



Field Fisher Waterhouse

FFW/82/01

GENERAL MEDICAL COUNCIL

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DR BARTON

GENERIC CASE FILE
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Index to Generic Case File 2

1. Investigation Overview 1998 – 2006 ✓
2. Generic Case Summary ✓
3. Witness List ✓
4. Witness statement of Irene Margaret Dorrington dated 16 October 2002 ✓
5. Witness statement of Sylvia Giffin dated 12 December 2002 ✓
6. Witness statement of Margaret June Partridge dated 22 August 2003 ✓
7. Witness statement of Iris Goldsmith dated 28 October 2002 ✓
8. Witness statement of Beverley Anne Turnbull dated 29 October 2002 ✓
9. Witness statement of Anita Tubbritt dated 31 October 2002 ✓
10. Witness statement of Isobel Evans dated 12 November 2002 ✓
11. Witness statement of Keith Paul Murray dated 21 October 2002 ✓
12. Witness statement of Steve King dated 8 October 2002 ✓
13. Witness statement of Gerardine Martina Whitney dated 10 December 2002 ✓
14. Witness statement of Susan Ann Frost dated 6 November 2002 ✓
15. Witness statement of Stephen Robert Barnes dated 13 January 2003 ✓
16. Witness statement of Antonia Jane Scammell dated 21 February 2003 ✓
17. Witness statement of Antonia Jane Scammell dated 1 June 2005 ✓
18. Witness statement of Janet Peach dated 21 February 2003 ✓
19. Witness statement of Janet Peach dated 19 August 2004 ✓
20. Witness statement of Janet Peach dated 1 February 2005 ✓

21. Witness statement of Jane Elizabeth Parvin dated 14 October 2002 ✓
22. Witness statement of Jane Elizabeth Parvin dated 20 March 2003 ✓
23. Witness statement of Kathryn Elizabeth Rowles dated 9 January 2003 ✓
24. Witness statement of Susan Galley dated 6 August 2003 ✓
25. Witness statement of Betty Woodland dated 1 February 2003 ✓
26. Witness statement of Margaret Wigfall dated 11 October 2002 ✓
27. Witness statement of Gillian Mary Ryder dated 7 November 2002 ✓
28. Witness statement of Elizabeth Mary Mears dated 18 August 2003 ✓
29. Witness statement of Pamela Susan Rigg dated 6 June 2003 ✓
30. Witness statement of Carol Elizabeth Ball dated 2 Jul7 2003 ✓
31. Witness statement of Deborah Anne Davies dated 29 April 2003 ✓
32. Witness statement of Sue Donne dated 13 November 2002 ✓
33. Witness statement of Mary Elizabeth Martin dated 7 July 2003 ✓
34. Witness statement of Shirley Sandra Hallman dated 28 July 2003 ✓
35. Witness statement of Shirley Sandra Hallman dated 13 May 2005 ✓
36. Witness statement of Joan Mcilroy dated 10 May 2005 ✓
37. Witness statement of Tina Marie Douglas dated 9 October 2003 ✓
38. Witness statement of Pauline Spilka dated 12 April 2001 ✓
39. Witness statement of Joan Dorothy Forfar dated 24 April 2003 ✓
40. Witness statement of Susan Elizabeth Corless dated 16 June 2003 ✓
41. Witness statement of Janine Elsie Mondey dated 20 June 2003 ✓
42. Witness statement of Margaret Brennan dated 4 August 2003 ✓

43. Witness statement of Joyce Tee dated 22 July 2003 ✓
44. Witness statement of Debra Maria Brooks dated 24 June 2003 ✓
45. Witness statement of Jane Rosalind Basson dated 9 May 2003 ✓
46. Witness statement of Karen Elizabeth Diamond dated 2 June 2003 ✓
47. Witness statement of Valerie Ann Webb dated 15 August 2003 ✓
48. Witness statement of Margaret Rose Perryman dated 18 August 2003 ✓
49. Witness statement of Sheelagh Joines dated 12 February 2003 ✓
50. Witness statement of Julia Fletcher dated 30 November 2004 ✓
51. Witness statement of Beverley Jane Carter dated 6 January 2003 ✓
52. Witness statement of Beverley Jane Carter dated 24 June 2003 ✓
53. Witness statement of Beverley Jane Carter dated 28 July 2004 ✓
54. Witness statement of Janice Rix dated 16 October 2003 ✓
55. Witness statement of Janice Rix dated 5 October 2004 ✓
56. Witness statement of Janice Rix dated 26 October 2004 ✓
57. Witness statement of Janice Rix dated 29 November 2004 ✓
58. Witness statement of Janice Rix dated 7 December 2004 ✓
59. Witness statement of Peter John Rushworth dated 21 March 2003 ✓
60. Witness statement of Peter John Rushworth dated 14 April 2003 ✓
61. Witness statement of Theresa Ann Stephens dated 23 December 2004 ✓
62. Witness statement of Jeffrey J Watling dated 31 May 2000 ✓
63. Witness statement of Irene Dix dated 8 December 2004 ✓
64. Witness statement of Yvonne Farmer dated 25 November 2004 ✓

65. Witness statement of Andrew William Cairns dated 12 June 2000 ✓
66. Witness statement of Jacqueline Ann Spragg dated 22 December 2004 ✓
67. Witness statement of Jacqueline Ann Spragg dated 6 June 2005 re: LP ✓
68. Witness statement of Jacqueline Ann Spragg dated 6 June 2005 re: RW ✓
69. Witness statement of Jacqueline Ann Spragg dated 6 June 2005 re: SG ✓
70. Witness statement of Jacqueline Ann Spragg dated 6 June 2005 re: ED ✓
71. Witness statement of Jacqueline Ann Spragg dated 6 June 2005 re: EL ✓
72. Witness statement of Jacqueline Ann Spragg dated 6 June 2005 re: ES ✓
73. Witness statement of Jacqueline Ann Spragg dated 6 June 2005 re: RL ✓
74. Witness statement of Jacqueline Ann Spragg dated 6 June 2005 re: HS ✓
75. Witness statement of Jacqueline Ann Spragg dated 6 June 2005 re: AC ✓
76. Witness statement of David Burgess dated 19 May 2005 re: LP ✓
77. Witness statement of David Burgess dated 19 May 2005 re: SG ✓
78. Witness statement of David Burgess dated 19 May 2005 re: ED ✓
79. Witness statement of David Burgess dated 19 May 2005 re: EL ✓
80. Witness statement of David Burgess dated 19 May 2005 re: ES ✓
81. Witness statement of David Burgess dated 19 May 2005 re: RL ✓
82. Witness statement of David Burgess dated 19 May 2005 re: HS ✓
83. Witness statement of David Burgess dated 19 May 2005 re: AC ✓
84. Witness statement of Wendy Jordan dated 15 June 2005 ✓
85. Witness statement of James Ripley dated 19 November 2002 ✓
86. Witness statement of James Ripley dated 31 January 2005 ✓

- 87. Witness statement of Paule Ripley dated 19 November 2002 ✓
- 88. Witness statement of Richard Henry Baker dated 8 September 2004 ✓
- 89. Witness statement of Vincent George Richards dated 18 July 2000 ✓
- 90. Court Print Index ✓
- 91. Exhibit List ✓
- 92.



OPERATION ROCHESTER

Investigation Overview 1998-2006.

Background.

Gosport War Memorial Hospital (GWMH) is a 113 bed community hospital managed during much of the period under investigation by the Fareham and Gosport Primary Care Trust. The hospital fell under the Portsmouth Health Care (NHS) Trust from April 1994 until April 2002 when services were transferred to the local Primary Care Trust.

The hospital operates on a day-to-day basis by nursing and support staff employed by the PCT. Clinical expertise was provided by way of visiting general practitioners and clinical assistants, consultant cover being provided in the same way.

Elderly patients were generally admitted to GWMH through referrals from local hospitals or general practitioners for palliative, rehabilitative or respite care.

Doctor Jane BARTON is a registered Medical Practitioner who in 1988 took up a part-time position at GWMH as Clinical Assistant in Elderly Medicine. She retired from that position in 2000.

Police Investigations.

Operation ROCHESTER was an investigation by Hampshire Police into the deaths of elderly patients at GWMH following allegations that patients admitted since 1989 for rehabilitative or respite care were inappropriately administered Diamorphine and other opiate drugs at levels or under circumstances that hastened or caused death. There were

further concerns raised by families of the deceased that the general standard of care afforded to patients was often sub-optimal and potentially negligent.

Most of the allegations involved a particular General Practitioner directly responsible for patient care Doctor Jane BARTON.

Two allegations (SPURGIN and PACKMAN) were pursued in respect of a consultant Dr Richard REID.

Of 945 death certificates issued in respect of patient deaths at GWMH between 1995 and 2000, 456 were certified by Doctor BARTON.

The allegations were subject of three extensive investigations by Hampshire Police between 1998 and 2006 during which the circumstances surrounding the deaths of 92 patients were examined. At every stage experts were commissioned to provide evidence of the standard of care applied to the cases under review.

The Crown Prosecution Service reviewed the evidence at the conclusion of each of the three investigation phases and on every occasion concluded that the prosecution test was not satisfied and that there was insufficient evidence to sanction a criminal prosecution of healthcare staff, in particular Dr BARTON.

The General Medical Council also heard evidence during Interim Order Committee Hearings to determine whether the registration of Dr BARTON to continue to practice should be withdrawn. On each of the three occasions that the matter was heard the GMC was satisfied that there was no requirement for such an order and Dr BARTON continued to practice under voluntary restrictions in respect of the administration of Opiate drugs.

The First Police investigation.

Hampshire Police investigations commenced in 1998 following the death of Gladys RICHARDS aged 91 years.

Mrs. Richards died at the GWMH on Friday 21st August 1998 whilst recovering from a surgical operation carried out at the nearby Royal Haslar Hospital to address a broken neck of femur on her right side (hip replacement).

Following the death of Mrs. Richards two of her daughters, Mrs. MACKENZIE and Mrs. LACK complained to the Hampshire Police about the treatment that had been given to their mother at the GWMH. Mrs. MACKENZIE contacted Gosport police on 27th September, 1998 and alleged that her mother had been unlawfully killed.

Local officers (Gosport CID) carried out an investigation submitting papers to the Crown Prosecution Service in March 1999.

The Reviewing CPS Lawyer determined that on the evidence available he did not consider a criminal prosecution to be justified.

Mrs. MACKENZIE then expressed her dissatisfaction with the quality of the police investigation and made a formal complaint against the officers involved.

The complaint made by Mrs. MACKENZIE was upheld and a review of the police investigation was carried out.

Second Police Investigation

Hampshire Police commenced a re-investigation into the death of Gladys RICHARDS on Monday 17th April 2000.

Professor Brian LIVESLEY an elected member of the academy of experts provided medical opinion through a report dated 9th November 2000 making the following conclusions:

- "Doctor Jane BARTON prescribed the drugs Diamorphine, Haloperidol, Midazolam and Hyoscine for Mrs. Gladys RICHARDS in a manner as to cause her death."

- “Mr. Philip James BEED, Ms. Margaret COUCHMAN and Ms. Christine JOICE were also knowingly responsible for the administration of these drugs.”
- “As a result of being given these drugs, Mrs. RICHARDS was unlawfully killed.”

A meeting took place on 19th June 2001 between senior police officers, the CPS caseworker Paul CLOSE, Treasury Counsel and Professor LIVESLEY.

Treasury Counsel took the view that Professor LIVESLEY's report on the medical aspects of the case, and his assertions that Mrs. RICHARDS had been unlawfully killed were flawed in respect of his analysis of the law. He was not entirely clear of the legal ingredients of gross negligence/manslaughter.

Professor LIVESLEY provided a second report dated 10th July, 2001 where he essentially underpinned his earlier findings commenting:-

- “It is my opinion that as a result of being given these drugs Mrs RICHARDS death occurred earlier than it would have done from natural causes.”

In August 2001 the Crown Prosecution Service advised that there was insufficient evidence to provide a realistic prospect of a conviction against any person.

Local media coverage of the case of Gladys RICHARDS resulted in other families raising concerns about the circumstances of their relatives' deaths at the GWMH as a result four more cases were randomly selected for review.

Expert opinions were sought of a further two medical professors FORD and MUNDY who were each provided with copies of the medical records of the four cases in addition to the medical records of Gladys RICHARDS.

The reports from Professor FORD and Professor MUNDY were reviewed by the Police and a decision was taken not to forward them to the CPS as they were all of a similar nature to

the RICHARDS case and would therefore attract a similar response as the earlier advice from counsel. A decision was then made by the Police that there would be no further police investigations at that time.

Copies of the expert witness reports of Professor FORD and Professor MUNDY were forwarded to the General Medical Council, the Nursing and Midwifery Council and the Commission for Health Improvement for appropriate action.

Intervening Developments between Second and Third Investigations

On 22nd October 2001 the Commission for Health Improvement (CHI) launched an investigation into the management provision and quality of health care for which Portsmouth Health Care (NHS) Trust was responsible at GWMH interviewing 59 staff in the process.

A report of the CHI investigation findings was published in May 2002 concluding that a number of factors contributed to a failure of the Trust systems to ensure good quality patient care.

The CHI further reported that the Trust post investigation had adequate policies and guidelines in place that were being adhered to governing the prescription and administration of pain relieving medicines to older patients.

Following the CHI Report, the Chief Medical Officer Sir Liam DONALDSON commissioned Professor Richard BAKER to conduct a statistical analysis of the mortality rates at GWMH, including an audit/review of the use of opiate drugs.

On Monday 16th September 2002 staff at GWMH were assembled to be informed of the intended audit at the hospital by Professor BAKER. Immediately following the meeting nurse Anita TUBBRITT (who had been employed at GWMH since the late 1980s) handed to hospital management a bundle of documents.

The documents were copies of memos letters and minutes relating to the concerns of nursing staff raised at a series of meetings held in 1991 and early 1992 including :-

- The increased mortality rate of elderly patients at the hospital.
- The sudden introduction of syringe drivers and their use by untrained staff.
- The use of Diamorphine unnecessarily or without consideration of the sliding scale of analgesia (Wessex Protocol).
- Particular concerns regarding the conduct of Dr BARTON in respect of prescription and administration of Diamorphine.

Nurse TUBRITT'S disclosure was reported to the police by local health authorities and a meeting of senior police and NHS staff was held on 19th September 2002 the following decisions being made:-

- Examine the new documentation and investigate the events of 1991.
- Review existing evidence and new material in order to identify any additional viable lines of enquiry.
- Submit the new material to experts and subsequently to CPS.
- Examine individual and corporate liability.

A telephone number for concerned relatives to contact police was issued via a local media release.

Third Police Investigation

On 23rd September 2002 Hampshire Police commenced enquiries. Initially relatives of 62 elderly patients that had died at Gosport War Memorial Hospital contacted police voicing standard of care concerns (including the five original cases)

In addition Professor Richard BAKER during his statistical review of mortality rates at GWMH identified 16 cases which were of concern to him in respect of pain management.

14 further cases were raised for investigation through ongoing complaints by family members between 2002 and 2006.

A total of 92 cases were investigated by police during the third phase of the investigation.

A team of medical experts (key clinical team) were appointed to review the 92 cases completing this work between September 2003 and August 2006.

The multi-disciplinary team reported upon Toxicology, General Medicine, Palliative Care, Geriatrics and Nursing.

The terms of reference for the team were to examine patient notes initially independently and to assess the quality of care provided to each patient according to the expert's professional discipline.

The Clinical Team were not confined to looking at the specific issue of syringe drivers or Diamorphine but to include issues relating to the wider standard and duty of care with a view to screening each case through a scoring matrix into predetermined categories:-

Category 1- Optimal care.

Category 2- Sub optimal care.

Category 3- Negligent care.

The cases were screened in batches of twenty then following this process the experts met to discuss findings and reach a consensus score.

Each expert was briefed regarding the requirement to retain and preserve their notations and findings for possible disclosure to interested parties.

All cases in categories 1 and 2 were quality assured by a medical/legal expert, Matthew LOHN to further confirm the decision that there was no basis for further criminal investigation.

Of the 92 cases reviewed 78 failed to meet the threshold of negligence required to conduct a full criminal investigation and accordingly were referred to the General Medical Council and Nursing and Midwifery Council for their information and attention.

Fourteen Category 3 cases were therefore referred for further investigation by police. Of the fourteen cases, four presented as matters that although potentially negligent in terms of standard of care were cases where the cause of death was assessed as entirely natural. Under these circumstances the essential element of causation could never be proven to sustain a criminal prosecution for homicide.

Notwithstanding that the four cases could not be prosecuted through the criminal court they were reviewed from an evidential perspective by an expert consultant Geriatrician Dr David BLACK who confirmed that the patients were in terminal end stage of life and that in his opinion death was through natural causes.

Accordingly the four cases ...Were released from police investigation in June 2006:-

- Clifford HOUGHTON.
- Thomas JARMAN.
- Edwin CARTER.
- Norma WINDSOR

The final ten cases were subjected to full criminal investigation upon the basis that they had been assessed by the key clinical team as cases of 'negligent care that is to day outside the bounds of acceptable clinical practice, and cause of death unclear.'

The investigation parameters included taking statements from all relevant healthcare staff involved in care of the patient, of family members and the commissioning of medical experts to provide opinion in terms of causation and standard of care.

The expert witnesses, principally Dr Andrew WILCOCK (Palliative care) and Dr David BLACK (Geriatrics) were provided guidance from the Crown Prosecution Service to ensure that their statements addressed the relevant legal issues in terms of potential homicide.

The experts completed their statements following review of medical records, all witness statements and transcripts of interviews of Dr Reid and Dr Barton the

healthcare professionals in jeopardy. They were also provided with the relevant documents required to put the circumstances of care into 'time context' The reviews were conducted by the experts independently.

Supplementary expert medical evidence was obtained to clarify particular medical conditions beyond the immediate sphere of knowledge of Dr's BLACK and WILCOCK.

A common denominator in respect of the ten cases was that the attending clinical assistant was Dr Jane BARTON who was responsible for the initial and continuing care of the patients including the prescription and administration of opiate and other drugs via syringe driver.

Dr BARTON was interviewed under caution in respect of the allegations.

The interviews were conducted in two phases. The initial phase was designed to obtain an account from Dr BARTON in respect of care delivered to individual patients. Dr BARTON responded during these interviews through provision of prepared statements and exercising her right of silence in respect of questions asked.

During the second interview challenge phase (following provision of expert witness reports to the investigation team) Dr BARTON exercised her right of silence refusing to answer any questions.

Consultant Dr Richard REID was interviewed in respect of 2 cases (PACKMAN and SPURGIN) following concerns raised by expert witnesses. Dr REID answered all questions put.

Full files of evidence were incrementally submitted to the Crown Prosecution Service between December 2004 and September 2006 in the following format:-

- Senior Investigating Officer summary and general case summary.

- Expert reports.
- Suspect interview records.
- Witness list.
- Family member statements.
- Healthcare staff statements.
- Police officer statements.
- Copy medical records.
- Documentary exhibits file.

Additional evidence was forwarded to the CPS through the compilation of generic healthcare concerns raised by staff in terms of working practices and the conduct of particular staff.

The ten category three cases were:-

1. Elsie DEVINE 88yrs. Admitted to GWMH 21st October 1999, diagnosed multi-infarct dementia, moderate/chronic renal failure. Died 21st November 1999, 32 days after admission cause of death recorded as Bronchopneumonia and Glomerulonephritis.
2. Elsie LAVENDER 83yrs. Admitted to GWMH 22nd February 1996 with head injury /brain stem stroke. She had continued pain around the shoulders and arms for which the cause was never found. Died 6th March 1996, 14 days after admission cause of death recorded as Cerebrovascular accident.
3. Sheila GREGORY 91yrs. Admitted to GWMH 3rd September 1999 with fractured neck of the femur, hypothyroidism, asthma and cardiac failure. Died 22nd November 1999, 81 days after admission cause of death Bronchopneumonia.
4. Robert WILSON. 74 yrs. Admitted to GWMH 14th October 1998 with fractured left humerus and alcoholic hepatitis. Died 18th October 1998 4 days after admission cause of death recorded as congestive cardiac failure and renal/liver failure.

5. Enid SPURGIN 92 yrs. Admitted to GWMH 26th March 1999 with a fractured neck of the femur. Died 13th April 1999 18 days after admission cause of death recorded as cerebrovascular accident.

6. Ruby LAKE 84 yrs. Admitted to GWMH 18th August 1998 with a fractured neck of the femur, diarrhea atrial fibrillation, ischemic heart disease dehydrated and leg/buttock ulcers. Died 21st August 1998 3 days after admission cause of death recorded as bronchopneumonia.

7. Leslie PITTOCK 82 yrs. Admitted to GWMH 5th January 1996 with Parkinsons disease he was physically and mentally frail immobile suffering depression. Died 24th January 1996 15 days after admission cause of death recorded as bronchopneumonia.

8. Helena SERVICE 99 yrs. Admitted to GWMH 3rd June 1997 with many medical problems, diabetes, congestive cardiac failure, confusion and sore skin. Died 5th June 1997 2 days after admission cause of death recorded as congestive cardiac failure.

9. Geoffrey PACKMAN 66yrs. Admitted to GWMH 23rd August 1999 with morbid obesity cellulitis arthritis immobility and pressure sores. Died 3rd September 1999 13 days after admission cause of death recorded as myocardial infarction.

10. Arthur CUNNINGHAM 79 yrs. Admitted to GWMH 21st September 1998 with Parkinson's disease and dementia. Died 26th September 1998 5 days after admission cause of death recorded as bronchopneumonia.

Dr David WILCOCK provided extensive evidence in respect of patient care concluding with particular themes 'of concern' in respect of the final 10 category ten cases including:-

- *'Failure to keep clear, accurate, and contemporaneous patients records which report the relevant clinical findings, the decisions made, the information given to patients and any drugs or other treatment prescribed'*

- *'Lack of adequate assessment of the patient's condition, based on the history and clinical signs and, if necessary, an appropriate examination'*
- *'Failure to prescribe only the treatment, drugs, or appliances that serve patients' needs'*
- *'Failure to consult colleagues Including:-*

Enid Spurgin – orthopaedic surgeon, microbiologist

Geoffrey Packman – general physician, gastroenterologist

Helena Service – general physician, cardiologist

Elsie Lavender – haematologist

Sheila Gregory – psychogeriatrician

Leslie Pittock – general physician/palliative care physician

Arthur Cunningham – palliative care physician.

Many of the concerns raised by Dr WILCOCK were reflected by expert Geriatrician Dr David BLACK and other experts commissioned, the full details being contained within their reports.

There was however little consensus between the two principal experts Drs BLACK and WILCOCK as to whether the category 3 patients were in irreversible end stage terminal decline, and little consensus as to whether negligence more than minimally contributed towards the patient death.

As a consequence Treasury Counsel and the Crown Prosecution Service concluded in December 2006 that having regard to overall expert evidence it could not be proved that Doctors were negligent to criminal standard.

Whilst the medical evidence obtained by police was detailed and complex it did not prove that drugs contributed substantially towards death.

Even if causation could be proved there was not sufficient evidence to prove that the conduct of doctors was so bad as to be a crime and there was no realistic prospect of conviction.

Family group members of the deceased and stakeholders were informed of the decision in December 2006 and the police investigation other than referral of case papers to interested parties and general administration was closed.

David WILLIAMS.

Detective Superintendent 7227

Senior Investigating Officer.

16th January 2007.



OPERATION ROCHESTER GENERIC CASE SUMMARY

Further to the individual case summaries and files prepared for the individual patients. A further file of evidence has been prepared that should be read as an over view regarding events at the Gosport War Memorial Hospital from 1990 to 2002. Although this file alone does not pertain to any criminal charges it does corroborate all of the individual case files and should be read in conjunction with them.

The main points covered are as follows:-

1. Working Practices at the Gosport War Memorial Hospital

Irene DORRINGTON is an experienced retired Staff Nurse who joined Northcote Annexe in 1972, she moved to Redcliffe Annexe and then to Dryad Ward in 1994, she details the general running of the hospital and the changing needs of the patients throughout the years.

2. Concerns raised by the nursing staff in 1991 regarding the excessive use of diamorphine via syringe drivers on Dryad Ward and the resultant management action.

In 1991 a number of night nursing staff including GRIFFIN, TURBRITT and TURNBALL had serious concerns about the use of syringe drivers on the ward. These concerns included:-

- Patients placed on syringe drivers when not in pain.
- The blanket use of syringe drivers before any other analgesics were tried.
- The blanket prescribing of diamorphine prior to the patient actually requiring a strong opioid, allowing the nursing staff to commence the use of the driver without the knowledge of the Doctor.
- Used to calm patients who were aggressive or noisy rather than for pain management.
- Patient deaths were sometimes hastened unnecessarily.
- The use of the syringe driver or commencing diamorphine prohibits trained staff from adjusting dose to suit the patient needs.
- That too high a degree of unresponsiveness from patients was sought at times.
- That sedative drugs such as thioridazine would sometimes be more appropriate.
- That diamorphine was prescribed prior to such procedures such as catheterisation where diazepam would be just as effective.

- That not all staff views were considered before a decision was made to start patients on diamorphine.
- That other similar units did not use diamorphine as extensively.

These concerns were aired in a meeting held at Redcliffe Annexe on 11th July 1991 that had been arranged in conjunction with the patient care manager Isobel EVANS who addressed the concerns. A number of meetings then took place between nursing, medical and management staff. This resulted in the training of staff in the use of syringe drivers and pain control and an agreement that a policy be written by management on the use of syringe drivers and controlled drugs.

Keith MURRAY a Convenor for the Royal College of Nursing states that: Training was provided for staff by a Mr Steve KING probably, but a policy was never written. Murray's correspondences with regard to these meetings are available identification numbers KPM/1 to KPM/7.

The training did not allay the nursing staff fears and when TURBRITT attended a course in Elderly care at the Queen Alexandra Hospital she chose to speak on 'The use and abuse of the syringe driver'. Her course tutor Geri WHITNEY visited Radcliffe Annexe and met nursing staff on 31st October 1991 after a request by TURBRITT. The main conclusion of WHITNEY'S visit was that:-

- * The staff are concerned that non opioids or weak opioids were not being considered prior to the use of diamorphine.
- * The staff have had some training arranged by the Hospital manager namely
 - the syringe driver and pain control
 - pain control
- * Staff Nurse TURBRITT wrote to EVANS, the producers of diamorphine and reviewed literature and a video - Making Pain Management More Effective.
- * Staff Nurse TURBRITT is undertaking a literature on Pain and Pain Control.

A copy of WHITNEY'S report was sent to both Mr W HOOPER (deceased) the General Manager, Gosport War Memorial Hospital, Mrs J EVANS the Patient Care Manager, and Susan FROST, Solent School of Health Studies, Principal her CV is available SAF/VC/1).

As a result of this Mrs EVANS circulated a memorandum on 7th November, asking for staff to identify any patient that they felt diamorphine (or any other drug) had been prescribed inappropriately. Due to the memo which mentioned 'allegations' and asking for individual responses to be put in writing Keith MURRAY sought the assistance of the Wessex Regional Office of the Royal

College of Nursing. This prompted a Steve BARNES to write to Mrs EVANS outlining the nurses' position. In the main after the meeting in July it was decided that:-

1. The concerns would be addressed.
2. Clear guidance/policy would be promulgated.

It had now become a matter of serious concern that:-

1. The complaints were not acted upon.
2. The management were now seeking formal allegations.

At this time the RCN stated that the RCN would not be prepared to be drawn into what could emerge as a vindictive witch hunt that would divide nursing staff, medical staff and management. The complaints were adequately repeated to management and that if a policy was not formulated out then action would be taken by way of the grievance procedure.

A further meeting was then held at Radcliffe Annexe on 17th December 1991 with Medical, Nursing Staff and Mrs EVANS. This meeting is described as a 'them and us' meeting, medical staff on one side sat like a panel. During the meeting Mrs EVANS highlighted the action management had taken:-

- (i) The staff meeting on 11th July.
- (ii) Steve KING lecture on drug control.
- (iii) Staff being invited to detail individual cases, none were forthcoming.
- (iv) The stressed placed on medical staff and the issue being detrimental to patient care.

She also presented the staff concerns and a Dr LOGAN spoke regarding symptom control.

It was agreed that if any of the nursing staff had concerns in the future they would approach Dr BARTON or Sister HAMBLIN in the first instance and if not resolved they could speak to Dr LOGAN.

The medical staff then left the meeting and Mrs EVANS asked if there was still a need for a policy relating to nursing practice on the issue. No one at this meeting thought it was appropriate. Mrs EVANS then addressed staff stating she was concerned over the manner in which these concerns had been raised, as it had made people feel very threatened and defensive. It is clear that the concerns had been turned around the result being that the syringe drivers were not an issue recognised by the management, but the nursing staff who had raised the concerns and the way the concerns were raised were. As such the nursing staff felt vulnerable and unsupported to such an extent that they stopped complaining.

- Due to the fact that the RCN took its lead from the nursing staff and as they did not hear anything further from them they also took the matter no further.
3. The Recovery of Letters and Meeting Minutes regarding the Events in 1991.

On Monday 16th September 2002 in order to inform staff that Professor BAKER had been tasked with reviewing the Gosport War Memorial Hospital and the prescribing procedures and policy's a meeting was called with the nursing staff. Prior to the meeting TURNBALL and TURBRITT approached Toni SCAMMELL a nursing manager at GWMH and handed to her a file containing letters and the minutes of the meetings held in 1991, these were subsequently handed to Jane Parvin and are available (JEP/GWMH/1/). These papers detailed the nursing staff concerns and management action. When asked why they had brought the documents forward now TURBRITT stated that she had seen an article in the Sunday newspaper about the GWMH which stated that no one had ever brought the concerns about syringe drivers to the attention of management before and that there had been no training in their use, but she had received training. When asked whether they felt the matter had been solved, as the documents seemed to stop abruptly, TURBRITT said that things had changed for a short period of time as patients didn't appear to be automatically put on diamorphine and that Dr BARTON had been on a palliative care course and knew what she was talking about. The replies were recorded (TJS/1). A further meeting was held on the 18th September 2002 to investigate the events of 1991 with TURBRITT, TURNBALL, SCAMMELL, Jane PARVIN (Personnel Director) and Betty WOODLAND (RCN Representative) being present. Notes from this meeting (TJS/2) reflect how TURNBALL & TURBRITT felt in 1991 throughout the different meetings and why they decided to speak to SCAMMELL now.

GIFFIN also kept the minutes of the 1991 meetings and letters relating to the concerns (SG/GWMH/1). Beverley TURNBALL identifies her letters from the bundle JEP/GWMH/1 and these are available JEP/GWMH/1/BAT/1.

Jan PEACH corroborates the meetings of the 16th and 18th September 2002 and provides continuity of the Exhibit JEP/GWMH/1. Kathryn ROWLES and Sue GAWLEY also provide corroboration to the events of the 16th September 2002.

The concerns of TURNBALL and TURBRITT and GIFFIN although not shared by all of the staff on Dryad Ward are corroborated by PARTRIDGE and GOLDSMITH. Betty WOODWARD is a RCN Steward and represented TURNBALL and TURBRITT at the meeting on 18th September and she provides a note of the invitation to the meeting (BW/1), notes of the meeting (BW/2) (Typed BW/3). A list of the documents in JEP/GWMH/1 (BW/4).

4. Concerns held by training nursing staff at Gosport War Memorial Hospital relating to diamorphine, syringe drivers and general patient care that were never aired with the management.

A number of nursing staff have subsequently been interviewed and have highlighted concerns that had never been mentioned before these include:-

Enrolled Nurse WIGFALL – syringe drivers were used too often. Rather than being used to control pain they were used on patients who were approaching death and suffering anxiety and distress. Dr BARTON prescribed the diamorphine but it was up to a senior nurse when to use it. It was apparent that an awful lot of patients that died were on syringe drivers.

Sister RYDER – shared concerns of the nurses in 1991 and felt optimistic that the issues would be addressed. Left a couple of weeks after the meeting in July 1991 so didn't see how the issues were dealt with or what guidelines were put in place.

RGN MEARS – worked on Sultan Ward although covered other wards so is able to compare working practices between the different wards. In Daedalus ward the doses of diamorphine prescribed were set between large parameters leaving the dose administered to be decided by the attending nurse.

Nurse RIGG – the needs and demands of the patients changed, by taking more acute patients. Medical cover was not reflected in the changes. Work load increased and patient contact was often less. By 2003 there was a lack of leadership and structure.

By charting a variable dose of medication the responsibility of the dose administered falls to the qualified nurse.

E Grade Nurse – Carol BALL – Dr BARTON would prescribe diamorphine by phone but not conduct a follow up visit. Inappropriate prescribing of diamorphine i.e when a patient was not in pain and/or other analgesics not used prior. 'It seemed that people were going onto syringe drivers for no reason at all. They were not ill or in pain and yet they were dying shortly after going on the drivers'.

Recalls a patient Marjorie that was prescribed diamorphine.

Nursing Auxiliary – Deborah DAVIES – Corroborates the statement of BALL regarding Marjorie. States that Dr BARTON would mention diamorphine and the patient would be dead within the week.

Staff Nurse Grade F Sue DONNE – acknowledges that some staff had concerns with regard to the use of syringe drivers but did not have any herself. Attended the staff and management meetings, in 1991 regarding the staff concerns.

Staff Nurse Mary MARTIN – on a couple of occasions a patient was put onto a syringe driver with diamorphine when there was no indication that they needed it. Attended the 1991 meeting but nothing changed as a result of it.

Staff Nurse Grade F Shirley HALLMANN – syringe drivers were used too early before other methods of pain control had been tried, they were prescribed by Dr BARTON on the admission of the patient as, as and when

required prescription. Doses of diamorphine and midazolam were too high.

Dr BARTON'S actions were ill thought out and could have led to the premature death of a patient. Nurse Hallmann discussed her concerns with her mother Joan McILROY who recorded these concerns in her diary of 2001 (JMI/1) and 2002 (JMI/2)

Grade F Staff Nurse DOUGLAS – had concerns over the high dosages of diamorphine given to patients. Drugs including diamorphine and midazolam were prescribed to patient on their arrival. It therefore became a decision for the nurses when to administer it. Patients went onto morphine without starting at the bottom of the analgesic ladder.

5. Concerns of Untrained Staff at Gosport War Memorial Hospital

Nursing Auxiliary Pauline SPILKA – holds concerns about the indiscriminate use of syringe driver. It appeared that euthanasia was practised. All patients upon their admission were written up by Dr BARTON who authorised the use of a syringe driver if appropriate, and that any person put onto a driver would die shortly afterwards.

Nursing Auxiliary Joan FORFAR – believed that syringe drivers were used too soon on some patients. Patients were put on them because they just moaned and groaned. Patients put on a syringe driver would go into a coma and die a day or two week later.

Nursing Auxiliary Susan CORLESS – untrained nurse would double check medication with a trained nurse if no other trained nurse was available and give patients medication that had been checked and left out by trained nurses when there wasn't any trained nurses on. Didn't understand why some stroke patients who didn't appear to be in pain were put on syringe drivers. When patients were put on syringe drivers they were not taken off of them until they died. In her opinion the use of a syringe driver shortened the patient's life. Diamorphine was used inappropriately, it made the patient quiet and shortened their life. It was given to patients who didn't require that level of pain relief. Diamorphine was used to keep the patients moving through the Annexe to keep waiting lists down. Dr BARTON didn't spend much time with the patients.

Nursing Auxiliary Janine MOWDEY – on occasions would leave work and a patient would appear to be well. On her return they would be receiving diamorphine through a syringe driver.

Nursing Auxiliary Margaret BRENNAN – patients were placed on syringe drivers very early in their treatment. Other types of pain relief were not tried first.

Nursing Auxiliary Joyce TEE – syringe drivers used prematurely.

Nursing Auxiliary Debra BROOKS – wondered why patients were on syringe

drivers.

RGN Grade D Jane BASSON – concerns re the lack of labels on drugs, or what was in the syringe driver.

Nursing Auxiliary Karen DIAMOND – untrained nurse who would countersign a withdrawal of diamorphine as a witness and was asked to countersign a withdrawal when she hadn't witnessed it.

RGN Staff Nurse Valerie WEBB – there was a practice of pre-prescribing syringe drivers and diamorphine. This was a practice that was not used on other wards.

RGN Margaret PERRYMAN – worked on Daedalus ward in 1999 – 2000. States that the nursing care provided was very poor due to the poor management of the ward. Pain management was inadequate. No consideration was given to opiod tolerance. Correspondence outlining her concerns are available MRP/1 to MRP/3.

Staff Nurse Leslie ALDRIDGE – there was a culture within Gosport that would not change, there was little support from Doctors and Management. Had to request his own training for syringe drivers.

RGN Sister Sheila JONES – describes how and why it was decided by Dr LORD, Dr BARTON and herself to prescribe medication prior to it being required.

6. Technical Matters, Production of Medical Records and Exhibit Continuity

Julia FLETCHER – provides details as to what Nozinam is used for, its properties, recommended dosages, when caution should be exercised prior to prescribing, and side effects.

Beverley CARTER – produces the medical records of:-

Elsie DEVINE	-	BJC/16
Elsie LAVENDER	-	BJC/30
Arthur CUNNINGHAM	-	BJC/15
Sheila GREGORY	-	BJC/21
Robert WILSON	-	BJC/55
Enid SPURGIN	-	BJC/45
Helena SERVICE	-	BJC/72
Ruby LAKE	-	BJC/67
Lesley PITTOCK	-	BJC/71

showing the deceased's treatment at Gosport War Memorial Hospital and Queen Alexandra Hospital and the admission books relating to Gosport War Memorial Hospital.

Dryad Ward 93/96 BJC/88

Dryad Ward 79/03 BJC/89

Daedalus Ward 01/03 BJC/90

Dc Rushworth provides continuity for these exhibits and also produces cremation certificates for Spurgin and Wilson (PJR/CREM/2) that show that both patients were in a coma prior to death.

Seven of the deceased were treated in Halslar Hospital (Military Hospital) prior to their admission to GWMH and their medical records are produced by Janice RIX.

Elsie LAVENDER	-	JR/11A (Chest X-rays JR/XR/1)
Sheila GREGORY	-	JR/12
Robert WILSON	-	JR/13
Enid SPURGIN	-	JR/14
Leslie PITTOCK	-	JR/15
Helena SERVICE	-	JR/16
Ruby LAKE	-	JR/19A

The GP medical records for each of the patients are produced by Theresa STEPHENS as follows:-

Elsie DEVINE	-	TAS/1
Arthur CUNNINGHAM	-	TAS/2
Elsie LAVENDER	-	TAS/3
Sheila GREGORY	-	TAS/4
Robert WILSON	-	TAS/5
Enid SPURGIN	-	TAS/7
Leslie PITTOCK	-	TAS/8
Helena SERVICE	-	TAS/9
Ruby LAKE	-	TAS/10

The controlled drugs record books for Gosport War Memorial Hospital, Sultan Ward, Dryad Ward, Daedalus Ward, Redcliffe Annexe, the female ward are produced by Janet PEACH and run from JP/CDRB/1 to JP/CDRB/48. Dryad Ward controlled drugs record books are available and cover the following periods,

25/06/95 to 24/05/96 – JP/CDRB/20

06/03/05 to 08/12/96 – JP/CDRB/21

22/11/96 to 23/06/97 – JP/CDRB/22

08/12/96 to 22/12/97 – JP/CDRB/23

02/09/98 to 18/06/99 - JP/CDRB/47

18/06/99 to 04/07/01 - JP/CDRB/48

12/07/97 to 05/03/02 – JP/CDRB/24

The bed numbers register from November 1992 to January 1997; JP/BNR/1 is also produced and covers Sultan, Dryad and Daedalus wards.

Jeffrey WATLING the Pharmacy Services Manager for Portsmouth Hospitals NHS Trust explains how medicines are ordered, supplied and recorded and produces a hand book covering Palliative Care which gives guidance on Clinical management of patients who are dying (JJW/7). This includes, pain, diagnosis, strong opioids and syringe drivers.

Irene DIX produces a fax copy headed 'Protocol for Prescription and Administration of Diamorphine by Subcutaneous Infusion' ID/F & GPCT/1 that was sent to her by Yvonne FARMER, Dr REID'S (Medical Director PHCT) Secretary. This would appear to be the earliest protocol or policy regarding the prescribing of diamorphine by syringe drivers issued by PHCT and can be dated around the end of 1999. Even at this time it can be seen by this draft protocol the confusion surrounding the prescribing of diamorphine as it states:-

Dosage

Guidance from the palliative care service indicates that if pain has not been controlled in the previous 24 hours by 'X mg' of diamorphine then up to double the dose should be administered the following day, ie up to 2x 'X mg' should be given.

Prescription

Diamorphine may be written up as a variable dose to allow doubling on up to two successive days,

Although these entries have been corrected to show the correct prescribing regime it clearly demonstrates the lack of knowledge and understanding by the hospital staff.

This is further highlighted by the patient care manager Isobel Evans who was responsible for all nursing care within the hospital who states incorrectly that if a patient was getting 10mgs of diamorphine orally every four hours amounting to 60 mgs over a 24 hour period then they would receive 60 mgs sub cut via the syringe driver over a 24 hour period.

The dose should be reduced by 1:3 or 1:2

Dr Andrew CAIRNS a GP in Petersfield describes the procedure for certifying cause of death within the PHCT and Jacqueline SPRAGG explains the procedure at Gosport War Memorial Hospital producing an administrative form JAS/1 showing the administrative procedure followed in the hospital. Guidance of notice for the completion of cause of death certificates and a certificate JAS/2. Once the certificate is completed by the Doctor certifying death the certificate is placed in an envelope (JAS/3) which is sealed and taken by the deceased's relative or representative to the registrar. If the deceased is to be cremated further forms BC & F (JAS/4) are also completed. She also

produces the Cause of Death Certificate book with the relevant stub for each of the deceased:-

Leslie PITTOCK	- JAS/CODC/1
Robert WILSON	- JAS/CODC/2
Shelia GREGORY	- JAS/CODC/4
Elsie DEVINE	- JAS/CODC/6
Elsie LAVENDER	- JAS/CODC/9
Enid SPURGIN	- JAS/CODC/10
Ruby LAKE	- JAS/CODC/11
Helena SERVICE	- JAS/CODC/13
Arthur CUNNINGHAM	- JAS/CODC/14

A certified copy of the deceased's death certificate is available produced by David BURGESS:-

Leslie PITTOCK	- DB/2001
Robert WILSON	- DB/2002
Shelia Gregory	- DB/2005
Elsie DEVINE	- DB/2007
Elsie LAVENDER	- DB/2010
Enid SPURGIN	- DB/2011
Ruby LAKE	- DB/2012
Helena SERVICE	- DB/2014
Arthur CUNNINGHAM	- DB/2015

Wendy JORDAN a personnel assistant employed by Fareham and Gosport Primary Care Trust produces the job description for the Clinical Assistant at Gosport War Memorial Hospital that would have been applicable to Dr Barton. (WJ/CA/1). This outlines the job summary as,

This is a new post of 5 Sessions a week worked flexibly to provide a 24hour Medical Cover to the Long Stay patients in Gosport. The patients are slow stream or slow stream rehabilitation, but holiday relief and shared care patients are admitted. An important aspect of this role is for the postholder to be seen not only as a medical advisor but as a friend and counsellor to patient's, relatives and staff.

Duties include, (This is not the entire list)

1. To visit the units on a regular basis and to be available "On Call" as necessary.
2. To ensure that all new patients are seen promptly after admission.
3. To be responsible for the day to day Medical Management of the patients.
4. To be responsible for the writing up of the initial case notes and to ensure that follow up notes are kept up to date and reviewed regularly.
5. To complete upon discharge the Discharge summary and HRM60.
6. To take part in the weekly consultant rounds.

7. Other Witnesses

On 4th April 2000 a Mr James RIPLEY, 76 years of age was admitted to Haslar Hospital due to pain from arthritis and gout. As his condition was not acute he was discharged to Sultan Ward at The Gosport War Memorial Hospital for rehabilitation. Once there he was prescribed morphine sulphate tablets, a strong opioid for his pain. He became dozy suffering hallucinations and eventually slipped into unconsciousness. He was transferred back to the Haslar Hospital and diagnosed as having been given an analgesic over dose. Mr RIPLEY has a very poor memory of the whole episode. Mrs Pauline RIPLEY recalls the events. (Further work will be required around this part of evidence).

In 2002 the Chief Medical Officer commissioned Professor Richard BAKER to conduct a statistical analysis of the mortality rates at the Gosport War Memorial Hospital, including an audit and review of the use of opiate drugs. His CV (RHB/CV/1) outlines his qualifications and experience. The report itself RHB/GWMH/1 concludes that a practice of almost routine use of opiates before death had been followed in the care of patients of the Department of Medicine for Elderly People at Gosport hospital, and the attitude underlying this approach may be described in the words found in many clinical records – ‘please make comfortable’. It has not been possible to identify the origin of this practice, since evidence of it is found from as early as 1988. The practice almost certainly had shortened the lives of some patients, and it cannot be ruled out that small number of these would otherwise have been eventually discharged from hospital alive.

The practice was disclosed in several key findings.

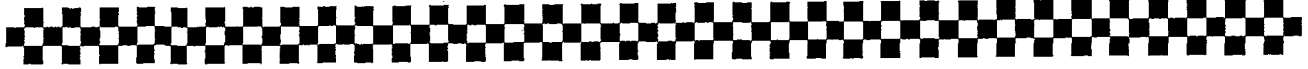
Opiates had been administered to virtually all patients who died under the care of the Department of Medicine for Elderly People at Gosport, and most had received diamorphine by syringe driver.

Opiates were administered to patients with all types of conditions, including cancer, bronchopneumonia, dementia and strokes.

Opiates were often prescribed before they were needed – in many cases on the day of admission, although they were not administered until several days or weeks later.

In many records, evidence of a careful assessment before use of opiates was absent, and the stepped approach to management of pain in palliative care had not been followed.

In addition to these findings, two other matters also gave rise to concern. The amount of information recorded in the clinical notes was often poor, and recent fractures that had contributed to deaths, most commonly fractured hips, had not been reported on MCCDs.



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URN:

Page 1 of 13

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R v

Wit No	Witness Details <small>(In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)</small>	Statement Number	*	◆
1	Name: Code A Address (HOME): Code A Occupation: STAFF NURSE E GRADE Date of Birth: Code A Telephone: HOME Code A E-mail address:			
2	Name: Code A Address (HOME): Code A Occupation: STAFF NURSE E GRADE Date of Birth: Code A Telephone: HOME Code A WORK Code A E-mail address:			
3	Name: Code A Address (HOME): Code A Occupation: RETIRED Date of Birth: Code A Telephone: HOME Code A E-mail address:			
4	Name: Code A Address (HOME): Code A Occupation: RETIRED Date of Birth: Code A Telephone: HOME Code A E-mail address:			
5	Name: Code A Address (HOME): Code A Occupation: STAFF NURSE E GRADE Date of Birth: Code A Telephone: HOME Code A WORK Code A E-mail address:			





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URN: _____
Page 2 of 13

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Wit No	Witness Details <small>(In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)</small>	Statement Number	*	◆
6	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: STAFF NURSE F GRADE Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> WORK <input type="text" value="Code A"/> E-mail address: _____			
7	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: RETIRED PATIENT CARE MANAGER Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address: _____			
8	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: RCN CONVENOR Date of Birth: <input type="text" value="Code A"/> Telephone: _____ WORK <input type="text" value="Code A"/> E-mail address: _____			
9	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: RISK SERVICES MANAGER Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address: _____			
10	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: FULL TIME RCN OFFICER Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> WORK <input type="text" value="Code A"/> E-mail address: _____			





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WITNESS LIST

URN:
Page 3 of 13

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11	Name: Code A Address (HOME): Code A Occupation: DEAN OF SCHOOL OF HUMAN AND HEALTH SCIENCES Date of Birth: Telephone: HOME Code A E-mail address:			
12	Name: Code A Address (HOME): Code A Occupation: RCN OFFICER Date of Birth: Code A Telephone: HOME Code A WORK Code A E-mail address:			
13	Name: Code A Address (HOME): Code A Occupation: SENIOR NURSE Date of Birth: Code A Telephone: HOME Code A WORK Code A E-mail address:			
14	Name: Code A Address (HOME): Code A Occupation: HOSPITAL SERVICE MANAGER Date of Birth: Code A Telephone: HOME Code A WORK Code A E-mail address:			
15	Name: Code A Address (HOME): Code A Occupation: PERSONNEL DIRECTOR Date of Birth: Code A Telephone: HOME Code A WORK Code A E-mail address:			



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URN:
Page 4 of 13

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R v _____

Wit No	Witness Details <small>(In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)</small>	Statement Number	*	◆
16	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: DIRECTOR OF PUBLIC HEALTH Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> WORK <input type="text" value="Code A"/> E-mail address:			
17	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: COMMUNICATIONS MANAGER Date of Birth: <input type="text" value="Code A"/> Telephone: WORK <input type="text" value="Code A"/> E-mail address:			
18	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: RISK ADVISER AND FACILITATOR Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address:			
19	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: STATE ENROLLED NURSE Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address:			
20	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: STAFF NURSE Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address:			



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WITNESS LIST

URN:
Page 5 of 13

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21	Name: Code A Address (HOME): Code A Occupation: RETIRED Date of Birth: Code A Telephone: HOME Code A E-mail address:			
22	Name: Code A Address (HOME): Code A Occupation: COMMUNITY STAFF NURSE Date of Birth: Code A Telephone: HOME Code A WORK E-mail address:			
23	Name: Code A Address (HOME): Code A Occupation: STAFF NURSE Date of Birth: Code A Telephone: HOME Code A E-mail address:			
24	Name: Code A Address (HOME): Code A Occupation: STUDENT Date of Birth: Code A Telephone: E-mail address:			
25	Name: Code A Address (HOME): Code A Occupation: STAFF NURSE F GRADE Date of Birth: Code A Telephone: E-mail address:			





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URN:
Page 6 of 13

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Wit No	Witness Details <small>(In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)</small>	Statement Number	*	◆
26	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: RETIRED Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address: <input type="text"/>			
27	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: STAFF NURSE Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> WORK <input type="text" value="Code A"/> E-mail address: <input type="text"/>			
28	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: RETIRED Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address: <input type="text"/>			
29	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: STAFF NURSE Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address: <input type="text"/>			
30	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: PROVIDENT AGENT Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> WORK <input type="text" value="Code A"/> E-mail address: <input type="text"/>			





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WITNESS LIST

URN:
Page 7 of 13

Date of completion:

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R v _____

Wit No	Witness Details (In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)	Statement Number	*	◆
31	Name: Code A Address (HOME): Code A Occupation: RETIRED Date of Birth: Telephone: HOME Code A E-mail address:			
32	Name: Code A Address (HOME): Code A Occupation: LEARNING SUPPORT ASSISTANT Date of Birth: Telephone: HOME Code A E-mail address:			
33	Name: Code A Address (HOME): Code A Occupation: WARD CLERK Date of Birth: Code A Telephone: HOME Code A E-mail address:			
34	Name: Code A Address (HOME): Code A Occupation: RETIRED Date of Birth: Telephone: HOME Code A E-mail address:			
35	Name: Code A Address (HOME): Code A Occupation: EX NURSING AUXILIARY Date of Birth: Code A Telephone: HOME Code A E-mail address:			



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WITNESS LIST

URN:
Page 8 of 13

Date of completion:

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Wit No	Witness Details (In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)	Statement Number	*	◆
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37	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: REGISTERED GENERAL NURSE Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address:			
38	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: PHYSIO TECHNICIAN Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address:			
39	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: STAFF NURSE Date of Birth: <input type="text" value="Code A"/> Telephone: E-mail address:			
40	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: MEDICALLY RETIRED Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> E-mail address:			

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WITNESS LIST

URN:

Page 9 of 13

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Wit No	Witness Details <small>(In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)</small>	Statement Number	*	◆
41	Name: Code A Address (HOME): Code A Occupation: STAFF NURSE Date of Birth: Code A Telephone: HOME Code A E-mail address:			
42	Name: Code A Address (HOME): Code A Occupation: RETIRED RGN Date of Birth: Code A Telephone: HOME Code A E-mail address:			
43	Name: Code A Address (HOME): Code A Occupation: MEDICINES / PHARMASIST INFORMATION MANAGER Date of Birth: Code A Telephone: MOBILE Code A WORK Code A E-mail address:			
44	Name: Code A Address (HOME): Code A Occupation: OUTPATIENT SERVICES MANAGER Date of Birth: Code A Telephone: HOME Code A WORK Code A E-mail address:			
45	Name: Code A Address (HOME): Code A Occupation: CIVIL SERVANT Date of Birth: Telephone: HOME Code A WORK Code A E-mail address:			



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WITNESS LIST

URN:

Page 10 of 13

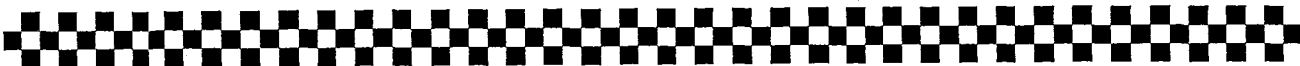
Date of completion:

* Tick if statement attached

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Wit No	Witness Details (In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)	Statement Number	*	◆
46	Name: <input type="text" value="Code A"/> Address (): Occupation: Detective Constable <input type="text" value="Code A"/> Date of Birth: Telephone: WORK <input type="text" value="Code A"/> E-mail address:			
47	Name: <input type="text" value="Code A"/> Address (): Occupation: Detective Constable <input type="text" value="Code A"/> Date of Birth: Telephone: WORK <input type="text" value="Code A"/> E-mail address:			
48	Name: <input type="text" value="Code A"/> Address (WORK): HAMPSHIRE AND ISLE OF WIGHT PRACTITIONERS AND PATIENTS SERVICE AGENCY COITBURY HOUSE FRIARSGATE WINCHESTER HAMPSHIRE Occupation: ACCESS TO MEDICAL RECORDS COORDINATOR Date of Birth: <input type="text" value="Code A"/> Telephone: WORK <input type="text" value="Code A"/> E-mail address:			
49	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: PHARMACY SERVICES MANAGER Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> WORK <input type="text" value="Code A"/> E-mail address:			
50	Name: <input type="text" value="Code A"/> Address (HOME): <input type="text" value="Code A"/> Occupation: PERSONNEL ASSISTANT Date of Birth: <input type="text" value="Code A"/> Telephone: HOME <input type="text" value="Code A"/> WORK <input type="text" value="Code A"/> E-mail address:			





RESTRICTED – FOR POLICE, PROSECUTION, AND THE WITNESS SERVICE ONLY

WITNESS LIST

URN:
Page 11 of 13

Date of completion:

* Tick if statement attached

◆ Previous convictions? Enter Y or N

R v

Wit No	Witness Details (In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)	Statement Number	*	◆
51	Name: Code A Address (HOME): Code A Occupation: SECRETARY Date of Birth: Code A Telephone: HOME Code A E-mail address:			
52	Name: Code A Address (HOME): Code A Occupation: GENERAL PRACTITIONER SELF EMPLOYED Date of Birth: Code A Telephone: HOME Code A WORK E-mail address:			
53	Name: Code A Address (HOME): Code A Occupation: PATIENTS AFFAIRS OFFICER Date of Birth: Code A Telephone: HOME Code A WORK E-mail address:			
54	Name: Code A Address (WORK): OFFICE FOR NATIONAL STATISTICS 1 DRUMMOND GATE LONDON LONDON SW1V2QQ Occupation: CIVIL SERVANT Date of Birth: Telephone: E-mail address:			
55	Name: Code A Address (): Occupation: SECRETARY TO PERSONNEL DIRECTOR Date of Birth: Code A Telephone: WORK E-mail address:			





RESTRICTED – FOR POLICE, PROSECUTION, AND THE WITNESS SERVICE ONLY

WITNESS LIST

URN:

Page 12 of 13

Date of completion:

* Tick if statement attached

◆ Previous convictions? Enter Y or N

R v

Wit No	Witness Details <small>(In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)</small>	Statement Number	*	◆
56	Name: Code A Address (HOME): Code A Occupation: RETIRED ELECTRICAL MANAGER Date of Birth: Code A Telephone: HOME Code A E-mail address:			
57	Name: Code A Address (HOME): Code A Occupation: RETIRED Date of Birth: Code A Telephone: HOME Code A E-mail address:			
58	Name: Code A Address (WORK): LEICESTER GENERAL HOSPITAL CLINICAL GOVERNANCE RESEARCH AND DEVELOPMENT UNIT GWENDOLEN ROAD LEICESTER LEICESTERSHIRE LE54PW Occupation: DIRECTOR AND PROFESSOR OF QUALITY IN HEALTH CARE Date of Birth: Code A Telephone: HOME Code A WORK E-mail address:			
59	Name: POLICE: Code A Address (): Occupation: Detective Constable: Code A Date of Birth: Code A Telephone: E-mail address:			





RESTRICTED – FOR POLICE, PROSECUTION, AND THE WITNESS SERVICE ONLY

WITNESS LIST

URN:
Page 13 of 13

Date of completion:

* Tick if statement attached

◆ Previous convictions? Enter Y or N

R v _____

Wit No	Witness Details <small>(In the 'Wit.No.' column enter 'V' if the witness is a victim, 'Vu' if vulnerable or intimidated)</small>	Statement Number	*	◆
60	Name: POLICE Code A Address (): Occupation: Date of Birth: Telephone: E-mail address:			



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Page 1 of 1

WITNESS STATEMENT

(CJ Act 1967, s.9; MC Act 1980, ss.5A(3) (a) and 5B; MC Rules 1981, r.70)

Statement of:

Age if under 18: Over 21 (if over 18 insert 'over 18') Occupation: POLICE PHOTOGRAPHER

This statement (consisting of 1 page(s) each signed by me) is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence, I shall be liable to prosecution if I have wilfully stated anything which I know to be false or do not believe to be true.

Signed: Date: 18/07/2000

I am a police photographer, appointed by Hampshire Constabulary, stationed at Cosham Police Station, Wayte St, Cosham .

At 1145 on the 29 June 2000 (29/06/2000) I attended the War Memorial Hospital, Gosport where I photographed views within room 3 (photographs 1 to 4) and room 4 (photographs 5 to 10) on Daedalus Ward.

From the 10 negatives obtained, I now produce an album of 10 photographs, marked VGR/1 . The unretouched negatives of which are held at Southern Support HQ, under reference 17734/0/00.

Signed:
2004(1)

Signature Witnessed by:

Court Print Index (Sequential)

Court Print Index

Name	Occupation	Doc ID	Page Numbers
DORRINGTON, IRENE MARGARET	RETIRED	S29	1- 5
GIFFIN, SYLVIA	RETIRED NURSE	S6A	6- 9
PARTRIDGE, MARGARET JUNE	RETIRED	S190	10- 11
GOLDSMITH, IRIS	RETIRED	S32	12- 14
TURNBULL, Beverley Anne	STAFF NURSE	S26	15- 21
TUBBRITT, ANITA	NURSE	S33	22- 27
EVANS, ISOBEL	RETIRED PATIENT CARE MANAGER	S37	28- 31
MURRAY, KEITH PAUL	RCN CONVENOR	S38	32- 38
KING, STEVE	RISK SERVICES MANAGER	S27	39- 40
WHITNEY, GERARDINE MARTINA	Registered Nurse	S42	41- 44
FROST, SUSAN ANN	PROFESSOR	S35	45- 46
BARNES, STEPHEN ROBERT	RCN OFFICER	S45	47- 50
SCAMMELL, ANTONIA JANE	SENIOR NURSE GWMH	S54	51- 54
SCAMMELL, ANTONIA JANE	MODERN MATRON	S54B	55- 55
PEACH, JANET	HOSPITAL SERVICE MANAGER	S55	56- 59
PEACH, JANET		S55A	60- 63
PEACH, JANET	HOSPITAL SERVICE MANAGER	S55B	64- 64
PARVIN, JANE ELIZABETH	PERSONNEL DIRECTOR	S28	65- 67
PARVIN, JANE ELIZABETH	PERSONNEL DIRECTOR	S28A	68- 70
ROWLES, KATHRYN ELIZABETH	DIRECTOR OF PUBLIC HEALTH	S46	71- 72
GALLEY, SUSAN	COMMUNICATIONS MANAGER	S148	73- 75
WOODLAND, BETTY	RISK ADVISER AND FACILITATOR	S52	76- 79
WIGFALL, MARGARET	ENROLLED NURSE	S30	80- 83
RYDER, GILLIAN MARY	STAFF NURSE E GRADE	S34	84- 86
MEARS, ELIZABETH MARY	RETIRED	S173	87- 88
RIGG, PAMELA SUSAN	COMMUNITY NURSE	S94	89- 90
BALL, CAROL ELIZABETH	DEPUTY NURSING MANAGER	S130	91- 94
DAVIES, DEBORAH ANNE	STUDENT	S69	95- 96
DONNE, SUE	STAFF NURSE F GRADE	S36	97- 100
MARTIN, MARY ELIZABETH	RETIRED	S135	101- 104
HALLMANN, SHIRLEY SANDRA	STAFF NURSE	S151	105- 109
HALLMANN, SHIRLEY SANDRA	NURSE	S151C	110- 115
MCILROY, JOAN	RETIRED	S313	116- 117
DOUGLAS, TINA MARIE	STAFF NURSE	S197	118- 120
SPIPKA, PAULINE	PROVIDENT AGENT	S25	121- 125
FORFAR, JOAN DOROTHY	RETIRED NURSING AUXILLIARY	S60	126- 127
CORLESS, SUSAN ELIZABETH	LEARNING SUPPORT ASSISTANT	S106	128- 131
MONDEY, JANINE ELISE	WARD CLERK	S124	132- 133
BRENNAN, MARGARET	RETIRED	S154	134- 136
TEE, JOYCE	RETIRED	S166	137- 137
BROOKS, DEBRA MARIA	STAFF NURSE	S127	138- 138
BASSON, JANE ROSALIND	RGN	S71	139- 140
DIAMOND, KAREN ELIZABETH	PHYSIO-TECHNICIAN	S81	141- 142
WEBB, VALERIE ANN	STAFF NURSE	S179	143- 144
PERRYMAN, MARGARET ROSE	MEDICALLY RETIRED	S194	145- 148
ALDRIDGE, LESLIE PATRICK	STAFF NURSE	S65	149- 149
JOINES, SHEELAGH	RETIRED RGN	S53	150- 153
FLETCHER, JULIA	MEDICINES / PHARMASIST INFORMATION MANAGER	S276	154- 156
CARTER, BEVERLY JANE	OUTPATIENT SERVICES MANAGER	S44	157- 158
CARTER, BEVERLY JANE	OUTPATIENT SERVICES MANAGER	S44C	159- 160
CARTER, BEVERLY JANE	TRUST RECORDS MANAGER	S44I	161- 161
RIX, JANICE	CIVIL SERVANT	S204A	162- 163

Court Print Index (Sequential)

RIX, JANICE	CIVIL SERVANT	S204F	164- 164
RIX, JANICE	CIVIL SERVANT	S204G	165- 165
RIX, JANICE	CIVIL SERVANT	S204I	166- 166
RIX, JANICE	CIVIL SERVANT	S204J	167- 167
RUSHWORTH, PETER	DETECTIVE CONSTABLE 2312	S62	168- 170
RUSHWORTH, PETER JOHN	DETECTIVE CONSTABLE 2312	S62A	171- 172
STEPHENS, THERESA ANN	ACCESS TO MEDICAL RECORDS COORDINATOR	S251A	173- 173
WATLING, JEFFREY J	PHARMACY SERVICES MANAGER	S5	174- 175
DIX, IRENE	PERSONNEL ASSISTANT	S281	176- 176
FARMER, YVONNE	SECRETARY	S282	177- 178
CAIRNS, ANDREW WILLIAM	GENERAL PRACTITIONER	S7	179- 180
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280	181- 182
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280N	183- 183
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280M	184- 184
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280K	185- 185
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280B	186- 186
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280E	187- 187
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280F	188- 188
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280G	189- 189
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280I	190- 190
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280J	191- 191
BURGESS, DAVID	CIVIL SERVANT	S322M	192- 192
BURGESS, DAVID	CIVIL SERVANT	S322L	193- 193
BURGESS, DAVID	CIVIL SERVANT	S322J	194- 194
BURGESS, DAVID	CIVIL SERVANT	S322A	195- 195
BURGESS, DAVID	CIVIL SERVANT	S322D	196- 196
BURGESS, DAVID	CIVIL SERVANT	S322E	197- 197
BURGESS, DAVID	CIVIL SERVANT	S322F	198- 198
BURGESS, DAVID	CIVIL SERVANT	S322H	199- 199
BURGESS, DAVID	CIVIL SERVANT	S322I	200- 200
JORDAN, WENDY	PERSONNEL ASSISTANT	S334	201- 201
RIPLEY, JAMES	RETIRED ELECTRICAL MANAGER	S40	202- 203
RIPLEY, JAMES	RETIRED ELECTRICAL MANAGER	S40A	204- 205
RIPLEY, PAULE	RETIRED	S41	206- 208
BAKER, RICHARD HENRY	PROFESSOR	S247	209- 213
ROBINSON, KATHRYN MARY	Detective Constable 424	S39	214- 214
RICHARDS, VINCENT GEORGE	POLICE PHOTOGRAPHER	S15	215- 215

Court Print Index (Alphabetical Sequence)

Court Print Index

Name	Occupation	Doc ID	Page Numbers
ALDRIDGE, LESLIE PATRICK	STAFF NURSE	S65	149- 149
BAKER, RICHARD HENRY	PROFESSOR	S247	209- 213
BALL, CAROL ELIZABETH	DEPUTY NURSING MANAGER	S130	91- 94
BARNES, STEPHEN ROBERT	RCN OFFICER	S45	47- 50
BASSON, JANE ROSALIND	RGN	S71	139- 140
BRENNAN, MARGARET	RETIRED	S154	134- 136
BROOKS, DEBRA MARIA	STAFF NURSE	S127	138- 138
BURGESS, DAVID	CIVIL SERVANT	S322M	192- 192
BURGESS, DAVID	CIVIL SERVANT	S322L	193- 193
BURGESS, DAVID	CIVIL SERVANT	S322J	194- 194
BURGESS, DAVID	CIVIL SERVANT	S322A	195- 195
BURGESS, DAVID	CIVIL SERVANT	S322D	196- 196
BURGESS, DAVID	CIVIL SERVANT	S322E	197- 197
BURGESS, DAVID	CIVIL SERVANT	S322F	198- 198
BURGESS, DAVID	CIVIL SERVANT	S322H	199- 199
BURGESS, DAVID	CIVIL SERVANT	S322I	200- 200
CAIRNS, ANDREW WILLIAM	GENERAL PRACTITIONER	S7	179- 180
CARTER, BEVERLY JANE	OUTPATIENT SERVICES MANAGER	S44	157- 158
CARTER, BEVERLY JANE	OUTPATIENT SERVICES MANAGER	S44C	159- 160
CARTER, BEVERLY JANE	TRUST RECORDS MANAGER	S44I	161- 161
CORLESS, SUSAN ELIZABETH	LEARNING SUPPORT ASSISTANT	S106	128- 131
DAVIES, DEBORAH ANNE	STUDENT	S69	95- 96
DIAMOND, KAREN ELIZABETH	PHYSIO-TECHNICIAN	S81	141- 142
DIX, IRENE	PERSONNEL ASSISTANT	S281	176- 176
DONNE, SUE	STAFF NURSE F GRADE	S36	97- 100
DORRINGTON, IRENE MARGARET	RETIRED	S29	1- 5
DOUGLAS, TINA MARIE	STAFF NURSE	S197	118- 120
EVANS, ISOBEL	RETIRED PATIENT CARE MANAGER	S37	28- 31
FARMER, YVONNE	SECRETARY	S282	177- 178
FLETCHER, JULIA	MEDICINES / PHARMASIST INFORMATION MANAGER	S276	154- 156
FORFAR, JOAN DOROTHY	RETIRED NURSING AUXILLIARY	S60	126- 127
FROST, SUSAN ANN	PROFESSOR	S35	45- 46
GALLEY, SUSAN	COMMUNICATIONS MANAGER	S148	73- 75
GIFFIN, SYLVIA	RETIRED NURSE	S6A	6- 9
GOLDSMITH, IRIS	RETIRED	S32	12- 14
HALLMANN, SHIRLEY SANDRA	STAFF NURSE	S151	105- 109
HALLMANN, SHIRLEY SANDRA	NURSE	S151C	110- 115
JOINES, SHEELAGH	RETIRED RGN	S53	150- 153
JORDAN, WENDY	PERSONNEL ASSISTANT	S334	201- 201
KING, STEVE	RISK SERVICES MANAGER	S27	39- 40
MARTIN, MARY ELIZABETH	RETIRED	S135	101- 104
MCILROY, JOAN	RETIRED	S313	116- 117
MEARS, ELIZABETH MARY	RETIRED	S173	87- 88
MONDEY, JANINE ELISE	WARD CLERK	S124	132- 133
MURRAY, KEITH PAUL	RCN CONVENOR	S38	32- 38
PARTRIDGE, MARGARET JUNE	RETIRED	S190	10- 11
PARVIN, JANE ELIZABETH	PERSONNEL DIRECTOR	S28	65- 67
PARVIN, JANE ELIZABETH	PERSONNEL DIRECTOR	S28A	68- 70
PEACH, JANET	HOSPITAL SERVICE MANAGER	S55	56- 59
PEACH, JANET		S55A	60- 63
PEACH, JANET	HOSPITAL SERVICE MANAGER	S55B	64- 64
PERRYMAN, MARGARET ROSE	MEDICALLY RETIRED	S194	145- 148

Court Print Index (Alphabetical Sequence)

RICHARDS, VINCENT GEORGE	POLICE PHOTOGRAPHER	S15	215- 215
RIGG, PAMELA SUSAN	COMMUNITY NURSE	S94	89- 90
RIPLEY, JAMES	RETIRED ELECTRICAL MANAGER	S40	202- 203
RIPLEY, JAMES	RETIRED ELECTRICAL MANAGER	S40A	204- 205
RIPLEY, PAULE	RETIRED	S41	206- 208
RIX, JANICE	CIVIL SERVANT	S204A	162- 163
RIX, JANICE	CIVIL SERVANT	S204F	164- 164
RIX, JANICE	CIVIL SERVANT	S204G	165- 165
RIX, JANICE	CIVIL SERVANT	S204I	166- 166
RIX, JANICE	CIVIL SERVANT	S204J	167- 167
ROBINSON, KATHRYN MARY	Detective Constable 424	S39	214- 214
ROWLES, KATHRYN ELIZABETH	DIRECTOR OF PUBLIC HEALTH	S46	71- 72
RUSHWORTH, PETER	DETECTIVE CONSTABLE 2312	S62	168- 170
RUSHWORTH, PETER JOHN	DETECTIVE CONSTABLE 2312	S62A	171- 172
RYDER, GILLIAN MARY	STAFF NURSE E GRADE	S34	84- 86
SCAMMELL, ANTONIA JANE	SENIOR NURSE GWMH	S54	51- 54
SCAMMELL, ANTONIA JANE	MODERN MATRON	S54B	55- 55
SPIILKA, PAULINE	PROVIDENT AGENT	S25	121- 125
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280	181- 182
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280N	183- 183
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280M	184- 184
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280K	185- 185
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280B	186- 186
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280E	187- 187
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280F	188- 188
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280G	189- 189
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280I	190- 190
SPRAGG, JACQUELINE ANN	PATIENTS AFFAIRS OFFICER	S280J	191- 191
STEPHENS, THERESA ANN	ACCESS TO MEDICAL RECORDS COORDINATOR	S251A	173- 173
TEE, JOYCE	RETIRED	S166	137- 137
TUBBRITT, ANITA	NURSE	S33	22- 27
TURNBULL, Beverley Anne	STAFF NURSE	S26	15- 21
WATLING, JEFFREY J	PHARMACY SERVICES MANAGER	S5	174- 175
WEBB, VALERIE ANN	STAFF NURSE	S179	143- 144
WHITNEY, GERARDINE MARTINA	Registered Nurse	S42	41- 44
WIGFALL, MARGARET	ENROLLED NURSE	S30	80- 83
WOODLAND, BETTY	RISK ADVISER AND FACILITATOR	S52	76- 79

RESTRICTED

MG 12

EXHIBIT LIST

Page 1 of 11

URN:

R v

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
COPY OF DRAFT LETTER WITH ACCOMPANYING LETTER 15/2/91 TO MRS GRIFFIN	KPM/1	Person Producing MURRAY KEITH Current Location:	
COPY OF DRAFT LETTER DATE 28/02/1991 FROM MRS I EVANS TO MRS S GRIFFIN	KPM/2	Person Producing MURRAY KEITH Current Location:	
COPY OF DRAFT LETTER 4/3/91 TO MRS I EVANS FROM KEITH MURRAY	KPM/3	Person Producing MURRAY KEITH Current Location:	
COPY OF HANDWRITTEN LETTER DATED 5/3/91 TO MRS EVANS FROM MRS GRIFFIN	KPM/4	Person Producing MURRAY KEITH Current Location:	
COPY OF LETTER DATE 30/4/91 FROM K MURRAY IN FORM OF STEWARD NOTICE	KPM/5	Person Producing MURRAY KEITH Current Location:	
COPY OF LETTER DATED 30/04/91 TO MRS EVANS FROM KEITH MURRAY	KPM/6	Person Producing MURRAY KEITH Current Location:	
COPY OF LETTER DATED 14/11/91 TO MRS I EVANS FROM K MURRAY	KPM/7	Person Producing MURRAY KEITH Current Location:	
CV SUSAN FROST	SAF/VC/1	Person Producing FROST SUSAN Current Location:	

Date of completion:

2004(1)

RESTRICTED

MG 12

EXHIBIT LIST

Page 2 of 11

URN:

R v _____

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
RED PLASTIC DOCUMENT HOLDER CONT CORRES RELATING GWMH DATED 11/1/92	JEP/GWMH/1	Person Producing PARVIN JANE ELIZABETH Current Location:	
RECORD OF MEETING WITH A TUBBRIIT AND B TURNBALL 1300 HRS 16/9/02	TJS/1	Person Producing SCAMMELL TONI Current Location:	
MINUTES OF MEETING 18/9/02	TJS/2	Person Producing SCAMMELL TONI Current Location:	
LETTERS AND MINUTES OF MEETINGS REGARDING REDCLYFFE ANNEX	SG/GWMH/1	Person Producing GIFFIN SYLVIA Current Location:	
CLEAR PLASTIC WALLET CONT CORR RE TO GWMH 11/1/92 ADD B TURNBALL	JEP/GWMH/1/BA T	Person Producing TURNBALL BEVERLY Current Location:	
CONTROLLED DRUGS RECORD BOOK 25/6/95 - 24/5/96	JP/CDRB/20	Person Producing PEACH JANET Current Location:	
CONTROLLED DRUGS RECORD BOOK 6/3/95 - 8/12/96	JP/CDRB/21	Person Producing PEACH JANET Current Location:	
CONTROLLED DRUGS RECORD BOOK 22/11/96 - 23/6/97	JP/CDRB/22	Person Producing PEACH JANET Current Location:	

Date of completion:

2004(1)

RESTRICTED

MG 12

EXHIBIT LIST

Page 3 of 11

URN:

R v _____

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
CONTROLLED DRUGS RECORD BOOK 8/12/96 - 22/12/97	JP/CDRB/23	Person Producing PEACH JANET Current Location:	
WARD CONTROLLED DRUGS RECORD BOOK 2/9/98 - 18/6/99	JP/CDRB/47	Person Producing PEACH JANET Current Location:	
WARD CONTROLLED DRUGS RECORD BOOK 18/6/99 - 4/7/01	JP/CDRB/48	Person Producing PEACH JANET Current Location:	
CONTROLLED DRUGS RECORD BOOK 12/7/97 - 5/3/02	JP/CDRB/24	Person Producing PEACH JANET Current Location:	
BED NUMBERS REGISTER NOV 1992 - JAN 1997	JP/BNR/1	Person Producing PEACH JANET Current Location:	
NOTES MADE OF CONVERSATION WITH JANE PARVIN	BW/1	Person Producing WOODLAND BETTY Current Location:	
ROUGH NOTES MADE AT MEETING 18/9/02 GWMH	BW/2	Person Producing WOODLAND BETTY Current Location:	
TYPED NOTES OF MEETING 18/09/02	BW/3	Person Producing WOODLAND BETTY Current Location:	

Date of completion:

2004(1)

RESTRICTED

MG 12

EXHIBIT LIST

Page 4 of 11

URN:

R v _____

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
HANDWRITTEN LIST OF DOCUMENTS GIVEN BY ANITA TUBBRIT TO JANE PARVIN	BW/4	Person Producing WOODLAND BETTY Current Location:	
DIARY 2001 OF JOAN MCILROY	JMI/1	Person Producing MCILROY JOAN Current Location:	
DIARY 2002 OF JOAN MCILROY	JMI/2	Person Producing MCILROY JOAN Current Location:	
LETTER TO PHILLIP BEAD DATED 8/5/00	MRP/1	Person Producing PERRYMAN MARGARET Current Location:	
MEMO TO SNN PERRYMAN DATED 14/5/00	MRP/2	Person Producing PERRYMAN MARGARET Current Location:	
HANDWRITTEN ROUGH LETTER TO PHILLIP BEAD	MRP/3	Person Producing PERRYMAN MARGARET Current Location:	
MEDICAL RECORDS DEVINE ELSIE	BJC/16	Person Producing CARTER BEVERLY JANE Current Location:	
MEDICAL RECORDS LAVENDER ELSIE	BJC/30	Person Producing CARTER BEVERLY JANE Current Location:	

Date of completion:

2004(1)

RESTRICTED

MG 12

EXHIBIT LIST

Page 5 of 11

URN:

R v _____

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
MEDICAL RECORDS CUNNINGHAM ARTHUR	BJC/15	Person Producing CARTER BEVERLY JANE Current Location: FAREHAM MIR	
MEDICAL RECORDS GREGORY SHEILA	BJC/21	Person Producing CARTER BEVERLY JANE Current Location: FAREHAM MIR	
MEDICAL RECORDS WILSON ROBERT	BJC/55	Person Producing CARTER BEVERLY JANE Current Location: FAREHAM MIR	
MEDICAL RECORDS SPURGIN ENID	BJC/45	Person Producing CARTER BEVERLY JANE Current Location: FAREHAM MIR	
MEDICAL RECORDS OF HELENA SERVICE	BJC/72	Person Producing CARTER BEVERLY Current Location: FAREHAM MIR	
MEDICAL RECORDS OF RUBY LAKE	BJC/67	Person Producing CARTER BEVERLY Current Location:	
MEDICAL RECORDS OF LESLIE PITTOCK	BJC/71	Person Producing CARTER BEVERLY Current Location:	
ADMISSION BOOK DRYAD WARD 93/96	BJC/88	Person Producing CARTER BEVERLY Current Location:	

Date of completion:

2004(1)

RESTRICTED

MG 12

EXHIBIT LIST

Page 6 of 11

URN:

R v _____

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
ADMISSION BOOK DRYAD WARD 97/03	BJC/89	Person Producing CARTER BEVERLY Current Location:	
ADMISSION BOOK DAEDALUS WARD 01/03	BJC/90	Person Producing CARTER BEVERLY Current Location:	
THIRTY-TWO CREMATION CERTIFICATES	PJR/CREM/2	Person Producing RUSHWORTH PETER Current Location:	
MEDICAL RECORDS RELATING ELSIE LAVENDER	JR/11A	Person Producing RIX JANICE Current Location:	
ELSIE LAVENDER: X RAYS	JR/XR/1	Person Producing RIX JANICE Current Location:	
MEDICAL RECORDS SHEILA GREGORY B. 12/7/08	JR/12	Person Producing RIX JANICE Current Location:	
MEDICAL RECORDS ROBERT WILSON B. 8/3/23	JR/13	Person Producing RIX JANICE Current Location:	
MEDICAL RECORDS: ENID SPURGIN B. 16/2/07	JR/14	Person Producing RIX JANICE Current Location:	

Date of completion:

2004(1)

RESTRICTED

MG 12

EXHIBIT LIST

Page 7 of 11

URN:

R v _____

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
MEDICAL RECORDS: LESLIE PITTOCK B. Code A	JR/15	Person Producing RIX JANICE Current Location:	
MEDICAL RECORDS: HELENA SERVICE B Code A	JR/16	Person Producing RIX JANICE Current Location:	
MEDICAL RECORDS RELATING RUBY LAKE	JR/19A	Person Producing RIX JANICE Current Location:	
MEDICAL RECORDS ELSIE DEVINE	TAS/1	Person Producing STEPHENS THERESA Current Location:	
G P MEDICAL RECORDS ARTHUR CUNNINGHAM	TAS/2	Person Producing STEPHENS THERESA ANNE Current Location:	
G P MEDICAL RECORDS ELSIE LAVENDER	TAS/3	Person Producing STEPHENS THERESEA ANNE Current Location:	
G P MEDICAL RECORDS SHEILA GREGORY	TAS/4	Person Producing Current Location:	
G P MEDICAL RECORDS ROBERT WILSON	TAS/5	Person Producing STEPHENS THERESA ANNE Current Location:	

Date of completion:

2004(1)

RESTRICTED

MG 12

EXHIBIT LIST

Page 8 of 11

URN:

R v _____

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
G P MEDICAL RECORDS ENID SPURGIN	TAS/7	Person Producing STEPHENS THERESA ANNE Current Location:	
G P MEDICAL RECORDS LESLIE PITTOCK	TAS/8	Person Producing STEPHENS THERESA ANNE Current Location:	
G P MEDICAL RECORDS HELENA SERVICE	TAS/9	Person Producing STEPHENS THERESA ANNE Current Location:	
G P MEDICAL RECORDS RUBY LAKE	TAS/10	Person Producing STEPHENS THERESA ANNE Current Location:	
HANDBOOK COVERING PALLATIVE CARE	JJW/7	Person Producing WATLING JEFFREY Current Location:	
COPY OF FAX HEADED PROTOCOL FOR PRESCRIPTION AND ADMINISTRATION	ID/FGPCT/1	Person Producing DIX IRENE Current Location:	
ADMINISTRATIVE PROCEDURE	JAS/1	Person Producing SPRAGG Current Location:	
RELEVANT PAGES CERTIFICATION OF DEATH	JAS/2	Person Producing SPRAGG Current Location:	

Date of completion:

2004(1)

RESTRICTED

MG 12

EXHIBIT LIST

Page 9 of 11

URN:

R v _____

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
ENVELOPE	JAS/3	Person Producing SPRAGG Current Location:	
FORMS B,C, F.	JAS/4	Person Producing SPRAGG Current Location:	
STUB OF CAUSE OF DEATH CERTIFICATE NUMBER 850788 LESLIE PITTOCK	JAS/CODC/1	Person Producing SPRAGG Current Location:	
STUB OF CAUSE OF DEATH CERTIFICATE NUMBER 231670 ROBERT WILSON	JAS/CODC/2	Person Producing SPRAGG Current Location:	
STUB OF CAUSE OF DEATH CERTIFICATE NUMBER 727570 SHEILA GREGORY	JAS/CODC/4	Person Producing SPRAGG Current Location:	
STUB OF CAUSE OF DEATH CERTIFICATE NUMBER 727567 ELSIE DEVINE	JAS/CODC/6	Person Producing SPRAGG Current Location:	
STUB OF CAUSE OF DEATH CERTIFICATE NUMBER 850961 ELSIE LAVENDER	JAS/CODC/9	Person Producing SPRAGG Current Location:	
STUB OF CAUSE OF DEATH CERTIFICATE NUMBER 231821 ENID SPURGIN	JAS/CODC/10	Person Producing SPRAGG Current Location:	

Date of completion:

2004(1)

RESTRICTED

MG 12

EXHIBIT LIST

Page 10 of 11

URN:

R v _____

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
STUB OF CAUSE OF DEATH CERTIFICATE NUMBER 231539 RUBY LAKE	JAS/CODC/11	Person Producing SPRAGG Current Location:	
STUB OF CAUSE OF DEATH CERTIFICATE NUMBER 735757 HELENA SERVICE	JAS/CODC/13	Person Producing SPRAGG Current Location:	
STUB OF CAUSE OF DEATH CERTIFICATE NUMBER 231662 ARTHUR CUNNINGHAM	JAS/CODC/14	Person Producing SPRAGG Current Location:	
CERTIFIED COPY OF A DEATH CERTIFICATE (PITTOCK)	DB/2001	Person Producing BURGESS DAVID Current Location:	
A CERTIFIED COPY OF A DEATH CERTIFICATE (WILSON)	DB/2002	Person Producing BURGESS DAVID Current Location:	
A CERTIFIED COPY OF A DEATH CERTIFICATE (GREGORY)	DB/2005	Person Producing BURGESS DAVID Current Location:	
A CERTIFIED COPY OF A DEATH CERTIFICATE (DEVINE)	DB/2007	Person Producing BURGESS DAVID Current Location:	
A CERTIFIED COPY OF A DEATH CERTIFICATE (LAVENDER)	DB/2010	Person Producing BURGESS DAVID Current Location:	

Date of completion:

2004(1)

RESTRICTED

MG 12

EXHIBIT LIST

Page 11 of 11

URN:

R v _____

* Tick if exhibit attached

Description as per label (Indicate if copy)	Exhibit Ref. No.	Person producing and current location of exhibit	*
A CERTIFIED COPY OF A DEATH CERTIFICATE (SPURGIN)	DB/2011	Person Producing BURGESS DAVID Current Location:	
A CERTIFIED COPY OF A DEATH CERTIFICATE (LAKE)	DB/2012	Person Producing BURGESS DAVID Current Location:	
A CERTIFIED COPY OF A DEATH CERTIFICATE (SERVICE)	DB/2014	Person Producing BURGESS DAVID Current Location:	
A CERTIFIED COPY OF A DEATH CERTIFICATE (CUNNINGHAM)	DB/2015	Person Producing BURGESS DAVID Current Location:	
JOB DESCRIPTION FOR CLINICAL ASSISTANT AT G W M H	WJ/CA/1	Person Producing JORDAN WENDY Current Location:	
CV OF PROFESSOR RICHARD BAKER	RHB/CV/1	Person Producing BAKER RICHARD Current Location: <i>CHIEF MEDICAL OFFICER</i>	
REPORT OF PROFESSOR BAKER RELATING TO THE GWMH	RHB/GWMH/1	Person Producing BAKER RICHARD Current Location:	
ROOM 3 & 4 GOSPRT WAR MEMORIAL HOSPITAL (PHOTOGRAPHS)1145	VGR/1	Person Producing RICHARDS VINCE Current Location:	

Date of completion:

2004(1)