Witness Statement Ref. No. 262-1

NAME OF CHILD: **Adam Strain**

Name: Margaret Jean Jackson

Title: Ms.

Present position and institution: Retired

Previous position and institution:
[As at the time of the child's death]
Theatre Sister- Royal Belfast Hospital for Sick Children ("RBHSC").

Membership of Advisory Panels and Committees:
[Identify by date and title all of those between January 1995-July 2012]

Previous 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:	
093-034-086	02/05/06	PSNI 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 an Inquiry reference number, then please provide a copy of the document attached to your statement.

I. QUERIES IN RELATION TO YOUR EXPERIENCE AND RESPONSIBILITIES

(1) Please provide the following information:

(a) State the roles and responsibilities of a Theatre Sister as of 1995;

I regret that I have not retained a copy of my job description pertaining to my roles and responsibilities as Theatre Sister as of 1995.

On checking I find that neither my personal file held by Paediatric Administration nor my file held by The Trust Personnel Department contain job descriptions for that period.

To the best of my recollection all the ward and departmental sisters had the same job description.

Below I have listed those points I can remember:-

Smooth running of the department.
Management and deployment of nursing and ancillary staff.
Professional development and training of nursing and ancillary staff.
Ensuring requirements of student nurse training are met.
Risk Management.
Hospital Bleep Holder/Bed manager, rotational with other Sisters.
Adhere to Trust Policies.

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

Reported to Nurse Manager Paediatric Directorate

(c) Describe the accountability of a Theatre Sister in the RBHSC at that time;

Director of Nursing, Royal Group of Hospitals
Paediatric Directorate Nurse Manager.
Paediatric Directorate Manager.

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

I do not recall my exact work commitments in 1995 however they would have included:-

Smooth running of the department.

Management and deployment of nursing and ancillary staff.
Professional development and training of nursing and ancillary staff.
Ensuring requirements of student nurse training are met.
Management of surgical instrumentation and medical devices.
Risk Management.
Assessment of product suitability for theatre.
Liaise with surgical and anaesthetic staff, ward clinical and nursing staff in preparation of theatre lists.
Responsible for the co-ordination of the multidisciplinary team for the provision of anaesthesia in other units in the Children's Hospital (Dental Extractions, Children's x-ray, investigations under anaesthetic for oncology patients.
Hospital Bleep Holder/Bed manager, rotational with other Sisters.
Participate in recruitment and selection of staff.

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

Adverse Incidents would be reported to the Senior Nurse Paediatric Directorate, the Directorate Manager and the Senior Directorate Clinician.

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

A report would have been made verbally and in writing.

Senior Clinical staff would initiate investigation of the incident and feedback findings together with lessons learned. Where necessary new or updated Policies and Procedures would be issued.

II. QUERIES ARISING FROM YOUR PREVIOUS STATEMENT (093-034-086)

(2) *"I have some recollection of Adam's admission in November 1995 but I had no personal involvement in his care".*

(a) Please explain all that you recall in relation to Adam's admission in November 1995;

I do not remember having any involvement with Adam's care either in theatre or afterwards in Intensive Care.

(b) Please explain your work commitments at the time of Adam's admission in November 1995, including where you were based and who you were working with;

I have no recollection as to my work commitments that day.

(c) Please provide any further details regarding the admission of Adam and his subsequent care and treatment.

I can add no further details regarding the admission of Adam and his subsequent care and treatment.

(3) *"I can remember being told that Adam did not wake up after his operation and the theatre was closed for a period".*

(a) In relation to both *"Adam did not wake up after his operation"* and the *"theatre was closed for a period"*, please state:

(i) When you were told the same;

(ii) Where you were;

(iii) Whether anyone else was present and if so please identify them.

I do not recall exactly when I was told, where I was or if there was anyone else present.

(b) Please specify, by reference to the floor plan (Ref:300-005-005) if necessary, the theatre that you were informed was closed for a period

I believe the theatre that was closed was the one indicated on the floor plan highlighted in green.

(c) Did you relay or report this information on to anyone else, for example, your director supervisor/ nurse manager, and if so what if anything happened as a result?

I do not recall if I contacted the nurse manager or if anything happened as a result

(d) What, if any, further information was provided to you regarding who had closed the theatre and the purpose of the theatre being closed?

I do not recall if I was told who had requested the closure of the theatre or the reason why.

(e) Who, to your knowledge, would have requested that the theatre was to be closed?

I do not recall who would have requested closure of the theatre.

(f) Who, to your knowledge, would have had the authority to request that the theatre be closed for a period?

To my knowledge senior clinical, technical or nursing staff could request closure of a Theatre, where possible in consultation with the Directorate management team.

(g) Where you aware at the time of any protocol, guidance or practice which governed the closure of theatres after surgery that had gone wrong?

I was not aware of any protocol, practice or guidance which governed the closure of theatres after surgery had "gone wrong."

(h) Had you, at any time previously or subsequently to Adam's surgery, known a theatre to be closed for a period and if so please describe the circumstances?

I do not recall any previous instance of a theatre being closed.

(i) In relation to *"the theatre was closed for a period"*, please state:

(i) The length of time for which the theatre was closed (even if only approximately)

(ii) The identity of those who had access to the theatre whilst it was closed and for what purpose

(iii) What happened whilst the theatre was closed, including to any surgery scheduled to take place in it

I have no recollection of how long the theatre was closed for. Who had access to it or what happened to any cases schedules to take place in it during the closure.

(4) Were you contacted by either Dr. Taylor or Professor Savage on the 26th or 27th November 1995 to discuss/ consider arrangements for Adam's transplant surgery? If so please provide full details of the same. If not, please explain whether you would have expected them to have contacted you and comment on why they did not.

I have no recollection of any conversation regarding Adam's transplant prior to his surgery with either Dr Taylor or Professor Savage. ————The information that there was a possibility of a transplant and subsequent arrangements for transfer of "loan" instrumentation and special equipment from Belfast City Hospital would have been undertaken by the Transplant Coordinator.

As preparation for Adam's surgery was commenced in the early hours of the morning I would expect the Anaesthetist, in this case Dr Taylor to liaise with the on duty night staff.

If he had been in the Hospital the day before surgery Professor Savage would usually call into theatre to chat about his patients and inform staff of any special equipment, implants or devices which might be required. If he was unable to notify theatre staff himself he would arrange for a member of his team to pass on the information.

(5) Did the RBHSC Nurse Manager or Director of Nursing take any steps, whether by way of an internal investigation or otherwise, to establish whether lessons could be learned from the death of Adam Strain?

I have no recollection of specific steps taken or investigations undertaken by the RBHSC Nurse Manager or the Director of Nursing into whether lessons could be learned by the death of Adam Strain. Nor do I recall specific steps taken to disseminate outcomes and lessons internally or to develop the competence of staff involved in Adam's treatment.

(6) If no such steps were taken, please state why you think this might have been.

This is not within my knowledge.

If steps were taken, then please comment on the following: n/a See answer to 5.

(7)

(a) What steps were taken to learn lessons from the death of Adam?

(b) Identify the person(s) who took steps to establish whether lessons could be learned from Adam's death?

(c) When were those steps taken?

(d) What lessons were learned from the death of Adam?

(e) What steps, if any, were taken to disseminate outcomes and lessons internally (within the RBHSC?

(f) What steps, if any, were taken to assess and develop the competence of staff involved in the treatment that led to Adam's death?

III. GENERAL

(8) Please provide any further comments you may wish to make.

I have no further comments

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

Signed: M. Sacha Dated: 20-9-12