

Witness Statement Ref. No.

226/1

**NAME OF CHILD:** Adam Strain

**Name:** Audrey Lockhead

**Title:** Miss

**Present position and institution:**

Retired from full time employment occasional health care consultancy work

**Previous position and institution:**

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

Nurse Manager/Deputy Directorate Manager- Royal Belfast Hospital for Sick Children ("RBHSC") until July 1995

**Membership of Advisory Panels and Committees:**

*[Identify by date and title all of those between January 1995-July 2012]*

No

**Previous Statements, Depositions and Reports:**

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

N/A

**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.*

**I. ROLES AND RESPONSIBILITIES**

(1) Please provide the following information:

(a) Please describe your functions, roles and responsibilities as Nurse Manager as of 1995;

Responsible for all aspects of nursing care in children's hospital

Responsible for efficient and effective nursing care practices at ward level, outpatients, theatre, and intensive care unit

Responsible for daily monitoring of staffing levels to ensure safe practice

Responsible for dealing with day to day issues as identified by Ward Sisters/Theatre Manager /Outpatient Manager

Responsible for ensuring cost effective practices were in place in conjunction with Directorate Manager

Responsible for dealing with personnel issues in conjunction with personnel department

Responsible in liaison with Clinical Director/ Directorate Manager/ Director of Nursing for management of untoward events within Paediatric Directorate

(b) State to whom you reported to as of 1995;

Mr. Gordon Clarke Directorate Manager and professionally to Miss Elizabeth Duffin Director of Nursing Royal Group of Hospitals

(c) Describe the full accountability of the Nursing Manager in the RBHSC at that time, including a full description of the lines of reporting on any issue and level in relation to the same;

Accountable to both of the above for any key issues

(d) Please state within which Directorate(s) you operated as Nurse Manager;

Royal Belfast Hospital for Sick Children

- (e) Please state which nurses reported directly to you and describe the matters on which they reported and what form their reporting took;

Theatre Manager Ann McCracken/Outpatients Manager/Sister Barbara Money Penny/ Night Sisters Dorothy Martin, Iris Kincaid/ Ward Sisters

- (f) Describe your work commitments at the RBHSC as of 1995;

As per point 1A

- (g) Please describe how and to whom you would have reported any adverse incident and/or unexplained/ unexpected death as of 1995;

Mr Clarke Paediatric Directorate Manager and Miss Duffin Director of Nursing Royal Group of Hospitals

- (h) Please describe what form this would have taken, for example a written or oral report, and explain what you would have expected to have resulted from such a report;

Both oral and written. As I was not there at time of incident I cannot not comment as I don't have full facts

- (i) If you would have reported such an incident to the Director of Nursing or Clinical Director, then please state whether you would have expected the Director of Nursing or Clinical Director to have discussed it with others and if so whom, including whether you would have expected it to have been raised at Board level;

Yes I would. I would have expected a full investigation into the events at the time of Adams operation and yes I believe the Board should have been informed if there were any actions implemented as a result of the investigation

- (j) Please state whether you would have expected to have been informed about the outcome/ result of your report to the Director of Nursing and if so by whom. Please state whether you would have disseminated the outcome amongst your staff and if so please state how you would have done that;

Cannot comment further as I was not Nurse Manager at time of incident

- (k) If you no longer continue in the position of Nurse Manager, please confirm the following:

- (i) When you ceased employment at the RBHSC;

Left in July 1995

(ii) Who took over from you in the role?

I think Sister Money Penny may have acted as Nurse Manager until new appointment made but not sure

(iii) What steps were taken in respect of your handover to that person?

I would have handed over my areas of responsibilities and communicated any ongoing issues both to Acting person, Director of Nursing and Directorate Manager

(iv) Whether any protocols, guidance or practices was passed on/ communicated to the person?

Hospital policies and procedures for all departments would have been in place at the time

## II. THEATRE SISTER JACKSON'S STATEMENT TO THE PSNI

(2) In her Statement to the PSNI dated 2<sup>nd</sup> May 2006 (Ref: 093-034-086), Theatre Sister Margaret Jackson stated that: *"I can remember being told that Adam did not wake up after his operation and the theatre was closed for a period"*. Had you been Nurse Manager during the time of Adam Strain's treatment and surgery please confirm the following in relation to this statement:

- (a) Would you have expected to have been made aware that Adam had not woken from his operation, and if so how? Please provide full details;
- (b) Please state whether you were ever involved in any decision to close a theatre in any circumstances and if so please provide full details with regards to the reason for and purpose of its closure, and the consideration that went into such a closure;
- (c) Which individuals had the authority to order the closure of the operation theatres?
- (d) How would such a decision be made and in what kinds of circumstances?
- (e) Where you aware at the time of any protocol, guidance or practice which governed the closure of theatres after surgery that had gone wrong?
- (f) If you have any experience of a theatre being closed please describe what happened whilst the theatre was closed, for example in relation to other surgery scheduled in that theatre?
- (g) Had a theatre been closed during your time as Nurse Manager please state whether you would have reported this information to anyone, and if so to whom, for example the Nursing Director?
- (h) What individuals would have had access to a closed theatre during its period of closure, and what is likely to have taken place within the theatre in such circumstances?

- (i) To whom would the result/ outcome of the closure be reported?
- (3) What steps, if any, would you as Director of Nursing have taken, whether by way of an internal investigation or otherwise, to establish whether lessons could be learned from the death of Adam Strain and disseminated accordingly?

**III. GENERAL**

- (4) If so we would be grateful if you could confirm whether you recall anything about Adam's treatment, his death and events following his death;
- (5) Please provide any details you have in respect of the roles, responsibilities and accountability of the following positions (including naming the individuals who held these posts) as at 1995:
  - (a) Clinical Director (Paediatric);
  - (b) Directorate Manager (Paediatric);
  - (c) Director of Nursing;
  - (d) Paediatric Theatre Manager.
- (6) Please provide any further comments you wish to make.

Unfortunately I cannot give any more information as I was not in employment at RSHSC at the time of Adam Strains death.

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

Signed: E A Lockhead *E. A. Lockhead* Dated: 27 July 2012