

Mr H Devine

FC/LD

Code A

26 May 2000

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Dear Mr Devine

Thank you for meeting with myself and Dr Ian Reid on 19th May 2000 to discuss the questions Mrs Reeves raised in her letter of 11th April 2000.

I believe you felt that by the end of this meeting we had answered all of the questions you had raised and I will deal with them here in the order you raised them, outlining the discussions we had at our meeting.

Question 1. *Was it Dr Barton's decision alone to terminate our mother's life? As I believe it was Dr Barton's opinion that our mother was in the last stages of renal failure.*

Dr Reid explained to you that your mother Mrs Devine had been very agitated on the morning of the 19th and that a single dose of a medication called Chlorpromazine was given to calm her. At this point Mrs Devine was having to be supervised by two nurses. Following this, a syringe driver was set up in order to provide Mrs Devine with a regulated dose of medication to prevent further agitation.

Dr Reid also explained that a decision was taken not to give your mother intra-venous or sub-cutaneous fluids based on the underlying situation. The very marked decline in your mother's kidney function, over the preceding month, had occurred while she was still taking oral fluids and that would have meant that the decline was likely to continue. Dr Reid felt concerned that to give fluids at that time would not have reversed your mothers' declining kidney function and might have caused more distress than it relieved.

Also at that time, your mother was very agitated and it was unlikely that your mother would have kept an intravenous or subcutaneous drip in place.

You clearly asked at the meeting whether or not your mother had had euthanasia. Dr Reid explained to you that euthanasia was illegal, that it was morally wrong and that if he ever suspected that euthanasia was being practised he would report it to the police.

Dr Reid stated that Dr Barton had not made a decision to terminate Mrs Devine's life, however it was his belief that Mrs Devine was in the late stages of renal failure as evidenced by the decline in her kidney function over the preceding month. Dr Barton recognised that Mrs Devine was dying from renal failure.

Question 2: *Can the staff at Dryad Ward administer an intravenous drip should it be required?*

Staff on Dryad have the competence to monitor an intravenous infusion, however in relation to providing fluids, a subcutaneous route is more often used and again, staff have the competence to administer and monitor such a drip.

Question 3: *If it had been necessary for our mother to have received an intravenous drip would she have been transferred to another hospital?*

Dr Reid explained that the reason for the intravenous drip would have dictated whether or not a patient required to be transferred to another hospital. In the case of your mother, Mrs Devine, an intravenous drip was not felt to be appropriate and therefore would not have been considered.

Question 4: *Is it normal practice to sedate patients in the final stages before giving the family an opportunity to speak with them?*

Dr Reid explained that it is normal practice and good practice to sedate patients if they are agitated and or, in pain. The action of giving sedation prior to involving the family would be taken in the patient's best interests. The intention therefore was not to deny the family access to Mrs Devine. It is clear however that our lack of communication with you, meant that you were unable to be involved with your mother in the final stages of her life to the extent that you would have wished. We fully acknowledge that our communication with you was unacceptable and that we let you and your family down and apologise unreservedly for that.

Question 5: *As you stated during our interview you were communicating with my Mother and not with the family. Was my mother aware that she was in the terminal stage? If she was aware, did she ask to speak to the family?*

We explained to you at the meeting that it was unlikely that your mother would be aware that she was in the terminal stage of her illness and that as a consequence, as far as we are aware, did not ask to speak to her family.

Dr Reid went on to explain to you that he had discussed the management of your mother's agitation with one of the Palliative Care Consultants and that in his view, the amount of medication was not excessive and in his opinion, a small dose.

Dr Reid also explained the Independent Review process and separate to that, the process by which independent clinical advice could be sought. Both you, Mr Devine, and your sister Mrs Reeves, felt that you wanted to go away and think about the meeting before you made any further decision. Please let me know, within the next month, if there is any further action you would like us to take.

In addition Dr Reid would be happy to meet with you again if you feel that would be of use.

Thank you for coming to meet with us on the 19th May. I appreciate how difficult it is for you to try and come to terms with the death of your mother and hope that our meeting was of some help.

Yours sincerely

Fiona Cameron
Divisional General Manager