



SDN:	Contemporaneous Notes
Person interviewed: Margaret COU DOB Code A Place of interview: Park Gate Police	Police exhibit no. : Number of pages : Signature of interviewing
Date of interview : 29 June 2000	officer producing exhibit:
Time commenced: 1026 Time	e concluded : 1104
Juration of interview: 38 mins	Tape reference numbers ◆: 44/00/0308 48
- characteristics	de A ode A
Other persons present: Mr Code A	, Sauley & Co, Solicitors - Legal Advisor
Tape Counter Person Speaking Times Times Times Times Times Times Times Times Times Times Times Times Times Times Times Times Times	Text
0.51 DC Code A	At the conclusion of the interview I'll be giving you a note
	explaining what will happen to the tapes. Okay? I'm now going
	to go through - we have a set sort of screed that we read out to
	explain why we've asked you to come in and what we are trying
	to achieve by it really.
	The Hampshire Police have undertaken an investigation into the
	circumstances of the death of Mrs Gladys RICHARDS on the 21st
	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
Signature(s):	◆ Not relevant for contemporaneous notes



HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 1

Record of interview of: Margaret COUCHMAN

DOB Code A

Tape

Counter Times •

Person Speaking

Text

embarked upon between the 17th and 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 medicine care or treatment in order that an account can be obtained to the particular circumstances and issues that existed between those dates. I emphasise that this is a search for fact and your account and answers will be carefully assessed in the light of information arising from other interviews with 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 proceed. Your solicitor has been provided with relevant material prior to this interview commencing. I must emphasise that you are not under arrest and you are free to leave at any time. Your right to legal advice with Mr Code A in private, extends throughout the period you are at the Police Station, so that basically means any time during the interview you want to have a chat with Mr Code A then we'll stop the

Signature(s):		
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HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 2

Record of interview of: Margaret COUCHMAN

DOB Code A

Tape Counter

Times •

Person Speaking

Text

interview. We will leave and obviously you can discuss whatever point you want to discuss.

The next bit is the caution. 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. Anything you do say may be given in evidence. Okay, do you understand the Caution? I do.

COUCHMAN

Code A

Okay and just one more point I'd like to make about this, because

it's quite harshly worded or it may seem harshly worded, myself

and Paul here are just get an account of what's happened on those

few days, what people's roles are, what the set up to the hospital

is and you know, we'll look through the notes on the way through

and you can explain various bits that are relevant that you can

explain. We're not here to make any judgements and certainly

we're not in any position to make any judgements. Any decision

that's taken regarding this will be made with full consultation with

someone who's an expert in this sort of area, who's got a medical

background and is medically qualified, so it's not going to be

taken by some hard nosed copper somewhere who hasn't got a

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HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No: 3

Record of interview of: Margaret COUCHMAN

DOB Code A

Tape

Counter Times •

Person Speaking

Text

clue how these things work. Okay, what I'd like to do to start the ball rolling is if you could go over your role within the hospital and your qualifications and experience.

COUCHMAN

Code A

COUCHMAN

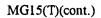
I work on Daedulus Ward and I'm an E grade Staff Nurse, which means mostly I take charge of the ward. Um, what else do you want to know?

Um, your experience, how long ...

Oh yeah, oh well I trained the seventies and I worked at the Royal Hospital, Portsmouth until it closed, where I had general experience in surgical, medical, children's nursing, private nursing, orthopaedic nursing. When the Royal Mem. um when the Royal closed, then I moved to QA and I worked on the orthopaedic wards. Then I left QA and for two years I worked with autistic adolescents and quite enjoyed that. That was very near where I live in Alverstoke. Er . I then left Anglesey Lodge and moved to Gosport War Memorial, I worked on the Children's Ward originally, where we did minor operations on children, ENT and Orthopaedic.

When the NHS closed the Children's Ward then I moved to the

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Continuation Sheet No: 4

Record of interview of: Margaret COUCHMAN

DOB	Code A	

Tape Counter

Person Speaking

Times •

Text

Code A

COUCHMAN

Code A

COUCHMAN

Code A

COUCHMAN

Code A

COUCHMAN

6.26

Code A

ward I'm on at present. We have eight stroke rehab beds and sixteen continuing care beds, which is where I was working when

Mrs RICHARDS . . came..

Okay, how long have you been on Daedulus Ward?

And I've been on Daedulus Ward um. . twelve years I think it is.

Okay. So can you sort of describe the continuing care and what sort of patients you tend to get in to the

In continuing care we have basically ... we have patients very frail, elderly patients, with multiple medical problems, normally problems like Parkinsons and Alzheimer's, um Multiple Sclerosis, old. . um patients that have had many strokes um patients that are highly dependant normally needing two nurses probably to have a wash and get up and mostly we have to feed our patients. . .

Right. . yeah. .

. . . mealtimes, and they are fed.

So they tend to be very dependant on . . .

They are highly dependant patients mostly.

Okay, alright. Thank you for that. Um I mean if we can move on to Mrs RICHARDS...

Signature(s):	
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Signature(s):

HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

	f interview of: Margaret	Continuation Sheet No : 5 t COUCHMAN
Tape Counter Times	Person Speaking	Text
	COUCHMAN	Yeah.
	Code A	which is the whole crux of this, what are your memories of
	Li	her?
	COUCHMAN	My memories of Mrs RICHARDS was that I was her main nurse,
		but I wasn't actually on the ward when she was admitted. She
		was admitted under my name by a D grade nurse, who worked
		with me. I was on leave. When I came back from leave was the
		day Mrs RICHARDS came was re-admitted from Haslar, so
		that morning we worked as normal. I went for my coffee break
		about 11 o'clock and as I came back, Mrs RICHARDS had been
		admitted, so I was met by um two health care support workers,
		who had acutally not assisted her into bed, but was actually there
		when she was put on the bed. One of them, support worker,
		Linda BOLDECINOS, came to tell me that she was quite worried
		really because this patient had been transferred on a sheet, where
	[she should have been on the canvas on a tall base.
	Code A	Right.
	COUCHMAN	and she wasn't happy with the way she was lying. Also she
		felt the patient was in pain. So I went into the room and





Continuation Sheet No: 6

Record of interview of: Margaret COUCHMAN

DOB Code A

Tape

Counter Times •

Person Speaking

Text

introduced myself to the sisters and the patient, I pulled back the covers and had a look and found she wasn't lying properly. One sister said, because I was on my own at the time, told me she was a nursing officer - an ex nursing officer - and offered to assist me. I accepted this explanation of a nursing officer and she did help me put her mother in the correct position and she did seem more comfortable. Then I remember lunch came and this sister was trying to . . . daughter I should say, was trying to feed her mother and her mother couldn't take the food, so I did ask one. . another health care support worker to go and mince the food, which she did. She took it to the kitchen, had it minced, bought it back and she carried on attempting to feed her Mum.

Somewhat later, we heard her Mum in pain and distress again and um I went into the room and had a look at the patient and she appeared to be in pain, she was crying out in distress and I spoke to the daughters as is normal. We . . on our ward we try to involve the relatives as much as possible in the patient's care. . .

Code A

COUCHMAN

. . and I said to her daughter, um I'd like to give your Mum

Signature(s):	
	Not relevant for contemporaneous notes

Mmmm.



HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 7

Record of interview of: Margaret COUCHMAN

DOB Code A

Tape

Counter Times •

Person Speaking

Text

something to relieve the pain, is it okay if I do it and she said yes please. So I went to find the Manager, Mr BEAD and said this patient, Mrs RICHARDS, is in pain, um I'd like to give her some Oromorph, which is a liquid, which is morphine based. We gave her a very small dose er, two qualified staff check these drugs, so nobody ever gives them on their own, so they are in a locked cupboard within a locked cupboard, so we went in and measured the drug, checked that we had the right amount left. We have a book, I expect you've seen it, a CD book. . .

Code A

COUCHMAN

Code A

COUCHMAN

Er. . . .

. . . where we enter these drugs.

. . .yes I think I've got a copy here actually. . .

.. and in the book we put the patient's name, the date, the dosage um and then we check the amount that's left that we're going to replace in the cupboard and we both sign and we also sign a treatment card - prescription card.

Code A

COUCHMAN

Right.

.. with again, the date, the name of the person, the amount of the drug and we sign that when the patient's taken it, 'cos sometimes

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Not relevant for contemporaneous notes

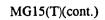


HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No: 8

Tape Counter Times •	Person Speaking	Text
		they may not want to have it when we've actually drawn it up. Er
		so we gave this um Moromol to the patient and she did appear
		more comfortable and at half past one that day I went off duty.
	Code A	Do you want to put the notes
	Code A	Yes sure, yeah, yeah
	COUCHMAN	Sorry, I've changed
	Code A	If there's anything at all you want to refer to
	COUCHMAN	I've changed the times of my um
	Code A	Obviously, yeah, this is a duty rota
	COUCHMAN	Yeah.
	Code A	Yeah, anything you want to refer to to
	COUCHMAN	Yeah.
	Code A	refresh your memory just er
	COUCHMAN	Sorry, half past three I went off duty.
11.27	Code A	Okay. So that was on the
	COUCHMAN	That was on the
	Code A	On that, on that er
	COUCHMAN	17 th .
	Code A	On the day of the 17 th you said that Mrs RICHARDS was in an

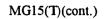




•	C 34	Continuation Sheet No : 9
OB C	f interview of: Margaret ode A	COUCHMAN
ape ounter imes •	Person Speaking	Text
		awkward position
	COUCHMAN	Mmmm.
	Code A	Can you describe the position that she was in.
	COUCHMAN	Yes, she wasn't lying flat on the bed, she was one leg was
		curled
	Code A	Yeah
	COUCHMAN	um, bent
	Code A	Right.
	COUCHMAN	and really she was supposed to have a pillow - her position was
		abduction, she should have had a pillow between both legs, so tha
		she's lying with her legs stretched out and the pillow between.
	Code A	Right.
	COUCHMAN	to keep the hip in the right position.
	Code A	Right and whose responsibility would it have been on the transfe
٠	<u> </u>	er whose responsibility to put her to bed initially?
	COUCHMAN	Whoever's on the ward.
	Code A	Would it have been I mean could it have been the
	COUCHMAN	There were two trained staff on the ward that morning.
<u></u>	Code A	Yeah.

Signature(s):

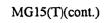
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Continuation Sheet No: 10

ter s ◆	Person Speaking	Text
	COUCHMAN	I was on my coffee break, so I wasn't on the ward. The other
		trained staff was giving an enema or suppositories, something l
		that and so she would be gowned and gloved and doing w
!"-		she had to do
	Code A	Mmm not really in a position to
	COUCHMAN	Not in a position to oversee the transfer of the patient.
	Code A	Yeah, but would it be, I mean er, I mean obviously we want
		and you weren't there
	COUCHMAN	No.
"	Code A	but I think we all agree that she didn't come in on a stretch
1		she came in on
	COUCHMAN	She came in on a sheet.
	Code A	Yeah, can you describe what that means.
	COUCHMAN	Which means that it's not taut, therefore as she's been as
		poles have been moved over um her body would stretch the she
-	Code A	I take it this sheet business is some form of stretcher.
ι	COUCHMAN	It's a stretcher. It's a canvas which goes on a stretcher is a un
		oblong piece of material which is taut material





Continuation Sheet No: 11 Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times • Code A Yeah. **COUCHMAN** both poles go - there's room both sides for the poles to go down. . . Code A Yeah. **COUCHMAN** Okay, so four or two people, two strong people could hold the stretcher, both ends . . Code A Yeah **COUCHMAN** . . and the patient would be lying on a taut surface. Code A So in that.... **COUCHMAN** For a dislocated hip, this is what is required. Code A Yeah so in these circumstances then, if er for arguments sake, I know you wasn't there . . . **COUCHMAN** No. Code A ... two ambulance crew, two of the.... **COUCHMAN** I wasn't there, but . . . Code A ... transport crew from Haslar to Daedulus Ward . . . **COUCHMAN** Yeah Code A I take it they wouldn't hang around in the ward **COUCHMAN** I have to say, can I say they had expressed to Haslar that they

Signature(s):

Not relevant for contemporaneous notes



HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No : 12 Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times • didn't wish to bring the patient without a canvas. Code A Yeah, but I take its the case they are not going to stand around in the ward holding a stretcher waiting for somebody to transfer from stretcher to the bed. **COUCHMAN** Well no, they obviously did it. Code A Yeah. Yeah. **COUCHMAN** Code A Yeah, so that more than likely in the hospital, the transfer crew would have put her into the bed? **COUCHMAN** Mmm. Yeah. Code A **COUCHMAN** It was. Just in relation to her positioning; it's been described by another Code A colleague that she was sort of in like a figure 4, her legs. **COUCHMAN** Yes, I could describe it as that, I did say one leg was bent ... Code A Yeah... **COUCHMAN** ... so that could look like a Code A . . tucked under the other and looked a bit like a figure 4. COUCHMAN Yeah it could have been like it. Signature(s):



Signature(s):

HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No: 13

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times * Code A Can we just go over the next few days, what your memories are and then obviously we'll go into the specific bits and pieces and obviously we've got the notes here for that, but in relation to any more dealings you had with Mrs RICHARDS, er anything significant that you remember and including obviously any conversations with her daughters, anything that came up during those few days. 15.00 **COUCHMAN** We actually knew, or we were told, that her daughters were suing the nursing home where she did originally break her hip. Code A Right. **COUCHMAN** Therefore we bent over backwards to try and prevent a complaint, which we would do anyway and not that they had, not that the patient had any different treatment, she didn't, but we wanted to make sure there were no complaints. Code A So it would be fair to say you sort of conscious that er . . . **COUCHMAN** We were conscious that this could occur. That something could come up from it. Code A **COUCHMAN** Yes. Code A Okay and other than the complaint that you were aware was being



HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 14

Record of interview of: Margaret COUCHMAN

DOB	Code A

Tape Counter

Times •

Person Speaking

Text

made, was there any other reason that led you to feel that... was anything else said or ...

COUCHMAN

In hindsight yes... yes.

Code A

Okay, can you tell me what . . .

COUCHMAN

Well, one support worker became quite friendly with one daughter. She did her astrology charts. her astrology chart and her sister's, um chatting to them in a friendly way. One sister who rang her many many times .

Code A

Can you remember which she was . . .

COUCHMAN

Mrs MCKENZIE. First of all she was a lawyer, then she was a TV producer. She'd written books, this is what she told the support worker. Um she um expressed an interest in spiritual healing and all sorts of astrology and etc. Things in that vein and she instigated three members of staff, myself included, going to Chichester to a meeting, some medical technical society, which was full of doctors, psychiatrists, medical people.

Code A

Mmm.

COUCHMAN

The speaker was the President of the National Federation of Spiritual Healers, he's a GP in West Sussex - very nice man. We

Signature(s):	
	◆ Not relevant for contemporaneous notes



HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 15

Record of interview of: Margaret COUCHMAN

DOB	İ	Cod	е	Α	i
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Tape
Counter
Times •

Person Speaking

Text

quite enjoyed this, however when everybody introduced theirselves, as we did, at the beginning of this meeting, Mrs MCKENZIE introduced herself as a interested person, so we knew then that she wasn't a lawyer etc whatever, also, reading . . I'm diverting I know. . but reading the other sister's statement, I don't believe she was a nursing officer, I think she worked in nursing homes.

Code A

Right.

COUCHMAN

But, anyway, so we were at this meeting and she actually did um she was very derogatory about her Mother's death there in front of us, which is probably why she wanted us there and we did actually enjoy the meeting, we left and went home and that was it, you know.

Code A

When you say derogatory, what did she say?

COUCHMAN

Oh she said she was unhappy with the way her mother died and

she didn't feel that the nursing care was adequate, etc.

Code A

Okay, who was actually . . what other members of staff . .?

COUCHMAN

Present?

Code A

Yeah went to the meeting.

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HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 16

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times 4 Health Care Support Worker, Linday BOLDECINO and Health **COUCHMAN** Care Support Worker, Jean MOSS and myself. Code A So three of you? Three of us were there. . **COUCHMAN** Code A Okay. They also sent letters to various members of staff - this is Mrs **COUCHMAN** MCKENZIE - and presents of books, books on healing, after life, after death experiences. Code A Okay, do you know who received those? Um the Manager Philip BEAD, Support Worker, Linda **COUCHMAN** BOLDECINO, one of the night staff, I think that was it, I'm not She also presented us with her Mother's chair from the nursing home, a rather nice easy chair . . . Code A For the ward? For the ward, to thank us for looking after her Mother. **COUCHMAN** Code A How long after. . . how long after her Mother's death was that then? Within the first month or two. **COUCHMAN** So six to eight weeks go by . . . Code A

Signature(s):

Not relevant for contemporaneous notes



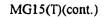
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HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 17

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking **Text** Times 4 Yeah. **COUCHMAN** Code A . . and there's been no representation made by Mrs MCKENZIE to I believe there was a complaint, I don't know the date of the COUCHMAN complaint. . Code A But up until that day when . . the meeting that you went to, you weren't aware that Mrs MCKENZIE had any representations about her Mother's treatment at all? **COUCHMAN** No. Code A No? **COUCHMAN** No, in fact we were quite shocked to sit there and listen to the complaints at the meeting. . Code A Right. ... therefore we just.. we didn't even say goodbye, obviously, we **COUCHMAN** just got up and left at the end. Code A Right. **COUCHMAN** .. although we enjoyed the meeting itself. She orchestrated that meeting? Yes she did. **COUCHMAN**

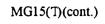




RECORD OF INTERVIEW

Continuation Sheet No: 18

ounter mes •	Person Speaking	Text
		I'm sorry Mr Graham?
		It would appear that she orchestrated that meeting to make
	Code A	complaint in front of other people.
		Oh right.
		That's the (inaudible) from what's been said.
	COUCHMAN	Totally ignored her I must say.
	Code A	If we can go back to on the ward then. We've got obviously t
		first day and what you remember of that, the fact she was move
		she obviously came back from Haslar and you're the main nurse
	COUCHMAN	Yeah.
	Code A	What does actually that mean?
	COUCHMAN	That means I am the patient's advocate. It's my duty to look af
		the patient and their relatives, to keep them informed of l
		progress, any medications that we give her. To include them
		her treatment, particularly since this lady had Alzheimer's, but t
		is for every patient anyway.
	Code A	On that point can you remember er Mrs RICHARDS' proble
	L	she had a the time when she came to the War Memorial? Wi
		was wrong with her?



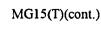


Signature(s):

HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 19

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times 4 **COUCHMAN** Yes. She was deaf in both ears. She'd had a cataract operation on both eyes. She'd had a six month history of falls. She had Altzheimers, which had worsened over the last six months. She'd had a hysterectomy in 1955 and then she'd fell at the nursing home, Glen Heathers, fractured her right neck of femur on the 30th July '98, where she was subsequently admitted to E6 at Haslar for a right hemi arthraplasti. Code A Which is a hip replacement, is it? Yeah, similar. COUCHMAN Okay. Code A On top of that are you aware of any other ailments that she had. I mean we've been made aware that she had Alzheimer's, were you aware? **COUCHMAN** I did say Alzheimer's. Code A Oh did you, sorry. **COUCHMAN** . . . it worsened over the last six months. Code A Sorry, I meant Dimentia, or is that the same. **COUCHMAN** Well Dimentia and Alzheimer's are . . . Code A One and the same are they?





Continuation Sheet No: 20

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times ◆ **COUCHMAN** ... very similar. Right. Code A What sort of form did that take do you recall with Mrs RICHARDS? What . . . how. . ? **COUCHMAN** The Dimentia? Yeah, how did that affect her? Code A It affected her speech and her memory. **COUCHMAN** Okay, so . . . Code A **COUCHMAN** She did need . . she needed her daughters to look after her. Yeah, was she able to talk or was it . . . Code A Very little. COUCHMAN Code A Very little. She cried out frequently. COUCHMAN Code A Right, okay and that was down to the Dimentia or the Alzheimer's. **COUCHMAN** Yes. .. that she would cry out like that? Code A **COUCHMAN** Yeah. Code A Okay. So was she a woman that was er you said that she needed

Signature(s):

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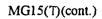


HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 21 Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking **Text** Times • her daughters constantly. Was she the sort of patient that needed constant and total care? Was there anything that Mrs RICHARDS could do for herself? **COUCHMAN** Nothing. Nothing? Code A Right okay. Obviously we're looking from the 17th when Mrs RICHARDS came back in, but did you have any dealings with her on the first occasion that she came into the ward, which was from the 11th On the first occasion she came in I was on leave. COUCHMAN Code A So you . . . I met her on the 17th. COUCHMAN Code A You met her on the 17th, oh right, okay. If we go over. . you've mentioned, I think you called it the CDR, which is the Controlled Drug Register? COUCHMAN Yes. I've got a copy of it here and um highlighted is the entries relating Code A to Gladys RICHARDS. If you'd just care to have a look through that for a moment. and I believe there's some entries

Signature(s):

Not relevant for contemporaneous notes

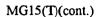




RECORD OF INTERVIEW

Continuation Sheet No: 22

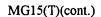
Γape Counter Γimes ◆	Person Speaking	Text
		where obviously you've your signature is. Um I think it starts
	·	off on the 18 th .
	COUCHMAN	Yeah.
	Code A	Um can you confirm that that's your signature there?
	COUCHMAN	That's me, yes.
	Code A	Um and that's the time it's booked at is it, 11.45
	COUCHMAN	11.45, yeah.
	Code A	I can't see another one there for you.
	COUCHMAN	There, 10.45 on the 20 th .
	Code A	Oh yes on the 20 th .
	COUCHMAN	Mmmm.
	Code A	And that's countersigned on each occasion?
	COUCHMAN	Each occasion, yes.
	Code A	On the 20 th it's
	COUCHMAN	It's Joan LOCK. She, at the time she was a sister on Sultan
		Ward, she's since retired.
	Code A	Oh right, okay.
	COUCHMAN	And this is Philip BEAD, my manager.
	Code A	That's the 18 th , yeah.





Continuation Sheet No: 23 Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times • **COUCHMAN** Mmm. Code A And we go to the next page, sorry that one is for 30 milligrams Diamorphine injection, the one I've just showed you. **COUCHMAN** We we, yes that was in a drug. Code A And er, there's another there on the 20th at 10.45. That is also countersigned by Sister OLD. **COUCHMAN** Code A Now I think what we've learned from speaking to other people is the reason two, there's two entries is because you can't get 40 milligrams in one . . . Because we'd use a phial of 30 milligrams of **COUCHMAN** Oh yes. Diamorphine and one of 10. Code A One of 10? **COUCHMAN** To make 40. Code A To make 40? **COUCHMAN** Rather than use 10., four 10s. Code A Yeah, okay. **COUCHMAN** Yeah. Code A Right, um and then obviously this form says it's countersigned because it's a controlled drug.

Signature(s): ◆ Not relevant for contemporaneous notes



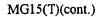


Continuation Sheet No: 24

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times • COUCHMAN Quite. Um and that's your sort of running total down . . . Code A That's our total which we keep in a locked cupboard in a locked **COUCHMAN** cupboard. Code A Oh right. Now I don't understand it. Can you remember when she was put on the syringe driver? **COUCHMAN** Um, I honestly didn't remember that day, but but, Philip the Manager said yes it was me and him that did it. Code A That actually . . . **COUCHMAN** That actually . . . Code A . . started the . . **COUCHMAN** initiated it . . initiated it. Code A **COUCHMAN** However Philip had already spoke to the relatives and the Doctor. Code A Right. Which is standard procedure. **COUCHMAN** Code A Okay. There's just. . if we can go over that and just cover the procedure with that then, so who's decision would it be in order to. . .

Signature(s):

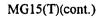
Not relevant for contemporaneous notes





Continuation Sheet No: 25

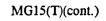
Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times ◆ **COUCHMAN** It would be everybody's decision. Code A Right. **COUCHMAN** the whole team. Code A The whole team would . . . Right, plus the relatives. COUCHMAN Right, so there'd be a consultation about it? Code A **COUCHMAN** Yeah, yeah. Code A Were you present during that consultation or any discussions? Not on the initial, the initial would be between . . formal one **COUCHMAN** would be between Doctor BARTON and the relatives. Code A Right okay. Yeah, but however Philip would have said to me what he was **COUCHMAN** going to do. . . Code A Yeah. **COUCHMAN** .. do you agree. Okay and obviously, I take it nursing staff would have to because Code A obviously they are going to do it. We would agree if the patient was in distress and pain. **COUCHMAN** Code A Okay, so ultimately then who . . . Signature(s):





Continuation Sheet No: 26

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times 4 Nobody is left in that condition. COUCHMAN Code A ... whose decision is it to do it, I mean if. It would be mine if it were me there . . . **COUCHMAN** Yeah, yeah. Code A Okay? If I was there with Philip, he's the Manager, so it's the . . . COUCHMAN Yeah. Code A . . it would be his, but I would make that decision if he weren't **COUCHMAN** there. Code A What to actually put her on a syringe? **COUCHMAN** Yeah, to operate it, yeah. Code A Oh right, okay, so . . . I'm . . . COUCHMAN Code A No, no, I think you might be confusing, I think this needs clarification . . Code A Let me, let me get this, let me get this right. 'Cos you can't, you can't authorise controlled drugs, can you? Code A **COUCHMAN** Cause I can. What the administration of them? Code A **COUCHMAN** Yeah. Signature(s):

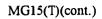




RECORD OF INTERVIEW

Continuation Sheet No: 27

Tape Counter Times ◆	Person Speaking	Text
	Code A	I'm sorry, we didn't appreciate that, I didn't.
	Code A	Right, if I tell you what I understand previously.
	COUCHMAN	Yeah.
	Code A	because it's different to um what, what Basically as I
		understand it, Dr BARTON is a
	COUCHMAN	Dr BAR sorry, Dr BARTON would have to write the actual
	Code A	Prescription?
	COUCHMAN	The actual amount and the actual prescription, sorry yeah.
	Code A	Right
	COUCHMAN	This is what you mean, isn't it, sorry.
	Code A	Yeah. So ultimately
	COUCHMAN	I can't write it, no.
	Code A	I mean I know you have to agree with it cos obviously
	COUCHMAN	Yeah I don't have to agree with it
	Code A	No. right. we'll cover that point
	COUCHMAN	Yeah.
	Code A	Let's just take one at a time. So Dr BARTON is the one who
	·	says well I'm going to prescribe this particular drug?
	COUCHMAN	Yes.

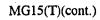




RECORD OF INTERVIEW

Continuation Sheet No: 28

Tape Counter Times ◆	Person Speaking	Text
	Code A	er and this amount
	COUCHMAN	Yes
	Code A	And then there is a consultation
	COUCHMAN	Yes
	Code A	and basically I take it she'll listen to every .
	COUCHMAN	Quite, yes.
	Code A	Other peoples' views
	COUCHMAN	Yes.
	Code A	'Cos as I understand it, she comes in on a daily basis
	COUCHMAN	She does.
	Code A	Um and obviously she's going to listen to members of staff who
•		are there permanently
	COUCHMAN	Quite, yes.
	Code A	who can see what is happening.
	COUCHMAN	Yes, 24 hours.
	Code A	Am I right in saying ultimately, the decision to prescribe
		controlled drugs falls on Dr BARTON as the GP?
	COUCHMAN	She prescribes it, yes.
	Code A	Yeah, okay.

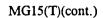




RECORD OF INTERVIEW

Continuation Sheet No: 29

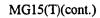
e inter ies •	Person Speaking	Text
	COUCHMAN	She does she writes it.
	Code A	And to clarify that, you're not in a position to say that lady's in
		pain
	COUCHMAN	To clarify it
	Code A	I'm going to give her 40 milligrams of Diamorphine off your
		own back.
	COUCHMAN	Oh off my own back nono.
	Code A	Right, okay.
	COUCHMAN	I do beg your pardon.
	MR Code A	Just something else I want to clear up. Who's ultimate decision is
•		it to put somebody on the syringe driver?
	COUCHMAN	The team.
	MR Code A	You can't make it on your own?
	COUCHMAN	The team. Everybody.
	Code A	I know, but do you need a who's
	COUCHMAN	I have said that though, didn't I? I said that.
	MR Code A	Yeah, but it was slightly confusing.
	Code A	Can you, if you say Dr BARTON and Mr BEAD, your first line
	ti	manager, weren't there, would you be able





Continuation Sheet No: 30

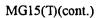
Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times ◆ If I were there on duty . . . **COUCHMAN** Code A .. Can I, oh can I just finish. . . **COUCHMAN** Yeah Code A If Dr BARTON and Philp BEAD weren't there . . . COUCHMAN Yeah. Code A are you qualified and authorised to make a decision on the ward to say I want that lady on a syringe driver? Do you mean if Dr BARTON had already written the . . . **COUCHMAN** No. No if that wasn't the . . . Code A **COUCHMAN** No, I would have to contact Dr BARTON, wouldn't I and say . . Saying this lady I believe she's in pain when you give an injection, Code A can I suggest that we put in a syringe driver and then it would be under her authority . . . **COUCHMAN** That's it. Code A .. that the syringe driver ... **COUCHMAN** I couldn't do it on the telephone conversation authority, I couldn't take a telephone . . . Code A Oh right. **COUCHMAN** .. um I couldn't take it over the telephone.. Signature(s):





Continuation Sheet No: 31

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking **Text** Times ◆ Code A No. **COUCHMAN** She would have to come and write it. Yeah. Right. Code A Code A Then obviously from there then Dr BARTON has said prescribes this course of treatment, syringe driver and these drugs . . . **COUCHMAN** Yeah. In your role you are obviously authorised then to administer that. Code A COUCHMAN Yeah. Code A But in terms of actually prescribing it, making the ultimate decision to follow that course of treatment and to prescribe those drugs, that is down to Dr BARTON? **COUCHMAN** Yes. 31.03 Okay. Code A Yes, I'm not allowed to prescribe controlled drugs. COUCHMAN Yeah, but you are allowed to administer? Code A COUCHMAN Yes. Code A Right, okay. Code A Got there. With another qualified member of staff. **COUCHMAN** Signature(s):



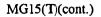


Continuation Sheet No: 32

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times • Code A Yeah, there's two of you there all the time. Code A Two of you there. Yeah, I probably didn't phrase the question quite well . . . **COUCHMAN** Sorry, no, no, it's probably me sir. Code A Now this is,, obvioulsy that's why we need to get these things sorted out, so. . COUCHMAN Yeah, yeah. Okay. If we just go over that then, so let's start again. So we've Code A got this sort of consultatin process erm and I think we were talking about whether you remembered being involved in that. Whether you recall any any conversations with Philip BEAD or Dr BARTON, or the family, the two sisters, in relation to the syringe driver and what drugs were being proposed. COUCHMAN I can't actually recall their conversation, but I do know our procedure which we follow regularly. Code A Right, okay. COUCHMAN We always adhere to the same procedure. Are you aware of any concerns that the sisters had about this Code A treatment as being . . .

Signature(s):

[◆] Not relevant for contemporaneous notes





Signature(s):

HAMPSHIRE CONSTABULARY RECORD OF INTERVIEW

Continuation Sheet No: 33

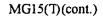
Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times • **COUCHMAN** No. Code A Okay, did they make any representations to you. . . . **COUCHMAN** No. Code A personally? They didn't, okay. Did you become or are you aware of any representations they made to any other member of staff? **COUCHMAN** No. Code A Right, okay. **COUCHMAN** As far as I was concerned they agreed . . . Code A Right thankyou. ... that their Mother would not suffer. COUCHMAN Code A All right. Let's just clear up Dr BARTON's role, um which maybe I should have done at the beginning to make this a bit clearer. What is her sort of responsibilities with the ward? **COUCHMAN** Her responsibility is to the ward and to the Consultant. She visits. she is the clinical assistant. The Consultant does her rounds regularly and she will give her views on the treatment of the patient and on a day to day basis Dr LORD will carry out that treatment.





Continuation Sheet No: 34

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times 4 Code A Okay, now Dr LORD is the Consultant for the . . . **COUCHMAN** She is the Consultant Geriatrician for our ward. Code A Okay and Dr BARTON, who's a GP will come in on a . . . **COUCHMAN** She was the Clinical Assistant. Code A And will talk with staff on a daily basis . . Yeah, yeah. COUCHMAN Code A . . about the patients. **COUCHMAN** Yes. Code A Now I understand she wouldn't necessarily deal with every patient on the ward? **COUCHMAN** She will do all the patients that require her. Code A That would be sort of brought to her attention or . . **COUCHMAN** That would be brought to her attention, yes. Code A Right, okay. What would . . . **COUCHMAN** We can also ring her or bleep her if we have an emergency. Code A Right. Okay and if she's not available, if it's out of hours, is there any other doctors. . Then her partners deputise for her. . . **COUCHMAN** Code A Right, so . . . Signature(s):





Continuation Sheet No: 35

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times 4 **COUCHMAN** ... in the, in the Practice. Code A Okay, is there always a sort of a Doctor available? **COUCHMAN** There's always a Doctor available. Code A In one form or another? **COUCHMAN** In one form or another. Okay and what's Mr BEAD's role, Clinical Manager, something? Code A He's in charge of the ward. He would have been the old sister or **COUCHMAN** a charge nurse, but now you are called a Clinical Manager. Code A Right, so he's a registered . . . You actually have more responsibilities. **COUCHMAN** Right, so he's a registered nurse? Code A **COUCHMAN** Yes Code A Does he have more qualifications than you . . Yes. **COUCHMAN** Code A .. or is he just more experienced? He's got more qualifications? **COUCHMAN** Yeah. Code A Okay. So, um, do you know what his sort of role is or . . . **COUCHMAN** I know what his role is. Code A Okay, can you just go over that for us?

Signature(s): ◆ Not relevant for contemporaneous notes





Continuation Sheet No: 36

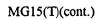
Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking **Text** Times • Um, he's in charge of the ward, he's in charge of all the staff and **COUCHMAN** um his role is to um monitor that the ward is run correctly and that the staff are all motivated and um etc. and now he has a budget as well.. Code A Yeah . . **COUCHMAN** which he has to adhere to. Therefore his responsibilties probably greater than they used to be as a sister. Code A 34.59 Right, okay. All right, so we've covered the consultation process with . . and that's a general one as well, that applies to any patient . .in relation to Yeah **COUCHMAN** Code A this sort of treatment that we're talking about with the syringe There would be consultations with the family, with driver. members of staff who had an interest. . . **COUCHMAN** Yes. Code A .. and people could offer their opinions, basically... **COUCHMAN** Right. Code A ... but ultimately Dr BARTON is the one who says yes or no.

Signature(s):

Yes.

COUCHMAN

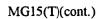
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Continuation Sheet No: 37

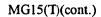
Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter **Person Speaking Text** Times • Code A . . we're going to do this or not? COUCHMAN Yeah. Code A Okay. This is another general question. If a decision was made by any Doctor about a type of treatment they were proposing to prescribe and you . . you had strong reservations about it . . . **COUCHMAN** Then we don't do it, basically. Code A You don't do it? **COUCHMAN** No. Code A Okay. If there came a scenario where the Doctor insisted it was done, and I'm not for one minute saying this was the case in this case, but this is just a . . . what I'm trying to get at is the procedures in place if there are procedures in place. **COUCHMAN** The procedures in place would be . . yes, that we have another manager above Philip . . Code A Right. First of all we go to Philip then we would go to the other **COUCHMAN** manager. We also have our ICN representative, our Union body who would instigate an investigation. Code A So its, basically, it's fair to say that you'd be aware of . people Signature(s):





Continuation Sheet No: 38

Tape Counter Times *	Person Speaking	Text
		with
	COUCHMAN	Basically we wouldn't give a drug if we didn't feel it necessary.
	Code A	And you certainly wouldn't feel on your own or isolated because
		- you know -
	COUCHMAN	No. Not at all.
	Code A	You know of people you could go to if there was a problem.
	COUCHMAN	You know you have a very good support system, yeah.
	Code A	Yeah. During your time at the hospital, have you ever had sort of
		situations
	COUCHMAN	This has never happened no
	Code A	Situations where you've had a disagreement with a Doctor over a
		level of treatment or
	COUCHMAN	No, no.
	Code A	you've never had a problem?
	COUCHMAN	No we'd always talk if we felt actually I've never had to, but I
		would.
	Code A	No, okay. But you're aware of what you would do
	COUCHMAN	And I wouldn't give a drug if I didn't feel it necessary.
	Code A	Yeah. Okay. All right. Has there ever been anything in the ward





Continuation Sheet No: 39

Record of interview of: Margaret COUCHMAN

DOB	Code	A

Tape Counter

Person Speaking

Text

Times •

where someone's had a particular er problem with what's been prescribed to a patient, that you're aware of?

COUCHMAN

No. no.

Code A

No? Okay. All right. If we go over to the syringe driver now. .

COUCHMAN

Yeah.

Code A

What I would like to do is talk about the syringe driver and the drugs and what they do. If you could just explain to me what the syringe driver is and what it's there for. What it's job is.

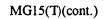
COUCHMAN

Yeah. The syringe driver is just a means of administering the drug over a 24 hour period. Prev. well before we had syringe drivers we would give injections every four hours, of morphine or strong drugs for pain. Quite often it didn't last four hours we'd have to go back to the Doctor and say that patient's writhing in pain, falling out of bed, it's three hours, can we give another one and quite often they would say no. Now we can give the drug over 24 hours and it delivers a regular dose. This doesn't happen these troughs and lows, they don't happen any more. People walk around with drivers, it's just. . it's any drug.

Code A

Yeah.

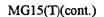
Signature(s):





Continuation Sheet No: 40

Tape Counter Times •	Person Speaking	Text
	COUCHMAN	It's a means of delivering it.
	Code A	Okay. So it's not just something that's set up for palliative care?
	COUCHMAN	No.
	Code A	Okay. Now the next question would be can you just, if you can
		sum up what palliative care is in a?
	COUCHMAN	Palliative care is a means of easing a patient who perhaps is a
		terminal patient and needs difficult to explain I would say it
		eased the last few months or whatever of their life so that i
		improved their enhanced their standards of care.
	Code A	Right, okay. In relation to Mrs RICHARDS, when she was
		obviously put on the driver, what impression did you have of he
		health and what was going to happen to her.
	COUCHMAN	She was very distressed and in a great deal of pain.
	Code A	Did you feel that she was dying?
	COUCHMAN	Not at that time, no.
	Code A	When did you or did you ever come to a conclusion that she wa
	ii	dying?
	COUCHMAN	Probably a couple of days before she died um we realised that i
		was probably imminent, as nursing staff.





Continuation Sheet No: 41

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking **Text** Times 4 Code A Yeah, okay, but are you aware of what she was dying of? **COUCHMAN** We knew she had multiple problems. We knew at that time she had a haematoma which is a blister on her affected hip, the hip that she'd broken. Code A Right, a haematoma's like a bruise isn't it? COUCHMAN It's a blister, it's blood, it's a collection . . haema's blood and it's a collection of blood. Code A Oh, I see, okay, yeah. **COUCHMAN** So we knew that caused a lot of pain. . . Right. Code A COUCHMAN .. and with all her other medical problems. . Code A So it was in. . . **COUCHMAN** And we also thought she probably had a chest infection. Code A Okay, what made you think that? **COUCHMAN** Because her chest was rattling. Right. Okay. Now in relation to the haematoma, when did, can Code A you remember when that came about, I'll put the notes there if you want to look at them. **COUCHMAN** Well on this particular day, on this particular day when she arrived

Signature(s):

[◆] Not relevant for contemporaneous notes



HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No: 42 Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times ◆ back from Haslar on the 17th, one of the daughter's mentioned that a Doctor at Haslar said that her Mum should go back if this hip came out again, her Mum, rather than if she was in pain she should go back to Haslar. Code A Mmm. **COUCHMAN** And um I rang Dr BARTON and said . . mentioned the way the lady was transferred, I mean it was possible that that hip could have slipped out again and she arranged for an x-ray at our hospital, we have an x-ray department and Mrs RICHARDS was x-rayed and it wasn't out, so she didn't return to Haslar. Code A Right, okay. However, it was discovered later I believe that she had a COUCHMAN haematoma. Code A Right, what would cause that then? I know it's . . . Well it's possible I feel the ambulance crew said she was in pain COUCHMAN and distress as soon as she got in the ambulance and it's possible that the way she was transferred, both in Haslar and in our hospital. Code A Sort of could cause. Signature(s):



HAMPSHIRE CONSTABULARY

RECORD OF INTERVIEW

Continuation Sheet No: 43

Record of interview of: Margaret COUCHMAN DOB Code A Tape Counter Person Speaking Text Times * Code A What would cause a collection . . . does that mean that she'd ruptured some blood vessles or something that had collected there or. . .? **COUCHMAN** Or two pieces rubbing together could cause a collection of blood or maybe from the operation. Code A Right so yeah, I mean obviously you're not in a position to say exactly, but those are some of the examples it could be. Yeah. COUCHMAN Code A Okay. And so I've got the contact notes here and there's a few relevant to you, you may have already seen them and we've. . a lot of them you've covered anyway, to be honest. Um, but I think what we'll do actually saying that we'll take a short break 'cos the tapes are running out. Code A Tapes run out after 45 minutes and we're on 43.. so.. (inaudible) COUCHMAN Code A Time by my watch is 1104. Turning the recorder off.

Signature(s):	
.,	◆ Not relevant for contemporaneous notes