

GOSPORT WAR MEMORIAL HOSPITAL INQUESTS

AREAS FOR LEGAL INPUT:

1. Preparatory:

- 1.1. Documentation – identification of relevant documentation across all organisations – policies and procedures in place at the time of the deaths; medical and other records; incident report forms; internal reviews; statements etc
- 1.2. Liaison with others –GMC; NMC; legal representatives for families or families if no legal representation direct or indirect through Coroner's office
- 1.3. Staff – warning witnesses; understanding individual roles and responsibilities; identification of potentially conflicting evidence; appraisal of coronial process (purpose, in public, evidence etc); identification and discussion of questions and issues that individual witnesses are likely to have to address
- 1.4. Liaison with HM Coroner – generally and more specifically to request disclosure of documentation (e.g. where available post mortem reports, statements; medical and other records; privileged documents etc)
- 1.5. Media and Press – provision of briefings for communications team and preparation of press statements
- 1.6. Review - of documentation with a view to identifying weakness in adopted position (organisational vs. individual); setting of strategy and actions to address any identified weaknesses or problems; provision of advice on an on going basis in response to correspondence received from HM Coroner and/or legal representatives for families; advising as to possible verdicts; identifying and instructing Counsel; arranging conference with Counsel and liaising with Counsel up to and during Inquest; disclosure of documentation (e.g. progress of recommendations made previously with a view to addressing upfront potential Rule 43 report)

2. Pre-Inquest Review Meeting (issues to be addressed)

- 2.1. Family and other interested parties
- 2.2. Witnesses (in person or documentary evidence)
- 2.3. Documentation
- 2.4. Scope of Inquiry (is Article 2 engaged? Before a Jury? Rule 43?)
- 2.5. Other issues – e.g. confidentiality of personal data of witnesses to be called

3. Inquest:

- 3.1. Advocacy and Legal Submissions (through Counsel)
- 3.2. Support (through Solicitors to staff, Counsel etc)
- 3.3. Media and press

4. Post Inquest:

- 4.1. Media and press
- 4.2. Debrief
- 4.3. Claims arising (if any)
- 4.4. Risk Management issues

COSTS:

Each of the NHS bodies involved (Hampshire PCT; Portsmouth Hospitals NHS Trust; Hampshire Partnership Trust; Portsmouth City Teaching PCT) have separate legal arrangements. In the interests of saving costs it is proposed that one firm be instructed to represent all NHS bodies involved.

In the absence of knowing the extent of the documentation available and the level of input that will ultimately be required (as costs can be managed by the in house teams undertaking a large part of the preparatory work around documentation which in any event will be subject to time and resources being available) I would estimate input of between 100 and 150 hours plus Counsel's fees.

I would stress that this is an estimate and it may be that actual hours incurred are lower or greater. I would expect the solicitors instructed to keep hours incurred under review and to keep you updated. I should also say that the level of work and input across each organisations will be equal even if ultimately some have a lower profile than others.

Kiran Bhogal
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