

# **Operation ROCHESTER**

# Investigation Update Bulletin for Family Group Members - 30th April 2003

### **Investigation Team**

The Operation ROCHESTER investigation team are continuing our enquiries from the Major Crime Investigation Unit in Southampton. The intention of our investigation remains the same. We are seeking to establish whether any crime has taken place and if so by whom. We will pursue our investigation with open minds, with integrity and professionalism. Our investigation will follow evidence and we will not prejudge events. All areas of liability – should such exist – will be considered, whether personal or corporate.

# **Clinical Team**

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On Saturday 8<sup>th</sup> and Sunday 9<sup>th</sup> March 2003 the investigation team met with a team of five medical and nursing experts, the Clinical Team. During these meetings the Clinical Team were fully briefed on the Police investigation and were provided with hospital medical records in respect of all sixty two cases, which are currently being reviewed. The medical records had been copied to DVD for ease of search and reference.

The Clinical Team were then tasked to individually analyse each set of the medical records and to provide an expert opinion on the care and treatment of the patients concerned. A matrix was devised by the Clinical Team to assist in the assessment and evaluation of each case. A further meeting was arranged for Saturday 26<sup>th</sup> April, by which time the Clinical Team estimated that they should have analysed the first twenty sets of medical records.

On Saturday 26<sup>th</sup> April the investigation and Clinical Teams held a meeting as arranged. The purpose of this meeting was to discuss the cases which had, to date, been analysed and to ensure that the agreed matrix for evaluation was effective. The Clinical Team are working as expected and there are no problems with their systems of assessment. A further meeting will take place with the Clinical Team towards the end of June and it is estimated that all sixty two sets of medical records will be analysed by early Autumn 2003.

# **Other Enquiries**

The investigation team are currently tracing, interviewing and taking statements from all medical and nursing staff who have worked at the Gosport War Memorial Hospital since 1988. As can be imagined, this is also a massive task as it involves interviewing hundreds of people. However, it is essential to the enquiry that we obtain as much information as possible. It is anticipated that these interviews will be concluded by the time the Clinical Team have reached their findings.

#### <u>Coroner</u>

On the 11<sup>th</sup> of March 2003, Detective Chief Superintendent Watts and I met with Mr Kenroy (HM Coroner South East Hampshire) and Mr Horsley. Mr Kenroy is soon to retire from his current post and will be replaced by Mr Horsley. The purpose of the meeting was to provide Mr Kenroy with an update as to the progress of the investigation and to fully brief Mr Horsley as to the case.

# Alexander Harris

On the 14<sup>th</sup> March 2003, Detective Chief Superintendent Watts and I met with Ann Alexander at her office in Altringham. During this meeting we were able to discuss a number of issues and I am sure by now that those of you represented by Alexander Harris will have seen the minutes. It was during this meeting that Ann Alexander raised the idea of producing a short bulletin in order to keep each of you appraised as to the direction of the investigation. We considered this to be a good idea. It was recognized by both Ms Alexander and ourselves that considerable care would need to be taken in order to ensure that the integrity of the investigation was not in any way affected by its content. As you will no doubt understand, a balance must always be struck between keeping relatives informed and not – at the same time – reveal anything that could compromise the integrity of the investigation.

# **Conclusion**

I hope the above has proved to be of some interest. This bulletin is not intended to replace any other channel of communication. Each and every one of you are more than welcome to contact should you wish to do so, Detective Constable Code A who will be able to convey any issues you have into the incident room, and I know that Ann Alexander is also available to act as a conduit for her clients.

With regards and best wishes

Nigel Niven