

Public health funerals

Purpose of Report

For direction.

Summary

The UK Commission on Bereavement reported in October 2022, with a number of recommendations for organisations involved in the provision of bereavement services, including councils. There is a particular recommendation on creating new regulations for public health funerals. We are seeking the Board's approval to do research into this area.

LGA Plan Theme: Strengthening our Voice

Recommendation

That the Members agree to the next steps set out in paragraph 24.

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Public health funerals

Background

1. In October 2022 the [UK Commission on Bereavement](#) published their report [Bereavement is everyone's business](#), containing recommendations regarding the way in which people's experiences of bereavement could be improved.
2. Recommendations were aimed not only at the Government but also at other organisations. There were a number that were aimed at local authorities, on issues such as death registration and public health funerals.
3. The recommendation on public health funerals will be of particular interest to the Board.

Public health funerals

4. The [Public Health Control of Disease Act 1984](#) gave councils a statutory duty to bury or cremate someone that died within their area, or been found dead in their area, where "it appears that no suitable arrangements for the disposal of the body have been or are being made". Primarily this duty is designed to cover situations where someone has died and there are no known relatives to arrange and pay for the funeral. Councils may recover the costs in arranging the funeral from an estate for the funeral expenses, though this is not always possible.
5. In 2011 we conducted [research on public health funerals](#). This included recording the numbers of these funerals undertaken by local authorities, the reason for the funeral, and the costs. The response rate was 46 per cent. We found that the estimated total cost of public health funerals in 2010/11 was £2.1 million, with the median average spend of £3,900. A small proportion of local authorities had held a significantly higher number of public health funerals than others. The research also highlights that the reasons for the authority needing to organise a public health funeral could have been changing with 52 per cent of respondents observing an increase in the number of family or friends unable to contribute to the costs of a funeral.
6. Since 2011, we have experienced a number of large-scale events that are likely to have had an impact on councils and their public health funeral provision, including the Covid-19 pandemic and increases in the cost of living.

The UK Commission on Bereavement

7. The UK Commission on Bereavement undertook research between Autumn 2021 and March 2022, bringing together 16 Commissioners with a range of backgrounds to learn

from people's experiences of bereavement and make recommendations on how these experiences could be improved.

8. The Commissioners were supported by a Steering Group made up of a number of voluntary sector organisations including Marie Curie, Independent Age, Cruse Bereavement Support, the National Bereavement Alliance, and the Childhood Bereavement Network and they were supported by academics from universities. A Lived Experience Advisory Forum was also established, comprising 14 individuals who had been bereaved in the last three years.
9. An online survey of bereaved adults was conducted, written responses were received from bereaved children and young people, an online survey of organisations and professionals working with bereaved people took place and engagement was done with school and college students through the organisation Votes for Schools.
10. The Commission received written and oral evidence from over a thousand people to inform their recommendations.

Findings on organising a funeral and public health funerals

11. The report described the emotional toll on respondents of struggling to pay for a funeral as well as the pressure they faced to meet societal expectations for a 'proper' funeral'. They stated that this had led to extreme worry, and some resorted to borrowing money or using credit cards. Organisations who responded emphasised that the underlying cause of these high costs was the lack of regulation of the funeral industry with no minimum standards on either conduct or regulation of costs.
12. In their research organisations who responded to them particularly highlighted what they saw as failings from local authorities around public health funerals. They described increased stigma and hostility towards people who need to use public health funerals as well as less access to them. A quote included within the report is:

“It has become more difficult to access public health funerals ... and I appreciate that it is entirely due to austerity and financial pressures in local authorities and hospitals .But there is often a very antagonistic attitude to people who are already deeply distressed at not being able to provide a funeral for a loved one, often older people with an adult child, which they are devastated by and they get real pressure.”
13. The Commissioner's stated that there was evidence presented that funeral poverty is in large part a result of an unregulated funeral industry.

14. The report states that the organisations the Commission engaged with had highlighted inconsistencies in public health funerals and therefore statutory minimum standards for these funerals should be introduced to help prevent there being a “postcode lottery”.
15. The report recommends “new Regulations must be created setting out minimum standards for public health funerals.”

Other Recommendations in the report

16. The final report was published in October 2022. The recommendations in the report of relevance to local authorities are:
 - 16.1. The government must legislate so that people can choose whether to register a death in person or online.
 - 16.2. Out of hours systems must be in place in every local authority to enable rapid processing of death paperwork and registrations so that quick burials can take place for people whose religion requires it (for example Jewish and Muslim communities).
 - 16.3. Professional bodies and employers of those whose role brings them into contact with bereaved people must ensure they have bereavement training that is culturally informed and contextually tailored, including training on complex and traumatic grief, at an appropriate level.
 - 16.4. That the Competition and Markets Authority (CMA) must carry out its proposed further market investigation into the funeral industry now the exceptional circumstance of the pandemic are passed.
 - 16.5. New Regulations must be created setting out minimum standards for public health funerals.
 - 16.6. The Funeral Expenses Payment must be extended to currently excluded groups including students.
 - 16.7. All public, private and third sector bodies supporting bereaved people must commit to tackling inequalities in access to bereavement services and support and ensuring underserved communities, including Black, Asian and ethnic minority communities and other groups whose grief is disenfranchised, are better supported.

Government

17. In March 2023 Maria Caulfield, Parliamentary Under-Secretary of State for Health and Social Care, responded to a [question from Matt Warman regarding the recommendations set out in “Bereavement is everyone’s business”](#) saying that the Government was working across Government and with the bereavement sector to

consider how the wide range of findings from the report can inform future policy and make a difference to those who are bereaved.

18. In 2020 the Department of Levelling Up, Housing and Communities (DLUHC) produced [Public health funerals: good practice guidance](#) to help councils with the provision of these funerals, outlining council's statutory duties good practice as well as funeral good practice and administrative considerations. The LGA inputted into the guidance.

Other LGA bereavement work

19. We have provided media commentary on public health funerals and funeral expenses in the past. The last media comment on funeral expenses was in 2019 regarding [the increase in the Government's funeral expenses payment](#) (a payment made by the Government to people on certain benefits to help with the costs of a funeral). We have also been asked to provide commentary around [public health funerals](#) in the past as well as [council cremation and burial costs](#).
20. In 2020 the [LGA responded to the CMA investigation into the funeral market](#), referenced in the Commission's recommendations. The CMA's investigation looked at the provision of services by funeral directors as well as the pricing of local authority crematoria and burial services. They proposed a number of potential remedies including local authorities tendering for a low-cost funeral service in their local area, which we were concerned could potentially have adverse consequences on the market.

Implications for Wales

21. The Commission's report was aimed at the whole of the UK, including the Welsh Government. The Public Health Control of Disease Act 1984 also applies in Wales.

Financial Implications

22. The research outlined in paragraph 24 would be conducted by the LGA's research team, and would not incur any specific costs.

Equalities implications

23. The UK Commission on Bereavement report's recommendations include those around the importance of cultural competence and services delivered to underserved communities, including Black, Asian and ethnic minority communities.

Next steps

24. Members are asked to agree the following next steps:

- 24.1. The Board commissions research into the numbers of public health funerals conducted by councils, the costs to councils of carrying out public health funerals, the reasons for conducting public health funerals, the changes over time in the number, cost and reasons for public health funerals, the impact of Covid, and the identification of good practice.
- 24.2. This research would be undertaken by the LGA's research team.
- 24.3. The research then informs the development of the Board's policy in relation to public health funerals.