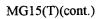


HAMPSHIRE CONSTABULARY

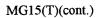
RECORD OF INTERVIEW

SDN:	□ ROTI: ⊠	Contemporaneous Notes
Person int	erviewed: Jean Elizabeth I	DALTON
Place of in	nterview : Park Gate Polic	Police exhibit no. : Number of pages : Signature of interviewing officer producing exhibit :
Date of in	terview : 18 July 2000	
Time com	menced: 1505 Time	e concluded : 1530
Duration	of interview : 25 mins	Tape reference numbers ◆:
Interview	ing Officers : DC 1484 CC	OLVIN DC 92 McNALLY
Other per	sons present :	
Tape Counter Times	Person Speaking	Text
0.08	DC COLVIN	I am DC 1484 COLVIN, this is a continuation interview of Jean
		DALTON, time by my watch is 1505. I must remind you that you
	•	are still under caution which I did at the beginning of the
•		interview. Can you just confirm that during the break I have not
		asked you any questions in relation to anything to do with why
		you are here.
	DALTON	Yes.
	DC COLVIN	We talked about the Golf Club basically.
Signature	e(s):	◆ Not relevant for contemporaneous notes



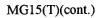


Tape Counter Times	Person Speaking	Text
	DALTON	Yes.
	DC COLVIN	Okay, right, prior to the interview concluding I was just sort of going over the summary to summarise regarding Mrs.
		RICHARDS and the level of drugs here and we were discussing the fact that the drugs, particularly the four that were eventually put on the driver, nothing there in terms amounts or the combination to cause you as a Pharmacist any concern about their use?
	DALTON	No.
	DC COLVIN	Now there are just a few other things I wanted to cover before we go on. I just want to summarise over what we have talked about so far so, just to get my train of thought back. So in relation to particular patients, you look at their prescription record?
	DALTON	Yes.
Signature	e(s):	• Not relevant for contemporaneous notes



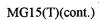


Tape Counter Times	Person Speaking	Text
	DC COLVIN	In whatever form it is, as I understand it is filled out by the
		Doctor
	DALTON	It is.
	DC COLVIN	in terms of the prescription. Now if there is nothing there to
		cause you any concern or queries then in your role you are
		generally satisfied that thats acceptable?
	DALTON	Yeah.
	DC COLVIN	Level of treatment
	DALTON	Hm,hm.
	DC COLVIN	If there is something that doesn't, if there is something that you
		are not sure about and you think that is either unusual or I don'
		agree with that
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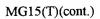


Tape Counter Times ◆	Person Speaking	Text
	DALTON	Hh.hm.
	DC COLVIN	Then
	DALTON	I bring it to the attention
2.27	DC COLVIN	You bring it to the attention. Have you ever had cause to do that?
	DALTON	Oh yes.
	DC COLVIN	Can you give me some examples?
	DALTON	Um, well I can only give you general examples but I can't talk specifics. It would not be appropriate to give something with known gastric irritation, something that was going to irritate it.
	DC COLVIN	Right.
	DALTON	So you would always bring that to the attention, theres a whole
Signature	e(s):	• Not relevant for contemporaneous notes





Tape Counter Times •	Person Speaking	Text
		book full of things.
	DC COLVIN	Yeah, okay, but I take it there are times when you wouldn't, would you necessarily know that if you are referring to the prescription record?
3.12	DALTON	You would know that if they are on something to collect their Gittact.
	DC COLVIN	Right if they are on another drug?
	DALTON	Yeah.
	DC COLVIN	For their gastric
	DALTON	Yeah.
	DC COLVIN	symptoms and they're on
Signature	e(s):	• Not relevant for contemporaneous notes





Tape Counter Times *	Person Speaking	Text
	DALTON	Something that is going make it worse
	DC COLVIN	Then you say hold on a minute they are being treated for that
	DALTON	Yeah.
	DC COLVIN	and that, and that is a problem?
	DALTON	Yeah.
`	DC COLVIN	Right I see, okay. Now in relation to Dr. BARTON who was the Doctor on the Ward at the time, have you had any times when you had to bring something up in relation to some she has prescribed you've had a problem with?
	DALTON	There would have been occasions but none actually spring to mind at the moment specifics, but yes we've either spoken on the phone or its a non-urgent matter it has been referred back.
Signature	e(s):	◆ Not relevant for contemporaneous notes





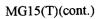
Continuation Sheet No: 6

Record or	f interview of: Jean Eliz	abeth DALTON
Tape Counter Times •	Person Speaking	Text
4.00	DC COLVIN	How does get it referred back?
	DALTON	Well if its urgent, I go to her direct
	DC COLVIN	Yeah.

DALTON

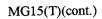
...to Surgery or indeed any Doctor direct, if its something that really needs bringing to attention, well I can give you an example, um, Warfarin is a medicine used to keep one's, in general terms, blood thin, so it doesn't clot and it has been controlled within fine margins and there are a number of medicines that could cause that margin to move and on occasion, a good example would be an anti-biotic might be prescribed and as I have already indicated already, this might be going on for two days or three days or whatever, prior to my arrival, so its a bit, I would put that through to her but not necessarily get on the phone and recommend that they do additional blood tests. Its quite interesting what can be given together so long as you monitor it properly so that would be something that would come up.

Signature(s):	
	• Not relevant for contemporaneous notes





Tape Counter Times ◆	Person Speaking	Text
	DC COLVIN	Would you ever record on any of the patient's documents at all?
	D. 14 TON	No
	DALTON	No.
5.22	DC COLVIN	No. So apart from your initials on the Drug Register here you
		don't have any form of contact with the patients' records?
	DALTON	I might, no I wouldn't go to, no I would only go to their master
		notes if it might solve the thing that I'm querying, it might be this
		is a 'must' because of the combination of problems they've got
		and there is no way round it, so that in regard you may or may no
		then continue to bring it to the Doctor's in question attention 'cos
		there is every chance they are fully aware of it but they have go
		no choice.
	DC COLVIN	Less of two evils?
	DALTON	Yeah so its always about that in mind argument so you know, i
Signatu	re(s) :	• Not relevant for contemporaneous notes





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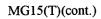
HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Гаре	interview of: Jean Eliza	
Counter Γimes ◆	Person Speaking	Text
-		has to be determined where we are with this person and do we
		need to do a '999' effectively, like grab them now and do
		something about it, is it just something they need to know that
		they can deal with it at a more convenient time. Because like
		everybody they are busy doing the other part of their job when
		they are not at that address. So it all has to be weighed up.
6.57	DC COLVIN	Have you had a problem like that because of the length of time it
		has taken you to get there because, you know, obviously that is
		your role?
	DALTON	Not to my knowledge.
	DC COLVIN	Have you come across something, you thought, you know
	DALTON	Not to my knowledge.
	DC COLUMI	You might have something that has been that urgent that
,	DC COLVIN	Tou might have something that has even that argument



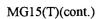


Record of	finterview of: Jean Eliza	Continuation Sheet No : 9 abeth DALTON
Tape Counter Times •	Person Speaking	Text
	DALTON	No, not to my knowledge.
	DC COLVIN	No.
7.15	DALTON	Because in the field of medicine, you are usually in a situation
		where you got many things wrong, you are often hard pushed to
		decide what has caused, what has happened, that could be the
		disease state itself that caused a problem, so you have to weigh it
		all up but to my knowledge passing on information has not
		resulted in any detriment, as I say when in doubt about how long
		have I got before this information can be passed on you do it
		immediately.
	DC COLVIN	You do it immediately, but you can't recall any times when you
		thought well we'll have a look at this one as an urgent one or
	DALTON	and thought, Oh my God
	DC COLVIN	'Oh my God,' whats going on here?
Signatur	e(s) ·	





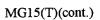
Tape Counter Times ◆	Person Speaking	Text
	DALTON	No.
).16	DC COLVIN	Okay, if it came to that or if it comes to, you may have answered
		this already, so I apologise if you have, in relation you have got a
		problem with a particular drug and you discuss it with the Doctor
	•	and you agreed to do whatever. Do you recall that anywhere that
		you've had to do that, is that put down anywhere
	DALTON	Its not a routine thing to do no.
	DC COLVIN	So does it get recorded in any form that you've requested this to
		be changed?
	DALTON	No, not routinely.
	DC COLVIN	Right, you say not routinely, so is there other times when you
		would do?





Continuation Sheet No: 11

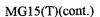
Tape Counter Times •	Person Speaking	Text
	DALTON	Yes.
9.00	DC COLVIN	Can you think of any examples?
	DC McNALLY	Do you keep a diary anything regarding your day's events?
	DALTON	No, only my appointments but no detail, I wouldn't do the job wouldn't get the job done if I sat, well I don't know how to explain that except for me personally I suppose, if you like putting it in the crudest form, there could be a gut feeling that you have yourself that you feel for your own sake, its safe to document it but not as a general rule no.
	DC COLVIN	Have you done that in the past and where have you recorded it?
	DALTON	Well if it happened at QA site, theres a diary system that we could use. If it happened off-site, and I can't recall the last time I had that sort of feeling off-site, I would report it back up the line and may or may not make an entry, excuse me, on my own personal





Continuation Sheet No: 12

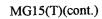
Γape Counter Γimes ◆	Person Speaking	Text
		record. Um, as I say anything that wasn't sitting comfortably I
		would report back.
	DC COLVIN	So a personal record you've got?
	DALTON	No, I would only actually write it if I felt, if I just had that
		uncomfortable feeling about it because I can assure you a Pharmacist on a good day could be saying something every two
		minutes.
	DC McNALLY	So what you are saying that if you hit a problem there and you fel it necessary then you would put pen to paper?
	DALTON	Yeah I would.
	DC McNALLY	Just in case something came up at a later date?
	DALTON	Yeah.





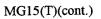
Continuation Sheet No: 13

Record of interview of: Jean Elizabeth DALTON Tape Person Speaking Text Counter Times ◆ But you haven't had a reason to do that? DC McNALLY Not recently no. DALTON Just that, I have a hypothetical question here and it is quite blunt I DC McNALLY suppose, irrespective that these drugs were prescribed for this patient Mrs. RICHARDS who we appreciate did have serious medical problems other than what she was in Hospital for which was a fractured neck and femur. If those four drugs were given to a person who was a similar age, similar build, similar frailty and other than that she was quite healthy 91 year old, what sort effect with those drugs have on her? It depends on the individual entirely. DALTON 11.36 Is it? DC McNALLY Yeah DALTON So they wouldn't necessarily knock her out and make an DC McNALLY Signature(s):



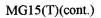


Tape Counter Times	Person Speaking	Text
		inappropriate patient
	DALTON	If you or I, if any two individuals of similar, size, build, age etc, and as far as we knew state of health were given any medicine would react differently.
	DC McNALLY	So you can't give me an answer to that then?
	DALTON	No.
	DC McNALLY	No.
12.01	DC COLVIN	We've obviously mentioned Mrs. RICHARDS and I know you said previously that you don't really get involved with the patients.
	DALTON	Its not in the contract to do it.
	DC COLVIN	Right, okay, thats in your contract of employment?



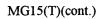


Tape Counter Times ◆	Person Speaking	Text
	DALTON	No, this Ward they don't buy that amount of time.
	DC McNALLY	Oh right so they buy from QA?
	DALTON	Well yeah in loose terms.
	DC McNALLY	In loose terms your services?
	DALTON	For so much.
	DC McNALLY	And you get like a, depending on what they pay.
	DALTON	Yeah, on what level yeah.
12.37	DC COLVIN	Oh right, okay, so a top level, you know, perhaps go and speak to the patients depending on time?
	DALTON	Well it will, yeah it depends exactly what they have bought.
Signatur	re(s):	◆ Not relevant for contemporaneous notes



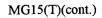


Tape Counter Times ◆	Person Speaking	Text
	DC COLVIN	So is it on there
	DALTON	Its all laid out.
• .	DC COLVIN	Its on their stipulation, the date was forward or the Gosport War Memorial Hospital what you do.
	DALTON	I haven't seen the particular Spec but there is one.
	DC COLVIN	Right, I take it you have been made aware of what you should be doing
	DALTON	This is what I understood I should be doing over the years yes.
	DC COLVIN	Okay, but it can vary from Hospital to Hospital depending on
	DALTON	Yeah, exactly, whats has been bought.
	DC McNALLY	What else can you do for another Hospital over and above that
Signatur	e(s):	◆ Not relevant for contemporaneous notes



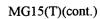


Tape Counter Times	Person Speaking	Text
		you do for Daedalus.
	DALTON	Well it does reflect what they've bought, as in analogy you could
		may be consider a Medical Ward, or a Surgical Ward or an
		Orthopaedic Ward.
	DC McNALLY	So I take it a Surgical Ward would probably require more of your time and more of your expertise because of the drugs that use
		during surgery?
	DALTON	Maybe yeah. They are all different and you know, those that are
		involved in contracting say whats available or what could be
		available and at what cost and as far as I understand it they are
	•	revisited on a regular basis these contracts.
14.08	DC COLVIN	Are you able to say then if they pay more or requested more you
		would be able to spend more visits, either more regularly to the
		Ward.
Signature	o(c) ·	





Tape Counter Times •	Person Speaking	Text
	DALTON	Yeah.
	DC COLVIN	Or spend more time when you were there, would that be
	DALTON	Thats the theory.
	DC COLVIN	Thats the theory part of it.
	DALTON	Yeah, you get what you pay for you know.
	DC COLVIN	Okay, so are there other Wards you go to where you do visit patients.
	DALTON	Not the ones I currently visit. I don't spend time conversing with the patients other than maybe to pass the time of day.
	DC McNALLY	Whereabouts on the Ward do you inspect these
	DALTON	These are all kept in Daedalus' case in Clinical Room.
Signatur	e (s):	• Not relevant for contemporaneous notes



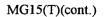


Tape Counter Times •	Person Speaking	Text
	DC McNALLY	So they are not on a Ward themselves?
	DALTON	No.
	DC McNALLY	No.
	DALTON	They are kept in a room binder on top of a Medicine Trolley.
	DC McNALLY	Which is away from the Wards?
	DALTON	Yes in the Clinical Room.
15.01	DC McNALLY	I see you have got no real cause to be in the Ward at all to see the
		patients at all?
	DALTON	No. I mean, you are on the floor so to speak.
	DC McNALLY	Yeah.
Signature	e(s):	• Not relevant for contemporaneous notes



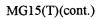


Tape Counter Times	Person Speaking	Text
	DALTON	So you would see them as a general population.
	DC McNALLY	But you won't relate specific prescription notes that you read to
		individual patients?
	DALTON	No.
	DC McNALLY	Right.
15.23	DC COLVIN	Okay so previously then
	DALTON	Not as a routine I should add because some people are there for
		longer and you will hear the nurses referring to them by name as
		they are going past.
	DC McNALLY	Does Dr. BARTON ever phone you up and say, look I've got
		this



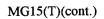


Tape Counter Times ◆	Person Speaking	Text
	DALTON	Yes.
	DC McNALLY	She does, does she seek your advice regarding medication?
	DALTON	Yes and if I can't handle it we put it her through to Drug
	†	Information.
	DC McNALLY	Right, so if she has got special concerns about a particular patient.
	DALTON	Yes if she wants us to find something specifically, if its something
		I can't handle and or its an in-depth thing, it goes straight across
		to Drug Information.
	DC McNALLY	And thats available I take it to most GP's and the
	DALTON	No, in the case of Dr. BARTON at Gosport, she was employed as
		the Clinical Assistant for which she gets paid to perform to a
		contract one assumes and during those hours she is effectively a
		Hospital Doctor.
Signature	4.5	





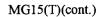
Tape Counter Times	Person Speaking	Text
	DC McNALLY	Oh right.
	DALTON	So she has access to all our resources, yes Drug Information will
		help out GP's where possible but there is a limit as to how much a
		service can handle.
16.39	DC McNALLY	Again referring back to the four drugs and the combination of two
		or all four of them together, are you aware of any guidelines that
		the Drug Manufacturers may suggest regarding equipment
		specialist equipment that should be provided when administering
		any particular drugs?
		any particular drugs:
	DALTON	No.
	DC McNALLY	No.
	DALTON	There is a rule that some employ syringe drivers.





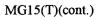
Continuation Sheet No: 23

Tape Counter Times *	Person Speaking	Text
	DC McNALLY	I wasn't specifically on about syringe drivers, the actual drugs
		themselves?
	DALTON	No.
	DC McNALLY	Okay.
17.14	DC COLVIN	If there were is that something you would get involved with, are
		you aware of any drugs that sort of request or recommend that
		you have various equipment to hand?
	DALTON	Yes, well you get an anaphylactic reaction from anything.
	DC McNALLY	Whats one of those?
	DALTON	Whats one of those, well if you don't treat it you're dead.
	DC McNALLY	Oh right.
Signatur	e(s):	◆ Not relevant for contemporaneous notes





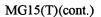
Tape Counter Times •	Person Speaking	Text
	DC COLVIN	Its like a toxic shock?
	DALTON	No an allergic reaction to something which it might be a drug, it
		could be something you've breathed in and all Wards carry
		adrenaline which is the first line of treatment. On the Gosport
		Hospital site they do have a Defibrillator and a Cardiac Arrest
		Box.
	DC COLVIN	Okay.
	DC McNALLY	Is that per Ward or is that available in the Hospital.
	DALTON	No, its kept, its in the Hospital and they also have antidotes,
		specific antidote for Opium overdose on the Ward.
	DC McNALLY	Right.
18.16	DC COLVIN	So you are aware that they have got various things in place.
Signatur	e(s):	◆ Not relevant for contemporaneous notes





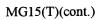
Continuation Sheet No: 25

Tape Counter Times *	Person Speaking	Text
	DALTON	Mm,mm, Mm,mm.
	DC COLVIN	Would you necessarily
	DALTON	More often than not the trouble with overdoses, generally speaking is they are often, you have to specifically treat symptoms as they arise and if its an oral overdose, the first thing normally is to wash out but by that time, or put something down the gut that they will absorb it but you probably got some through to the system by then so you have monitor and deal with it how it goes on but whether it be an overdose or just an individual reaction to it, it can happen anytime to anybody.
19.07	DC COLVIN	Is part of your remit to check they've got the appropriate equipment on site and drugs?
	DALTON	No, once its in the, on the Ward, its their responsibility to ensure its in good condition and in date.
Signature	e(s) :	





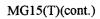
Record of interview of: Jean Elizabeth DALTON		
Tape Counter Times •	Person Speaking	Text
	DC COLVIN	Right, so you wouldn't think right, they've prescribed such and such, I've got to check.
	DALTON	Its not something, in the process of going about the non-stop issue, erm, you may well be in their Medicine cupboards, and yes
		obviously if something screeches at you, you will deal with it but no, but once its there, its their responsibility.
	DC McNALLY	Its there.
	DC COLVIN	Okay, just going back, just round up this point about the contracts.
	DALTON	Mm,mm.
19.53	DC COLVIN	So have you been on contracts before where you have been able to either visit patients or spend more time on a Ward?
	DALTON	Well in the past Gosport had their own Pharmacy.
Signature	e(s):	• Not relevant for contemporaneous notes





Continuation Sheet No: 27

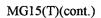
Tape Counter Times	Person Speaking	Text
	DC COLVIN	Right.
	DALTON	Which just had, I was one of the Pharmacists involved in running
		the Pharmacy.
	DC COLVIN	Oh okay.
	DALTON	Um
	DC COLVIN	How does it differ now, I mean obviously you are working from QA but how does it differ now to then when you are actually based at the Hospital?
	DALTON	Well because you were dealing with their stock supply which obviously takes an element of time, the perception was you were there more often if you like, you were more hours on site but your task orientation in terms of this aspect of it





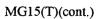
Continuation Sheet No: 28

Tape Counter Times Times	Person Speaking	Text
	DC COLVIN	In terms of the prescription.
	DALTON	were probably, I mean, not a lot different.
	DC COLVIN	Oh right so you wouldn't have a greater deal of time to spend on various Wards than you do now?
	DALTON	No.
21.35	DC COLVIN	Okay, alright I think we've covered pretty much everything we need to. Just one more point which we were coming to then we moved onto contracts. In relation to Gladys RICHARDS did you have any contact with her at all or were aware of any problems her relatives had with
	DALTON	Not that I recall.
	DC COLVIN	the way the Hospital were being dealt with?



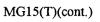


Tape Counter Times *	f interview of: Jean Eliza Person Speaking	Text
	DALTON	Not that I recall.
	DC COLVIN	Or did with her or any conversation with the daughters?
	DALTON	No.
	DC COLVIN	Okay, or any correspondence from the daughters at all in anyway?
	DALTON	No.
	DC COLVIN	Okay, I can't think of anything else. Would you like to add anything, this is your opportunity to bring anything up if you feel it might be relevant?
	DALTON	No, its all been said, I say it all hinges round the fact that this is recognised treatment in this field and its within recognised limits, so I would have no cause for alarm.
22.26	DC COLVIN	Yeah, so in this case looking at this, I appreciate its two years
Signature	(s):	◆ Not relevant for contemporaneous notes



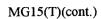


Tape Counter Times *	Person Speaking	Text
		ago.
	DALTON	Mm,mm.
	DC COLVIN	Are you able to say, look, looking at that you wouldn't have any
		cause for alarm?
	DALTON	No.
	DC COLVIN	So you wouldn't have needed to refer to notes
· ·	DALTON	No.
	DC COLVIN	or to Dr. BARTON in this case?
	DALTON	No.
	DC McNALLY	But this was a course of treatment that you would consider to be
		palliative care?
Signature((s) ·	





Tape Counter Times •	Person Speaking	Text
	DALTON	Mm,mm.
2.49	DC COLVIN	In relation to Midazolam, you produced the palliative care handbook which although you are aware that Midazolam is not
		licensed for subcutaneous use, is generally accepted Nationally as being an accepted form of treatment.
	DALTON	Over and above that as I'm sure you are aware having researched it all the British National Formulary says the same thing.
23.17	DC COLVIN	Is there anything else you would like to add?
	DALTON	No.
	DC COLVIN	Is there anything you would like to clarify, anything you said you feel we need to clear up?
	DALTON	No.
Signature	(s):	◆ Not relevant for contemporaneous notes





Signature(s):

HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 32

Tape Counter Times	Person Speaking	Text
02.05	DC COLVIN	Just one more question, I just want to get my head around th
23.25	DC COLVIN	stock so when you put an 'S' in there that is something that i
		generally stocked in Gosport Hospital?
	DALTON	Yeah.
	DC COLVIN	The non-stock is something you have to get in specifically, in this
		case for Mrs. RICHARDS, you would have to get enoug
		Haloperidol in for her?
	DALTON	Mm,mm, Mm,mm.
	DC COLVIN	Okay.
	DC McNALLY	The time by my watch is 1530 and I'm turning the recorder off.