

Manitoba Ombudsman

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November 5, 2018

The Honourable Margaret Wiebe
Chief Judge
Provincial Court of Manitoba
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Inquest into the death of Douglas Leon Sanderson
Public Body: Manitoba Health, Seniors and Active Living
Our File No: 2014-0283

Dear Chief Judge Wiebe:

As you are aware, it is the practice of my office to follow up on inquest recommendations when they relate to a provincial department, agency or municipality.

I am writing to advise you of the results of the inquiries made by my office concerning the inquest report recommendations into the death of Mr. Douglas Leon Sanderson. The June 2, 2014 inquest report of the Honourable Judge Dale C. Schille was publicly released on June 5, 2014.

BACKGROUND

A brief summary of the events leading up to the death of Douglas L. Sanderson, age 67, at the Health Sciences Centre (HSC) on November 30, 2009, follows.

On November 27, 2009, Mr. Sanderson attended the Vendome Hotel in Winnipeg and visited with friends. He consumed alcohol in a friend's room as well as in the bar on the main floor of the hotel. He became very intoxicated and fell off the stool where he was drinking, striking his head. He was assisted by the Downtown Business Improvement Zone Patrol to a friend's room but refused to stay there. He was found shortly afterwards, lying on the floor, conscious and moaning, outside the door to his friend's room.

Paramedics attended to him, examined him and noted that he had no visible injuries or abnormalities. Mr. Sanderson refused the Paramedics' offer to attend the hospital, but he agreed to attend the Main Street Project (MSP). At MSP, the Paramedics advised MSP staff that they had medically cleared Mr. Sanderson, after which MSP staff lodged him into a cell within the

Intoxicated Persons Detention Act (IPDA) section of the facility. The next morning when roused for discharge, Mr. Sanderson fell against a wall and struck his head on a fire extinguisher before falling to the floor. Paramedics were summoned and when they examined Mr. Sanderson, they noted some abnormalities and took him to the HSC. Based on tests that were done on Mr. Sanderson at HSC, it was noted that he had brain injury resulting from head trauma. Medical intervention was done at HSC but was unsuccessful, and Mr. Sanderson died on November 30, 2009.

RESPONSE TO INQUEST RECOMMENDATIONS

The Honourable Judge Dale C. Schille made four recommendations in the inquest report, and three recommendations were directed to Manitoba Health, Seniors and Active Living (MHSAL), the Main Street Project (MSP), the Winnipeg Police Service (WPS), the Winnipeg Regional Health Authority (WRHA) and the Winnipeg Fire Paramedic Service (WFPS). MHSAL, and later on, Shared Health¹, responded to our office on the three recommendations that jointly affected MHSAL/ SH and the other four offices mentioned. As of October 2017, MHSAL reported that they had completed one of the three recommendations (Recommendation #4 below), while two were partly completed. On May 28, 2018, SH reported that they had completed the other two recommendations (Recommendation #1 and #2 below).

The fourth recommendation (i.e. Recommendation #3) was directed to IPDA staff at MSP, and as they do not fall under Manitoba's jurisdiction (MSP is a charitable organization and its staff are not government employees), we did not follow up on the recommendation.

Below are the three recommendations that were addressed by MHSAL/ SH:

Recommendation #1

The decision to discharge a detainee in the IPDA unit of the MSP be made by a paramedic after conducting a medical assessment.

By its letter to the Ombudsman, dated May 28, 2018, SH advised that:

...

We are pleased to report this recommendation is now complete. Discharge screening for all detainees on a 24/7/365 basis has been fully implemented. The decision to discharge a detainee in the IPDA unit of the MSP is being made by a paramedic after conducting a medical assessment. Paramedic staffing for the MSP is stabilizing because of recent WRHA funding commitments.

¹ While MHSAL leads the development of policy and broad system planning regarding Manitoba's health care system, Shared Health is an organization that was recently established by government, to partner with MHSAL. SH's focus is to improve health and/or clinical services, implement consistent standards of care and, reduce wait times for accessing health services.

Recommendation #2

That a funding agreement be reached between the Main Street Project, the Winnipeg Police Service, the Winnipeg Regional Health Authority and the Winnipeg Fire Paramedic Service. The agreement should contemplate the need for strategic planning and possible expansion.

In its May 28, 2018 letter, SH advised that:

We are pleased to report this recommendation is now complete. At its April 26, 2018 meeting, City Council agreed to the service agreement between the WPS and MSP, outlining specific deliverables associated with the services provided in MSP's IPDA unit. The service agreement is an interim step to formalize the existing IPDA services while broader system planning around mental health and addictions is underway.

Specifically, the WPS, Winnipeg Fire Paramedic Service, WRHA and Shared Health all participate on the Community Wellness and Public Safety (The Alliance), a group of concerned community, business and public sector leaders who came together more than two years ago to discuss better ways to approach chronic and acute treatment of substance abuse in Downtown Winnipeg. While The Alliance is not a service delivery organization, the collective experience and expertise within the group, combined with access to robust data demonstrating the magnitude of the problem, is being leveraged to develop a detailed business plan with support from MNP Consulting.

The business plan is intended to align with the Province's recently released VIRGO report² on Mental Health and Addictions, Shared Health's Clinical and Preventative Services planning, and End Homelessness Winnipeg's 10-year plan. MSP's Executive Director also participates in The Alliance's expert advisory group and has committed to alignment of MSP's strategic planning with the overall business plan being proposed by The Alliance.

...

Recommendation #3

IPDA staff should have access to video recording equipment on the unit at all times and be able to review previously recorded events.

For the reason indicated on page 2, we did not follow up on this recommendation.

² A report issued by the VIRGO Planning and Evaluation Consulting team, a consulting company retained by the province to review Manitoba's health system.

Recommendation #4

The provincial electronic health record system be made available to paramedics in the field as well as those working at the Main Street Project if this has not already been implemented.

By its letter to the Ombudsman, dated October 25, 2017, MHSAL advised that:

The mobile version of the electronic medical record has been implemented for use by paramedics.

...

CONCLUSION

As MHSAL/ SH have provided a full response to the inquest recommendations, we will conclude our monitoring of the implementation of the recommendations. Please note an electronic copy of this report will be posted on the Manitoba Ombudsman website:

www.ombudsman.mb.ca.

Yours truly,



Marc Cormier
Acting Manitoba Ombudsman

cc: Ms. Karen Herd, Deputy Minister, Manitoba Health, Seniors and Active Living
Brock Wright, Chief Executive Officer, Shared Health
Danny Smyth, Chief of Police, Winnipeg Police Service
John Lane, Fire Paramedic Chief, Winnipeg Fire and Paramedic Service
Real Cloutier, President and Chief Executive Officer, Winnipeg Regional Health Authority
Dr. John K. Younes, Chief Medical Examiner