



CLIFFORRD HOUGHTON

Clifford Houghton

Date of Birth:
 Date of admission to GWMH: **31st January 1994**
 Date and time of Death: **20.50 hours on 6th February 1994**
 Cause of Death:
 Post Mortem:
 Length of Stay: **7 days**

Mr Houghton's past medical history:-
 MI with LVT

Mr Houghton lived with his wife in a bungalow. They had a daughter. They lived independently with no outside help. Mr Houghton had poor mobility and had been admitted several times to Gosport War Memorial Hospital for respite care to give his wife a break.

Mr Houghton was admitted to Daedalus Ward, Gosport War Memorial Hospital on 31st January 1994 as an emergency admission with a history of

Code A

31st January 1994

Code A

1st Febraury 1994

2nd February 1994

Code A

3rd February 1994

Code A

4th February 1994

Code A

6th February 1994

Code A

Operation Rochester.
Clinical Team's Assessment Form

Code A

OPERATION ROCHESTER
CLINICAL TEAM'S SCREENING FORM

Patient Identification

CLIFFORD HOUGHTON

Code A

0464863

Exhibit number

BJC-28

Code A

Final Score:

Screeners Name: R E Ferner

Date Of Screening:

Signature

BJC/28
CLIFFORD HOUGHTON
71

Code A

PL grading B3

BJC/28	Houghton, Clifford 11/2/02
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Code A

A2

RESTRICTED

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Officer's Report

Number: R7D

TO:
STN/DEPT:

REF:

FROM:
STN/DEPT:**Code A**REF:
TEL/EXT:

SUBJECT:

RE: CLIFFORD HOUGHTON B

Code A

DATE: 15/11/2002

On 7th November 2002 (07/11/2002) I visited Pamela BYRNE at her home address **Code A**
Code A Mrs BYRNE had contacted the NHS Help Line in relation to her father
 who died at the GWMH on 06/04/1994.

Mr HOUGHTON was employed as a CPO Submariner in the RN, an occupation which left him with a nervous tremor in his hands which developed during his later years – this tremor was not Parkinsons Disease.

Upon leaving the Navy he worked for the Customs and Excise and was medically retired at the age of 63 yrs, after suffering a mild heart attack. Mr HOUGHTON had smoked up until the time of this attack, he stopped directly afterwards.

About February 1990/1991, approximately 3/4 months later, he suffered **Code A**
Code A He was initially admitted to the
 Queen Alexandra Hospital, Cosham, Hampshire. He was then transferred to the GWMH and after 2/3 months he went home (29 Camp Road, Gosport) to be cared for by his wife, Gladys Ivy HOUGHTON.

Mrs BYRNE will say that her father could read and fully understand everything was going on around him. He watched television and would be able to convey his needs by grunts and the two words he could still say.

As Mrs HOUGHTON grew older it became increasingly difficulty for Mrs HOUGHTON to cope, and she was becoming more concerned and upset. The decision was made to admit Mr HOUGHTON for two weeks care at the GWMH every six weeks in order to give his wife a rest.

This routine had been in place for approximately four months with Mr HOUGHTON having made 2 visits. Whilst in the hospital he continued to watch television and read the paper.

The last occasion that Mr HOUGHTON was admitted to hospital was before the six weeks at home had

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passed. He was admitted early after his wife had been unable to support him and had dropped him. Mr HOUGHTON's GP was Dr HADGIONONA (AKA Dr NICHOLAS), Bury Road Surgery, Gosport. Dr HARRISON from the same surgery attended and made the decision to admit him early. Mr HOUGHTON didn't like going into hospital, he would cry and try to resist, but he was generally healthy.

In the 4/5 weeks prior to his death he was visited daily by his wife and daughter. Mrs BYRNE spoke with the nursing staff about her concerns about her mother when Mr HOUGHTON was discharged and was told "I don't know if he'll be coming out". Mrs BYRNE took this to mean that they would be finding him a permanent place.

Mrs BYRNE states that she noticed that her father's tongue was lolling out of his mouth and he was pushing food around his plate. He was eating and drinking properly.

In the days prior to his death, the family were informed that Mr HOUGHTON had fallen whilst trying to get to the toilet.

When they next visited him he was in a single room and he had a bruise on his forehead. Mrs BYRNE noticed a tube disappearing behind his neck. She asked nursing staff what it was and was told "It makes it easier for him to let go". She believes it is referred to as a 'driver' and she recollects 'Diamorphine' being mentioned.

Mrs BYRNE believes that her father lasted two days and that at the end his breathing was laboured and rasping.

When the family attended hospital to collect Mr HOUGHTON's belongings they were given a Polaroid photograph which had been taken a couple of days beforehand.

Mrs BYRNE is concerned about the speed that Mr HOUGHTON went down hill and died.

Mr HOUGHTON is buried in Ann's Hill Cemetery.

Code A15th November 2002 (15/11/2002)**RESTRICTED**

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Officer's Report

Number: R7AA

TO:
STN/DEPT:

REF:

FROM: Code A
STN/DEPT: MCD EREF:
TEL/EXT:

SUBJECT:

DATE: 18/11/2003

I visited Pamela and Tony BYRNE at their home address at 1900 hrs, 17/11/2003.

I gave them the medical records relating to Clifford HOUGHTON and outlined their initial concerns as per R7D.

Mrs BYRNE just wanted to reiterate that her father had never complained of any pain whilst at home or whilst at the hospital and that he was quite capable of doing so.

She also stated that she had never been consulted with regards to her father being prescribed diamorphine and was never told why.

When asked her views on the method of notification by the Hampshire Constabulary she appreciates the logistical problems of a personal notification but would prefer it.

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Clifford Houghton

No. BJC/28

Date of Birth:

Code A

Date of Death: 6 February 1994

Prior to his last admission to Gosport War Memorial Hospital Mr Houghton lived with his wife in a bungalow.

Mr Houghton had suffered a right hemiparesis in 1991 which impaired his mobility and power of speech.

In October 1993, since Mrs Houghton was finding it increasingly difficult to cope, Mr Houghton was admitted for two weeks care at the Gosport War Memorial Hospital at six weekly intervals.

Because of suspected transient ischaemic attacks, Mr Houghton was admitted on 31 January 1994 prior to the completion of the six week period at home.

On 3 February 1994 Mr Houghton's condition was described as deteriorating, he was breathless and distressed. He was written up for a syringe driver which was commenced on 6 February 1994. The initial dose of Diamorphine was 40mgs over twenty-four hours which was increased to 60mgs following a review by Dr Peters.

Mr Houghton died that evening.

The experts, in reviewing this case, note that the dose of Diamorphine which was started was high but Mr Houghton was clearly in the terminal phase of his life already.

The experts felt that the high starting dose was negligent but needed to be viewed in the context of a man who was dying in any event.

