



**Patient Relations Manager  
Royal Hospital Haslar  
Gosport • Hants • PO12 2AA**

Telephone 01705 584255 Ext. 2296 Fax. 01705 762403

APP A. 14.5.6



DCI R J Burt  
Hampshire Constabulary  
Major Crime Complex  
Police Station  
Kingston Crescent  
Portsmouth  
Hampshire, PO2 8BU

**Date:** 10 April 2000  
**Your ref:** HQ/CID/E/DCI/2000  
**Our ref:** 704/1/00/RICHARDS

Dear Mr Burt

**Re: Mrs Gladys Richards (Deceased)**

Further to my letter dated 13 March 2000, I have now completed my enquiries into the issues you raised in your letter of 9 March 2000.

In your letter you detail five requests for information relevant to your investigation concerning Mrs G Richards (Deceased). I would like to address each of these points in turn.

1. Your request for copies of all Mrs Richards medical records. I understand that Code A Medical Records Manager, has provided you with a copy of all the records pertaining to Mrs Richards' admissions to the Royal Hospital Haslar from 29 July 1998 to 11 August 1998 inclusive and 14 August 1998 to 17 August 1998 inclusive. The drug charts would normally be copied as part of these admissions. However, if you are not in receipt of the drug charts please let me know and I will send these to you.

2. Identification of staff members. Staff responsible for Mrs Richards care during the 48 hours prior to her transfer to Gosport War Memorial on 17 August 1998 are as follows:

#### **Medical Staff**

Surgeon Commander T Spalding - Consultant Orthopaedic Surgeon

Squadron Leader Irwin Lasrado - Registrar

Trimble - Senior House Officer

Hamblin- House Officer

#### **Nursing Staff**

15/8/98

Early Shift

0730 - 1530

LNN Nicolls RGN

**JT Spurrier RGN**

Lcpl Hawkins HCA 1

Late Shift

1300 - 2100

Cpl Jones RGN

Cpl McDonald RGN

Pte Hodnett HCA 2

Night Duty

2000 - 0800

LT Dalzell RGN

**Cpl Hillier RGN**

Lcpl Alcott HCA 1

16/8/98

Early Shift

0730 - 1530

Cpl Jones RGN

**Cpl McDonald RGN**

Pte Hodnett HCA 2

Late Shift

1300 - 2100

LNN Nicolls RGN

**JT Spurrier RGN**

Lcpl Hawkins HCA 1

Night Duty

2000 - 0800

Lt Dazell RGN

**Cpl Hillier RGN**

Lcpl Alcott HCA 1

17/8/98

Early Shift

0730 - 1530

Flt Lt Edmonson RGN - Nursing Officer in Charge

Sgt Bindloss RGN

Cpl Jones RGN

LNN Nicolls RGN

Lcpl Mason HCA 1

Pte Hodnett HCA 2

The highlighted names are the nurses that have written in the nursing records.

On 17 August 1998 Mrs Richards was considered fit for transfer to Gosport War Memorial by the Registrar on his ward round review.

3. Arrangements made for Mrs Richards transfer. Once Mrs Richards was considered fit for discharge the Nursing Officer in Charge of Ward E3 completed a transport request form, a copy of which I enclose. The request form was then taken to the Patient Services Centre and transport booked. Mainline Patient Transport Services were used to transfer Mrs Richards to Gosport War Memorial Hospital. Mainline Patient Transport Services was taken over some time ago by Portsmouth and Hampshire Patient Transport Services. The address is:

PHPTS

The Main Control Office

St Mary's Hospital

Milton

Portsmouth

PO3 6AD

4. Missing x-rays. Professor Livesley viewed all the x-rays available at the Royal Hospital Haslar on 8 March 2000. There are no other x-rays in existence. However, the Gosport War Memorial notes you kindly provided for us indicate that an x-ray of Mrs Richards dislocated hip was taken there on 18 August 1998.

5. Previous treatment received. Mrs Richards was seen as an outpatient in the Department of Oral Surgery on 5 July 1996. On 19 July 1996 she underwent extraction of three teeth and was discharged.

On 12 April 1998 Mrs Richards was brought to the Accident and Emergency Department following a fall. X-ray's of her left hip and pelvis was taken and it is noted in the report dated 24 April 1998 that no bony injury was seen. She was discharged home at 0340 hours on 12 April 1998.

On 17 July 1998 Mrs Richards was brought to the Accident and Emergency Department following a fall and sustaining an injury to her head. A CT scan was performed and she was discharged home the same day.

The Accident and Emergency records for 12 April 1998 and 17 July 1998 were sent for microfilming after one year. Despite my endeavours to obtain these, they cannot be located. I, therefore, enclose a copy of our computer records for your information.

For your further information, I will be away from the Haslar for approximately eight weeks and any correspondence should be directed towards Air Commodore Negus, the Commanding Officer.

Yours sincerely

**Code A**

Code A

Patient Relations Manager

Enc. Transport request form  
A & E computer records

in rear

SC 1 Mainline Patient Transport Services 0705 871822/872456 822331 ext. 4980 Request

Requested By: FLT LT Edmondson Phone No: 2127 Day MONDAY  
 PATIENTS NAME Mrs/MRS/MISS Elderly  Date 17 AUG 98  
 RICHARDS Gladys Child  Planned ASAP Rin —  
 Escort Yes/No  Acct. Time

Pick Up Address: WARD E3  
R H MASLAR  
GOSPORT  
HAMPSHIRE  
 To: DAEDALUS WARD  
GOSPORT WARE MEMORIAL  
GOSPORT  
HAMPSHIRE WARD/DEPT. TJS  
 OR AUTHCRISING

MOBILITY STATUS:  
 WALKING (Driver only)   
 TWO MAN LIFT (Driver & Assistant)   
 TRAVEL IN CHAIR (Driver & Assistant)   
 STRETCHER (Driver & Assistant)

TYPE OF JOURNEY  
 OUT PATIENT   
 ADMISSION   
 DISCHARGE   
 TRANSFER   
 Tel to Kemp on 17/8 0925 KE

| REGULAR BOOKING | Monday | Tuesday | Wed | Thursday | Friday | Saturday | Sunday |
|-----------------|--------|---------|-----|----------|--------|----------|--------|
| Appt            |        |         |     |          |        |          |        |
| Rin             |        |         |     |          |        |          |        |

Nature of Illness: # Dislocated Right hip  
hemiarthroplasty.  
- reduced in A+E.  
 Special Instructions: Mobilising ~~with~~ with  
Knee immobilising splint  
in situ.

Date: 17/8/98.  
 GP Address: DR BASSETT  
LEE-ON-SOLEN MK  
MANUAL WAY

YEAR 98.

SENT TO / COMMENT

ML + CTN @ 1124.

25/7/98  
 SAC Bissett

TL + RTN

DA

T

MO  
WAI  
TWC  
TRAI  
STRE  
REGU

Natu  
Lc

## A + E - INCIDENT DETAILS

Name : RICHARDS, GLADYS  
Complaint : Fall-injury to head

A + E : 011231/98

| <u>No</u> | <u>Date</u> | <u>Time</u> | <u>AccO</u> | <u>Diagnosis</u>   | <u>Disch</u> | <u>Departure</u> |
|-----------|-------------|-------------|-------------|--------------------|--------------|------------------|
| 1         | 17.07.98    | 09:30       | STH         | Bruise to forehead | N/R          | Home             |

1 - More details  
3 - View Reception/RTA

4 - View Diagnosis/Treatment

[ ]

## A + E - AMEND RECEPTION

Name : RICHARDS, GLADYS A + E : 011231/98  
 Date : 17.07.98  
 Time of arrival : 09:00  
 Time/Date Triaged : 09:00 17.07.98 15 Triage Code : 02  
 Triage Nurse :  
 Presenting complaint : Fall-injury to head  
 Time elapsed : Less than 4 hours  
 Mode of arrival : Ambulance  
 Initiator of referral: Sent by Others 17 Accompanied by:  
 Type of Accident :  
 0 Occupation/School :  
 1 Consultant : MR. I.J. REECE  
 2 Admin category : NHS  
 3 Contract identifier :

1 - RTA details 6 - Return to Incident List  
 2 - Labels 5 - Change Diagnosis/Treatment  
 3 - Record card

[ ]

## A + E - DIAGNOSIS

Name : RICHARDS, GLADYS A+E: 011231/98  
 Presenting complaint : Fall-injury to head  
 1 Time examined : 09:30  
 2 Seen by : S HORNE  
 3 Investigations : Other  
 4 :  
 5 :  
 6 :  
 7 :  
 8 :  
 9 Special Case :  
 10 Diagnosis text : Bruise to forehead  
 11 Referral Specialty : 12 Time ref: 13 Time seen:  
 14 Diagnostic Coding : 1 02 02 1  
 15 :  
 16 Multiple injuries ? : 17 Trauma Score :  
 18 ISS : 19 Alcohol Related Y/N ?:  
 20 ARG Code :  
 1 - Treatments 3 - Change Reception/RTA  
 4 - Return to Incident List  
 [ ]

A + E TREATMENT

Name : RICHARDS, GLADYS                     A + E : 011231/98  
Treatment : Monitoring

: Written instructions

:  
:  
:  
:

Anaesthetic :

Tetanus Status :

Time decision ad/dis:

Method of Departure : Home

Hospital :

A+E Clinic or Ward :

Local Code :

Time of Departure : N/R

Date of Departure : N/R

:  
:  
:

3 - Change Reception/RTA

4 - Change Diagnosis

[ ]

5 - Return to Incident List

6 - Next Patient Enter Diagnosis



**Request for X-Ray Examination**

*KMG*

**Duplicate** (Revised 7/95)

|  |                           |   |               |   |               |   |             |
|--|---------------------------|---|---------------|---|---------------|---|-------------|
| <b>1. Personal Details</b>   |                           | <b>Date of Birth</b><br>13/4/7  |               | <input type="checkbox"/> <b>Walking</b>                         |               | <input type="checkbox"/> <b>Word No.</b><br>Dre |             |
| <b>Service Number</b><br>302284  | <b>Rank/Rating</b><br>MWS | <b>Hospital (or of consultant, please state Ship/Unit/RAF Station)</b><br>RAF |               | <input type="checkbox"/> <b>Stretcher</b>                       |               | <input type="checkbox"/> <b>Word</b>            |             |
| <b>Surname</b><br>RICHARDS   |                           | <b>Date of Onset of LMP</b>   |               | <input type="checkbox"/> <b>Is 10 Day Ruling to be Ignored?</b> |               | <input type="checkbox"/> <b>Yes</b>             |             |
| <b>Forenames</b><br>GLADYS   |                           | <b>Examination Required of:</b><br>CT head                                    |               | <input type="checkbox"/> <b>No</b>                              |               |   |             |
| <b>Diagnosis (Short Statement of Case, Including Treatment and Progress):</b><br><i>Head inj. Presented<br/>tho had brief syncic episode 5th</i> |                           |   |               |   |               |   |             |
| <b>Report Number</b><br>DF488  | <b>Code A</b>             | <b>Code A</b>   | <b>Code A</b> | <b>Code A</b>   | <b>Code A</b> | <b>Date</b><br>17/7/98                          | <b>Date</b> |
| <b>2. Radiologist's Report</b>   |                           |   |               |   |               |   |             |
| <b>Serial Number</b>   |                           | <b>Date</b>   |               | <b>Report Number</b>  |               |   |             |
| <b>Signature</b>   |                           |   |               | <b>Rank</b>   |               |   |             |
| <b>Appointment</b>   |                           |   |               |   |               |   |             |

I. J. REECE

GLADYS RICHARDS  
C/O KAREN REID  
20 HOMER CLOSE  
GOSPORT  
HANTS PO13 9TL  
DATE OF BIRTH

H00302284  
A98011231

HASLAR

ACCIDENT AND EMERGENCY

HEAD

ial unenhanced scans from foramen magnum to vertex imaged bony and soft tissue windows.

volutionary changes noted throughout. No focal lesion. evidence of haemorrhage within or outside the brain, in rticular no evidence of a subdural collection. No vault acture seen.

## A + E - INCIDENT DETAILS

ame : RICHARDS, GLADYS  
omplaint : ? Fractured Left NOF

A + E : 005355/98

| <u>o</u> | <u>Date</u> | <u>Time</u> | <u>AccO</u> | <u>Diagnosis</u>   | <u>Disch</u> | <u>Departure</u> |
|----------|-------------|-------------|-------------|--------------------|--------------|------------------|
| 1        | 12.04.98    | 02:40       | SEC         | Fall - bruised hip | 03:40        | Home             |

1 - More details  
3 - View Reception/RTA

4 - View Diagnosis/Treatment

[ ]

## A + E - AMEND RECEPTION

Name : RICHARDS, GLADYS A + E : 005355/98  
 Date : 12.04.98  
 Time of arrival : 02:15  
 Time/Date Triaged : 02:15 12.04.98 15 Triage Code : 03  
 Triage Nurse :  
 Presenting complaint : ? Fractured Left NOF  
 :  
 Time elapsed : Less than 4 hours  
 Mode of arrival : Ambulance  
 Initiator of referral : GP 17 Accompanied by:  
 Referring GP :  
 0 Type of Accident :  
 1 Occupation/School :  
 2 Consultant : MR. I.J. REECE  
 3 Admin category : NHS  
 4 Contract identifier :

1 - RTA details  
 2 - Labels 5 - Change Diagnosis/Treatment 6 - Return to Incident List  
 3 - Record card

[ ]

## A + E - DIAGNOSIS

Name : RICHARDS, GLADYS A+E: 005355/98  
 Presenting complaint : ? Fractured Left NOF  
 1 Time examined : 02:40  
 2 Seen by : S COOTE  
 3 Investigations : X-Ray  
 4 :  
 5 :  
 6 :  
 7 :  
 8 :  
 9 Special Case :  
 0 Diagnosis text : Fall - bruised hip  
 1 Referral Specialty : 12 Time ref: 13 Time seen:  
 4 Diagnostic Coding : 1 25 9H 1  
 5 :  
 6 Multiple injuries ? : 17 Trauma Score :  
 8 ISS : 19 Alcohol Related Y/N ?:  
 0 ARG Code :  
 1 - Treatments 3 - Change Reception/RTA  
 4 - Return to Incident List  
 [ ]

## A + E TREATMENT

Name : RICHARDS, GLADYS  
 Treatment : Advice Only

A + E : 005355/98

.....  
 :  
 :  
 Anaesthetic :  
 Tetanus Status :  
 Time decision ad/dis :  
 Method of Departure : Home  
 Hospital :  
 A+E Clinic or Ward :  
 Local Code :

Time of Departure : 03:40  
 Date of Departure : 12.04.98

3 - Change Reception/RTA  
 4 - Change Diagnosis [ ]

5 - Return to Incident List  
 6 - Next Patient Enter Diagnosis

R. I.J. REECE

GLADYS RICHARDS  
C/O KAREN REID  
20 HOMER CLOSE  
GOSPORT  
HANTS PO13 9TL  
DATE OF BIRTH

H00302284  
A98005355

Code A

H HASLAR

ACCIDENT AND EMERGENCY

LEFT HIP  
no bony injury seen.  
ELVIS  
as above.

STATUS Verified report VERSION 1 VERIFIED BY BAILEY, D

DATE OF REPORT 24-04-98 Major DJ Bailey FRCR

JP (TYPIST)

DATE OF ATTENDANCE

HIP PELVIS

12-04-98

(revised 1/95) Original

Request for X-Ray Examination

|   |                    |   |  |                 |
|---|--------------------|---|--|-----------------|
| 1. Personal Details   |                    | Walking Stretcher<br><input checked="" type="checkbox"/> Ward |  | Ward No.<br>A12 |
| Service Number<br>00302284  | Rank/Rating<br>MRS | Date of Birth<br>13.4.07                                      | Hospital of Outpatient, please state Ship/Unit/RAF Station<br>RAF                        |                 |
| Surname<br>RICHARDS   |                    | Date of Onset of LMP  | If 10 Day Ruling To Be Ignored? Yes <input type="checkbox"/> No <input type="checkbox"/> |                 |
| Forenames<br>GLADYS   |                    | To  |  |                 |
| Examination Required of:<br># ① hip + pelvis.   |                    |   |  |                 |
| Diagnosis (Short Statement of Case, including Treatment and Progress):<br># N.O.F (LEFT). |                    |   |  |                 |
| Report Number   | MOIC Case          | Date  | 12.4.98  |                 |
| 2. Radiologist's Report   |                    |   |  |                 |
| Serial Number   | Date               | Report Number   | 7044 8544<br>20445 40413<br>wf   |                 |
| Signature   |                    | Rank  | Appointment  |                 |