

# Ward manager defends care of pensioner

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THE hospital ward manager where Gladys Richards went in for rehabilitation said a decision to try to lessen her pain rather than help her recover was the right one.

Philip Beed was a clinical manager in the Daedalus ward of Gosport War Memorial Hospital (GWMH) in August 1998.

He oversaw patient care and supporting and supervising staff.

As reported, Mrs Richards, of Lee-on-the-Solent, had a hip operation at the Royal Haslar Hospital, in Gosport, and was transferred to GWMH for rehabilitative care.

But after she suffered a haematoma - bruised blood - Mrs Richards, was given diamorphine through a syringe driver and died four days later.

Yesterday the inquest heard

## Inquest hears focus of OAP's treatment switched from rehab to pain relief

staff would complete their own assessment of a patient.

When Mrs Richards arrived on August 11, she was said to be in pain.

Dr Jane Barton prescribed the use of diamorphine through a syringe driver and oramorph, and gave maximum and minimum dosage amounts.

Nurses gave oramorph to Mrs Richards, in order to make her more comfortable. But she suffered a second fall, and was taken back to Haslar.

When she returned to GWMH a second time, Mr Beed said she was in considerably more pain.

On August 18, Mrs Richards was placed on to palliative care.

Mr Beed said: 'She was assessed by Dr Barton and she was continuing to deteriorate.

'It was her decision to put the driver in. Having looked at the patient, I don't feel it was an inappropriate decision.

'I didn't think she was likely to survive. It was terminal care rather than rehabilitation.'

Mrs Richards' daughters Gillian Mackenzie and Lesley O'Brien said they saw Mr Beed inject their mother twice with painkillers on August 17.

However Mr Beed has no recollection of this, and there are no drug records to support this.

He said: 'We did have difficulty keeping records at that time because of the level of patients, and it had been taken up with the manager. There were shortcomings in the quality and quantity of records kept, but not with the drug records.' (Proceeding)