

Manitoba Ombudsman

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October 21, 2008

The Honourable Raymond E. Wyant
Chief Judge
Provincial Court of Manitoba
5th floor, 408 York Avenue
Winnipeg MB R3C 0P9

INQUEST INTO THE DEATH OF ERIC CLIPPING
DEPARTMENT: MANITOBA HEALTH AND HEALTHY LIVING
OUR CASE NUMBER: 2007-0499

Dear Chief Judge Wyant:

I am writing to advise of the results of the inquiries made by my office concerning the inquest report recommendations dated April 20, 2006, issued by the Honourable Judge C. Newcombe into the death of Eric Clipping.

Shortly after midnight on June 23, 1995, Mr. Clipping was discovered in the vicinity of 272 Main Street, bleeding from lacerations to the head and was transported to the Health Sciences Centre by ambulance. His wounds were sutured and he was taken to the Main Street Project as he was intoxicated.

At about 1:00 p.m. Mr. Clipping was observed by staff at the Main Street Project to be tremoring with blood discharging from his mouth. He was transported back to the Health Sciences Centre where he underwent emergency surgery, but never regained consciousness. He was later transferred to a nursing facility in Churchill, Manitoba where he remained in a vegetative state until his death on April 28, 1996. The cause of death was attributed to pneumonia as a result of a longstanding coma caused by trauma.

The Chief Medical Examiner called for an inquest pursuant to Section 19(2) of *The Fatality Inquiries Act*. The inquest report was issued on April 20, 2006.

As you are aware, it is the practice of this office to follow up on inquest recommendations when they relate to a provincial department, agency or municipality. In this case, Judge Newcombe made two recommendations. In this case my office made inquiries with the Department of Health and Healthy Living. The following is the recommendation within my purview and the Department's response.

RECOMMENDATION

Ms. Mary Jane Clipping, the sister of the deceased, was present for the evidence called. At its conclusion she noted that, upon initial discharge from the emergency ward, Mr. Clipping was apparently not given the handout warning of symptoms such as nausea and dizziness, recommending that if such symptoms appear, the patient seek medical help immediately. It was her suggestion that all patients receive such a handout, given perhaps to the police officer escorting them to Martha Street, that it be kept with their personal effects, and that staff bring it to their attention upon their release. Given the testimony that there can be days or even weeks between the receipt of trauma and the manifestation of symptoms, this is a common sense suggestion that I would recommend.

DEPARTMENT RESPONSE

The Nursing Director of the Winnipeg Regional Health Authority (WRHA) Emergency Services provided our office with a copy of the handout. The region has confirmed that they have implemented the above noted recommendation to Emergency Departments across the WRHA.

Manitoba Health and Healthy Living received the handout provided by the WRHA to head injury patients and reviewed its applicability for all Emergency Departments in the province.

On September 26, 2008, Manitoba Health and Healthy Living advised that *“all Regional Health Authorities are now utilizing head injury handouts in their hospital emergency departments. The benefit of standardized emergency department handouts for use across the province has been recognized, and as a next step all Regional Health Authorities are collaboratively working together in this endeavor.”*

Based on our review of this matter, it would appear the Department has given reasonable consideration to the above noted recommendation. As such, our file concerning the Eric Clipping inquest has been closed.

Yours truly,

Original Signed by

Irene A. Hamilton
Manitoba Ombudsman

c: Ms Arlene Wilgosh
Deputy Minister, Manitoba Health and Healthy Living

Dr. A. Thambirajah Balachandra, Office of the Chief Medical Examiner