

Inquest into the death of Roy Rodney Jacobs

Roy Rodney Jacobs died unexpectedly at the Cherbourg Hospital on 31 August 2016.

Acting Coroner Ainslie Kirkegaard delivered her findings of inquest on 23 November 2017.

The Queensland Government responds to recommendations directed to government agencies at inquests by informing the community if a recommendation will be implemented or the reason why a recommendation is not supported.

Further information relating the implementation of recommendations can be obtained from the responsible agency named in the response.

Comment 1, page 34

I note the Darling Downs Hospital Health Service vital signs and observations procedure, section 3.5.2, currently describes the action plan as a guide that relates to the Q-ADDS/CEWT/Q-MEWT score where a higher score requires higher levels of intervention. In Dr Cooke's opinion, while a local medical officer should review a patient scoring Q-ADDS 7 to assess whether it was a true score and what interventions may be required, it was not mandatory for the local doctor to also discuss the patient with a referral centre. Dr Treston's evidence in chief mirrored this, though under cross-examination by the family's counsel, he conceded if there was no modification of the patient's acceptable vital signs, the actions required are mandatory. I suggest this aspect of the tool's application needs to be clarified (one way or the other) both on the tool itself and in the procedures and training for medical officers supporting its use. In making this comment, I acknowledge the inquest did not have the opportunity to examine the training delivered to Darling Downs Hospital Health Service medical officers about Q-ADDS/CEWT/Q-MEWT.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health

On 1 November 2018 the Minister for Health and Minister for Ambulance Services responded:

The Darling Downs Hospital Health Service acknowledges the opportunity for clarification of instructions on the Q-ADDS form. A review and update of *Clinical Observations – Q-ADDS/CEWT/Q-MEWT Procedure*¹ was undertaken and approved by the Clinical Services Improvement Committee in May 2018.

The procedure clearly documents the expectation that all nursing staff are to comply with the instructions of the Q-ADDS form and any actions recommended are mandated. The procedure clarified that all medical staff must respond to the request for review from nursing staff, however upon assessment of the patient and through use of clinical judgement, the Q-ADDS instructions are to be used as a clinical decision guideline. Specific instructions have been included for nursing staff to appropriately record verbal instructions received by the medical officer, and the medical officer to document any amendments to the treatment plan within 24 hours of those instructions being given. Consideration to staff practicing in rural facilities has been incorporated in the development of these

¹ Q-ADDS/CEWT/QMEWT are standardised tools developed to recognise and respond to clinical deterioration:

- Q-ADDS is the Queensland Adult Deterioration System
- CEWT is the Children's Early Warning Tool
- Q-MEWT is the Queensland Maternity Early Warning Tool.

instructions.

The clinical governance of the Q-ADDS tool is held by the Department of Health Patient Safety and Quality Improvement Service and is reviewed periodically and currently under validation study.

Comment 2, page 35

I acknowledge the benefit of online training as a means of providing consistent, current and evidence-based information to a large workforce dispersed across large geographical areas. The development and evaluation of training content and training delivery methods is an industry in itself so I do not propose to make a prescriptive recommendation about either aspect. However, I strongly encourage the Darling Downs Hospital Health Service to ensure ongoing review of the content, and evaluation of the effectiveness of its procedures and training for all clinical staff in early assessment and response to clinical deterioration, with reference to the issues arising from this and previous inquests.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health

On 1 November 2018 the Minister for Health and Minister for Ambulance Services responded:

The benefits and drawbacks to online education is acknowledged. Given the importance of assessment and response to clinical deterioration for all clinical staff, the Darling Downs Hospital Health Service reviewed and updated the content of the Queensland Adult Deterioration Detection System (Q-ADDS) learning module. These improvements include clarification of the use of the Q-ADDS form as well as additional paediatric and midwifery components.

The effectiveness of this training is measured with a routine competency assessment for clinical staff which is built into the module. The competency assessment process occurs annually for nursing staff and on induction for medical staff as well as annual basic life support training and regular emergency medicine education and training programs which are conducted face to face and includes practical application of the Q-ADDS document.

Clinical facilitators are required to inspect the quality of Q-ADDS completion in their units daily to ensure staff meet requirements. Ongoing review of online learning modules occurs based on feedback from staff and results of competency assessments.

Comment 3, page 33

Ms Nagel advised the [training] module should take 25 minutes to complete. However, she acknowledged it is possible for users to skip the video. This is consistent with the Cherbourg Hospital training records which show some staff having completed it in as little as five minutes. Having viewed the complete module, I consider the video component to be the most instructive part. I am concerned that the module would be of limited utility to users who skip the video. Ms Nagel's evidence indicated there are currently no plans to address this – there should be.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health

On 1 November 2018 the Minister for Health and Minister for Ambulance Services responded:

The Darling Downs Hospital Health Service acknowledges the concern regarding the ability to skip the video component of the training module, particularly as this contains the most useful content. In light of the evidence that staff are completing this module in shorter than expected times, the

module has now been improved and includes a forcing function which requires users to view the video and complete the module in its entirety in order to successfully complete the training module.