



IN THE CORONERS COURT
OF VICTORIA
AT MELBOURNE

COR 2025 006590

FINDING INTO DEATH WITHOUT INQUEST

Form 38 Rule 63(2)

Section 67 of the Coroners Act 2008

Findings of:	Coroner Sarah Gebert
Deceased:	Pamela Dorothy Otway
Date of birth:	22 January 1954
Date of death:	12 September 2025
Cause of death:	1(a): Cardiogenic shock 2: Scleroderma
Place of death:	The Royal Melbourne Hospital 300 Grattan Street, Parkville, Victoria 3050
Keywords:	<i>In care; Natural causes; Specialist Disability Accommodation</i>

I, Coroner Sarah Gebert, having investigated the death of Pamela Dorothy Otway and without holding an inquest, make the following findings pursuant to section 67(1) of the *Coroners Act 2008* (Vic) **(the Act)**:

- a) the identity of the deceased was Pamela Dorothy Otway, born 22 January 1954;
 - b) the death occurred on 12 September 2025 at The Royal Melbourne Hospital, 300 Grattan Street, Parkville, Victoria, from cardiogenic shock with contributing factor of scleroderma; and
 - c) the death occurred in the circumstances described below.
1. Pamela was 71 years old at the time of her death and resided in Specialist Disability Accommodation (**SDA**) in Airport West managed by disability service provider, Scope (Aust) Limited (**Scope**).¹
 2. Pamela was non-verbal and never developed language skills. She had been in care from three years of age. Pamela communicated through body language, facial expressions and vocalisations, and relied on sensory information. Her medical history included intellectual disability, epilepsy, bipolar affective disorder, anaemia, dysphagia, osteoporosis, scleroderma, and transient ischemic attacks.
 3. The SDA in which Pamela resided was enrolled under the National Disability Insurance Scheme (**NDIS**). She received Supported Independent Living (**SIL**) services for daily tasks including personal care, meal preparation, medication administration, and mobility. Additionally, Scope provided one-to-one support for Pamela to engage in community activities every Thursday and Friday which included going out for lunch, shopping, attending the theatre and cinema, hairdressing appointments, and local walks.
 4. Pamela's brother Michael was the primary contact for signing her care plans and medical treatment recommendations. Pamela's family did not express any concerns with her care. Michael stated that when he visited Pamela, she always appeared very well cared for and in good health. Michael felt that Scope staff wanted the best for Pamela's care and daily needs.

¹ Pamela's death fell within the definition of a reportable death in the Act as she was a 'person placed in custody or care' within the meaning of the Act, as a person with disability who received funded daily independent living support and resided in an SDA enrolled dwelling immediately prior to her death. This class of person is prescribed as a 'person placed in custody or care' under the *Coroners Regulations 2019* (Vic), r 7(1)(d).

5. Michael recalled attending a music festival with Pamela and her carers and stated that music seemed to help Pamela's mood.
6. In the months prior to her death, Pamela appeared to be her usual self. She was eating as normal and engaging in her regular activities.

Circumstances of death

7. Around 5.00pm on 12 September 2025, Pamela was witnessed by a carer to suddenly become unresponsive at the dining table. Scope staff immediately called emergency services and commenced cardiopulmonary resuscitation (CPR). When paramedics arrived a short time later, they noted severe bradycardia without improvement on inotrope administration. Pamela was transported by ambulance to The Royal Melbourne Hospital. Upon admission, she was diagnosed with ventricular standstill with cardiogenic shock.
8. After a family discussion with the medical team, further medical intervention was withheld, and Pamela was transitioned to end-of-life comfort care. Pamela passed away peacefully at 10.43pm.

Medical cause of death

9. Forensic Pathologist, Associate Professor (A/Prof) Hans de Boer, from the Victorian Institute of Forensic Medicine (VIFM), conducted an examination on 15 September 2025 and provided a written report of his findings dated 30 September 2025.
10. The post-mortem examination was consistent with the reported circumstances. The post-mortem computed tomography (CT) scan revealed hyperostosis frontalis, mild coronary artery calcifications, mild pericardial effusion, a high right diaphragm, right lung lower lobe consolidation, and a distended stomach.
11. There was no evidence of substantial injury. A/Prof de Boer expressed an opinion that the death was due to natural causes.
12. A/Prof de Boer commented that although Pamela's death appeared to be due to a sudden cardiac event, a specific cause for the cardiac arrest could not be demonstrated. Scleroderma is known to be associated with cardiac fibrosis and may cause cardiac arrhythmias but other causes for cardiac arrest could not be excluded.

13. A/Prof de Boer provided an opinion that the medical cause of death was “1(a) *Cardiogenic shock*” with contributing factor of “*Scleroderma*”.

Having considered all of the available evidence, I am satisfied that Pamela’s death was due to natural causes, and an inquest is therefore not required pursuant to section 52(3A) of the Act.

I convey my sincere condolences to Pamela’s family, friends and carers for their loss.

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.

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

Michael Otway, senior next of kin

Scope (Aust) Limited

First Constable Bailey Cook, Victoria Police, Coroner’s Investigator

Signature:



Coroner Sarah Gebert

Date: 29 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.
