

29 Everard Road, Ringwood East VIC 3135 Phone: (03) 9870 7523 Fax: (03) 9870 9602 Email: admin@ralac.org.au Web: www.ralac.org.au ABN 82 007 762 018

1 March, 2013

Coroner lain T West
Deputy State Coroner
Coroners Court of Victoria
Level 11, 222 Exhibition Street
Melbourne VIC 3000



Dear Coroner West,

Investigation into the death of Alexander Cody Court Reference: COR 2010 001287

In response to your recommendations in pursuant to section 72(2) of the **Coroners Act 2008** made in connection with the death of Mr Alexander Cody, we provide the following information:

8a That Lionsbrae Hostel add to their head injury post fall management checklist, 'for INR review', when the resident is on anticoagulation medication.

The Coroner's recommendation will be implemented.

The Falls Prevention and Injury Minimisation Procedure (document number HPL.PRO.04, Issue 11/28.02.2013) and Post Fall Management (Day of Incident) checklist (document number HPCLF Post Fall, Issue 3/28.02.2013) was amended to reflect the Coroner's recommendation 8a on the 28th February, 2013. Registered nurses will receive education around the amendments to the procedure and the associated checklist. Documentation for residents on anti-coagulation therapy will be audited on a weekly basis (document number HPCLF INR Audit, Issue 2/28.02.2013) by a registered nurse to ensure ongoing review. The amendments and process will be communicated to staff on 26th March, 2013 at the monthly Continuous Improvement and Staff Meeting.

8b That Lionsbrae Hostel have available both observation charts and neurological charts for staff to record their post fall findings and to put in place protocols to ensure the findings are recorded.

At the time of the incident Lionsbrae Hostel's procedures (Falls Prevention and Injury Minimisation HPL.PRO.04, Issue 9/21.04.2010 and associated forms) dictated that in such circumstances, an Observation chart (Observation Record – Following a Fall HPCLFO002, Issue 4/23.11.2007) must be completed by the nurse in charge. Unfortunately the procedure was not completed by the nurse who was in charge overnight. This nurse left the employ of ralac not long after the incident. All current nurses in charge are aware of the procedure and regular audits are conducted to ensure compliance.

8c For residents on anticoagulation, Lionsbrae Hostel to put in place a mechanism for reporting falls and/or a resident's change of medication regime, to the INR pathology service in order that consideration can be given to rescheduling testing.

The Coroner's recommendations will be implemented.

The Pathology Notification Form - Resident on Anti-Coagulant Therapy(document number HPCLF Pathology, Issue 3/28.02.2013) was created to reflect the Coroner's recommendation 8c. This final version will be implemented week commencing 4th March, 2013. In the interim nursing staff have advised Dorevitch Pathology of medication changes/incidents/infections relating to residents on anti-coagulation therapy (an example is attached for your information). Documentation for residents on anti-coagulation therapy will be audited on a weekly basis (document number HPCLF INR Audit, Issue 2/28.02.2013) by a registered nurse to ensure ongoing review. Registered nurses will receive education around the use of this form. The addition of this form will be communicated to staff on 26th March, 2013 at the monthly Continuous Improvement and Staff Meeting.

That Lionsbrae Hostel gives consideration to developing a means by which an alert is raised if a resident's INR testing routine is not followed, or appears to fall outside the established pattern.

The Coroner's recommendation will be implemented.

Documentation for residents on anti-coagulation therapy will be audited on a weekly basis (document number HPCLF INR Audit, Issue 2/28.02.2013) by a registered nurse to ensure ongoing review. This weekly audit will alert if a resident's INR testing routine has not been followed. Registered nurses will receive education in relation to conducting this alert. The creation of this audit and process involved will be communicated to staff on 26th March, 2013 at the monthly Continuous Improvement and Staff Meeting.

If I can be of further assistance or provide clarification on our responses please call me on (03) 9870 7523 to discuss.

Yours sincerely

Rhonda Pryor

**Chief Executive Officer**