

TRANSCRIPT OF PROCEEDINGS

CORONERS COURT

MACK, Coroner

TOWN-COR-000154/05

IN THE MATTER OF AN INQUEST INTO THE
CAUSE AND CIRCUMSTANCES SURROUNDING
THE DEATH OF AMANDA TERESE FRANCIS CROWSTON

TOWNSVILLE

..DATE 26/09/2007

CONTINUED FROM 05/07/2007

FINDINGS

WARNING: The publication of information or details likely to lead to the identification of persons in some proceedings is a criminal offence. This is so particularly in relation to the identification of children who are involved in criminal proceedings or proceedings for their protection under the *Child Protection Act 1999*, and complainants in criminal sexual offences, but is not limited to those categories. You may wish to seek legal advice before giving others access to the details of any person named in these proceedings.

CORONER: This is the continuation of an inquest into the death of Amanda Terese Crowston. These are my findings with respect to the death of Amanda Terese Francis Crowston.

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The evidence in the inquest was taken on the 5th of July 2007 and the inquest was adjourned for findings to be delivered. Evidence was received in the form of witness statements, police reports, along with the exhibits mentioned in those documents. All statements and other evidentiary documents were made available to the next of kin.

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During my consideration of the evidence in this matter and in formulating the findings I am about to deliver I had pause for thought on the limited nature of the findings that would likely be made in this inquest.

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I was concerned that the brief nature of the findings would in some way understate the value of Ms Crowston's life, a life that ended far too soon. To that extent I make the comment that the purpose of these findings is of a very narrow scope. Their purpose is not to provide an assessment of the quality of a person's life. That assessment is to be made by the people who knew her well and by whom she was loved.

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Amanda Terese Francis Crowston was born on the 2nd of November 1983. She turned 22 on Wednesday the 2nd of November 2005. On Friday the 4th of November 2005 she celebrated a friend's 18th birthday with some of her friends. The celebration included drinking alcohol and on the evidence of her friend,

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Michael Cowley, the taking of an ecstasy tablet. These celebrations ended for Amanda Crowston at about 2 a.m. on Saturday the 5th of November 2005 when she and her friend Michael Cowley retired.

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On Saturday the 5th of November 2005 Amanda Crowston belatedly celebrated her own birthday with her friends. Those celebrations were prolonged and extended throughout Saturday night and well into Sunday. Evidence from Mr Phillip Beddows suggests that the group, including Amanda Crowston, continued to drink up to about 5 a.m. on Sunday the 6th of November 2005.

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Later on that day Amanda Crowston went out again in company with Mr Carr and did not get home until about 1 a.m. on Monday the 7th of November 2005.

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During the course of the weekend it is clear that Ms Crowston consumed alcohol and it seems clear from the analyst's certificate that she had ingested amphetamine, methylamphetamine, methylene dioxymethylamphetamine, and methylene dioxyamphetamine. She had also consumed cannabis.

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By the time she had completed her celebrations on Sunday night or Monday morning she must have been exhausted. She went to bed on Monday morning and complained of not feeling well. Some time later when she was alone in her bed she choked on the contents of her stomach that she had vomited.

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The issue that permeates the investigation surrounding Ms Crowston's death is the proposition that timely intervention by Mr Wesley Carr may have prevented it. Mr Carr was called as a witness and his is the only evidence available with respect to Ms Crowston's final moments.

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I accept that some of the aspects of the evidence he gave were less than credible and he was not truthful with respect to his involvement with illegal drugs. That being said, there is nothing to suggest that his recollection of the events immediately before and after Ms Crowston's death is not accurate.

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He gave evidence that he was attending to Ms Crowston, that he left her to go to the toilet and when he returned to discover her not breathing he contacted the ambulance who arrived a short time later.

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His evidence at the inquest is not inconsistent with the conversation he had with Detective Edwards at the premises on the 7th of November 2005, and is consistent with his statement taken by Detective Edwards on the same date.

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Mr Carr was questioned at some length as to the care he administered to Ms Crowston prior to her death and he conceded logically enough that if he knew how sick Ms Crowston was he would have called the ambulance earlier and Ms Crowston would likely have survived.

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The reality is that in his view held at the time she was not so sick that he should call an ambulance, and certainly he did not expect that she was so sick that she would not survive. This view was taken as a result of his previous experience with Ms Crowston where she had suffered the effects of using alcohol and drugs.

I have also had reference to the evidence of Professor Williams who indicates that the death could occur quite rapidly subsequent to the inhalation of the gastric contents. He also indicated some possible signs that could be expected upon the aspiration of gastric contents. In the present case if there was no-one there to observe those symptoms there would naturally not be anyone to assist Ms Crowston after she had vomited.

As to what may have caused her to vomit that is something I am unable to make a conclusive finding on. Mr Cowley says in his statement that Ms Crowston had vomited on Saturday morning the 5th of November 2005. He put that illness down to a hangover due to the alcohol she had had the previous night.

Although the analyst's certificate does not reveal any alcohol in Ms Crowston's blood at the time of death it is clearly the case that she had been drinking on the days prior to her death. Professor Williams gave evidence of the general lack of quality control with respect to the drugs detected in Ms Crowston's blood. The drugs are illegal and contain

ingredients that may cause stomach upset or they may have vomiting as a complication to their use.

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In any event the fact that Ms Crowston vomited does not appear to be surprising given the enthusiasm with which she engaged in the celebration of her birthday. However, I am not in a position to find that there was an inevitability or predictability about Ms Crowston vomiting that night that might lead to a conclusion that she should have been hospitalised that morning rather than be left to recover at home.

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Clearly if she had been hospitalised she would have survived but that is a case of being wise after the event. The same can be said of the proposition that Ms Crowston should have been placed in a recovery position if she was to be left unattended particularly if she was conscious when left alone.

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I am cognisant of the limitations placed on the nature of the findings I am able to make with respect to statements indicating criminal or civil liability. I refer specifically to section 45, subsection (5), paragraph (a) and (b) of the Coroners Act of 2003 and it is not my intention to make any comments that may indicate that any person is guilty of an offence or is civilly liable for any action.

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I also refer to section 48 of the Coroners Act. With respect to that provision it is not my intention to refer the matter to the Office of the Director of Public Prosecutions.

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I now come to my formal findings. I find that the name of the deceased was Amanda Terese Francis Crowston. I find that the deceased died as a result of inhaling vomit after a weekend of celebrations that involved significant alcohol and drug abuse.

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In find that Ms Crowston died at 27 Lothair Street, Pimlico, in the State of Queensland and that the date of death was the 7th of November 2005.

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I find the cause of death was aspiration of gastric content due to drug abuse.

The inquest is now closed.

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