

Witness Statement Ref. No.

152/1

**NAME OF CHILD: Claire Roberts**

**Name: Rachel Murphy**

**Title: Staff Nurse, RBHSC**

**Present position and institution:**

**Retired**

**Previous position and institution:***[As at the time of the child's death]*

**I was employed as a Staff Nurse at the Royal Belfast Hospital for Sick Children in Allen Ward.**

**Membership of Advisory Panels and Committees:***[Identify by date and title all of those between January 1995-December 2010]*

**None**

**Previous Statements, Depositions and Reports: None**

*[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:	

**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 an Inquiry reference number, then please provide a copy of the document attached to your statement.

- (1) Describe your work commitments to the Royal Belfast Hospital for Sick Children (RBHSC) from the date of your employment there as a nurse, including the department/s and locations in which you worked and the periods of time in each department/location, and in particular with regard to the period 21<sup>st</sup> October 1996 to 23<sup>rd</sup> October 1996.**

I returned to the RBHSC in 1974 after a period of absence while I was having my family. I was employed as Part Time Staff Nurse working 2 night duties per week in PICU. I then did "runner\*\*" for a number of years until that position no longer existed, although I cannot recall what year it was. The remainder of my employment until I retired in 2006 was spent as a Part - Time Staff Nurse at Allen Ward, still working two night duties per week.

\*\*In those days some of the wards were not staffed by trained nurses during the night shift, therefore the "runner", who was a staff nurse, had to go round each ward and checked controlled drugs. The position no longer exists, as trained staff nurses are in charge of wards on the night shift.

- (2) State the times at which you were on duty between 21<sup>st</sup> October 1996 to 23<sup>rd</sup> October 1996 and in particular:**

- (a) Whether you were on duty and present in the hospital at all times or**

I believe I started Night Duty at 2000hrs on 22 10 96 and finished duty at 0800hrs on 23 10 96. I would have been on duty and present in the hospital between those hours.

- (b) Whether you were on call during that period**

As a staff nurse I would not do on call.

- (c) What contact you had with Claire and her family during that period including where and when that contact occurred**

I have no recollection of contact with Claire or her family however, document numbers 090-038-pages 135 and 136 would indicate that I erected Claire's IV Fluids and read her IV drip on the evening of the 22 10 96.

- (3) Describe what you considered to be your role in relation to, and responsibilities towards, Claire and her family over the period from her attending A&E in RBHSC on 21<sup>st</sup> October 1996 until 23<sup>rd</sup> October 1996 when ventilatory support was withdrawn, and in particular:**

- (a) From Claire's attendance at A&E at RBHSC until her arrival in Allen Ward**

- (b) While Claire was in Allen Ward until her admission to PICU**

- (c) From admission to PICU until her death**

I have no recollection.

**(4) Describe your role, responsibilities and actions in relation to:**

**(a) Claire's fluid administration, monitoring and management**

I have no recollection of Claire's fluid administration, monitoring and management.

**(b) The making and recording of observations of Claire including determining the type of and reviewing the frequency of those observations**

I have no recollection of making and recording Claire's observations.

**(5) In relation to the actions which you have described above in respect of Claire's fluid management etc. and the making of observations etc.: The reasons for my actions would be as directed by the Doctor on call. I have no recollection of the identity of the on call doctor on duty that night.**

**(a) Explain the reasons for your actions**

I have no recollection.

**(b) State which of them you carried out on the express instructions of a doctor, identifying in each case:**

**(i) the doctor concerned**

**(ii) the instructions they gave you**

**(iii) when they gave them to you**

I cannot remember the Doctor concerned or any instructions that were given.

**(c) Whether you sought advice from or consulted with any other doctors or nurses prior to taking any of those actions, and if so:**

**(i) identify the person(s) from whom you sought advice/consulted and state when you did so**

**(ii) state the nature of the advice you sought/the issues on which you consulted**

**(iii) state the advice that you received and identify the person who gave it to you**

**(iv) if you did not seek any such advice or consultation, explain why not**

I have no recollection.

**(6) Describe and explain any discussions you had with any doctors and/or nursing staff in relation to Claire whilst you were on duty between her attendance at A&E on 21<sup>st</sup> October 1996 and 23<sup>rd</sup> October 1996, including:**

- (a) The identity of the person concerned**
- (b) Where and when the discussions took place**
- (c) What prompted the discussions**

I have no recollection.

**(7) State whether you reported Claire's condition, including her blood results, to any doctor(s) at any time during your period on duty over 21<sup>st</sup> October 1996 to 23<sup>rd</sup> October 1996, and if so:**

- (a) Identify the doctor(s) to whom you reported and state the time at which you reported**
- (b) State the means by which you conveyed that report e.g. orally, in person, by telephone, in writing**
- (c) Describe and explain what you reported**
- (d) State whether, as a result of your report, Claire:**
  - (i) was reviewed or reassessed, and if so explain the result of any such review/assessment**
  - (ii) had her care/treatment changed, and if so describe any changes that were made and explain the reason for them**
- (e) If Claire was not reviewed/reassessed or did not have her care/treatment changed, then please give the reasons**

I have no recollection.

**(8) State whether you discussed Claire and her condition with the night sister, and if so, state when and where you discussed Claire, the nature of the discussion and what the outcome of the discussion/s was and provide the name of the night sister(s) covering Allen Ward on the night of 22<sup>nd</sup> October 1996.**

I have no recollection.

**(9) Identify precisely on Claire'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**

On 22 10 96 at 2340hrs according to document 090-038-136 - which is an Intravenous Fluid Prescription Chart, I checked a bag of Number 18 solution with 20 mmls of KcL added to run at 41mls/hr and signed the chart to that effect. At midnight on the same date, according to document 090-038-135 - which is a Fluid Balance Sheet it would indicate that I read the level on the IV fluid pumps. The document would also indicate that I checked the IV site or sites and signed the document to that effect.

- (10) State whether you checked what was written in the medical notes about Claire at any time, and if so, state when and why you did so. If you did not do so, state the reasons why not.

I cannot recollect.

- (11) Explain the policy and procedure at the RBHSC in October 1996 for nurses contacting a registrar on the appropriate clinical team directly, if they were unhappy with the SHO's/junior doctor's response.

I cannot remember.

- (12) Explain the policy and procedure at the RBHSC in October 1996 for nurses contacting the on call consultant responsible for the patient directly, if they were unhappy with the responses of SHO/Registrar.

I cannot remember.

- (13) State whether you were present at any time while Claire was being examined by a doctor, and if so, identify the doctor conducting the examination, and state when this occurred and what you were informed about Claire's diagnosis, condition and management at that time.

I cannot remember.

- (14) State when you commenced duty on Allen Ward on 22<sup>nd</sup> October 1996 whether there was a 'handover' to you in relation to Claire.

- (a) If so, identify the person who conducted that 'handover' and state the information communicated to you about Claire at that time.

There would have been a handover in relation to all patients in the ward as would have been mandatory at the start of every shift, but I do not remember Claire's case specifically.

- (15) In relation to Claire's admission to Allen Ward:-

- (a) State your understanding on 22<sup>nd</sup> October 1996 of the reasons for Claire's admission to Allen Ward, and state the basis of this understanding. In particular state whether you had been informed or were aware of the primary diagnosis of "encephalitis?" in A & E (Ref: 090-012-014), Dr. Bernie O'Hare's diagnosis of "1. Viral illness 2.-encephalitis" (Ref: 090-022-050) or the later diagnosis on 22<sup>nd</sup> October 1996 of "non fitting status [epilepticus] /encephalitis/encephalopathy" (Ref: 090-022-053), and if not, state the reasons why not.

I was not on duty during Claire's admission to Allen Ward.

- (b) State whether you saw and read the entries on Claire's Accident and Emergency Department Nursing Assessment at Ref: 090-010-012 including the description of "EPILEPTIC", and if so, state when and where you read it, and what account you took of the description of "EPILEPTIC" in making your assessment of Claire.

I was not on duty during Claire's admission to Allen Ward.

- (c) Identify the documents you saw at that time relating to Claire's admission and in particular state whether you saw at that time:
- (i) Claire's A&E notes
  - (ii) Claire's medical notes on admission to Allen Ward and thereafter

And if not, state the reasons why not.

I was not on duty during Claire's admission to Allen Ward.

- (d) Identify any person/s who briefed you about/handed over to you Claire's case, the reasons for her admission to Allen ward, the diagnosis, her treatment, care and management, and state when you were given this information.

I was not on duty during Claire's admission to Allen Ward.

- (e) Identify the person/s who were responsible for informing the nursing staff on Allen Ward of the reasons for Claire's admission and the ongoing diagnosis of Claire's condition.

I was not on duty during Claire's admission to Allen Ward.

- (f) Explain why hourly neurological observations were not commenced earlier on 22<sup>nd</sup> October 1996.

I do not know.

(16) State where Claire's bed was located on Allen Ward.

- (a) In particular, state whether she was in a bay on the general ward
- (b) If she was in a bay, state how many beds were in the bay
- (c) If she was in a room, state how many beds were in the room, and how many patients were in the room during her care
- (d) The distance she was positioned from the nursing station
- (e) If she was moved at any time within the ward, state when, to where and why she was moved

I do not recall.

**(17) In relation to the Fluid Balance and IV Prescription Sheet (Ref: 090-038-135):**

**(a) Identify precisely the entries that you made or which were made on your direction.**

Document 090-038-135 - at 2400hrs the document would indicate that I entered the level on No 1 pump as 1037 and No 2 pump as 16.8 and that I signed the document twice with my signature.

**(b) Identify the person who measured Claire's weight which is noted as 24.1kg and state the means by which, when and where this was measured.**

I cannot recall.

**(c) State the type and volume of the IV fluids being administered and the rate of administration on 22<sup>nd</sup> and 23<sup>rd</sup> October 1996 while you were on duty.**

I cannot recall the type of fluids being administered, but the document 090-038-136 would indicate that the volume of the fluid was 64mls/hr until 2340hrs, when the fluid was reduced to 41mls/hours and the document would indicate that the type of fluid was No18 with 20mmls of KcL.

**(d) Specifically, state whether the fluids being administered were No.18 Solution or normal saline (Ref: 090-038-136)**

Answer 17c above refers.

**(e) Identify the person who prescribed the type, volume and rate of administration of IV fluids for Claire on 22<sup>nd</sup> and 23<sup>rd</sup> October 1996 in Allen Ward.**

I cannot recall and I am unable to decipher the signature on the relevant document 090-038-136.

**(f) State any input you had into the choice of IV fluid, volume and rate of administration of that fluid for Claire, in particular the fluid signed for at 11.40 (Ref: 090-038-136). State the reasons why the N Saline was changed to No18 and the rate changed from 64 mls to 41mls/hr.**

I would not have any input into the choice of IV fluid, volume or rate of administration. I cannot state the reasons why the solution or the rate was changed.

**(g) Explain why IV solution of 0.18 Saline/4% dextrose continued to be administered to Claire on 22<sup>nd</sup> October 1996 when on admission she had been "Vomiting at 3pm and every hour since" (Ref: 090-022-050), and she continued to vomit frequently overnight after her admission on 21<sup>st</sup> October 1996 (Ref: 090-038-133).**

I do not know.

**(h) State the reasons why Claire's urine output was not measured, monitored and recorded, particularly as Claire was wearing a nappy.**

I do not know.

- (i) State whether you considered catheterising Claire on 22<sup>nd</sup> October or 23<sup>rd</sup> October 1996 and if so, state when you considered this and the reasons why. If you did not consider this, state the reasons why.

I have no recollection.

- (j) State whether consideration was given to the possibility of passing a naso-gastric (NG) tube. If so, identify who discussed this, when, and why it was not done. If a NG tube was not considered, explain why not.

I have no recollection.

- (k) State the 'hospital policy' on administration of fluids in October 1996 including the hospital policy on type and volume of fluid, and rate of administration, and the review and reassessment of the fluid regime in Claire's case. (Ref: 090-043-146)

I cannot remember.

- (l) State what you understood to constitute an "accurate fluid balance chart" in October 1996. (Ref: 090-043-146)

Due to the passage of time I cannot remember what constitutes an "accurate fluid balance chart"

- (m) State whether measuring and recording the quantity of Claire's vomit and urine output would have been required in October 1996 to constitute an "accurate fluid balance chart".

I do not know.

- (n) State whether a doctor was informed of Claire's failure to pass urine for 8 hours on 22<sup>nd</sup> October 1996, and if so, identify which doctor was so informed and when they were so informed. If not, state the reasons why a doctor was not informed of this.

I do not know.

- (o) State what is meant by "small mouthfuls" recorded on the chart at 24.00 and 01.00h.

I would have considered a small mouthful to be approximately 5mls of fluid.

- (p) State whether you informed or discussed with any doctor the "small mouthfuls" of "aspirate or vomit" recorded at 24.00 or 01.00, and if so identify the doctor, when s/he was informed of this, and what was the outcome of that discussion or provision of information. If you did not discuss or inform any doctor, state the reasons why not.

I have no recollection of this.

- (18) "Send urine for osmolality" (Ref: 090-022-056)

- (a) State whether a urine sample was sent "for osmolality" and if so, state the result of that test and where that result is recorded.



I have no recollection.

- (19) *"9.30pm. First dose of IV Acyclovir erected by doctor and run over one hour. Hyponoval infusion increased by 0.1 ml every 5 minutes until running at 3mls/hr as prescribed by doctor -completed at 10.40pm.*

*Additional information. Line inserted (r) hand. Bloods - U&E. Phenytoin level" (Ref: 090-040-138).*

- (a) State whether you considered whether closer observation of Claire was needed to ensure her airway was clear, when the diagnosis was changed to non-fitting status epilepticus, due to the risk that breathing could be affected.
- (b) When Claire's diagnosis was changed to non-fitting status epilepticus, state whether you were aware at that time of the possibility of either dehydration or fluid overload due to Claire's altered consciousness, and if so, state what action you took to manage this risk. If not, state the reasons why not.
- (c) Identify who erected and administered to Claire the *"First dose of IV Acyclovir"* on 22<sup>nd</sup> October 1996, and whether you were present during this.
- (d) State the nature of the diluents in which the *"IV Acyclovir"* was presented.
- (e) State when the *"Hyponoval infusion"* was *"increased by 0.1 ml every 5 minutes until running at 3mls/hr"*, and identify the doctor who prescribed this medication.
- (f) While Claire was being given midazolam, state whether you considered Claire to have been at risk of respiratory depression, and if so, state what actions you took in relation to this. If you did not consider this, state the reasons why not.
- (g) During the infusions, state whether you considered making and recording respiratory observations more frequently, and if so, state the reasons why you considered this. If you did not consider this, state the reasons why not.
- (h) State whether Claire's level of consciousness combined with the sedative effect of the medicines could have resulted in breathing difficulties, and if so, state the reasons why. If not, state the reasons why not.
- (i) State whether you regarded Claire's condition at any time as warranting continuous heart monitoring, and if so, state the reasons why. If not, state the reasons why not.
- (j) State the reasons why, for what purpose and at what time a line was inserted in Claire's right hand on 22<sup>nd</sup> October 1996, and identify the person/s and their job title who directed that U&E bloods be tested at that time, the reasons for this test being conducted on the evening of 22<sup>nd</sup> October and the time at which the blood sample was taken from Claire.

I do not recall having any involvement in this aspect of Claire's treatment.

(20) "11pm. IV phenytoin erected by doctor and run over one hour - cardiac monitor in situ throughout infusion.

Due to U&E results No 18 solution with 20mmols KCL erected as ordered by Registrar. To have fluid restriction of 41mls/hr.

Hourly CNS observations recorded - temperature elevated at 10pm - paracetamol given (at 8.30pm) by day staff

Additional information: Glasgow coma scale 6.

Other observations within normal limits" (Ref: 090-040-138)

(a) State the reasons why a cardiac monitor was "in situ throughout infusion" during the IV phenytoin administered at 23.00.

I do not know.

(b) State whether a cardiac monitor was "in situ throughout infusion" during the IV phenytoin administered to Claire about 14.45, and if so, state the reasons why. If a monitor was not used, state the reasons why not.

I had no involvement with regards to this.

(c) State the nature of the diluents in which the "IV phenytoin" was presented.

I do not know.

(d) State what "KCL" is and the purpose of it.

KCL is potassium chloride, however due to the passage of time I do not remember its purpose.

(e) State the basis upon which IV fluids were restricted to 2/3 of their present value as opposed to ceasing altogether.

I had no involvement with regards to this.

(f) State whether a consultant was informed of Claire's U&E results, and in particular her serum sodium result of 121 mmol/L, and if so identify that consultant and state the time at which s/he were so informed. If no consultant was contacted on receipt of those blood results, explain why not.

I do not know.

(g) State at what time Claire was given paracetamol, the quantity thereof, and identify the person/s who prescribed and administered this medicine.

I do not know.

- (h) State whether you were concerned by the Glasgow Coma Scale of 6, and if so, state the reasons why. If not, state the reasons why.

I had no involvement with regards to this.

- (i) Identify the "Other observations" which were "within normal limits", and identify the document in which they were recorded.

I had no involvement with regards to this.

- (j) State your understanding of normal vital signs for a child of Claire's age.

I cannot remember.

- (k) State in what capacity Dr. Webb was to see Claire, and in particular whether care of Claire was being transferred to Dr. Webb or whether he was providing a specialist opinion/advice to the medical team who still retained responsibility for Claire's care and management.

I do not know.

- (21) "23/10/96 - 2.30am. Slight tremor of right hand noted lasting few seconds. Breathing became laboured and grunting. Respiratory rate 20 per minute. O2 saturation 97%. Claire stopped breathing. (Ref: 090-040-138)

*Dr. contacted immediately.*

*Oxygen and suction given. Registrar attempted to pass ET tube but unsuccessful - anaesthetist called and ET tube inserted.*

*Transferred to intensive care unit at 3.25am. No medication/drugs given." (Ref: 090-040-139)*

*"Paediatric Intensive Care Unit...*

*Reason for Admission: Respiratory arrest*

*Accompanied by: Nurse. Doctor." (Ref: 090-027-078)*

- (a) Identify the "Dr" who was "contacted immediately" and identify the person who contacted that doctor.

I cannot remember.

- (b) Identify the person/s who contacted Dr. Steen at approximately 03.00 on 23<sup>rd</sup> October 1996, their position, and the reasons why they contacted Dr. Steen in relation to Claire.

I cannot remember.

- (c) State whether the fall in the Glasgow Coma Score to 7 at 15.00 and to 6 at 16.00 and 17.00 and from 21.00 onwards caused you any concern, and if so, state the reasons why, what action you took in relation to that concern, whether you informed any other nurse or clinician of those scores, and if so, whom did you so inform and when did you do so. If the scores did not cause you any concern, explain the reasons why not.

I cannot remember.

- (d) State whether you regarded Claire's condition at any time as warranting continuous heart monitoring, and if so, state the reasons why. If not, state the reasons why not.

I cannot remember.

- (e) State whether Claire's respiratory rate was elevated at any time and if so, state when this occurred, what that rate was, whether a doctor was informed of this and when s/he was so informed, and where this is recorded.

I have no recollection.

- (f) In light of Claire's condition from 17.00 onwards of being " *Very unresponsive - only to pain. Remains pale*", state whether you had any concerns relating to Claire's ongoing lack of responsiveness and improvement, and if so, what actions you took in relation to those concerns and when you took this action. If you had no such concerns, state the reasons why not.

I cannot recall.

- (g) Identify who prescribed "1/5 N at 64mls/hr" for Claire and the document containing that prescription, and state when it was prescribed, when that infusion commenced at that rate and the basis upon which this type and volume of fluid and this rate of administration were prescribed for Claire given her condition.

I do not know and I am unable to decipher the signature on document - 090-038-136.

- (h) Identify the "Nurse" and "Doctor" who are recorded as accompanying Claire to PICU (Ref: 090-027-078) from Allen Ward on 23<sup>rd</sup> October 1996.

I do not know.

- (i) State whether you were involved in transferring Claire from Allen Ward to PICU on 23<sup>rd</sup> October 1996 and identify all nurses and other clinicians by name and position who were involved in this transfer. If so, describe the nature of your involvement or the involvement of the other clinicians or nurses in that transfer.

I do not know.

- (j) Identify the consultant/s and any other clinicians who accompanied Claire when she was transferred from Allen Ward to PICU.

I do not know.

- (k) Identify any nurses who accompanied Claire when she was transferred from Allen Ward to PICU.

I do not know.

- (l) Identify the consultant or other clinician in PICU to whom Claire's care was transferred on 23<sup>rd</sup> October 1996.

I do not know.

- (m) Identify the designated PICU nurse and any other PICU nurse/runner to whom Claire's care was transferred on 23<sup>rd</sup> October 1996.

I do not know.

- (n) State at what time Claire's handover to PICU clinicians took place on 23<sup>rd</sup> October 1996 and identify who was present during that handover.

I do not know.

- (o) Identify who carried out the handover to the PICU clinician/s on Claire's arrival in PICU on 23<sup>rd</sup> October 1996, and state what information was given to the PICU clinician/s, or if you do not recall specifically, what information was likely/normally given during that handover, about:

- (i) Claire
- (ii) the reason for Claire's transfer to PICU
- (iii) Claire's diagnoses since her admission to RBHSC and on transfer to PICU
- (iv) the cause of Claire's respiratory arrest and fixed and dilated pupils
- (v) Claire's serum sodium concentration since her admission and in particular the serum sodium concentration of 121mmol/L recorded at 23.30 in Claire's medical notes on 22<sup>nd</sup> October 1996 (Ref: 090-022-056), and the cause of these sodium concentration levels
- (vi) the cause of Claire's cerebral oedema
- (vii) the likelihood that Claire had SIADH and the possible causes of this syndrome
- (viii) Claire's fluid input and output since her admission
- (ix) Claire's presentation, attacks and central nervous observations since her admission

I do not know (with respect to question i-ix) and due to the passage of time I cannot remember what information was likely/normally given during that handover.

- (p) State at what time Claire's handover to PICU nurses took place on 23<sup>rd</sup> October 1996 and identify who was present during that handover.

I do not know.

- (q) Identify who carried out the handover to the PICU nurse/s on Claire's arrival in PICU on 23<sup>rd</sup> October 1996, and state what information was given to the PICU nurse/s, or if you do not recall specifically what information was likely/normally given during that handover, about:
- (i) Claire
  - (ii) the reason for Claire's transfer to PICU
  - (iii) Claire's diagnoses since her admission to RBHSC and on transfer to PICU
  - (iv) the cause of Claire's respiratory arrest and fixed and dilated pupils
  - (v) Claire's serum sodium concentration since her admission, and in particular the serum sodium concentration of 121mmol/L recorded at 23.30 in Claire's medical notes on 22<sup>nd</sup> October 1996 (Ref: 090-022-056), and the cause of these sodium concentration levels
  - (vi) the cause of Claire's cerebral oedema
  - (vii) the likelihood that Claire had SIADH and the possible causes of this syndrome
  - (viii) Claire's fluid input and output since her admission
  - (ix) Claire's presentation, attacks and central nervous observations since her admission
- (r) Identify any protocols, guidance, procedure and accepted practice in October 1996 relating to the transfer to PICU and the handover to PICU staff, and please furnish copies thereof.
- (s) Identify the consultant you believed at that time to be responsible for Claire when she was admitted to PICU on 23<sup>rd</sup> October 1996, and the basis for your belief.
- (t) State the source of information of the details completed under "*Reason for Admission: Respiratory Arrest*" (Ref: 090-027-078).
- (u) State your understanding at that time of the cause of the respiratory arrest and the basis of that understanding.

I do not know (with respect to questions i-ix and r,s,t,u) and due to the passage of time I cannot remember what information was likely/normally given during that handover.

**(22) State whether you made any entry on the Central Nervous System Observation Chart (Ref: 090-039-137), and if so, identify each entry.**

**(a) State what you considered to be your responsibility as a staff nurse in relation to monitoring Claire's neurological observations.**

I have no recollection of any involvement in monitoring Claire's observations.

**(b) State whether you informed any doctor/s of the fall in Claire's Glasgow Coma Score to 6 at 21.00, 22.00 and thereafter, and if so, identify which doctor/s you informed and state when you so informed them. If you did not inform any doctor/s, state the reasons why not. State your understanding of the Glasgow Coma Scale and the importance of the value of 6.**

I have no recollection of being involved in this aspect of Claire's care.

**(c) State from where you derived your figure of 6.**

I have no recollection of being involved in this aspect.

**(d) Identify the person who had assessed Claire's Glasgow Coma Score at 8 and recorded this score at 20.00.**

I do not know.

**(e) Explain why there are no Glasgow Coma Score entries for 23.00 on 22<sup>nd</sup> October 1996 or at midnight.**

I do not know.

**(f) State if you recorded Claire's pupil reaction as being "sluggish" at 23.00 on the Chart and if so, what you meant by "sluggish". If not, identify who wrote "sluggish".**

I have no recollection of being involved in this aspect of Claire's care.

**(g) State if you discussed Claire's GCS scores with any other medical or nursing personnel, and if so, identify who you spoke to, what you discussed and when you discussed same.**

I have no recollection of being involved in this aspect of Claire's care.

**(h) As Claire's GCS does not exceed 6 from 21.00 on 22<sup>nd</sup> October 1996, state if any consideration was given by either nursing or medical personnel in regard to advising Claire's parents of her deteriorating condition from that time, particularly prior to their departure from the ward, and through the night. If so, state what was done about it. If not, explain why not.**

I do not know.

**(i) Explain the reasons why no respiratory observations are recorded on the chart for 20.00, 22.00 and 23.00 and identify who was responsible for recording these observations.**

I do not know and cannot provide an explanation.

- (j) Explain why Claire's limb movements were not recorded after 20.00 on 22<sup>nd</sup> October.

I do not know.

- (k) State whether you considered increasing the frequency of the respiratory observations on 22<sup>nd</sup> and 23<sup>rd</sup> October, and if so, state the reasons why and the outcome of your consideration. If you did not consider this, explain why not.

I have no recollection of being involved in this aspect of Claire's care.

- (l) State why there were no pulse rate recordings taken at 22.00, 23.00 and at midnight.

I do not know.

- (m) Explain why Claire's blood pressure was not recorded between 21.00 and 01.00, in view of the fact that it had been elevated earlier in the evening. Identify the person who was responsible for taking those blood pressure readings and recording them.

I have no recollection of being involved in this aspect of Claire's care.

- (n) State whether a doctor/nurse in charge/ward sister was informed of Claire's temperature at approximately 22.00, and if so, identify who was so informed, and state by whom and when were they were informed and what action was taken in relation to that. If a doctor/nurse in charge/ward sister was not informed, state the reasons why not.

I have no recollection of being involved in this aspect of Claire's care.

- (o) State whether a doctor/nurse in charge/ward sister was informed of the reduction in Claire's oxygen saturation level from 23.00 onwards, and if so, identify who was so informed, and state by whom and when were they so informed and what action was taken in relation to that. If a doctor/nurse in charge/ward sister was not informed, state the reasons why not.

I have no recollection of being involved in this aspect of Claire's care.

(23) State whether you made any entry on:

- (a) The record of attacks observed (Ref: 090-042-144), and if so, identify each entry and state in relation to each entry whether a doctor was informed of each attack, and if so, identify that doctor, state when s/he was so informed and what was done by him/her after this information was passed on. If a doctor was not informed, explain the reasons why not.

I have no recollection.

- (i) In particular, state if you witnessed Claire's episode of screaming and drawing up of arms recorded at 21.00 (Ref: 090-042-144). If so, identify who was present at the time and identify the doctor which is recorded as being informed and their job title, and state what was done by him/her after this information was passed on.



Furthermore, state the reasons why this event was not recorded in the main nursing evaluation plan and any further action needed added to that evaluation.

I cannot recall.

- (b) The document entitled 'Regular Prescriptions - Drug Recording Sheet' (Ref: 090-026-077) and if so, identify each entry.

I have not made an entry on document 090-026-077.

- (c) The Intravenous Fluid Prescription Chart (Ref: 090-038-136), and if so, identify each entry.

I made an entry on document 090-038-136 as follows I wrote my signature "R Murphy" and entered the time as being "1140" in the "erected by" column on row 3.

- (i) State the reasons why no start and no finish time is entered on the Intravenous Fluid Prescription Chart (Ref: 090-038-136), and identify the person/s who were responsible for completing that column.

I do not know the reason why and I do not know who was responsible for completing that column.

- (ii) State the reasons why the first row of the 'erected by' column is not completed on the Intravenous Fluid Prescription Chart (Ref: 090-038-136), and identify the person/s who were responsible for making that note/entry.

I do not know why the first row is not completed and I cannot identify the person responsible.

(24) In relation to the observations made in relation to Claire while you were on duty on 22<sup>nd</sup> and 23<sup>rd</sup> October 1996:

- (a) State whether you reviewed the frequency of observation at any time, and if so, state when, why and the outcome of your review. If you did not review this, state the reasons why not.

I have no recollection of being involved in this aspect of Claire's care.

- (b) State whether there were any protocols, guidelines or practice and procedures manual/s in RBHSC in October 1996 which related to the observations which should be made in relation to a paediatric patient and the frequency of those observations.

I cannot recall.

- (c) State whether you informed the nurse in charge/ward sister or any clinician of any changes in Claire's condition, and if so, state whom you informed, when you informed them of this, what you told them and where this is recorded or noted. If you did not inform them, explain why not.

I have no recollection of being involved in this aspect of Claire's care.

- (d) State whether the general observations of Claire included level of consciousness, prior to the commencement of the hourly neurological observations at 13.00.

I have no recollection of being involved in this aspect of Claire's care.

- (25) State if you noted any abnormalities in Claire's condition during your care,

- (a) If so, state if you reported them to the doctor/nurse in charge/ward sister, to whom you reported, when you reported same, and what you discussed. If you did not report them, explain why not.

I cannot recall.

- (b) In particular, state whether a doctor was informed of Claire's systolic blood pressure readings in excess of 120 and Claire's respiratory rate being elevated at times at 30 breaths per minute on 22<sup>nd</sup> October 1996 (Ref: 090-039-137), and if so, identify the doctor so informed and the person who informed him/her of these changes, and state when that doctor was informed. If a doctor was not so informed, state the reasons why not.

I cannot recall.

- (c) In particular, in relation to Claire's raised blood pressure of 130/70 recorded at 19.00, state whether Claire's blood pressure was checked again and a doctor informed. If so, state when it was checked and identify the doctor/s informed. If not, state the reasons why not.

I cannot recall.

- (26) In relation to Claire's Nursing Care Plan (Ref: 090-043-145 and 090-043-146):

- (a) State how often the Nursing Care Plan is reviewed.

It is usually at each change over of shift, however I cannot answer any questions relating to Claire's case as I cannot remember it specifically.

- (b) Identify the person who determined the frequency of review of the Nursing Care Plan.

I do not know.

- (c) State the reasons why the Nursing Care Plan was to be reviewed daily, rather than more frequently.

I do not know.

- (d) State the times when the Nursing Care Plan ought to have been reviewed on 22<sup>nd</sup> October 1996 and the reasons why.

I do not know.

- (e) State if you had any responsibility for overseeing or reviewing the Nursing Care Plan, and if so, state whether you considered reviewing the Nursing Care Plan more frequently and if so, state when, why and the outcome of your consideration. If you did not consider this, state the reasons why not. If you did not have responsibility for overseeing or reviewing the Plan, identify the person who was responsible for this.

I have no recollection of having responsibility for overseeing or reviewing the nursing care plan and I cannot recall the person who was responsible for it.

- (f) State whether a change in diagnosis, such as status epilepticus, by a doctor triggers a review of the Nursing Care Plan.

I cannot remember.

- (g) State if consideration was given to providing Claire with 1:1 nursing care, and if so, state how and when consideration was given, and the effect that this had on the Nursing Care Plan. If the issue was discussed with any other personnel, state with whom this was discussed, when it was discussed, and what was discussed. If 1:1 nursing was not considered, state why it was not considered.

I cannot recall.

- (h) State if consideration was given to increasing the frequency of observations of Claire's respiratory and/or neurological state, and if so, state how and when consideration was given, and the effect that this had on the Nursing Care Plan. If the issue was discussed with any other personnel, state with whom this was discussed, when it was discussed, and what was discussed. If increasing the frequency of observations was not considered, state why it was not considered.

I cannot recall.

- (i) State whether you considered/discussed the need for Claire to be admitted to PICU at any time, and if so, state when did you consider/discuss this, with whom, and what was the outcome of your consideration/discussion. If you did not consider or discuss this, explain the reasons why not, particularly in light of Claire's Glasgow Coma Scale, complex intravenous therapy and lack of responsiveness thereto, diagnosis, anti-epileptic treatment and level of nursing dependency.

I cannot recall.

- (j) State if consideration was given to the change in diagnosis from one of "encephalitis" (Ref: 090-012-014) to "non-fitting status [epilepticus]" (Ref: 090-022-053) in reviewing the Nursing Care Plan, and if so, state how and when consideration was given, and the effect that this had on the Nursing Care Plan.

I cannot recall.

- (k) State the reasons why the Nursing Care Plan was not reviewed and changed:

- (i) When the diagnosis was changed to "*non-fitting status [epilepticus] / encephalitis / encephalopathy*" (Ref: 090-022-053)
- (ii) When Claire's condition and nursing needs changed
- (iii) When additional intravenous therapy was prescribed
- (iv) When the hourly observations and Glasgow Coma Scale scores were introduced and
- (v) When Claire was no longer eating and drinking due to her deteriorating level of consciousness

I cannot recall (this refers to question i-v)

- (l) State whether you believe that Claire's Nursing Care Plan reflected the potential severity of her condition, and the reasons for your belief.

I believe that Claire's nursing plan reflected the potential severity of her condition.

- (m) State whether Claire's Nursing Care Plan was evaluated: (i) at the start of your shift on 22<sup>nd</sup> October 1996 and (ii) at the end of your shift on 22<sup>nd</sup> October 1996, and (iii) at any other time, and if so, state by whom, and the outcome of that evaluation. If the plan was not evaluated, explain the reasons why not.

I cannot recall.

- (27) Identify the Consultant whom you believed to be responsible for Claire and her management, care and treatment between her admission on 21<sup>st</sup> October 1996 and her death on 23<sup>rd</sup> October 1996, and explain the basis for your belief.

- (a) Identify the paediatric Consultant who was responsible for Claire's care, treatment and management from 17.00 on 22<sup>nd</sup> October 1996 and thereafter.#

I cannot remember.

- (28) State what type of nursing operated on Allen Ward between 21<sup>st</sup> and 23<sup>rd</sup> October 1996, i.e. named nursing, patient allocation nursing or team nursing.

- (a) State whether on 22<sup>nd</sup> October 1996, the nursing care and management of Claire was allocated to a particular nurse, or to a nursing team.
- (b) If there was patient allocation nursing, identify the allocated nurse.
- (c) If there was team nursing, state the reasons why Claire's care was not allocated to a particular nurse.

I cannot remember.

- (c) Nature of each communication
- (d) Whether any advice or direction was given by the Consultant in relation to Claire's treatment and care, and if so the nature of that advice or direction

I cannot recall .

**(38) State what communication you had with Dr. Heather Steen in relation to Claire between 21<sup>st</sup> October 1996 and c. 04.00 on 23<sup>rd</sup> October 1996 including:**

- (a) The date and time each communication was made, and the means by which communication was made e.g. in writing, telephone, in person etc.
- (b) Identify who initiated each communication and the reason for each communication being made
- (c) State what information you gave Dr. Heather Steen about Claire during each communication
- (d) State what advice or instructions Dr. Heather Steen gave you in relation to Claire on each occasion and what the plan of care was for Claire following each communication
- (e) Identify any document where each communication is recorded and produce a copy thereof.
- (f) If no communication was made, explain why not
- (g) State whether Dr. Steen attended and examined Claire at any time between Claire's attendance at A&E on 21<sup>st</sup> October 1996 and Claire's death on 23<sup>rd</sup> October 1996, and if so, state the date, time and location of that attendance and examination

I cannot remember.

**(39) State what communication you had with Dr. David Webb in relation to Claire between 21<sup>st</sup> October 1996 and c. 04.00 on 23<sup>rd</sup> October 1996 including:**

- (a) The date and time each communication was made, and the means by which communication was made e.g. in writing, telephone, in person etc.
- (b) Identify who initiated each communication and the reason for each communication being made.
- (c) State what information you gave Dr. David Webb about Claire during each communication.
- (d) State what advice or instructions Dr. David Webb gave you in relation to Claire on each occasion and what the plan of care was for Claire following each communication.
- (e) Identify any document where each communication is recorded and produce a copy thereof.

- (c) **Assessment of children with reduced level of consciousness (e.g. Glasgow Coma Scale)**
- (d) **Assessment of children with a learning disability**
- (e) **Assessment of children with diarrhoea and vomiting**
- (f) **Communication with parents of sick children**
- (g) **Resuscitation in children**
- (h) **Recognition of the deteriorating child**

**through the following, providing dates and names of the institutions/bodies:**

- (i) **Undergraduate level**
- (ii) **Postgraduate level**
- (iii) **Hospital induction programmes**
- (iv) **Continuous professional development**

I cannot remember, however I attended all training days that I was required to go to.

**(48) Prior to 21<sup>st</sup> October 1996, describe in detail your experience of dealing with children with hyponatraemia, including the:**

- (a) **Estimated total number of such cases, together with the dates and where they took place**
- (b) **Number of the children who were aged less than 10 years old**
- (c) **Nature of your involvement**
- (d) **Outcome for the children**

I do not recall specifically nursing children with hyponatraemia.

**(49) Since 21<sup>st</sup> October 1996, describe in detail your experience of dealing with children with hyponatraemia, including the:**

- (a) **Estimated total number of such cases, together with the dates and where they took place**
- (b) **Number of the children who were aged less than 10 years old**
- (c) **Nature of your involvement**
- (d) **Outcome for the children**

I do not remember having any experience of dealing with children with hyponatraemia.

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

Signed: *Rachel Murphy*

Dated: 14 December 2011