

28 July 2015

Mr J Munro  
Coroner's Registrar  
Coroner's Court of Victoria  
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SOUTHBANK Vic 3006

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Dear Mr Munro,

**RE: RECOMMENDATIONS OF THE CORONER INVESTIGATING THE DEATH OF MARK B WILSON** (your ref: COR 2013 002058).

I write on behalf of the Australian and New Zealand College of Anaesthetists (ANZCA) and the Welfare of Anaesthetists Special Interest Group (Welfare SIG) which is a group jointly managed by ANZCA, the Australian Society of Anaesthetists and the New Zealand Society of Anaesthetists.

Coroner Audrey Jamieson recommended that the Victorian Department of Health and Human Services (DHHS) consult with Victorian hospitals as well as ANZCA and the Welfare SIG to obtain an update on practices in place to manage and mitigate risks with the misuses of neuromuscular blocking agents and/or general anaesthetic agents by medical and allied health staff.

We have liaised with DHHS representatives and advised of our plan to follow up this matter by assessing the relevant ANZCA professional documents and Welfare SIG guidance material in light of the Coroner's recommendations.

ANZCA's [professional documents](#) are crucial for promoting the safety and quality of patient care for those undergoing anaesthesia for surgical and other procedures. The professional documents provide guidance to the ANZCA's trainees and Fellows on standards of anaesthetic practice and define some of ANZCA's policies. Whilst these documents are primarily aimed at anaesthetists and pain medicine practitioners, they may also be relevant to other medical and allied health staff in the perioperative environment.



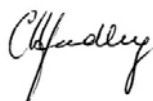
The [resource documents](#) developed by the Welfare SIG provide brief comment, give references, and identify strategies for use in dealing with the more common professional and personal stresses. These are aimed at promoting the personal and psychological well-being of anaesthetists and pain medicine practitioners.

ANZCA and Welfare SIG documents do not specifically refer to restriction of access to substances with abuse potential or ensuring accountability of practitioners delivering these drugs. They also do not cover hospital practices for storage, management and mitigation of risks associated with misuse of drugs. These are issues for regulators and hospital departments which the DHHS is following up.

Our assessment of existing ANZCA and Welfare SIG resources has confirmed that they are generally still appropriate. We have however identified some opportunities for improvement in relation to suggesting courses of action if a suspected addict moves hospital/employer and specifically addressing the isolated 'solo' private practitioner. The relevant documents will be updated to take these topics into account.

Thank you for bringing these important issues to our attention. ANZCA acknowledges that there will always be a balance between protection from harm of a practitioner with abuse potential and ensuring that every patient has timely access to essential medications. We are always willing to work with other agencies in ensuring a safe working environment for our members and their colleagues.

Yours sincerely



Carolyn Handley  
Acting CEO ANZCA