VIRGINIA DEPARTMENT OF HEALTH INTERNSHIP ACADEMY

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Fairfax Health District – Cohort 3 (2025)
Reducing Barriers to Ensure Timely Medical Certification of Death Certificates

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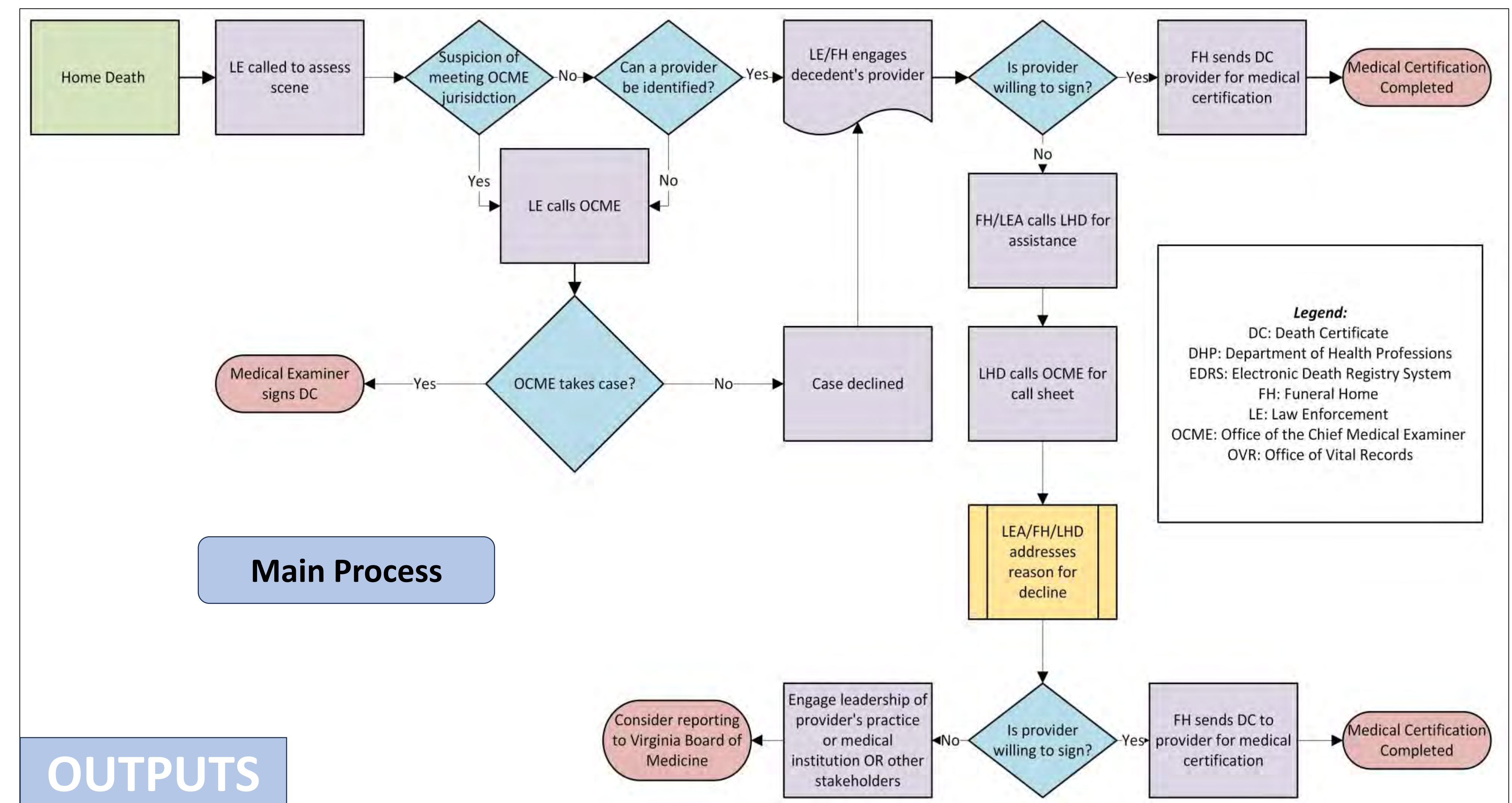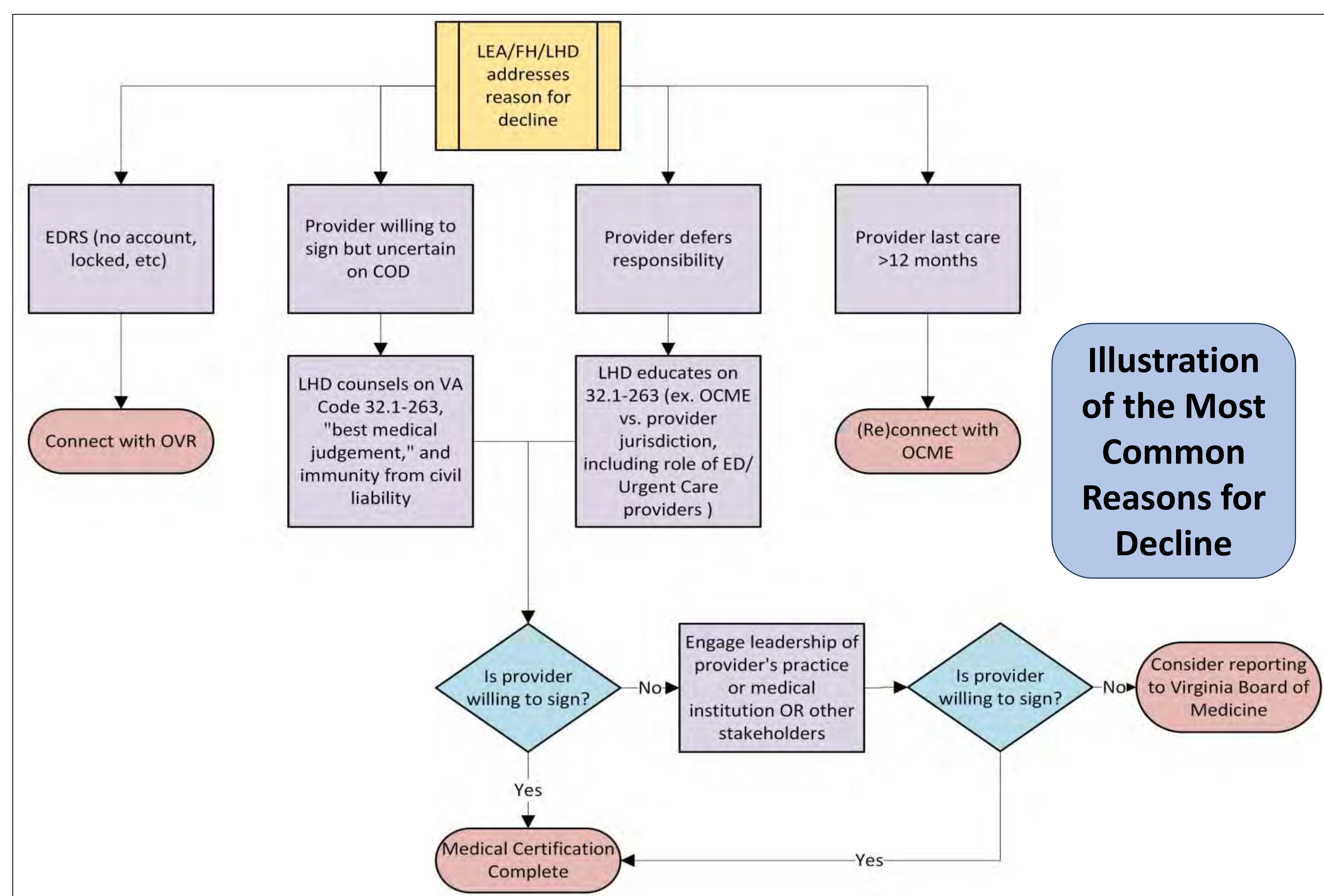BOWDOIN

IDENTIFYING THE ISSUE

Timely medical certification of death certificates is essential to the planning of funeral and memorial services and managing the affairs of the decedent. **From start to finish, completing a death certificate requires the involvement of at least three to five different agencies.** Reducing the barriers to medical certification reduces the distress of already grieving families and ensures that the public receives timely assistance.

- Analyze both qualitative & quantitative data to determine barriers to timely completion of death certificates (e.g., 30+ email requests for assistance from FCHD).
- Organize **group, individual, and interagency** discussions with stakeholders:

  OVR, OCME, DHP, FCPD, NOVA Funeral Homes & LHD Directors, FCHD Informatics

- Consolidate feedback from stakeholders to create comprehensive recommendations.

*OVR=Office of Vital Records; OCME=Office of the Chief Medical Examiner; **DHP** = Department of Health Professions, **FCPD** = Fairfax County Police Department, **LHD Directors**=Local Health Directors (Fairfax, Loudoun, Arlington, Alexandria, Prince William), **FCHD**=Fairfax County Health Department.

Main Process

Legend:
DC: Death Certificate
DHP: Department of Health Professions
EDRS: Electronic Death Registry System
FH: Funeral Home
LE: Law Enforcement
OCME: Office of the Chief Medical Examiner
OVR: Office of Vital Records

OUTPUTS

Illustration of the Most Common Reasons for Decline

Stakeholders' insights were visualized onto a comprehensive **process map that illustrates this complex workflow**. **Main causes of delay, as reported to FCHD,** was a lack of understanding about VA Code 32.1 and more specifically, lack of knowledge about a provider's immunity from civil liability when using their "best medical judgement" to certify a cause of death and the importance of timely completion of the certificate.

RECOMMENDATIONS

1. **Proactive Education & Trainings**
For providers: develop an outline for a 2026-2027 mandatory continuing medical education (**CME**) training for Virginia licensed providers responsible for certifying deaths.
For funeral homes: develop a "**guidebook**" for natural death protocol with flowchart of FAQs and promoting existing resources.
2. **Code Cleanup**
Submit recommendations for code edits to remove inconsistencies in language (e.g., explicitly specifying which kind of providers can or cannot sign).
3. **Health Information Exchange (HIE)**
Explore opportunities for more efficient sharing of decedent's health and/or provider information for quicker medical certification of DCs.

CHALLENGES

1. A **consistent problem with low individual frequency.** Stakeholder buy-in and engagement is a priority.

2. There is **no one governing entity** monitoring the process, increasing the need for closer collaboration between stakeholders. Increasing the timely certification of death certificates requires **interagency** partnerships at local and state levels.

3. **Resource limitations** slow down the exchange of up-to-date information to all involved.

ACKNOWLEDGEMENTS

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