



Mr D Horsley
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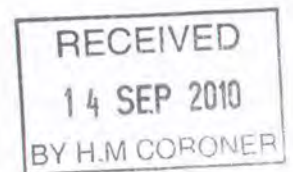
BY LETTER AND FAX

FAX NUMBER: Code A

Our Ref: 558203/000001/JCW/RICHARD/HP

Your Ref:

13 September 2010



Dear Sir

Re: Gladys Richards (deceased) – Inquest

Thank you for your letter, dated 1 September 2010. We note that you are still awaiting a copy of the decision letter of the CPS. They provided us with a consolidated response for several families. We would therefore feel uncomfortable providing a copy of the letter in its entirety but we are happy to provide the extracted parts relating only to Gladys Richards (deceased) if you would find that helpful.

As you will be aware we represent Mrs Gillian MacKenzie in respect of her later mother, Gladys Richards (deceased). For family reasons we are unable to represent Mrs MacKenzie's sister, Leslie O'Brien, formerly known as Richards and as Lack. Nevertheless we are aware that she has a keen interest in this matter and that she will also wish you to contact her directly as appropriate; indeed Mrs O'Brien would prefer us also to act on her behalf if that were possible.

It is our intention to relay Mrs MacKenzie's concerns to you so that these points may be considered. Crucially, Mrs MacKenzie does not accept the outcome of the deliberations by the CPS. She is firmly of the view that her mother was unlawfully killed and that a number of members of staff, including Dr Jane Barton clinical assistant, were culpable of criminal acts causing Mrs Richards' death.

We do of course fully appreciate that the scope of the enquiry, evidence to be called and conduct of the inquest hearing are matters which are within the discretion of the Coroner. From Mrs MacKenzie's perspective the problems in the latter care received by her mother started pre-admission to Gosport Hospital (GH). Mrs Richards was cared for in Glen Heathers residential home which we understand was subject to an investigation by social services instigated from the management of Haslar Hospital (HH). In around April 1998 treatment was given with the drugs Haloperidol and Trazadone apparently prescribed by the General Practitioner at Lee on Solent and there was also care from Dr Banks, consultant psychiatrist. Mrs MacKenzie was also assessed by Dr Reid at HH. Both these doctors gave evidence to the GMC.

We would like to respond to the numbered points in your letter with our further views as follows :-

- (i) Mrs Mackenzie's sister is able to provide factual evidence as to Mrs Richards' general state of health leading up to her death. It had been suggested to the family that death was inevitable because the late Mrs Richards was suffering from dementia. Mrs Mackenzie's sister is fully aware of the nature of her mother's condition leading up to death and is able to assist in this regard. She is also a witness as to the allegation that Nurse Beade gave two unrecorded injections of diamorphine. Both sisters "lived in" Gosport Hospital from 17 – 21 August 1998. Mrs O'Brien was so dissatisfied with the care that her late mother was receiving that she prepared the complaints which were submitted to the hospital prior to death. In addition, Mrs Mackenzie is very critical of her sister for accepting what was written on the Death Certificate

at the time. She believes it is necessary for her sister to explain why she did not raise her concerns as to the cause of death and circumstances at that time. It is our view that Mrs O'Brien is a crucial witness and we request that you include her evidence.

We are grateful that you will include Nurse Beade as a witness. Mrs Mackenzie has requested us also to ask if you will call a number of witnesses : -

1. Factual witnesses : -

- (a) Mrs MacKenzie – reasons above;
- (b) Mrs Leslie O'Brien – reasons above;
- (c) Dr Banks – treated the deceased in the weeks leading up to admission to GH;
- (d) Dr Reid – assessed the deceased at HH;
- (e) Dr Peters – assessed the deceased when she arrived at GH;
- (f) Dr Barton – prescribed and had overall responsibility for the therapeutic regime received by the deceased at GH;
- (g) Nurse Beade – was in charge of the ward at GH and administered oromorph when the deceased arrived on the ward. Mrs MacKenzie alleges that he administered two doses of diamorphine to the deceased which are not recorded in the medical records;
- (h) Nurse Couchman – has recorded details on the medical file and gave the second dose of oromorph;
- (i) Nurse Joice – was an agency nurse who was on night duty. She gave the medications delivered in the syringe driver;
- (j) Nurse Brewer – administered Haloperidol, prior to the deceased sustaining a fall.

2. Expert witnesses : -

Mrs MacKenzie is aware that the following have prepared reports in to her late mother's case. Professor Ford gave evidence to the GMC. Professor Livesley prepared evidence for the Police and CPS. Disclosure of these reports has never been provided to her and we would like to request that they are included in the disclosure bundle : -

- (a) Professor Ford;
- (b) Professor Livesley; and
- (c) Dr Munday.

We note that you are considering whether to call your own expert medical evidence on the role of any medication in relation to Mrs Richards' death. Of considerable importance is the allegation that Nurse Beade administered an injection of morphine shortly after Mrs Richards' arrival at hospital, which is not recorded in the medical records, and also a second injection. We therefore request the opportunity to clarify as far as possible the written factual evidence before any new medical experts are asked to review the case. Mrs MacKenzie has asked if you have had the opportunity to review her statement dated 6 March 2000 and if you have access to her original statement of April 1999.

- (ii) We look forward to hearing from you when you have had the opportunity to consider disclosure. Specifically, we request copies of the reports of Professor Ford, Professor Livesley and Dr Munday and copies of the statements from the witnesses referred to above.

- (iii) Thank you for your indication in respect of you calling your own expert evidence as to the role, if any, that medication administered to Mrs Richards played in her death.
- (iv) Thank you for your confirmation that we will receive proper notice as to the Inquest hearing date so that we have time to prepare.
- (v) It is Mrs MacKenzie's position that there was criminal conduct in relation to the late Mrs Richards' death. We are therefore instructed to make allegations of criminal conduct against Dr Barton and against Nurse Beade and possibly against other members of staff at GH. In the circumstances we would very respectfully ask you to consider favourably the proposal for exceptional funding for representation in respect of this Inquest. Given the very serious nature of those allegations and the complexity of the medical evidence we do suggest that the implications are serious if Mrs Mackenzie were to have to undertake all the pre-inquest work herself and also attend unrepresented. She is a retired pensioner on a fixed income. Realistically we believe that structured representation is only going to be possible with public funding. We do feel that the Coroner would be assisted and his time managing the case will be saved if there is representation. In particular we draw to the Coroner's attention that : -

- The events were 12 years ago, the passage of time making it far more difficult for the family to participate;
- There are a number of witnesses who Mrs MacKenzie wishes to be examined;
- The nature of those allegations means that they are much better put by a representative rather than a lay person;
- Mrs MacKenzie is critical of the earlier police investigations and that led to a formal complaint to the police to re-evaluate their evidence;
- There is a public interest because of the relation of events to the Gosport War Memorial Hospital Inquest hearing of March/ April 2009 and interaction with the enquires by the Police, CPS, CHRE, GMC and Commission for Healthcare Improvement;
- Mrs MacKenzie needs significant levels of legal advice;
- We do very much believe that the Coroner will be assisted if there is representation; and
- There is complex medical evidence.

We would be very grateful for your further comments in respect of the above points. Whilst obviously also a matter within your discretion we do suggest that it will be important to hold at least one pre-inquest hearing in this enquiry.

We look forward to hearing from you.

Yours faithfully

Blake L

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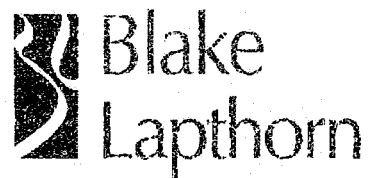
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