

INTERROGATION (Beverley TURNBULL)

1998, D grade Staff Nurse (Para 1)

On duty (**nights 2015-0745**) at the time ADBC expired (2315), but not involved with his medication

Para 1: Suggests that patients of the type were there

- Not to recuperate
- Palliative care until died (up to 10 years)

Para 2/3: **NOT given opiates before BARTON arrived**

Para 4/5: Then syringe-driver introduced = **sedation and early DEATH**

Para 6: ALL patients under BARTON so prescribed, and staff licensed to administer as they chose (live ammunition in a Kindergarden strategy)

Para 7/8: TURNBULL, GIFFIN and **TUBRITT** **voiced concerns** 23 Sep.

Para 9: **Where are the retained correspondence and minutes???????**

Para 10: What was the outcome of GIFFIN'S representations to the RCN??

Para 11: Was Dr Logan from RCN?

Para 12: Having been labelled a trouble-maker, how did your relationships develop from there?

Were you on night duty during the week 21-26 Sep when ADBC was a patient in Dryad Ward???

(If yes):

- Who set up the syringe-driver at 2300 on 21 Sep??
- Why? (10mgs of Oramorph administered at 2015)
- Who authorised its use??

Para 13/14: (If no) You stated "you had no concerns in respect of ADBC". What other contact did you have with ADBC other than **to confirm death??????**

Para 15: You say you **were** aware of the Wessex Protocol/analgesic ladder. Have you any idea why this information seemed to bypass Hamblin, Shaw and possibly Ring??????

How is a patient hydrated when he becomes incapable of swallowing?

Can you suggest why ADBC was not given a saline drip at any stage?

Have you ever heard of Dryad Ward ever being called THE DEATH WARD??

How many patients who went into this ward ever CAME OUT???