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From:	Code A		
Sent:	10/12/2008 16:19:42		
To:	Samuel Richard - Hampshire PCT Externa	Code A	
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Subject:	FW: Evidence (GWMH)		

For information.

Code A

Project Officer (GWMH)

Hampshire Primary Care Trust

From: Code A

Sent: 10 December 2008 16:07

To: Code A
Cc: Code A
Subject: Evidence

Good afternoon Code A

I have just spent the best part of a day going through every single file in the filing cabinet to find the evidence I failed to give you last Tuesday.

Of the list we generated I have found and enclose everything except JB's job description as clinical assistant. I can only find a job description for a staff grade. I don't know if I mistakenly mentally elided the two into the same thing, but actually I have a visual memory of looking at it. I recall it being a typed document, with lots of incomplete letters, ie the tape face was worn. When I have an opportunity again I will try again.

I think by your acceptance of my list of what was in the files without looking at any of them while you were here, we missed a trick. I only mentioned one document out of a whole file in my list – anything I thought might be relevant to the inquests, but I am not a lawyer, and will have missed out loads that are of interest. I have taken the liberty of copying some of these documents and including them in the parcel to come to you. I will just run through some of them to explain my reasoning for including them.

1.	GWMH – action from complains and service development work 1998 – 2001: demonstrates that action to
	improve services and respond to complaints started in 1998, not just when CHI reported.

- 2. PHCT doc re GWMH: summary of actions around 1998 relevant to events into which the inquest is enquiring.
- 3. PHCT organisational structure (2 sides of paper): given that some of us are a bit mystified as to why you are emphasising Lesley's evidence so much, this paper shows that in 2002 the F&G locality divisional manager was Code A and working at HPCT) and the service manager at GWMH was Code A have pencilled in the names of the postholders in 1996-98, Code A Please note the lines for accountability in the nursing staff.
- 4. The contemporaneous medical accountability structure.
- 5. Letter to Code A from Simon Tanner (Dir Public Health HIOWSHA, 2002): I thought this ran through possible criticisms of the service, and questions that could be asked rather well, and also charted potential outcomes.
- 6. Page showing meeting to review the performance of named nurses: to emphasise that there are a number (3 or 4, not sure) who still have the potential for a NMC inquiry pending the outcome of the inquests. This is why they want to retain the legal representation that they have had for so many years. Given that the GMC have already booked the disciplinary for Dr Barton, the nurses feel that it is equally likely that after the inquests they will be called to account.
- 7. A list of the health records handed to the police: at least 75 sets of notes will come back to me. If you get wind of a date when they may arrive, I would be grateful for advance notice, as it will be a major logistical exercise to get them moved into a secure holding place in the PCT, and to find a final resting place for those that are not being retained for the inquests.
- 8. A briefing note from the police on Operation Rochester, which might be interesting reading. It shows that the events have been investigated for years, with no real outcome.
- 9. A copy of a letter from Hampshire Constabulary regarding the police expert witnesses, which I thought might be useful.
- 10. A copy of an update 10 July 2006 on Operation Rochester
- 11. An update report on the police enquiry, which shows that the police experts' description of services as suboptimal came from a 4-tier range of descriptions: optimal, sub-optimal, negligent or criminal.

I hope this will be useful.

Regards

Code A

Project Officer (GWMH)

Hampshire Primary Care Trust

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Code A

Please use NHSmail for all personal identifiable data and notify me at Code A pf its transmission

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