

18 September 2025

Ms Bemani Abeysinghe Coroner's Solicitor Coroners Court of Victoria 65 Kavanagh Street SOUTHBANK VIC 3006

By Email: team14@courts.vic.gov.au

Dear Ms Abeysinghe

Re: Response to Coroner Ryan's recommendations following the findings into the death of Sarah Skillington (COR 2023 006415)

Ramsay Health Care (**Ramsay**) again extends its sympathy and condolences to Ms Skillington's loved ones, family and friends.

Ramsay remains committed to the health and safety of all of its people and patients, and acknowledges and understands the duty to safeguard them.

On 18 June 2025, Coroner Ryan made seven coronial recommendations addressed to Ramsay.

Ramsay acknowledges his Honour's recommendations and, consistent with Ramsay's commitment as stated above, will continue to improve and build on its existing mental health clinical practices.

In accordance with section 72(3) of the *Coroners Act 2008* (Vic), Ramsay responds to his Honour's recommendations as follows:

1. Recommendation 1 - Ramsay Health Care implement a system to ensure that regular ligature audits are conducted at mental health facilities managed by it in Victoria.

Recommendation 2 - Ramsay Health Care review the mental health facilities managed by it to ensure consistency where possible with the clinical guide Improving safety for consumers at risk of harm of ligature published by Safer Care Victoria.

Recommendation 4 - Ramsay Health Care provide specific training to nursing staff working in mental health units in how to appropriately respond to finding a patient hanging.

Statement of Action:

1.1. Whilst Mitcham had mental health policies and procedures in place, Ramsay has a subject-matter expert (**SME**) working party developing a *National Policy* and *Guideline* around Ligature Prevention, Assessment and Management, and a standardised National tool for Ligature identification. These are being developed utilising (amongst other things) Safer Care Victoria's *Improving Safety for Consumers at Risk of Harm of Ligature* guideline, together with other national and state guidelines and with reference to the well-established Mitcham Psychiatric Environmental Risk policy, guideline and tool. Education and training forms part of this review, and all will be included in Ramsay's existing National Audit Schedule.

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1.2. The working group is co-facilitated by the Ramsay National Professional Practice Governance Mental Health Lead and the National Director of Clinical Services for Mental Health. Work Health and Safety representation is included as part of the working group.

1.3. Current status:

- (a) **Policy**: A national policy has been drafted and is before the National Mental Health Executive and working party for review. When complete, it will be presented to the National Mental Health Consultative Network and, subject to any further clinical workforce and consumer consultation, submitted to the National Clinical Governance Unit (**NCGU**) for approval.
- (b) Ligature Identification Audit: A national template has been drafted for working party review and will be presented to the National Mental Health Consultative Network for approval and, subject to any further clinical workforce and consumer consultation, submitted to the NCGU for approval.

(c) **Education**:

- (i) Building on the platform of Ramsay's existing education and training program that includes mental health elements, the following education opportunities are being developed:
 - (1) Ligature training video the current training video will be updated and added to enhance the existing Basic Life Support (**BLS**) online (e-Learning) training, which is mandatory training for every registered and enrolled nurse to complete annually;
 - (2) Face-to-face competency the face-to-face BLS competency has been enhanced to include, for example, location and use of ligature cutters.

 In line with BLS training, this competency is mandatory training for every registered and enrolled nurse to complete annually;
 - (3) MyLearning package content is in development around the conduct of a comprehensive Ligature Identification Audit within clinical and patient accessible areas to enhance and further strengthen a nurse's ability to assess patients for risk of harm using ligature and manage a ligature incident. The anticipated date of release is 30 November 2025;
 - (4) Scenario-based training package is in development and will include a mock ligature scenario and competency. It will be mandatory training for every registered and enrolled nurse working in a Mental Health unit or facility to complete once, and additionally as required. The anticipated date of release is 31 October 2025; and
 - (5) Education opportunities looking at 'Recognising and Responding to Acute Mental Health Deterioration' are in development this will enhance existing training opportunities that relate to recognising and responding to physical health deterioration, and expand on the information and instruction contained in Ramsay's Risk Assessment & Category Observation Policy and Guideline. The module will address specific scenarios including postnatal psychosis. The anticipated date of release is 31 October 2025.
- 2. Recommendation 3 Ramsay Health Care provide specific training to nursing staff in the Perinatal Mental Health Unit at Mitcham Private Hospital in relation to postpartum psychosis.

¹ All sites are now required to have ligature cutters on resus trolleys, with the ability to request, on the basis of a risk assessment, additional cutters.

Statement of Action:

- 2.1. To further enhance the ongoing education requirements/training that were in place at the time of Ms Skillington's death:
 - (a) Mitcham has delivered in-house, face to face education sessions on perinatal psychosis to staff in its Perinatal Mental Health unit, Adult Mental Health unit, Early Parenting unit and Maternity unit.
 - (b) In addition to those described above, Ramsay is opening up additional opportunities for staff to supplement their existing training and experience by:
 - (i) reviewing and re-writing its existing Mental Health Nursing Specialisation training package, with the intention to offer all staff access to training and development regardless of their level of experience. The outcome is recognition of formal continual professional development (CPD) in Ramsay Mental Health, opportunity to be formally recognised as a Credentialled Mental Health Nurse with the Australian College of Mental Health Nurses, and with clinical pathways that relate to clinical specialisation roles such as Clinical Nurse Specialist (CNS), and Associate Nurse Unit Manager (ANUM); and
 - (ii) entering into agreements with:
 - (1) La Trobe University to support mental health nursing staff complete a Master of Mental Health Nursing by using a Commonwealth Supported Place and paid study leave. There is also a National Scholarship Program available and an opportunity to receive credit for Recognition of Prior Learning (RPL) on completion of the Mental Health Nursing Specialisation training package that is being considered with La Trobe;
 - (2) **Box Hill Institute** to offer Ramsay's enrolled nurses to develop specialist skills and qualifications in mental health by way of a *Certificate IV in Mental Health*. Additionally, Box Hill Institute has committed to develop an Advanced Diploma of Nursing (Mental Health) in collaboration with Ramsay Mental Health SMEs which will be released in 2026 with pathways for Ramsay Enrolled Nurses to complete; and
 - (3) Charles Darwin University to provide Ramsay's enrolled nurses to enter a Bachelor of Nursing (Enrolled Nurses Pathway) for transition to RN by using a Commonwealth Supported Place and paid study leave. Further CPD opportunities for Ramsay nursing staff offered by CDU include:
 - facilitation of fee-free ongoing mental health specialty webinars for nursing staff which are currently working through Trauma Informed Care topics; and
 - provision of fee-free micro-credentialing opportunities to junior nursing staff by way of short intensive courses. These courses will be recognised as prior learning when staff pursue additional post graduate study.
- 3. Recommendation 5 Ramsay Health Care review the staffing arrangements on the Perinatal Mental Health Unit at Mitcham Private Hospital to: (a) provide for two nursing staff to be rostered on the unit at all times, one of whom has mental health training and experience; and (b) provide for the Nursing Coordinator to be based in the unit in the event of only one staff member being available due to unplanned leave.

Statement of Action:

3.1. Ramsay has reviewed and considered the staffing arrangements at Mitcham to assess the viability of the recommendation and whether it could successfully integrate it into its current rostering processes and procedures. As part of this assessment, it has considered the following:

3.2. Qualifications of staff

- (a) Traditional stand-alone psychiatric nurse training ceased in Australia in the 1990s with the transition to registered nurse training to the university sector. This transition created a single nurse registration and a comprehensive model of nurse training, incorporating mental health. In Australia, all registered nurses receive mental health training as part of their undergraduate degree and diploma.
- (b) Nurses working in the Adult Mental Health and Perinatal Mental Health unit participate in continuous education and are required to undertake mandatory CPD as part of their yearly registration with the Australian Health Practitioner Regulation Agency and Nursing and Midwifery Board of Australia requirements. Mitcham provides a comprehensive education and training program for nursing staff, inclusive of mental health modules. Coupled with experience in the mental health setting, this training and education enables staff to develop expertise in mental health nursing.
- (c) Whilst nurses with additional post graduate qualifications in mental health can be considered specialist mental health nurses, equally, nurses who have worked solely in a mental health setting for a period of time are considered to have expertise in mental health nursing.
- (d) Mitcham's current nursing workforce has either formal mental health qualifications, on the job mental health education, or experience working in mental health. This experience comes from a variety of sources, including forensics, mother and baby units, and involuntary and voluntary units in the public and private sectors. New graduate staff are not rostered alone and are at all times supported and supervised in their first year of practice. Graduates then move into a development year for consolidation of skills and additional theoretical education specific to Mental Health.
- (e) The enhancements Ramsay is making to its current training and education system in relation to mental health and specifically post-partum psychosis will further strengthen the knowledge of its nursing staff.

3.3. Workload of staff

- (a) As workload is complex and multidimensional, allocation of staff in the Perinatal unit at Mitcham is based on a number of factors; the main priority and consideration being patient acuity. This takes into account the patients and their needs, together with the number of babies. This risk-based approach is conducted on a case-by-case basis and regularly reviewed each shift. Ramsay considers it to be the most suitable and efficient way of ensuring appropriate staffing requirements for the six-bed unit.
- (b) When inpatient numbers and/or patient acuity is low, there is a concern that requiring a minimum of two staff per shift could introduce new risks associated with the impact on the development of clinical skills due to decreased exposure to, or experience in, the conduct of clinical care, risk assessment and/or technical tasks. In addition, it may lead to an increase in the known risks associated with overstaffing, such as inefficiency, loss of situational awareness, lowered staff engagement, and disrupted team function this could result in diminished patient care. Ramsay believes that balanced, demand responsive staffing tailored to acuity and service context provides a clinically appropriate level of care and reduces the risks of under or overstaffing.
- (c) A Nursing Coordinator is always supernumerary to ensure they are able to assist in all areas of the hospital when there is deterioration of a patient and the need to escalate care. While the Nursing Coordinator may be able to be primarily based

within the Perinatal unit, they will be required to leave the unit regularly to complete rounds of the other clinical areas, and to respond to urgent events or escalation. If the Nursing Coordinator is required to be based in the unit in the event of only one staff member being available due to unplanned leave, it is likely to have a negative impact on the safety of the patients and staff in other areas of the hospital. Ramsay considers that to commit this resource to a singular department may undermine the intended role of the Nursing Coordinator and may be detrimental to the provision of safe care at Mitcham.

- 3.4. Ramsay has considered the staffing arrangements at Mitcham and, for the reasons set out above, formed the view that it is not, at this time, viable to implement a 2-nurse model to the Unit.
- 3.5. To alleviate concerns around potential staff complacency or knowledge gaps, Mitcham has adjusted the permanent Night Duty staff rostering to include a week of day shifts to further enhance nursing management oversight and supervision, increase positive engagement in the workspace and give staff further opportunity to review the work of their peers and coworkers for their own self-reflection. Additional steps taken to enhance supervision and further education for staff has been outlined in detail above.
- 4. <u>Recommendation 6</u> Ramsay Health Care update the Nursing Admission Form to include a heading for family history.

Statement of Action:

- 4.1. Ramsay has conducted a review of the National Mental Health Nursing Admission paperwork it has been enhanced to include family history and will be implemented when the current admission pack has been updated.
- 5. Recommendation 7 Engagement in clinical supervision by nursing staff on the Perinatal Mental Health Unit at Mitcham Private Hospital be actively encouraged and supported by Ramsay Health Care and all obstacles to attendance minimised.

Statement of Action:

- 5.1. As outlined in evidence at the inquest, Mitcham Private Hospital has implemented clinical supervision, which runs bi-monthly and is combined with both mental health units in the hospital. It is overseen by an appropriately qualified clinical psychologist and in addition, two nursing trained clinical supervisors are available for individual clinical supervision upon request. In order to minimise obstacles to attendance, a schedule of sessions is well published and attendance records kept and overseen by management staff.
- 5.2. Mitcham has also expanded the clinical supervision program to staff working in the Early Parenting Centre, led by the trained nurse facilitator.
- 5.3. A pilot program is also underway for a National Clinical Supervision Program with Ramsay Psychology, aiming to provide clinical supervision to all Mental Health nursing staff across Australia, including additional sessions, and specialty cohorts, across the day and evening shifts.

Signed:

Associate Professor Bernadette Eather Chief Nurse & Clinical Services Director

Ramsay Health Care Australia