NSW Ambulance makes stunning reversal of allegation against Australian paramedic Tony Jenkins

Cheryl Crisp 27 December 2018

New South Wales Ambulance (NSWA) has made a stunning admission that one of the central allegations it made against 28-year veteran paramedic Tony Jenkins following his suicide on April 9 this year was, in fact, false. At the time of his tragic death, Jenkins was working in the Newcastle region, to the north of Sydney.

An internal NSWA investigation, documented in a Root Cause Analysis (RCA) report, was hand-delivered to Tony's widow, Sharon Jenkins, on September 7. The report alleged: "Paramedic A (Tony Jenkins) also handed over to the managers two syringes which the paramedic stated contained morphine."

In response to a letter then sent to NSWA by Sharon Jenkins, outlining 28 pages of questions arising from anomalies, contradictions and unclarities in the RCA report, Acting Director of Clinical Governance Scott Deeth wrote to Dominic Morgan, NSWA chief executive, backtracking on the accusation.

Deeth wrote: "This description of events was in error. The RCA team records do not indicate that Paramedic A ever handed over the vials to the manager." He then wrote: "The sentence should have read 'Paramedic A also informed the managers that he had taken two vials at shift commencement which the paramedic stated contained morphine.""

The extraordinary about-face provided no explanation how such an "error" could have occurred. If the RCA team records did not state that Jenkins handed the managers syringes of morphine, then how and why was it included in the report?

More significantly, the only reason for the reversal is due to the sustained campaign by Jenkins' family for answers regarding the circumstances leading to the unscheduled meeting with management he was called, mid-shift, to attend on April 9. The family contend that it was this meeting, to which he was summoned without notice, without a support person present and which was not recorded or minuted by the managers present, triggered his suicide.

As well as stealing morphine, Jenkins was accused of tampering with vials of the powerful opioid fentanyl, which is administered to patients as a pain-killer by paramedics, to purportedly sustain an addiction.

The clear question which arises from the withdrawal of the serious morphine allegation is what else in the RCA report is false? Sharon Jenkins was informed by the RCA team leader that the months-long delay in releasing the report was to ensure that its accuracy was guaranteed. There has still been no evidence provided to the family that he had either morphine syringes or had tampered with allegedly 44 vials of fentanyl. Tony Jenkins' autopsy and toxicology results revealed there was no fentanyl, alcohol or other drug in his system.

There has also been no explanation as to how one paramedic could, in fact, carry out such large-scale tampering. This is despite ongoing requests by his family for such evidence (see: "Unanswered questions surround the suicide of Australian paramedic Tony Jenkins").

The queries contained in the letter by Sharon Jenkins to NSWA included: Where the morphine syringes had come from? Was he allegedly carrying them in his hand, pocket or bag? Was he asked where he had taken the syringes from and had they been picked up as missing in an audit? Where are the syringes now and had they been tested and secured?

These were just some of the 273 questions posed by Sharon Jenkins arising from the RCA report. The majority have gone unanswered by NSWA on the grounds that the information is still subject to other investigations.

The *Newcastle Herald* reported that it was informed by a NSWA spokesperson that "the syringe reference was a 'mistake in the summary of the description' made by the Root Cause Analysis team and noted by NSW Ambulance staff."

In fact, the allegation of syringe theft was made in the opening sections of the RCA, under the heading "Outline of Events." The reversal by NSWA arose directly and only

from the scrutiny of the report by Tony's family, not because it was "noted."

The about-face on the morphine theft accusation was preceded by an apology to the family from Dominic Morgan in October for statements he had made shortly after Tony's suicide. Before any investigation had begun, let alone concluded, Morgan asserted: "From my understanding of Tony Jenkins he was this well respected, well regarded professional and it concerns me greatly that a person with that reputation could find themselves so desperate that their only option was to turn to drugs of addiction."

His apology for "any additional hurt or distress that has been caused to your family" was elicited following the protest by Sharon and her daughter Cidney outside Hamilton ambulance station in Newcastle in defence of Tony's reputation.

NSWA has justified identifying Jenkins as the sole suspect in the alleged tampering of a large number of fentanyl vials with claims there were "irregularities in his pin access code usage," which allows paramedics to unlock medication safes.

Multiple requests by his family to be supplied with his pin access history have been denied. The only example given to the family of "irregularities" is that his code was allegedly used to access restricted medication safes "40–75 minutes prior to his shift commencement," a claim which both his widow and two daughters strenuously dispute.

The other reason that has been given for no-one else, apart from Jenkins, being identified, investigated or interviewed for the alleged fentanyl tampering, was a September 2017 state-wide audit, performed for a "non-related matter," of all paramedics' fentanyl administration. That audit found Tony Jenkins was the second highest administrator of fentanyl in the state.

In January 2018, following receipt of the audit findings, Newcastle NSWA senior management investigated and found there was no evidence that Jenkins had "mis-used restricted NSW Ambulance medications." Yet, just three months later, despite being cleared of any wrongdoing, this audit was cited as the main reason that Jenkins was singled out as the only possible suspect in alleged fentanyl theft.

Tony Jenkins had served as a paramedic for 28 years in NSW Ambulance and had earned a reputation as a dedicated and committed health professional. He was known as an outspoken opponent of the deteriorating conditions under which paramedics are increasingly forced to work. He regularly raised concerns with management about the safety and information provided to on-road paramedics who, he said, were sent to jobs without the required protection or knowledge about what they were about to confront.

He also defended other paramedics against bullying and

intimidation, including, just prior to his death, a female colleague. Neither the Health Services Union (HSU), of which Jenkins was a member, nor the Australian Paramedics Association (APA), assisted him in these struggles. Nor have they played any role in the ongoing attempts of the family for the truth of what happened to their loved one. Both unions have remained glaringly silent in the face of Tony Jenkins' suicide and the family's campaign.

For the grieving family, the constant issue in the almost nine months since Tony Jenkins' death has been the refusal by NSWA to provide accurate and timely information when requested. The family's fight for the truth has been waged against a wall of silence and obstacles erected by NSWA with the assistance of both unions. The family is calling for a public coronial inquest, in which all the information leading up to his suicide and subsequent events, is made available.

The back flip by NSWA highlights that no trust can be placed in either NSW Ambulance management or the unions to reveal the circumstances about the tragic death of an experienced and expert paramedic and husband, father and son. The case of Tony Jenkins and his family's campaign should be made the subject of the widest possible independent discussion by paramedics and health workers across NSW and Australia and given the greatest support.

The author also recommends:

Unanswered questions surround the suicide of Australian paramedic Tony Jenkins

[6 September 2018]

Paramedic's suicide points to crisis in Australian ambulance services

[9 July 2018]



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