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Code A

From: Sent: To: Cc: Subject: Williams, David (DCI) 01 July 2004 16:00 Code A Grocott, David; Code A FW: Op Rochester

----Original Message----From: Code A Sent: 01 July 2004 15:15 To: Watts, Steve Cc: Williams, David (DCI) Subject: RE: Op Rochester

Dictated by the Deputy Chief Constable:

Steve, with regard to this email, I fully concur with your strategic advice on this matter. I would be against the GMC conducting their internal disciplinary processes until the criminal investigation has been concluded.

I.R. Readhead Deputy Chief Constable

-----Original Message-----From: Readhead, Ian Sent: 14 June 2004 16:44 To: baunders; mazer Subject: FW: Op Rochester

Code A

Please print.

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----Original Message----From: Code A Sent: Monday, June 14, 2004 8:02 AM To: Readhead, Ian; Smith, Colin F [ACC SO] Subject: FW: Op Rochester

----Original Message----From: Code A [mailto:s Code A] Sent: 12 June 2004 11:35 To: Code A Cc: Williams, David (DCI) Subject: Op Rochester

Code A

Please forward this to Mr Readhead & Mr Smith.

Mr Readhead/ Mr Smith, Sirs,

A short update re Rochester; I know that Mr Readhead has and Mr Smith will shortly recieve a briefing on the current status of Rochester enquiry.

In short, we are entering phase 4, there are 9 cases in the upper category that will be examined in detail to ascertain any evidence of criminal culpability. In order to expedite, four cases will be 'fast tracked' with a view to getting files to CPS in Sept/ October, and hopefully decisions from them by Xmas. A further medical expert has been engaged for this work.

In support of this, the size of the Rochester team has been increased, and in the next couple of weeks, interviews of key medical staff will begin in facilities provided at Gosport by the Primary care Trust. An agreed joint 'if asked' press policy will be drawn up against thje press becomming aware of that activity.

Yesterday (11/6), DCI Williams and I met with Ann Alexander and later the Chief Medical Officer, both were briefed and are content. DCI Williams has had separate meetings with the medical authorities who are similarly content.

The families will be informed of the broad strategy in a bulletin to be issued soon.

All stakeholders are therefore aware or soon to be and are content.

The only exception to that is the GMC who are putting us under pressure to release all our material so that they can begin proceedings against the named Doctor. I have resisted this on the basis of advice that it would potentially impact on the enquiry, and that in any event restrictions are in place to prevent that Doctor having the same acess to patients and barbiturates, so that public safety is maintained. I have offered to appear before a GMC tribumal and give evidence of the investigation, but this has been declined. I am writingt to the GMC this week indicating that once I have served any documents on medical staff under suspicion, then my concerns will evapourate and at that time I will be happy to serve the same information on them.

This information provided to update you on the pro0gress of the enquiry. This is still a positive investigation which is moving forward.

SW