

## **Inquest into the deaths of Graeme Barry Gulliver, Joanne Lee Harrison and Aileen Margaret Morten**

Graeme Barry Gulliver, Joanne Lee Harrison and Aileen Margaret Morten died from overwhelming infection whilst in the care of the Cairns and Hinterland Hospital and Health Service. Mr Gulliver died at Mossman Hospital on 20 March 2012. Ms Harrison died at the Cairns Base Hospital on 12 January 2012 after being transferred there from the Mossman Hospital. Ms Morten died at the Atherton Hospital on 23 July 2012.

Coroner Jane Bentley convened a joint inquest to investigate whether the deceased received timely and appropriate treatment whilst in the care of the Cairns and Hinterland Hospital and Health Service.

Coroner Jane Bentley delivered her findings of inquest on 8 December 2014.

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.

### **Recommendation 1**

Cairns and Hinterland Hospital and Health Service implement the proposed workforce model at Mossman Hospital as soon as possible and report as to the implementation of the workforce and its continuation to the Office of the State Coroner, annually for five years, with the first such report to be delivered by 28 February 2015.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health.

On 21 January 2016 the Minister for Health and Minister for Ambulance Services responded:

The workforce plan model for Mossman Multi-Purpose Health Service of four fulltime permanent principal house officers' positions was approved. Ten week rotations are allocated to principal house officers employed by the Cairns and Hinterland Hospital and Health Service (CHHHS).

The CHHHS provided their first annual report to the coroner's office and will continue annual reporting for five years.

### **Recommendation 2**

Cairns and Hinterland Hospital and Health Service ensure that pathology testing laboratories and local general practitioners and medical centres are provided with a telephone number for the Emergency Department for the Mossman and Atherton hospitals which is answered at all times and through which the caller is able to be put through to the on duty medical officer.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health.

On 21 January 2016 the Minister for Health and Minister for Ambulance Services responded:

Cairns and Hinterland Hospital and Health Service and Pathology Queensland developed processes to ensure critical and/or urgent pathology results are reported to medical staff. The process has been referenced in the Pathology Queensland QIS 11 484 and QS20168 policies. A copy of audit results will be provided to the Cairns and Hinterland Hospital and Health Service patient safety and quality committee for monitoring and review on a bi-annual basis.

### **Recommendation 3**

Cairns and Hinterland Hospital and Health Service and/or Queensland Health consider funding a full time radiographer at the Mossman Hospital.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health.

On 21 January 2016 the Minister for Health and Minister for Ambulance Services responded:

The Cairns and Hinterland Hospital and Health Service funds one full time equivalent radiographer position located at the Mossman Hospital and has a permanent employee in the position.

### **Recommendation 4**

Cairns and Hinterland Hospital and Health Service and/or Queensland Health consider funding for a full-time nurse educator for the Hinterland hub.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health.

On 21 January 2016 the Minister for Health and Minister for Ambulance Services responded:

The Cairns and Hinterland Hospital and Health Service considered funding for a fulltime nurse educator and determined the current complement of nurse educators for the Hinterland hub is greater than the equivalent of two full-time nurse educators and is considered appropriate.

### **Recommendation 5**

Queensland Health appraise itself of the report and evidence of Professor Brown and educate its clinicians (doctors and nurses) as to the importance of acting upon haemoptysis, and the importance of not discounting haemoptysis as being likely due to a burst blood vessel from coughing.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health.

On 21 January 2016 the Minister for Health and Minister for Ambulance Services responded:

The Department of Health's Patient Safety Unit is preparing a patient safety communiqué regarding the lessons learned from this inquest. The notice will include specific information about the recognition of haemoptysis for Hospital and Health Services to incorporate in their ongoing clinical education.

### **Recommendation 6**

The Australian College of Rural and Remote Medicine, the Australian College of General Practitioners, the Australian College of Nursing, the Medical Board of Australia (Queensland Office) and the Nursing Board appraise themselves of the report and evidence of Professor Brown and consider disseminating information to their members as to the importance of acting upon haemoptysis, and the importance of not discounting haemoptysis as being likely due to a burst blood vessel from coughing.

Response and action: the recommendation is implemented.

Responsible agency: Queensland Health.

On 21 January 2016 the Minister for Health and Minister for Ambulance Services responded:

The Department of Health wrote to the Australian College of Rural and Remote Medicine, the Australian College of General Practitioners, the Australian College of Nursing, and the Australian Health Practitioner Regulation Agency (AHPRA) to inform them of the report and evidence from Professor Brown. The respective colleges were asked to consider the dissemination of this information to their members emphasising the importance of acting upon haemoptysis and not discounting haemoptysis as being likely due to a burst blood vessel from coughing.