Form MG15(T)

RESTRICTED

Page 1 of 35

RECORD OF INTERVIEW

Enter type:

ROTI

(SDN / ROTI / Contemporaneous Notes / Index of Interview with VIW / Visually recorded interview)

Person interviewed:

BARTON, JANE ANN

Place of interview:

FRAUD SQUAD NETLEY

Date of interview:

04/11/2004

Time commenced:

1123

Time concluded:

1143

Duration of interview:

20 MINUTES

Tape reference nos. (\rightarrow)

Interviewer(s):

DC2479 YATES / DC1162 QUADE

Other persons present: MR BARKER, SOLICITOR

Police Exhibit No:

Number of Pages:

Signature of interviewer producing exhibit

Person speaking	Text
DC YATES	Right first of all because there's been a considerable break between the last time we spoke and now I'm going to have to go through the preamble (inaudible). This interview again is being tape recorded. I'm DC2479 Chris YATES, my colleague is
DC QUADE	DC1162 Geoff QUADE.
DC YATES	I'm interviewing Dr Jane BARTON, Dr BARTON can you please give your full name and your date of birth?

Jane Ann BARTON, 19/10/48.

BARTON

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 2 of 35

DC YATES

And also present is Mr BARKER, Dr BARTON's solicitor

can you give your full name?

BARKER

I can confirm that, my name is Ian BARKER from the

Medical Defence Union Legal Department.

DC YATES

This interview is being conducted in an office, within the Fraud Squad at Netley Support Police Headquarters. The time is 1123 hours, still on Thursday the 4th of November 2004 (04/11/2004). At the conclusion of the interview Dr BARTON I'll give you a notice explaining what will happen to the tapes, which is that form we showed you earlier on. Remind you that you're still entitled to free legal advice, you have Mr BARKER here. Can I just confirm have you had time now to discuss again with him, you're ready to speak to us at the moment?

BARKER

We're ready to proceed with the interview, yes.

DC YATES

With the interview I should say yeah, okay. Now again I'll remind you you're here voluntarily Dr BARTON so if at any time you want to leave you're free to do so. Again I'm going to have to caution you that you do not have to say anything but it may harm your defence if you do not mention when questioned something which you later rely on in court. We've been through the explanation of that, are you still happy with that explanation, you understand?

BARTON

I am.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 3 of 35

DC YATES

Okay, again the interview is being remotely monitored, you can see the red light on the box there and it's being monitored by DS GROCOTT in another office. Right in the last interview Dr BARTON you gave us and read out a very full prepared statement that covers quite a few of the questions that we actually want to ask you. However it doesn't cover all of them so I do propose to ask the questions, albeit you have indicated through your solicitor, Mr BARKER, that you wish to make no comment. Hopefully though you'll see as I go through the questions that they are particularly generic, they're not at all specific to the case of Elsie DEVINE and you may feel at some stage that you, you may wish to comment on them. Now as I said some of the questions I'll ask you have been covered in your prepared statement so we've been through the prepared statement, it's very full but we think rather than having to flick through bits of paper and decide which questions have been asked, or answered should I say, if we go through them chronologically it will actually probably save us time but one thing that does come out of the prepared statement and it really jumped out at all of us that I would like to cover straight away and I don't know whether you've got, got it to refer to at all but on page seven of your statement the top paragraph which obviously continues from page six, you make mention that you raised the matter that you're overstretched, I'm summarising it, albeit verbally saying that you couldn't manage the level of care for a number of patients but the reality was there was no one else to do it and on the last paragraph you said in 1998 you tried to raise the issue with the Trust management

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 4 of 35

but there was no one else to to do the job. I really would like to know can you remember who specifically ...

BARTON

No comment.

DC YATES

... you spoke to verbally? Okay because it will certainly assist us in our enquiry if we could know we would need to go and see to see if can make any records, find records of that conversation. Okay what I intend to do now then, unless there's anything there you want to ask Geoff?

DC QUADE

No.

DC YATES

Is actually to start to go through the questions that I'd like to ask you. Well the first topic area is qualifications and as I said earlier some of these questions have been answered in your prepared statement. When did you qualify as a doctor?

BARTON

No comment.

DC YATES

Where did you qualify?

BARTON

No comment.

DC YATES

Where did you train to become a general practitioner?

BARTON

No comment.

DC YATES

When did you start working at Gosport?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 5 of 35

BARTON

No comment.

DC YATES

What is the organisational set up of the practice?

BARTON

No comment.

DC YATES

How many doctors were actually working at the practice

from 1990 onwards?

BARTON

No comment.

DC YATES

Since qualifying as a GP what further professional

qualifications have you obtained?

BARTON

No comment.

DC YATES

Since you started working at Gosport what further training

have you undertaken in the field of medicine?

BARTON

No comment.

DC YATES

What is your GMC, the General Medical Council

Registration Number?

BARTON

No comment.

DC YATES

What do you understand as being your responsibilities

under that registration?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 6 of 35

DC YATES

The next topic area it's the role of the GP. What are your

responsibilities as a General Practitioner?

BARTON

No comment.

DC YATES

How did the practice work, particularly that is in relation to

the care of the elderly?

BARTON

No comment.

DC YATES

How many patients were you responsible for within the

practice during the 1990's?

BARTON

No comment.

DC YATES

Did you operate a call out system?

BARTON

No comment.

DC YATES

How was your working day constructed?

BARTON

No comment.

DC YATES

Were there any areas of speciality that you were

responsible for within the practice?

BARTON

No comment.

DC YATES

How would your patients come to be admitted to the

Gosport War Memorial Hospital?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 7 of 35

BARTON

No comment.

DC YATES

And once there who would look after them?

BARTON

No comment.

DC YATES

Right, okay. You became a Clinical Assistant at the Gosport War Memorial Hospital and I'd like to ask you some questions about that. What was the role of the Gosport War Memorial Hospital within the local community, that is as far as you were concerned?

BARTON

No comment.

DC YATES

Prior to you starting work there as a Clinical Assistant how were the patients from the community cared for within that

hospital?

BARTON

No comment.

DC YATES

There's something called Bed Fund Holders, what are

they?

BARTON

No comment.

DC YATES

How and why did you become the Clinical Assistant?

BARTON

No comment.

DC YATES

Was there a selection board for the post?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 8 of 35

BARTON

No comment.

DC YATES

What was the purpose of having a Clinical Assistant at that

hospital?

BARTON

No comment.

DC YATES

What were you expected to do on a day to day basis, a

daily basis?

BARTON

No comment.

DC YATES

What was the remuneration package for the post?

BARTON

No comment.

DC YATES

How was the job description for the post decided upon if

you were the post holder?

BARTON

No comment.

DC YATES

And I think within that job description there was certain duties that the post holder was expected to uphold. Can you (inaudible) one to visit the units on a regular basis and

to be available on call as necessary.

BARTON

No comment.

DC YATES

And how would you ensure then that all new patients were

seen promptly after admission?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT) Page 9 of 35

BARTON

No comment.

DC YATES

In what ways were you responsible for the day to day

medical management of the patients?

BARTON

No comment.

DC YATES

Who was responsible for the writing up of the original case

notes?

BARTON

No comment.

DC YATES

And who ensured that follow up notes were kept up to date

and reviewed?

BARTON

No comment.

DC YATES

Who would complete upon a patients discharge, discharge

summary?

BARTON

No comment.

DC YATES

I think there's another form, it might be the same form I'm

not sure but I think it's called an HRM6O or 60, who's

responsible for completing that?

BARTON

No comment.

DC YATES

Who was responsible to ensure the prompt preparation of

death certificates and for the cremation certificates were

appropriate?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 10 of 35

BARTON

No comment.

DC YATES

And who would take part in the weekly consultant rounds?

BARTON

No comment.

DC YATES

Was it your responsibility to prescribe as required drugs for the patients under the care of the consultant physicians in the geriatric medicine?

BARTON

No comment.

DC YATES

Did you have to participate, where possible, in multi disciplinary case conferences and discussions related to the patients in the unit?

BARTON

No comment.

DC YATES

How did you provide clinical advice and professional

support to other members of the caring team?

BARTON

No comment.

DC YATES

How would you identify opportunities to improve services so that a higher level of care could be provided within the

resources that were available to you?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 11 of 35

DC YATES

Were you available when required to advise and counsel

relatives?

BARTON

No comment.

DC YATES

Were you responsible for liasing with the GP's with whom

the patient was registered and with other clinicians and

agencies?

BARTON

No comment.

DC YATES

Those are several roles that were initially identified within the job description. How long was a session, you were employed for a number of sessions a week, as you've

pointed out in your statement, how long was a session?

BARTON

No comment.

DC YATES

Did you spend longer than the allotted time at the hospital?

BARTON

No comment.

DC YATES

Who were you accountable to on a daily basis?

BARTON

No comment.

DC YATES

So who was responsible for you overall?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 12 of 35

DC YATES

I believe your contract was offered in April 1998 for one

year, how was that renewed?

BARTON

No comment.

DC YATES

Did you receive any training and what training did you

receive for that given role?

BARTON

No comment.

DC YATES

What training was provided in relation to pharmacy and the

prescription of drugs?

BARTON

No comment.

DC YATES

How, if at all, did the role of clinical assistant develop over

the years?

BARTON

No comment.

DC YATES

If there were any changes was it reflected in a new job

description?

BARTON

No comment.

DC YATES

How did you feel about your levels of responsibilities?

BARTON

No comment.

DC YATES

In the same vein what did you think the hospital actually

expected of you?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 13 of 35

BARTON

No comment.

DC YATES

What in your view did you think was the role of the

consultant in charge of the ward?

BARTON

No comment.

DC YATES

Did you feel that you were provided with enough support

throughout your work when there's only one consultant

providing cover?

BARTON

No comment.

DC YATES

When would you conduct your rounds?

BARTON

No comment.

DC YATES

What was the purpose of your round?

BARTON

No comment.

DC YATES

When would you make entries in medical records?

BARTON

No comment.

DC YATES

What is the purpose behind formulating and recording a

working diagnosis?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 14 of 35

DC YATES

What are the Wessex Protocols?

BARTON

No comment.

DC YATES

And how were they applied?

BARTON

No comment.

DC YATES

What is an analgesic ladder?

BARTON

No comment.

DC YATES

And how would that be applied?

BARTON

No comment.

DC YATES

What policy was in place regarding prescription of strong

opiate analgesia?

BARTON

No comment.

DC YATES

Just take a quick break here Geoff is there anything you

want ...

DC QUADE

No.

DC YATES

... no. Moving onto the topic area of clerking. What is the

purpose of the clinical assistant in the context of looking

after patients?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 15 of 35

DC YATES

On the admission or transference of a patient to the ward

what process should take place?

BARTON

No comment.

DC YATES

Who should carry out the function of clerking?

BARTON

No comment.

DC YATES

If it's a doctor who carries out that function what should he

or she do?

BARTON

No comment.

DC YATES

Again on the other hand if it's a nurse what should he or

she do?

BARTON

No comment.

DC YATES

What is the purpose of initial clerking?

BARTON

No comment.

DC YATES

What records would arrive with a patient?

BARTON

No comment.

DC YATES

Would a patient always arrive with the notes from the QA

Hospital for instance?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 16 of 35

BARTON

No comment.

DC YATES

Initial assessments, what is the purpose of an initial

medical assessment of a patient when they arrive on the

ward?

BARTON

No comment.

DC YATES

Who would you be expecting to read the entry?

BARTON

No comment.

DC YATES

So when would you actually see a patient for the first time?

BARTON

No comment.

DC YATES

And what physical examination of the patient would you

carry out?

BARTON

No comment.

DC YATES

Care plans, what's the purpose of a care plan?

BARTON

No comment.

DC YATES

Do you have any input into a care plan?

BARTON

No comment.

DC YATES

What would you expect to see recorded in the patient notes

on a day to day basis?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 17 of 35

BARTON

No comment.

DC YATES

And that includes the nursing and medical notes.

BARTON

No comment.

DC YATES

Ward rounds, how often would you conduct your rounds?

BARTON

No comment.

DC YATES

And who would you conduct your rounds with?

BARTON

No comment.

DC YATES

So what was the purpose of the rounds?

BARTON

No comment.

DC YATES

Were the nurses on the ward, would they accompany you

and have any input into the rounds?

BARTON

No comment.

DC YATES

How often did the consultants conduct their rounds?

BARTON

No comment.

DC YATES

In what way did the consultant rounds differ from yours, if

they did?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 18 of 35

BARTON

No comment.

DC YATES

So what did you understand a consultants responsibilities to

be?

BARTON

No comment.

DC YATES

In relation to the pharmacy, what pharmaceutical training

had you received whilst you were working at the hospital?

BARTON

No comment.

DC YATES

How would you know what drugs to prescribe to a patient?

BARTON

No comment.

DC YATES

How would you learn about new drugs that were available

for administration?

BARTON

No comment.

DC YATES

How did the pharmacy at the Gosport War Memorial

Hospital work in relation to the availability and suitability

of medicines and drugs?

BARTON

No comment.

DC YATES

How many pharmacists worked at the Gosport War

Memorial Hospital in 1999?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 19 of 35

DC YATES

What is the BNF?

BARTON

No comment.

DC YATES

What is its purpose?

BARTON

No comment.

DC YATES

How often would you refer to the BNF?

BARTON

No comment.

DC YATES

What was the purpose of the Wessex Protocols in relation

to prescribing medicines to patients?

BARTON

No comment.

DC YATES

While we're talking about prescribing medicines, what's

the difference between once only drugs and as required

drugs ...

BARTON

No comment.

DC YATES

... regular drugs? Why are ranges of drugs prescribed for

patients?

BARTON

No comment.

DC YATES

How should the prescription chart be completed?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 20 of 35

DC YATES

Can you explain how a prescription chart is made up?

BARTON

No comment.

DC YATES

Again from the prepared statement you've made mention about supervision and the fact you were overstretched, who actually supervised you?

BARTON

No comment.

DC YATES

So what was the organisational set up of the hospital when

you started work there in 1988?

BARTON

No comment.

DC YATES

Where did you fit into this organisation?

BARTON

No comment.

DC YATES

How was your work supervised on a day to day basis?

BARTON

No comment.

DC YATES

Or even on a week to week basis?

BARTON

No comment.

DC YATES

Were you given like a yearly appraisal or a performance

assessment?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 21 of 35

BARTON

No comment.

DC YATES

If you were who would give you this?

BARTON

No comment.

DC YATES

If there wasn't an appraisal system in the early years of

when you were working there, when did it start?

BARTON

No comment.

DC YATES

Have you ever had an appraisal or a performance

assessment while you were working at the Gosport War

Memorial Hospital?

BARTON

No comment.

DC YATES

How was your, the contract, was it renewed every year?

BARTON

No comment.

DC YATES

Because if it was I was just wondering how it was

renewed?

BARTON

No comment.

DC YATES

So if you had problems either with patients or with the

organisation at the hospital who would you refer to?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT) Page 22 of 35

DC YATES

And the same for help and support how, for your role in

particular this is, how was that offered?

BARTON

No comment.

DC YATES

What were your responsibilities towards the supervision of

the nursing staff?

BARTON

No comment.

DC YATES

Who supervised the work of the nurses?

BARTON

No comment.

DC YATES

Who supervised the work of the sisters or the senior

nurses?

BARTON

No comment.

DC YATES

Where did Philip BEAD fit into the system?

BARTON

No comment.

DC YATES

Were you responsible for any appraising, writing up of

appraisals or supervising any staff?

BARTON

No comment.

DC YATES

There was something called the named nurse what did you

understand that role to be?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 23 of 35

BARTON

No comment.

DC YATES

With the drugs, the administration of drugs, who actually

administers the prescribed drugs?

BARTON

No comment.

DC YATES

What training do the nurses the nursing staff have in the

administration of drugs?

BARTON

No comment.

DC YATES

Can any level of nurse administer drugs?

BARTON

No comment.

DC YATES

The drug registers, what is the, can you explain what the

purpose of the drug registers are?

BARTON

No comment.

DC YATES

Or what has to be recorded in them?

BARTON

No comment.

DC YATES

Something that we've noticed, sometimes drugs are

prescribed but not administered, why's that?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT) Page 24 of 35

DC YATES

And while we're talking about drugs there's certain drugs

I'd like to ask you about as well and one of them is

Fentanyl. What kind of drug is Fentanyl?

BARTON

No comment.

DC YATES

When is it normally prescribed?

BARTON

No comment.

DC YATES

What is it's purpose?

BARTON

No comment.

DC YATES

Does it have any side effects for instance?

BARTON

No comment.

DC YATES

What is a Fentanyl transdermal patch?

BARTON

No comment.

DC YATES

And if it's a patch how would that differ from say a tablet

or injection?

BARTON

No comment.

DC YATES

What is your understanding of the analgesic ladder?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 25 of 35

DC YATES

With a Fentanyl patch how long does it take for that to

become effective, with regards to pain relief that is?

BARTON

No comment.

DC YATES

The term opiate naive what does that mean to you?

BARTON

No comment.

DC YATES

What are the side effects of opiods in the elderly?

BARTON

No comment.

DC YATES

There's another drug called chlorpromazine I will struggle

with the pronunciation of some of these drugs but what is

the purpose of chlorpromazine?

BARTON

No comment.

DC YATES

What is an anti psychotic drug?

BARTON

No comment.

DC YATES

What's Midazalom?

BARTON

No comment.

DC YATES

And why would Midazalom be used?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 26 of 35

DC YATES

So how would you know exactly how much Midazalom to

prescribe?

BARTON

No comment.

DC YATES

Would you expect to see an entry in the notes as to the

justification for this drug being administered?

BARTON

No comment.

DC YATES

What part did the Wessex Protocols play in the prescription

of Midazalom, if they did?

BARTON

No comment.

DC YATES

What is diamorphine?

BARTON

No comment.

DC YATES

And why would diamorphine be used?

BARTON

No comment.

DC YATES

What other kinds of analgesic are normally used prior to

taking diamorphine?

BARTON

No comment.

DC YATES

Where's diamorphine fit within the analgesic ladder?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 27 of 35

DC YATES

Is it normal practice then to prescribe diamorphine as a, as

required, drug?

BARTON

No comment.

DC YATES

How would you decide how much diamorphine to

prescribe?

BARTON

No comment.

DC YATES

What, with the range of parameters for the administration of drug, what is the purpose of actually prescribing a range of parameters for the administration of drug, for example

between 20 and 80 milligrams?

BARTON

No comment.

DC YATES

And if that's been done how would the nurses know

exactly where to start within this range?

BARTON

No comment.

DC YATES

Would you expect to see an entry in the notes as to the

justification of this drug being administered?

BARTON

No comment.

DC YATES

I mean what part did the Wessex Protocols play in the

prescription of diamorphine?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 28 of 35

BARTON

No comment.

DC YATES

Now syringe drivers I understand there's several different

makes and models. What, first of all what is a syringe

driver?

BARTON

No comment.

DC YATES

And why would it be used?

BARTON

No comment.

DC YATES

What kind of patients are suitable for the use of syringe

driver?

BARTON

No comment.

DC YATES

Does anyone talk to the patients family regarding the use of

a syringe driver?

BARTON

No comment.

DC YATES

Could you explain how a syringe driver actually works?

BARTON

No comment.

DC YATES

Who prepares the drugs for administration via a syringe

driver?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 29 of 35

DC YATES

I think and I mentioned earlier, I mean I understand there's

different styles and sizes why's that?

BARTON

No comment.

DC YATES

More important what kind of syringe drivers have been

used on the ward?

BARTON

No comment.

DC YATES

During 1988 that would be.

BARTON

No comment.

DC YATES

Is the use of a syringe driver a significant factor in the care

of the patient?

BARTON

No comment.

DC YATES

So what was the purpose of using a syringe driver?

BARTON

No comment.

DC YATES

Who actually makes the decision to start someone on a

syringe driver?

BARTON

No comment.

Sec. 21 "

DC YATES

Were there any policies on the ward as to how syringe

drivers should be set up and monitored and maintained?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 30 of 35

BARTON

No comment.

DC YATES

Who was responsible for ensuring that the appropriate staff

were trained in the operation of syringe drivers?

BARTON

No comment.

DC YATES

What rationale had to be in place before a syringe driver

could be used?

BARTON

No comment.

DC YATES

What would be recorded in the notes about the rationale for

using a syringe driver and who would record that?

BARTON

No comment.

DC YATES

I would like to ask you some questions about death

certificates if I may. What's the difference first of all

between verification and certification of death?

BARTON

No comment.

DC YATES

And so in what circumstances would it be acceptable, if

that is the case for nurses to verify death?

BARTON

No comment.

DC YATES

What process was undertaken by a doctor in certifying a

death?

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 31 of 35

BARTON

No comment.

DC YATES

How is a death notified to the coroners office?

BARTON

No comment.

DC YATES

You've made mention again in your statement about

palliative care, what exactly does palliative care mean?

BARTON

No comment.

DC YATES

What's the difference between rehab and slow stream

rehab, recuperative term or respite care, what's the

differences between those?

BARTON

No comment.

DC YATES

So who would make the decisions as to what kind of care a

particular patient would receive?

BARTON

No comment.

DC YATES

Record keeping, what should be recorded in a patients

medical notes ...

BARTON

No comment.

DC YATES

... and by whom?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 32 of 35

DC YATES

What's the purpose of a care plan?

BARTON

No comment.

DC YATES

Who would accept patients onto the wards?

BARTON

No comment.

DC YATES

When would you actually get to see them?

BARTON

No comment.

DC YATES

Were you responsible for the clerking?

BARTON

No comment.

DC YATES

When would the consultant see the patient?

BARTON

No comment.

DC YATES

When patients arrived at the hospital, Gosport War

Memorial Hospital, were they then under the sole charge of

you?

BARTON

No comment.

DC YATES

Who else was responsible for the patients?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 33 of 35

DC YATES

Is there a policy of any sort for the completion of notes and

what should be in them?

BARTON

No comment.

DC YATES

What is your understanding of the resuscitation policy, in

particular relating to entries in patient notes?

BARTON

No comment.

DC YATES

Your, talking about your supervision, were you happy with

the level of supervision and training that you've been

provided with in order to care for the patients there?

BARTON

No comment.

DC YATES

If there were any deficiencies and they were lacking

anyway what were they?

BARTON

No comment.

DC YATES

If there were deficiencies how did you try to address that?

BARTON

No comment.

DC YATES

At the time of Mrs DEVINE's admission to the War

Memorial Hospital did you have any concerns regarding

your personal workload?

BARTON

No comment.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 34 of 35

DC YATES

How would you report whether you did have any concerns

regarding staff or workload issues?

BARTON

No comment.

DC YATES

What concerns did you have, if any, about the Gosport War

Memorial Hospital in 1999?

BARTON

No comment.

DC YATES

What training in respect of any issues whether they were

medical or pharmaceutical, did you raise in 1999?

BARTON

No comment.

DC YATES

Geoff, got anything?

DC QUADE

No.

DC YATES

Right I've got no further questions that I'd like to ask you

now, is there anything that you'd like to say?

BARKER

No thank you Mr YATES.

DC YATES

Doctor?

BARTON

No thank you.

DC YATES

Is there anything you wish to clarify or ...

BARKER

No. I'm grateful.

Interview of: BARTON, JANE ANN

Form MG15(T)(CONT)
Page 35 of 35

DC YATES

... Add, Geoff?

DC QUADE

No.

DC YATES

Right the time then is 1143 hours and we're turning the

recorder off.