

Witness Statement Ref. No.

010/2

**NAME OF CHILD: Adam Strain**

**Name:** Gillian Popplestone

**Title:** Ms. MRS .

**Present position and institution:**

Staff Nurse, Children's Outpatient Department, Ulster Hospital, Dundonald

**Previous position(s) and institution(s):**

*[Since your Witness Statement of 31<sup>st</sup> January 2006]*

as above .

**Membership of Advisory Panels and Committees:**

*[Identify by date and title all of those since your Witness Statement of 31<sup>st</sup> January 2006]*

none

**Other Statements, Depositions and Reports:**

*[Identify by date and title all those since your Witness Statement of 31<sup>st</sup> January 2006]*

None .

**OFFICIAL USE:**

**List of previous statements, depositions and reports attached (\*):**

Ref:	Date:	
010/1	31.01.06	Witness Statement to the Inquiry on Hyponatraemia
093-012	31.01.06	PSNI Witness Statement

**IMPORTANT INSTRUCTIONS FOR ANSWERING:**

Please attach additional sheets if more space is required. Please identify clearly any document to which you refer or rely upon for your answer. If the document has an Inquiry reference number, e.g. Ref: 049-001-001 which is 'Chart No.1 Old Notes', then please provide that number. If the document does not have such a number then please provide a copy of the document.

**I QUERIES ARISING OUT OF YOUR INITIAL WITNESS STATEMENT**

With reference to your Witness Statement dated 31<sup>st</sup> January 2006, please provide clarification and/or further information in respect of the following:

**(1) Answer to Question 1 at p. 2**

*"The transplant surgery was already underway when I came on duty at 8am on 27<sup>th</sup> November 1995. I took over as scrub nurse for the duration of the surgery."*

**(a) State at what time the surgery commenced and the name of the nurse who was performing the role of scrub nurse prior to your arrival**

My recollection is that the transplant was already underway when I came on duty at 8am on 27<sup>th</sup> November 1995. I took over from S/N Conway as scrub nurse. I do not recall what time the surgery commenced.

**(b) State at what stage the transplant surgery had reached when you "came on duty at 8am on 27<sup>th</sup> November 1995"**

I do not recall what stage the transplant surgery had reached when I came on duty at 8am on 27<sup>th</sup> November 1995.

**(c) Identify the clinicians, nurses and staff present in theatre when you "came on duty at 8am on 27<sup>th</sup> November 1995"**

I cannot recall definitively which members of staff were present when I came on duty on 27<sup>th</sup> November 1995. The staff I remember being there at some stage during the transplant were as follows:- Doctors Taylor, Montague and Brown, a surgeon from the City hospital whose name I do not recall and S/N Conway and S/N Mathewson.

**(d) State when your duties as scrub nurse ceased in relation to the transplant surgery**

My duties ceased once the skin was closed. I do not remember what time this happened.

**(2) Answer to Question 1 at p. 2**

*"As the procedure ended all swabs, sutures and instruments were accounted for during 4 counts, one at each stage of closure. These counts were between myself and the circulating nurse. Everything was correct and accounted for at the end of the operation. (058-007-020)"*

**(a) State at what time and at what stage in the transplant surgery "the procedure" ended**  
The "procedure" refers to the transplant surgery. I do not remember what time this happened.

**(b) Identify and describe "each stage of closure"**

My recollection is that each stage of closure was as each layer of tissue was sutured i.e. organ, muscle, fat, skin.

**(c) State at what time and at what stage in the transplant surgery "the end of the operation" occurred**

The end of the operation was when the skin was closed. I do not remember what time this happened.

## **II QUERIES ARISING OUT OF YOUR PSNI WITNESS STATEMENT**

With reference to your PSNI Witness Statement dated 31<sup>st</sup> January 2006 (Ref: 093-012-039), please provide clarification and/or further information in respect of the following:

**(3) "I qualified in 1992 as a Registered General Nurse and as a Registered Sick Children's Nurse: this qualified me to work with adults and children. However, from the time I qualified I have only ever worked in paediatrics. Initially in Craigavon from October 1992 to July 1994, then I commenced working in the Royal Belfast Hospital for Sick Children in theatres." (Ref: 093-012-039)**

**(a) Describe your work commitments to the Royal Belfast Hospital for Sick Children (RBHSC) from the start of your employment there and particularly over the period 26<sup>th</sup> November to 28<sup>th</sup> November 1995**

My duties as an RBHSC theatre nurse from 1994 involved acting as set up nurse, scrub nurse, circulating nurse or recovery nurse as directed on the day by the nurse in charge. Part of my duties from time-to-time would have involved assisting the anaesthetist by laying out the equipment for specific operations i.e. correct E.T. tubes, laryngoscopes, having tape cut and ready to hold the E.T. tubes in place; but unlike some other nursing staff at the time I had no specific training or qualification as an anaesthetic nurse. Other than being on duty on 27<sup>th</sup> November 1995, I do not remember what shifts I worked on either 26<sup>th</sup> or 28<sup>th</sup> November 1995.

**(b) Prior to 26<sup>th</sup> November 1995, describe in detail your experience of the care and management of children with hyponatraemia, including:**

- the estimated total number of such cases, together with the dates and where they took place
- the nature of your involvement
- the outcome for the children

None that I recall.

**(c) Describe in detail your experience, since 27<sup>th</sup> November 1995, in the care and management of children with hyponatraemia**

None that I recall.

**(d) Describe in detail your role, if any, in the care and treatment of Adam prior to 26<sup>th</sup> November 1995, including:**

- your knowledge of his condition, medication and previous treatment
- the fluid management regime employed on each occasion and
- the lessons you learned from your prior treatment of Adam

None that I am aware of.

**(4) "On 27<sup>th</sup> November 1995 I commenced duty at 8am in theatre; I took over from Staff Nurse Conway as Scrub Nurse for the duration of a kidney transplant operation on Adam. My responsibility was to assist surgeons, passing instruments, swabs and sutures as required." (Ref: 093-012-039)**

**(a) State the time at which you first learned about Adam's renal transplant surgery and describe how and when you learned about it and the identity of the person(s) who informed you**  
My recollection is that I was aware of Adam's transplant surgery when I came on duty on 27<sup>th</sup> November 1995. I do not remember which member of staff informed me.

**(b) Describe and explain how you came to act as Scrub Nurse for Adam's transplant surgery**  
I would have been allocated to that operating theatre by the nurse-in-charge that day. I do not recall who that was.

**(c) Describe and explain any information provided to you by Staff Nurse Conway when you "took over from [her] as Scrub Nurse", including information on Adam, his condition and the transplant surgery**  
I do not recall any specific information being given to me by S/N Conway on Adam's condition or the transplant surgery. My recollection is that I scrubbed up and took over from her. This involved the two of us checking the instruments that she had set up. My recollection is that the transplant was already underway but I do not remember what stage it was at when I scrubbed in.

**(d) Describe what you knew of the fluid management plan for Adam's surgery, including who informed you of it, when and where**  
I was not informed of the fluid management plan for Adam's surgery.

**(e) Explain what you mean by "duration" in your statement the "duration of a kidney transplant operation on Adam"**  
My meaning is the time it took to complete the surgery.

**(f) State if, on 27<sup>th</sup> November 1995, you knew how to use a blood gas machine to test electrolytes and whether you were trained and authorised to do so**  
I did not know how to use a blood gas machine on 27<sup>th</sup> November 1995 nor was I trained or authorised to do so.

**(g) Identify any protocol or guidelines governing your actions in respect of being the "Scrub Nurse for the duration of a kidney transplant operation"**  
I do not recall any protocols or guidelines. I do recall a list of instruments required for major abdominal surgery, which this would have been considered to be.

**(h) Describe what you considered to be your role in relation to and responsibilities towards Adam from when you first learned that there was a donor kidney for him until 28<sup>th</sup> November 1995 when ventilatory support for him was withdrawn, and in particular:**

- from Adam's admission to RBHSC until his arrival in theatre
- while Adam was in theatre until his admission to PICU
- from admission to PICU until his death

My only duties in relation to Adam were as scrub nurse in theatre.

(5) *"Any blood soaked swabs either passed to me or removed by me were placed in a metal runabout at floor level. They were retrieved by the circulating nurse, who weighed them recording the loss on a white notice board on the wall which was visible to all staff. Once the swabs were weighed they were placed on a swab rack by the circulating nurse. This rack was clearly visible in theatre. By placing them on the rack, this also ensured that when the counts were being completed they were clearly visible to myself and the circulating nurse to facilitate an accurate count. The loss was recorded as a running total. Any blood suctioned from the abdominal cavity was collected in a measuring bottle."* (Ref: 093-012-039 to Ref: 093-012-040)

(a) Describe and explain your role and responsibility in respect of the "blood soaked swabs", including as regards the count of them being "clearly visible to myself ... to facilitate an accurate count"

The swabs needed to be clearly visible to myself and the circulating nurse so that we could count them accurately to ensure none were left in the patient.

(b) Describe and explain how and by whom other fluid (non-blood) was collected, measured, recorded and reported

I do not recall how any non blood was collected, measured, recorded and reported. I do not recall it being part of my duties as scrub nurse.

(c) State whether Adam's urinary output was monitored and if so state who was responsible for doing so

I do not recall whether Adam's urinary output was monitored nor who was responsible for this. I do not recall it being part of my duties as scrub nurse.

(6) *"In relation to the operation involving Adam Strain ... I recall that there was a Staff Nurse Matheson was [sic] acting as a circulating nurse for at least part of the operation; her duty was to assist me. Also present were Doctors Taylor, Montague, Brown and a transplant surgeon from the City Hospital whose name I do not recall. I cannot be certain, however, from my experience it is possible that the anaesthetists had the assistance of a nurse and possibly an operating technician."* (Ref: 093-012-040)

(a) Identify the 'nursing team' for Adam's renal transplant operation and describe how the 'team' was selected, when and by whom

I do not recall a specific nursing team being allocated for Adam's transplant surgery. The nurse in charge would allocate nurses to each theatre on the day.

(b) Explain what you mean by "part of the operation" in your statement as to what Staff Nurse Mathewson was doing

Once I was scrubbed, I remained so until the surgery was completed, i.e. at skin closure. Although I recall S/N Mathewson being there, particularly at the final counts the circulating nurse could change to facilitate breaks. I do not recall who relieved her.

(7) *"My recollection is that during my time between 8am to around midday this operation proceeded as expected until at the end of the operation there was concern from the anaesthetists that Adam would not waken up. I also recall the surgeons discussing the possible discolouration of the kidney at the time of transplant. This concern appeared to subside as the operation progressed. I do not remember anything else unusual about the progress of this operation."* (Ref: 093-012-040)

**(a) Explain what you mean by your reference to "the end of the operation"**

I mean when the skin had been sutured.

**(b) Describe the difficulties in waking Adam, including:**

- when and by whom those difficulties were first noted and identify who was present at that time
- when and where the first efforts were made to waken Adam and identify who was involved in those efforts and who was present whilst they were being made

I do not remember when or by whom the difficulties were first noted, nor am I able to identify who was present at the time. I do not remember when and where and by whom first efforts were made to waken Adam. Patients were not always woken in theatre.

**(c) Describe the terms in which the "concern from the anaesthetists" was expressed in theatre "that Adam would not waken up" and identify "the anaesthetists" expressing that concern**

I was aware as I proceeded with my responsibilities i.e. preparing the used instruments for re-sterilization and disposing of single use items, that there was a concern. I cannot recall anything specifically that was said, it was more an awareness of an atmosphere of concern and I cannot remember exactly who of the anaesthetists involved were expressing the concerns.

**(d) Describe the discussions of the surgeons relating to "the possible discolouration of the kidney at the time of transplant", and state at what time these discussions took place and to what end**

I was aware that there was a discussion going on, I cannot recall at what time. I do recall the concerns subsided and the operation proceeded.

**(e) Explain who was responsible for keeping the family informed about progress with surgery and any concerns that might arise**

I do not know whose responsibility this was.

**(8) "At about midday Adam was transferred to the Paediatric Intensive Care Unit. Before this my duties with regard to Adam ceased; once closure of the wound is made and the drapes are taken off it is my responsibility that the equipment is packed away and disposed of; this is done in a different area." (Ref: 093-012-040)**

**(a) Describe Adam's condition and appearance when he was transferred to PICU**

I do not recall being involved in Adam's transfer to PICU or seeing him during his transfer or having any specific knowledge of his condition.

**(b) Identify and describe the "equipment" which it was your responsibility to have "packed away and disposed of" and identify and describe which of that equipment you:**

- "packed away"
- "disposed of"

I was responsible for packing away the trays of instruments used so they could be sent for re-sterilization. I was responsible for disposing correctly of all the single items used such as blades, sutures, needles and swabs.

**(c) State whether you identified the "equipment" to anyone for the purposes of an investigation after Adam's death and if so state when you did that and identify the person(s) concerned**

I did not nor was asked to do so.

### III ADDITIONAL INFORMATION

**(9) Describe in detail the education and training you received in fluid management (in particular hyponatraemia) and record keeping through the following, providing dates and names of the institutions/bodies:**

**(a) Pre-registration education**

I trained at the North Down College of nursing from April 1988 to June 1992. During my training I do not recall any specific training re hyponatraemia. I was trained to care for children who were dehydrated, what the cause, to care for them while they were having intravenous fluid therapy, to be aware of the signs and symptoms of fluid overload and to report these to medical staff. All changes were recorded in the nursing kardex and great emphasis was placed on accurate recording, legible writing and dating and signing each entry.

**(b) Post-registration education and training**

I was aware that from 2001, the previously used intravenous fluid replacement therapy "No 18 solution" was no longer in use. Since then, greater emphasis has been placed on the safe administration of intravenous fluids to children. In the area in which I presently work, we adhere to specific guidelines on fluid management in children. In our treatment areas, we have algorithm posters clearly visible to all staff indicating these guidelines. In my current role, I have completed an E-Learning module on hyponatraemia, along with my nursing colleagues.

**(c) Hospital induction programmes**

I do not recall any specific training on hyponatraemia or fluid management at any of my hospital induction programmes.

**(d) Continuous professional development**

In the last two years in the Ulster Hospital Children's Unit, I have completed an E-Learning module on hyponatraemia along with all my nursing colleagues.

**(10) Prior to 26<sup>th</sup> November 1995, describe in detail your experience of children with hyponatraemia, including the:**

- estimated total number of such cases, together with the dates and where they took place
- number of the children who were aged less than 6 years old
- number of children who were polyuric
- nature of your involvement
- outcome for the children

To my knowledge I did not have any experience nursing children with hyponatraemia. I have nursed children with dehydration whatever the cause and have nursed children receiving intravenous fluid therapy.

**(11) Since 27<sup>th</sup> November 1995, describe in detail your experience of children with hyponatraemia, including the:**

- estimated total number of such cases, together with the dates and where they took place
- number of the children who were aged less than 6 years old
- number of children who were polyuric
- nature of your involvement
- outcome for the children

To my knowledge I have not had experience of nursing children with hyponatraemia. I have nursed children with dehydration whatever the cause and nursed children receiving intravenous fluid

therapy.

**(12) State who recorded "vascular anastomosis ~ 10.30am 27/11/95" in Adam's notes (Ref: 059-006-012) and when that entry was made**

I do not know.

**(13) Identify precisely on Adam's medical notes and records the entries that you made or which were made on your direction and state below:**

**(a) when each of the identified entries was made**

**(b) the source of the information recorded in the entry**

To the best of my knowledge the only entry I made was on the swab count form which I signed following the 4<sup>th</sup> and final count at the end of the surgery (058-007-020).

**(14) Provide any further points and comments that you wish to make, together with any documents, in relation to:**

**(a) The care and treatment of Adam from his admission for the renal transplant surgery on 26<sup>th</sup> November 1995 to his death on 28<sup>th</sup> November 1995**

I have no comments I wish to make.

**(b) Record keeping**

I have no comments I wish to make.

**(c) Communications with Adam's family about his care and treatment in respect of the renal transplant surgery**

I have no comments I wish to make.

**(d) Lessons learned from Adam's death and its effect on your practice**

There are guidelines in place for the care of and management of children receiving intravenous fluid therapy. Staff in my area have been given specific training on hyponatraemia and the fluids used in the resuscitation of children have changed.

**(e) Current 'protocols' and procedures**

As previously mentioned at D.

**(f) Any other relevant matter**

None.



THIS STATEMENT IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF

Signed: G. N. Popplestone .

Dated: 11/9/2011