

**Williams Elaine - Complaints and Litigation Manager**

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**From:** Williams Elaine - Complaints and Litigation Manager  
**Sent:** 18 September 2006 14:54  
**To:** Scammell Toni - Modern Matron  
**Cc:** Lawes Susan - Risk & Governance Manager  
**Subject:** Re:

**Importance:** High

Hello Toni

Have received the correspondence about the above. It looks more likely it will be a claim than a complaint. I have shared it with Susan Lawes, and wonder if, in light of the comment about withdrawing the seat and ordering a safer model, and that they are likely to sue, that an SUI report should be undertaken, if not done already.

Have asked for Susan's comments. And in the meantime have held it as potential litigation.

Regards

Elaine

Susan, see papers forwarded to you today. Elaine

Community Health Services  
Gosport War Memorial Hospital  
Bury Road  
Gosport  
Hants  
PO12 3PW

GOSPORT WAR  
MEMORIAL HOSPITAL  
14 SEP 2006

EAST HANTS  
PRIMARY CARE TRUST  
18 SEP 2006  
VED

**Code A**

12<sup>th</sup> September 2006

Ref: **Code A**

Dear Helen Russell

On reading your letter dated the 6<sup>th</sup> September both my brother **Code A** and I do not feel it correctly sets out the events we discussed at the meeting held on the 17<sup>th</sup> August 2006.

You informed us that the main contributory factor for my **Code A** **Code A** which had become loose and that you were withdrawing from use this particular seat and replacing it with a safer model, and not as suggested in your letter because she was 'unsteady' and had dislodged it.

We are now advising you that because of the result of the accident in Sultan ward our **Code A** will probably not walk again and therefore we will be seeking legal advice.

Yours Sincerely

**Code A**

Wednesday 6<sup>th</sup> September 2006

**Code A**

**RE: Code A**

Dear **Code A**

Please accept my apologies for the delay in sending you the attached information.

I enclose a copy of the notes from our meeting on 17<sup>th</sup> August 2006, a copy of the Adverse Event Form and also the report of an injury or dangerous occurrence, which goes to the Department of Health and Safety.

As discussed in our meeting, I can confirm that **Code A** withdrawn, and new more appropriate **Code A** is on order.

I can only apologise for this unfortunate occurrence and ask you send our best wishes to **Code A**

Many thanks

Yours sincerely

Helen Russell  
Ward Sister  
Sultan Ward

**MEETING WITH** **Code A** **THURSDAY**  
**17<sup>TH</sup> AUGUST 2006** **Code A**

I met with **Code A** in Sultan Day Room at 1400hours. They informed me that since the accident **Code A** has not been out of bed and was not co-operating. I conveyed my apologies.

We discussed the moments preceding the incident, what actually happened and the procedures that were followed directly after the incident. I informed them that **Code A** had fallen from **Code A** at a range of around 0.50 metres and that contributory factors were that **Code A** was unsteady and may have dislodged the raised **Code A**

I then discussed the adverse incident Form with them and advised them that I was withdrawing **Code A** that I was awaiting delivery of more appropriate **Code A** **Code A** They appeared happy with this.

I discussed the RIDDOR form that had been completed, and again advised them that this would be sent to an outside authority.

**Code A** asked how they could make a complaint; I gave them a P.A.L.S leaflet and also a 'Can we do better' leaflet. **Code A** added that they probably would not make a complaint, but wanted to discuss this as a family.

**Code A** informed me that QA were now looking at discharge as they felt that she was not making any progress, I added that if they wanted to discuss with the family, about a return to Sultan, then we would be happy to take her back.

**Code A** asked if I could write a letter to her explaining what happened

**Code A**



# Report of an injury or dangerous occurrence

## Filling in this form

This form must be filled in by an employer or other responsible person.

### Part A

#### About you

1 What is your full name?

HELEN RUSSELL

2 What is your job title?

WARD SISTER

3 What is your telephone number?

Code A

#### About your organisation

4 What is the name of your organisation?

FAC PCT.

5 What is its address and postcode?

GOSPORT WAR MEMORIAL  
BURY ROAD  
GOSPORT PO12 3PW

6 What type of work does the organisation do?

HEALTHCARE

### Part B

#### About the incident

1 On what date did the incident happen?

04/08/06

2 At what time did the incident happen?

(Please use the 24-hour clock eg 0600)

0450

3 Did the incident happen at the above address?

Yes  Go to question 4

No  Where did the incident happen?

- elsewhere in your organisation – give the name, address and postcode
- at someone else's premises – give the name, address and postcode
- in a public place – give details of where it happened

[Empty box for details]

If you do not know the postcode, what is the name of the local authority?

[Empty box for local authority name]

4 In which department, or where on the premises, did the incident happen?

SULTAN WARD.

### Part C

#### About the injured person

If you are reporting a dangerous occurrence, go to Part F.

If more than one person was injured in the same incident, please attach the details asked for in Part C and Part D for each injured person.

1 What is their full name?

Code A

2 What is their home address and postcode?

Code A

3 What is their home phone number?

[Empty box for phone number]

4 How old are they?

Code A

Code A

6 What is their job title?

NIA [ ] [ ] [ ]

7 Was the injured person (tick only one box)

- one of your employees?
- on a training scheme? Give details:  
[Empty box]
- on work experience?
- employed by someone else? Give details of the employer:  
[Empty box]
- self-employed and at work?
- a member of the public?

### Part D

#### About the injury

Code A

# Code A