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RECORD OF INTERVIEW

Number: Y8

Enter type: ROTI
(SDN, ROTI, Contemporaneous Notes, Full Transcript)

Person interviewed:

Place of interview: PARK GATE POLICE STATION

Date of interview: 03/07/2000

Time commenced: 1411 Time concluded: 1441

Duration of interview: 30 MINS Tape reference nos.
(♦) 44/00/31574

Interviewing Officer(s): DC DC

Other persons present: Mr David ROACHE - Solicitor

Police Exhibit No: LMC/AF/24 Number of Pages: 34

Signature of interviewing officer producing exhibit

Tape counter times(♦)	Person speaking	Text
	DC <input type="text" value="Code A"/>	This interview is being tape recorded, I am DC <input type="text" value="Code A"/> , the other police officer present is....
	DC <input type="text" value="Code A"/>	DC <input type="text" value="Code A"/>
	DC <input type="text" value="Code A"/>	The date is Monday the 3 rd of July, year 2000, the time by my watch is 14.11. This interview

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is being conducted in the interview room at Park Gate Police Station, okay. I'm interviewing [Code A], please can you give your full name and date of birth?

[Code A]

Code A

DC [Code A]
SOLICITOR

Okay, thank you and also present is....

David ROACHE, solicitor for [Code A]

[Code A]

0.47 DC [Code A]

Okay. At the conclusion of the interview I'll give you a notice explaining what happens to the tapes, okay, there's basically a introduction there as to what's going to happen to you from here, pretty much what I've explained already. Right the next bit now is basically the explanation of what we're trying to achieve by this, okay. The Hampshire Police have undertaken an investigation into the circumstances of the death of Mrs Gladys RICHARDS on the 21st of August 1998 at Gosport War Memorial Hospital. The investigation centres around an allegation that Mrs RICHARDS was unlawfully killed as a result of a course of treatment that was embarked upon between the 17th and the 21st of August whilst admitted to this hospital. We are seeking to interview those members of the nursing staff who had a duty of care to Mrs

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RICHARDS during that time and who in some cases may have provided her with direct nursing care or treatment in order that an account can be obtained to particular circumstances and issues that existed between those dates. I emphasise that this is a search for fact and your account and answers will be carefully assessed in the light of information arising from other interviews with staff and general correspondence. As a result of this interview and several others further guidance will be sought from professional bodies and ultimately the Crown Prosecution Service on how we should proceed. Your solicitor has been provided with relevant material prior to this interview commencing. I must emphasise that you are not under arrest and you are free to leave at any time, your right to free legal advice in private extends throughout the period you're at the police station, okay. Now the next part is the caution, you do not have to say anything but it may harm your defence if you do not mention when questioned something which you later rely on in court, anything you do say may be given in evidence, okay. Do you understand the caution?

Code A

Yes.

DC Code A

Okay. It's quite harshly worded and there's a

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lot there but basically, myself and Paul are here to obtain information from those prepared to or able to give us various answers to the questions we're asking, okay. I mean what we'll do in a minute is we'll go over the background of the hospital procedure, what people's roles are, what's expected of them and obviously what memory's you have of Mrs RICHARDS at that time. From that we basically will be collating all this information and passing it onto initially senior officers and also independent bodies like a medical expert, I mean for example there's a lot of information that we're not really able to comment on because we're not trained medical staff so really we're not in a position to make any sort of judgements about anything so that will be dealt with independently by someone who is actually an expert in that field, so no decision will be taken lightly by someone who really doesn't know much about it, so that basically try and put your mind at rest with that and that's the situation, that's what we're look to do is just to try and get an account from you and just it's in the background to the hospital and what you can remember about Mrs RICHARDS really, okay.

Code A

Mmm, mmm.

DC Code A

I'd like to start off by asking if you could tell me

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- your role within the hospital and whether that's different to August '98, what it is, what you're expected to do and basically how you sort of fit into the department?
- 4.13 **Code A** Erm I'm a health care support worker. My role is erm giving general care to the patients and making sure that they're comfortable, you know I work nights and yeah making sure that they're comfortable, toileting and just you know general care really.
- DC **Code A** Right, okay. As I understand it as a health care support worker, it's sort of a new term for auxiliary nurse. Is that right?
- Code A** Yep.
- DC **Code A** And basically is it right to say you're sort of there to assist the trained staff...
- Code A** Yes.
- DC **Code A** ...and basically it's patients welfare that you're sort of primarily responsible for...
- Code A** Yes.
- DC **Code A** ...Would that be right?
- Code A** That's it.
- DC **Code A** Now you mention you do nights and is that a permanent...
- Code A** Yes
- DC **Code A** ...duty you do and that's all on Daedalus ward...
- Code A** Yes.
- DC **Code A** ...at Gosport?

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- 5.11 [Code A] Erm I do, you know we do go to other wards if we are required...
- [Code A] DC [Code A] Right
- [Code A] ...and if we're not required on ours then we can be shifted, you know put to you know wards.
- [Code A] DC [Code A] Yeah, but you're sort of based Daedalus...
- [Code A] Yes
- [Code A] DC [Code A] ...that would be your first sort of ...?
- [Code A] Yes.
- [Code A] DC [Code A] Okay. Now can you remember what you were doing on, between the 17th and the 21st. Have you had a chance to look at your duty sheet?
- [Code A] Erm yes I was working erm I believe it was the 19th, 20th, and the 21st but I can only recall the evening of Mrs Gladys RICHARDS you know when she died.
- [Code A] DC [Code A] Right, okay well perhaps you could, you could talk me through your, your recollections of dealings with Mrs RICHARDS?
- [Code A] We came in on handover, we'd given a handover erm and they said that you know the relative, erm the relatives were there and erm that she was you know poor..very poorly. We come out of handover, I think the staff nurse that was on duty did go and talk to the relatives, came out and we sort of carried on with our work, we worked from one end of the ward right round to the other end of the ward, erm when we

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got to Mrs Gladys RICHARDS we asked the relatives if there was anything that they would like to, us to be done with, they said no, they said that you know people had already seen to them prior to us going...

6.47 DC **Code A**

Code A

Right

...onto thing so at that point there was, you know we carried on round seeing to the other patients.

DC **Code A**

Right so she'd died by then this is after death was it?

Code A

Erm no, no...

DC **Code A**

Oh right, okay.

Code A

... she hadn't died by then, erm I'm not quite sure of the time of death but erm it was fairly early erm we hadn't been on shift that long when Mrs Gladys RICHARDS died erm Mrs Gladys RICHARDS' daughters did ask us if they, you know if they could actually when Mrs...when she had died whether they could actually do the bits and pieces, lay her out...

7.35 DC **Code A**

Code A

Right, yeah.

...erm and we said no there was definitely no problem with that erm then you know there are certain things that they couldn't do so I can't remember who came in with me, I was one erm that went in there and what we did we had to erm tag you know three tags...

DC **Code A**

Oh right, yeah.

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Code A

...and er wrap her up in a sheet...

DC Code A

Oh right.

Code A

...erm and we did have to roll the patient over

Code A

DC Code A

Code A

Code A

Code A

DC Code A

Yeah

Code A

...and you know they are changed sort of regularly, you know they;

Code A

Code A

DC Code A

Oh right

Code A

Code A

8.50

DC Code A

Oh right so without having to change the whole bedding all the time...

Code A

...Yes, well hopefully that, yeah...

DC Code A

...hopefully

Code A

Code A

made the tags and put the sheet on her and erm thing but erm I think there was a granddaughter there who did knock the door when we were actually doing that...

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DC **Code A**

Oh right, yeah.

Code A

...erm I can't remember what the nature of the...why she actually knocked the door because I can't remember that erm and that was about basically at erm when the person was done she was then taken down to the mortuary.

DC **Code A**

Right, okay. Okay, thanks for that, now I understand her, Mrs RICHARDS two daughters were present for the last few days on and off. Do you have any recollection of any conversations you may have had with them or any conversa....anything they may have said to you?

10.06 **Code A**

No, the only thing I can, I can vaguely remember is that erm I can't remember if this was the first day or the, my second night that I was on we did ask if they would like erm tea and some toast because I mean you know this is before we started at six o'clock and because you know they'd been there all evening...

DC **Code A**

Yeah

Code A

...and that was erm basically it, I cannot recall giving any other care to Mrs RICHARDSON.

DC **Code A**

Right, okay so other than you going and just make sure on that night which is the 21st, you went in and saw Mrs RICHARDS and said can I do anything, no you're alright. Were both sisters there then, both daughters there?

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	Code A	Yes there was and I think there was a granddaughter there...
	DC Code A	Right, okay
	Code A	...but I, I wouldn't actually...
	DC Code A	Okay so you go and do the rest of your rounds and then...
	Code A	...I think if I can remember rightly erm the daughters had come out and said that their mother had actually...
11.10	DC Code A	Had died.
	Code A	...erm died.
	DC Code A	Right, okay. Do you know who confirmed death that night?
	Code A	Erm the staff nurse...
	DC Code A	Right.
	Code A	...would have confirmed death.
	DC Code A	Do you know who that was?
	Code A	Erm I think it was erm Mrs Sylvia GIFFIN.
	DC Code A	Oh right, yeah, okay.
	Code A	Yeah and she you know was able to confirm...
	DC Code A	Yeah
	Code A	...confirm death.
	DC Code A	Okay, right, thanks very much for that.
	DC Code A	When you prepared her, you say you laid her out and put her in the sheet and everything. Did you notice anything wrong with Mrs RICHARDS at all?
	Code A	No.

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DC No?

No.

11.55 DC It's just that another nurse has mentioned that fact that she remembers that she had a...

Er yeah I cannot remember her actually having...

DC What do you call it a...?

...a haematoma.

DC That's the one.

Yeah.

DC Yeah.

Yeah, I can't recall, I can't personally recall that myself.

DC Right, in fact just for the relevance of the tape I don't think she remembers somebody about that time but she couldn't remember whether it was Mrs RICHARDS or not I think that's fair to say isn't it, yeah, yeah.

Yeah.

DC Right, okay.

DC Okay, right I wonder if you'd just have a look at the...through the nursing care plan which I have here which is I understand it is sort of completed on occasions when there's something significant to say about a particular patient. (coughs) excuse me. If you could just have a look through that to see if there's and it goes through for a few pages whether there is any entries

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- relevant to you or anything that you may recall thinking, oh yes I was there at that time and perhaps could further clarify for us.
- 13.16 Code A (Looking through documents). No, none of these erm signatures (inaudible)
- DC Code A No, and there's nothing there that you think you can recall and we've obviously got these other care plans here which I, relate to various headings don't they, nutrition and do you know when these are sort of...why these are completed in this fashion, you know nutrition, constipation and I think the other one is personal hygiene, is there a particular reason why they ask for it sub-headed like that?
- Code A Erm, these are just a standard thing that is required for the hospital, you know the care plans you know they can actually keep a note you know if somebody hasn't had their bowels open or you know and then you know if they haven't then they can actually be given something....
- 14.24 DC Code A Like taking food, like the nutrition one?
- Code A ...yeah, you know some of them have erm got you know nutrition charts, you know where they hav...where we have to you know where the girls have to fill them out you know like drinks, you know their fluid intake, you know if they're quite worried about their fluid intake....

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DC **Code A** Yeah.
Code A ...they would have a sep...you know a separate sheet for that so it's...

DC **Code A** So whatever their particular problem was...
Code A Yes

DC **Code A** ...they would perhaps have a sheet...
Code A Yeah

DC **Code A** ...relevant for that?
Code A (inaudible)

DC **Code A** Okay, I'm accepting that you've explained your sort of contact with Mrs RICHARDS on nights, there are gaps sort of like from the 14th to the 21st, is there a particular reason why there would be gaps like that?

15.03 **Code A** Busyness that is, in all the best worlds in the world you can try and do somebody's care plan but unfortunately buzzers go off, somebody else needs sorting out...

DC **Code A** Yeah.
Code A ...they get left, that's my explanation for...

DC **Code A** Yeah

DC **Code A** I think, we're not trying to get across to say that this woman wasn't fed for seven days, can you explain why..?

Code A No, no

DC **Code A** ...you know but it's just a case that...
Code A Yeah that it's all...
DC **Code A** Yeah, it gets missed.

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Code A ...it gets missed...

DC Code A It gets missed, yeah.

Code A ...and all the best wi..you know at the end of the day I feel that as long as the patients getting their care and if we can't fill in the care plans they do know that, that care has been given.

DC Code A Would it be fair to say that should it, irrespective of Gladys RICHARDS but should a patient for some reason not take a meal then that probably would get noted that the...

16.03 Code A Yes erm you know erm a staff nurse is actually told that that person hasn't taken that, that meal.

DC Code A ...and that would probably be, there's more likelihood of that getting documented then the fact that she has had a meal because ...

Code A Yes, well I would have thought so....

DC Code A ...yeah it seems like a bit of a pointless exercise to tell everyone that she's eating, I would have thought it would be beneficial to note that she hadn't eaten.

Code A Yeah

DC Code A Yeah.

DC Code A Okay, is there any entries relevant to you on these few because a lot of the signatures we're still struggling with?

Code A I should have put my signature to that because she had erm...

DC Code A What's that?

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16.50 [Code A] ...the bowel chart and I didn't do it.

DC [Code A] Was that on the 21st?

[Code A] Yes.

DC [Code A] Oh right.

DC [Code A] Is that when...

[Code A] When she had died...

DC [Code A] ...when she had died?

[Code A] ...yeah.

DC [Code A] Oh right, okay.

[Code A] No I haven't (inaudible)

DC [Code A] Right, okay. So we've covered your role, really it's to assist our...now I'm alright in saying that you're not qualified to administer drugs?

[Code A] No, we are not qualified.

DC [Code A] To load syringe drivers or to needles?

[Code A] No.

DC [Code A] Okay. Have you got, have you had any experience in relation to administration of drugs in any other role you've had in the hospital?

[Code A] Not at the time of Mrs Gladys RICHARDSONS' death...

DC [Code A] Right, okay.

[Code A] ..you know erm I have now completed a drugs administration block but that we are not allowed to administrate, we are only assisting the trained staff in the controlled drugs and our signature is...

DC [Code A] Countersigned

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			...Yeah, is actually...
		DC	Is that on the pharmacy records....
			...yeah, yeah
		DC	...you would countersign?
			And that is all what you know and we go to the patient, if the patient is unable to tell us their name we go to them but they've got a wristband with their name, date of birth and....
		DC	And that all goes on the form?
			...that, yes and we go by that, make sure that that is the right patient that's actually been given the medication to.
		DC	Do you get any, now do you get any training in relation to what the types of drugs and what they do and what effects they have?
			Erm no, erm no.
		DC	No, okay. I mean are you able to comment on I mean some of the drugs we're looking at with Mrs RICHARDS are things like midazolam, diamorphine, hyoscine and haloperidol...
18.43		DC	Haloperidol.
		DC	... Are those drugs that you're aware of and are you aware of what...?
			Syringe drivers we have no dealings with...
		DC	Yeah.
			...we do not even put our names in those books.
		DC	No, I know you don't administer them but are you aware of what they do or...?

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[Code A] Erm I'm aware of things like oromorph you know is, is pain, a stronger pain killer than like...

DC [Code A] Yeah.

[Code A] ... paracetamol or ...

DC [Code A] Yeah, okay.

[Code A] ...erm co-drydamol or all those that is a stronger pain killer erm the diamorphine is a, is a pain, is a pain relief.

DC [Code A] Right, and the others, do you know about the others, hyoscine, haloperidol?

19.25 [Code A] Erm, er I'm not sure of hyoscine and I'm not sure of erm I think haloperidol is I'm not quite sure, I wouldn't like to...

DC [Code A] Okay, alright.

DC [Code A] Irrespective of the fact that you say you're not qualified to the standards that like your staff nurses and the staff that are qualified, if you are concerned about a patients care plan that's been written up the staff and the doctor maybe, would you like if somebody was prescribed certain treatment are you able to say...

[Code A] No.

DC [Code A] ...excuse me I don't think that's right?

[Code A] No.

DC [Code A] You know I've been working here for 20 years and that's the first time I've heard that being done or anything. Are you in a position where

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you can make representation to say that you're not happy about a particular course of treatment or ...?

Code A

No we're not in that position, no...

DC Code A

No.

Code A

...we're not fully qualified staff at the end of the day...

DC Code A

Okay.

Code A

...I mean that isn't our role.

20.27

DC Code A

Okay, what experience do you have in dealing with the elderly you know in personal..?

Code A

Erm well I've been working at the erm Gosport War Memorial for 3 years...

DC Code A

Right

Code A

...and before that I was working agency...

DC Code A

Right

Code A

...erm doing agency nursing.

DC Code A

Still caring for what...?

Code A

Well, caring for elderly and you know like work in nursing homes, through to hospitals.

DC Code A

Right so for 3 years at Gosport but before that you've had...

Code A

2, 3 years on agency.

DC Code A

...oh right so 6 years in total dealing with, sort of in a nursing capacity?

Code A

Yeah.

DC Code A

Okay, you've sort of told us what your recollections are of Mrs RICHARDS, which

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was sort of the circumstances when she actually did die. Do you remember looking in on her and days before that or seeing her days before that, I appreciate you said you can't recall actual you know sort of...?

21.29

Code A

Erm, yes they would have been checks but I can't personally...

DC Code A

Yeah

Code A

...say that I actually looked on her but there would have been definitely regular checks on this lady.

DC Code A

Okay, because what I'd like to ask is what your impression of Mrs RICHARDS' health was you know prior, obviously prior to death you know what did you think was, or did you have an opinion as to what might happen to Mrs RICHARDS?

Code A

No, I don't have an opinion.

DC Code A

Right, okay. Couple of more questions and we're there I think, in relation to providing food and water which I understand on nights is not, doesn't happen too often because...

Code A

Erm patients do wake up in the night and they are given drinks...

DC Code A

Drinks but food wise?

Code A

...but food wise erm yes...

22.26

DC Code A

They would be as well?

Code A

...yeah if they ask for something to eat...

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DC **Code A****Code A**DC **Code A****Code A**DC **Code A****Code A**DC **Code A****Code A**DC **Code A****Code A**DC **Code A**

23.18

Code ADC **Code A****Code A**DC **Code A****Code A**

If they wanted it you'd provide it?

...if they wanted it then we would provide it.

Okay.

It would be down, only like sort of you know we'd go and make them a piece of toast or something like that you know or marmite sandwich or jam sandwich.

Okay, this is a general question not one specifically about Mrs RICHARDS, what occasions are you aware of where water or food would not be provided to a patient?

Only somebody that was very, very poorly and was unable to swallow basically...

Right, okay.

...you know people that can't swallow, you're not going to go round shoving them drinks, try to...

Yeah.

...feed them they would actually choke.

Yeah, so that would be one of the reasons why...

Yes.

...and any other attempts like for example subcutaneous?

Erm if they can't, if they've got a swallowing problem and their okay some people are fed by bed tubes erm....

Mmm, but that's not, is that something...

...no something we don't...

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DC **Code A**

..something you don't get involved in, okay.
The other thing I'm aware you have handovers don't you beginning and end of shifts, did you ever have any conversations about Mrs RICHARDS or her daughters?

Code A

Hand, handovers were actually given and I can recall one time I think Mrs, it was the day Mrs erm Gladys RICHARD and (inaudible) had a fall and we were told not to get her out on the commode at night, we were, you know if she needed the toilet she was to use, we were to use a slipper pan with her...

DC **Code A**

Right.

Code A

...erm and I can't recall actually getting that lady out of you know her actually waking to erm use, use it.

DC **Code A**

Okay, were you ever aware of or did you have any conversations with the daughters after Mrs RICHARDS death or are you aware of any other members of staff who had dealings with either daughter?

24.49

Code A

I think another health care support worker did go to down to the mortuary, I didn't do that but I believe...

DC **Code A**

Right

Code A

...a health care support went erm went er down with her and she was quite a religious, religious girl and erm they were quite a religious family

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so she went actually down with them erm the relatives I think did go down to the mortuary as well, wanted to assist so.

DC **Code A**

Okay, do you know anybody sort of in charge or was there anybody solely in charge of Mrs RICHARDS welfare during that time or ...?

Code A

They, I think she is given you know every patient is given a named, a named nurse...

DC **Code A**

Right.

Code A

...erm but I don't know who that was.

DC **Code A**

Okay. Did you ever become aware of the problems of transfer, the alleged problems that occurred with transferring Mrs RICHARDS from Haslar back to the War Memorial hospital?

25.51

Code A

Erm there was on handover, was said that erm she was erm screaming when she came back on the ward, I recall that erm and I don't know how they transferred her from thing but I would have thought a patslide would have been in use, at that point.

DC **Code A**

A petslide?

Code A

No a patslide.

DC **Code A**

A patslide.

Code A

It's you know because she was transferred on a sheet I understand...

DC **Code A**

Right.

Code A

...and not one's that you've got poles in...

DC **Code A**

Poles in.

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you just on tape I never asked you any specific questions like we have been doing the last 20 minutes or so about the reasons why you're here, did I?

27.40 [Code A] No.
 DC [Code A] No but you did mention something to me in relation to a gift to the ward?

[Code A] Yes.
 DC [Code A] Can you just briefly explain whilst we're on tape about that?

[Code A] Oh yeah there was erm Mrs RICHARDSONS' daughters gave us er a reclining chair...
 DC [Code A] Oh right.
 [Code A] ...erm as a gift they said that they felt that you know the care she was given, that the chair they would like us to have.
 DC [Code A] Okay, was that...
 DC [Code A] Are you aware that it was like a joint gift or was it, do you know whether it was delivered by just one of the sisters in particular?
 [Code A] That I, that I don't know.
 DC [Code A] No.
 28.20 [Code A] No.
 DC [Code A] No but...
 [Code A] But all I know that it was...
 DC [Code A] How did you...
 [Code A] ...actually a gift...
 DC [Code A] From one of the daughters...

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[Code A]	Yes
DC [Code A]	...or both?
DC [Code A]	How did you become aware that it was a gift from the ...?
[Code A]	Er because it was said on handover...
DC [Code A]	Oh right.
[Code A]	...(inaudible) you know that it was thing and I can't remember whether they had sent a card or not because a lot of...we do get a lot of cards er thank you cards...
DC [Code A]	Yeah.
[Code A]	...from the relatives.
DC [Code A]	Okay.
DC [Code A]	No that's it, I think.
DC [Code A]	Oh just one more thing, sorry.
DC [Code A]	There's always just one more thing.
DC [Code A]	Just one more thing, yeah. Do you have any sort of reason to confer these tests, the mental studies and the ...
[Code A]	Yeah they're done you know...
DC [Code A]	...Bartel index?
[Code A]	...to give us an idea of erm...
DC [Code A]	What to expect?
[Code A]	...what their capabilities are really.
DC [Code A]	In your role would you refer to these?
[Code A]	Yes.
DC [Code A]	You would do?
[Code A]	Yes.

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- DC **Code A** Perhaps you could take a couple of minutes just to have a look at that and just you know exactly what, what they mean?
- Code A** They're just general things to let us know that you know like say toileting or you know what, how many people are required, she needs to require for ...
- DC **Code A** Alright
- DC **Code A** So it's like a dependency chart, it's like a dependency guide for the staff to let you know about what she is and what she isn't capable of?
- Code A** Yes, yes.
- DC **Code A** So say a patient came in today and without looking at the patient you have a look at this, open this up and have a look, are you able to say what sort of patient you're going to be...are you going to be dealing with somebody who's very independent and who's going to be up and going to the toilet on their own for example or is it somebody on the other end of the scale who's going to be...?
- Code A** Erm if they've got a Bartel of nought then we know that they're not capable of doing anything for themselves.
- DC **Code A** Okay, so in terms of this grooming, needs help, toilet dependant...?
- Code A** That is more or less saying that this person is more or less totally dependant on their care.

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DC	Code A	Right, okay, okay.
DC	Code A	And am I right in saying that that looking at the notes you've got here that that includes like I say like toileting Mrs RICHARDS, feeding...?
30.48	Code A	Let me have a look, feeding, feeding according to this she's unable.
DC	Code A	To feed herself?
	Code A	To feed herself.
DC	Code A	So are you able to like comment on those sorry what did you call them the Bartel index, looking at Mrs RICHARDS chart there, her Bartel Index there what is your, if you didn't know who that woman was, what would you describe that patient as being or how capable would you describe that patient as being?
	Code A	Totally incapable.
DC	Code A	Fine.
DC	Code A	Okay, right is there anything you wish to add at this time?
	Code A	No.
DC	Code A	Okay, anything you wish to clarify, anything you've said you'd like to clear up?
	Code A	No.
DC	Code A	Okay, I'll hand you a notice explaining the tape recorder procedure, I'd just like you to sign before you leave the room. The time by my watch is 14.41 and I'm turning the recorder off.

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ROCHESTER -
CURRENT FROM
TRAIN 140409

HZ042

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