

6 July 2020



Forensicare

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**BY EMAIL**

**Court ref: COR 2018 002778**

Dear Registrar

**INVESTIGATION INTO THE DEATH OF DARREN J BRANDON – RESPONSE TO CORONER’S RECOMMENDATIONS**

I refer to your letter dated 6 April 2020, in which you provided a copy of Coroner Simon McGregor’s Finding with inquest into the death of Darren J Brandon, including the recommendations made under section 72(2) of the *Coroner’s Act 2008* (Vic) (the **Act**) directed to the Victorian Institute of Forensic Mental Health (**Forensicare**).

Set out in this letter is Forensicare’s written response to Coroner McGregor’s recommendations in accordance with sections 72(3) and 72(4) of the Act.

	<b>Recommendation to Forensicare</b>	<b>Forensicare response</b>
1.	To enhance existing continuity of care, the various custodial health stakeholders train their staff about what information on their systems is visible to other stakeholders.	<p><b>The Coroner’s recommendation is considered to be implemented, however Forensicare will continue to monitor further opportunities for improvement in training.</b></p> <p>Forensicare has policies and procedures in place which inform the collection, use and disclosure of health information by its employees.</p> <p>Forensicare employees working in the prison setting have access to JCare – the prison electronic medical record used in all prisons – which is an information system owned and controlled by Justice Health. Justice Health have in place standard operating procedures and training manuals for the use of JCare.</p> <p>Forensicare continues to monitor training opportunities that might improve its employee’s understanding of their use and disclosure of health information to ensure continuity of care.</p>

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2.	<p>Given that forensic clinicians have indicated that they would be most assisted by being able to obtain all necessary information from a single database, the interested institutional parties in this inquest, and such other stakeholders as they determine necessary for an effective review process, including but not limited to Justice Health, should meet to consider the viability of such an innovation, and report back to me once they have done so.</p>	<p><b>Forensicare is supportive of the Coroner’s recommendation and it is under ongoing consideration.</b></p> <p>This recommendation requires careful consideration and review of the health information systems used across the justice system and the purpose for which they are used, in order to identify the most practical and workable solution for a single source of information that would better support continuity of care from the time a person first interacts with the criminal justice system.</p> <p>To this end, Forensicare has met with Justice Health to commence discussions on potential solutions and will participate in a stakeholder forum that is being established and led by Justice Health to work with key stakeholders to determine possible solutions.</p> <p>Given the complexity of identifying a viable solution as a result of the number of stakeholders involved and the purpose of their involvement, it is proposed that an update on these discussions be provided to the Coroner on this recommendation in 3 months’ time.</p>
3.	<p>That CV and Forensicare ensure that, upon the arrival of a prisoner at a prison, the appropriate reception staff promptly note and act upon any custodial management issues recorded on the accompanying documentation in a timely fashion, including by capturing life threatening health, suicide or self-harm risk issues in JCare, or otherwise bringing it to the attention of the appropriate clinical staff working at the prison. This should include a timely remedial mechanism for admission documentation which arrives after the prisoner has been through the reception processes.</p>	<p><b>The Coroner’s recommendation is considered to be implemented, however Forensicare will continue to monitor further opportunities for improvement.</b></p> <p>As provided in Dr Danny Sullivan’s statement at the Coronial inquest, Forensicare clinicians conducting reception assessments have access to JCare, CMI (the state-wide mental health database accessible by public health services who are subject to the <i>Mental Health Act 2014</i>), the Prisoner Information Management System (PIMS), E Justice (which records CV prisoner and offender management information), the CV reception assessment and medical information from police cells. Each of these sources has prisoner information that is utilised by Forensicare clinicians to complete a prisoner’s reception assessment. This is a considerable volume of information for the reception assessment, which is intended to be a screening in order to ascertain risk, rather than a comprehensive mental health assessment. Forensicare relies on CV to handover any relevant custodial management issues to enable a reception assessment.</p> <p>As also noted in Dr Sullivan’s statement, on or about 11 July 2019, a Forensicare group email process was introduced for the provision of collateral information so that the existence of collateral information is more broadly known and not solely reliant upon one Forensicare administration staff member uploading the information to JCare. This now means that MHARS emails collateral information to an</p>

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		<p>address that includes the MAP, MRC and RCC reception teams, rather than just an individual.</p> <p>If recommendation 2 is determined by the stakeholders to be a viable option, and a solution is identified, such solution could also be relevant to addressing this recommendation.</p> <p>Forensicare will continue to monitor what more it is able to do (including through the stakeholder forum referred to in response to recommendation 2 above), to better ensure it has all custodial management issues available to it at the time it carries out a reception assessment, including what impact this may have on the scope of the reception assessment.</p>

Please don't hesitate to contact me should you have any further queries in relation to our responses.

Yours sincerely



**Dr Margaret Grigg**  
Chief Executive Officer