

Other Document Form

Number

1140

Title EMAILS RE CATEGORY 3B SUBJECTS & FURTHER WORK.

(Include source and any document number if relevant)

Receivers instructions urgent action Yes No

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Further actions no(s)

When satisfied all action raised Office Manager to endorse other Document Master Number Form.

Code A	
O/M	SIO
Indexer	

Code A

From: Williams, David (DCI)
Sent: 11 June 2004 08:27
To: **Code A**
Cc: **Code A**; Grocott, David; **Code A**
Subject: FW: OP ROCHESTER. EXHUMATION.

Code A

Can you please confirm how many of the 9 3B's have been buried therefore being available for exhumation. (I am not sure we will be taking this route). Thanks DW.

-----Original Message-----

From: Williams, David (DCI)
Sent: 10 June 2004 19:52
To: **Code A**
Cc: **Code A**; Grocott, David; **Code A**
Subject: OP ROCHESTER.

Dear All..

Please find attached update re the 3b's an amalgum of previous experts comments.. for your info.. DW.



OP ROCHESTER
 overview doc 3b.....

Code A Could you please provide me with a brief report as to where we are with the statementing of family group members in respect of the 3b's. (I appreciate that the recent BAKER additions have not been notified) and an assessment as to the families co-operation or otherwise to date. We will need to consider this should we ratchett up FLO response.

Code A If we have not heard from Anne NAYSMITH or Peter LAWSON by Monday on your return can you please ring them to give us their considered opinion in respect of the top four. In any event, I think we should go with DEVINE, as the preparatory work has been done.

Thanks.DW.

Code A

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Sent: 10 June 2004 19:52
To: Code A
Cc: Code A; Grocott, David; Code A
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Subject: OP ROCHESTER.

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OP ROCHESTER
overview doc 3b.....

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Thanks.DW.



OP ROCHESTER. June 2004.

CONFIDENTIAL. Detail of individual cases not to be released without the authority of SIO or Deputy.

Subject Areas for discussion.

- Ongoing work of the clinical assessment team prioritising the nine, 3b category cases ie 'negligent care that is to day outside the bounds of acceptable clinical practice, and cause of death unclear.'
- 3b Cases are :-

1. Arthur CUNNINGHAM. 79. 21st September 1998 – 26th September 1998. Gosport War Memorial Hospital. [Code A]

Code A

2. Elsie DEVINE. 88. 21st October 1999 – 21st November 1999. Gosport War Memorial Hospital. [Code A]

Code A

inappropriately prescribed for sedation.

3. Sheila GREGORY. 91. 3rd September 1999 - 22nd November 1999. Gosport War Memorial Hospital. [Code A]

Code A

Code A

15.11.1999.

- 4. Elsie LAVENDER. 83. 22nd February 1996 – 6th March 1996. **Code A**

Code A

- 5. Enid SPURGIN. 92. 26th March 1999 – 12th April 1999. Gosport War memorial hospital. **Code A**

Code A

- 6. Jean STEVENS. 73. 20th May 1999 – 22nd May 1999. Gosport War Memorial Hospital. **Code A**

Code A

- 7. Robert WILSON. 74. 22nd September 1998 – 18th October 1998. Gosport War memorial Hospital. **Code A**

Code A

Code A

8. Leslie PITTOCK. 82. 5th January 1996 – 24th January 1996. Gosport War Memorial Hospital. **Code A**

Code A

9. Helena SERVICE. 99. 2ND June 1997 – 5th June 1997. Gosport war memorial hospital. **Code A**

Code A

- As agreed by SIO WATTS, 4 Four of these cases are to be prioritised and fast-tracked to CPS, with a view to an early decision to be taken on the sufficiency of evidence to support continuing investigation/prosecution. This strategy will also have the effect of engaging counsel early into the process. It is hoped that the first cases will be forwarded to CPS by September 2004.
- Liaison with the Fareham and Gosport primary healthcare trust is ongoing. It is anticipated that the witness interview of 30 or so healthcare professionals in respect of the DEVINE case should commence from Thursday 17th June 2004 under the supervision of **Code A**. Potential media issues arising are currently being considered by relevant stakeholders.
- Dr Andrew WILCOCK (Nottingham University) has been commissioned to provide the relevant expert evidence commencing with the priority cases from late July 2004.

- Once Dr WILCOCK'S expert evidence is available then having regard to his professional opinion, Healthcare professionals may be interviewed under caution in respect of allegations of Gross negligence manslaughter.
- Liaison continues with the Crown Prosecution Service, Anne ALEXANDER solicitor representing 43 families, and the Chief Medical officer and General Medical Council in respect of ongoing investigation.
- Priority is to be given to the appointment of a police family Liaison co-ordinator DI BISSELL.
- One significant issue to be addressed is informing the families of 16 deceased named as 'cases of concern' in the Baker report commissioned by the CMO. Two of these cases, PITTOCK and SERVICE identified through the independent work of Professor BAKER have been assessed as 3b's by the experts commissioned through the police investigation.
- Mathew LOHN (Field Fisher Waterhouse) indicated on the 9th June 2004 that he required 10 days to complete his quality assurance work on the 54 cases categorised as 2's ie.. care assessed as sub optimal but not negligent, ie outside the bounds of acceptable clinical practice.

DW.DCI 7227.
10.6.2004.