

# The Inquiry into Hyponatraemia-related Deaths

Chairman: Mr John O'Hara QC

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Your Ref: LIT 477/08/B5/CR

Our Ref: JOH-0438-13

Date: 11<sup>th</sup> November 2013

Dear Ms McCarron,

**Re: Inquiry into Hyponatraemia Related Deaths**

I am grateful for sight of Mr Bradley's letter dated 11 November. Before I finally decide whether to call Professor Scally I should make the following points clear:

1. In its opening address the Department took issue with the professor on a number of points on which he has responded in writing.
2. I do not interpret the professor's advice as suggesting that clinical governance was satisfactorily and uniformly in place in Great Britain by the early 2000s. I do however understand him to say that in a number of ways it had advanced further than it did in Northern Ireland in the same timescale. He says that this represented both a missed opportunity in this jurisdiction and, to some extent, a failure of leadership.
3. Much of what he says appears to have been conceded in helpfully direct evidence by the witnesses who attended last week. Those witnesses then advanced explanations which, the Department suggests, set the context in which I have to consider how this came about e.g. the slow demise of direct rule, scarcity of resources. They also gave examples of other issues relating to quality of care which they worked to resolve such as waiting lists and times and which units stayed open. Subject to any submissions which are made I now regard the distinctions between the professor's advice and the Department's position to have narrowed because of the concessions which have been made that Northern Ireland did in fact fall behind where it should have been. This suggests to me that the professor's report does in fact reflect the realities in Northern Ireland and England at the relevant times.
4. Specifically it is now conceded that there was no system worthy of the name of reporting serious events such as avoidable deaths of children to the attention of people such as the Permanent Secretary or the CMO.

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The above is necessarily a brief summary of the preliminary view which I have formed on foot of the oral and written evidence and is subject to submissions in the normal course. If however major issue is taken with this summary it will be necessary to hear from the professor on Wednesday as planned. Please confirm the Department's position by return.

Yours sincerely

*John O'Hara*

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