



# SOUTH AUSTRALIAN CORONER'S COURT

State Coroner's Office  
302 King William Street  
Adelaide SA 5000

Telephone: (08) 8204 0600  
Facsimile: (08) 8204 0633  
E-mail: coroner@courts.sa.gov.au

## PRELIMINARY FINDING AFTER INQUEST DAWN PATRICIA HEATH

In this matter the deceased Dawn Patricia Heath, aged 78 years, was a resident at the Helping Hand Nursing Home at Parafield Gardens. Mrs Heath met her death on 21 October 2008 having received significant burns that she sustained in an incident at the nursing home.

Mrs Heath suffered from a certain level of dementia. As well, she had a significant deficit in terms of her manual dexterity that included virtual loss of the use of one arm. There were difficulties associated with the use of her other hand.

Mrs Heath was a smoker. She suffered her significant and fatal burns when her clothing accidentally caught alight while she was smoking in a designated outdoor smoking area at the nursing home. The cause of Mrs Heath's death was severe burns.

Mrs Heath was meant to wear a fire retardant smoking apron while smoking but she was resistant to using it. On the occasion in question Mrs Heath was not wearing a smoking apron. Mrs Heath was outdoors smoking and at the time she sustained her fatal burns she was alone and unsupervised by staff of the nursing home. This state of affairs placed Mrs Heath at risk of harm through burns.

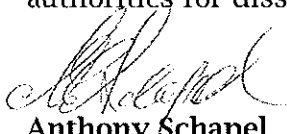
These preliminary findings are intended to notify those institutions and facilities that accommodate and care for elderly residents that the practice of allowing residents who are disabled by dementia and/or by deficits in terms of manual dexterity to smoke while unsupervised, is intrinsically unsafe. If it was not clear already within the aged care industry, the evidence in this Inquest has demonstrated that such residents may, depending upon the level of impairment involved, require close supervision either by members of the resident's family or by a responsible member of staff, such supervision consisting of the immediate presence of, and oversight by, the responsible carer.

Secondly, any facility that chooses to permit its residents to smoke on the premises should ensure that in the case of each individual smoker the risk of harm to the resident, having regard to the level of dementia, the loss of manual dexterity of the resident and other matters relevant to the ability of the resident to smoke safely, and thus the need for and level of supervision, is properly assessed. Such an assessment should take place on an ongoing basis having regard to the possibility of deterioration in the level of cognitive ability and dexterity of the individual over time. All staff responsible for care and their supervisor should be made aware of such an assessment.

These preliminary findings are not intended to create public alarm or to reduce confidence in the operations of aged care facilities and in the level of safety provided by them. I add and stress that Helping Hand Care has implemented certain measures to minimise risk to residents who smoke that includes a regime of close supervision in cases of identified risk.

The initiatives that have been created by Helping Hand Care might well be emulated within the aged care industry.

I will deliver my formal findings and recommendations on a date to be fixed. In the meantime I direct that a copy of these remarks be furnished to the relevant Commonwealth and State aged care authorities for dissemination to all aged care facilities.

  
Anthony Schapel  
Deputy State Coroner