Press Release from the Inquiry into Hyponatraemia-related Deaths

Schedule for public hearings

Date issued: 29th February 2012

The Inquiry into Hyponatraemia-related Deaths will resume its public hearings at **10am** on **Monday, 26th March** in Banbridge Courthouse, Banbridge. It should be noted that a progress hearing, due to take place on 1st March, will not now be held.

The Inquiry will hold hearings on Monday 26th March and Tuesday 27th March at which the opening addresses in the case of Adam Strain will be heard. These opening addresses will be made by the Inquiry's Senior Counsel and by counsel for relevant interested parties.

A spokesperson for the Inquiry said:

"The Inquiry's Chairman, John O'Hara, has made clear that he regrets the necessity to revise the timetable originally issued to the interested parties.

"The Inquiry appreciates changes to the schedule are frustrating for the families of the children whose cases the Inquiry is investigating and for other interested parties.

"The revisions to the schedule have been made to enable the Inquiry's expert witnesses to have sufficient time to consider the contents of a report by a consultant paediatric neurologist, Professor Fenella Kirkham. This report was submitted to the Inquiry on 15th February 2012.

"A meeting of the experts took place on Wednesday 22nd February, at which the report of Professor Kirkham was discussed. That meeting will reconvene and conclude on Friday 9th March.

"The Chairman provided details of the revised schedule in a note to the interested parties in advance of the date of the planned progress hearing together with the information which would have been given on 1st March.

"This information was issued to all the interested parties yesterday and is available on the Inquiry's website."

Adam died at the age of 4 years in the Royal Belfast Hospital for Sick Children on the 28th of November 1995.

The Inquiry is examining the deaths of three children – Adam Strain, Raychel Ferguson and Claire Roberts. It is also investigating events following the death of Lucy Crawford and specific issues arising from the treatment of Conor Mitchell.

The public hearings are scheduled to run until the end of November 2012. The Inquiry Chairman hopes to complete his report and present it to the Minister for Health by the summer of 2013. It is intended that the public hearings will focus on each case in question in chronological order, commencing with that of Adam Strain.

The Inquiry oral hearings are open to the public. Details of them will be posted regularly on the Inquiry's website (www.ihrdni.org), and a full transcript of each day's proceedings will be available on the website the following day.

Editors' notes:

1. The Chairman's Note issued to interested parties yesterday is available on the Inquiry's website.

2. Professor Fenella Kirkham is a Consultant Paediatric Neurologist at University Hospital, Southampton; Professor of Paediatric Neurology, Institute of Child Health, University College London, and Honorary Professor of Paediatric Neurology, University of Southampton.

3. The public hearings are open to the public and the media are welcome to attend. However, filming, photography and audio-recording will not be permitted in the Inquiry Chamber. Banbridge Courthouse is on Victoria Street, Banbridge, BT32 3DH.

4. The Inquiry was established by the then Minister for Health in Northern Ireland, Angela Smith, in November 2004.

5. The Inquiry Chairman is John O'Hara QC.

6. The Inquiry is examining the deaths of three children – Adam Strain, Claire Roberts and Raychel Ferguson. It is also investigating events following the death of Lucy Crawford and specific issues arising from the treatment of Conor Mitchell.

    - Adam Strain died at the age of 4 years in the Royal Belfast Hospital for Sick Children on the 28th of November 1995;
    - Claire Roberts died at the age of 9 years on the 23rd of October 1996 at the Royal Belfast Hospital for Sick Children;
    - Lucy Crawford died at the age of 17 months in the Royal Belfast Hospital for Sick Children on 14th April 2000, after having been initially treated at the Erne Hospital, Enniskillen;
    - Raychel Ferguson died at the age of 9 years in the Royal Belfast Hospital for Sick Children on the 10th of June 2001, after having been initially treated in Altnagelvin Hospital;
    - Conor Mitchell died at the age of 15 years in the Royal Belfast Hospital for Sick Children on 12th May 2003, after having been initially treated at Craigavon Area Hospital.

7. The Inquiry's terms of reference are as follows:

   1. to hold an Inquiry into the events surrounding and following the deaths of Adam Strain and Raychel Ferguson, with particular reference to:

      i. the care and treatment of Adam Strain and Raychel Ferguson, especially in relation to the management of fluid balance and the choice and administration of intravenous fluids in each case;

      ii. the actions of the statutory authorities, other organisations and responsible individuals concerned in the procedures, investigations and events which followed the deaths of Adam Strain and Raychel Ferguson;

      iii. the communications with and explanations given to the respective families and others by the relevant authorities;

   2. to report on the areas specifically identified above and, at the Chairman's discretion, examine and report on any other matters which arise in connection with the Inquiry;

   3. to make such recommendations to the Department of Health, Social Services and Public Safety as the Chairman considers necessary and appropriate.

8. The Inquiry Chairman announced, in May 2008, his decision to include the death of Claire Roberts and investigation of specific issues arising from the treatment of Conor Mitchell. The Inquiry's investigation of issues involved in Conor's treatment will include an investigation into record-keeping with reference to the DHSSPS Guidelines on Hyponatraemia that had been issued by the time of his treatment, and their focus on proper fluid management. The Inquiry will also examine whether the fact that Conor was admitted to an adult ward rather than a children's ward was relevant to the issue of whether the Guidelines were adhered to.

9. Following the amendment of the Inquiry's Terms of Reference by the then Minister for Health in November 2008, to exclude any inquiry into the events surrounding and following the death of Lucy Crawford in 2000, the Chairman considered how the Terms of Reference would be interpreted in their new form. After consultation the Chairman decided:

   "…. the terms still permit and indeed require an investigation into the events which followed Lucy's death such as the failure to identify the correct cause of death and the alleged Sperrin Lakeland cover up because they contributed, arguably, to the death of Raychel in Altnagelvin. This reflects the contention that had the circumstances of Lucy's death been identified correctly, and had lessons been learned from the way in which fluids were administered to her, defective fluid management would not have occurred so soon afterwards (only 14 months later) in Altnagelvin, a hospital within the same Western Health and Social Services Board area."

10. Further information, including details of the Inquiry's interpretation of its Terms of Reference, and additional matters being investigated by the Inquiry are available on the Inquiry's website at: www.ihrdni.org

11. Any media enquiries should be directed to the Inquiry's Press Officer, Liz Fawcett, on 028 9020 0811 or 0771 943 5662. Liz can also be contacted by E-mail at: liz@lizfawcettconsulting.com