

MEDICAL CERTIFICATE OF CAUSE OF DEATH

NOTICE TO INFORMANT

The medical practitioner will also have given you a separate notice, which must be handed to the registrar. The death should be registered within five days of its occurrence; however it may be necessary for the registrar to wait for written clearance from the coroner before proceeding with the registration of the death. In such cases the issue of a certificate for burial or cremation may be delayed.

You must be prepared to state accurately to the registrar the following particulars:-

(1) The date and place of death, and the deceased's usual address. (2) the full names and surname, (and the maiden surname if the deceased was a woman who had married). (3) the date and place of birth (town and county; or country if born abroad). (4) the occupation (and the name and occupation of her husband if the deceased was a married woman or a widow). (5) whether the deceased was in receipt of a pension or allowance from public funds and (6) if deceased was married, the date of birth of the surviving widow or widower

**DECEASED'S MEDICAL CARD
SHOULD BE DELIVERED TO
THE REGISTRAR**

**CONFIDENTIAL
BY HAND TO**

Helen Passmore

FOR AN APPOINTMENT

PLEASE PHONE Code A

Registrar of Births & Deaths for Sub-district of

Gosport

at Town Hall, Gosport

Hours

Monday to Friday 9.30am to 12.30pm

Wednesday and Friday 2 to 4pm

General Register Office,
Office for National Statistics,
Smedley Hydro, Birkdale,
Southport, PR8 2HH

Form 109A

Farthing

0151 4714805

Dr. Brooke.

148 Fort Rd.

Code A



CONFIDENTIAL

IRYAD WARD GOSPORT WAR MEMORIAL.

Code A

GILL HAMBLEN.

DR. LORD CONSULTANT.

Mon. 28/9/98 5 Pm.

COMMUNITY HEALTH SERVICES

Gosport War Memorial Hospital

Bury Road, Gosport, Hampshire PO12 3PW
Tel: 01705 524611 Fax: 01705 580360

Code A

2 Oct 98

Chief Executive
 Portsmouth Health Care Trust
 St James" Hospital
 Locksway Road
 Portsmouth
 PO4 8LD

Dear Sir/Madam,

Re. CUNNINGHAM, Arthur Denis Brian

I am writing in connection with the death of my step-father, Brian Cunningham, at the War Memorial Hospital, Gosport, on Saturday, 26 Sep 98.

The events leading up to his admission into hospital 5 days before, his ~~subsequent~~ subsequent treatment and the content of the Medical Certificate of Cause of Death leave a lot to be desired, and resulted in my requesting a post-mortum examination.

As will be seen from the attached sequence of events, there appears to have been serious negligence on the part of the nursing home, although they have said the responsibility lies with the Day-Care Centre at the hospital into which he was admitted on 21 Sep. This matter is currently under investigation by the Nursing/Residential Care Inspectorate.

Mr Cunningham's treatment in hospital prevented him from communicating with his relatives after the first day, and the Medical Certificate, when issued, did not seem to accurately reflect his medical condition.

My subsequent attempts to discuss the certificate with the doctors who signed it, before the expiry of the 5-day registration time limit, have been thwarted at every turn. Also, it should be noted that the primary signatory on the certificate was Dr Brook, who was unknown to my step-father and that it was Dr Barton who attended him in hospital. Consequently, this has resulted in non-registration of the death to date and the involvement of the Coroner's office.

I am forwarding this letter at this early stage to acquaint you with the facts while they are still fresh, and to hopefully initiate an investigation while notes, etc might still be available.

Yours faithfully,

Code A

C R S Farthing
 Lieutenant Commander
 Royal Navy

Copy to: Health Service Commissioner

Encl. Medical Certificate of Cause of Death

SEQUENCE OF EVENTS RELATING TO Mr CUNNINGHAM (Arthur Denis Brian)

21 Sep: Mr Cunningham was admitted to the War Memorial Hospital, Gosport suffering from chronic pressure sores, and I visited him an hour or so later and found him in reasonably good spirits and able to communicate normally. I told him I had an appointment in London the following day and would visit on Wednesday, 23 Sep, on my return.

Before I left the hospital, I was taken aside by the Staff Nurse on duty and told that his condition was extremely serious and something, from her experience, he could not survive. She remarked also that if she had allowed a condition half as serious as this to develop before admission to hospital, she would expect to be dismissed. I then asked for an appointment with the doctor who admitted him, and I was told arrangements would be made as soon as practicable as, in fact, she made only occasional visits to the hospital. Later, I spoke to the Nursing Home Inspectorate and, on their advice, forwarded a letter to them requesting an investigation. This is ongoing at present.

23 Sep: Whilst still in London, I received a telephone call from the hospital in the morning to inform me Mr Cunningham had been very difficult with the staff after I had left, and that his condition had deteriorated very significantly. I returned to Gosport without delay, and visited Mr Cunningham at around lunch-time. To my astonishment he was now in a semi-vegetative state and incapable of communication, eating or drinking which I associated with a shringe-driver which was applying serial morphine. I asked why this was necessary and was told he was in acute pain and that the alternatives would induce discomfort. Realising the seriousness of the situation from past experience, I asked that it be switched off for a brief period to enable me to enquire if he had any last wishes. This was refused on the basis that it needed the authority of a doctor and it would be some time during the next day when one visited. At that time, I was informed that the doctor who admitted Mr Cunningham into hospital had been Dr Lord, and I was given an appointment for Monday, 28 Sep.

24 Sep: My wife and I spent most of the following day at the hospital, and it was not until late in the afternoon that Dr Barton visited the hospital and interviewed me to explain the situation as she saw it. I was told again about the acute pain from the pressure sores and that it was the toxins generated by them that would bring about his death. By now it was also apparent that a bronchial condition had developed. At that point I abandoned any hope of speaking to him again.

25-26 Sep: My wife and I spent most of both days at the hospital but, unfortunately, had returned home a couple of hours before his condition became fatal in the late evening of 26 Sep (outside the time limit for registration of the death).

28 Sep: I received a telephone call informing me that Dr Lord could not keep my appointment with her, and advising me to contact her Secretary if I wished to arrange for another. This I did, and was given a time on Friday, 2 Oct as the soonest available.

30 Sep: I collected the (sealed) Certificate of Cause of Death from the hospital and proceeded to register the death at Gosport Town Hall. During my interview with the Registrar it became apparent that the cause of

death was given as Bronchopneumonia, with the primary reason for his demise given as a secondary cause. It was agreed that I should contact the certificate signatories before proceeding, especially as the main signature (deciphered by the Registrar as Dr Brook) was completely new to me and certainly not his GP (also, it was not Dr Barton who tended him in hospital).

My attempts to seek an appointment or even speak with Dr Brook on the telephone were deliberately thwarted even though she was prepared to speak to the Undertaker (as she did) on the same day. I was told to ring back on Friday, 2 Oct which, of course, was outside the 5-day limit for registration.

1 Oct: The circumstances were explained to the Coroner's Office and arrangements made for a post-mortum examination.

2 Oct: Coroner's Office informed me that the cause of death was as stated on the Medical Certificate, and said they had not tested for toxins or anything else and had no intention of proceeding further.