



IN THE CORONERS COURT
OF VICTORIA
AT MELBOURNE

Court Reference: COR 2025 002478

FINDING INTO DEATH WITHOUT INQUEST

Form 38 Rule 63(2)

Section 67 of the Coroners Act 2008

Findings of:	Deputy State Coroner Paresa Antoniadis Spanos
Deceased:	Alfred Johann Faltermaier
Date of birth:	2 July 1965
Date of death:	8 May 2025
Cause of death:	1(a) Pneumonia in a man with cerebral palsy, asthma and epilepsy
Place of death:	Angliss Hospital, 39 Albert Street, Upper Ferntree Gully, Victoria
Key words:	Supported disability accommodation, SDA, pneumonia

INTRODUCTION

1. On 8 May 2025, Alfred Johann Faltermaier was 59 years old when he died at the Angliss Hospital. At the time, Mr Faltermaier lived in Bayswater, in a supported disability accommodation (**SDA**) run by Villa Maria Catholic Homes. He had resided there for 15 years where 24-hour care was available to him.
2. Mr Faltermaier had an intellectual disability and cerebral palsy and was diagnosed with autism spectrum disorder. He was non-verbal, wheelchair bound and required hoist transfer. Mr Faltermaier's medical history also included asthma, epilepsy, pneumonia, and vitamin D deficiency.

THE CORONIAL INVESTIGATION

3. Mr Faltermaier's death was reported to the Coroner as it fell within the definition of a reportable death in the *Coroners Act 2008* (**the Act**). Generally, reportable deaths include deaths that are unexpected, unnatural or violent, or result from accident or injury. However, if a person satisfies the definition of a person placed in care immediately before death, as did Mr Faltermaier, their death is reportable even if it appears to have been from natural causes.¹
4. The role of a coroner is to independently investigate reportable deaths to establish, if possible, identity, medical cause of death, and surrounding circumstances. Surrounding circumstances are limited to events which are sufficiently proximate and causally related to the death. The purpose of a coronial investigation is to establish the facts, not to cast blame or determine criminal or civil liability.
5. Under the Act, coroners also have the important functions of helping to prevent deaths and promoting public health and safety and the administration of justice through the making of comments or recommendations in appropriate cases about any matter connected to the death under investigation.
6. The Victoria Police assigned an officer to be the Coronial Investigator for the investigation of Mr Faltermaier's death. The Coronial Investigator conducted inquiries on my behalf, including taking statements from witnesses – such as family, the forensic pathologist, treating clinicians and investigating officers – and submitted a coronial brief of evidence.

¹ See the definition of "reportable death" in section 4 of the *Coroners Act 2008* (**the Act**), especially section 4(2)(c) and the definition of "person placed in custody or care" in section 3 of the Act.

7. This finding draws on the totality of the coronial investigation into Mr Faltermaier's death, including evidence contained in the coronial brief. Whilst I have reviewed all the material, I will only refer to that which is directly relevant to my findings or necessary for narrative clarity. In the coronial jurisdiction, facts must be established on the balance of probabilities.²

MATTERS IN RELATION TO WHICH A FINDING MUST, IF POSSIBLE, BE MADE

Identity of the deceased

8. On 8 May 2025, Alfred Johann Faltermaier, born 2 July 1965, was visually identified by his carer, Anthony Naibei, who signed a formal Statement of Identification to this effect.
9. Identity is not in dispute and requires no further investigation.

Medical cause of death

10. Forensic Pathologist, Associate Professor Dr Joanna Glengarry, from the Victorian Institute of Forensic Medicine (VIFM), conducted an inspection on 12 May 2025 and provided a written report of her findings dated 16 May 2025.
11. The post-mortem examination and computed tomography (CT) scan revealed bibasilar consolidation with pleural effusions,³ and an elevation of the left hemidiaphragm.⁴
12. Dr Glengarry provided an opinion that the medical cause of death was "*1(a) Pneumonia in a man with cerebral palsy, asthma and epilepsy*".
13. Dr Glengarry further expressed the opinion that this was a death from natural causes.
14. I accept Dr Glengarry's opinion.

Circumstances in which the death occurred

15. On 4 May 2025, Mr Faltermaier was admitted to the acute care of the older person's ward at the Angliss Hospital with his fourth presentation of pneumonia in the year and tested positive to respiratory syncytial virus (RSV). He was most recently discharged on 1 May 2025.

² Subject to the principles enunciated in *Briginshaw v Briginshaw* (1938) 60 CLR 336. The effect of this and similar authorities is that coroners should not make adverse findings against, or comments about, individuals unless the evidence provides a comfortable level of satisfaction as to those matters taking into account the consequences of such findings or comments.

³ Bibasilar consolidation with pleural effusions occurs when the bases of both lungs fill with fluid or pus, as well as an abnormal accumulation of fluid in the pleural cavity (the area between the outside of the lung tissue and the chest wall).

⁴ An elevated hemidiaphragm occurs when one side of the diaphragm is higher than normal.

16. Mr Faltermaier was initially treated with high flow oxygen and intravenous Tazocin (an antibiotic) with minimal response, leading to a diagnosis of chest sepsis and multiorgan failure.
17. His condition further deteriorated until hospital staff made a decision on medical grounds to commence end-of-life care, given Mr Faltermaier had shown no improvement despite receiving maximal medical management and care.
18. Mr Faltermaier was treated palliatively and kept as comfortable as possible until he passed away and was verified deceased at 9.41 am on 8 May 2025.

FINDINGS AND CONCLUSION

19. Pursuant to section 67(1) of the Act I make the following findings:
 - (a) the identity of the deceased was Alfred Johann Faltermaier, born 2 July 1965;
 - (b) the death occurred on 8 May 2025 at the Angliss Hospital, 39 Albert Street, Upper Ferntree Gully, Victoria;
 - (c) the cause of Mr Faltermaier's death was pneumonia in a man with cerebral palsy, asthma and epilepsy;
 - (d) immediately before death, Mr Faltermaier was a "*person placed in custody or care*" as defined in section 4 of the Act; and
 - (e) the death occurred in the circumstances described above.
20. There is nothing in the available evidence to suggest that there was any want of clinical management or care on the part of those involved in caring for Mr Faltermaier at the SDA or the Angliss Hospital that caused or contributed to his death.
21. I convey my sincere condolences to Mr Faltermaier's family for their loss.

PUBLICATION

Pursuant to section 73(1B) of the Act, I order that this finding be published on the Coroners Court of Victoria website in accordance with the rules.

DISTRIBUTION OF FINDING

I direct that a copy of this finding be provided to the following:

Michael Faltermaier, senior next of kin

Eastern Health

Senior Constable Michael Evans, Victoria Police, Coronial Investigator

Signature:



Deputy State Coroner Paresa Antoniadis Spanos

Date: 15 June 2026

NOTE: Under section 83 of the *Coroners Act 2008* ('the Act'), a person with sufficient interest in an investigation may appeal to the Trial Division of the Supreme Court against the findings of a coroner in respect of a death after an investigation. An appeal must be made within 6 months after the day on which the determination is made, unless the Supreme Court grants leave to appeal out of time under section 86 of the Act.
