

Wednesday, 29 April 2020

Frequently asked questions on Verification of Life Extinct (VLE) by nurses working in community settings



**Q1: How can I achieve competence in VLE?**

- Training is available from HSC Clinical Education Centre via video conferencing and e-learning – see [www.cce.hscni.net](http://www.cce.hscni.net)
- Nurses can deem themselves competent by using a self-assessment framework.
- Direct supervision from an experienced nurse. Nurses can set up buddy systems whereby they can be called to undertake VLE under supervision should the need arise.
- Indirect supervision by way of peer review by telephone discussion / video call with a nurse from another home after having completed the VLE process.
- Simulated practice using a mannequin with remote supervision and assessment.
- Colleagues working in Marie Curie, Hospice at Home or NIAS can be asked to provide peer support.

**Q2: Do I need to get permission from the GP before I undertake VLE?**

- You do not need to get permission to undertake VLE.
- It is important that nurses work in partnership with GP colleagues and that the GP practices that are linked to your nursing or residential care home or your community setting are aware that you have received training in VLE.
- The person's GP should be informed that a nurse has Verified Life Extinct.

**Q3: What information does the GP need when I make a call to confirm VLE?**

- It will be important that the nurse is able to articulate the circumstances leading up to the person's death as this information will enable the GP to make a decision regarding the cause of death. The GP will either issue a medical certificate of cause of death (MCCD) or refer the case to the Coroner.
- The use of SBAR, which is a well-recognised set of prompts that promote assertive and effective communication by framing information around the **S**ituation, **B**ackground, **A**ssessment and **R**ecommendation, may assist documentation.
  - Situation: what are the circumstances of the environment; was there Covid-19 within the home, relevant factors such as a recent fall or drug error, are there any suspicious circumstances, was the death expected etc.
  - Background: the individual story of the person; their age, medical condition, circumstances of deterioration and death.
  - Assessment: summary of the care and treatment provided to the person in the time immediately prior to death.
  - Recommendation: that the person is deceased and that you have completed VLE or that you believe the person is deceased and you are requesting a medical practitioner to undertake VLE.

[www.publichealth.hscni.net](http://www.publichealth.hscni.net)

The Chief Nursing Officer and Chief Medical Officer recently requested assistance with expanding the role of verification of life extinct by nurses. In support of this, the PHA have produced a series of 'Frequently asked questions' and a draft 'Verification of Life Extinct (VLE) in a Nursing or Residential Care Home Policy' to enable care home providers to produce their own policy.

## Details

Format

A4,8pp and A4, 3pp, PDF only

Target group

Health professionals

## Downloads

**Attachment**

**Size**

[Verification of Life Extinct in a Care Home Policy Final 29April2020.docx](#) 91.88 KB  
[Verification of Life Extinct \(VLE\).pdf](#) 331.63 KB

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