

## NMC INTERNAL MEMORANDUM

To: Ian Todd

**Code A**

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From: Clare Strickland  
IHLT

Date: 24 February 2009

CC:

Re: Gosport War Memorial Hospital

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1. As you will recall, further to my memo of 16 May 2008 (attached), in August 2008 it was agreed that we would instruct leading counsel for advice on how to proceed in this case.
2. In August 2008, we instructed Johannah Cutts QC to advise us and to produce a guidance note for use by the PPC.
3. In September 2008, we established contact with the coroner conducting the inquest, and obtained some further information and documents requested by leading counsel.
4. In October 2008, I completed my report to the PPC, which contains a full summary of the case.
5. In January 2009, we received further information from the coroner following a pre-inquest hearing on 19 January 2009:
  - The inquest will start on 18 March 2009, and is scheduled to run into April 2009;
  - A number of nurses will be called as witnesses, but none of the nurses is to be separately represented.
  - Of the nurses who are subject to existing complaints before the PPC, only Gill Hamblin is to give live evidence at the inquest (although the coroner has witness statements from Freda Shaw as well).
6. In February 2009, we received the opinion and guidance note from Miss Cutts QC. Copies are attached to this memo.
7. You will note that Ms Cutts agrees with our view that matters should be placed before the PPC as soon as possible.
8. However, I am conscious that we have taken longer than expected to reach this point, and as a result, we would be unable to arrange a PPC meeting before the inquest starts on 18 March 2009. I consider that it would be undesirable to arrange for the PPC meeting to take place whilst the inquest is ongoing:

- It will not achieve what was our original aim, i.e. to clarify the position for as many nurses as possible (and the complainants) in advance of the inquest;
  - The PPC is unlikely to adopt any course other than adjourn pending the outcome of the inquest.
9. At this stage, it would appear that the inquest is not likely to run beyond the end of April 2009, but there can be no guarantees of this. However, it is unlikely that waiting until the outcome of the inquest is known will delay the case by any more than three months.
10. If this is agreed, we must be ready to proceed quickly once the outcome of the inquest is known. To some extent, the course to be followed will depend upon the outcome of the inquest. However, there are some things we can do to be ready:
- a. Establish the registration status of nurses Code A Code A (all of whom are the subject of the cases currently before the PPC);
  - b. Establish the identity and registration status of Staff Nurse Code A and Code A Code A named by Mrs Carby in her complaint, which has never been put before the PPC);
  - c. Make a decision on how to proceed in the Richards case, and be ready to explain this decision to the complainant. As you may recall, this case was closed by the PPC in 2001. However, in 2002, the complainant was sent a letter in error saying that the case had been adjourned. This case is one that is being considered by the coroner, but not the GMC. Therefore, at the close of the inquest, we should have everything we need to make this decision and communicate it to the complainant.
  - d. Decide which documents should be served on the practitioners and draft letters to be sent to them prior to the referral to the PPC.
11. I would suggest that Code A as case officer is best placed to deal with points a) and b) above, and I would invite him to email me with the results as soon as he can. I can deal with point d). I consider that point c) is a decision to be made by Ian and/or Code A. It would be helpful to have your preliminary view, which can be reviewed once we have the outcome of the inquest.
12. Please let me know if you would like to discuss further and/or need any further information.