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**JOINT NEGOTIATING COMMITTEE
FOR CORONERS**

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**To: Chief Executives (London Boroughs, Metropolitan Districts, County Councils
and Unitary Councils in England and Wales)**

8 January 2018

CORONERS' CIRCULAR No 62

Dear Sir/Madam

Coroners' pay guidance

This guidance must be read in conjunction with JNC circular No. 61 (copy attached). This sets out the principles of the agreement reached and indicated that the JNC would produce guidance to assist local decision-making in respect of the approach to be taken in determining pay within the appropriate range. That guidance is now set out below.

The level of pay will be determined locally, in line with the complexity of the coroner area. This guidance is intended to provide assistance to councils on how the factors should be interpreted, without directing or being overly prescriptive. It aims to provide those whose responsibility it is to determine and decide on a local evidential basis, the appropriate level of pay. This joint guidance seeks to identify factors to consider in determining the complexity of a coroner's area in order to consider the appropriate pay point at a local level.

In making the assessment of the relevant pay level to be applied locally it should be on the basis that all the duties and responsibilities are being performed at full capability as outlined within the jointly agreed and adopted job descriptions (within the KFH report commissioned by the JNC). Councils are reminded that the pay framework does not cover non-statutory out of hours duties. The KFH report can be found at <https://www.local.gov.uk/our-support/workforce-and-hr-support/coroners> .

The factors should be considered holistically in order to arrive at a balanced overarching picture of an Area's complexity. It is not intended to be a simple numbers exercise.

In considering the factors below the assessment of the relative complexity of a coronial area should be considered in terms of the likelihood of the presence of these factors to require additional coronial intervention beyond that which would be normally expected and cannot be addressed solely through additional Assistant Coroner capacity. Similarly, the absence of such factors should be considered in

terms of a reduction in the likelihood of coronial intervention compared to that normally expected. In practical terms, the difference in the types of an institution present in an area are likely to provide for different demands upon the coronial service (e.g. local prison as compared to an open prison or a large acute hospital compared to a community hospital) and the overall assessment should be on the basis of the coronial area as a whole.

In considering all factors local knowledge/experience/risk will be a feature and should be evidence based. These factors include:

Factor	For consideration
Prisons and other institutions of state detention.	<p>Are there any? Type of institution/s - where more vulnerable people are detained e.g. local prisons, young offenders institutions, female prisons and/or immigration detention centres. Number of institutions.</p>
Mental Health Unit(s)	<p>Are there any? Type of such units i.e. in-patients Number of units.</p>
Hospitals with areas of specialism	<p>Type of such hospitals e.g. tertiary hospital (tertiary characterised by offering specialised consultative care, usually on referral from primary or secondary medical care personnel, by specialists working in a centre that has personnel and facilities for special investigation and treatment.), hospitals with specialist units e.g. neurological, stroke, neo-natal units. Number of such hospitals.</p>
Caseload	<p>Caseload of the respective coroner</p> <p>It should be noted that it may be possible for a coroner (including a part-time coroner) to have a low but quite complex caseload e.g. due to a number of factors of complexity and that would need to be taken into account in determining the local pay point. Conversely, it may be possible for a coroner to have a high caseload of low complexity.</p>

In addition to the above factors there may be an exceptional local factor that it is determined is appropriate to be taken into account e.g. a major transport hub such as an international airport or military port/hub. As with all other factors you will wish to be mindful of the number, type, and local evidence of risk/complexity.

Senior and Area Coroners

The factors set out above would apply to both Senior (full-time and part-time) and Area Coroners and we would anticipate them being placed at the same point within the appropriate range for the coronial area.

Part-time Senior Coroners

Part-time senior coroners must keep a note of time spent on coronial business including details of days worked, indicating time worked (half or full day), where and what work undertaken and they may be required to provide a "fee note" in this respect. How such a note would look in practice is a matter for local determination. How and when payment is made to part-time senior coroners is a matter for local determination. Earnings will be capped at the level of a full-time senior coroner in a similarly complex area.

Assistant Coroners

We would expect a broad correlation between the pay of a Senior Coroner and the daily rate determined for Assistant Coroners working within that same coroner area. Where the Senior Coroner role is paid at the mid-point or below then the mid-point of the Assistant's range should be a ceiling. Where the Senior Coroner role is paid above the mid-point then that same figure should be a floor. Assistant Coroners will be expected to operate across the complexity of the area/role as per the jointly agreed job description.

Other issues

Performance management - local authorities will be aware that at present, they are unable to formally performance manage coroners. This matter is outside of the remit of the JNC. However, it is believed that the Chief Coroner at some future stage will be providing guidance on performance management.

Next review - The JNC's pay ranges will next be reviewed in September 2018 with a view that any agreed changes would be implemented from 1st April 2019.

Yours faithfully

SIMON PANNELL
JENNIFER LEEMING

Joint Secretaries

