

Witness Statement Ref. No.

101/1

NAME OF CHILD: Adam Strain

Name: Margaret Mathewson

Title:

Present position and institution: Housewife

Previous position and institution:

[As at the time of the child's death]

Theatre Staff Nurse (RBHSC)

Membership of Advisory Panels and Committees:

[Identify by date and title all of those between January 1995-December 2010]

None

Other Statements, Depositions and Reports:

[Identify by date and title all those made in relation to the child's death]

OFFICIAL USE:

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

Ref:	Date:	
093-013	06.04.06	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 PSNI WITNESS STATEMENT

With reference to your PSNI Witness Statement dated 6th April 2006 (Ref: 093-013-042), please provide clarification and/or further information in respect of the following:

(1) *"In November 1995 I was employed as a nurse at the Royal Belfast Hospital for Sick Children. My qualifications were RSCN (Registered Sick Children's Nurse) and I had experience after qualifying in 1986 in RBHSC, then 1987 to 1989 in Great Ormond Street Hospital. In 1989 I returned to RBHSC and remained there until I left nursing about November 1996."*

(a) Describe your work commitments to the Royal Belfast Hospital for Sick Children (RBHSC) from the date of your employment and particularly over the period 26th November to 28th November 1995

From my date of employment at RBHSC I worked in numerous departments.

1986-1987 - Allen Ward - Staff Nurse

1987-1989 - Great Ormond Street (Neurology) - Staff Nurse

1989-1996 - Theatres, RBHSC - Staff Nurse

I am unable to provide my work commitments over 26th to 28th November 1995 other than to confirm I was on duty as a Theatre Staff Nurse during Adam Strain's operation.

(b) Prior to 26th November 1995, describe in detail your experience in paediatric renal transplants, including the:

- estimated total number of such cases, together with the dates and place where they took place, for which you acted as "scrub nurse"
- number of the children who were aged less than 6 years old
- number of children who were polyuric
- outcome for the children

I cannot recall how many renal transplant cases I was involved in.

(c) Prior to 26th November 1995, describe in detail your experience of the care and management of children with hyponatraemia, including the estimated number of such cases, together with the dates, where they took place and the outcome for the children

I am unable to confirm experience with specific cases of hyponatraemia.

(2) *"In November 1995 I was attached to theatres and my duties ranged from being an anaesthetic nurse, to scrub nurse to being runner and also working in recovery. I can say from my experience that in an operation such as a renal transplant on a child, as well as the surgeons and*

anaesthetists I would have expected a scrub nurse, a runner and a theatre technician with probably an anaesthetic nurse as well."

(a) State whether you had been involved in the care and management of Adam prior to his renal transplant surgery on 26th November 1995 and describe:

- your knowledge of his condition, medication and previous fluid management regimes and
- lessons you learned from your prior treatment of Adam

I cannot recall being involved in Adam's care prior to his renal transplant surgery so I cannot recall any lessons learnt.

(b) Describe what you considered to be your role in relation to and responsibilities towards Adam from first learning of a potential donor kidney for him until 28th 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

I was only involved with Adam's care when he was actually in Theatre, as "runner".

(3) "[M]y duty on 27.11.95 was runner in theatre during an operation on Adam Strain. [...] I recall an operation in which the child failed to revive at the conclusion but I cannot recall the name, or gender of the child and I cannot recall the nature of the operation but believe it was major surgery. I cannot recall any of the theatre staff involved in that operation. I cannot recall any discussion afterwards relating to a death of a child named Adam Strain and cannot say with any certainty that the child I recall as failing to revive was in fact Adam Strain, but I do recall that the failure to revive occurred at lunchtime and the child was moved to Intensive Care Unit."

(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

I am unable to recall.

(b) Describe and explain how you came to act as "runner" in theatre for Adam's transplant surgery

This would have been based on that day's rota but I cannot confirm this.

(c) Describe the role of a "runner" in paediatric transplant surgery

As in all surgery, my role of "runner" was to ensure that all equipment used in the course of an operation was checked, recorded and accounted for, and blood loss calculated and recorded, and any additional items required were provided and recorded.

(d) Identify any protocol or guidelines governing your actions as a "runner in theatre" during a paediatric renal transplant surgery

I am not aware of any protocol or guidelines but nurses were instructed and shown what to do in each

department in Theatre, RBHSC and they worked under supervision with an experienced nurse until all felt 'new' nurses were confident and comfortable in what they were doing. As "runner", in all surgical procedures, he or she, ensured that all equipment used was accurately recorded, as were any additional requirements requested. Swabs and sutures, for example, are counted and recorded. Three swab counts were carried out when closing wounds and recorded.

(e) State if, on 27th November 1995, you knew how to use a blood gas machine to test electrolytes and whether you were trained and authorised to do so

No.

(4) "From this sheet I can state the writing in the left column from "total blood loss" to "911 approx" is my writing. This column was used by me to calculate the total blood loss by adding the total of 411 in the right hand column to 500mls approximately in the suction bottle. I can also confirm on this sheet in the centre column my writing commences at the figure 20.1 and this column records the blood accumulated in an individual swab. In the right column I can confirm that my writing commences at 160.7 and this column records a running total of all blood loss in the swabs."

(a) Describe and explain your role and responsibility in respect of the blood loss measurements, calculations and recording, and the means by which you determined "the blood accumulated in an individual swab."

Each Theatre has precise scales for weighing swabs. Swab loss is calculated using a dry sterile swab. This is the base level and anything in excess is calculated as blood loss and recorded. All running totals are recorded on a "white board" on Theatre wall for staff to see as well as on the swab chart. All used swabs are displayed on a large swab rack and accounted for. Blood loss accumulated by suction, during the procedure, is fed directly into a graduated suction bottle.

(b) State whether the information about blood loss was reported to anyone and, if so, state to whom

Blood loss is clearly recorded on the whiteboard on the Theatre wall for all to see. I am not able to recall any specific report but I would assume normal communication would have taken place.

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

Other fluid was dealt with by anaesthetic staff.

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

Monitoring of urinary output was the responsibility of the Anaesthetist.

II ADDITIONAL INFORMATION

(5) Identify any 'Protocols' and/or 'Guidelines' which governed Adam's renal transplant surgery

I am not aware of any Protocols or Guidelines governing Adam's transplant surgery.

(6) 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 do not recall anything specific.

(b) Post-registration education and training

(c) Hospital induction programmes

(d) Continuous professional development

I have not nursed for 14 years+.

(7) 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.

(8) 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

As per PSNI statement (093-013-042, 043, 044) these entries were made when Adam was in Theatre on 27/11/95 when I was "runner" for his renal transplant.

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

This was from the Theatre swab chart (058-007-021) from blood loss from swabs and suction bottle contents.

(9) 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 26th November 1995 to his death on 28th November 1995

(b) Record keeping

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

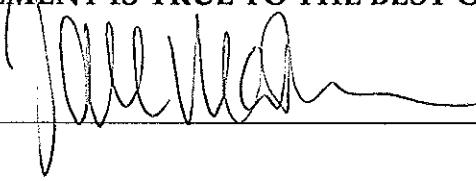
(d) Lessons learned from Adam's death and its effect on your practice

(e) Current 'protocols' and procedures

(f) Any other relevant matter

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

Signed:

A handwritten signature in black ink, appearing to read "Jill Ward", written over a horizontal line.

Dated:

10/4/11