

Context for the involvement of Experts

1. The work of the Inquiry is to provide insight into and understanding of the issues raised by the Terms of Reference. In order to carry out that task it will need to be informed by independent expert opinion in a number of areas.
2. The first part of the Terms of Reference calls for an investigation into why Adam, Lucy and Raychel died. At the heart of the clinical medical issues lies the question of how the administration of intravenous fluids to these children was managed.
3. However, that of itself will not provide a complete answer to the issues to be addressed by this Inquiry in the course of its work. The care and treatment provided to these children leads naturally to broader issues concerning medical education and training, as well as the procedures and structures for ensuring an effective flow of information to enable lessons to be learned from adverse incidents.
4. Furthermore and as part of the consideration of the necessity for change, it will be important for the Inquiry to be able to establish the extent to which the deaths of these children form a pattern of outcome from treatment, as well as how the incidence of death in this way compares with that in the rest of the UK and other European countries.
5. Finally and so that the Inquiry can have confidence in the quality and independence of the expert views on which it will rely, it will be necessary for those views to be subject to some form of peer review.

Role of the Experts

6. The Experts are not appointed by the Inquiry to advance any given 'line' of argument or to support any particular 'side'. Rather their task is to assist in the process of inquiring.
7. The primary role of the Experts is to assist the Inquiry in dealing with the evidence that the Inquiry is to assess in addressing the issues raised by the Terms of Reference.
8. The assistance provided by the Experts to the Inquiry is likely to be three-fold:
 - Helping to identify the evidence (mainly but not exclusively medical) that the Inquiry should call for and, if appropriate, the likely sources of such evidence

- Helping to interpret and evaluate the evidence provided to the Inquiry, including providing an expert view on questions raised by the Inquiry
 - Assisting in disseminating to the public the options open to the Inquiry
9. It may also be that the Experts will be invited to identify any other expertise that the Inquiry should appoint in order to ensure that it is fully equipped to deal with the issues raised by the Terms of Reference.

Role of the Peer Reviewer's

10. In addition to the Experts with whom the Inquiry will be in close and direct contact in carrying out its Terms of Reference, the Inquiry will appoint Experts from outside the United Kingdom to provide peer review of the work of the Experts.
11. The Peer Reviewer's are likely to perform two main functions for the Inquiry:
- Commenting upon the work of the Experts and so helping to ensure that the Inquiry receives independent, high quality advice
 - Providing an insight into issues such as the organisation of medical education and training and of hospital administration in other jurisdictions, to assist the Inquiry with the broader issues it has to address in providing recommendations
12. The use of Experts to provide 'peer review' of the expert advice and guidance provided to an inquiry has been adopted by a number of public inquiries, the most recent precedent in this jurisdiction being the 'Bloody Sunday Inquiry'.

Criteria for appointing the Experts

13. The Criteria for appointing the Experts and the Peer Reviewer's are quite simple: (i) competence, (ii) independence and (iii) availability:
- An established and high level of competence in their particular field
 - Independence of any of the Interested Parties
 - Willingness and ability to commit the amount of time necessary to consider evidence, attend meetings and hearings as appropriate, provide reports and make themselves available to the Inquiry as required

NOTE ON EXPERTS

14. The mechanism for selecting Experts for appointment is essentially by recommendation from the relevant professional body. However, the Inquiry has also considered other factors such as: (i) positions held, (ii) publications, (iii) current programme of research and (iv) previous experience with public inquiries.
15. None of the Experts will be appointed from within Northern Ireland and in the case of the Peer Reviewer's, the Inquiry has looked to the USA, Canada and Australia to obtain a breadth of view on the issues.

Experts already identified by the Inquiry

16. The Inquiry has already identified some of the medical and hospital management expertise that it requires and has further identified medical education and training as well as medical statistics as additional areas where it may require expert assistance.
17. The following Experts have been appointed by the Inquiry:
 - Dr. Peter Booker
MB BS(Lond) FFARCS(Lond) MD
Area of expertise: Paediatric Anaesthetist
 - Dr. Harvey Marcovitch
MA(Cantab & Oxon) MB BChir FRCP(Lond) FRCPC DCH DObstRCOG
Area of expertise: Paediatrics
 - Ms. Carol Williams
MSc BA(Hons) RGN RSCN
Area of expertise: Paediatric Intensive Care Nursing
 - Ms. Mary Whitty
BA(Hons)
Area of expertise: Health Service Management
18. A resume of the curriculum vitae of those Experts has already been posted on the website of the Inquiry.

Form of Expert assistance to be provided

19. The Experts will be asked to provide the Inquiry with a range of forms of assistance as the circumstances and evidence require. Typically this is likely to be:

- *Helping to identify the evidence*
 - (1) The Experts will be provided with copies of the documentary evidence received by the Inquiry and will be asked to identify further documents for which the Inquiry might call
 - (2) The Experts will also be provided with the lists of persons from whom Witness Statements have been requested together with the Witness Statements and will be asked to assist with the identification of: (i) any additional persons from whom Witness Statements should be sought together with the areas with which they should address, (ii) follow up evidence from the witnesses and, (iii) witnesses who should attend to give evidence at the Oral Hearings.
 - (3) In addition and as part of their consideration of the documents and the Witness Statements, the Experts will be invited to identify any other areas of expertise from which the Inquiry might usefully appoint an Expert
- *Helping to interpret and evaluate the evidence*
 - (1) In order to assist the Inquiry with the Oral Hearings, the Experts will provide Preliminary Reports in their respective disciplines, assessing and evaluating the evidence that they have considered and giving their initial view on its import
 - (2) Where an Expert provides a Report which the Inquiry considers is potentially critical of a witness' evidence, then that witness will be advised of the criticism and be afforded an opportunity of dealing with it during the Oral Hearings
 - (3) The Experts will attend the Oral Hearings, or such part of them as is considered appropriate having regard to their area of expertise, and will assist in developing lines of inquiry, formulating questions for the witnesses, responding to questions from the Chairman and or Counsel to the Inquiry
- *Assisting in disseminating the Inquiry's preliminary findings*
 - (1) At the conclusion of the Oral Hearings and so as to assist the Inquiry in formulating its recommendations, the Experts will provide their Final Reports in their respective disciplines. Those Reports will assess and evaluate the totality of the written and oral evidence together with all the expert opinion, which they have seen, heard and considered and will give their concluded view on its import in respect of the issues raised by the Terms of Reference.

- (2) After the Oral Hearings the Inquiry may convene special seminars and/or hold open meetings to discuss various possible recommendations on issues such as education and training , communication of information and other topics of relevance to the Inquiry .The Inquiry's Experts may be asked to assist in the planning and the conduct of these events.

20. The forms of assistance that it is intended the Peer Reviewer's will provide to the Inquiry are:
 - *Commenting upon the work of the Experts*

The Peer Reviewer's will receive all the written comments and Preliminary and Final Reports of the Experts and will produce their own reports on the relevant issues. For that purpose they will receive all the documentary evidence and will have access to the transcript of the Oral Hearings and will also be given all the Reports and Statements .

 - *Providing an insight into the broader issues*
 - (1) The Peer Reviewer's will be asked to comment in writing, within their areas of expertise, upon the broader issues of concern to the Inquiry such as: (i) medical education and training, (ii) hospital procedures relating to critical incidents, (iii) lines of responsibility and communication generally within the health service in relation to the dissemination of information on critical incidents to ensure that lessons are learned from them

 - (2) The Peer Reviewer's may be asked to support their comments by reference to documents and published literature. If appropriate and feasible they may be asked to provide copies of such material.

21. The Peer Reviewer's will provide a Final Report in their respective disciplines. Those Reports will assess and evaluate the totality of the written and oral evidence together with all the expert opinion which they have seen and considered and will give their concluded view on its import in respect of the issues raised by the Terms of Reference.