infants will be registered at the crematorium, with all forms and documents being retained according to agreed legislative and regulatory requirements and the City of Edinburgh Council's Document Retention Policies.
- 4.4.9 All City of Edinburgh Council staff responsible for carrying out cremations of babies and infants will be trained to ensure they have the relevant skills for this highly sensitive process.

4.5 Paperwork

4.5.1 The City of Edinburgh Council will work with partners to ensure that all forms and paperwork are clearly explained to applicants and that they understand what choices they are being asked to make. Those who have suffered loss will be given time to consider what is best for them and their family. They will also be provided with information on support agencies that can help them at this difficult time.

4.6 Environmental statement

4.6.1 As required by law we will work to minimise the impact of bereavement upon the environment. We will comply with statutory and legislative requirements including control of crematorium emissions, and support the deceased and their families should they wish to choose earth friendly materials (e.g. coffin materials) and environmentally friendly practices, in the cremation process.

4.6.2 To ensure operational efficiencies in line with environmental requirements, there may be occasions when a cremation is not carried out on the same day as the funeral. In line with guidance produced by the ICCM, and except in exceptional circumstances, all cremations will be carried out within 24 hours of the service taking place. If it is required that a cremation is carried out on the same day as the funeral, then a written request to this effect should be provided. This can be indicated on the Application for Cremation form.

4.7 Equipment

4.7.1 Cremators and all other equipment used in the Crematorium shall be kept in good repair, and regularly maintained and cleaned to ensure they are kept in good working order.

Implementation

5.1 This policy will be implemented through Bereavement Services Annual Service Plan, and adopted through discussion and engagement with partners, stakeholders and public.

Roles and responsibilities

- 6.1 The Director of Place has a general responsibility to ensure that the terms of above policy are managed according to statutory responsibilities and Council policies. The Director must do this by ensuring that:
 - 6.1.1 relevant Service Managers ensure that the policy is disseminated and adopted within Mortonhall Crematorium; and
 - 6.1.2 the terms of the above policy are clearly disseminated among partner organisations, public and stakeholders to ensure clarity of understanding
- 6.2 Designated Managers must:
 - 6.2.1 ensure that the terms of this policy and all associated procedures, policies, practice and guidance are understood by all staff and managers within the crematorium and that these are incorporated in routine practices;
 - 6.2.2 ensure that successful implementation of the Policy is supported by following agreed City of Edinburgh Council approaches to record keeping, customer care, correspondence management, maintenance and reporting of performance data and active participation in quality standard measurement tools such as Customer Service Excellence and ISO9000.
 - 6.2.3 ensure that emerging changes in legislation or professional industry guidance are communicated to staff teams and embedded in ongoing team practices, pending their inclusion in future reviews of this Policy.
- 6.3 Employees must:
 - 6.3.1 Read, understand and follow this policy and any associated procedures and guidance that are relevant to their work;
 - 6.3.2 Read, understand and follow any manuals or guidance that are relevant to their work;
 - 6.3.3 Complete and follow any training that is relevant to their work that will support them in the successful delivery of this Policy;
 - 6.3.4 Identify and report any risks to Council to their line manager.

Related documents

7.1 Council Policy

- 7.1.1 Information Governance Strategy
- 7.1.2 Information Governance Policy
- 7.1.3 Employee Code of Conduct
- 7.1.4 Data Protection
- 7.1.5 Managing Work Performance

7.2 Legislation & Statutory Codes of Practice

- 7.2.1 Cremation (Scotland) Regulations 1935
- 7.2.2 Cremation (Scotland) Regulations 1952
- 7.2.3 Cremation (Scotland) Amendment Regulations 1967
- 7.2.4 Cremation (Scotland) Amendment Regulations 1985
- 7.2.5 Cremation (Scotland) Amendment Regulations 2003

7.3 Non-statutory Guidance and Practice

- 7.3.1 [Code of Cremation Practice \(FBCA\)](#)
- 7.3.2 [Sensitive Disposal of Fetal remains \(ICCM\)](#)
- 7.3.3 [Baby and Infant Funerals Policy and Guidance \(ICCM\)](#)
- 7.3.4 [Baby and Infant Cremations - Policy Statement - Working Group Scotland](#)
- 7.3.5 [Baby and Infant Cremations -Practice Guidance -Working Group Scotland](#)

Equalities impact

- 8.1 The activities listed in this report will contribute to a significant enhancement of rights, particularly in relation to Health, Individual, Family and Social Life, Participation, Influence and Voice, and Productive and Valued Activities.

Sustainability impact

- 9.1 Any change to process and equipment at Mortonhall will be fully discussed and agreed with the Scottish Environmental Protection Agency, to ensure compliance with all relevant environmental legislation.

Risk assessment

- 10.1 Risks and issues of non compliance were identified by Dame Elish Angiolini, QC during her original investigation and have been addressed in her recommendations and subsequent Chief Executive's Multi-Agency Working Group action plan. The suite of improvement actions will be delivered with clear oversight from the Chief Executive, and within a strong governance framework and action plan incorporating clearly delineated milestones and responsible parties identified.

Review

- 11.1 In line with the Council's Policy Framework, this policy will be reviewed annually or when required by significant changes to legislation, regulation or business practice.

National Committee on Infant Cremation

Code of Practice

November 2015

NATIONAL COMMITTEE ON INFANT CREMATION

CODE OF PRACTICE

This document sets out the key principles and minimum standards for all organisations conducting infant cremations, as agreed by the National Committee on Infant Cremation.

The Code will be reviewed on an annual basis.

It is expected that all relevant organisations will adhere to this Code of Practice, ensuring that their applicable policies, procedures, practice, and both internal and public facing documentation are fully aligned with its requirements.

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CODE OF PRACTICE - LEVEL 1

- 1.** The deceased infant*, their family and their friends must be treated with respect, dignity and sensitivity at all times.
- 2.** The nearest relative* must be the main signatory or applicant on all relevant documents, unless exceptional circumstances apply.
- 3.** The principle of informed choice for next of kin* must apply to all decision-making discussions and documentation. This must include transparency as to alternative options and applicable costs, and provide clarity over who may hold future decision-making powers.
- 4.** Communication with, and the information available to, family and friends of the deceased must be consistent across all involved organisations and institutions.
- 5.** Next of kin must be allowed some time to reflect and, if necessary, make changes to their initial decisions.
- 6.** Next of kin must be provided with a copy of any documentation signed by them.
- 7.** 'Ashes' is defined as "all that is left in the cremator at the end of the cremation process and following the removal of any metal"*, irrespective of their composition.
- 8.** All organisations and institutions involved in infant cremations* must adhere to the principle of maximising the recovery of ashes when agreeing contracts, arranging and/or conducting infant cremations.
- 9.** Arrangements relating to any hospital-arranged infant cremations must be set out in a contract / be agreed in writing between NHS, funeral director, cremation authority and/or burial authority, as applicable.
- 10.** All organisations and institutions involved in infant cremations must regularly review their own procedures and policies to ensure best practice is maintained.
- 11.** All organisations and institutions involved in infant cremations must establish regular sharing and learning of multi-agency and cross-country best practice.
- 12.** All relevant staff must successfully complete relevant, available training before their involvement in discussing, organising or conducting infant cremations.
- 13.** Records must be accurate, clear, accessible and maintained electronically where possible.
- 14.** All organisations and institutions involved in infant cremations must allow and assist with regular inspection of their premises, personnel, policies, procedures and/or records etc by the individuals or bodies designated by statute for this purpose.
- 15.** All organisations involved in infant cremations must ensure that all their existing or new infant cremation policies, codes of practice, guidance, procedures and processes adhere to this national Code of Practice, including its supplementary Level 2 Guidelines and any accompanying Explanatory Notes.
- 16.** All organisations involved in infant cremations must ensure they are and continue to be fully compliant with the law in Scotland.

* See 'Definitions' Annex

CODE OF PRACTICE LEVEL 2 – COMMUNICATION

Introduction

1. This Code sets out minimum standards in both written and verbal communication with those who have experienced the loss of a pregnancy or infant. It is extrapolated from the overarching Level 1 Code of Practice, and takes account of existing good practice across all the sectors and organisations involved in infant cremation.

Code of Practice

2. Verbal or written communication with those who have been bereaved, will be:

- 2.1 Sensitive to their feelings at such a difficult time and seek to minimise any additional distress
- 2.2 Tailored to individual needs and circumstances
- 2.3 Respectful of their right to privacy
- 2.4 Clear and straightforward
- 2.5 Consistent and aligned with local partners' current practices and procedures
- 2.6 Transparent as to all relevant options, practices and procedures, including costs, timeframes, outcomes and any current and future obligations or restrictions on the signatory
- 2.7 Clear on what to do, and who to contact and when, if they have a change of mind
- 2.8 Accurate in regards to the definition of ashes as 'all that remains in the cremator at the end of the cremation process and following the removal of any metal', irrespective of the composition of the ashes.
- 2.9 Clear as to the probability of recovery and return of ashes following cremation, in order to inform decision-making on, for example, whether to have a shared or individual cremation (for a pre 24 week pregnancy loss); whether to bury or cremate, and choice of coffin.

3. Verbal communication with those who have been bereaved, must additionally be:

- 3.1 Free of assumptions about their abilities, views or wishes,
- 3.2 In language that can be well understood by all of the bereaved involved in decision-making, with the offer of interpretation services.
- 3.2 Take place in a location that protects the bereaved family's privacy

4. Written communication with those who have been bereaved, must additionally be:

- 4.1 Consistent with, and where appropriate include relevant extracts from, local partners' leaflets, guidance and policy statements
- 4.2 Available in different languages that are used in the local community.
- 4.3 All written records will be stored and shared in a manner that protects confidentiality
- 4.4 Available to them to take away and keep, whether a signed document or a general information leaflet.

CODE OF PRACTICE LEVEL 2 – TRAINING

Introduction

This Code sets out minimum standards for initial and on-going, and formal and informal, training requirements for those whose professional role includes direct contact with, and assistance to, those who have experienced the loss of a child and are considering the option of cremation (or burial). It is extrapolated from the overarching Level 1 Code of Practice, and takes account of existing training programmes and networks, as well as those still to be developed and established.

Code of Practice

Initial Training

1. All staff, at all levels, should complete their organisation's relevant operational training prior to their involvement in discussing, arranging or conducting infant cremations.
2. Both formal and informal training programmes should place the needs of the bereaved at their centre.

Continuing Professional Development Training

3. All staff, at all levels, have a responsibility to maintain their own skills, through:
 - 3.1 completing any designated continuing professional development training programmes, linked to annual appraisals, where available
 - 3.2 ensuring their individual compliance with the requirements of current law and relevant regulatory bodies.
 - 3.3 participating in joint learning and sharing of information opportunities with local partners and/or other eg branches or institutions of their own organisation.

Company / Institutional Training Responsibilities

4. Time and resources should be set aside for the purpose of staff training
5. There should be a designated lead person responsible for supporting / developing training in the area of infant cremations
6. Staff training should be monitored and a record kept of training undertaken and completed.
7. Leads should establish a network or group with their other local partners, for joint multi-agency learning and information sharing opportunities.
8. Leads / networks should establish regular opportunities for the learning and sharing of good practice and the reviewing, learning and sharing of current or any new laws, practices, policies and procedures.

CODE OF PRACTICE LEVEL 2 – RECORD-KEEPING

Introduction

1. This Code sets out the minimum standards and general principles that should apply to all forms, records and registers associated with the decisions about, and the conduct of, infant cremations.

Code of Practice

Sensitivity

3. Documents requiring the signature of next of kin should be worded in such a way as to minimise the risk of additional distress to them.

Security & Privacy

4. Records must be stored and secured in such a way as to ensure any legal right to privacy of the signatory / next of kin.

Accuracy

5. Information pertaining to policies and procedures must be regularly checked to ensure it is accurate and up-to-date.

6. Information pertaining to the policies and procedures of local partners, where applicable, must be regularly checked with them to ensure it is accurate and up-to-date.

Transparency and Accessibility

7. Options available to next of kin, including in relation to ashes recovery and return, must be clearly set out alongside the point in the document that requires their signature.

8. The decisions required and who they are required from should be clearly set out in documentation for next of kin.

9. A copy of any form or record signed by next of kin should be offered them at the time of signing, for their own personal records.

10. A copy of any form or record signed by another party on behalf of the next of kin should be available to next of kin, where possible and where the law allows.

Format

11. All records should be maintained electronically, wherever possible.

12. Forms and documents signed by next of kin should be kept in such a way that the entirety of the form's content and the signature are available.

Retention

13. The formal retention period for records and documents, and how to access them in the future, should be advised to next of kin.

Monitoring, Audit and Assurance

14. All organisations and institutions involved in infant cremations must allow and assist with regular inspection of their premises, personnel, policies, procedures and/or records etc by the individuals or bodies designated by statute for this purpose.

CODE OF PRACTICE LEVEL 2 - FUNERAL DIRECTORS

Introduction

1. This Code of Practice contains the professional standards that funeral directors must uphold in respect to arrangements for infant and child cremation. Funeral directors must act in line with the requirements of the Code, whether they are communicating directly with parents or allied organisations, to ensure consistency of approach.
2. The Code's series of statements aim to set out best practice that puts the needs of parents and families first. Following the Code will provide additional assurance to parents and families that they can place their trust and confidence in the hands of funeral directors.
3. This Code relates primarily to individual infant cremations, but includes where information relevant to shared cremations should be borne in mind. Funeral directors who have an arrangement (eg transportation) with an NHS Health Board regarding shared cremation or burial services should ensure they are adhering to that Health Board's designated required standards.

Code of Practice

Parents

8. Parents must be treated as individuals and the dignity of the deceased must be maintained. To achieve this, funeral directors must:

8.1 treat parents with sensitivity, kindness, respect and compassion.

8.2 ensure trained funeral service staff communicate sensitively with, meet with, listen to and follow the wishes of the parents, allowing time for decision-making based on a clear understanding of eg the choice between burial and cremation and other funeral options, without undue haste or pressure.

8.3 ensure the fundamentals of care of the deceased and the arrangements for the funeral are carried out in accordance with the needs of the parents (clients), within the parameters of the law.

8.4 avoid making any assumptions, check understanding and recognise diversity and individual choice.

8.5 respect the dignity and care of the deceased.

8.6 discuss options (where applicable) with parents for shared cremation.

8.7 organise and personalise the funeral to reflect the wishes of the parents within the parameters of the law.

8.8 offer parents the choice of a private family funeral or the option to open the funeral service to all.

8.9 respect a parent's right to privacy in all aspects of the care of their baby, infant or child.

Ashes

9. A family's decision on whether to cremate or bury can be affected by whether ashes can be retrieved and returned to them afterwards. For this reason, funeral directors must:

9.1 be aware, and advise the family if applicable, that the accepted definition of 'ashes' is now 'all that is left in the cremator at the end of the cremation process and following the removal of any metal' irrespective of their composition.

9.2 make clear to the family, if there is contact with them, that ashes from shared cremations are scattered together and therefore it is not possible to return ashes in this instance.

9.3 make clear to the family that whilst crematoria will make every effort to maximise the recovery and return of ashes from individual cremations, this cannot be absolutely guaranteed.

9.4 openly communicate all scenarios surrounding the retention and ultimate sensitive disposition of any retained ashes.

9.5 ensure the decision as to whether ashes are returned (if recovered) is made by the parents.

Allied Organisations

10. Funeral directors are recognised as the vital link between other allied organisations and with the parents, therefore it is vital that funeral directors are well-versed and familiar with their procedures following loss of a baby, infant or child. To achieve this, funeral directors must:

10.1 ensure local processes are in place to enable regular contact and discussion with all allied organisations i.e. crematoria, health trusts and boards, NHS and children's hospices.

10.2 regularly meet with partner crematoria to ensure staff are fully aware of any differing equipment or processes which could affect the possibility of recovery of ashes.

10.3 seek collaboration and communication to ensure clients receive transparent information in order to reach an informed decision eg inclusion of appropriate extracts from cremation authority published policy statements in public facing leaflets.

10.4 care should always be taken if organ retention or further testing is required and factored into the timing of the service.

Training and Administration

11. Funeral directors must:

11.1 have the knowledge of how the selected crematorium carries out pre and post 24 week gestation, stillbirth and infant cremations.

11.2 ensure staff are trained according to the requirements of the Code of Practice.

11.3 ensure a full copy of all signed documentation is given to parents.

11.4 ensure that parents (the client/applicant) review and sign the appropriate cremation documentation accordingly.

11.5 ensure accurate records are maintained and retained.

11.6 not dispose of ashes until 14 days have passed after instructions have been received, unless otherwise instructed.

CODE OF PRACTICE LEVEL 2 - CREMATORIA

Introduction

1. This guidance relates to the single cremation of infants and babies (i.e. not shared cremations). This guidance forms part of the overarching Code of Practice for infant cremation in Scotland.
2. All Cremation Authorities will ensure that they have published, and are compliant with, the agreed policy statement on infant cremation, issued to them by the National Committee on Infant Cremation.
3. The purpose of this guidance is to set down recommendations on approaches cremation authorities should use to maximise the recovery of any ashes in the cremation of an infant or child, where 'ashes' is defined as 'all that is left in the cremator at the end of the cremation process and following the removal of any metal.'

Practices for maximising the recovery of ashes:

4. All crematoria in Scotland should use baby trays, wherever practically possible, to maximise the recovery of ashes when cremating an infant or baby. Baby trays should be of robust construction to minimise buckling and scaling in the course of use, and should enable easy collection and removal of ashes. Cremation authorities must conduct a risk assessment on the use of baby trays, and ensure staff involved in the handling of baby trays have been appropriately trained and are aware of best practice.
5. In instances where a baby tray cannot be used eg a coffin is too large to fit into the tray, the technician must apply additional care and vigilance in order to maximise the recovery of any ash.
6. Baby trays should be used in conjunction with other methods for maximising the recovery of ashes, including:
 - 6.1 Manufacturer pre-programmed infant settings, or equivalent manual settings, must be used to restrict or eliminate the introduction of turbulent air into the primary chamber. There should also be minimal use of the primary chamber burner in order to create the best conditions possible for the recovery of ashes. Vigilance must be maintained, with manual adjustments of air and burner made when necessary in order to maximise the recovery of ash. Advice should be sought from manufacturers/suppliers on the use of settings, and the age/weight/size of babies and infants where such settings should no longer be used.
 - 6.2 Cremation of infants and babies at the end of the day, and cooling the tray containing ashes outside of the cremator overnight is acceptable, provided a risk assessment is conducted. Cremation authorities are advised to refer to their manufacturer for operational information before leaving ashes to cool within the cremator overnight, as in many instances the automatic introduction of turbulent cooling air during the close down process could result in fragile ash being lost.
 - 6.3 The coffin and baby tray should be placed just inside the cremator at the charge door end. Where possible the coffin and baby tray should be in view throughout cremation, so the process can be monitored.
 - 6.4 In order to maximise the recovery of ashes, any ash resulting from cremation of an infant or baby should be appropriately processed, but not using a standard, adult cremulator.
 - 6.5 Where the above approaches are adopted it is expected that the recovery of ashes will be maximised.
 - 6.6 Baby cremators are not considered necessary to maximise the recovery of ashes, provided the other approaches recommended above are followed. Cremation Authorities are however free to use baby cremators if they so wish.

Monitoring and Assurance

7. Cremation Authorities will be expected to follow the above practices for all infant and baby cremations.

8. In any rare instance of non-recovery of ashes, Cremation Authorities will have management plans in place that ensure a review of the cremation process is undertaken to understand why this was the case. The management plan will include notifying the Inspector of Crematoria within 48 hours of the situation occurring. The outcome of the review will be documented and will be available to next of kin and to the Inspector of Crematoria.

9. No crematoria can conduct infant cremations unless crematoria staff have been specifically trained and certificated by either the Institute of Cemetery and Crematorium Management (ICCM) or the Federation of Burial and Cremation Authorities (FBCA).

10. In addition, all crematoria must adhere to the requirements of SEPA permits, and all crematoria will be inspected by SEPA at regular intervals.

11. Professional guidance and training from professional membership bodies, including the Federation of Burial and Cremation Authorities (FBCA) and the Institute of Cemetery and Crematorium Management (ICCM) reflects the above guidance.

12. The Inspector of Crematoria will, in the course of inspections of crematoria, assess compliance against these above recommendations and requirements.

References

ICCM Crematorium Technicians Training Scheme information can be found at: <http://www.iccm-uk.com/iccm/index.php?pagename=training>

ICCM Policy and Guidance on the Sensitive Disposal of Fetal Remains can be found at: <http://www.iccm-uk.com/iccm/library/FetalRemainsPolicyNOV2014ReviewFINAL.pdf>

ICCM Baby & Infant Funerals Policy can be found at: <http://www.iccm-uk.com/iccm/library/BabyandInfantFuneralsNovember%202014.pdf>

FBCA “TEST” Training and Examination Scheme for Crematorium Technicians, revised July 2015 – Available to all current and future trainees registered under the FBCA training scheme.

FBCA “A Guide to Cremation and Crematoria” Instructions to Funeral Directors.

FBCA “A Guide to Cremation and Crematoria” Questions People Ask About Cremation.

CODE OF PRACTICE LEVEL 2 - NHS

These Guidelines form part of, and align with, the content and structure of the national Code of Practice documents developed and maintained by the National Committee on Infant Cremation: <http://www.gov.scot/Topics/Health/Policy/BurialsCremation/NCIC/CoP>

These Guidelines are applicable to:

- *all pregnancy losses < 24 weeks occurring in hospital, stillbirths and infant deaths (to circa 1 year of age).*
- *situations where the loss / death and the cremation occurs in Scotland*
- *all NHS Scotland staff and premises*
- *all cremation options arranged or supported by NHS Scotland (eg shared cremations individual cremation without funeral service; individual cremation with funeral service; advice and support on privately arranged funerals).*

These Guidelines are not applicable to:

- *the clinical measures and procedures involved in pregnancy losses, stillbirths and infant deaths.*
- *options other than a) cremation and b) pre-24 week gestation shared burial, although it is recommended any such other options are recognised in relevant documentation.*

1. Sensitivity

- The pregnancy loss / deceased infant, their family and their friends must be treated with respect, dignity and sensitivity at all times
- All documentation and discussions on cremation must be tailored to the different circumstances in which, in particular, a pregnancy loss may occur.
- Patients, parents and next of kin must be able to make fully-informed decisions on the cremation options available to them, although additional steps aligned with person-centred care may be required to minimise any additional distress this may cause, acknowledging that these will be difficult conversations.

2. Contracts

- Arrangements between NHS, funeral director and/or crematorium must be set out within a formal written agreement that should be made available to anyone on request. At a minimum, the agreement must include:
 - confirmation that all parties adhere to National Committee Code of Practice documentation (Levels 1 and 2) and CMO/CNO guidance
 - any / all applicable costs to all parties
 - timescales in relation to transportation and cremation
 - for shared cremations, maximum number of pregnancy losses per container and per cremation
 - Suggested good practice would be to have the following representation on groups which develop the written agreement:
 - NHS clinical lead for early pregnancy care
 - Contract/procurement representative
 - Mortuary representative
 - Funeral Director representative
 - Crematorium representative
 - Spiritual advisor /bereavement / SANDs/miscarriage association representative or similar

3. Cremation-related documentation for patients / parents

- All documentation must reflect the new 'ashes' definition of "all that is left in the cremator at the end of the cremation process and following the removal of any metal", irrespective of the composition of the ashes
- All documentation must make clear that the policy of cremation authorities is to maximise the recovery of ashes, whilst noting that in exceptional circumstances ashes may not be available and parents may therefore wish to make their own private burial arrangements
- All documentation should include any other appropriate extracts from the applicable Cremation Authority's policy statement, in order to support and maintain consistency of information available to patients / families.
- A copy of any such documentation must be offered / provided to the patient / parent to take away with them, particularly any signed documentation.

4. Record Keeping

- Whilst the official record of the cremation is the responsibility of the cremation authority, patient records in respect of shared cremation must be maintained in accordance with the CMO & CNO Guidance on the Disposal of Pregnancy Loss Up To and Including 23 Weeks and 6 Days Gestation, issued 17 April 2015.
- Records must be managed in accordance with the National Committee's Code of Practice Level 2 Guidelines on Record-Keeping.

5. Training, Monitoring and Continuing Professional Development

- Every Health Board must designate a lead officer to work with other Health Boards to support, promote and review the regular sharing, learning and implementation of best practice in the area of infant cremation and sensitive disposal of pregnancy loss
- Designated leads must report back to the National Committee on Infant Cremations, on request, regarding their Health Board's progress
- All staff must undertake relevant training to ensure their own knowledge and skills remain up-to-date.
- All Health Boards and staff must ensure they adhere to the National Committee's Code of Practice Level 2 Guidelines on Training and Communication.

CODE OF PRACTICE - DEFINITIONS

For the purposes of this document, the following definitions apply:

Signatory / Applicant

Application forms and other documentation must be signed by the person who has the legal right to do so. In most instances, this will be the nearest relative, although the law may recognise other persons, depending on the particular form or documentation.

Nearest relative

The 'nearest relative' is a legal definition, set out within Sections 46 and 47 of the Burial and Cremation (Scotland) Bill. This sets out a list of people who can be regarded as the nearest relative in different situations.

Next of kin

The Code recognises that, regardless of who may be the official signatory or nearest relative, decisions will often be the result of discussions between several or many relatives of the child (see 'child' definition below). The term 'next of kin' is used to generally refer to the relatives involved in these discussions.

Ashes

Lord Bonomy defined ashes as 'all that is left in the cremator at the end of the cremation process and following the removal of any metal'. This definition has been retained throughout the Code. To note that this differs substantively in wording, but not in its meaning or effect, from the legal definition set out in Section 36 of the Burial and Cremation (Scotland) Bill, as follows:

'(1) In this Act, "cremation" means the reduction to ashes of human remains by the burning of the remains and the application to the burnt human remains of grinding or other processes.

(2) In this section—

*"ashes" does not include metal,
"coffin" includes any type of receptacle,
"human remains" includes, where remains are clothed, in a coffin or with any other thing, the clothing, coffin or other thing.'*

Shared cremation

Shared cremations are only for the cremation of pre 24 week pregnancy losses, and must be conducted as set out within Section 50 to 55 of the Burial and Cremation (Scotland) Bill and in accordance with relevant Guidance from the Chief Medical Officer and Chief Nursing Officer for Scotland. Whilst the general standards and principles within these Code of Practice documents do encompass shared cremations, the restricted provision of this type of cremation means there are some sections of the Code where they are explicitly excluded.

Infant cremation

For reasons of clarity and brevity, the term 'infant cremation' is used at points within the document to encompass cremations relating to all of the below circumstances.

Child / infant

For reasons of brevity and of sensitivity, the term 'child' or 'infant' is used at points within the document to encompass all of the below circumstances.

Pregnancy loss

A pregnancy loss is delivered at less than 24 weeks' gestation, and has shown no signs of life on delivery.

Stillbirth

A still-born is delivered at 24 weeks' gestation or more, and has shown no signs of life on delivery.

Neo-natal death

A death which occurs after the birth and within the first 28 days of life.

Infant death

A death which occurs after 28 days and before the end of the first year of life.



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W W W . G O V . S C O T

Inspector of Crematoria Scotland

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Inspection of Crematoria

Name and Address of Crematorium: Mortonhall Crematorium Edinburgh	
Name of Cremation Authority: City of Edinburgh Council	Date of Inspection: Thursday 5 th May 2016
Undertaken by: Robert Swanson QPM HM Inspector of Crematoria Scotland	In the presence of: Natalie McKail Senior Manager Place Ewan McCormick Crematorium Change Manager

1. Operational Hours / Time Between services

Opening Hours:

Monday to Thursday: 0900hrs to 1645hrs

Friday: 0900hrs to 1545hrs

Saturday: 0900hrs to 1200hrs

Time between services:

1 hour (duration of service can be extended on request)

2. Staffing levels and structure

Staff certificated to carry out infant cremations:

4 members of staff qualified to carry out infant cremations with a further 2 scheduled to undergo training in July 2016

Training programme:

Staff have ready access to hard copy and computer held guidance and legislative documents, and receive in-house training on a regular basis. This is enhanced by training and guidance from the FBCA and ICCM. Being a Local Authority Cremation Authority staff are also subject to statutory requirements and risk assessments etc.

3. Office Management

Administration Procedure:

The administration procedure and process was examined from point of first intimation to disposal of the ashes, with checks carried out on paperwork and computer records. All were found to be of a good standard with much emphasis placed on ensuring the process minimised the risk of human error.

Computer System:

BACAS

4. Total Number of Cremations Carried Out

Breakdown by category	2014:	2015:
Adult:	2393	2107
Baby / Infant / Child:	3	10
Stillbirth:	7	5
Pregnancy Loss:	949	1618
Body Parts:	0	1
Anatomical Body Parts:	0	1

5. Cremation / Identity Card Process

The process and all related documentation examined from the point of arrival of the coffin, throughout all stages including cremulation, storage, dispersal of the ashes, subsequent updating of computer records and storage of documentation.

All were found to be a high standard with great attention to detail, and with a number of safeguards to minimise the risk of human error resulting in mislabelling ashes.

6. Recovery of Ashes

Instances where ashes were NOT recovered (2015)

Not applicable – all recovered

7. Ashes Policy (retain / scatter / inter / storage)

Details of Process:

There is no provision for ashes to be scattered at Mortonhall Crematorium. There is a separate garden for the interment of the ashes of babies. A check of the disposal instructions on documentation was found to accurately reflect the disposal outcome.

Ashes awaiting disposal are stored in a secure location with clear identification and instruction labels affixed. Ashes awaiting collection are stored separately from those to be interred.

8. Cremators

Number of cremators: Currently 2 operational (to be increased to 3 plus 1 for infants)

Make (s): Mathews

Size (s): 1 standard and 1 large

9. Sample of Cremation Register

Category: NVF (shared-total of 28)

Cremation number: 6403

Result: All documentation and records examined and found to be in order. The cremation was carried out on 19th April 2016 with the ashes interred by staff in the designated Garden of Remembrance the following day.

Category: NVF(Individual)

Cremation number: 6431

Result: All documentation and records examined and found to be in order. The cremation was carried out on 20th April 2016 with the ashes interred in the designated Garden of Remembrance on 22nd April 2016.

Category: Adult

Cremation number: 109060

Result: All documentation and records examined and found to be in order. The cremation was carried on 1st February 2016 with the ashes collected by the funeral director on 17th February 2016.

Category: Adult

Cremation number: 109226

Result: All documentation and records, including the PF Form E1, examined and found to be in order. The cremation was carried out on 9th March 2016 with the ashes collected by the funeral director on 14th March 2016.

Category: Adult

Cremation number: 109440

Result: All documentation and records examined and found to be in order. The cremation was carried out on 2nd May 2016 with the ashes collected by the funeral director on 3rd May 2016.

10. Use of Baby Tray

Number / Source: 1 supplied by Teleshore

When introduced: Latest Tray new (purchased 2016)

11. Pregnancy Loss Policy / Procedure

NHS / Shared:

Arrangement (no contract) with NHS Lothian (Royal Infirmary of Edinburgh) for weekly cremation every Tuesday with delivery to the Crematorium by funeral director. There is no maximum on the number of NVFs in each coffin. The cremation is usually carried out at the end of that day with the ashes thereafter interred by staff in the designated Garden of Remembrance.

There is no provision for attendance by family members.

Other shared cremation can be carried out in special circumstances on application.

Individual: The policy and procedure for individual pregnancy loss cremation does not differ from that of an infant.

12. Metal Extraction

Policy: Large metal parts are extracted before ashes are placed in the cremulator, small parts are extracted by magnet before / after cremulation.

Mortonhall currently does not have a metal extraction re-cycle programme, although this is being considered. Metal extracts are interred within the Garden of Remembrance unless otherwise instructed by the applicant.

13. Code of Practice, Cremation Practice Guidance and Policy Statement

A check of the Cremation Authority website confirmed that the Policy Statement on Infant Cremations is publically available. The inspection confirmed that the Crematorium's procedures are fully in accordance with it.

Staff are fully aware of the most up-to-date Code of Practice and Cremation Practice Guidelines with easy access provided by way of hard copy held within the Crematorium and computer access to the website of the Cremation Authority and other relevant organisations.

14. General Observations

Buildings: Extensive refurbishment soon to commence with closure for estimated 6 months.

Car park: Car park space considered to be adequate with no problems encountered. No plans to extend.

Grounds / Gardens of Remembrance: The Crematorium grounds provides a variety of options for interment with additional facilities available in the adjoining Cemetery grounds. These and associated costs are publically available on the Cremation Authority website.

Access for the disabled: As part of the planned refurbishment a dedicated toilet for the disabled and infirm is to be built within the administration block. All other areas seen during the inspection had unrestricted access for the disabled and infirm.

Security: Good quality CCTV is installed covering key areas, with security and fire alarms throughout. The main gates are locked at night. The premises and grounds are monitored by the Council Security Team.

Health and Safety: All staff have a good awareness of Health and safety with risk assessments undertaken of specific duties. This is further enhanced by guidance and training provided by the Cremation Authority. One member of staff is qualified in first aid.

15. Issues highlighted by staff

No major issues highlighted, management have indicated that staff have adapted well to recent changes regarding Certification of Death (Scotland) Act 2011, and the findings of Lord Bonomy. Like a number of other Crematoria staff have intimated they consider there to be room for improvement in the content of the Application Form, and would welcome greater consultation during planning of the revised form currently being considered. It was also raised that there is considered scope to improve partner working and a centralised dissemination system.

These points will be addressed by the Inspector.

16. Overall Assessment

This inspection has addressed the current position within Mortonhall Crematorium, taking cognisance of what was been recorded in the past.

Staff have undergone a number of changes at managerial level in recent times, but hopefully by the time the Crematorium re-opens after the major refurbishment, these positions will be cemented and will allow for a greater period of stability.

As regards the findings of the Inspection, staff will need to address the requirement for a formal contract to be implemented with NHS Lothian, as per the Code of Practice, and will give consideration to offering, via NHS, family members the opportunity to be present during the cremation of shared NVFs if they so wish.

Overall, staff having taken on board all the shortcomings which have been highlighted in recent reports can now move forward from what clearly has been a very difficult period for them.

Signed: Robert Swanson QPM

Date: Friday 13th May 2016