

mtg 7/7/08 re GWMH Deaths

(Hesley OP DGM P. Hosp)

Richard Samuels
 Present. Elaine Williams Patricia Ladway
 Sue Skye - Portsmouth Hospital Ben Smith City
 Sarah Tiller - Ha Shirley Long cony
 Betty - RCN Pat Forsyth - P. Hosp

Current staff = Dr Rosie Wyszniak ? with HPT ?
now.

Dr Vicki Banks Kielen: Beadall

(Paul?)
Dr Ian Peckless ? Old Age Psych

Dr Joanne Taylor ? Clinical Asst

AS:
GMC fitness to practice of Jane Barton suspended pending
Coroner inputs of 10 deaths. Continue to
gather witness statements
Focus to be on inputs

EW: opened + adjourned inquest. Ministry of Justice as only
Bradley (Basing) applied to assist & he will hold inputs.
had to give permission as only 2-3 words can be returned

Press release given 10 names
Pre-inquest briefing expected for interested parties
in August (inputs rather than relatives??)
Coroner has police files & med records
GMC lookup at 8; Coroner lookup at 10
11 listed: 1Hu = ably Richards.

M of J: involved as 7-8 were created, only 2-3 can
be assumed. Article 2 ^{right to life} re wider remit rather than
just facts. Art 2 allows for systemic processes etc
& looks at circs leading to death - What QAs re
prescribing, how managed etc (1)

Will be considered at the pre-inquest review mtg.
who is a interested party; whether Article 2 (we
can make submissions as to why not).
We shd refer to CH1, their input & evidence recommendations
implementation.

Out opportunities to say no to Art 2
" " " " who shd not be called, & rely
on doc. evidence.

Agree who represent whom, identify lead + background

Agree what docs & what disclosure

Agree input window

What will be the purpose?

Opp for relatives to have say in public.

Witnesses - clinicians + nurses

Families likely to have legal aid, families likely
to ask Qs of clinicians (HCPs)

No-one is forced to provide a statement but can be
sub-poena'd by Coroner.

If new evidence comes forth, Coroner has power to
stop proceedings & invite Police to re-open case.

Need smt barrister experienced in challenging coroner.

Coroner has optn to do 1 pt at a time, all
together or half-way - issue for pre-inquest mtg.

To date have managed to keep none of staff back.

looking at New Year Jan/Feb of for inquest itself.

Nurses

9 retired, 2 away (New + Plymouth).

3 in P Hosps.

Need to seek why MOJ authorised the inputs.

Met in RCN representing the nursing diff. Acta RS

Jouanna Green (RCN?) known to nurses.

NMC - had referrals of staff from Police.

2001/2 Philip Beed, Handley, Shaw, Condon, ^{Frede Deboje Saker} ^{Patricia}

in 1998 NMC concluded fit to practice
none ever suspended or disqualified.

Code A
Code A AT

7. identify key SW managers; consider putting them on notice.
 Eileen Thomas - Dir of NWSG + Pam
 Jean Dalton - ^{City} Chief Pharmacist @ GUMH.
 Ian Reid - med Dir.
 Identify Hospital Managers @ GUMH

2. Prospective Orgn Roles

For AMC hearing, PCT felt natural successor.
 RS: no feeling for who takes primary lead
 key to support staff + continue / maintain public confidence.

S. central aware of incident; no-one has any knowledge up there.

Nurses mgd by DHC Trust - locality for F&G
 Medic " " " " - Elderly Care Division

When Trust disbanded in 02, nurses East Hants took over medics

NO conflict of interest analysis.

(barrier representing 1 Sr leading) reduces exposure + costs + manage strategy
 | RCN rep
 | AMC rep (MPS or MOU)

2 Terms of Ref - legal sub group; common sub-group

Prescribing Guidelines
 Review of Pharmacy Data
 Lack of MD Assessment
 Supervision + appraisal system.

AND
 Draw up scale of costs

All contribute to costs.

2 orgs have signif stake

PCT + HPT have minor stake

Not fund "Liabilities Order" Property own fund.

Media & Comms

PHT Sr + Reley + Pam draw up a story board of history of events & of the orgs.

Sarah Tiller + Pat Forsyth ^(PHTops) to work as a media sub-group.

PR agency lined up to assist.

+ build up library of info on this subject.

Daine to hold that info.

ACTIONS

Identify indivs employed - EW to co-ordinate.

- Update active Pla (CHH) via Clinical sub-groups - all orgs to satisfy itself systems + processes are in place.
↳ common audit programme.

- Keep an issues log (Pat Forsyth to lead)

Next Mtg: end July / early August.