

• Notebook

Faint ruled

• Cahier

Rigide

• Kollegblock

Unruled

• Cuaderno

Rayado

• Blok

Licht

• Blo

Rijg

FAW notebook re:

investigation?

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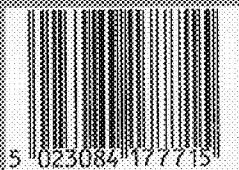
Guilbert 

- Notebook
Feint ruit
- Cahier
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- Kollegblock
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- Guaderno
Rayado
- Blok
Lichtgeland
- Blocco notes
Reghe

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Made in EU



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Guilbert 

Peter King
Personnel Director
Portsmouth Healthcare Trust
St James Hospital
Portsmouth
PO4 & LD

"In other words in their
view there was no
case to answer"

"As I do not consider that I have
done anything wrong, I view
support by the GMC"

Code A

→ author of report
- multi-disciplinary
learn

Everything appended: discoverable ...

fact = 3 sources of info ...
↳ witnesses
↳ documents

What did RT have
a) historically
b) presently.

↑
↑ week file: notes of staff
a) interview notes
b) searching on info (using tagging)
↓ spoke to 60 stakeholders

No signed statement (non verbatim notes)
Confidential discussion ...

* Only there to answer terms of reference

11/4/01/03

FILE: Interviews - Monday and Tuesday
07/10/02

① Max Millett
Chief Executive

- uncovering uncomfortable things by
Nurse Director

(identifies 'paper thin' quality management,
lack of nurse director time)

W/ likely to be a witness for defence?

Was he in place at the time?

Could say useful things about 'uncomfort-
able things)

② Code A

⇒ Nothing of relevance
 No need to interview
 (unlikely to assist defence)

③ Jan Keid Medical Director

GP appraisals - not addressed
 (Clinical assistants have 6/7 sessions)
 have annual appraisal → stated 'about
 a year ago' (interview = 01/07/02)

Model of management with clinical
 assistant ~~at~~ ^{over} was ~~not~~ no longer
 viable (Recognised before Dr Barton's
 letter of Jan 2000)

"The service would have collapsed without Jane Barton"

Aware of stress - not sure what could have been done

Jane Barton - keen to continue

Purchased \rightarrow 80 syringe drivers
so as consistency

2 available previously

- Ⓐ vol per unit time
- Ⓑ weight per unit time

'I don't think she cut corners'

\uparrow level of commitment from Jane Barton

Use of morphine: a concern

Developed pain management policy
+ prescription charts

Cannot remember anytime when
opiates prescribed inappropriately.

No feeling of being 'written off' helped
on their way.

If medically unwell after transfer -
refer back to referring dr/hospital

J 'was very caring' (+ dedicated)

'Not acceptable' → prescribing to avoid
with benefit of hindsight/nursing staff

WJ complimentary about Dr JB
WJ identified resources issues.
WJ stated prescribing was not
acceptable with benefit of
hindsight

Will have to see; mixed statement?

④ Andy Wood
Finance Director

General financial information

→ nothing of relevance
(unlikely to assist defence)

⑤ Peter King
Personnel Director

interview??

98 - very good manager in
elderly medicine (Barbara Robinson)

Info regarding contracts with GPs

→ nothing of specific relevance
(unlikely to assist defence)

⑥ Eileen Thomas
Nursing Director

Identified: severe staff shortages } in 1998
low morale }
& nurses (qual) per shift }

States new practises

In post at time?

NY can identifying resourcing difficulties regarding nurses

NY nothing specific unless was in post at the time (otherwise (if so shd intervene).

① Jeff Walling
Chief Pharmacist

Chryone can prescribe diamorphine,
haloperidol, ~~midazolam~~ midazolam,
✓ challenge large doses by Junot Dr.

In general dose of diamorphine has
narrowed.

x input into training GP clinical
assistant

MS Unable to comment on culture
of care 98 vs NOW

"not outrageous quantities being
used"

At time the doses were not considered
excessive but not in a position to
comment on appropriateness of use

is nothing of particular relevance

is in good condition when released

Comments upon good communication
with feedback.

⑧ Penny Wells
Student Nurse

is nothing to report procedure
I potential to avoid defence?

in individual cases.

③ Alk Althea Ward
Consultant

No formal appraisal process for GPs/
clinical assistants

Documentation of required dose ranges
'wasn't particularly good'

Have learned from complaints to be more
frank about drugs.

Agreed procedure for certifying death:
delegate to nurse's authority to confirm
death; Dr Carter confirm [was this
the position 1998?]

Heavy work load

↓
Dr 6: unsustainable - appraised
in 99 by GMC.

Delay : Dr b getting stressed out and
help coming

98 - minimal cover

Very little information regarding
prescribing
--- difficult to ascertain ^{of} assistance
or not ~ likely to benefit deferrie

⑩ Julie Jones
Corporate Risk Manager

→ nothing of relevance
— not necessary to interview

⑪ Jan Pappert
Operational Director

→ nothing of relevance

⑫

Code A

In place for one year ⇒ OI ⇒ not around at relevant time.

Fedo: culture of over-reporting and

no indication that D/H/M infusion problems ~~appeared~~ featured particularly.

∴ nothing of relevance
- not required for interview

⑬ Lesley Humphrey
Quality Manager

Nothing of relevance

⑭ **Code A**

⑮ **Code A**
RGN

(Been at GWMK - one year
⇒ not at relevant time)
- no interview required

08/01/02

(6)

Code A

98/99 - critical incident at the QA -
led to renewed way wards staffed

Not involved in dialogues with Dr B

Dosage - not usual now: not prob
not usual then throughout
service but prob reflects
out of hours commitment - it
for colleagues convenience

Qu: did he receive high dose?

Identified stress of investigation etc on staff

My little of relevance in CHI
statement but potential for inference
probably should consider

⑭ Vicky Banks
Consultant (Psychiatry of Old Age)

Comments on team approach to R care
with Dr Lord

Gosport - geographically remote

New prescribing charts

Identifying inflexible nurses on Dryad ^{ward}

Identifies improvement in last two years
re decisions of R care

very little of relevance
- not for interview

⑱ Fiona Cameron
Manager

Identifying training undertaken by
nurses.

Procedure when complaints

↳ little of relevance
- not for interview

⑲ Bill Hooper
Project Director

Comment on Mr Wilson → v. difficult,
irrational, abusive and aggressive.

Pre 98 GP "old fashioned"

In 1998 → not enough medical cover

"Infallible but not circumstantial"

US potentially useful information
(be specific)
- consider interviewing (for
overview)

(20) Barbara Robinson
Deputy General Manager

Transfers - some arrived poorly with
unrealistic expectations - relatives told
'for rehabilitation' when in reality 'were
terminal'.

Drug/syringe - ended up using one
type of syringe driver

Dr B - 'superb' doctor.
Gave us more than we paid her; great loss.

Big dose ranges - sliding scale - to avoid Pt waiting

In event staff were reluctant to escalate doses and stayed at lower levels.

NG for interview

(2) Jane Williams
Nurse Consultant

1997/98 - team of Daedalus, not as united as it could have been

Qu: protocols for palliative care being used for stroke/non-stroke interns

NG potential for interview

②②

Code A

Occasionally on Dryad & Daedalus if
short staffed (on Sultan)

NY nothing of relevance
- not for interview

②③

Jan Peach
Nurse Manager

Drugs skills - nurses felt competent

NY nothing of relevance
not for interview

②④ Jane Neville
Staff Nurse

Dec 98 - Sept 2000 - Daedalus

Dr B - in OP surgery
- deal w; prescription charts,
case by case

Had syringe drive training.

- not interviewed (owing to
position at time of
incident)

②⑤ Philip Beed
Clinical Manager

Sydnors - now renewed daily
Doses - large leeway

Large ranges - gaps in medical cover \Rightarrow
exposed (nights and w/eo still)

No one rec'd dosage more than req'd for
pain.

(26) Pat Wilkin
Nurse

Update drug assessment manual - afraid
to use diamorphine now.

? interviewed

(27) Angela Wilson
Senior Nurse

? employed at relevant time?
Dissatisfied with current practice!
Not relevant; not for interview

➤ (28) Sue Nelson
Staff Nurse

On Daedalus ward at relevant time

Kange - 1998 - to cover Dr's absence
Not misused

SD not - not at night

On holiday for 1998 Dr B incident

X increase dosage at night

X feel SD ever been used inappropriately

→ interviewed & owing to
emp'tment at relevant times
(likely to say matters which
are of assistance to defence)

(29) Linda Wood
Staff Nurse

? was Mo Wood employed at
relevant time?

(30) Marilyn Baker
Enrolled Nurse

X in post in 1998

- not for interview

(31)

Code A

Angry about complaint (Richard/Mulkenzie)
Fild staff

- for interview

15/01/03

⑫ June Burton - 05/03/02

Covered [redacted] Sensitive personal data
1998 - 2001 - got on with job - [redacted] Sensitive personal data

Drugs - good job when started.

Knew no slack in the system

Looked like a wide range - more
practical to have anticipatory prescribing -
not abused - ... limited nursing staff

40 pk in 45 mins - notes always brief

23

Only one nurse had 'diff' over use of
opiates - if disagreement would do

What felt appropriate

1 Drugs on chart for a nurse to make decision.

(34) Julie Sprack
Nurse - 05/03/02

→ nothing of relevance
- not for interview

(35) Gill Angus
Manager - 05/03/02

→ nothing of relevance
- not for interview

(36) Sally Clarke
(Transport Manager - 05/03/02)
- not for interview

37 Gill Hamblin
Nurse - 05/03/02

→ ~~not~~ See for interview *
at relevant time??
→ - info on issues

38 Nicky Pendleton
Programme Lead for Elderly Care Services ^{22/10/01}

- 'retrievable Rx' to GWM
- info re structure

→ useful background info
- for interview

39 **Code A** - 22/11/01

- general info re GP admission to GWM
→ not for GP care interview

Telephone interviews

(33) Dr Robin Clarke
Respiratory Medicine
Portsmouth Acute - 28/02/02

~~not~~ - able to provide info on discharge
to rehab beds etc

My own unlikely to be able to
assist

(Helpful to contact Community Health Council

Code A

Code A

as rec'd 3 complaints
relating to drug admin, morphine; care and ^{rec'd} _{hand} ~~ed~~

(14)

Completed Information

(A) Reeves (he = also visited)

(40) Susan Mitchell
Assistance Director, Social Services
- not for interview - 22/07/01

(41) Dr McKenning
GP, Portsmouth RMC - not for interview N/A N/K.

(42) Betty Woodland
Local rep for RC of Nursing - 23/11/01
(attendance at interviews with
nurses)
- not for interview

(43)

Code A

- not for interview

Stakeholder Meetings - 03/02/01

(44)

Code A

- interview

Telephone Interviews

(45)

Dr Kennell
Chair - Primary Care Group

- wants to support **Code A**
w/ not for interview

(46)

Peter Vigers - 13/11/01
MP

(47)

Dr David Percy & Harriet Boersboom
(South East Regional Office: NHD Executive
Director of Education & Training
Investigation) with approaching

(147)
 (148) Mrs Blackwell Jun West
 Rose Cook
 Manager, Residential Home
 - nothing of relevance

(149) John Willey
 CEO Farhame & Gosport PLC
 - nothing of relevance

(50)
 Geoff Kushlon
 League of Friends
 - nothing of relevance

(51) Helen Woten
 Code A
 Portsmouth SS
 - nothing of relevance

(52) Tony Warno
 Service Manager for Adults, SS ^{Hempshire}
 - nothing of relevance

53

Code A

-28/11/01

RCN Officer

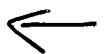
✓ CHI documents which may be disclosable
but not listed in annexes.

(a) CHI information form - Joan Leslie -
13/1/01 (treatment on 03/09/98)

(b)

(15) Documents relating to Mrs Kuchan's death

(16) Correspondence relating to Dr Barton



- ⑧ Statement of Mr Wilson - 21/11/01
+ letter
(mother - 26/10/98)
- ⑨ Statement of Mr Pittman & Mr Stange 22/11/01
- ⑩ Mr Page - 03/12/01
+ letter dated 21/11/01
+ death cert 04/03/98
- ⑪ Mr Abey 03/12/01
- ⑫ Mr Jan Wilson
(father under section)
(+ died approx 98) - 03/12/01
- ⑬ Tel con with Mrs Jackson
(sister Wilson's daughter) - 06/03/02
- ⑭ Tel con with Jim Wilcock - 26/11/01
- ⑮ Tel con with Mrs Richards - 14/12/01
- ⑯ Interview with Mrs McKenzie - 10/12/01
- ⑰ Handwritten notes by Ecology Bank

Statements to Request

- ① Jane Barton - 05/03/02
- ② Gill Hamblin - 05/03/02
- ③ Nicky Pendleton - 22/11/01

Other documents

- ③ Docs relating to complaint by Reeves
- ④ CM Report by Gillian McKenzie
- ⑤ CM Report by Joan Leslie (too much responsibility placed on nurses)
- ⑥ Statement of Mr and Mrs Kipley - 21/11/01
- ⑦ Statement of Mrs Graeme - 22/11/01

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Code A

Code A

Check John requesting :

- Freda Howard