

STATEMENT OF WITNESS

STATEMENT OF: TERESA MARY McCAFFREY

Name

Rank

AGE OF WITNESS (If over 18 enter "over 18"):

*To be completed
when the statement
has been written*

I declare that this statement consisting of 6 pages, each signed by me is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence at a preliminary enquiry or at the trial of any person, I shall be liable to prosecution if I have wilfully stated in it anything which I know to be false or do not believe to be true.

Dated this 12 day of JANUARY 2005

R Hall

Teresa McCaffrey

*SIGNATURE OF MEMBER by whom
statement was recorded or received*

SIGNATURE OF WITNESS

R HALL

PRINT NAME IN CAPS

In April 2000 I was a State Enrolled Nurse, employed by the Erne Hospital, Enniskillen. I trained in the Erne Hospital from 1980 to 1982 and I qualified there as a State Enrolled Nurse. I worked in the Erne from 1982 to 1993. Then the nurses were not assigned to any particular ward. We worked on a rota basis, and rotated around the different wards every 6 or 8 weeks. Sometimes it may have been shorter depending on staff needs. During the period 1982 to 1993 I think I was only in Children's Ward roughly three times. I left the Erne in 1993 and worked in the Graan Nursing Home for two years. I had left the Erne because of family reasons. I had five small children then and the hours were better for me. Also in the Erne, all those years I was on a temporary contract, that was mainly the way for State Enrolled Nurses then. Some were lucky to get a permanent post but I was always on temporary contract. I worked in a Fold then from 1995 until 1999. In March 1999 I went back into Children's Ward in the Erne on a temporary contract. In September 2000 I undertook training to become a State Registered Nurse. I went to Queens Campus once a fortnight and qualified in 2002. In November 2002 I secured a permanent post in Surgical Ward in the Erne, where I am still employed. I should mention that in June 2000, I was paid off from Children's Ward, due to no jobs, however within a week I secured another

38/36
7/04

SIGNATURE OF WITNESS: Teresa McCaffrey

STATEMENT OF: TERESA MARY McCaffrey

temporary contract within Surgical Ward, from where I did my training for State Registered Nurse. I remember my turn of duty on 12 April 2000. I was on night duty, it was my first night on, for the month duration that I was going to be there. I was the most junior nurse on the ward because I was a SEN nurse. I had mostly auxiliary duties, such as teas, but I still had my nursing duties to do, such as temperatures and pulses once I had my own work done. I commenced duty that night at 7.45 pm. All the nurses who were working that night, there were four of us, went into the office in Children's Ward for handover for the day staff. All the Children in the ward were discussed and why they were there, what happened during the day with them and what was expected of us during the night. The only thing I can remember being told about Lucy was that she wasn't long in and to try to get her to drink, to give her a drink when I was going round with the tea trolley. I think this handover was done by Staff Nurse Laura McDowell. At approximately 8.30 pm I was giving out the evening suppers, just teas and juices. Mr and Mrs Crawford were in the day ward, I think Mrs Crawford was nursing Lucy on her knee. I offered Mr and Mrs Crawford tea, which they accepted, and a glass of juice for Lucy. They already had juice for her, and I just left them a fresh one. Lucy was awake at this time. I went on with my trolley to give supper to the rest of the children on the ward. I really had very little to do with Lucy. She was being looked after by the other nurses. I remember when I was stacking the nappies in Lucy's locker and the locker beside it, and I had a conversation with Mae Crawford. We were chatting about the name Mae. I think Lucy was sleeping at this stage because it was fairly late. Lucy was in cubicle 6 which is the first cubicle on the right in the ward. This is where new admissions and sicker children would be. It's the nearest to the nursing station. At 2.20 am Mrs Crawford 'buzzed' and I went to her. Lucy had a very dirty nappy and Mrs Crawford was changing her as I arrived. The nappy had spilled over onto a sheet. I got a clean sheet and changed it. Mrs Crawford changed the nappy. The nappy was very foul smelling. The nappy was full and wet and dirty. It was very runny and very yellow in colour, it was very offensive. At that stage Sister Edmundson arrived, she was the night manager

38/36a
11/03**SIGNATURE OF WITNESS** Teresa McCaffrey

STATEMENT OF: TERESA MARY McCaffrey

and was in charge of all the wards in the hospital that night. She commented on the sn. from Lucy's nappy. She had a conversation with Mrs Crawford, I think they knew each other. I took the nappy to the sluice room. I left it there to take samples from. I spoke to Staff Nurse McManus who was in charge of the ward. The protocol is, if a child has a dirty nappy such as this that they are moved to a side room to prevent contamination to other children on the ward. I then moved Lucy to a side room, helped by Mrs Crawford. Lucy was attached to a drip at this time. This was about 2.30 or 2.40 am. Mrs Crawford pushed the cot and I pushed the drip along. We went into room 10 which is at the bottom of the ward. I moved the bed in this room over to the window so that I could get the cot into the room. I settled into the room and plugged the drip back in. I checked that it was OK and it was, that it was on. I went back up the ward and collected their belongings and brought them down to room 10. Mrs Crawford settled Lucy down, Lucy was tired, but she wasn't upset or crying. The bed was left in the room for Mrs Crawford to sleep in. She lay on top of the bed. Parents wouldn't get into the beds in case we need them during the night, so I put one blanket on top of the bed and Mrs Crawford lay on top of it. I reassured Mrs Crawford that we would be popping in and out during the night to check on Lucy but that if she needed us to buzz us. I showed her how to push the buzzer. At approximately 2.40 am I went to the treatment room to get the blue top bottles which are used for the faeces samples. I went back to the sluice room and scooped faeces from the nappy and put it into the bottle. I did three bottles which was the norm. I returned to the office to fill in the forms which accompanies these samples to the Lab. I had disposed of the nappy in the sluice room. Round about 2.55 am whilst I was filling out these forms the buzzer sounded in side ward 10. The light outside ward 10 lights up when the buzzer is pressed and I can't remember if it shows in the office. I went down to the side ward, and I met Mrs Crawford in the doorway with Lucy. Lucy was in her arms. She said to me "Nurse, help Lucy, help Lucy". I took Lucy from her and laid her down in the cot. Lucy was pale and rigid, she was stiff to touch. I immediately called for Staff Nurse Sally McManus, from the doorway. Sally

STATEMENT OF: TERESA MARY McCaffrey

came in seconds. Staff Nurse T Jones who had been on her break came as well. I passed the oxygen mask to Sally, and I can't remember who turned on the oxygen. I left the room and went up to the phone out on the ward, and bleeped Dr Malik who was the SHO, Senior House Officer, through the switchboard. I went back into the room. Dr Malik arrived within minutes. Sally sent me for Diazepam PR, which I got in the treatment room, and took back to Sally. Myself and Thecla started to clear the room, to remove the bed to give more space. Dr Malik was checking Lucy over whilst I was doing this. I pushed down the emergency trolley which is kept beside the phone in the ward on the medical side which was where we were. Mrs Crawford was very upset, and I was trying to reassure her. Dr O'Donohoe who was the Consultant on call arrived. I don't know what time it was then, and about twenty minutes later Dr Auterson arrived. I was really the runner at this stage, twice I took blood samples to the Lab. Matt, who was on call for the night for the Lab was there. There is always someone on call for the Lab. I was then sent to Ward 5 for a drug for Dr Auterson. When I got to Ward 5 I panicked, I started to hyperventilate and took chest pains. Nurse McNeill, who was the nurse in Ward 5 that evening, there was two of them took over, and she took the drug back to Children's ward. I don't even remember the name of the drug. I returned to the ward about ten minutes later when I had settled. Mr Crawford and his children had arrived and also Mae's parents. Sister Edmundson had also arrived. Mrs Crawford and them all were standing in the corridor outside Lucy's room. I stayed with and also to be able to get any further equipment required. Sally, Thecla and Siobhan saw that I was there. Around 4.40 am Lucy was moved to Ward 5, ICU, Thecla, Siobhan, who was the Ward 5 nurse and the doctors went with Lucy, the parents and everybody went. I just continued with my duties. I was very upset, I had never seen anything like this before in Children's Ward. D/Constable Hall has asked me about the fluid therapy prescribed. I have seen this prescribed before on adults, but not on children. I wouldn't have known if the rate was right or wrong because I wouldn't have seen it on Children's Ward, although I was there about a year. I don't know if the therapy prescribed

STATEMENT OF: TERESA

was standard practice or not. I was

in charge, and regulate the drip to w

D/Constable Hall has asked me did I cha

No, I didn't. I don't know who changed it, or

was doing the runner at this stage so I don't k

afterwards, because none of us really knew, and

explained to us that the fluids were wrong. There

Management or Dr O'Donohoe. I didn't even know there

knew about the fluid therapy was when I heard about the inquest

cross then that I hadn't been kept more informed by Management,

Union Rep Benny Cassidy who supported us. D/Constable Hall has asked

notes about this incident. The following night when I went into work, Mr

Director of Acute Services for the Erne spoke to us all. He asked us

statement about what happened. I wrote out the statement, between that

day. Benny Cassidy looked over it, and then I handed it to Mr Fee on

Tuesday after Lucy's death. I have handed to D/Constable Hall the

statement. I didn't receive the handwritten statement back. I wrote

own as I remembered it. I didn't show it to anyone other than

D/Constable Hall has asked me about the confusion in the treatment

in the Review. I was not aware of any confusion. I didn't realise that

to the fluids. I was never told or debriefed about the incident. It was

when the inquest was coming up and we all had a meeting with the

realised her death had to do with the prescribed fluids. We had no

whatsoever from management about this and I think it would

everybody for us to have been told of this. D/Constable Hall

interviewed for the Review. No I wasn't and I had no idea that on

was in Children's Ward until June 2000 and I never heard it

SIGNATURE OF WITNESS Teresa McCaffrey

STATEMENT OF: TERESA MARY McCAFFREY

copy of the Review or heard any discussion about it. D/Constable Hall has asked me what steps had been taken to address the issues raised under documentation in the Review. Again I am not aware of any. There was no meeting, no circulars that I am aware of, although I left Children's Ward in June 2000. D/Constable Hall has asked me if at the time there appeared to be anything difficult about Lucy's death or likely to lead to litigation. At the time no, there appeared no difficulties. Again I, and the other nurses had no idea anything was wrong until four years later when the case was coming to inquest. We had never been informed by anyone that there was something wrong. D/Constable Hall has asked me if I was responsible for the discrepancy in the running total on the daily fluid balance chart for Lucy, and has showed me a copy of this marked P65. No, I wasn't, this is not my writing and I don't know who wrote it. The only thing I have written on this page is diarrhoea+++. D/Constable Hall has asked me was I shocked or traumatised by this. I was very upset. I am also a mother. I knew that Lucy was very ill when she was being ventilated, that told me she was not well at all. I was never offered any counselling until again four years later towards the inquest. Briege Swift and me went to funeral and we spoke among ourselves how terrible it was for the child to die and with Laura McDowell as well. It had never been mentioned again. [REDACTED]

[REDACTED] Probably Lucy's death upset me more because of all the activity around it.

[REDACTED] I was offered counselling four years later, but I didn't avail of it. I felt I just had to get on with life, and it was four years later. Since the inquest I asked to be taken off night duty, and that has been granted. Just a couple of months ago I had to take stuff to the Lab, and it just brought it all back to me, and I asked to be taken off nights then. Lately I am aware that counselling is available when there is a death in the ward. Again I knew this after the inquest. There has been no discussion about the lack of support. I remember when we went into work the next night we chatted about it, and felt that we should have had a night off, but that was it.

STATEMENT OF WITNESS

TO BE COMPLETED
WHEN THE
STATEMENT HAS
BEEN WRITTEN

STATEMENT OF: Teresa Mary McCaffrey
Name

AGE OF WITNESS (if over 18 enter "over 18"): 2562

I declare that this statement consisting of _____ pages, each signed by me is true to the best of my knowledge and belief and I make it knowing that, if it is tendered in evidence at a preliminary enquiry or at the trial of any person, I shall be liable to prosecution if I have wilfully stated in it anything which I know to be false or do not believe to be true.

Dated this 12 day of Jan 2005

[Signature]

SIGNATURE OF MEMBER by whom statement was recorded or received

[Signature]

SIGNATURE OF WITNESS

In April 2000 I was a state enrolled nurse, employed by the Ene Hospital, Enniskillen. I trained in the Ene Hospital from 1980 to 1982, and I qualified there as a state enrolled nurse. I worked in the Ene from 1982 to 1993. Then the nurses were not assigned to any particular ward. We worked on a rota basis, and rotated around the different wards every 6 or 8 wks. Sometimes I may have been shorter depending on staff needs. During the period 1982 to 1993 I think I was only in childrens ward roughly 3 times. I left the Ene in 1993, and worked in the Grann Nursing home for 2 yrs. I had left the Ene because of family reasons. I had 5 small children then and the hours were better for me. Also in the Ene, all those years I

SIGNATURE OF WITNESS: [Signature]

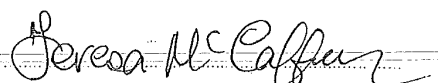
STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: _____

2

was on a temporary contract, it was
~~all the~~ ^{was} mainly the way for staff
 enrolled nurses then. Some were lucky
 to get a permanent post but I
 was always on temporary contract.
 I worked in a old men from
 1995 until 1999. In March 1999
 I went back into Childrens Ward
 in the ERU on a temporary contract.
 In Sept 2000 I ~~then~~ ^{then} undertook
 training to become a state registered
 nurse. I went to Queens Campus
 once a fortnight and qualified in
 2002. In Nov 2002 I secured
 a permanent post in surgical ward
 in the ERU, where I am still
 employed. I should mention that in
 June 2000 I was paid off from
 Childrens Ward, due to no jobs,
 however within a week I secured
 another temporary contract with surgical
 ward from where I did my training
 for 'state registered nurse'. I remember
 my run of duty on 12 April 2000.
 I was on night duty, it was
 my last night on, for the month
 duration that I was going to be
 there. I was the most junior



STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 3

nurse on the ward because I was a SEN nurse. I had mostly auxiliary duties, such as teos, but I still had my nursing duties to do, such as temperatures and pulses once I had my own work done. I commenced duty that night at 7.45 pm. All the nurses who were working that night there were 4 of us, but who the office in children's ward for had over for the day staff. All the children in the ward were discussed, and why they were there, ~~and~~ what happened during the day with them, and what was expected of us during the night. The only thing I can remember being told about Lucy was that she wasn't long in, and to try to get her to drink, to give her a drink when I was going round with the tea trolley. I think this had over was done by staff nurse Anne McDonald. At approx 830 P. I was giving out the evening supper, just tea, and juices. Mr and Mrs Cranford were in the day ward, I think

Gerena McCaffrey

STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 4

Mrs Crawford was nursing Lucy on her knee. I offered Mrs Crawford tea, which they accepted, and a glass of juice for Lucy. They already had juice for her, and I just left them a fresh one. Lucy was awake at this time. I went on with my Holly to give supper to the rest of the children on the ward. I really had very little to do with Lucy. She was being looked after the other nurses. I remember when I was stocking the nappies in Lucy's locker, and the locker beside it, and I had a conversation with 'Mae Crawford'. We were chatting about the name Mae. I think Lucy was sleeping at this stage because ~~she~~ it was fairly late. Lucy was in cubicle 6, which is the 1st cubicle on the right in the ward. This is where new admissions and sicker children would be. It's the nearest to the nursing station. At 2200 Mrs Crawford 'buzzed' and I went to her. Lucy had a very sleepy happy, and Mrs Crawford was checking her as I arrived. The

Jeresa McCaffrey

STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 5

nappy had spilled over on to a sheet. I got a clean sheet, and changed it. Mrs Crawford changed the nappy. The nappy was very foul smelling. The nappy was full and wet and dirty. It was very runny and very yellow in colour, it was very offensive. Our mat (Nurse) Sister Edmundson alerted. She was the night manager and was in charge of all the wards in the hospital that night. She commented on the smell from Lucy's nappy. She had a conversation with Mrs Crawford. I think they knew each other. I took the nappy to the sluice room. I left it there to take samples from. I spoke to staff nurse McManus who was in charge of the ward. The protocol is, if a child has a dirty nappy such as Mrs Mac they are moved to a side room to prevent contamination to other children on the ward. I then moved Lucy to a side room, helped by Mrs Crawford. Lucy was attached to a drip at this time. This was about 230 or 240 AM. Mrs

Jeresa McCallan

STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 6

Crawford pushed the cot and I pushed the drip along. We went into room 10 which is at the bottom of the Ward. I moved the bed in his room over to the window so that I could get the cot into the room. I settled into the room, and plugged the drip back in. I checked that it was OK and it was, that it was on. I went back up the ward, and collected their belongings and brought them down to room 10. Mrs Crawford settled Lucy down. Lucy was tired, over the hour upset or crying. The bed was left in the room for Mrs Crawford to sleep in. She lay on top of the bed's frame. We wouldn't get into the beds in case we needed them during the night, so I put a blanket on top of the bed and Mrs Crawford lay on top of it. I reassured Mrs Crawford that we would be popping in and out during the night to check on Lucy for her that if she needed us to buzz us. I showed her how to

Teresa McCallum

STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 7

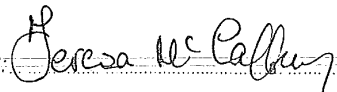
pull the buzzer. At approx 2:40 AM I went back to the treatment room to get the blue top bottles which are used for the scan face samples. I went back to the sluice room and scooped faeces from the nappy and put it into the bottle. I had 3 bottles which was the norm. I returned to the office to fill in the forms which accompanies these samples to the lab. I had disposed of the nappy in the sluice room. Around 2:55 AM whilst I was filling out these forms the buzzer sounded in side ward 10. The light outside ward 10 lights up when the buzzer is pressed, and I can see if it shows in the office. I went down to the side ward, and I met Mrs Crawford in the doorway with Lucy. Lucy was in her arms. She said to the Nurse "help Lucy, help Lucy." I took Lucy from her and laid her down in the cot. Lucy was pale and rigid, she was stiff to touch. I immediately called for staff Nurse Sally McManus, from the doorway. Sally came in seconds. Staff nurse

STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 8

T Jones who had been on her break came as well. I passed the oxygen work to Sally, and I can remember who turned on the oxygen. I left the room and went up to the phone our on the ward, and I stayed Dr Malik who was the SHO, senior house officer through the switchboard. I went back into the room. Dr Malik arrived within minutes. Sally sent me for Diazepam PR, which I got in the treatment room, and took back to Sally. Myself and the other started to clear the room, to remove the bed to give more space. Dr Malik was checking Lucy who whilst I was doing this. I pushed down the emergency trolley which is kept beside the phone in the ward, on the medical side which was where we were. Mrs Crawford was very upset, and I was trying to reassure her. Dr O'Donoghue who was the consultant on call arrived. I don't know what time it was then, and about 20 minutes later Dr Anderson arrived. I was really the runner at this stage, twice I took blood samples



STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 9

to the lab. Matt, who was on call for the night for the lab was there. There is always someone on call for the lab. I was then sent to Ward 5 for a drug for Dr. Anterson. When I got to Ward 5 I panicked, I started to hyperventilate and took chest pains. Nurse McNeill who was the nurse in Ward 5 that evening, there was two of them took over and she took the drug back to children's ward. I don't even remember the name of the drug. I returned to the ward about 10 mins later when I had settled. Mr Crawford and his children had arrived, and also Matt's parents. Sister Edmondson had also arrived. Mrs Crawford and them all were standing in the corridor outside Lucy's room. I stayed with and also to be able to get any further equipment required. The ~~the~~ Sally Threlk and Sasha saw that I was there. Around 4:45 AM Lucy was moved to Ward 5, ICU. Thelk, Sibba, who was the Ward 5 nurse, and the doctors were with Lucy, the

Gerese McCallin

STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 10

parents and everybody else. I just continued with my duties. I was very upset, I had never seen anything like this before in children's ward. Dr. Conradi Hall has asked me about the fluid therapy and prescribed. I have seen this prescribed before on adults, but not on children. I wouldn't have known if the rate was right or wrong because I wouldn't have seen it on children's ward, although I was there about a year. I don't know if the therapy prescribed was standard practice or not. I would do what I was told by the staff nurse or whoever was in charge, and regulate the drip to whatever I was told, or what was on the balance chart. Dr. Conradi Hall has asked me did I change the drip from .18 solution to normal saline. No, I didn't. I don't know who changed it, or when it was done, or on whose instructions. I was doing the runner at this time so I don't know. There was no discussions about it afterwards, because none of us really knew, and we were all very shocked. Nobody

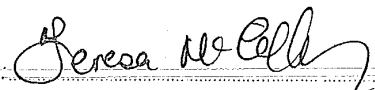
Deresa McCaffrey

STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 11

explained to us that the files were wrong. There was no discussion with senior management or Dr O'Donoghue. I don't even know there was question marks. The first I knew about the filed the safety was when I heard about the request with Lucy's death. I felt cross then that I hadn't been kept more informed by management and it was down to our union rep 'Benny Cassidy' who supported us. Dr O'Donoghue had asked did I make any notes about this incident. The following night when I went into work, Dr Fee who is the director of acute services for the time spoke to us and asked us to make a written statement about what happened. I wrote over the statement because that night and the next day Benny Cassidy looked over it and then I handed it to Dr Fee on a card the day or two after Lucy's death. I was handed to Dr O'Donoghue the typed version of this statement. I don't recall he had written statement back. I wrote the statement on my own as I remembered it. I don't



STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 12

show it to anyone other than Benny Cassidy. Detective Neel has asked me about the confusion in the review of Lucy as referred to in the review. I was not aware of any confusion. I didn't realize that her death was linked to the funds. I was never told, or briefed about the incident. It wasn't until 4 yrs. later when the question was coming up and we all had a meeting with the trust selectors that I realised her death had to do with the described funds. We had no idea. We had no contact whatsoever from management about this, and I think it would only have been fair to everybody for us to have been told of this. Detective Neel has asked me how I interviewed for the review. No I haven't and I had no idea that one had been conducted. I was in childcare ward until June 2000, and I never heard it mentioned. I never saw any copy of the review or hear any discussion about it. Detective Neel has asked me what steps had been taken to address the

STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 13

issues raised under documentation in
the review. Again I am not aware
of any. There was no meeting, no
circulation that I am aware of.
Although I left chambers ward in
June 2000. Dr Conor Hall has asked
me if at the time there appeared
to be anything difficult about Lucy's
death or likely to lead to
litigation. At the time no, there
appeared no difficulties. Again I, and
the other nurses had no idea anything
was wrong until 4 yrs later when the
case was coming to inquiry. We
had never been informed by anyone
that there was something wrong.

Dr Conor Hall has asked me if I
was responsible for the discrepancy in
the running total on the daily fund
balance chart for Lucy, and has
showed me a copy of this marked p 65.
No I wasn't this is not my
writing and I don't know who wrote
it. The only thing I have written
on this page is dishonored +++. Dr Conor
Hall has asked me was I shocked
or traumatised by this. I was very
upset. I am also a mother. ☹

STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 184

I knew that Lucy was very ill when she was being ventilated, Mar told me she was not well at all. I was never offered any counselling until over 4 yrs later towards the inquest. Briege Swift and me went to funeral and we spoke among ourselves how terrible it was for the child to die, and with Laura McDowell as well. Dr had never been mentioned again.

[REDACTED]

[REDACTED] Probably Lucy's death upset me more because of all the activity around it. [REDACTED]

[REDACTED]

[REDACTED] I was offered counselling 4 years later, but I didn't avail of it. I feel I just had to get on with life, and it was 4 yrs later. Since the inquest I asked to be taken off night duty, and that has been granted. Just a couple of months ago I had to take stuff to the lab, and it just brought it all back to me, and I asked to be

STATEMENT CONTINUATION PAGE

STATEMENT OF: _____

STATEMENT PAGE NO: 15

~~there~~ it might be. Lately I am
 aware that counselling is available
 when there is a death in the family.
 Again I know this after the request.
 There has been no discussion about
 the loss or support. I remember
 when we went into work - the next
 night we chatted about it, and felt
 that we should have had a night off,
 but that was it.

Peresa McCall