



HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

SDN : ROTI : Contemporaneous Notes

Person interviewed : **Sylvia Roberta GIFFIN**

Place of interview : **Park Gate Police Station**

Date of interview : **19 June 2000**

Police exhibit no. :
Number of pages :
Signature of interviewing
officer producing exhibit :

Time commenced : **11.17** Time concluded : **12.01**

Duration of interview : **44 minutes** Tape reference numbers ♦ : **44/00/029041**

Interviewing Officers : **DC 1484 COLVIN, DC 92 Paul McNALLY**

Other persons present : **Mr GRAHAM - Saulet & Co Solicitors, Portsmouth**

Tape Counter Times♦	Person Speaking	Text
	DC COLVIN	This interview is being tape recorded, I am DC 1484 COLVIN, the other Police Officer present is....
	DC McNALLY	DC 92 Paul McNALLY.
J.21	DC COLVIN	The time is 11.17 on the 19 th of June, this interview is being tape recorded at Park Gate Police Station. Also present is, if you could just introduce yourself, who I'm interviewing, just give your full name and date of birth...
	GIFFIN	Sylvia Roberta GIFFIN, 8/2/39
	DC COLVIN	Okay and...
	SOLICITOR	Mr GRAHAM, Saulet & Co Solicitors, Portsmouth, legal advisor.
	DC COLVIN	Thank you. You are entitled to legal advice throughout the

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Continuation Sheet No : 1

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
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interview, okay, and you can delay the interview at any time should you want to, okay. Basically the reason you're here is we've undertaken an investigation into the circumstances of the death of Mrs Gladys RICHARDS on the 21st of August 1998 at Gosport War Memorial Hospital. The investigation centres around an allegation that Mrs RICHARDS was unlawfully killed as a result of a course of treatment that was embarked upon between the 17th and the 21st of August whilst admitted to this hospital. We are seeking to interview those members of the nursing staff who had a duty of care to Mrs RICHARDS during that time and who in some cases may have provided her with direct nursing care or treatment in order that an account can be obtained to the particular circumstances and issues that existed between those dates. I must emphasise that this is a search for the truth and your account and answers will be carefully assessed in the light of information arising from other interviews of staff and general correspondence. As a result of this interview and several others further guidance will be sought from professional bodies and ultimately the Crown Prosecution Service on how we should

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Continuation Sheet No : 2

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
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proceed and just to further explain that, it's not going to be a decision solely made by Police Officers who have no experience of how a medical profession works and how a ward like that would work, you know it would be made by someone who is considered an expert in that field, okay. Your solicitor has been provided with relevant material prior to this interview commencing. I must emphasise that you are not under arrest and you're free to leave at any time okay, your right to free legal advice in private extends throughout the period that you're at the police station as I've said before, if at any time you want to stop the interview to speak to Mr GRAHAM then you only have to say and we'll do so. The next bit I'm going to say is the caution, you do not have to say anything but it may harm your defence if you don't mention when questioned something which you later rely on in court, anything you do say may be given in evidence, okay. Do you understand that, you do?

GIFFIN

Yes

DC COLVIN

Okay.

3.14 DC McNALLY

All sounds a bit heavy but I think it's got to be pointed out that

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Continuation Sheet No : 3

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
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me and Lee, have been appointed to interview all the nurses and as Lee said we don't understand what all this, the medical side of things what is right and what is wrong and we're not here to judge or point fingers or anything like that, we're just here to establish what individuals did, what their roles were, who they took their responsibilities from and then we hand all that over to somebody else and they look at it and decide whether there's anything to answer at all, okay. So we're basically a tool to gather the facts about Gladys' stay at the hospital and that's all we're here for.

DC COLVIN

Okay, right obviously you made a statement to us on the 1st of June...

GIFFIN

...Was it then, the 1st of June

DC COLVIN

...at home and I think what we'll do first is perhaps go through the statement...

GIFFIN

...Okay

DC COLVIN

...just to cover the points there. It says you are basically employed as a Staff Nurse at the Gosport War Memorial since, well since 1972 you've been at that hospital, is that correct?

GIFFIN

It is.

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Continuation Sheet No : 4

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
4.27	DC COLVIN	Okay, now what I'll do is, I'll just ask, you've obviously read this statement...
	GIFFIN	...Yeah.
	DC COLVIN	...today. Is there anything there you want to clear up, anything that's, that I've put down that you've subsequently looked at and thought well he's not got that quite right, he's not explained that.
	GIFFIN	Well most of it's alright it's just the, that business about Anita TAPPETT, she wasn't actually based on the ward, she was visiting at various times during the night...
	DC COLVIN	...Right
	GIFFIN	...she doesn't actually stay on the ward...
	DC COLVIN	...Right, okay.
	GIFFIN	...she's got other things to do...
	DC COLVIN	She's the Senior...
	GIFFIN	...I mean she's based on Dryad not, not Daedalus.
	DC COLVIN	..Right, okay.
	GIFFIN	But if I need her I can get her.
	DC COLVIN	Right, so that's the 20 th of August, that would be the Thursday going into the Friday of the 21 st that night shift?

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Continuation Sheet No : 5

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	GIFFIN	Yeah.
5.19	DC COLVIN	So she was in overall charge of the hospital overnight?
	GIFFIN	Yeah.
	DC COLVIN	Okay, so she would have, would she have popped in from time to time just to make sure everything was okay?
	GIFFIN	Yes, she would come, she would come over, ERM well if I called her and while she went to her break I would have been in charge of the hospital.
	DC COLVIN	Okay. Can you just explain that again and I appreciate you've told us this already but this is purely for the tape because this is a new, just a new way of us gathering information in relation to Daedalus ward and the hospital, what that wards main responsibilities are and what sort of patients they'll get in.
	GIFFIN	Mmm, well it is elderly care, all we have are eight beds that are allocated for stroke patients that are for rehabilitation if we can manage it and the others are all for long stay, ones that are not expected to recover to any great degree and possibly might go on to a nursing home or rest home when we've got them as good as we can with physio and ...

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Continuation Sheet No : 6

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
6.38	DC COLVIN	...Right, okay. So I mean this word keeps sort of cropping up like palliative care, can you describe for me what that, what that means or what your...?
	GIFFIN	...Palliative care
	DC COLVIN	...yeah, what your interpretation of it IS?
	GIFFIN	The object is to keep the patient as pain free and as comfortable as possible and trying to avoid that they should injure themselves in any way.
	DC COLVIN	Right, okay and that would be the treatment for that, I know would differ from patient to patient...
	GIFFIN	...It would
	DC COLVIN	...but would that be mainly drugs being prescribed in order to...would there be other ways of ensuring that, that they didn't injure themselves?
	GIFFIN	Well most people that we have are to some degree or another erm demented and er well our drugs are helped to control that but everybody doesn't have them it depends, by finding out what they want to do and when they want to do it, as far as possible letting them do their own thing but you've got to understand if they

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Continuation Sheet No : 7

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
		believe that they can stand and walk and we know they can't, then you'd be constantly trying to stop them doing that...
8.12	DC COLVIN	...Yeah
	GIFFIN	...because eventually they are going to fall and erm that causes them some distress and that's what we're trying to avoid.
	DC COLVIN	Yeah, okay. You've already stated that you obviously are a Staff nurse, have you got any specific qualifications in treating elderly and patients such as that on the ward or is that part of your...?
	GIFFIN	...Qualifications as such, no well only in as much that I've been doing it for what thirty seven (37) years.
	DC COLVIN	Yeah, treating the elderly for that amount of time?
	GIFFIN	Yeah.
	DC COLVIN	Okay, right now going over to the Daedalus ward, basically who manages the patients in terms of treatment and plans for treatment. Who would oversee that and actually make decisions based on...?
	GIFFIN	..When, Doctor LORD is the consultant in charge and on a daily basis except at weekends when she's off duty Doctor BARTON visits the ward every morning, we check if the nursing staff have

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Continuation Sheet No : 8

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
		any concerns about anyone and she would deal with what comes up then, on a daily basis.
9.36	DC COLVIN	Yeah.
	GIFFIN	And she's been doing that a long time as well.
	DC COLVIN	How long has she been down on the wards?
	GIFFIN	Oh I don't know but erm (inaudible) about 10 years or something like that because she was, before we were at Gosport War Memorial we were down at (inaudible) which is in the avenue and she was doing the same job then.
	DC COLVIN	Oh right, okay. So she would come in every morning on a week day?
	GIFFIN	Yeah before surgery she would come in round about eight (8.00) o'clock.
	DC COLVIN	And she would be responsible for all patients on that ward including ...
	GIFFIN	...All patients that were Doctor LORD's and we didn't have very often anyone that belonged to anyone else.
	DC COLVIN	No, okay and that would include the stroke patients so that would be the whole ward...?

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Continuation Sheet No : 9

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	GIFFIN	...Yeah, yeah
10.27	DC COLVIN	...depending on numbers or whatever?
	GIFFIN	Yeah.
	DC COLVIN	Okay and would she actually visit every patient daily or would it be more of speaking to the staff?
	GIFFIN	No, she would have gone into the office and speak to whoever was in charge at the time and depending what she, what messages were passed on, she would go and see the patients they wanted her to.
	DC COLVIN	Right so if there was a specific problem with a patient she would visit but if there was no change to a patient, there was no concerns then she wouldn't necessarily do so?
	GIFFIN	It would take her a long time.
	DC COLVIN	Yeah, okay. In terms of your role on the ward as a Staff nurse now there have been times when you sort of in charge of the ward, is that right? What circumstances would that, would suggest, sorry what circumstances would occur for you to be in overall charge of the ward?
	GIFFIN	Well I'm in charge of the ward on nights.

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Continuation Sheet No : 10

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
11.31	DC COLVIN	Yeah.
	GIFFIN	The e, because there isn't I mean apart from the person that's in charge of the hospital there isn't anyone senior to me on duty and er I have a responsibility to the ward while I'm there.
	DC COLVIN	So, on nights or out of hours you'd have a senior staff nurse overseeing the whole...
	GIFFIN	...The whole hospital
	DC COLVIN	...hospital and then each specific ward has its own?
	GIFFIN	Yeah has its own trained staff.
	DC COLVIN	Yeah, okay. So if there was anything that occurred which was unusual overnight or a particular problem with a patient or, where would you refer it to?
	GIFFIN	I would tell who was in charge of the hospital erm and then I would phone a Doctor.
	DC COLVIN	Yeah.
	GIFFIN	Health call after ten (10) o'clock at night.
	DC COLVIN	Yeah, which is sort of like a call out?
	GIFFIN	Yeah
	DC COLVIN	System I understand, okay. We're obviously going over the

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Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
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treatment process and the, Doctor BARTON would make decisions obviously on what treatment to provide, would you or any other nurses have any input into that in terms of well you know I...would make suggestions or if you didn't agree with it you would bring it to the doctors attention?

13.02 GIFFIN

We are entitled to erm query anything we're, we're not happy with.

DC COLVIN

Right.

GIFFIN

Erm and quite often I think Doctor BARTON would erm consult with whoever was telling them about a problem as to which drug would be most suitable given the fact that the nurse knows the person personally rather than just as I mean, Doctor BARTON couldn't possibly know everybody as well as the nursing staff did.

DC COLVIN

Yeah.

GIFFIN

So you know and also if that particular drug doesn't seem to be as effective as it might be, you could ask her to change it to a different one because different people react differently to what you would think were the same drug, it's not you know...

DC COLVIN

...Yeah.

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Continuation Sheet No : 12

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	GIFFIN	...it's a chemical thing I'm sure.
14.04	DC COLVIN	Yeah it would vary on person to person so, for example when Doctor BARTON would come on her rounds the next day if there was a problem...
	GIFFIN	...Or if you felt that it needed doing but you could always ring her up and she would come in then...
	DC COLVIN	...Right
	GIFFIN	...and she would change it on the treatment card if necessary.
	DC COLVIN	Okay, right. Has there ever been times in your career particular at Gosport where a treatment program is one that you don't approve of or you think this isn't right and you've suggested something and you know that's not been taken on, if that was the case is there a process where you would be able to speak to somebody else and say look I'm not happy with this or are you aware of any procedure in the hospital that you could do that?
	GIFFIN	Erm, there are supposed to be procedures in place but how effective they are.
	DC COLVIN	Okay and what are those procedures? What would you be expected to do?

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Continuation Sheet No : 13

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	GIFFIN	Well initially you would have to see the clinical manager of the ward which would be Philip BEED.
15.20	DC COLVIN	Right, okay, so you'd make representations to him and then what would he do, are you aware what he would do?
	GIFFIN	Well presumably he would have to investigate it himself.
	DC COLVIN	Okay. Have you ever had any cause to do that, to speak to the clinical manager?
	GIFFIN	Not on Daedalus.
	DC COLVIN	Not on Daedalus. At the hospital? All I'm after is, all I'm trying to ask is, I'm just trying to get the systems sorted out and the policies at the hospital.
	GIFFIN	No.
	DC COLVIN	I mean did it involve anybody who is involved in this case?
	GIFFIN	No.
	DC COLVIN	No, okay and were you satisfied with the outcome of your representation? Did you receive a satisfactory result or an answer about it?
	GIFFIN	It was a long time ago, no.
	DC COLVIN	No, okay. How long ago was it?

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Continuation Sheet No : 14

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	GIFFIN	Twelve (12), thirteen (13) years.
16.43	DC COLVIN	Okay and in terms of the patient what happened there?
	DC McNALLY	I think what we're trying to get at here is the fact that if for you to tell us that if you were unhappy about something, and you thought that maybe the treatment that this person was getting, I don't think its the right sort of treatment...
	GIFFIN	...You'd think now that it would be a test.
	DC McNALLY	...then you would go and complain, yeah, you would go and make representations they've made this decision, I don't agree with it, I need somebody else to address it and look?
	GIFFIN	Yeah.
	DC McNALLY	Yeah.
	GIFFIN	Now it would be addressed and it erm would be erm dealt with properly.
	DC COLVIN	Okay but that time twelve (12), thirteen (13) years ago it was a different issue and you weren't obviously happy about it?
	GIFFIN	No.
	DC COLVIN	Okay, okay. Obviously what we're talking about is Gladys RICHARDS and although she came in twice into the hospital, the

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Continuation Sheet No : 15

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
		dates we're sort of concentrating on are between the 17 th of August and the 21 st . Now in relation to your statement you were on nights, on certain days weren't you over that period of time, can you remember what you were working?
18.24	GIFFIN	No, well I worked Thursday, Friday, Saturday.
	DC COLVIN	Okay. I think on your statement you say you started on Thursday, that would be the 20 th , what hours do you do on nights?
	GIFFIN	It's eight fifteen (8.15) to seven forty five (7.45).
	DC COLVIN	Okay. Perhaps you could just go over...
	GIFFIN	...You get an hour and a half off in the middle.
	DC COLVIN	...perhaps you could just go over your duties on nights, you know a normal night duty you know what you're expected to do? I know probably each night is different but...
	GIFFIN	Basically er well a hand over takes around about quarter of an hour to half an hour depending how much information you've got to pass on and then erm because it's coming up for bedtime, some patients will already be in bed and some will be waiting to go. Basically we go round, help people into bed, make sure they're comfortable, get their teeth out ecetera.

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HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No : 16

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	DC COLVIN	Yeah.
19.30	GIFFIN	And erm about something like half past nine (9.30) I would break off from that and leave the health care (inaudible) to do it and I've got ten (10.00) o'clock drug round to do. I come round give everyone their ten (10.00) o'clock drugs and then by the time I've finished going round doing that they've usually finished the rest of the patients, putting them to bed and then its lights out, tidy up and have a cup of tea because we need it by then.
	DC COLVIN	Yeah.
	GIFFIN	Erm then I would, we would call it the silent hours, its a case of checking on the patients roughly half hourly but because there's three of us it doesn't always go that long sometimes its twenty minutes erm of course if theres a noise you have to investigate that erm anybody rings the bell we have to go and do that erm and that goes through until should be six (6.00) o'clock in the morning and then its go round wake everybody up, lets see what nursing care they need, sit them up erm give them a cup of tea, there are some six (6.00) o'clock drugs though not very many because er only the ones that are really essential get given at six because they're too

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Continuation Sheet No : 17

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
		sometimes difficult to rouse enough to take medicine so a lot of them are given at eight (8) rather than six (6). Erm so we go round and sort everyone out and then half past seven (7.30) is handover time for the day staff.
21.41	DC COLVIN	Okay, just talk me through the hand over then, what sort of things would be discussed at that hand over?
	GIFFIN	Erm which one?
	DC COLVIN	Well both, go for both.
	GIFFIN	In the evening I would be told erm what sort of day the persons had had, if their medication had been changed erm what sort of investigations were in progress and erm if there were any particular concerns that I need to take notice of erm and what, when its like a Friday night for instance and that's my first night on for five nights, I would be given a sort of rough summary having been off a week since I saw them last.
	DC COLVIN	Right.
	GIFFIN	Erm in the morning erm it depends who was on duty, if the person, people who are on duty were on duty the night before I just need to tell them any of the occurrences overnight.

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Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	DC COLVIN	Yeah.
23.02	GIFFIN	But if there's some that have been days off or on leave or something I have to give them a more extended.
	DC COLVIN	Yeah, okay. Okay, right as I say we're talking about Mrs RICHARDS, what's your recollection of Mrs RICHARDS doing those period of time?
	GIFFIN	It's erm I can't honestly remember her, I can remember a figure in the bed but to say I can remember her face or anything specific about her I can't.
	DC COLVIN	Okay, now as I understand it the only night you saw her was the Thrusday the 20 th going into Friday the 21 st .
	GIFFIN	First thing on the Friday 21 st , she died just after, according to the notes, the statements and my notes on the nursing notes, I honestly thought she'd died early morning but I have signed it to say it was early eve..early in my second shift which would have been the Friday night.
	DC COLVIN	Right, okay. So it's basically a figure in a bed that you recall?
	GIFFIN	Mmm.
	DC COLVIN	Do you remember her daughters there, do you remember?

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Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	GIFFIN	I do remember I can't remember her name, the daughter that live, that lives locally, I do remember her being there all the time I had several conversations with her every time I went into check how Mrs RICHARDS was and she would have a little chat.
24.56	DC COLVIN	Okay. In relation to your statement as I understand it you weren't involved in administrative, administering any drugs to..?
	GIFFIN	No the syringe driver was already in place.
	DC COLVIN	Okay.
	GIFFIN	And I just made sure that it was working properly (inaudible) on duty.
	DC COLVIN	Okay, perhaps you could talk me through the syringe driver, how it operates and who's in charge of it and just a general sort of overview?
	GIFFIN	How it operates?
	DC COLVIN	Yeah.
	GIFFIN	Er it hasn't got a battery in it, it has a (sighs) adjust the rate that it goes through, pumps it in usually around about 60 to get a 24 hour period, uses a 10 mil syringe, can use a large one but you have to work out a different rate for it then...

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Continuation Sheet No : 20

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	DC COLVIN	...Right.
26.01	GIFFIN	...and I've never used it with a 20 mil syringe because its a bit big for the actual driver itself, 10 mils sits in it just right and er the drugs are mixed in the syringe and erm the patient has a needle just subcutaneously just under the skin and er, long piece of tubing that's attached to the end of the syringe.
	DC COLVIN	Okay so its loaded at a particular time of the day?
	GIFFIN	Yeah, well erm just whenever its decided that its necessary to use it, it could be night time, it could be any time just when erm its written up on the chart that there's a possibility that might be necessary and its up to whomevers on duty at the time to make that decision or not as the case may be.
	DC COLVIN	So what are the advantages of using a syringe driver over giving drugs by mouth?
	GIFFIN	It delivers a continuous low dose of whatever drugs being used and avoids given injections every 4 or 6 hours erm which have a level of effectiveness and then it tails off so you get peaks and troughs with injections which you don't get with a syringe driver its just a steady, steady flow, its much more effective at controlling pain,

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Continuation Sheet No : 21

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
		discomfort.
27.57	DC COLVIN	How common is the use of the driver on the ward?
	GIFFIN	Its erm, its used quite consistently these days, not everyone has it.
	DC COLVIN	Okay, no. What would, I know you've mentioned the pain side of it but what would be the reasons for putting someone on syringe driver, we've obviously covered the pain aspect is there any other reasons why someone would be?
	GIFFIN	Some people get extremely agitated (inaudible) can't really always know why and they would be turning themselves round in bed, potentially injuring themselves so you produce something like midazolam that's what's used you know to quiet them down a bit, save them from hurting themselves.
	DC COLVIN	Okay.
	GIFFIN	Also you can use erm hyoscine was used here as well, that dries up the secretions on the chest so they don't get that horrible, noisy, bubbly sound.
	DC COLVIN	Right.
	GIFFIN	Without it we'd have to use a sucker which is horrible to use, patients don't like it and er but you're left with having to do that

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Tape Counter Times ♦	Person Speaking	Text
		otherwise the patient would drown in their own secretions.
29.29	DC COLVIN	Right is that because they're laying down all the time when its building up, when the fluid builds up?
	GIFFIN	Yes it does. They don't cough when they're under sedation so they can't clear it themselves so it just pulls them eventually.
	DC COLVIN	Eventually, yeah.
	GIFFIN	You've got to do something about it so hyoscine sorts that.
	DC COLVIN	Okay, perhaps we'll have a look at the drugs. What I've got here is the file for Gladys RICHARDS which you may have seen parts of it before. This part is the, basically the prescribed drugs for Gladys RICHARDS, just show you that. Now I believe, if you're aware she was on four drugs, like which were on the syringe driver.
	GIFFIN	(inaudible) this one and these, no, not that one, diamorphine where's the diamorp...that one.
	DC COLVIN	That's it, it would be diamorphine.
	GIFFIN	Haloperidol. Haloperidol has quite similar to midazolam but the problem is as I said 10 mil syringe you've got to put the diamorphine in which comes in a powder formula, a vial and you

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HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No : 23

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
		<p>have to erm dilute it with something, midazolam, that comes in a 2 mil, it depends on how many of those you have to give, you're filling your syringe up all the time but haloperidol comes in 1 mil, so quite often you would because your syringe was getting too full up you would use haloperidol in place of something like midazolam because it would fit in the syringe, there's nothing sinister about using the two, it's just you know you've got 10 mil, you can't go above that.</p>
31.45	DC COLVIN	<p>Okay can you just talk us through the four drugs and just sort of describe what they're for and what the effects are?</p>
	GIFFIN	<p>Diamorphine erm is erm pain relief principally although it can be used when somebody is er sometimes they, people who are demented do scream and you're never sure whether it is pain or, or just an agitation of mind and diamorphine does help to address both things at once. (inaudible)</p>
	DC COLVIN	<p>Yeah, sorry if we go onto the halo...</p>
	GIFFIN	<p>...Haloperidol as I said its used for extreme agitation usually, do you know what the only thing that I would say about haloperidol, it does have a build up over time.</p>

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HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No : 24

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	DC McNALLY	Does have a...?
32.45	GIFFIN	A build up over time, it stays in the system longer than midazolam so that you know if you're giving somebody haloperidol over several weeks it erm it does leave a slight residue each time so that if you would have to cut back on ...
	DC McNALLY	...Monitor (inaudible)
	GIFFIN	...at some point, whereas midazolam doesn't, well as far as I'm aware do that and hyoscine like I say erm dries up the secretions.
	DC COLVIN	Right, yeah, okay. So midazolam and haloperidol do sort of target...
	GIFFIN	(inaudible) yeah.
	DC COLVIN	What is the reason for giving both, is it...?
	GIFFIN	Well as I've just explained sometimes you're coming, I must say it's unusual, usually we use either, or but erm though I couldn't tell you why the decision was made to use both at the same time but it could possibly be due to the capacity of the syringe.
	DC COLVIN	Right to ensure that she gets...
	GIFFIN	...Yeah, yeah.
	DC COLVIN	...the level she needs.

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HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No : 25

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	GIFFIN	Because the higher, the higher the dose of midazolam that's used, I can't remember what each vial of midazolam, what it's strength is but it's 2 mils so as you go on you're going to get to your 10 mils before you, you've giving her anything else so if you give, if you sort of use a combination. If you're using a syringe capacity...
	DC COLVIN	... Yeah, yeah.
	GIFFIN	...got room for hyoscine comes in 1 mil ones, diamorphine as I say what we usually do is dilute the erm diamorphine with some midazolam to save space, other than that you would have to use sterile water which would increase the amount you're trying to get into one syringe.
	DC COLVIN	Are you able to comment on the doses and how much they are?
	GIFFIN	(inaudible) still at 40.
	DC COLVIN	Yeah.
	GIFFIN	Erm as far as I'm concerned that is a, a low dose given the fact that this woman was given over a 24 hour period.
	DC COLVIN	That's the diamorphine and ...
	GIFFIN	...Diamorphine and (inaudible), it's not very dramatic at all.

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HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No : 26

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	DC COLVIN	Okay.
	GIFFIN	Er I was on duty and she didn't show any signs of pain at the time when I was on duty so I would have thought that's probably the best level. Er (inaudible) hyoscine that is about average what most people have and 20 milligrams of midazolam is what I would expect, given that you've got haloperidol as well.
35.52	DC COLVIN	So there all fairly....
	GIFFIN	...Yeah, no there's nothing that I would say "Oh crumbs this is too much".
	DC COLVIN	Okay, right so this is obviously the prescription record, now as I understand it on the statement you made, you had no input into loading the...
	GIFFIN	...No I didn't...
	DC COLVIN	...Mrs RICHARDS syringe driver and I, also you had no sort of input into discussing her treatment...
	GIFFIN	...No
	DC COLVIN	...with Doctor BARTON?
	GIFFIN	No, no.
	DC COLVIN	Okay in relation to the hand overs, was there any, anything

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RECORD OF INTERVIEW

Continuation Sheet No : 27

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times	Person Speaking	Text
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discussed specifically about Mrs RICHARDS? Do you recall anything you know about her condition or anything to be aware of with her or anything of that nature?

36.43 GIFFIN

I can't remember anything specific I mean obviously I would have been told that she was on the syringe driver and what was in it erm and I would have been told that her daughter was present erm but from then on its really TLC.

DC COLVIN

Okay. When you came in I know you, you've obviously seen some documents now that would refresh your memory but can you recall when you came in on the Thursday and obviously Mrs RICHARDS is there, what was your understanding of the treatment she was on? What was your perception of it in relation to her health?

GIFFIN

What am I supposed to say.

DC COLVIN

Was there anything made to you to feel that she was dying?

GIFFIN

I don't think anybody would have said to me erm she is dying they would probably have said that she's not very well and they would have told me when the syringe driver was first put out and erm it's just continuing care really.

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HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No : 28

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	DC COLVIN	Yeah. I mean obviously do you recall seeing the drugs prescribed on the driver? Would that have indicated to you that she was, she wasn't much, obviously she wasn't well but there was a chance that she would perhaps recover to some extent?
38.52	GIFFIN	No I wouldn't have thought, I would have thought she would recover. I thought she would probably deteriorate slowly but I don't have a crystal ball I don't know...
	DC COLVIN	...I appreciate that
	GIFFIN	... how long that sort of thing could go on for.
	DC COLVIN	Yeah, okay.
	DC McNALLY	Is it fair to say that the for use of a better word cocktail of medicines that she was given, that that cocktail is for...they've prescribed that for somebody in her condition who they believe is going to die and it's just a way of making them comfortable and pain free...
	GIFFIN	...Yes
	DC McNALLY	...is that what those cocktail of drugs are for?
	GIFFIN	Basically yes.
	DC McNALLY	If you were like if you went onto a strange ward and you saw

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RECORD OF INTERVIEW

Continuation Sheet No : 29

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
		these drugs administered to a woman that you didn't know, would it be a fair assumption that there's nothing else we can do for this lady...
	GIFFIN	...Yeah.
	DC McNALLY	...and she's on her way?
39.42	GIFFIN	Yeah.
	DC McNALLY	Yeah.
	DC COLVIN	Okay, you didn't see Mrs RICHARDS prior to these drugs being prescribed did you?
	GIFFIN	No.
	DC COLVIN	No, okay.
	GIFFIN	I just, I just missed her, the week before she came and went before I ...
	DC COLVIN	...Right
	GIFFIN	...I was on duty and then she was back when I came on the next week so I didn't actually see her prior these (inaudible).
	DC COLVIN	Okay. Now on nights are you, you've obviously gone over your sort of basic stuff that you do and obviously things that happen will come on top of that but are you involved in at any time in

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HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No : 30

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
		feeding patients or giving them water or drinks or....?
	GIFFIN	...Oh yeah, if there awake and they want a drink we give them a drink and also some people like we need to push fluids and we do that but in Mrs RICHARDS case she wasn't conscious enough to drink without possibly choking and I don't want to be responsible for that.
40.56	DC COLVIN	Was there any attempts made whilst you were on the ward to give her water either by mouth or by...?
	GIFFIN	...No, definitely not by subcutaneous.
	DC COLVIN	Okay.
	GIFFIN	No, nobody, they, the health care support workers would only do that if I said that it was alright, 9 times out of 10 somebody in this condition it would have to be done by trained staff anyway.
	DC COLVIN	Right, being yourself or a staff nurse?
	GIFFIN	Mmm.
	DC COLVIN	Right, okay. Was there any reason you can recall why she wasn't given a....
	GIFFIN	...I just said she wasn't conscious enough...
	DC COLVIN	...no, I mean through a needle?

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RECORD OF INTERVIEW

Continuation Sheet No : 31

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	GIFFIN	It's one of those erm mute points really isn't it. You, yeah you make a choice to keep somebody hydrated who you're also giving these particular drugs through a syringe driver and they do come to a stage where they don't absorb however hard and most of what drugs keep account at that point.
42.22	DC COLVIN	Right, okay. So just recapping that then, as we said these combination of drugs in her condition would lead you to think that she was passing on, dying and these drugs are helping her to do that pain free?
	GIFFIN	Yes.
	DC COLVIN	Okay. Was it ever mentioned to you what she was actually dying of?
	GIFFIN	No, I mean I was, I was told about what had happened with her fall ecetera but not in any great detail, no wasn't, I don't think I was told why this course of treatment was started earlier in the week not specifically.
	DC McNALLY	(inaudible) up to day three I think when the treatment was already...
	GIFFIN	...Yes.

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RECORD OF INTERVIEW

Continuation Sheet No : 32

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	DC McNALLY	...in progress so but nobody ever mentioned that she was dying of anything specific?
43.38	GIFFIN	No, no.
	DC McNALLY	No.
	GIFFIN	Well I think it's one of those unspoken things that we all, we all accept really you know just (inaudible).
	DC McNALLY	Mmm. When you say the unspoken thing is it's a case of there is nothing we can do for her?
	GIFFIN	Yeah.
	DC McNALLY	Yeah.
	GIFFIN	That's ...
	DC McNALLY	...And I take it that decision (buzzer sounds) that there is nothing we can do for her would be made by who?
	GIFFIN	Er well Doctor (inaudible) I presume.
	DC McNALLY	Doctor...
	GIFFIN	Doctor BARTON
	DC McNALLY	Doctor BARTON.
	GIFFIN	Well she being the one that's there every day.
	DC McNALLY	Yeah.

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HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No : 33

Record of interview of: **Sylvia Roberta GIFFIN**

Tape Counter Times ♦	Person Speaking	Text
	GIFFIN	And er if she queried that she would have gone to Doctor LORD and spoken to her but I don't know.
	DC McNALLY	Right.
	DC COLVIN	Okay, we'll leave it there that buzzing noise means we're running out of tape.
	GIFFIN	Oh right okay then.
	DC COLVIN	So we'll take a break. The time by my watch is 12.01. Turn the recorder off.
		END OF TAPE

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