

Why I believe the funeral industry should be regulated - from an embalmer's point of view

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I have been a B.I.E. qualified professional embalmer and restorative artist in the funeral profession for 24 years. I have also been an accredited tutor of the British Institute of Embalmers for the last 12 years, and teach technical skills, anatomy and basic physiology to embalming students.

Introduction

It is the embalmer's responsibility to preserve and prepare the deceased for a pleasant viewing experience, and to ensure that there are no decompositional changes until the disposal of the remains. Due to legal medical death documentation this often means that it could be 8 – 14 days before we can embalm the deceased person, and there may be 4 – 6 weeks from the date of death to the funeral. Medical advances in the treatment of patients is making embalming as a whole increasingly challenging, as the nature of post mortem changes in the body accelerate or are more complex. This combined with the extraordinarily long delay between death and the funeral makes embalming in the U.K. possibly the most challenging on a technical and skill base level, as most other countries will have concluded their funerary rites within one week. On top of this, many cases in the U.K. return to the family home before the funeral, or may have an open coffin in a place of worship; these are places where funeral staff have little if any opportunity to monitor the condition of the deceased and address any problems which may arise.

Under normal conditions embalming a deceased person requires raising arteries to inject diluted cosmetic preservative chemicals and draining from the venous system returning blood, followed by chemical cavity treatment of the viscera. When embalming a post mortem case, embalmers have to manually treat the viscera with chemicals and are reliant on being able to find and inject the disarticulated proximal arteries with cosmetic preservative chemicals to restore the person to a more pleasant, pre-mortem condition. We must also halt any leakage issues or infectious risks in consideration of the health and safety of other staff members, for public health and for the psychological benefit of the family.

Even with my technical skills and experience the nature of modern death is more technically complex than 20 years ago and post mortem cases can be challenging to the extreme. The effects of indiscriminate evisceration during post mortem examination means that the embalmer will be exposed to biological and potential chemical hazards for far longer than should be reasonable. This is in an attempt to hide any evidence of the unfortunately invasive necessity of a post mortem examination, and the embalmer may resort to higher risk surface chemical treatments and hypodermic injection of unsaturated tissues.

Embalmers have no legal rights to know the true nature of the causative pathological agents or the medical events responsible for the death of a person, so working with potential infectious diseases is a constant risk as we are not considered medical professionals and are not privy to this essential information. If we do receive information or advisories it is insufficient and there is a risk of legal action from the client if we refuse to embalm a case, regardless of whether the NHS advises against embalming (except in a confirmed category A disease circumstance). Furthermore, despite being exposed to blood and body fluids on a daily basis – just like some medical occupations – we have to

pay privately for prophylaxis vaccinations and subsequent boosters and checks. This is sometimes covered for P.A.Y.E. embalmers under the occupational health service provided through the funeral company, however self employed embalmers struggle to access this service. Yet one can go on a safari holiday and receive some of the same vaccinations for free on the NHS.

In simple terms embalmers use mechanical means to inject diluted chemicals into the vascular system which by diffusion and osmosis saturate the body tissues, denaturing them, and the displaced tissue fluids of the body are subsequently drained away. The hollow organs of trunk are punctured to drain out the body fluids within, and then the inner surface of these organs and the commensal bacteria which are the natural causative organisms of decomposition, are treated with preservative chemicals. The body surfaces are disinfected and the hair washed and dried. The summative result is a sanitised aseptic body with temporarily preserved tissues greatly retarding the activity of microorganisms, and the deceased person is restored to a life like appearance.

In our modern society the death of a loved one can be beyond comprehension for some people to initially cope with. The psychological wellbeing of the bereaved and the ability for people to return to normal activities of social and working life is essential. Professional embalmers can make this goal more attainable, but this is not always easy due to the damage done to the vessels of the arterial system after a post mortem examination, or the advanced condition of the body due to medical intervention or delays releasing the deceased. This is further aggravated by the commercial pressure of time which is placed upon embalmers by funeral companies or the family's high expectations of the profession. A voluntary hospital post mortem or tissue/organ donation is often a gift from the family for the benefit of others, and most deaths referred to the coroner are of a distressing, traumatic, criminal and/or sudden nature. There can be feelings of guilt, anger, shock and denial for families. This leads to a greater need for people who are grieving to spend time with the deceased until the funeral takes place to achieve acceptance of loss, closure and a peaceful final image.

Areas of concern to the embalmer:

Currently the funeral industry is self regulating through trade organisations such as the N.A.F.D., B.I.F.D., S.A.I.F., and the B.I.E., and all funeral companies should follow current H.S.E. regulations at work. In my experience this does not work and the laws are very often ignored through ignorance or a notion of being untouchable and the fact that no one really wants to know what goes on, so a blind eye is turned by trade bodies and governing officials. This leads to lack of training amongst staff, and in some cases not wishing to speak up with regards to company conduct or health and safety issues for fear of losing employment. There is also a complacent approach to infection risks working in the death care profession, mainly due to the fact that we are few in number, employees do not often contract diseases at work and if they do the number is too small to make government statistics for the H.S.E. to notice.

It is my belief that embalming should only be performed by persons suitably trained and qualified to do so, in an embalming theatre fit for the purpose.

Not all funeral companies embalm and not everyone for whatever reasons will agree to the embalming of the deceased, but the nature of the disposal of the dead means that at any time staff will come into contact with bio hazardous matter; faeces, blood, body fluids and pathological agents are a constant risk factor for all who come into contact with the deceased or any residues as a result of handling or transport of the person after death. The family have the right to view the deceased

person even if they have not been embalmed (regardless of their post mortem condition) which will require a member of staff, who may or may not be appropriately trained, to perform 'last offices' – the closing and sealing of orifices, washing and disinfecting the body surfaces and hair, dressing the deceased and placing them in coffin. The family may wish to be involved in the preparation of the body as part of a funeral rite.

Who can embalm?

At this time anyone can call themselves an embalmer and practise having read about it, been shown by someone or take a week long course. There have been incidents where an embalming service has been offered to funeral directors by moonlighting mortuary technicians in NHS facilities.

Training of funeral staff:

Funeral companies in general have a small fraction of trained full time employees. Many employees in the funeral profession are casual workers, part time or contracted as and when required, so education and training is often left down to the individual or overlooked.

Who should be able to embalm?

At the time of writing there are only 1306 B.I.E. qualified embalmers and 203 student embalmers training in the U.K.. These people will have studied for at least 2 years the art and science of embalming through the B.I.E.'s modular programme of embalming education, having been examined theoretically and practically. The B.I.E. education and membership is considered worldwide to be of a very high standard and the only current standard of tuition in this field in the U.K., but we are not considered medical professional or even technicians –that is, until we try to get general insurance policies, professional indemnity and public liability insurance (which many funeral companies insist we have to enter and practice in their premises) –it is then that embalmers are grouped for risk with dentists, chiropodists and chiropractors and high risk NHS staff, all of which have high premiums, yet the annual earnings for an embalmer are far below these professions.

Although the B.I.E. membership is the accepted as a standard for the funeral profession, trade organisations do not insist that their members only employ the services of qualified professionals. This in reality means that many funeral companies will employ the untrained and cheapest jobbing person offering their services. This devalues the professionally qualified embalmers who have invested in their vocation and puts everyone at risk of infection, quality issues and charlatans who are just financially motivated due to the lack of legal regulation.

Who can purchase embalming chemicals and equipment?

Anyone can purchase the equipment, surgical instruments and hazardous chemicals for the purpose of embalming. The reality is that unqualified and untrained people do not have the storage and user knowledge for the chemicals or the risks and in most cases will fall foul of the C.O.S.H.H. regulations 1990.

The only people who should be able to procure embalming chemicals should be suitably qualified in their safe and technical use, or through funeral companies who employ a qualified member of staff. The Biocide Directive from the E.U. is effectively putting these products into the realms of controlled substances such as poisons and volume industrial pesticides.

Where can embalming be practised?

Currently dead bodies are being embalmed anywhere. The following are all true; corridors, garages, sheds, in the person's house, the funeral director's kitchen, on stretchers, in coffin, an old door on two trestles, in the viewing room (chapel of rest). Although these all break current Health and Safety laws, it is happening on a daily basis across the country. Many funeral companies do have suitable embalming or preparation rooms, some acceptable, a few above and beyond, but many have nothing at all. This is frustrating as the basis of the funeral profession is to safely transport and care for the deceased for the family in a dignified manner, with a responsibility towards public health prior to the funeral service and hygienic disposal of the remains. The funeral profession has a very shiny facade with hundreds of thousands of pounds invested in the areas which are seen by the public, but behind this in many premises the facilities are not fit for purpose or even non-existent and falling short of so many regulations and legal acts mentioned herein.

The reason for this is that anyone can open a funeral company and trade as there is no regulation other than change of use, planning applications for work intended, or H.S.E. inspections as the industry is self regulating. Some companies do pay councils for inspections to maintain a standard and to protect the public and their company and staff, but as this is not required to trade most do not. Years ago a large trade organisation would only accept members if they had a qualified funeral director in the company and been commercially trading for some 3 years, but this has all changed. A proprietor can join a trade organisation almost as soon as the door opens to trade and have no qualifications in the nature of the business. It seems to be all about volume of subscriptions and there have been splits in trade bodies so there is no longer a single voice of representation for the funeral profession. Although the B.I.E. and the B.I.F.D. will only accept members who have educationally trained and qualified to a standard set by them, they are both of a small membership and do not have the financial power to maintain standards or implement change throughout the funeral industry, and can only implement the regulation, knowledge and skill base of their own members and lobby for change.

Considering the true nature of the biological and chemical hazardous matter that the profession handles in the interest of public health and in the interest of society's wellbeing, some of the funeral profession's practises leave much to be desired.

What should be the minimum embalming room standard?

Even if a funeral company does not embalm, there should be a basic preparation room as the nature of the business will require handling and simple preparation of the deceased, including disinfection of the body, washing hair, dressing and placing in coffin; all of these activities require close contact with the deceased and thus staff are exposed to potential biohazards and body fluids. This preparation room should have sealed wall covering, nonslip welded and sealed flooring to allow for surface disinfection, good natural lighting and daylight electric lights. All electric sockets and switches should be of a waterproof type, there should be mechanical lifting equipment (manual handling regulations are flouted very often there are no lifting aids or staff do not use them), a stainless preparation table, a foul sink with drainer, a clean sink with drainer, a hand washing sink, an insect trap and relevant sundries – soft clinical waste depository, sharps box, paper towel, suitable disinfectants and first aid provisions based on current H.S.E. regulations.

In my experience companies who do not embalm will call a contract embalmer when they encounter problem bodies or have a repatriation case to comply with the transport of deceased persons as

stated by airline policy. Badly decomposing or oedematous cases which are leaking large volumes of body fluids and releasing putrid odours are the main reason to call an embalmer in, but these types of embalming cases are of a higher health risk than normal cases and the facilities to undertake this are rarely in place as previously stated.

If embalming is performed as a service provided by the funeral company then the above preparation room requirements are needed with the addition of a sluice for the disposal of aspirated body fluids and bodily contents, and work surfaces for equipment. A low level exhaust ventilation (L.L.E.V.) unit with a fresh air inlet in the ceiling is mandatory. It must be capable of changing the volume of the air in the room 20-30 times per hour, which should maintain the current formaldehyde exposure level of 2 parts per million. This equipment is essential as it will draw clean air over the embalmer and deceased, pulling dense formaldehyde and chemical compounds as well as aerosol pathogenic particulate down and away from the operator, and out of the embalming room. As embalmers are exposed to risks from pathogenic organisms, organic and inorganic chemical compounds the low level exhaust ventilation is the only true protection because currently there are no respirators which can filter out all risk factors - they only work on biological particulate or chemical vapours and I think embalmers in the U.K. are the only work force to be potentially exposed to both risk factors simultaneously.

There should also be separate changing and washing / shower facilities available, so embalmers do not carry out of the premises any pathogenic matter, and in case of accidental contact exposure with the chemicals used. These facilities as well as L.L.E.V. are a rarity in my experience in funeral premises around the U.K.

The above does not have to cost a fortune from mortuary equipment suppliers. There are many commercial and domestic catering and bathroom products which would meet the basic requirements of fit for purpose and at a lower cost. Based on what is spent by the funeral industry on what the public can see, the cost of compliance is a small fraction of what is spent and will last for many years - there are no financial excuses for not having these basic facilities in place and complying with current Health and Safety legislation.

Embalming P.P.E. (personal protective equipment):

All of the following are recommended by the B.I.E. for the purpose of embalming:

Non-slip chemical resistant boots, basic scrub suit, hair covering, surgeon's gown, disposable arm protectors, disposable heavy duty apron, chemical and biological high risk examination gloves, surgeon's bio-particulate filtering face mask (also organic and inorganic chemical canister respirator), goggles, safety glasses or face visor.

I have seen far too many people remove their suit jacket, adorn a white lab coat, put on a pair of thin latex examination gloves and proceed to embalm with complete disregard for any risk factor to themselves or others.

Conclusion:

There are many highly professional embalmers, funeral staff, funeral employers and companies in the U.K. who adhere to or go above and beyond the call of duty to maintain standards and protect the public, families and staff. However there are also many who have no ethical conduct. In my

opinion without any legal regulation of the working activities and practises of the funeral industry, the government and the funeral industry is seriously failing to protect the public and the people who choose the caring of the dead as a vocational profession. This lack of implemented governmental regulation is leading to potential public health issues and complacency in the workplace by companies, employers and employees with regards to health and safety.

Due to the fact that there is only a very small number of qualified professional embalmers in the U.K. we only have a small voice and are the unseen back of house practitioners of the funeral industry. Many embalmers are self employed and feel that the funeral industry fails to support or encourage them even though we are essential in many aspects of death care. The members of the B.I.E. who support the institute work hard and at their own expense to maintain a voice for our members, but often in the past the institute has been overlooked when important debates happen or are not consulted when policies directly affect our members.

If regulatory measures had been put in place many years ago by the U.K. Government and funeral trade organisations, we would have had a stronger stance in Europe with regards to the implementation of the Biocides Directive. If only we had had Government regulatory standards of professionalism and very high standards of practice implemented across the profession, the funeral industry and its manufacturing suppliers would not now be stuck in a seemingly endless and money bleeding cycle to justify the use of the chemicals we use for the purpose of embalming, as the European Union usually takes the country with the highest regulatory standards of practice or health and safety regulation as a baseline when implementing laws and acts.

Embalming should only be practised by those who are suitably qualified and trained, and in premises licensed and fit for the purpose of embalming.

Considering that the above statement is fundamentally covered by the Health and Safety at Work Act 1974, C.O.S.S.H. Regulations 1988, Sections 1 & 2 of the Environmental Protection Act 1990, the Howie Code 1991 on Health and Safety in Mortuaries and the fact that most of the funeral trade bodies have a health and safety document available to their members, I was stunned at the comment returned to me from a past president of one of the funeral trade organisations when I mentioned the above statement; the implied response was that *"it would cost embalmers their jobs if regulation was implemented upon the funeral industry by the government."*