

APP-A. 14.10.2:Witness Statement: Mr Philip Beed - Clinical Manager Daedalus Ward

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The following statement was taken by Code A Investigating Officer on 8th September 1998.

- Q1. How long have you been Clinical Manager on Daedalus Ward?
- A. 18 months.
- Q2. Were you on duty when Mrs Richards was admitted from Haslar Hospital on 11th August 1998?
- A. Yes - I spoke to Mrs Lack at some length and explained Plan of Care. For 30-60 mins. Mrs Richards was very calm/relaxed - 15 mins. after being seen by Dr she began to cry out. I was unable to differentiate between pain/dementia - I gave her dose of Oramorph - which settled her. I informed daughter of my actions, who appeared pleased with what I did. I did find difficulty in Mrs Lacks approach to pain control, at times she appeared in agreement - other times she didn't
- Q3. Were you on duty day of Mrs Richards fall 13th August 1998?
- A. No - but the day before - I realised the Ward was going to be busy due to overall activity, admissions, discharges (a) I booked an additional HCSW for a.m. shift (b) Identified 3 patients that could remain in bed (c) Made everyone (all staff) aware it was going to be a busy day.
- Q4. On the following day what did you do?
- A. I assessed Mrs Richards for myself - she appeared to be pain free (having Oramorph the night before). Dr Barton was present - decision made to X-Ray, we also informed Dr Lord and sought her advice - she agreed with our action plan. I organised the X-Ray after Dr Barton had signed the form. I booked the X-Ray as soon as department opened. Mrs Richards was X-Rayed mid-morning.
- Q5. Can you explain why there was a delay in Mrs Richards being seen by a Doctor following her fall - particularly as she had previously had # neck of femur?
- A. I believe Mrs Lack is referring to the delay the night before. It is agreed between medical and nursing team, that if accident occurs outside of X-Ray Dept. hours - we would ensure patient is free of pain and referred ASAP the following day - obviously each patient is assessed individually and agreement reached with patients and relatives.

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Q7. Would you agree/disagree, that a trained nurse should have observed the angle of her leg to have been abnormal especially as she was in so much pain/distress.

A. Yes.

Q8. Can you please describe what happened when Mrs Lack was called into the office to be seen by yourself and Dr Barton following X-Ray of Mrs Richards.

A. Dr Barton had spoken to Consultant at Haslar who agreed to take Mrs Richards back for manipulation rather than surgery. This was explained to Mrs Lack, booked Paramedic Ambulance, notified A & E and said we would take Mrs Richards back when ready. I asked Mrs Lack if she would like to accompany her Mother to Haslar. Mrs Richards given dose of Oramorph. There was approximately 1 hr delay for Ambulance. I did not feel this delay would cause any adverse effect to Mrs Richards' condition. A HCSW accompanied Mrs Richards.

Q9.1 Why was Mrs Richards not examined following her fall?

9.2 Why a 24 hr delay from fall to admission to Haslar?

9.3 Why was an X-Ray not arranged sooner?

A.9.1 Injury not apparent at time - I found it difficult to distinguish Mrs Richards cries from wanting the toilet or in pain.

9.2 See answer to Q6.

9.3 See answer to Q6.

Q10. Were you on duty on the 18th August 1998 when Mrs Richards returned from Haslar?

A. I was on a late duty that day.

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Q11. When were you made aware of the apparent pain and discomfort Mrs Richards was in?

A. At the same time that Mrs Lack became aware. Sequence of events not as Mrs Lack written. S.N Couchman received Mrs Richards and put her into bed. HCSW Jean Moss attempted to feed Mrs Richards lunch - which she didn't appear to want - S.N Couchman advised her to mince the meat. Mrs Lack arrived while Mrs Richards being fed - but Mrs Richards was not screaming at this time. Mrs Richards began to become distressed at the time of Mrs Lacks arrival. Mrs Richards had not been in any distress/pain - if she had - we would have given her some analgesia. The whole situation became very "tense" - Mrs Richards screaming very loudly, both daughters very agitated and worried about another dislocation, this made the situation difficult to handle.

Q12. Can you confirm the family asked for further X-Rays of Mrs Richards hip?

A. Yes - they felt Mrs Richards hip had dislocated again.

Q13. Can you explain the problems with X-Ray Department?

A. Dr Barton contacted and she requested X-Ray Form to be completed. Form was pp - but would not be accepted. Dr Beasley was Duty Doctor who agreed to fax form - booked X-Ray - daughters informed at all times.

Q14. Are family relatives usually allowed to see X-Rays?

A. This would be dependent upon Radiographer in X-Ray dept. - the X-Rays were not forwarded to the Ward - seen by Radiologist in dept.

Q15. Can you recall how long from admission to examination by Dr Barton.

A. 3 hrs. approx.

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- Q16. Were the family involved in the decision making for pain control and use of syringe driver?
- A. The decision to use syringe driver was made after a course of time, discussed with both daughters, this was one option offered - oral analgesia could be continued, on 18th August. Medical opinion - by Dr Barton, was that a syringe driver would be the best way of controlling the pain - I explained fully the purpose of using a syringe driver and they both agreed.
- Q17. Were you aware that following Mrs Richards first admission to Daedalus, her clothes - already with Cash's name tags, had been sent for marking?
- A. Policy for all patients clothing to go for marking at Gosport War Memorial Hospital - unfortunately on this occasion the machine was not working, so they were sent to St Mary's but laundry lady - did not inform us of this.
- Q18. Were you aware of the family's agreement to do their Mothers laundry?
- A. Yes - but I would still want clothing to be marked - I did explain this to Mrs Lack.
- Q19. Can you give any explanation why their request for their Mother to wear her own clothes - was not carried out?
- A. They had been sent for marking.
- Q20. Were you aware of the family's concerns regarding standard of care for their Mother?
- A. Yes.
- Q21. Did you or Dr Barton have any discussion with the family regarding "feeding" Mrs Richards during her last four days of life (to include I/V fluids)?
- A. I do not remember specially talking about feeding/fluids apart from giving a drink if Mrs Richards woke up. The family did not raise this as a concern at the time.

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Q22. Do you have anything else to add?

- A. We did find nursing Mrs Richards difficult at times - due to the difference of opinion between both daughters regarding management and pain relief of their Mother.