

31 August 2022

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ABN 18 128 843 652

Coroner Judge Cain Coroner's Court 65 Kavanagh Street MELBOURNE VIC 3000

Dear Madam

Re: Stuart Garten COR 2014 000918

I am responding on behalf of the Latrobe Regional Hospital Mental Health Service (LRHMHS) in relation to the two recommendations you made regarding Stuart Garten's death.

- 1. I recommend Latrobe Regional Hospital Secure Extended Care Unit review its discharge planning to include as fundamental, routine, and real-time discussion between SECU and community mental health staff that is representative of a patient's concerns and goals.
- 2. I recommend Latrobe Regional Hospital Secure Extended Care Unit review the content of the Consumer Safety Plan for opportunities to include practicable and agreed access to means controls.

LRH has adopted the **two recommendations in full.** There have been refinements to policy and to operational and clinical processes, including implementation of a new medical record.

In response to recommendation **one**, LRH reviewed and amended the Mental Health - Secure Extended Care Unit (SECU) Protocol in May 2022, and implemented a SECU pathway, which steps staff through the patient admission, care and treatment and discharge planning processes.

The pathway allows for the patient journey to be developed, mapped, and driven by the consumer with the Multidisciplinary team (MDT). A review of the consumer's SECU admission and treatment plan goals in the first week identifies the preliminary discharge date and explores the admission time frame. The consumer's progress, goals, and discharge planning remain fluid during the admission, with the consumer's progress being monitored and explored weekly during the MDT Ward rounds. (Psychiatrists, NUM, SECU treating team, community clinicians, carers and supporters)

LRH implemented a new risk assessment tool as part of the Electronic Medical Record (EMR) in 2020. Our new EMR and policies reflect a process of individual risk formulation and risk planning. The individual risk assessment is completed for the risk areas, a formulation for each area of risk is made, and an overall clinical decision occurs concerning safety planning/actions and leaves approval. The EMR provides live information accessible for the inpatient and community team working with the consumer to update risks and interventions and monitor patient goals, allowing real-time clinical

decision-making to be documented and monitored during the patient's journey through the SECU admission.

In response to recommendation **two**, a review of the current safety plan has been completed and now the SECU pathway directs staff to commence the safety plan development on day 1 of admission in collaboration with the consumers and providers. LRH view the safety plan as an integrated component of the treatment plan that links risk assessment with the actions to address the clinical, social and personal factors contributing to the possibility of harm to the consumer or others.

Revised LRH policy directs staff to support consumers in developing and identifying recovery goals and preferences. Staff build on the Recovery-oriented and strengths-focused approach, ensuring these support the consumer's mental and physical wellbeing. The development of the consumer safety plan at LRH ensures that the views and concerns of all those involved in the person's mental health care are considered in the development of a safety plan with the consumer.

Refinement to the EMR, including the new risk assessment tool, has ensured that the risk assessment tool remains fluid to adapt to the consumer's changes in their safety plan.

LRH's current training program developed in 2020 focuses on safety planning within its new risk assessment training package, the Safety and Risk Assessment, Formulation and Planning Tool (SRAFP), which remains mandatory for current and new staff onboarding.

Please contact me should you require further information.

Yours sincerely

Sebastiano Romano

Executive Director Mental Health

Chief Mental Health Nurse