

Fuller Inquiry London Seminar

Event: Fuller Inquiry, London Seminar Recording

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Attendees: Sir Jonathan Michael, Chair of the Independent Inquiry
Jane Campbell, Deputy Secretary to the Inquiry
Rebecca Chaloner, Secretary to the Inquiry
Tim Suter, Facilitator
Kathryn Whitehill, Head of Investigations
Saul Hunnaball, Hunnaball Family Funeral Group LTD
Andrew Leverton, Leverton & Sons LTD
Clare Montagu, Poppy's Funerals
Lee Pedley, Neville Funeral Service
Nathan Van Der Pant, Penrose Funerals
Wendy Jackson, Jacksons Hub LTD
Jeremy Field, CPJ Field
Maria Davies, H Porter & Sons
Richard Van Nes, Funeral Partners LTD
David McLaren, Pure Cremation
Maria Stibbards, S Stibbards & Sons
Jo Parker, Abbey Funeral Services LTD

SIR JONATHAN MICHAEL: First of all, thank you very much for taking the time to come and join us. It's really helpful and I am very grateful for you taking the time to do that.

As you know, the Inquiry was set up because of the despicable crimes that Fuller committed in the mortuaries in Maidstone and Tunbridge Wells NHS Trust. As Chairman of the Inquiry my role is, basically, I was given two roles. The first one, Phase One, was to focus on Maidstone and Tunbridge Wells to understand exactly what happened there to make sure that we understood how he was able to carry out his crimes undetected for effectively 15 years or so and make recommendations to the government and indeed to the Trust in terms of what they could and should be doing to make sure that it could not happen again.

The Phase One report, as you probably know, was published relatively recently, 28 November, and we have now started the work of Phase Two. Phase Two is to look at the wider aspects of the issues that came out of Phase One, fundamentally looking at whether or not the issues that we came across, procedures, practices, in other settings were actually sufficient to safeguard the dignity of the deceased, the security and dignity and to look at the regulatory environment and so on and so forth within which you all work in. And again, to make recommendations to the government and the regulators in relation to that.

So, we have decided to break that up into different modules, looking at the different sectors where the deceased may be cared for and clearly the funeral director sector is part. We decided to start with that and that is why we are very grateful for your engagement first of all in responding to the questionnaires and then coming today.

We sent out a lot of questionnaires, 4,500 questionnaires, to funeral directors who we identified and we have been very much helped by the information that has come back. What we want to do is to start drilling down a little bit on some of the issues that people have raised in their responses.

One of the things that has become very clear to me is in fact the diversity of the sector from the large, I was going to say multinational effectively, but the large companies to smaller family-based companies and the viability of that and the issue around the pros and cons of tighter regulation and so and so forth, and the impact of that is something clearly we want to understand.

What we would like to do is just to make sure, and I'll ask Tim to go through it in a bit more detail, that we understand the variety of procedures and policies and structures that are in place in different-sized organisations and so on and so forth.

Also getting from you -- necessarily these are anecdotes but anecdotes where things may be working better in some areas than in other areas. And so the anecdotal information is also useful.

So I think at that stage I'm going to hand over to Tim just to talk through how we're going to run the discussion today. I want it to be a relatively free-flowing discussion. I want your opinions and your thoughts and if there are areas we want to dig down into my colleagues and I will be probing you a little bit more.

So Tim, over to you.

TIM SUTER:

Hi all. Thank you, Sir Jonathan. So I am the solicitor to the Inquiry and first of all, I just want to repeat the thanks from the Chair for all of you coming to attend this session. We know you are all busy and that

you all do difficult and sensitive jobs. We are very grateful to you for setting time aside to join this session.

I just want to deal first of all with some housekeeping so everyone knows what the microphones are and how to engage with us.

So first of all, there are quite a few of us here round the table.

Everyone is going to be given an opportunity to share their views but we must do that in an organised way. This will ensure we can cover both a wide range of topics and do so in a relatively short space of time. The aim is to elicit the best evidence we can from all of you.

Next, as Sir Jonathan has said, I will facilitate the session which means I will endeavour to ask each of you questions as we move through the topic areas. I have written down here I will do so referring to you by name but actually, my eyes aren't that good. So I think I will ask each of you to introduce yourselves as we go through. Please make sure that you don't interrupt anyone else when they are speaking. If you would like to reply to the answer given by someone else please just raise your hand and I will come to you, provided we have got enough time to cover that topic. But we will try to keep things moving relatively quickly.

The session is being recorded, you can see the camera at the back and on the side, so please only speak when a question is directed to you. When you are asked to speak please say each time who you are and which organisation you work for.

Now I know this might seem a bit unnatural but the reason for it is we will produce a transcript and it will help the transcriber enormously to know each time who you are. It will make their job that much easier.

If you are speaking too fast or too quietly I will remind you that you are being recorded and to speak as clearly as possible and again that will help the stenographer.

So please address your answers to the Chair. He is obviously sitting next to me. Sometimes the Chair may also ask questions as will other members of the Inquiry team.

Next, it is not a court, I think that is pretty self-evident, but nonetheless, we do expect everyone to give answers that are full and accurate. The Inquiry is a full and fearless search for the truth and it is the only way we can ensure that the Inquiry does its job as best it can, informed by you who are key stakeholders.

Tone: It is important that we keep this seminar focused and professional. If things are veering off course I will intervene and I will bring us back on topic. We will be discussing clearly delicate topics. You are all experts in this. I know you are professionals and you are used to dealing with the bereaved and sensitive issues. Please approach this seminar in the same way, respectfully and tactfully.

Language and terminology: These are clearly important. If we touch on topics that require details about what happens to a person after death, the steps involved in death management, that is perfectly fine. We want you to be candid. But you can flag if anything you would like to say will involve graphic or sensitive information.

Confidentiality: It is important what we discuss in this room remains confidential between the attendees. We do not want you to post anything on social media, publish articles or discuss this session with others. This is because our work is ongoing. We still have a lot of people to speak to and we want to hear views that are not influenced by others.

Finally, report: In due course, as you will have seen, the Inquiry will publish a report much like Phase One and until then need space to work. The Inquiry may wish to use information that is discussed today in its report.

I say that so it's clear to everyone that is the core purpose of this seminar to assist the Chair's investigation and evidence gathering. So I think you will all have in front of you an agenda. Three core sessions. The first one is: What happens now? That will last for approximately an hour.

Second session: Who is checking up? That will be approximately 30 minutes with a 15 minute break. And the final session is: Does anything need to change? Which again will be approximately an hour with some concluding remarks from the Chair.

Now before we start the first session I am just going to set out some context and some background. I should say you might not all agree with everything I say. That's fine. It's to help just start you thinking and to just inform your views and how you want to engage with us. So please do not jump in as I am reading this out. But please do, it's fine to challenge and it's fine to correct anything that I say that you perhaps don't agree with.

So the reason we are here today is because of the awful crimes of David Fuller. How they can be learned from so they do not happen again in any setting where there are deceased. We are sure that is the view everyone here shares. So the central question for today is how that is best achieved in the funeral sector.

There are other stories that appear in the media from time to time about problems that occur with funerals or other places where deceased are cared for. The Chair has already touched on some of

those and others relate to bodies being stored incorrectly at a funeral home, so they decompose; personal belongings not being disposed of in accordance with the wishes of the deceased; litter being left in a coffin; spitting on the deceased because they happen to support a different football team; making inappropriate comments about them and Class A drugs being stored at a funeral home.

Now I recognise that these are the bad apples and that the vast majority of those who work in the funeral sector do so as they wish to follow a vocation caring for the deceased and bereaved. It is undoubtedly a difficult and demanding role.

According to a 2018 report into the funeral industry by the Competition and Markets Authority, there were 616,000 deaths registered in the UK in 2018. According to the 2020/21 report of the All-Parliamentary Group of Funerals and Bereavement that figure rose during the pandemic to nearly 700,000.

There are estimated to be 7,000 funeral homes in the UK and they employ about 20,000 people.

In 2020 the average cost of a funeral was estimated to be about £4,300 and funeral industry was worth about £2 billion.

Over the past two decades through customer behaviour, changes to GP practices and the impact of government legislation it is estimated that the average time between death and a funeral has increased from under 10 days to over 3 weeks.

The funeral industry is not only a large one that plays a vital, often unseen role but it is a complex one. As you will know since the end of July 2022, the Financial Conduct Authority has started to regulate pre-paid funeral plans. Yet otherwise there is no statutory regulation

of the provision of funeral services in England, Wales or Northern Ireland.

The position is slightly different in Scotland where the Scottish government is currently consulting on a draft code of practice for funeral directors.

A report in 2019 by Dignity set out details of some of its research including that 95 per cent of customers said that the care of the deceased was a top priority. 92 per cent of customers expected funeral directors to have some form of regulation and oversight. In contrast, it found 30 per cent of those arranging a funeral assumed rather than knew where their loved ones were being kept prior to their funeral.

Trade associations. We know there are two main bodies, The National Association of Funeral Directors, NAFD and The National Society of Allied and Independent Funeral Directors, SAIF. Both have a system of quality assurance assessments of members which ensure they meet ISO9001 2015 standards. Both have published codes of practice but neither code is mandatory.

The CMA 2018 report estimated that 25 per cent of funeral directors are not members of a trade association and therefore are not subject to any type of inspection. It will help the Inquiry to understand more about that 25 per cent.

Training for aspiring and current funeral directors is offered by a range of organisations. For example, the NAFD offers a Diploma in Funeral Directing; The British Institute of Funeral Directors provide a Diploma in Funeral Course and the Independent Funeral Director College offers a Diploma Level Four in Funeral Directing.

There is also guidance issued for aspects of the work undertaken by funeral directors such as The Health and Safety Executive on the management of infection risks when handling the deceased and the control of substances hazardous to health regulations.

With that background, which we can obviously return to as we develop this discussion, it would be helpful to bring in all of you, our participants today.

So we have, I did note that we had 13 but I think there is actually now 12 of us, 12 participants here and I believe everyone is either a funeral director or runs a private mortuary. Many of you provide other services for care of the deceased.

One organisation is not a member of a professional association, three belong to SAIF, three belong to NAFD and I believe four belong to both NAFD, SAIF or IFSO. And two others belong to different professional memberships relating to embalming or cremation.

You are all a range of small family-run firms, multi-site funeral homes and those that are part of a large company. So welcome to all of you. To start things off it would be very helpful if we can go from top left and each of you can just tell us your name, role and the organisation that you work for. So three things.

JO PARKER: Good morning. I am Jo Parker and I am the managing director of Abbey Funeral Services in Tonbridge, Kent.

MARIA STIBBARDS: I'm Maria Stibbards. I am a qualified funeral director, qualified embalmer, a member of the Institute of Embalmers and I work for S Stibbards & Sons as their Training and After Care Services manager. Skilled in just about every embalming there is.

DAVID MCLAREN: I'm David McLaren. I'm head of operations for Pure Cremation. We are the largest provider of direct cremations and services in the UK.

RICHARD VAN NES: Richard Van Nes, director of Central Operations for Funeral Partners, the UK's third largest funeral business.

MARIA DAVIES: Maria Davies, manager for H Porter & Sons.

JEREMY FIELD: Jeremy Field, I'm the managing director of CPJ Field, funeral directors in the southeast.

WENDY JACKSON: Wendy Jackson, Jackson's Hub. I own a private mortuary and I'm a qualified embalmer.

NATHAN VAN DER PANT: Nathan Van der Pant, founder and director of Penrose Funerals, a small family-run funeral director, Southend.

LEE PEDLEY: Lee Pedley, general manager of Neville Funeral Services in Luton and Bedford.

CLARE MONTAGU: I'm Clare Montagu. I'm CEO of Poppy's which is an independent modern funeral director based here in London.

ANDREW LEVERTON: Andrew Leverton. I'm a director of Leverton & Sons, a family run funeral director in north London.

SAUL HUNNABALL: Saul Hunnaball, Hunnaball Family Funeral Group, operations director.

TIM SUTER: Thank you. Right, first topic is Maintaining Dignity. And what we would like to understand is how is the dignity of the deceased maintained when they are in your care. So it would be very helpful to understand different ways that you will ensure that the deceased are at all times kept in a dignified, respectful manner.

Do you do that with the use of shrouds? Do you use dignity cloths? Headblocks? Are there other measures and equipment? How about body bags?

And I can see at the end you pulled a face. That is a healthy start. So if you could just explain why body bags and what is an issue with body bags? Can you just say your name?

JO PARKER: Jo Parker, Abbey Funeral Services. We're a small family business. We have a single branch. We do about 250 to 300 funerals a year. Our main aim is to look after the bereaved as well as the deceased. But when a family comes to you and asks you to take care of their loved one they want you to take their loved one into your care as soon as possible.

So not to be left at a hospital mortuary for longer than is necessary but to be brought back into your care. Then we bring our loved ones back, they are washed, they are dressed if they are not already dressed. We have a refrigerated -- a cold room and refrigerated fridges.

We wash the hair, cut and brushed and moisturise and we do regular checks to ensure that the deceased is maintained well before the funeral.

You commented about funerals being up to three weeks. That's a really difficult job for us where there is the care of the deceased because not every family wants the deceased to be embalmed. And for us to maintain that dignity it would be easier for us all if we were able to do funerals faster.

Certainly, when I started 30 years ago it was 10 days and you could do a burial the next day if you had the form from the Registrar and the grave digger. And it's very elongated now.

TIM SUTER: Thank you. Does anyone else want to come in on any of those? Just how do you work to maintain the dignity? Yes? If you can say your name.

JEREMY FIELD: Thank you, yes. Jeremy Field. Well, what I wanted to actually say was I think maintaining the dignity of deceased people in our care starts from trying to restore the dignity of people coming into our care, particularly coming out of institutional settings.

Yes, a lot of those measures can be used and are then in place, headblocks. We use sheets for dignity purposes just to answer your question a little bit more specifically. But part of the challenge is about trying to address some of the things that have come to pass whilst before they are in our care.

So some of the things that we can do are embalming, which as said by Jo a minute ago, not mandatory or compulsory but it's helpful in a longer term for maintaining the dignity of deceased people, but only ever with consent.

But treatment of the individual. So if somebody has had an aggressive cancer or cancer treatment, that will impact upon the state

that they are returned to us. But just also the position on last offices in leaving the NHS in particular or the situation of public mortuaries where Coroners can make -- and the work of APTs and particularly once they've completed their work can make a big difference about what we're able to do to maintain the dignity.

TIM SUTER: Explain that to us a little bit more.

JEREMY FIELD: So in terms of aggressive cancer treatments, that can lead to water collection in the body which can then result in conditions like, I think I'm supposed to give you some kind of trigger warning, so I'm not sure where we are here yet.

But around skin slip and other detriments which are, my embalming colleagues will talk with a great deal more knowledge about them than I do.

But in terms of the work of, like, postmortem, it's about reclosing incisions, about how organs are returned to the body and those sorts of things. But also simpler things around in terms of release from the NHS, it can be somebody who is still intubated following treatment.

That is what I mean by the last offices, so in terms of removing items, syringe drivers, those sorts of things can still be in place.

TIM SUTER: Is cost a relevant issue in maintaining the dignity of the of the deceased? No? Would you like to ...?

CLARE MONTAGU: I'm Clare Montagu. I'm CEO of Poppy's Funerals. No, is the short answer to that for us.

We actually take a slightly different view from Jo, I think, about embalming. We will embalm if someone asks us to but we generally have a position that we don't think it is necessary to embalm. We think it is invasive and it's pretty toxic and it's actually, in most cases, not necessary - obviously required for repatriation.

So our approach is actually quite gentle, it's very natural. When we look after someone we do worry about the conditions that people are in sometimes when they have left hospital. So we do receive people who still have catheters and lines in and we would remove those.

And we would wash them and wrap them gently in calico leaving their face exposed. We would never use body bags unless we have to for infection purposes.

People are stored on trays in a fridge and there is good air circulation between them. The fridges are at the back of a room that is actually a very pleasant room to be in. It's light, it's airy, it's wood-panelled. It's a room that we'll all frequently use for other purposes as well as death care itself.

TIM SUTER: Why calico? And why not body bags? It might be obvious to --

CLARE MONTAGU: Calico is a very natural material and so as much as possible, partly because of our position on the environment, we seek not to use plastics or any sort of material that is detrimental to the environment. We try not to use body bags because the doming effect that body bags create can add to condensation and can risk accelerating decomposition if someone is not in great shape already.

So we take the view that we want to leave people with air circulation within the fridge and we look after them as they come in to us. So washed, dressed but wrapped gently.

TIM SUTER: Thank you. Yes?

JO PARKER: Jo Parker, Abbey Funeral Services. Just to clarify, we don't embalm as a matter of course if that's the impression I gave. It is a choice for the family, an option.

TIM SUTER: Okay. Yes? If you can say your name.

MARIA STIBBARDS: Maria Stibbards, S Stibbards & Sons Ltd. I won't list all of my qualifications.

A lot of people have touched on some of the points that we do. I also won't repeat those, but also, we train our staff. We make sure that where possible they have qualifications. We've got minimum standards of care first of all.

We also have a talk about the dignity of the deceased and actually keeping them covered, keeping them protected. Obviously, we are all designed to go back to our basic elements, that process of decomposition. As funeral directors, in order to maintain both the dignity of the deceased but also the integrity of the deceased, to stop that deterioration, there are probably one or two methods we can use. One will be the refrigeration which is necessary for the care of everybody until we're waiting for the legal documentation to fall into place which can be a very long time at the moment.

Then also once that's fallen into place others choose to recommend services for embalming, but ultimately that is the family's choice.

Refrigeration units can cause dehydration to the deceased. The body bag issue that was raised earlier by my colleague, that is very true, although if you're trapping condensation against somebody, it can actually damage the integrity of the outside barrier.

We've all got our skin which protects us and it can actually damage that protective barrier. So cottons, calico is quite often used. We have headblocks which raises their head up and bring their hands up, covers.

We also have locked premises which --

TIM SUTER: We will come back to those points about security.

MARIA STIBBARDS: And regular checks, that what you have said.

TIM SUTER: That's really helpful.

SIR JONATHAN MICHAEL: Can I just get the impression right? Just picking up the concern with -- a couple of you mentioned concern about the states that the bodies come from institutions, largely NHS hospitals, so I gather. Is that a general concern? Or is that unusual? Get a sort of feeling, I mean, almost raising your hands would be a quick way of getting a point of how much, how many of you feel that it's a -- so that's actually all of you.

So that's very helpful, thank you.

LEE PEDLEY: Lee Pedley, Neville Funerals. Whilst I appreciate everybody's viewpoint on what we said about the dignity of the deceased, we've talked a lot about the deterioration but I think stripping it back down to the fundamental core at the very beginning, I think it comes down to the basics so I can only speak for ourselves.

When someone comes back into our care every deceased person is laid in an individual tray in their own space.

TIM SUTER: And just pausing there, is that the same for everyone? Everyone uses an individual tray?

SEVERAL SPEAKERS: Yeah.

DAVID MCLAREN: Slightly different.

TIM SUTER: Okay, we will come back to you.

LEE PEDLEY: Fully covered to preserve their modesty, covering up their genitalia. All those very basic things. But for me the dignity is also afforded with the environment and no music. The actual team members, the language that is used by our culture within our -- my team. I think that's a lot in terms of the actual dignity.

The natural deterioration process is part of that. I wouldn't necessarily say that comes down to a dignity issue because that is part of that natural process.

For me, it's about the core fundamental first steps. So all of our deceased have headblocks. All the first initial steps when they come

back, hearing what Jeremy said about people leaving lines and so on, are removed. And all those very basic things.

So I think for me, whilst I appreciate the actual -- the deterioration, I think it's just about the actual environment and the initial first steps, personally.

TIM SUTER: Okay, thank you.

REBECCA CHALONER: I'm just really interested when you said there about the language used in your team and creating that culture. Do you train specifically for that?

LEE PEDLEY: I think there's a certain level of people that come into the profession and it is something which people -- it's a passion of many people. And I think I speak for the majority of people that you don't come into it lightly. All of our team, the culture of which -- and it starts from us as management and also the terminology which we use and the induction process of what we expect of our teams is quite high for us. And I think that paves the way for them in their journey of their kind of career.

CLARE MONTAGU: Can I just come in on this?

TIM SUTER: Can you just introduce yourself?

CLARE MONTAGU: Sorry, I'm going to keep doing this. Clare Montagu. I'm from Poppy's.

I just wanted to come in on that point on language because we do train our team and we train them really explicitly and we have words that we use and words that we don't use and that's an integral part of our induction regime.

And words, that we do not use the term 'the deceased'. We call people 'John'. They were John in life, they were John in death or Sue or whatever. They're your mum, your sister.

We don't talk about removals. We talk about collections. We are very clear the terminology that is used on some of the official legal stuff, like the term 'disposal' we think is abhorrent. It's a word that you use for clinical waste, it is not a word for how you -- whether or not someone is buried or cremated.

And so we have a very long list of, "These are the words that we use and this is how we talk about the things that we care deeply about. And this is how we talk to our families about it". And we make that something that I model as CEO and that Poppy, as the founder, models, all the way through the business.

And that's a really integral way of how we care for people because it connects us with humans that we are looking after, not waste or things.

TIM SUTER: Is that something you all recognise?

JEREMY FIELD: Yes.

TIM SUTER: Yes?

JEREMY FIELD: Jeremy Field. Absolutely on humanising language, totally and utterly agree. It's hard for you guys, I get that, but just to pick up, particularly on the use of the expression 'the deceased'. I agree.

Equally, the bereaved are not an amorphous mob of zombie-like creatures that make their way through life. They are bereaved people and I think the more we can reflect the humanising language the better.

Just to pick up on what was said a moment ago is we probably kind of jumped into where we are in the mortuary without necessarily going through that process of arriving at a mortuary.

So there are reasons why people coming from domestic environments might not be -- they may have soiled themselves, may be required -- so everybody --

I'm sure again, the conversations I've had with others, that this is a common experience is the first step on arriving in a mortuary is to wash and clean the person, take away the clothes and identify what needs cleaning, keep that and take permission specifically about what's supposed to happen to that from there. But I think it's really important that that opening process we call 'first offices' is a really, really important part at the beginning.

I kind of felt we just sort of jumped into the mortuary and talking about embalming rather than the moment someone has --

TIM SUTER: So last offices at the hospital or where the person has died, you receive the person and you do first offices.

JEREMY FIELD: Yeah.

TIM SUTER: Does everyone have a protocol or guidance for first offices?

WENDY JACKSON: Wendy Jackson from Jacksons Hub. We are slightly different in as much as we don't do funerals. We work predominantly with the Coroner's Office. We've got 19 different Coroner's contracts so my guys are out 24/7. So it is slightly different. They see the most horrific scenes.

But if they don't know the identity of someone they call them 'sir' or 'madam'. They are the most respectful. I mean when you see these guys when they're out on playtime you think, "Oh, my goodness". But the minute they put the uniform on, the minute they have taken to a scene, a residence or whatever, they are absolutely amazing. And they will stand and they bow and they take time and they don't use any foul language.

I'm so proud of every single one of them. They are brilliant what they do.

TIM SUTER: So just picking up on those two. The theme that we have here is dignity is the physical dignity of the person who has died and it is the environment and the culture in which -- yes. I can see that I've already piqued some interest. I am going to come back to you. But the gentleman here, you indicated that in terms of the physical dignity, you just said that Pure Cremation has a slightly different way. So please explain that to us.

DAVID MCLAREN: Yes. David McLaren, Pure Cremation. So our model is different in the fact that we act as funeral directors and crematoria as well. So as a result of that, we handle our deceased in a different way.

So very much with regards to everybody is first named from when we collect, so we're talking to them at the location we collect them from to when we bring them into our care. We refer to them by their first name constantly.

The difference with us is that once we've done all our preliminary checks whether it be pacemaker removal, identification, jewellery and personal effect removal, we actually encoffin. So we actually do use body bags and then the deceased are then confined straightaway. Those coffins are then stored in a larger, temperature-controlled cold room and the idea is from that point you do not need to interfere with the deceased again until the day of cremation when they're removed from our mortuary and cremated.

So it's different. The families as well are very much aware of this process. So we actually tell them that we don't embalm. We actually tell them that we have very limited control and very little interaction of that, ensuring that we're bringing them to our care and in the best possible way encoffin and then cremate.

TIM SUTER: So it's quite a different approach from perhaps the approach we've heard from Poppy's. And consumers, if that's the right way of putting it, will have a different view as to what is the most appropriate for them.

DAVID MCLAREN: Yes.

TIM SUTER: I can see we have got various hands up. We are going to go to the lady at the end, if you just introduce yourself.

JO PARKER: Jo Parker from Abbey Funeral Services. I was just going to say that regarding the environment. When we go to somebody's home to collect their loved one and bring them back into our care it's even down to sort of making the bed so that there isn't indentations left for the family.

So the care and the dignity sort of seeps over into the family as well, so that they have a better journey from the start as well.

TIM SUTER: Okay, that is very helpful. This gentleman. Can you introduce yourself?

NATHAN VAN DER PANT: Nathan from Penrose. Going to the name thing, which I think we all agree is a good thing to do. We did find a while ago that speaking to the family people often have a nickname given. Now we try and ask that automatically. It's rare that people don't use their first names when it does happen, and it's always nice, I find, to use a nickname.

We also have a policy which has been in place for a while where first offices can be only at the discretion of the family. Again it's rare that you will get those occasions where they will say to you, "Please don't touch them in any way". Then you do respect that as far as you can. But of course, I agree with all the care procedures that have been mentioned. You should of course do that. It's just that that's always an interesting point when it comes up.

CLARE MONTAGU: I'm Clare from Poppy's. I think I just want to speak to the point about culture because I was very struck by that in the context of your Phase One report.

I think one of the things that is most important is that the mortuary in any funeral or private setting remains at the heart of what you do. And I think for as long as -- if you get yourself into a situation where the mortuary is not visited by senior management or where it is somewhat ignored or that you have people in shops over here and people in mortuaries over there and never the twain meet, then you get into real potential problems about what happens to the mortuary care.

And what is very, very important to us is that the mortuary is the most important space in our business. And that I will, as CEO, will regularly work in the mortuary. I was helping out at Simply Only Care a couple of weeks ago and that we take people through the mortuary and that it is seen from the top as the place that is the most important part of what we do.

Because if it becomes a space over there that is behind the bins, behind the dustbins and tucked away in the basement and senior management do not go, then we have all sorts of potential issues. And it doesn't have to be as serious as some of the abuses of the horrific crimes of David Fuller. It's just poor care and deterioration happens where there is no transparency and no culture of really valuing the mortuary.

TIM SUTER: Thank you. I would like to come back to that point when we talk about security of the deceased, in a moment. Yes?

RICHARD VAN NES: Richard Van Nes, Funeral Partners. So we operate in all four countries of the UK. When the Scottish rules were introduced we adopted a lot of the Scottish standards throughout our business

because it's more difficult to have different operating procedures. So we've taken the most strict and stringent processes and applied them across the board.

So we have daily checks on the deceased which are documented, internal audits on a monthly basis and an annual basis to make sure that the standard of care of the deceased is maintained at all times.

TIM SUTER: That is very helpful. And who checks those?

RICHARD VAN NES: So monthly is done by a local manager or an area manager. Then we have an annual audit which is carried out. That would look at the last 12 months mortuary register to ensure that every deceased is properly recorded in and out with personal effects etc.

We have very strict policies and procedures and all of our staff receive a tremendous amount of training. We have multiple training courses on every aspect of the service.

TIM SUTER: We are going to come back to that topic as well because that would bring us to security and to training and various other issues.

I can see there's a few hands up. I want to move to some different topics but if we can just --

ANDREW LEVERTON: Andrew Leverton from Leverton & Sons. Sorry, yeah. Before we moved on I just wanted to say that in regard to collection of the deceased from hospitals and mortuaries, we tend to often find the condition of the body -- so they will always come in body bags. And we do find it important that our embalmer checks each body and makes a report on the condition at that moment we receive them.

That obviously does necessitate taking them out of the body bags and cleaning the bodies.

But when I said to her, "Oh well, this is first offices", she said, "No, I call this last offices because in her opinion last offices aren't done in hospitals or mortuaries". So she sees that she's doing the last offices.

Often we have received people before we necessarily know whether there would be viewing. People are interested to know the condition --

TIM SUTER: Just so I can clarify that, what do you mean by if you know they're reviewing? I don't know whether I heard you correctly.

ANDREW LEVERTON: Viewing.

TIM SUTER: Sorry.

ANDREW LEVERTON: Often people will ask about the condition of the deceased. And it's just important for us to know because there are times when we actually say, "In our opinion, this isn't viewable".

TIM SUTER: And for you, that's important for the dignity of that person who has died.

ANDREW LEVERTON: Well, yes. The feeling that you know that you have done your best to look after the person once they have come into your care because they are in your care.

And a lot of things we tend to find is maybe after postmortem, bodies aren't dried properly. They're washed, they're not dried. And then they're put back wet into the body bags, and then if they're not collected particularly quickly, there can be issues.

TIM SUTER: So a real theme from everything you were saying is that you do your best to maintain dignity but actually you are part of that journey of the person who's died and you are reliant on the condition that they are in when you collect them, they come into your care.

Two more, we've got three more and then we are going to move on to a different topic.

JEREMY FIELD: Jeremy Field. I'll be brief. I just wanted to build on Richard's point which we also haven't talked about which is the ongoing monitoring point.

TIM SUTER: We will come back to that.

JEREMY FIELD: Super.

CLARE MONTAGU: Clare from Poppy's. I was just wanting to provide a bit of a counter to Andrew's point, is that we take the view that no one is unviewable, no one is unvisitable and it is our job to -- if that is what the family wants we get, obviously like everyone else, we get people who have been in terrible situations and where their body is not in great shape. And it is our job to work with the family and help them understand what it is that they are going to see and to support them through that.

But I think it's really important to us that dignity isn't about preventing people, seeing someone who is quite often in a very, very challenging and emotionally difficult state.

TIM SUTER: So there's slightly different views there. Just a show of hands. Who takes a view that a body is, on occasion, not viewable? That a family should be advised not to view a body?

ANDREW LEVERTON: Can I just? Andrew Leverton. I did say, "In our opinion". Yes, you can't prevent people from seeing, if they wish to. You do the best you can. You just need to be clear with people's expectations.

TIM SUTER: That seems to be something that everyone agrees with. Yes. Okay, I think did you have --

NATHAN VAN DER PANT: Yes, it's going to be separate but I'll leave that. Yeah, managing expectations. We do find most of the time if you simply explain the situation families will often choose not to go down the viewing route simply because they understand it will be difficult. And I guess one other point. In terms of again, last offices, is one the big problems that we find coming into our care is the occasions where the mortuary hasn't used the headrest. A lot of things can be fixed coming in. One of the things that's difficult to fix that you always have to warn the family of in advance is if someone's head is to the side and the build-up of blood. You have a significant issue there.

TIM SUTER: Thank you. We are going to have to move on. I am going to ask the next topic about faith very briefly and different faiths and how that

impacts on dignity. And I know that you have a question you would like to ...

KATHRYN WHITEHILL: I think, Tim, it was to follow up from something Richard said. I think we can save it for security.

TIM SUTER: So different faiths. And you may all deal with people who have died of different faiths and I would just like to understand how do you ensure the dignity? Do you have the same process and the same culture, the same approach irrespective of faith? Or are there different things you do depending on the culture and faith of that person? Yes?

MARIA STIBBARDS: Maria Stibbards of S Stibbards & Sons. We are privileged to look after a diverse community and the most ultimately important part is to understand what that family's issues are with regards to their customs. We have to adapt our processes in order that we don't do anything that will cause offence with regards to their customs, their faith, their needs for that funeral.

So there's different cultures have different needs, things that need to happen. To have a knowledge of it first of all and to be honest, if it is one of the more unusual faiths where perhaps you haven't come across it before, it's to just discuss that with the family and understand what they need to happen. And research further but yeah, finding what are their cultural needs, needs to be considered in advance of the care and facilities. Because ultimately it might affect their dignity. From a faith point of view.

TIM SUTER: Thank you. Yes?

JEREMY FIELD: Jeremy Field. I just wanted to say I agree that processes adapt according to the needs. But culture has many different interpretations and we were talking earlier about culture from within our own organisations. And I think those principles never change about the way in which you go about what you're doing.

There are occasions in which we are asked to do some quite trying things from a religious or faith background. But again, for us that's about talking to the team and being asked to look after people in that way, what they're comfortable with.

I mentioned earlier about gender-appropriate people, in place. And of course, just asking people whether they're comfortable with that as well. So again, for me, the absolute given is the transparency point in all given circumstances.

TIM SUTER: So that raises a really interesting point about gender. The gender of the person who has died and the gender of the people who are looking after them. Do you have policies that help the family understand? And someone can explain if so.

CLARE MONTAGU: So part of some of the points as we talk through how we look after someone. So from care right the way through. And they understand who will be looking after their person in the mortuary. We certainly would talk through that we are a mixed team so it is very easy for us to be able to offer.

Usually, the requirement is female-only care and that is something that is just introduced as a matter of routine at the conversation we

have at the start of how we look after someone. And interestingly, female-only care, if there are clearly some groups for who that it is really, really important and you can define that by culture, ethnicity or religion. Actually, increasingly, sometimes people think that that's just something they would want. And so we would look at as something that you want for your mum just as someone else wants something different.

Some people want to visit their person, some people don't. So if some people want female-only care, that's totally fine.

TIM SUTER: Does anyone have a policy where they don't provide care based on the gender of the person who's died? If you can explain that to us.

DAVID MCLAREN: David from Pure. So again, it comes down to what we actually offer. It is a simple, direct service. So for us, it is not a requirement because we are basically bringing that person into our care, therefore, not limiting the amount of touch points that we actually use. So I think it's quite important for us to understand that, yeah, we go from private ambulance collection straight into the mortuary from mortuary to the coffin. From that point, we don't really need to touch that deceased again. So the idea being is that we control those kinds of touch points and again it's not a conversation that we would have with regard to sex or the person who is actually dealing with the deceased.

TIM SUTER: Thank you. Yes?

WENDY JACKSON: Wendy from Jacksons. We have a storage facility if you like. So up to 75 deceased. And mainly for hospitals but I also embalm for different undertakers. And if ever they say, "Female only. Please, I don't want any men touching mum or nan or whatever", there is a sign put on the end of their tray, "Wendy only". And it will be me always.

They're not allowed to go and check on that person. Not that I don't trust them but that's what the funeral directors has asked. We have no communication with the family at all but if that's their instruction that is to the letter, absolutely.

TIM SUTER: Thank you.

RICHARD VAN NES: Richard Van Nes, Funeral Partners. So obviously we deal with many different communities in the cities where we have services or are used on a very regular basis by a particular group or community, we often will have proper facilities. So if there's ritual washing and dressing of the deceased then we invest in our facilities to have a specific washing and dressing room for that purpose that those families then have access to.

TIM SUTER: Thank you. Security, next topic. So it's a very simple topic. How do you ensure the dignity of the person who's died and ensure the security of that person and the premises in which they are kept? So we have in the course of the investigations to date, we have obviously heard about CCTV, whether fridges, cold storage is locked, whether doors, external/internal are locked. Whether the person

who's died is tracked in some way through their journey and entry log for staff, entry log for visitors.

I would really like to throw it open to you to tell us what good looks like, what is bad as well and how can it be improved?

So we just would like -- I think CCTV is real challenge and on the one hand, dignity; on the other, security. What do you think? What should you do? Yes?

MARIA DAVIES: Maria Davies, H Porter & Sons. So we've got -- we've just had a brand new purpose-built mortuary. So we do have CCTV, not within the mortuary, it's only in the entrances to the mortuary.

We've also got new electronic doors and they're all key-coded, so only staff have access to those key codes or certain nominated individuals.

So if you did have any contractors on site actually all our deceased are behind protected doors. So no one can access our deceased or our loved ones unless they've got obviously the key codes to get in there.

But yeah, everything is covered by CCTV. So there's no CCTV I have to say in any of our stores or any of our mortuaries. It's only on all the entrance points. So if someone did access that area then we would know.

TIM SUTER: Okay, yes. Thank you.

JEREMY FIELD: Jeremy Field. I think this is a really challenging area because certainly from my experience a lot has been about trust and goodwill. There are challenges around CCTV because it's got to be monitored.

It can't just be -- because this issue where Fuller, and I do hate the immortalisation of people who do such atrocious things, but nonetheless it came to light by accident.

So unless somebody had been reviewing CCTV footage, that in itself would not have brought it to light. So I think that certainly from my own perspective, we don't employ enough people to be able to monitor all of the CCTV footage and review all of that as we go through.

And some of the things we use, like key code entry to mortuaries and things like that but they don't give us access records, they don't tell us whether anyone is lone working. So even the steps we've taken that are seen as being progressive in this area, don't actually answer the question about who is lone working with deceased people, when they have access to them and relatives.

And then of course we don't only hold deceased people in our mortuaries. We also hold them in viewing rooms, chapels, whatever you want to call them, which often don't have any access. I know of funeral directors who do. We don't in my business as we stand at the moment, but again, no access monitoring.

It's not typically in our behaviours to record every visitor to the Chapel of Rest as well. We might have details of the principle person who made the arrangement to come in but if they bring someone else with them then we may not have their names. And we certainly don't do much in the way of checks for people, checks of the validity of people that come in.

TIM SUTER: And why?

JEREMY FIELD: Because of the point I made before where with goodwill, trust, knowing the relationships. I think if I was to be self-critical, I'd say possibly a degree of naivety. Because as you said in your opening point, and I think you've heard from everybody here, it's a vocation. We care passionately about caring for the living and the dead. And so who would want to perpetrate terrible things against them? We are not built to understand that and therefore possibly don't identify the risks that are actually out there from people who are not built the same as us.

TIM SUTER: Okay.

SIR JONATHAN MICHAEL: Can I just ask about ...? You talk about key code access, that's not specific to an individual?

JEREMY FIELD: No.

SIR JONATHAN MICHAEL: So it's not like a --?

JEREMY FIELD: No, it's literally a punch code or a digital keypad. It's a regularly changing number. So there's no ability to track who had that.

SIR JONATHAN MICHAEL: Okay, thank you.

TIM SUTER: Before I just go round to the various hands, can we just have a show of hands to see how many people externally have CCTV on their premises? Not all. So that's most of you, not all of you. How many have you internally?

CLARE MONTAGU: Within the mortuary space?

TIM SUTER: Yes, I think so. In the mortuary space.

CLARE MONTAGU: I've got internal but not within the mortuary space.

TIM SUTER: In the mortuary space first. So fewer of you, so only three of you.
Other places internally. And that's a few more of you.

WENDY JACKSON: Only showing in the mortuary doors to see anybody --

TIM SUTER: Only showing on the mortuary doors. Okay. There is quite different approaches.

WENDY JACKSON: -- entering, yeah. Not inside.

TIM SUTER: Okay. And the reason for that, just so I can understand, is the concern is about showing a person who has died on camera. Is that the reason?

WENDY JACKSON: Yeah.

TIM SUTER: Is there any other reason?

WENDY JACKSON: No.

LEE PEDLEY: Lee from Neville. We have CCTV in our mortuary but limited into which areas. So we don't have it in our embalming theatre. That is to afford a further part of the dignity towards that deceased because of the nature of what we're doing.

If that was ever seen that wouldn't be maybe correct. But I have to say that the reviewing of that isn't probably for the purposes of access, it's more to safeguard if there was an injury or an issue in the mortuary. I wouldn't say it's specifically for monitoring our team.

TIM SUTER: That's helpful, thank you. We had some hands up. Yes?

SAUL HUNNABALL: Saul Hunnaball. We have CCTV for all entry points but not in the mortuary. Our deceased are tracked from point of removal and throughout to our support centre. And then as they move through their process they have a passport and anybody that handles that person on procedures they have performed is based on the passport filled out and then when they go off to our branch for the funeral their journey is tracked and onto a funeral as well.

One thing I do think would be quite difficult, certainly in our business, is to monitor people into and out of the mortuary. They are all locked, they are all key-coded. Only employees have the key code. But to have an electronic system that you buzz as you go in, I can't see how that would work because I could buzz and if a colleague of mine was coming to help perform a procedure he could walk in behind me. So I don't know how we could achieve that.

TIM SUTER: And tell us a little bit more about your passport. Does each person who has contact with the person who has died need to write their name, their initials, the time, date?

SAUL HUNNABALL: Yes, that's exactly it. So it starts at the journey, at the point of receiving that person into our care to however many people are involved in that process and through. And we complete sections of that, the specific sections or procedures that we carry out right up to the point where if I'm leading the funeral out, I'll close the coffin with my colleagues, they will witness jewellery, condition of the deceased. So each part of that person's journey we record.

TIM SUTER: Why?

SAUL HUNNABALL: Why? So it's a security thing really so that we can go back to if there are any issues really. It's just a safeguard for, by ourselves and for our clients and obviously the deceased.

REBECCA CHALONER: Tim, can I just take us back to CCTV in mortuaries for a moment? And for those of you that have got the CCTV in your mortuaries how do you balance the desire to have CCTV in that space with maintaining the dignity of the people you have in there who have died?

TIM SUTER: Yes?

MARIA STIBBARDS: Maria Stibbards, S Stibbards & Sons. I'd like to kind of explain the thought process of the CCTV in the embalming room which is where it has just gone in.

It was something that I was incredibly challenged about. I saw both sides and if I'm honest I didn't really want it in there for the dignity of the deceased. So there was various amounts of discussions with regard to the dignity of the deceased and how we were going to protect that.

I have to say throughout the embalming process we use modesty cloths in order to protect the dignity of the deceased anyway. It's a very careful balance between maintaining dignity but the safety of colleagues, security, protecting the deceased. So it was decided in the end by senior management that CCTV would go in and the position of it was considered. But also the backup of that data was considered.

So, our normal CCTV systems are backed up in the Cloud by third-party organisations. Our mortuary CCTV runs on a different network and it is backed up on the premises only. We would not allow those images out of our building because to us, it creates a vulnerability. If you're using a third party you've got no real control over that third party. Encryption is only so good so it was beyond our comfort zone to allow that physical video data to leave the building. It doesn't record sound. It's only a visual thing and overwrites.

SIR JONATHAN MICHAEL: Can I just check whether the CCTV is routinely monitored proactively or whether it is there and only looked at reactively in the event of there being a concern? I think whoever is --

MARIA DAVIES: Maria, H Porter & Sons. Our CCTV is open. We can see it in the office. It's on a massive plasma screen.

TIM SUTER: So it's real time?

MARIA DAVIES: Yeah. Real-time, everyone can see everything.

TIM SUTER: How many of you have a real-time CCTV? So seven of you. So how many of you have prerecorded so you can look at it after the event? So four, okay.

KATHRYN WHITEHILL: Could I just ask a question further to the Chair's point? So if it's a real-time CCTV how would you manage to capture somebody who was coming into the mortuary out of hours?

MARIA DAVIES: Maria, H Porter & Sons. Obviously, it is recorded. We can do all playback and everything like that. So it's real-time at the point that it's on the screen. People within the office and the manager can see that but if we needed to see it during the night or anything like that then we can play it back.

KATHRYN WHITEHILL: I didn't introduce myself, so you just reminded me, Maria.
Kathryn Whitehill, head of investigations. And do people actively audit and playback and trace the CCTV?

CLARE MONTAGU: Clare from Poppy's. We have an alarm, so if someone is accessing out of hours the alarm would be triggered and that in turn would then

trigger real-time monitoring. We all have -- all senior management plus mortuary manager, have access to it on our phones.

TIM SUTER: So that means it's Cloud-based, does it?

CLARE MONTAGU: Well, I mean I think there is just -- it's like your kind of fundamental 101 of liberty versus security sadly. We have taken quite a lot of steps, and particularly since the Fuller case first came to light, to tighten our mortuary security. But we cannot. We have chosen to draw some very clear lines about where we will not have monitoring and that is, for example, in the mortuary space itself and we do have alarms all over the place.

Very few people have access to that code, but if someone who did have access to that code wanted to commit some nefarious crime, that would be very difficult for us to stop in real-time but we would see it happening in real-time.

TIM SUTER: I'm conscious at the end you have had your hand up a while.

JO PARKER: Jo Parker, Abbey Funeral Services. Just to go back to general security for the mortuary. We don't have CCTV and for no other reason I'm pulled as to whether to have it or not have it and we just haven't, as a business, made that decision yet.

We have locked gates each side, only one entry into our mortuary and everything that is carried out during the day and out on call there's two members of the staff so there is never in there a time when member of staff would have, or should have, access.

I'm interested to hear actually with regards to the CCTV about the thoughts as to privacy.

My family business is actually based in Tunbridge and my local hospital is Tunbridge Wells and Maidstone so this case affected us quite a lot. Personally, as a family we knew people and as a business.

One thing that we found that there were families who called us because their loved ones had been at Tunbridge Wells and Kent and Sussex Hospital. It wasn't -- our security wasn't questioned. The question was how long was their loved one there before we took that person into our care.

Now, I'm not suggesting that that means that would need to be done. But I just felt that the feedback that we had from the families that were looked after, they trusted us and they understood that our mortuary was on our premises. We have a house above and we live in it, so very much part of our family. The footfall is so very different in that we have a funeral directors and a mortuary as well.

TIM SUTER: And can I pick up on something you said there? So just focusing on physical security, so we've got CCTV, we've got alarms. It sounds like you have people who might live on premises.

JO PARKER: So we have a family flat.

TIM SUTER: How do you just balance someone living on the premises with maintaining the security?

JO PARKER: They have no access to the office or the shop below.

TIM SUTER: Okay, because I think there are some others where you might have people who live --

JO PARKER: But it's not, it's family that live there.

TIM SUTER: No, no. I understand. Do you have the same?

MARIA DAVIES: Maria, H Porter. So I live above H Porter & sons. So to be honest, I can hear the alarms if the alarms are unset and can kind of see anything from the back of what's going on. And like Clare said, we also have CCTV. We're also police response if the main alarms go off. So if the alarms go off we get first response from the police. So we'd instantly look at CCTVs on our mobile phones and things like that.

TIM SUTER: Can I ask something you might not all agree with, which is fine? I want to hear these different views. Should the mortuary be more public? If you're bearing in mind the security, which is obviously very important and we've talked all about the physical security that's needed.

You have talked about you don't want the mortuary stuck behind the bins. You want it to be seen because from what you're saying I think that's another way to ensure security, to ensure dignity.

That's quite challenging and I would be quite interested to know different views. We know your views so what do others think about that?

JEREMY FIELD: Jeremy Field. From my perspective, certainly open and anyone that wants to come, clearly we would like the opportunity to make sure that no one is out that should be out or any of those things. But anyone is entitled to ask to see every inch of the Funeral Home when they come into see us.

TIM SUTER: And do you have a policy that makes that clear?

JEREMY FIELD: Yes. Is it written? No. But for me, it comes back to the culture of values. Again, transparency at the core of everything we do.

TIM SUTER: Okay. Yes?

LEE PEDLEY: Lee Pedley, Neville Funerals. Fully agree with Jeremy. We run and operate our mortuary and our spaces as if any general public member could come in and walk around and we would be proud to show them. So that it shows the investment and where their loved one is going to be kept.

We very rarely -- we don't by standard say to a family when they're arranging, "Would you like to come in?" But do you know what, we're proud; we work and operate that we're proud that we can. And we have many doctors and people that do come and walk around to --

TIM SUTER: And do you log those visitors?

LEE PEDLEY: Any visitors like doctors or anyone coming in in our main reception, they sign in a register, yeah.

TIM SUTER: And do you all have a visitor log? Is there anyone who doesn't have a visitor log?

WENDY JACKSON: We don't have visitors.

TIM SUTER: You don't have visitors?

WENDY JACKSON: No.

TIM SUTER: And you don't have a visitor? Is that for a reason?

NATHAN VAN DER PANT: Nathan from Penrose. No, not particularly. We're only a small firm. It's been the case for a while that if anyone asks to see the mortuary premises they're welcome. They have to go with a staff member and they are also made aware of the health and safety issues going around and, not to touch anything. But people are allowed.

Because we've had not many doctors come in recently particularly with COVID, everything changing, and very few family members, there's not been enough for us to -- that is --

TIM SUTER: Yes.

WENDY JACKSON: Wendy from Jackson's Hub. Because we don't do funerals we're not open to the public so we don't get requests like that. The only requests we get for visitors are from the NHS, Coroner's Office, HTA just doing their regular inspections, but no time are they allowed

anywhere without full escorting. And everything is recorded, minuted, so you know.

TIM SUTER: Thank you. At the end.

SAUL HUNNABALL: Saul Hunnaball. Totally agree about being transparent and our doors are open and why wouldn't we want to show a family where their loved ones are kept?

Our industry is very much unfortunately the show on the day. People are not aware of the depth of your feeling, the business ethics behind the scenes. So, unfortunately, a lot of the funeral directors don't have that same ethics, the business model and all people see is perhaps somebody behind a desk, maybe a Chapel of Rest, but mainly the polish on the day and not actually the depth of feeling that goes into behind the scenes.

TIM SUTER: If we can just move on to a different topic, which is staff and obviously, your security is only as good as the staff that you have got. How do you train your staff? Do you have policies in place? What qualifications do you require, if any? Do you ask your staff to go through, or do you conduct DBS checks of your staff? So there's a few different things and I'd be quite interested about the DBS checking. And you can go first.

LEE PEDLEY: Lee Pedley, Neville Funerals. Every single colleague of ours that joins our business is DBS checked as part of -- as standard by the recruitment process. And that's done on review, so continually

throughout their career when it comes up for renewal, I think it's every two years, they get redone.

That's just a policy that the business has had for many, many years. Because we treat it very much, we're going into deal with clients in vulnerable situations, so we treat it very much as if you were in the care industry; you would expect that someone has gone through the DBS checking and that kind of aspect.

TIM SUTER: So is there anyone who doesn't do DBS checks for new staff? So that's five.

JO PARKER: Jo Parker, can I just clarify why? And the reason being because I haven't had any new staff as such for a long time. My staff, they've been with me for years.

TIM SUTER: So my next question, do you DBS existing staff? Okay. So why?

JO PARKER: I personally feel the DBS is only as good as the paper it's written on the day it's written and only if they've ever been caught. That's me. As I say, we're only a small business so the staff turnaround isn't massive at all. I think we probably all agree that in our profession it's a bit of a vocation. And once you get a job you kind of stay there for a lot of years.

Most of my staff have come from care settings so they've been referenced or I would certainly have the references for them from previous employers. They aren't allowed to just work on their own until they've gone through their probationary period and their training.

And all our training is done through the IFD College as well. So everyone has --

TIM SUTER: Can you tell us who the IFD College is?

JO PARKER: It's the Independent Funeral Directors College.

TIM SUTER: And what's the course that they --

JO PARKER: So they all do an induction course, they all do health and safety and then my funeral arrangers, they will move on to the administration side of things. There are several courses that are offered up to whichever level they would like to do. Not everyone in our profession is academic necessarily. So it's within the realms of what they're able to do.

TIM SUTER: Okay. Yes, tell us about DBS checks.

DAVID MCLAREN: Yes. So David from Pure. We do DBS check on all new employees. We also get them to explain any gaps within their CV as well which we find is very important. And then we have a three month internal training programme as well which is part of their probationary period with regards to very similar ideas with health and safety, care of the deceased and general protocols, for instance.

TIM SUTER: Is that a pass or fail course?

DAVID MCLAREN: It would be extended, yeah, very much so. So it would be a massive fail but obviously, you train them well and give them the opportunity to be able to come up to standard, I guess.

TIM SUTER: Okay. Yes.

JEREMEY FIELD: Jeremy Field. I just wanted to say that I think the DBS check is what we've got in order to be able to demonstrate our duty of care. And particularly various organisations have described our customers as vulnerable for various different reasons. So I think as long as that's what we've got we should do it, and currently have to review from there.

I think the training side is more challenging. The training particularly for what we call our funeral service team members have been known variously as funeral service operatives, chauffeurs, bearers, whatever.

So we do that with an initial ten-point induction programme which is then recorded on their employment record. We're a very software-based company so we've got lots of nice digital records and all those sorts of things, tracking each individual. That then gets fed into their review, their probation period and it would be pass or fail, the probation period. Then there's a more detailed course but we run it internally.

So we're very pleased with it, we think it's great, but it's not externally scrutinised and part of that is because courses of that nature aren't readily available to us.

The one that Jo has described as 'Funeral Arrangers' rather than people working in the mortuaries and working with deceased people.

TIM SUTER: And does your training involve helping people understand dignity and security?

JEREMY FIELD: Well, to their great misfortune they spend quite a lot of time with me when they first start, talking about our family, our family values, our company values and how that all rolls forward. And that then extends through around all of those sorts of things.

So talking about the family values, the company values. But also around particular aspirations we set. So we have an internal thing called 'Moments of Truth' about the various touch points we have about the families' journey on the way through which has a series of indicative outcomes. Well, a stated outcome and a series of indicative behaviours underneath which we talk about from the very first day of induction that is mapped all the way through the ten-point plan and then through the training, what we further deliver from there. So it's fully --

TIM SUTER: That's helpful.

JANE CAMPBELL: Jane Campbell. can I just come in on DBS checking? How easy or difficult is that to arrange in this sector for those that want to.

WENDY JACKSON: It can take three months to come back.

JANE CAMPBELL: Three months.

WENDY JACKSON: It can do, yeah. Some of mine have taken three months to come back.

TIM SUTER: What do you do in the meantime?

WENDY JACKSON: They never work on their own, even when we've got their DBS check, none of my guys ever work on their own. Always in a pair at least. Never are they --

TIM SUTER: But once they've got DBS checking you're content with lone working?

WENDY JACKSON: No. Oh no, no.

TIM SUTER: So it doesn't change, it's always you've got to --

WENDY JACKSON: No. Yeah, I mean my sons even one of them and he manages my company for me but he still is not allowed to work alone. That way there's no room for any misinterpretation or any accidents or anything at all. There's just two of them at all times.

TIM SUTER: We're slightly running over, so have you two got pressing points you would like to raise?

SAUL HUNNABALL: Only to continue on this.

TIM SUTER: Okay, whistleblowing. Did you want to?

MARIA STIBBARDS: Maria Stibbards, S Stibbards & Sons. I remembered just in time. The DBS checking, we'll look into for existing staff. If it was to become mandatory we'd consider to change the employment contracts so that we can actually do it, so that will help everybody greatly if that was to become something within there. New staff is something we're exploring doing it with as well.

Security, we have a key-code entry system with a fob, so people fob in. We're just looking at doing the logs following the problem, there's always one, two members of staff will come in the door at the same time. Only one of them fobs in.

So we're just looking at systems to do that at the moment. But we're lucky, just built the premises and we put that system in at the same time. But we can now see unusual entry events into the mortuary. They flag up really easily.

But those logs and systems are monitoring that need to go on to the...

TIM SUTER: That's thunder.

MARIA STIBBARDS: Also, we have training so I am obviously our main trainer. I've got qualifications in the adult working sector but also multiple qualifications in the industry. We encourage our staff to do the training afterwards. We very much run the body system that Wendy said --

TIM SUTER: Encourage or require?

MARIA STIBBARDS: Encourage, because they're not all academic as Jo says. So some people are able to do regular exams. But everybody does our internal training that we deliver and, like was explained before, we can extend probationary periods. If their behaviour is unacceptable ultimately --

TIM SUTER: Can I just move on to two final topics which we will deal with very briefly? Whistleblowing.
If you have a member of staff or someone who is interacting with your organisation and they've got a concern do you have a whistleblowing policy? How many of you have one? A hesitant six, seven, eight?
Why are you hesitant?

LEE PEDLEY: My door is always open to anyone.

TIM SUTER: But you don't have a formal policy. People just to know to --

LEE PEDLEY: I guess I don't have a written policy.

JO PARKER: I'm the same.

TIM SUTER: Okay.

LEE PEDLEY: We're a relatively small company.

TIM SUTER: Do you think that makes a difference? Being small.

LEE PEDLEY: Everyone who works for knows me and knows they can come through the door.

TIM SUTER: The reason for me saying that is, how do you trust the trusted? When you're small does that still mean that everyone within your organisation, however well you know them, shouldn't be held to the same standards and have the same policies? That's just a challenge that I am putting to you all. Yes?

RICHARD VAN NES: Richard Van Nes, Funeral Partners. Yes, we employ an external agency for our whistleblowing.

TIM STUER: Tell us more.

RICHARD VAN NES: It's promoted in every staff room throughout our 150 branches. That number is displayed on staff noticeboard. It's available online, on our intranet and it's basically gone through in induction. So we don't get a huge amount of whistleblowing but every now and then there is that and the whistleblower is able to make that confidentially. They can if they want, tell us who they are, but if they want to make an anonymous, confidential comment then that is fed back to us and thoroughly investigated.

TIM SUTER: And you have experience of it being used?

RICHARD VAN NES: Yes.

TIM SUTER: Thank you. Yes?

SAUL HUNNABALL: I just want to bring a point up, our industry is quite often made up of lots of different-sized companies, yes. But smaller companies may use bearers that may just carry for multiple companies to make their salary up or assist with duties in a variety of businesses. So you don't have control. I don't operate a system, and I wouldn't, but some companies have to in order to exist.

So I think all companies run in a different way to have a level playing field, as it were.

TIM SUTER: At the end.

JO PARKER: Jo from Abbey. Just to say, if you're using casual bearers they tend not to come into your premises, so that makes your staff even smaller. So you could be using a pool of casual bearers and just meet them at the crematorium about carrying the coffin in. But they wouldn't necessarily ever have access to your mortuary or your premises.

TIM SUTER: And last topic, so I'm just going to move on because we're running over time.

Safeguarding. How many of you have a Safeguarding Policy? Six.

And we've got some hesitant -- so what do I mean by Safeguarding?

CLARE MONTAGU: Yes.

TIM SUTER: Yes, so you tell me. What's your Safeguarding Policy for?

CLARE MONTAGU: So I come from a healthcare background. So I have a Safeguarding Policy for both safeguarding of the care of the dead and also safeguarding in respect of the clients that we look after. And that will be both in respect of children and vulnerable adults.

I don't at the moment actually, really have quite a safeguarding/whistleblowing sort of much more formal set-up. We have taken a decision at the moment not to DBS and we review that every year, which is a sort of weird combination with a sort of much more focus on compliant culture.

And the reason we do that is at that moment we are small to have oversight and I have also had experience of DBS checks that haven't -- because they're a point in time.

So part of what the Safeguarding Policy and the safeguarding training that we give and the way that we talk about care for the dead and the way that we also make sure that we safeguard some of the more vulnerable clients we have, because we're also looking after people who are arranging funerals who themselves might be in a vulnerable position for all sorts of reasons.

Part of how we do that, we're small enough that we can do that through training, culture, support and supervision. As we're growing I think we will start introducing DBS checks. And in fact, that is on my agenda for my new year. But we do have a very comprehensive safeguarding set-up.

TIM SUTER: Yes?

DAVID MCLAREN: David from Pure. I just want to say I mean I think it's about empowering your staff as well. So giving them one-to-ones so

they've got the opportunity to have a one-to-one session to ask them if they've got concerns.

We also have a Whistleblowing Policy as well, not externally but internally. So any serious complaints or whistleblowing go direct to director level and with a full investigation to follow that through. But I think it's a matter both for the sort of safeguarding and whistleblowing just to be able to empower staff to be in the position that they can report things if they have concerns.

TIM SUTER: And focusing on the safeguarding of the deceased, anything to add to that particular ...? Yes, at the end.

JO PARKER: Jo Parker from Abbey. As a company, we are active members of SAIF, so we have a strict code of practice that we work to.

TIM SUTER: We'll come on to those.

JO PARKER: So, I would imagine that any member who was a member of SAIF or the NAFD, if they work to their code of practice it covers -- it's those that aren't members of trade associations.

TIM SUTER: Okay, which we're going to come to. I think that might put us --

SIR JONATHAN MICHAEL: Can I just ...? Sorry.

JEREMY FIELD: Jeremy Field, I'm just going to -- I finally remembered. It was a question, Chair, asked earlier as well. And something that I'm not comfortable in saying because it's not a great line. But there's a real

cost implication to these particular points and the more you build these things in, the more it drives the cost. So I think it's harder in a small business.

I do think on the safeguarding side and on the whistleblowing side it's actually harder in a small culture to stick your hand up and say that you think something isn't right and I don't think we necessarily have those mechanisms.

So then you go down the DBS route and there's a cost per check. And if people don't stick that all goes through. And there's a cost of all the various monitoring and bits of pieces that go through which has to -- and then, of course, there's the cost of retro vetting quite a lot of the staff that you feel that you should have but you've got to try to manage.

So I think that has to be recognised as being a factor in decision-making, as uncomfortable as I am to acknowledge that.

TIM SUTER: I think it's a very fair point to raise and it's something we'll perhaps come back to in the next session, so thank you.

SIR JONATHAN MICHAEL: I am assuming, well, everything we've heard, you're all running very effective, slightly different systems. So you're all running good quality services etc.

The difficulty we have is how do we get to understand and to hear about those that are not running good services and so on and so forth? And it's really very difficult because people that are running poor services are unlikely to volunteer to come forward and tell us all about it.

So, again, a raising of hands, how many of you are actually aware of services in your area that actually you wouldn't wish your own family to go in, you've got concerns about? Almost like whistleblowing without -- so that's almost all of you are aware of services nearby or local that you wouldn't touch with a barge pole, putting it bluntly. That's rather worrying.

TIM SUTER: What do you do?

SIR JONATHAN MICHAEL: Yes, how do we hear about those? Because it's no good us writing a report based on all the experts who do it well if in fact there's a hidden and not very well-hidden grey area. How do we access that?

WENDY JACKSON: Wendy, Jacksons Hub. I was fortunate, before being where I am now, I was a freelance embalmer. So I had the opportunity to travel to many, many different premises. And I'm grateful in as much that's why I built my own place because it was horrific, some of the places. But I think you'll find that all of these, like the NAFD and SAIF and all these places, they all monitor and --

TIM SUTER: We are going to come on to those at the next session.

WENDY JACKSON: Right. But there is no one checking rear of house. Not everywhere, of course, but there are smaller places, some of which have been there forever, and their premises don't allow for the update of modern things or there are staff that --

The amount times I've heard, "Oh God, no. I don't touch deceased". But they work there so how are they checking on what is actually happening rear of house? There are very few regulations rear of house and personally, I think that's what's needed. Somebody needs to be checking on them and setting standards and just constantly reviewing.

TIM SUTER: That leads into our second session, very much so about who is checking up. And there is going to be different views on that clearly. Shall we perhaps draw a line there? I wonder if it's worth having a break now, slightly earlier. Just 10 minutes I think for tea and a toilet break. Thank you.

(Brief adjournment)

SIR JONATHAN MICHAEL: Tim, back to you.

TIM SUTER: Okay, so session two is "Who is Checking Up"? And to pull this together a little bit, you have all really helpfully set out different ways that you work and the deceased person being at the core of that, but the challenges with that. There's a lot of risk involved at different points in all of that.

And we would really like to understand how do you manage the different risks that you all face? Whether you're a small family-run firm, whether you're a mid-sized firm, whether you're a large firm and that risk is going to be different for each of you. That leads in to trade associations, which might or might not be the answer.

It would be really helpful to understand a little bit more about inspection by trade associations. What that does. What it doesn't do and actually, if there's another way of doing it and you're not all members of trade associations and understanding more from those of you who aren't would be helpful, taking us back to that point about risk, how do you manage risk effectively?

Also bearing in mind the point about cost which I think is a really fair one.

SIR JONATHAN MICHAEL: Tim, can I just ...? I think it's also relative risk, as it were. One of the things that came out very much in Phase One of the Inquiry was actually there was a view that actually what Fuller did and who Fuller was so unusual, so unlikely, that really nobody could have anticipated it. Whereas of course that is exactly why you have policies and procedures and processes to actually identify or to stop people getting through the gaps in your systems and processes. As you will see in the report we reference other industries, like the nuclear industry, airline industry. You know, healthcare is always talking about how wonderful the airline industry is in managing risk but somehow it didn't stop them introducing policies like locking the doors of the cabin hopefully, access to the flight deck, in order to stop people breaking in. Then finding that somebody decided this was a good way of committing suicide, by driving the plane and locking everybody out of the cabin and then driving the plane into a mountain. So policies and procedures are really key to this and the question is, thinking it will never happen to you, nobody thought it was going to happen in Maidstone and Tunbridge Wells.

TIM SUTER: So thinking the unthinkable. That's what we need you to actually think about for this session. That's the challenge for you.

So going back to the trade associations and inspecting premises. What does it involve, what do they do? If someone can start us off to tell us.

You are contacted by either SAIF or NAFD, what are they looking for? What are they looking at?

RICHARD VAN NES: Richard Van Nes, Funeral Partners. We are members of the NAFD. IFSO carry out their inspections on behalf of the NAFD. The inspection is that each premises is inspected against the Funeral Director Code. The code of practice must have been adopted by the NAFD as well. That includes both front and back of house, commercial care of the deceased, client care, so it's quite comprehensive.

The biggest problem is that inspection is on a -- of course it's unannounced, it is on a risk-based approach, not every branch gets visited every year. So it could be two or three years until a particular location was inspected. So that's not probably good enough. Even a once a year inspection isn't probably good enough in terms of preventing the unthinkable.

Therefore internal, so as a large company, we have internal audit department. I've got eight monitors around the country and they're in branch every day, doing an audit, checking the number of deceased, care of deceased. The daily checks like this will be performed on all of those sorts of things on a very regular basis.

So, in essence, we self-police. We have the external inspection but we need to police ourselves internally otherwise something could happen.

TIM SUTER: We've just got Kathryn.

KATHRYN WHITEHILL: Thank you, Kathryn Whitehill, head of investigation to the Inquiry.

On that, so you described earlier, Richard, systems and processes that you used. And I think it was daily checks, internal audits and your local management was involved.

So the system that you have just described to us in this session, is that based on the requirements of the Scottish legislation?

RICHARD VAN NES: So specifically the daily checks, so our internal audit programme is based on -- well, it's been created with a number of different components.

So we look at compliance. So that is compliance with the NAFD Code of Practice. It is in compliance with the Scottish legislation. It's compliance with Health & Safety legislation and all of the other pieces of legislation that apply to a business and compliance with our standards. So we have a very comprehensive set of standards in every aspect to our business and how things are done.

So our internal audit is done against the compliance section and it's all of those compliant items. Then we also have a Health & Safety section, so again it's compliance not only with our internal Health & Safety Policy but with any legal requirements.

We have a separate facility section which will look at the premises and the standard of those premises. There will be like a desktop audit section which looks at all documentation and tracks --

KATHRYN WHITEHILL: Forgive me, Richard. What I am trying to understand is how much is the Scottish legislation a driver in creating these what seem like robust procedures?

RICHARD VAN NES: So we had those processes before the introduction of the Scottish legislation. What we did is we looked at what came out of Scotland and 85 per cent we were already doing. The other things that we hadn't been doing we now do. So when they started doing their inspections or they start enforcing the Scottish Code, we're compliant and we've been compliant for several years already. So there's nothing we need to change.

The thing like the daily checks is in the Scottish Code. Now they've just relaxed that a bit. It was very specific in daily checks that they were able to be evidenced. That's now changed. The terminology has just recently changed to 'regular checks', as the evidence.

We still maintain that daily checks are documented on every person in our care.

KATHRYN WHITEHILL: Thank you.

TIM SUTER: Jane?

JANE CAMPBELL: You said that the inspection regime is risk-based. So what would prompt a site to be inspected?

RICHARD VAN NES: So I think, and that will be more for IFSO to answer, but I believe the more of the risk-based approach, has there been any complaints about that business or that firm? If it's a larger national group then being able to look at where national groups have policies and procedures and all of those sorts of things in place, one can make an assumption that most parts of their business would be following the same procedures.

But I think there is a bit of -- visiting every branch of every business within a set period time. But that may vary.

TIM SUTER: At the end?

JO PARKER: Jo Parker, Abbey Funeral Services. So we are members of SAIF. SAIF is the independent trade association. And the independent sector carries out 66 per cent of the funerals in the UK. So it's quite a large range of small to medium-sized funeral directors. Our code of practice was updated in March 2022 with the guidance of the Ministry and Justice and the Scottish government so that our cross-border members, our code of practice works for the new rules that are coming through in Scotland. We have regular -- when I say 'regular', about every year to two-year inspections by SAIF who come and inspect our premises, front of house and back of house, so mortuaries as well. That's now accredited under the MYS -- I had to make a note of this, the ISO9001 which is through UKAS.

I believe, I'm a strong believer of trade associations for our profession and I think both SAIF and the NAFD could work together to regulate the profession as a whole under a combined code of practice.

I think the problem is where the CMA came in and made changes to our profession recently, where they missed a trick, in my opinion, was not everyone had to be a member.

So there is, I think, at least 10 per cent of funeral directors that aren't governed by anyone. So there is no inspections, that they are self-working and --

TIM SUTER:

Just to unpack some of those things. We've obviously got codes of practice. We've got two codes of practice that may apply but only to those that are members of the trade association. We have then got inspections. There will be different types of inspection depending on whether you're a member of one, both, of those trade associations.

We have got some who are obviously cremations which you won't be subject to either of those trade associations, I think.

We've got embalmers. You won't be subject to those unless you're a member. You'll have a different -- so we've got a wide range of just professions in this room.

That's really challenging and just how do you make sure that's cohesive, coherent and effective? What do you do?

Rather than coming to you, I'd actually like to come to you, Poppy's, because I don't think you're a member of a trade association. So you're going to have quite a different view from everyone else here. So I'd like you to just start this.

CLARE MONTAGU: So we have made a conscious decision not to be a member of either trade association and I'm also very proud of, as I've "wanged" on about, the quality of standards and the quality of care that we give. And the reason we decided not to be a part of the trade associations is that we have seen practice that we think is not good enough in some branches of some people who are members of both trade associations.

I am not convinced, or we are not convinced, that self-policing by an inevitably -- I mean as you've said, Richard, once a year, maybe once every two years at best for all branches, one individual trade association is not able properly to regulate to a high standard that the sector --

And we have decided -- and also trade associations are there also to, I think, have a bit of a judge and a jury or mark your own homework or whichever metaphor I'm getting wrong where you have an obligation as a trade association to lobby and promote the interests of your members and I don't think that is the same as independent regulation of standards.

TIM SUTER: By not being part of a trade association are you not just fulfilling the prophecy, in a sense, of you are self-policing?

CLARE MONTAGU: Yeah, because there is an absence of everything else but we feel more comfortable with the transparency and the values that we have and the way in which we look after people and we invite people into our mortuary. We feel very comfortable with being scrutinised and we welcome scrutiny from everyone.

And we feel that that is more honest than saying, "We sign up to a code that we're not entirely certain is always implemented as well as it should and isn't inspected as well as it should".

The one thing I would say from my previous experience working in a healthcare setting, and I know this is entirely dependent on money and government will, but CQC used to put the fear of God into us. And I used to work at a setting that was subsequently rated outstanding but I know what CQC did and does to healthcare settings. And it feels to me like --

TIM SUTER: With its traffic lights?

CLARE MONTAGU: Well, two things. The force of an independent regulator, a set of ratings that are very bold but very clear: outstanding, good, requires improvement or whatever the fourth one is, I can't remember. And you can have then an argument about regulation driving compliance behaviour rather than actually quality, which I think is a genuine thing, the CQC. But it was the fact of an independent outside statutory body that came in on an unannounced basis with a set of standards that were enforceable among a range of different settings, whether they were just as professions are represented here. I'm not saying we need CQC but I am saying that that was something that very much concentrates minds and raises standards in my experience in healthcare.

SIR JONATHAN MICHAEL: Can I just ask what the implication is of failing a trade association inspection?

JO PARKER: Suspension or expulsion, if you don't correct it. Actually, I mean everybody has a different mindset but for me having the SAIF logo, it means I'm a SAIF-approved funeral director. It tells my families that I am inspected regularly, that I do follow a set code of practice . It gives a security to the families that are coming in.

SIR JONATHAN MICHAEL: But if you lost that it wouldn't matter to the business, would it?

JO PARKER: No, but I do feel that the public are becoming more aware, certainly as you would go through an ABTA-approved travel agent, becoming more aware of the recognition of trade associations and being a member of that.

And can I just -- sorry, just to say, that the reason for the two, and I do understand the challenge, but the profession goes from one little funeral director in Wales to a massive -- the Coop, for instance. So to try and govern in one trade association all members, the NAFD are really good at looking after the larger companies and SAIF are very good at looking after the needs of the little companies which are all very different.

TIM SUTER: The challenge back to you on that is, I'm a solicitor and I work in a large firm. But actually, the Solicitors' Regulatory Authority covers all the profession, whether you're a small firm to the largest firm. So it's possible.

MARIA STIBBARDS: Maria Stibbards, S Stibbards & Sons. Before I worked for S Stibbards & Sons I was a self-employed embalmer. So I have had the opportunity to go into many different premises who were all

members of the trade organisations and had been for many years and some of them did lack some standards.

I think things have changed with the IFSO inspections but I am yet to see one. Unfortunately, I wasn't on site when they came to visit our new flagship premises so I didn't unfortunately see.

If it is going to be trade association voluntary regulation, I think we need some stipulations as to exactly what gets checked because they can -- in the past, there's been an obsession more on the paperwork trail and the health and safety side of things than how the premises actually work.

I think in order to govern whether you might have a much smaller funeral director that uses a third party, maybe for their embalming or the care of their deceased, I think some attention needs to be paid to service level agreements that exist with third parties to ensure that the standard expected of that premises takes place at that premises.

TIM SUTER: So just pausing there, can you explain that a bit more? So is that, for example, a body store? Somewhere where a body may not be -- a deceased person may not be kept on your premises but you are asking a third party to look after them.

MARIA STIBBARDS: You've got a couple of different situations where it can occur. So one is exactly what you described. So it may well be a much smaller funeral director that doesn't have the mortuary facilities. So they may have a service level agreement with another funeral director who has got those facilities and they might loan those facilities out on a cost-per-person basis, more than likely.

We've also got a situation where you've got the Coroner Service and the hospitals where they also have third-party service level agreements in place.

Now they are governed by the HTA. It's a little bit woolly how the HTA regulation actually transcribes across the third-party premises as well. And I think as part of this that needs looking at too.

TIM SUTER: Thank you. Yes?

JEREMY FIELD: Jeremy Field. I just wanted to answer a couple of questions. What's the consequences? I think there are two firms have been thrown out membership of the NAFD, published in the latest popular magazine that is published online.

From my perspective, we choose to engage in contracts with local authorities and with NHS Trusts and I think it is a requirement because it is the only regulation that we have that we are a member of one body or the other. So if we were to be thrown out then we would have to potentially be in breach of contracts that we have on that front. So there are undoubtedly consequences but built into other bits that go forwards.

I agree with the limitations that Maria's just talked about in terms of supplier membership of the NAFD. There is no code for supplier members, that the inspection is limited to what they call their Category A members. So they're funeral directing businesses that are in membership and the code applies to them. So that sort of goes back through to the important part for many businesses like Wendy's over there as well. I think you mentioned in the earlier session, didn't you, about the challenges that exist on that particular front?

I think marking your own homework bit is something that is, from my understanding, is now well understood. Certainly, I can only speak from the NAFD side of things, but it's part of a changing consumer environment that funeral directors are sometimes struggling to keep up a little bit.

So one of the challenges in landing the IFSO Code of Practice has been about moving to outcomes and indicative behaviour style in a contemporary model for managing standards. This issue of so many grey areas in what we do in a world where we're not always the best payers and we have a lot of people who are tertiary educated but we also have quite a lot of people who leave school at 16. We talked about examination earlier as being something people find challenging. But it's easier to understand the tick list so, "Are you doing this? Are you not doing that?" Where tick lists don't necessarily bring you that clarity of compliance or address these issues.

You can meet a requirement on a yes/no answer but where the rubber meets the road in your business it doesn't actually achieve the aim set by that as well.

So I think there are quite a lot of challenges but you've also identified how disparate the sector is. Lots of people, we don't spend as much time as we should talking to each other and, as a result, trying to communicate the need for change has been difficult.

What I would say is this process, I think, has done more to change people's view of back-of-house standards within the sector for fear of what might come very much about that CQC spirit, which is actually a positive from this negative.

On the CQC front, Clare, when I met with them, and it was a few years ago now, with the NAFD, the challenges around this issue of lack of infrastructure, around training records and all those parts. Because in order to be able to achieve those measures you need all of that infrastructure put in place and with just the cost of delivering that I'm sure that the NAFD wouldn't object to me going on record saying they are in a constant battle with their membership about the cost of being a member of a trade body when you're trying to employ independent inspectors that are not directly employed but are members but nonetheless, at least they are broadly independent. But also to then develop that training, to develop all of those other bits and pieces, have been necessary to be able to meet an external scrutiny standard like that, which is quite a long distance to travel in the sector, which is why we settle back for our benefit in saying that as a company NAFD or SAIF, whichever you choose to go down, is what we've got at the moment. Therefore we will try and work from within to drive that forward.

TIM SUTER: That's really, really helpful. Thank you for setting that out. Just taking it back to inspections what's the qualification of the person who is doing the inspection? Whether it's for IFSO, NAFD, if it's different or SAIF? What does that person look like?

LEE PEDLEY: In our experience with SAIF it has always been the case that they are a funeral director with many years' experience. Usually, they're the head of a large firm. That's what we get told when they come to our premises. We go over briefly their history with them but for the most

part, we tend not to know that much beyond that in terms of their qualifications. They just get on with the inspection.

TIM SUTER: What does the inspection not do? Is there anything in your collective experience that having one of those inspections, you reach the end of it and think, "Well, they didn't go and look at that area. I don't know why they didn't". Is there anything that actually you think is perhaps lacking that could/should be there? Or actually are they as effective and comprehensive as they could be? Yes?

MARIA STIBBARDS: Maria Stibbards, S Stibbards & Sons Ltd. Can I make a recommendation that you ask who has had a recent inspection because there's been a lot of change in the processes?

TIM SUTER: We'll come to that. Just so we don't lose the question that I've just asked, has anyone just been through an inspection where they think, "Well, they didn't look at that particular area?" Or are they as good as you think they could be? Yes?

JEREMY FIELD: Jeremy Field. That's the first time I forgot to do that in a while. Sorry. I'll try and remember.
I think at the risk of looking to curry favour I think the issues are safeguarding and whistleblowing and those sorts of things.

TIM SUTER: It's the paper policies.

JEREMY FIELD: Yeah, it's the policies and then I think just around systems. I think that there are a lot of inconsistencies on systems.

TIM SUTER: So the physical inspections of premises in your collective experience is reasonable?

JEREMY FIELD: Well, just from my perspective, IFSO have given me some unpalatable feedback which would suggest that it's probably effective at the moment and going into areas where it hasn't gone before now that they're getting back on track with their inspections. There's been a hiatus while there's been some changes going on but now they're back we're certainly being picked up on things that I bridle at, which is good.

TIM SUTER: Okay, good. Just so I understand, NAFD hiatus?

JEREMY FIELD: So without wishing to bore on-- the NAFD tried to set up it's own- it's almost like a regulator and the idea that trying to move away from the self-marking bit.

TIM SUTER: So this is IFSO?

JEREMY FIELD: Which is IFSO. It is fully under the control of the NAFD so I won't try and suggest it's in any way independent at the moment. But there was a view, or a vision, to try and make it open to all regardless of trade association membership or otherwise, which I think was probably a good one.
But there was a lot of -- I don't think the ground was prepared particularly well. I'm not sure that there was a very effective change

management plan, so there wasn't a great deal of communication about it.

That led to some changes within the leadership, challenges around funding and those sorts of things and they've just settled down again now.

TIM SUTER: The direct consequence was ...?

JEREMY FIELD: For a period of time there were no inspections.

TIM SUTER: Okay, thank you.

SIR JONATHAN MICHAEL: Can I just be clear? Is there a uniformity of the standards against which the two trade associations inspect people?

JO PARKER: Jo Parker, Abbey. I believe so. Jeremy is pulling a face.

JEREMY FIELD: So we went through this thing. I think others were outside the sector as well. It was created following a meeting that was actually instigated by Dignity at Churches House a few years ago, which led to the title Funeral Service Consumer Standards Review, or FSCSR for short, which went through a long process of working with a former inspector of funeral directors in Scotland to try and agree a universal code that was actually consumer-led. For me, it was the chap from *Which* magazine who really opened my eyes to the whole world moving beyond membership bodies doing their own regulation and all that sort of thing.

So we got to the end of that process and had a very unifying -- that was both SAIF and NAFD were there. So I think in terms of the goals for how these things are I think there is a lot of common ground. How that is actually achieved, they've gone in two slightly different routes.

JO PARKER:

I think there was a cost factor, as I understand, that IFSO was extremely expensive for members and that maybe the bigger groups would be able to take on that but the smaller independents wouldn't be able to. So I think that created a little bit of a problem. But I think there is definitely ground for SAIF and NAFD to work together with ourselves on a common ground that would be a code of practice that combines joint members in Scotland who are already going through regulation. And so we've already had to adapt, as you have, the code of practice to allow for the Scottish members to cross-border and still work within the parameters of regulation.

TIM SUTER:

Okay, you had your hand up.

MARIA DAVIES:

Maria Davies, H Porter & Son. So we are SAIF and NAFD. And I've had inspection from both. SAIF's was in-depth, very thorough all through front of house, paperwork, contracts, terms and conditions, through the deceased's journey. Then it was very recently that I had an IFSO inspection and that was very thorough. The only thing that comes off the back of them both is that even though you're signed up to this trade association there's actually kind of, I know the NAFD have just struck two off but that's probably the

first we've ever, ever heard of the NAFD doing that, is that there's never kind of the consequences.

So they'll support you to get your premises, if there is any feedback, into that arena, shall we say. So if I've had a SAIF inspection they'll want to see evidence that one thing has been done. But if you have got a list of, just say hypothetically, another 20 topics, as long as they've flagged that with me you could leave it another year and a half and there's no consequences to you not completing that apart from the evidence that they want to see.

TIM SUTER: Can I ask, rather than -- do any of you publish the findings of those inspections on your websites or do you publish your internal or your own just assessment? Do any of you do anything to help the public, your consumers, understand what those inspections, internal or external, are finding? Yes?

MARIA DAVIES: We don't quite yet. We don't publish any of our findings. The only thing I'd say is when IFSO inspected there is nothing ever to say that inspections have taken place.

So SAIF will come through and send us any information that would be for the annual inspection and we've got our certificate that we can put up.

With IFSO they came, did what they needed to do, left and then there's nothing ever heard ever again. Did you get --

JEREMY FIELD: Yes.

MARIA DAVIES: Did you? No, we didn't.

TIM SUTER: Yes?

LEE PEDLEY: Lee from Neville Funerals. Being members of both SAIF and NAFD I can completely agree with the comments in the room that there is some scope to work collaboratively together. I think in the interests of the common goal of looking after the deceased and the bereaved, I think we can all concur that that's exactly what we want.

But in terms of the inspections of SAIF, we've had both. Not recently, but last year we had SAIF and this year we had IFSO.

Both look at the same thing, to a degree, and actually, the codes are if not similar, so we prescribe to both. I would agree that SAIF was a little bit more in-depth and we had feedback given in a timely way which allowed us to, if you like, you said about do we publicise. I mean this respectfully. It was a good report that we had and we did take to social to shout about that. Had that been the other way, probably not, no?

But I'm still waiting, yet I think it was three months ago that I had my IFSO and I haven't yet had any feedback or any communications from them.

So in terms of both, I think it is both that as a business we look at our overall working process on a lighter base, right here, right now. I think there's a push to inspect places that may be not come back with the feedback that they need to allow members to --

TIM SUTER: Can I ask? How many people are generally involved in an inspection? Is it just one person?

LEE PEDLEY: Just one person.

TIM SUTER: Is that both for NAFD and SAIF? It's one person?

MARIA DAVIES: Maria Davies, H Porter. Two I had for SAIF.

TIM SUTER: And is that because they had different experiences?

MARIA DAVIES: Yes.

SIR JONATHAN MICHAEL: Can I just explore the process a little bit further? Those of you who have experienced CQC inspections will recognise that it's not just having the policies that CQC is interested in, it is actually whether the policies are being followed. And if you read the Phase One report you will see quite a lot of criticisms we had was the difference between having a policy and procedure and actually whether it was being followed.

So the difference, well I describe it as a difference, between where you're told, "Yes, we're following it", i.e. that's reassurance as opposed to a process where you demonstrate that it is being followed, a process of true assurance.

In terms of the SAIF and IFISO inspections, is there any attempt to try and look at effectively following policies or just the presence of them?

MARIA DAVIES: Maria, H Porter & Sons. I think with both inspections, I don't know if this is across the board, you can demonstrate that you've got a policy but never, no policies were ever witnessed or seen by either governing bodies.

SIR JONATHAN MICHAEL: But not even looked at?

MARIA DAVIES: No.

SIR JONATHAN MICHAEL: But clearly you --

MARIA DAVIES: Yeah, so I could take them through a process as, "I would do this and all of this", but no process or policy is ever looked by government bodies.

JEREMY FIELD: Jeremy Field. There's no evidence of the exercise and there's no process for interviewing. Any one of them, the person that intercepts them at the door and shows them around.

JO PARKER: Jo Parker, Abbey Funeral Services. I would suggest it depends on who takes charge of that inspection. So my inspection last year, I asked the inspector to speak to my funeral arranger and one of my back-of-house members of staff.

And so they were asked about procedure and they were asked to show paperwork actually, so to prove that procedure on both front of house and back of house.

I chose for the staff that actually do it every day to prove to the inspector that they knew what they were doing and they followed those procedures.

If another firm decided to put their managing director up front to say, "Yes, I do it all", then I guess it's sort of self-regulatory on that part for

the company to put whoever they want to put forward. You would hope that you put your best people forward that do the job every day.

SIR JONATHAN MICHAEL: But there is no observational component to an inspection?

JO PARKER: As in to be there when it happens?

SIR JONATHAN MICHAEL: Yes.

JO PARKER: No.

LEE PEDLEY: Lee, Neville Funerals. Yeah, I completely agree. It's very much, "Can you show me if you have that policy?" Would they read it and watch you and check the team that are doing that? No. I think it is very much still maybe a tick box and assurance that you have it.

TIM SUTER: Is it correct to call them inspections? They sound more like audits in some way.

JO PARKER: Jo Parker, Abbey Funeral Services. Can I just say, with regards to the observation, it's quite a sensitive nature of our business. So to ask for an inspector to sit in while you're arranging a funeral with a family that may not feel comfortable with that --

TIM SUTER: But could they look at how you ensure the dignity? Could they look at how you ensure the security?

JO PARKER: They should do. They do in the mortuary inspections. But do they ask to see the deceased? No.

TIM SUTER: We know that there has been a documentary broadcast on BBC where a family has agreed, a number of families have agreed. So it's about consent. And that must be possible to do. So approaching things with a negativity that, "No, it can't be done because it's so sensitive", means you're not scrutinising. So I suppose the challenge is to you all, is there a way to square this circle? You work in such a difficult, sensitive, important area. But being open to change as well.

CLARE MONTAGU: Clare from Poppy's. I don't see this as any different from healthcare. My experience of undergoing -- so I used to run a hospice before I came to work at a funeral directors. And we weren't a large NHS Trust but we had a team. We had to submit significant amounts of paperwork on key lines of enquiry. We had back and forth with a CQC relationship manager and then we had a team for two days visiting. They were allowed free access through the hospice, talking to patients, families, staff, porters, whoever. That was part of what animates you to know that this is something that is taken seriously because they have free right of access and I don't see that what we do in the funeral sector is any more sensitive than when you're in healthcare. We were looking after patients who were dying, we were looking after patients who were very, very sick and families who had been or were about to be bereaved and I think it can be equally handled with sensitivity and care within the funeral sector as it can within healthcare.

TIM SUTER: Can I ask? Do you know if there is internationally any system of regulation that is done differently from how we do it in the UK? You seem to make a lot of different approaches --

CLARE MONTAGU: Do you mean of funerals? I have not come across them but because I am a bit of a regulation nerd I will go and do some Googling.

TIM SUTER: You may know the answer.

JEREMY FIELD: Jeremy Field. Yeah, so serial volunteer. So I'm Chair of the Global Advisory Group for the National Funeral Directors' Association of America. So there's a lot more regulation, both at federal and at state level in the US.

Likewise, with friends across Europe and my father was integral in the creation of the European Federation of Funeral Service, which still exists despite recent changes and just talking to them, particularly around that documentary, one of the things that their secretary wanted to understand was whether or not we were allowed to put more than one person onto a private ambulance because there are many parts of Europe where that is not allowed. It has to be one person per vehicle.

So there are lots of different models all around Europe as well.

TIM SUTER: And do you think there is learning that can be brought in, good learning as well as bad learning?

JEREMY FIELD: I think this is learning full stop. Sorry, I wrote some notes on things that you're talking about here but one of the things I wanted to say separate to this is whilst on the face of it within this room we all have very diverse businesses and diverse backgrounds, in my view you don't have a huge amount of diversity of thought around business values and the values that we demonstrate to both consumers and to decrease people as businesses. I hear a huge amount of commonality on that.

The challenge with that here is in this area of saying, "Well, see it positively". Even we are finding it challenging to turn that, it's a really sensitive area. How do we open it up for other people to be involved? If you take the sort of engagement that you had, 1 in 40 businesses responded to your survey, the trade bodies have similar attendance at their educational sessions or at their meetings and then go into a business that doesn't have to be a member if it doesn't want to be and say, "Actually, I want you to see this different ...". "Well you can't inspect in that area. You're not going to talk to my families. You're not going to try and achieve consent. I'm barely happy to allow you to turn up unsolicited. I want an appointment in the diary. I want to know who's going to be here. I want to know who is going to meet you".

So how throughout the sector you drive that sort of change in mindset I think is a bigger challenge even than it is just in this room.

TIM SUTER: Okay. Can I go back to your question actually, about how many of you have been inspected either by SAIF, NAFD or another professional body in the last six months? So ... five and a hesitant. In the last year. In the last year, so we've got eight if it's in the last --

Do you think that's enough? Yes? If you could introduce yourself.

MARIA STIBBARDS: Maria Stibbards, S Stibbards & Sons. A member of the British Institute of Embalmers. And obviously, as a company, we are NAFD and SAIF.

I think there could be value in asking, was it the entire company that was inspected or just one premises.

TIM SUTER: You tell us what your experience is.

MARIA STIBBARDS: So we have a hub which is where we have all our back of house working, fitting out the coffins, the embalming rooms are there. A lot of our care occurs there although we do have facilities at our smaller offices.

Then surrounded by that, we have other offices which have our facilities for the families to use, Chapels of Rest for going to visit their loved ones. Although at our hub we also have those facilities as well and we have had inspections at some of them, but not all of them, in the last year.

TIM SUTER: Why is that? Is that because they're not aware to go and look at those particular other areas? They aren't qualified to look at those other areas? Is there a reason or you're not aware of the reason?

MARIA STIBBARDS: I'm not aware of the reason. I suspect it may well be a resource -- maybe time as well as money from the inspection side of a process. It's certainly not something that we have control of.

TIM SUTER: And just going back to the question, is 6 months, 12 months, is that often enough for wherever that inspection is taking place for the business?

MARIA STIBBARDS: For myself, yes. As long as it occurred yearly I would be comfortable with that. I think if you've got systems that are starting to fail that tends to happen slowly. It's not usually a quick thing. So I think yearly I would be quite content with that, at each site. I'm just not sure how financially or at the time, firstly that would --

TIM SUTER: Just picking up on -- have you got any sites that -- what's the longest a particular site has gone without an inspection?

MARIA STIBBARDS: I wouldn't know without having a look at the records.

SIR JONATHAN MICHAEL: Tim, can I just pick up? I'm very interested in whether or not people have got their own -- whether they call it an 'internal audit process', but an internal inspection, a process. We heard from Richard about a very structured internal audit system there. How many again have got that function even though you may not call it an internal audit? So the majority will be internally inspecting against your standards, even if they're not necessarily the same standards as others. Okay, thank you.

TIM SUTER: Sorry?

JANE CAMPBELL: Wendy, you mentioned NHS there. Could I ask you to just say a bit more about how you are inspected?

WENDY JACKSON: They say, "We're going to turn up at some point in the next however long". They say, "We're coming up to a contract renewal", or "We've got a few things in mind that we're going to be changing. We need to just come and have an update". And I go, "Okay", thinking it's just a meeting or going over contracts.

But then they turn up and they want to look at every single part of my premises. They want to look at how I am storing the deceased, how I'm looking after the deceased. My daily checks on the deceased, how are they recorded? Where do the staff sit? Where do they eat? What do they do? What happens in this room? Where are all the records kept?

Absolutely, there isn't one part -- you know. They look at the CCTV. What's the security? The dates? Absolutely every single part.

TIM SUTER: Do they look at you working?

WENDY JACKSON: Embalming? I've had a couple of requests, yes. I obviously need to know who they are, what's their background, why do they want to? But yes, a couple have, but like I tell them, it's not a spectator sport.

JANE CAMPBELL: When you say "they" who is it that's coming?

WENDY JACKSON: It's usually the head of the NHS Trust. I've forgotten their name.
Sorry.

TIM SUTER: We don't need names.

WENDY JACKSON: No, no. But the head of the East Kent NHS Trust was the last one that came and inspected. Probably a couple of months ago because we've just gone into winter contingency storage on it. So they have to inspect us.

TIM SUTER: What is the outcome of the inspection?

WENDY JACKSON: They love it.

TIM SUTER: No, but is there -- it's good that they love it --

WENDY JACKSON: Yeah.

TIM SUTER: -- but is there a risk? What happens if they don't love it?

WENDY JACKSON: Then they wouldn't use us. There would be no contract.

TIM SUTER: So it's a contractual inspection made as --

WENDY JACKSON: Yeah, absolutely. And every now and again they will just turn up because they've got a new team member and they want to educate that team member in whatever. It's not for me to question.

TIM SUTER: Could I bring in others, Pure Cremation, for example? I am conscious that you are slightly different in all of this. And it would be interesting to hear your views about inspections for your bit of the industry.

DAVID MCLAREN: Yeah, it's very interesting actually. So we're very similar to Richard in the fact that we have a form of self-governing internal audit. We look at all areas of the business on a monthly basis, whether that be health and safety, care of the deceased, our own mortuary facilities. In the fact that we do very little invasive work, our mortuaries are what I class as almost clinical to a degree of computer-based. We aren't in this -- you can have your lunch in there if you really wanted to and that's kind of the level that we operate at. I think one of the other things that's very interesting is the timescales that we work to because we have a larger team with regards to chasing paperwork that our average -- from our instruction to -- it might not necessarily be with the deceased in our care, from our initial instruction to a date of cremation is on average 16 days. So that means that a lot of the deceased will only be in our care for three or four days dependent on when they're released from hospital obviously to collect from families and care homes, means it's a little longer. But the whole emphasis is that we can care for the deceased and process the cremation as quickly as possible to ensure that again they don't have to have that part, we just get them in and they're cremated quickly. So when it comes to the audit side we just we're just looking at our procedures, operations and ensuring that we can get through to the cremation date.

TIM SUTER: Thank you. Can I just go back to the codes of practice? Two codes of practice. For those of you that are members of both NAFD and

SAIF, how does that work in practice? What do you do to make sure that you are complying with both codes?

I haven't done a rigorous comparison but they are different. They have different standards. They have different approaches.

The NAFD is indicative behaviours. The SAIF Code of Practice is in some ways more simple. It's just standards you must comply with, yes/no.

How do you, as an industry, deal with that if you are -- You're obviously applying to be members of both trade associations because you want to do the best that you can, but is there not a risk of confusion with that as well? I would be interested in views. Yes?

LEE PEDLEY:

Lee, Neville Funerals. Having been inspected by both, not once has that been flagged. So I think if we were looking at the whole bigger picture here we'd describe ourselves probably more aligned to the NAFD because of the new indicative behaviours which I think is easier for people to understand. But that's the first, you know.

They are very similar, if you strip it down to the bare bones they very much are near enough aligned to each other apart from is how you interpret maybe the code.

But having been inspected by both I think having received positive from both, albeit the NAFD haven't come back to me with theirs, I would argue, you know, I can only go by their feedback that we're doing the right thing.

And there's an assumption that we have a passion to want to do the right thing as well. So the code falls into our values whichever way you look at it.

So yeah, I must admit, I am not fully versed with both codes and what the comparisons are.

TIM SUTER: Just about costs. There must be a cost implication if you have got to follow two codes that might at particular points have different standards. Making sure you've got systems in place, the equipment in place, to comply with that.

LEE PEDLEY: I think if you look at the care industries from the mortuaries, they set themselves very much with the guidance of the HTA anyway on both codes. So I think if you go with the best practice guidance in that then you can't really go far wrong.

And then on the opposite side, you have got whatever guidance is already out there in terms of from a health and safety perspective that are out there for funeral directors anyway.

So my view is that they both align themselves to the core principles to keep us within the legal realms where we currently are.

TIM SUTER: Can I ask? Do you think the codes of practice that there are, are adequate? Do you do what you need, as an industry, whether it's one, both? And do they protect the security and the dignity of the deceased, which is really what we're most interested in?

JO PARKER: Jo Parker, Abbey Funeral Services. I think the changes that were made recently to the SAIF Code of Practice where it's kind of hybrid with strict rules and good practice, I think that's worked quite well for funeral directors to understand, "Okay, this is what we have to do. This is a good practice to get to that point as well".

And the fact that it's in line with Scotland also for SAIF across borders' memberships. It feels like it's already on way to be regulatory anyway in line with Scotland. There's always room for improvement.

TIM SUTER: So picking up on that, can I just ask? We're talking both about regulation of the industry, of businesses. How about regulation of individuals? And you all might do, as doctors might, just procedures on people. Shouldn't that require a level of regulation and professional standard as well as regulation of the industry?

JO PARKER: Jo Parker, Abbey. I think the importance is that there's good practice, without a doubt. And I think most of us sat round here are of that mindset, the care of the deceased and the care of our families. But as I say as a SAIF member, and I'm not a particularly small funeral director compared to some, I would hate to see a good funeral director was lost because of things that come into practice with a costing.

So there's a licence fee; there would be a cost for each member of the funeral home to be licensed, or a funeral home to be licensed. And do you licence every funeral manager and every bearer and every funeral director? And then you've got of course casual staff that you use from, like you say, to just carry the coffin. Are they licensed? It goes on.

And the cost implication is going to be massive. And as I say the independent sector carries a great deal of funerals in this country for families. And it would be a shame to lose, due to regulations, that

when they were providing a good service and a good practice but changes meant that they couldn't afford to.

TIM SUTER: They are an important part of the community and a local presence is important as well as the national presence.

Can I just take you back to, nearly all of you put your hand up when the Chair asked, can you tell us about something that's worrying, bad practice? So it's how you balance the cost and how you make sure that the bad practice that you are all aware of, the public might not be, but you in the profession are aware of.

How do you square that? And I'm not saying I've got the answers to that but it's throwing it out there for you to help us. Yes?

JEREMY FIELD: Jeremy Field. So it probably takes us back to the risk management, earlier on. In terms of, so this is from our point of view, for anything beyond washing and dressing, then anyone working in mortuaries working towards their MBIE, a Member of the British Institute of Embalmers, which is kind of the best qualification in the UK for that. And that really stems from what you say there about that they are working on procedures which in any other context would be seen as clinical.

TIM SUTER: That's really helpful.

CLARE MONTAGU: Clare from Poppy's. So I think it's a really interesting challenge you put to us. And I think in some ways the idea of professionalising and putting the onus on individual registration would also deal with some

of the other problems that the sector has, not least the kind of low pay, the low status in some cases of the funeral sector.

I think there is something about the funeral sector and the people who often come to it, it's not the thing that -- you might have a family firm and you want to go into your family firm but generally, people don't grow up saying, "I want to be a funeral director", in the way they grow up saying, "I want to be a doctor or a nurse or a solicitor".

So I think there is a really interesting idea about whether you professionalise and therefore raise the standards of the funeral sector and also raise the standards and also the pay of people in the sector as well and try and bring that on a level with other professions that have the kind of responsibilities that are associated with that.

I think the reality would be because of the way the fragmentation of the sector at the moment is you would certainly see independent funeral directors going bust and you would see a degree of kind of consolidation. So it's a quite significant potential change to.

SIR JONATHAN MICHAEL: Can I just ask which staff, if you -- which group of staff --

CLARE MONTAGUE: I mean certainly I would have thought embalmers, for example, would be absolutely people that you should do. And I think you could also start asking for a certain level, you know.

We don't have a strong enough, I don't think, NVQ set of qualifications within the sector as a whole. So you can pick off certain professions like embalmers. But the qualifications for how you look after people in a mortuary or how you make arrangements in funerals are only done through, again through the individual trade bodies.

And I'm not qualified to say whether they are good or bad but they are not based on any, you know, that's what the individual trade bodies have decided.

I would have thought that a more centrally underpinning set of what learning and development looks like at various different NVQ levels with a proper progression through the process would work for the different --

TIM SUTER: As those involved in the profession, do any of you have to do continuing professional development? Do you have to get so many points or anything like that?

JO PARKER: We all do FCA now. So --

TIM SUTER: Can you tell us a bit more about --

JO PARKER: Jo Parker, sorry, Abbey. So for all of us that are doing the funeral plans which is now being regulated by FCA, you have to do continuous learning through that.

So that's through training on the actual funeral planning website themselves through their learning or through going to trade association meetings, education days etc.

TIM SUTER: So how many of you across the board found that regulation through the FCA? Because that's quite a sea change. Has that had a positive effect? Has it had a negative effect? I would be interested to know just to compare what we are talking about with perhaps wider regulation.

JEREMY FIELD: Jeremey Field. I think Jo said earlier that people have stopped selling funeral plans from the businesses because they feel that the CPD requirement is onerous, some of the other information sharing as well. That would be my observation.

TIM SUTER: So does that mean it's gone underground in some ways? So you are less able to identify?

JEREMY FIELD: I think smaller businesses have been disadvantaged and it is now an area that they can't operate in because they can't achieve compliance.

Very quickly on Clare's point. The licensing in the US, it's not universal state by state but you have to get a university qualification in some states to work as a funeral director and embalmer.

So other operative levels, not as much, but if you're going to even join a funeral firm as a funeral director/embalmer then you will have been through university and therefore the CPD stuff comes with that.

Their annual conference and things come with CPD point sessions.

So you check in, check out. So you are achieving your continued requirement for your licensing at state level.

TIM STUER: Okay. Can I ask? Insurance. Do your insurers ever ask whether you are a member of a trade association and the outcome of those inspections? Yes?

MARIA STIBBARDS: Maria Stibbards, S Stibbards & Sons. Member of the British Institute of Embalmers and other qualifications held.

I have multiple insurances because I teach embalming. So I have insurance for my teaching side of things that they certainly ask about certain things, qualifications.

And then obviously I am employed as an employee of the company and the company itself has insurances in place, some of which we obtained through really good that it works out, trade associations.

So the actual nitty-gritty of how those policies were set up, better ask from the trade associations themselves.

TIM SUTER: Are you ever asked as someone who is the beneficiary of an insurance policy what the outcome of an inspection is to reduce your premium?

MARIA STIBBARDS: Not me personally.

TIM SUTER: Has anyone? Yes?

JO PARKER: So if you're a member of SAIF you can get your insurance through a company called SAIF Insurance, one of our associates. And to get SAIF insured you need to be a member of SAIF. So if you don't work within the guidelines of SAIF you don't pass your inspection.

TIM SUTER: That's helpful.

JO PARKER: You would be a member if you could get insurance, so that in itself --

TIM SUTER: Yeah, okay. Just going back to education and training. Some of you have touched on this and we know that there are different diplomas

that you can have. How do you ensure just equivalent standards for all of the industry?

I don't know whether any of you have got views on the different approaches that are there. You have obviously talked between you about internal training programmes.

Is there anything that is a national diploma that, across the board, everyone has to reach that standard? And should there be?

JEREMY FIELD: Jeremy Field. You said does everyone have to reach that standard. And the answer to that is no.

I don't know much about some of the other diplomas. We use the NAFD diploma because we are NAFD members and that makes sense. It's a Level 4. They have been through a benchmarking exercise because that is one of the challenges that exists, as I understand it, around NVQs and the transferrable skills that have to be demonstrated in NVQs but VQs are possible and we have been down that line before.

But yeah, specifically we choose -- anyone that joins us as a funeral director has to qualify with their NAFD diploma in funeral directing within two years, which is quite challenging because it's quite a long course and there are qualifying criteria that go in there as well. If it gets beyond two years you can end up with a funeral director that's not qualified, that you don't have the employment rights to get rid of their services, not that I would want to do that sort of thing. So that's why the two-year criteria.

The NAFD have changed the nature of theirs a bit over the recent years. And it's in another iteration at the moment but we have an NAFD tutor working within the business because I took the view that I

wanted to teach people in our own style so that we weren't teaching people to pass, we were teaching people to demonstrate practice in the workplace.

TIM SUTER: Has that been effective?

JEREMY FIELD: Yes.

TIM SUTER: Okay. Yes?

LEE PEDLEY: Lee, Neville Funerals. We have our own internal tutor as well. And we actively encourage all of our funeral directors and funeral arrangers to be qualified and it's normally through the NAFD that we gain that qualification for them. We've recently recognised the lack of training within our kind of funeral operative or driver/bearer population.

And so the NAFD recently did an online, in partnership with the university and we took all of our guys through that and it's something that we continue to do, which is the right thing.

CLARE MONTAGU: Clare from Poppy's. We do our own internal training of funeral directors, transport advisors, mortuary logistics and practical leads which are the people who are doing the different jobs on the front line. And we do a regular review and update but that's very much ad hoc. We are very comfortable that it works to our standards. I think one of the things, going back to the point about potentially a national policy framework or a national learning framework, I would really like us to be able, for example, to take on apprentices. We

have also been trying to do some outreach with, in fact, people are, I was about to say 'discharged', that's my healthcare, leaving Wandsworth Prison, which is local to us.

I think there are real opportunities for us to provide, have inclusive recruitment and to be able to provide opportunities for people to grow throughout the sector.

The difficulty that we have, I think and I don't know if this is true elsewhere, is that absent a recognised national framework except unless you were going for something like an embalming qualification, which is not something we do, that it is quite hard to attract people to be able to provide the training that would enable them to leave and move on with an NVQ2 or a 3 or a 4 that they can either take elsewhere into the sector or move along.

TIM SUTER: And just a challenge I suppose back to you is, DBS checking, trying to bring in a diverse workforce, which is to be applauded, absolutely. But it's how do you make sure that the person who has died who you are looking after, is cared for in the best way by the right people?

CLARE MONTAGU: Yeah. So I mean at the moment using the diverse recruitment does not override the need for proper safeguards in place. So we would apply exactly the same thing. So people coming in need to be supervised, that there needs to be proper oversight with them at all times.

Certainly, if we were recruiting people from potentially higher-risk populations, like ex-offenders, the organisation we've been trying to work with is a charity that specialises in placing offenders and

obviously, there are certain types of offences that we would not go anywhere near.

But actually, the main issue for us, and in part because what we do is wonderful and it is such a privilege, but it's not the kind of thing that if you don't know anything about -- we're not great guests at a dinner party.

I mean we're fine when we get going and when I can talk passionately about the work we do and how important it is people will light up. But it's very difficult to encourage say a young-ish man who's at a bit of a loose end to come and frankly work with dead bodies. But the idea that I can introduce him to do something where he can change people's lives and also get a qualification that he will be able to take with him in whatever he does next, is a hugely attractive sell.

Just trying to say, "Come and work for a job where we will pay you above the London Living Wage but where you are going to be working with people who are dead and actually, in Asda, you can earn, like £3 more per hour stacking shelves". That's quite hard.

TIM SUTER: Yes?

JO PARKER: Jo from Abbey. Just to say that as I said before as a SAIF member we use IFD. IFD College and --

TIM SUTER: IFD, just as the acronym?

JO PARKER: Independent Funeral Directors College are looking to work with SAIF. So they do modular training courses that cover both front and back of house up to a Level 4 or 5 as well.

But we are also looking at doing some bite-size training that you would be able to use on induction of new members of staff so that it would help with the induction process for -- you've got your health and safety anyway but front office as well as back office.

So I think apprenticeship is also something that SAIF is looking to work with. So it helps by being a member of the trade associations because you are open to what's coming in to help your business grow in the right way.

TIM SUTER: And just my final point on training is do you all do refresher training? That it's only so good doing, "You're new, let's expose you and train you to all of the good practice".

Just tell us a little bit about refresher training. I would like to hear some different people as well, if we can. Yes?

RICHARD VAN NES: So we have an internal training department with full-time trainers, we have about 20, 30, 40 different courses from management courses to funeral cars and everything in between. And yes, there's a renewal cycle so we are currently working on setting that particular course, you need to do every two years or every three years.

New starters go through an intensive induction programme with a number of mandatory courses, so there's an interim course that they must complete before they are confirmed.

TIM SUTER: Okay, and right up to senior management?

RICHARD VAN NES: Correct. Right up to the CEO.

TIM SUTER: Good, okay. Yes? Just introduce yourself.

DAVID MCLAREN: David from Pure. So yes, on the back of a three-month induction we have classes that are rooted to competency where we set a set of standard operating procedures which is the framework to how all our operatives will work in the business.

That is also then reviewed every six months by the department who are maintaining those standards so we can review, we can look at, we've got areas that we are falling short on, raise the standards and then we will retrain again every six months and yearly as well, to ensure that everybody is fulfilling the practices.

TIM SUTER: The last topic, maybe the last question from me is, would you all welcome regulation? I would just like a show of hands. So it's six and then we have got some half hands that is five, so it is split. And why the half hands? Just punchy, short. Tell us why you are hesitant and we will just go around to those who --

JO PARKER: I would like it to cover the complete sector. So to take into account smaller funeral directors so that it's not pitched at a level that the smaller funeral director couldn't compete with.

TIM SUTER: Thank you.

JEREMY FIELD: Reasonable and proportionate.

TIM SUTER: Reasonable and proportionate. Who else had a half hand?

RICHARD VAN NES: Exactly the same as Jeremy, it needs to be proportionate.

TIM SUTER: Okay. Same? Anyone else have a half hand?

LEE PEDLEY: The same and cost.

TIM SUTER: And cost, okay. And those who --

SIR JONATHAN MICHAEL: The interesting thing is the half hands appear to be more from those that have got larger organisations and therefore have more infrastructure and process, so therefore are more confident potentially in their own delivery. Would that be --

JEREMY FIELD: Jeremy Field. I'd definitely say I wouldn't see regulation as being something to be afraid of.

TIM SUTER: And I am really conscious that we have got different industries as well, different parts of the profession. What do you think about regulation? Do you think you should be in the tent? Outside the tent?

WENDY JACKSON: Absolutely in, yes. Yes, I would welcome more inspection from anybody who was qualified to do it. Not Joe Bloggs who, with the best will in the world might have an interest in it, may have read a few books or done a few online courses, they need to have been

hands-on and been to lots and lots of different premises to see what's good, what's bad, what can be changed.

Not every premises could be changed but maybe some premises shouldn't do certain things, shouldn't house deceased, because they don't have the facilities. Their premises can't be adapted for that but they have been in that area for so long, they won't move.

But I would absolutely welcome anybody coming round and saying, "Wendy, you've got this wrong. If you did this it would be much better". And if it makes sense and it's all for the care of the deceased, absolutely.

SIR JONATHAN MICHAEL: But can I be clear? When we're talking about regulation, I'm talking about compulsory regulation. Therefore with implications if, in fact, you fail to pass. And who should be doing that?

TIM SUTER: CQC?

JO PARKER: Trade association.

CLARE MONTAGU: I would vote CQC because there's a framework already in place. I think just the idea of setting up a new framework, having lived through CQC's institution 15 years ago, I would vote CQC. But it's a big step for the profession.

TIM SUTER: Yes.

MARIA STIBBARDS: Maria Stibbards, S Stibbards & Sons. Don't get me wrong. You know, I am -- not so important to me who does that regulation as long

as it is thorough, robust to protect the public but also consider the funeral directors as well. So the cost implications.

I find it quite frightening that actually you yourself could, tomorrow, turn round and say, "I'm an embalmer" and go out and charge money for that.

SIR JONATHAN MICHAEL: I find that quite frightening.

MARIA STIBBARDS: The reality of the situation, I would also very much like to see the British Institute of Embalmers involved in any further discussions on that because they understand.

TIM SUTER: Okay, that's very helpful. Yes?

LEE PEDLEY: Lee from Neville's. I think it all depends in which arena you are playing this, whether it's the whole sector or whether it is, if we were stripping this down to care of deceased and mortuary facilities. If it's the care of deceased and mortuary facilities I think personally the HTA and having everyone under that licensed premises, because that covers the other area where it looks after deceased as well, including ourselves. But it does depend on which realms you're looking at that, whether you're looking at that holistically bigger or whether you are just ringfencing it back down to this.

TIM SUTER: Yes?

JEREMY FIELD: Jeremy Field. I too lean towards the CQC rather than the HTA. But the most important thing to me, from what we have seen from other regulatory bodies recently, CMA in particular, is whoever it is, a) I would like to see some proper industry input into it but I'd like to see genuine independence.

And more important than anything else would be that it is properly resourced.

TIM SUTER: So just picking up on that, and this really is my final point. How do you, as an industry, take this forward? What is the most ...? There are so many views here, all helpful, all engaging. How do you make sure you're speaking as an industry with a voice to it is going to require engagement from government? What do you think that looks like being taken forwards?

JEREMY FIELD: Jeremy Field. Apologies, Tim, for speaking yet again. But for me, the challenge is around this fragmentation point. And Jo's been using really good inclusive language about working together. But we just don't as it stands at the moment.

And there is an awful lot of celebrating in which we are different as organisations and businesses and things like that rather than, as I was saying earlier, recognising the commonality of endeavour.

I have given time to it through the NAFD, but that just happens to be the body that I'm a member of. And I know Jo's given a huge amount of time to it through SAIF and Richard and others around the table all have, but all in individual channels. Other than the FSCSR work actually which was when we all came together.

I think the end of that was really disappointing. That was the opportunity --

TIM SUTER: What was the end of it? Because I have to say it's not really publicly available, as far as I can see.

JEREMY FIELD: I think I am not going to advocate on the publicly available, but I thought they'd published a lot of stuff, was ultimately it was -- I don't really know how it ended actually. But I know the NAFD to a degree took the recommendation forward.

TIM SUTER: And so that is IFSO and --

JEREMY FIELD: Yeah, which ultimately resulted in IFSO... But the bit that we didn't pick up earlier about the inspection part was this self-audit.

One that IFSO wanted to do was create a self-audit process so you were self-reporting against the code back to IFSO and then being audited on it later to try and address this resource issue for inspection. But the feedback was they wanted to see people in funeral homes, they inspect against the code.

CLARE MONTAGU: Clare from Poppy's. It was just in response to your point. I mean I think we are fragmented as a sector and I can't see us coming together with one voice. We can't manage it with 12 of us reasonably engaged in the room, we're not going to be able to do it as in industry. But are we any different from care homes? I mean care homes are some very large conglomerates and a lot of individual -- some are like

Jeremy's firm, sort of a number of different sites and quite large. And some are sort of mom-and-pop shows and sort of care homes manage.

And also care homes experience very similar structures as we do, particularly in respect of the wages and the workforce and so on. It is a different set-up from healthcare.

And so I wonder whether actually, that is the sort of analogous policy model for us.

TIM SUTER: Okay, that's really interesting. Thank you.

JO PARKER: Jo from Abbey Funeral Services. I see what you're saying about the care home but I don't think we are quite the same because we have, all due respect, a model with Pure that's so very completely different from the funeral homes that we will have, whether they be small or large.

And how you can tie in the online funeral directors who have very different models to the groups such as Co-op down to the single man in Wales. It is such a big profession and so diverse, to be able to encapsulate all as, like, we were saying if it's the care of the deceased I think you could regulate that in a uniformed manner. But actual practice, your practice is very different to my practice. It's not wrong or right, it's just what's right for my families in my area. And it's all geographical as well.

TIM SUTER: Okay, that's really interesting. And I think the last point.

LEE PEDLEY: Lee from Neville Funerals. I think, yeah, just I fully agree the CQC potentially for us as an industry. But if we're looking at this as care of deceased and in other places which, let's be honest, that's what we are looking at, there's deceased can rest in many different locations and not just us as a funeral industry. They could rest in hospices, places like that.

So I think the overarching, if we're looking at just the deceased and that's why I go back to my first point, and that is: what are we looking at here?

If it's us as an industry, one voice and all of that, I agree, there is, but in what we are looking at here today and the reasons why we are here, that's why I lean more towards the HTA.

TIM SUTER: Thank you very much.

SIR JONATHAN MICHAEL: Great. So it is just after 1.00 pm. We said we would finish at 1.00 pm. So thank you very much indeed all of you for coming along and participating. It has been really helpful and we will certainly take away everything we have heard today.

And if you have got further thoughts after today's discussion, or anything you think would be helpful for us to see, documentation or whistleblowing even, if you have got some suggestions of the places we might want to visit, feel free to be in touch with the team.

Once we have completed the seminars we are going to be placing the recordings on the website and transcripts. And we will let you know when we do that.

But meanwhile, as I said at the beginning, it would be helpful if we just keep the discussions confidential rather than sort of sharing them around as we go in the protocol.

So from me and from all of us, thank you very much indeed for your time.

(Meeting concluded)