CENTRAL GIPPSLAND HEALTH

14 September 2023

Ms. Janet Lee
Coroner's Registrar, Coroner's Support Services
Coroners Court of Victoria
Level 2, 55 Southbank Boulevard
MELBOURNE VICTORIA 3006

Via email: cpuresponses@coronerscourt.vic.gov.au

Dear Ms Lee

Investigation into the passing of Sasha
Court Ref: COR 2019 004069

I refer to your letter dated 18 July, 2023.

In his Finding into the death with inquest of Sasha dated 17 July 2023, Coroner Lawrie made four recommendations, the following directed to Central Gippsland Health Service (**CGHS**):

> *'I recommend that CGHS take all steps as may be required to eliminate facsimile transmission as the sole means of communication of critical clinical information. This process should involve a consideration of all likely instances of the communication of such information, including internal and external communications. I would expect this recommendation would be considered by all Victorian health services and so the Department of Health has been included in the list of persons and entities for distribution.'*

In response to the above recommendation, CGHS provides the following response:

By letter dated 18 October 2022, CGHS provided an update with regards to the implementation of recommendations identified from its internal reviews following Sasha's death. One of these recommendations was that CGHS ensure a system was in place for the timely and accurate reporting of blood culture results to the treating team, and that afterhours results be reported to the Hospital Coordinator.

In relation to this recommendation, the Coroner was advised that pathology results of potential concern are now reported directly to the Consultant, and are no longer reported only to the ward. Further, the laboratory is now emailing a copy of the pathogen result to the Director Medical Services (**DMS**) so that the DMS has oversight with the treating team for appropriate and timely intervention. While I was under the impression that these changes had been implemented at the time of the inquest, I have since made further enquiries and learnt that these changes, regrettably, have yet to be implemented. I have therefore been working with Dorevitch Pathology to confirm an improved process.

CENTRAL GIPPSLAND HEALTH

In December 2022, following the inquest into Sasha's death, the process by which critical results were communicated to CGHS staff was again discussed. The need that these results be communicated via telephone and not only facsimile transmission was acknowledged. Since then, CGHS has been working to identify any opportunities to cease the use of facsimile transmission as the sole means of communicating critical clinical information.

The current process is that in inpatient areas at CGHS, where there is now an Electronic Medical Record (**EMR**), critical clinical results are telephoned to the ward, and documented in the EMR. Facsimile transmission is no longer utilised. In the outpatient areas, where an EMR has not yet been implemented, the results are communicated by telephone and fax.

CGHS is now implementing a procedure whereby all potential critical clinical results will be reported directly to the treating medical team responsible for a particular patient's care via telephone, both inside and outside of business hours. This procedure is documented in CGHS's 'Results of Clinical Investigations – Notification' clinical guideline (the **Guideline**) and CGHS is working with Dorevitch Pathology to implement the changes. The revised Guideline is attached for reference.

I thank His Honour for his recommendation, and the opportunity for CGHS to provide its response. I trust that the information above adequately informs His Honour of the steps that have been, or are being, taken to respond to his recommendation.

On behalf of CGHS, I extend my sincere condolences to Sasha's family.

Yours sincerely

Kelli Mitchener
Director Quality & Learning Services

Enclosure: 'Results of Clinical Investigations – Notification' Clinical Guideline dated 14 September 2023

Title:	**Results of Clinical Investigations - Notification**
Document Type	**Clinical Guideline**
Approved by	**Director of Medical Services**
Reviewer	**Manager Quality & Risk**

CENTRAL GIPPSLAND HEALTH

TARGET AUDIENCE
Organisational

POLICY STATEMENT:
Reporting of Clinical Investigations shall occur in a timely manner and a backup system shall be in place to ensure that significant results are flagged and reported to relevant Clinical Units and Medical Officers.

PROCEDURE:
Pathology Investigations

- The Electronic Medical Record (EMR) and BOSSNET systems are used to report pathology investigation results at CGH. If pathology investigations are requested via the EMR, the results can be accessed via the EMR or BOSSNET. If investigations are requested via paper request, the results can be accessed via BOSSNET.
- Results shall be posted into these electronic systems as soon as practicable after processing by the laboratory.
  - Critical results (Critical Values for Common Laboratory Tests) shall be telephoned as first priority according to the following:
    - **Outpatient areas:** Notify the treating medical team
    - **Inpatient areas:** Notify the treating medical team
    - **Emergency Department:** Notify the Senior Medical Officer on shift
  - Results received by telephone shall be recorded in the progress notes section of the medical record
  - The patient name, date of birth, shall be verified against the medical record, date of results and time of receipt are documented and signed off by the person receiving the results
- Some investigations are sent to other pathology services for testing, results from such tests shall be made available through Webstro when available, with hard copy results to follow.

Medical Imaging Investigations - Refer to Provision of Medical Imaging Services/Reports procedure
Sale

- Inpatient Medical Imaging investigation results are available electronically in all acute clinical units at the Sale site.
- Reports are issued according to the contracted key performance indicators for routine referrals.
- Emergency reports are issued within 2 hours.
- In cases where there are significant findings, all reasonable attempts will be made to contact the Referring practitioner by telephone. Where the referring practitioner is unavailable and clinical management is required, an alternative practitioner will be notified. Note of this shall be recorded in the patient's report.

Other sites and Aged Care

- Results for Maffra and Heyfield sites are provided electronically to the site and the appropriate Medical Officer.
- Aged Care results are provided electronically to the appropriate Medical Officer
- In cases where there are significant findings, all reasonable attempts will be made to contact the Referring practitioner. Where the referring practitioner is unavailable and clinical management is required, an alternative practitioner will be notified. Note of this shall be recorded in the patients report.
- For areas where there is no electronic results system an appropriate system to notify of significant results shall be in place.

Retention of Hard Copy in Medical Record.

- Where the patient visit is recorded via the electronic medical record, hard copy results of investigations shall be scanned into the patient's electronic medical record.
- Where the patient visit is recorded in a paper patient medical record, hard copy results of investigations shall be filed in the paper patient medical record.

OUTCOME:
Reporting of Clinical investigation shall be made in a timely manner with any significant results reported to enable appropriate clinical treatment choices

DEFINITIONS:
Shall: Indicates that the statement is mandatory

Focus Area(s):
National Safety and Quality Health Service Standards – Standard 1
Aged Care Standards – Standard 1, Standard 2

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