RESTRICTED

Form MG11(T)

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WITNESS STATEMENT

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

Statement of: SHAW, FREDA VAUGHAN

Age if under 18: OVER 18 (if over 18 insert 'over 18') Occupation: STAFF NURSE

This statement (consisting of 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:

F.V. Shaw

Date:

30/09/2005

I am Freda SHAW and am employed as a Staff Nurse at Gosport War Memorial Hospital, Hants.

I have been asked today regarding Shirley HALLMANN'S voicing of her concerns regarding the use of syringe drivers at the hospital some years ago.

I cannot recall any such conversations with Shirley. I did not work with her very often. I never had any reservations myself, however I had previously worked in nursing homes and basically learned about the use of drivers at the hospital.

As regards cover when the surgery was shut, I believe there you were diverted to another number and the on call doctor for that surgery would attend as necessary. I cannot recall this happening whilst I was on duty.

Trained nursing staff are trained to confirm death. All signs of life, heart, pulse, dilated pupils, reaction to light and sign of respiration whist listening with a stethoscope are checked.

In my experience in both nursing homes and at the hospital it was normal for the doctor to allow trained nursing staff to confirm death. The doctor would attend at the first opportunity to certify death.

F.V. Shaw

Signed: F.V. Shaw

2004(1)

Signature Witnessed by:

Code A

RESTRICTED

Form MG11(T)(CONT)
Page 2 of 2

Continuation of Statement of: SHAW, FREDA VAUGHAN

Signed: F.V. Shaw 2004(1)

Signature Witnessed by: Code A