

CONFIDENTIAL

Lucy Crawford - 18 month old child admitted to Erne Hospital with suspected Gastro-enteritis

Friday 14 April 9.00 am

Dr Kelly advised me of an adverse incident regarding the illness of Lucy Crawford. He advised that there could be a situation where the wrong drug or incorrect dose/level of fluids may have been prescribed, although blood tests were not confirming this. Child had been transferred to Royal Belfast Hospital for Sick Children however, was reported as 'brain dead'. Dr O'Donoghoe had been asked to obtain a copy of the patient's notes. I agreed I would advise Dr McConnell.

Advised Ms O'Rawe through Janet Hall given adverse incident and potential for press interest. Provided information to Dr McConnell, who stated he would advise Martin Bradley.

Monday 17 April

Janet Hall advised me of Press interest. We felt if response could confirm cause of death did not relate to an infectious disease this may be useful information for the public. Mr Fee recommended as cause of death was still unknown it would be unwise to make this statement. General statement provided. Chairman briefed about issue.

Tuesday 18 April

Mr Fee provided an update of discussions with nursing and medical staff. They were generally upset given suddenness of death and another recent death of chronically ill child. He was meeting Dr Anderson to examine the case notes on Wednesday pm. He could not be definitive about circumstances from the information collated so far.

Wednesday 19 April

Met with Martin Bradley and advised him of the issues. Dr McConnell also advised circumstances were still being examined.

Thursday 20 April

Mr Fee advised that the patient's notes recorded a comment from Dr O'Donoghoe that he was uncertain about the instructions he gave staff about the rate of flow of I.V. fluids. Child had been given 100 mls per hour for 4 hours. He states he meant this to be 100 mls per hour for the first hour and 30 mls per hour thereafter. However, when child collapsed anaesthetic support had prescribed more fluids. Post mortem results indicated cerebral oedema. Mr Fee felt he required advice from a Paediatrician. I agreed I would arrange this. I enquired if Dr Anderson and Mr Fee had considered if

Dr O'Donoghoe should continue to see and treat patients. He confirmed it was their opinion he should continue. Mr Fee advised that written reports had now been requested from six members of staff. We discussed how best we should communicate with the family to advise that the circumstances were still being examined. We agreed it would be preferable if the family's Health Visitor could call with the parents rather than send a letter. Mr Fee agreed to contact manager to identify relevant health visitor.

I spoke with Dr Murray Quinn, Altnagelvin Hospital, who agreed he would look at the notes and provide his advice.

Friday 21 April

Requested Mr Fee to contact Dr Quinn to advise him of main issues we need to examine and forward case notes to him. I requested Mr Fee to ensure that Dr O'Donoghoe is advised he is aware of involvement of Dr Quinn. Mr Fee advised that the Health Visitor had been identified and he would make contact with her to speak with the family.

Rang Dr McConnell, left message to advise I had requested Murray Quinn to provide the Trust with advice on the case.

Thursday 27th April

Mr Fee confirmed he had spoken with Dr Quinn. He also advised he had identified and spoken with the Health Visitor. Although she was on leave this week (Easter week) she stated she would call and speak with the family.

Wednesday 3rd May

Provided briefing to Mr Frawley on issues.

Thursday 4th May

Discussed case with Dr Kelly. Requested that when reports were available that he should convene a discussion involving Dr Quinn, Mr Anderson, Mr Fee and himself to decide the way forward. Dr Kelly advised he was asking for report on tests carried out in connection with post mortem.

Friday 5th May

Mr Fee advised that parents had met with Dr O'Donoghoe.

Thursday 11th May

Mr Fee still awaiting one report from a member of staff. Dr Quinn had provided verbal advice that fluids may not have been excessive. Confirmed with Mr Fee my request to Dr Kelly.

Monday 15th May

Dr Duffy raised issues about community paediatrics. Agreed if Dr Sharma covered Fermanagh, Dr O'Donoghoe could cover hospital services whilst vacant post remained unfilled.

Friday 19th May

Mr Fee confirmed he had discussed with Dr Sharma and was sending her letter of offer to cover Fermanagh community.

Tuesday 23rd May

Mr Fee advised that Dr Kelly and he were meeting with Dr O'Donoghoe the next day.

Thursday 26th May

Mr Fee advised he was awaiting written report from Dr Quinn and information on the tests carried out at Post Mortem. Reminded Dr Kelly that once reports were received he should convene the meeting with Dr Quinn, Dr Anderson and Mr Fee to agree the way forward in responding to parents.

Mr Fee and Dr Kelly also advised me of defensive position adopted by Dr O'Donoghoe in respect of Fermanagh Community Paediatrics.