

CAIRNS AND HINTERLAND HOSPITAL AND HEALTH SERVICE

AND QUEENSLAND HEALTH

JOINT HEALTH SERVICE INVESTIGATION — RAVENSHOE POST- INCIDENT REVIEW

TERMS OF REFERENCE

1. Purpose

- 1.1. The purpose of the joint health service investigation is to investigate and report on systemic matters relating to public sector health services' preparedness and response to the explosion at the 'Serves You Right Cafe' in Ravenshoe on 9 June 2015 ('Ravenshoe incident'), as a 'lessons learned' exercise for future mass casualty patient responses.
- 1.2. For the purposes of the investigation, 'public sector health service' has the same meaning as in the *Hospital and Health Boards Act 2011* (Qld) ('HHBA'): a health service provided by a Hospital and Health Service (HHS) or Queensland Health ('department') and includes a health service declared under a regulation to be a public sector health service, but does not include a health service declared under a regulation not to be a public sector health service. Examples of public sector health services include HHSs, Queensland Ambulance Service and Retrieval Services Queensland.

2. Appointment

- 2.1. Pursuant to sections 190(1) and 190(2) of the HHBA and following an assessment that he is qualified for the appointment because he has the necessary expertise or experience, the Health Service Chief Executive ('HSCE'), Cairns and Hinterland HHS ('CHHHS'), and Director-General of the department, have jointly appointed Sydney David Richard Melville, as the lead health service investigator to conduct the investigation with the assistance of an investigation team.
- 2.2. The lead health service investigator must ensure they investigate the matters outlined under '3. *Scope of the investigation*' below and prepare and provide a report in accordance with section 199 of the HHBA.

3. Scope of the investigation

- 3.1. The health service investigators will:
 - (a) invite public submissions relating to these Terms of Reference to inform the health service investigators' assessment of issues, and findings and recommendations relating to public sector health services' preparedness and response to the Ravenshoe incident as a 'lessons learned' exercise for future mass casualty patient responses
 - (b) review and assess the adequacy of any findings and recommendations of reviews, debriefs or similar processes relating to public sector health services' preparedness and response to the Ravenshoe incident, which have been completed by the department, QAS or an HHS, and associated material including reports

- (c) conduct any further review necessary of public sector health services' preparedness for, and responses within and across entities, to the Ravenshoe incident with a focus on systemic matters pertaining to:
 - i. preparedness—planning, training and educational activities relating to disasters, specifically mass casualty incidents involving burns patient management
 - ii. the state-wide response to the incident
 - iii. recovery in the post-incident period and longer term
- (d) make findings and recommendations regarding:
 - i. improvements that could have been achieved in public sector health services' preparedness for, and responses within and across entities to the Ravenshoe incident, with a focus on systemic matters
 - ii. the ways in which the management, administration and delivery of public sector health services involved in future mass casualty patient responses, could be maintained and improved.
- (e) submit to the HSCE CHHHS and Director-General of the department, a draft report no later than 10 days prior to the due date for the final report, regarding the matters listed above in '3. Scope of the investigation' and identifying key issues, findings and recommendations
- (f) submit to the HSCE CHHHS and Director-General of the department by 28 February 2016, a final report that may be released publically, regarding the matters listed above in '3. Scope of the investigation' and identifying key issues, findings and recommendations.

4. Powers of the health service investigators

- 4.1. The health service investigators have all of the powers given under section 194 of the HHBA including the power to enter a public sector health service facility when it is open and to access, copy or take extracts from any document (including documents that contain confidential information) that is relevant to the health service investigators' functions and is in the possession or control of an employee of the department or a HHS.
- 4.2. The health service investigators must make every reasonable effort to also obtain any other information or documentation that is relevant to the investigation.

5. Conduct of the investigation

- 5.1. The health service investigators are to notify any person who provides information for the investigation that they have been appointed as an independent health service investigator, having no conflict or perceived conflict of interest regarding the matters under investigation.

- 5.2. The health service investigators are to be aware of, and comply at all times with the provisions of Part 9 of the HHBA that govern the undertaking of the investigation, including (but not limited to) the duty of confidentiality.
- 5.3. With the prior notification to, and facilitation by the HSCE CHHS, the health service investigators will:
 - (a) interview those persons whom the health service investigators believe may be able to provide information relevant to the investigation, which may include persons who are not employees of the department or an HHS
 - (b) request that an HHS and/or the department (as applicable) give any lawful and reasonable directions to its employees, which may be required during the investigation. For example, directions may include a lawful and reasonable direction to an employee to maintain confidentiality, attend an interview or provide copies of documents in their possession or control. The health service investigators must inform the Director-General of the department or HSCE CHHS of any failure by an employee to comply with a direction.
- 5.4. The health service investigators may co-opt specialist clinical, clinical governance or human resource management expertise or opinion, or administrative, information technology or other assistance, where necessary in accordance with section 197(3)(a) of the HHBA. The health service investigators must obtain the Director-General of the department's written approval before incurring any expenses in this regard.
- 5.5. Where the health service investigators propose to make a comment, finding or recommendation that is adverse to a person, the health service investigators must first afford that person an opportunity to respond to the substance of any allegations against them or any potential adverse comment, finding or recommendation about them.
- 5.6. The investigation report prepared in accordance with section 199 of the HHBA must specifically address the matters outlined in section 3 above. The health service investigators are to provide in the body of the report their assessment of the evidence and reasons for their findings.
- 5.7. A summary of evidence relied upon by the health service investigators to make a recommendation is to be included in the investigation report.
- 5.8. The names of persons providing information to the health service investigators, and any patient, staff or other names, must be kept confidential and referred to in a de-identified form in the body of the investigation report (with a legend confirming the identity of those persons to be provided by way of attachment), unless it is agreed by the health service investigators and the Director-General of the department and HSCE CHHS that the identification of a person is essential to ensure that natural justice is afforded to any particular person.
- 5.9. Legal advice may be obtained by the health service investigators at the arrangement and cost of the department, where necessary, in accordance with section 197(3)(a) of the HHBA.

- 5.10. The health service investigators are to provide to the HSCE CHHHS and Director-General of the department within 7 days (or as otherwise agreed) of receiving the appointment and these terms of reference:
- (a) an investigation plan
 - (b) an estimate of hours of work required to complete the investigation
 - (c) confirmation in writing of an ability to meet the timeframes for the conduct of the investigation, including the due date for the draft and final reports.
- 5.11. The health service investigators are to notify the HSCE CHHHS and Director-General of the department about the progress of the investigation at fortnightly intervals.
- 5.12. Any request for an extension of the due dates for the draft report or final report is to be made in writing to the Director-General of the department and HSCE CHHHS at least 7 days before the due date, with supporting reasons.
- 5.13. Terms and conditions relating to the health service investigators' professional rates, out-of-pocket expenses, travel arrangements and other relevant matters are contained in the associated agreement for provision of the health service investigators' services.
- 5.14. If necessary, the health service investigators should report back to the Director-General of the department and HSCE CHHHS for further instructions during the course of the investigation.