POLICE SERVICE OF NORTHERN IRELAND

Police Identification Mark RH107

SUMMARY OF TAPE RECORDED INTERVIEW

TAPE REF_NO:

PERSON INTERVIEWED:

DR JAMES FRANCIS KELLY

BDV 71/05

ADDRESS:

C/O ERNE HOSPITAL, ENNISKILLEN

Master Tape Seal Number(s):

DOB:

T88910A

PLACE OF INTERVIEW:

GROSVENOR ROAD PSNI

OTHER PERSON(S) PRESENT:

DATE OF INTERVIEW:

06/04/2005

TIME COMMENCED:

TIME TERMINATED: **1540 HOURS**

1625 HOURS

SOLICITOR

INTERVIEWING OFFICERS:

D/SGT CROSS, CARE UNIT, PSNI,

ENNISKILLEN

D/CONSTABLE HALL, CARE UNIT,

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ENNISKILLEN

D/CONSTABLE HALL

Tape Number and Tape Times:

D/Sgt Cross:

MADE BY:

Right it's the 6th of April 2005 and its 1540. Still the same four people in the interview room. We will continue the interview and Doctor if I could

just remind you that you are still under caution and could I ask you to

confirm that there were no questions asked in relation to these matters

while the tapes were being changed.

Mr Kelly:

That is indeed correct, D/S Cross.

D/Sgt Cross:

Right, Doctor, I had asked you generally speaking to describe the

procedures or lack of procedures that were in place and you had said

at that time there is no procedure. If I could just ask you to continue.

Mr Kelly:

I would clarify that there was no standardised procedure; this really

came to the fore over the last four or five years in Northern Ireland with

the introduction of Clinical and social Care Governance, which didn't

exist until really 2001/2002. In our Trust we began introducing it at

around that time. We were ahead, the formal requirement came into

place in 2003, so we were a couple of years ahead.

D/Sqt Cross:

Right.

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DR JAMES FRANCIS KELLY

Tape Number and ape Times:

Mr Kelly:

We actually had a form for reporting concerns, but again that wasn't universally across that was being piloted with a move. Now in terms of Northern Ireland we have received regional guidance on how such matters should be raised, define what an adverse incident, what a clinical incident was, what a serious one is: methods of analysing them, methods of reporting them, so that has come in, in 2004. And the Trust ... at one of its most recent Trust Boards has endorsed that policy.

D/Sgt Cross:

Right.

Doctor Kelly explained developments in the Trust regarding such procedures.

Mr Kelly:

One of the things that I would want to raise: that was in the initial part of

the question where you said Doctor Asghar identified it.

D/Sgt Cross:

Yes.

Mr Kelly:

Doctor Asghar at no stage told me or any of the parties that this was a hyponatraemic death...He did not raise the issue of hyponatraemia or this was a hyponatraemic death at any stage.

Discussion continued on the nature of the fluid management problem.

D/Sgt Cross:

You did mention Doctor the, your expectations in relation to the Coroner in that you had directed Doctor O'Donohoe to secure the notes broadly speaking.

Mr Kelly:

Before we go onto the question, just to clarify I didn't ask Doctor
O'Donohoe to secure notes. I asked him to make sure he had a copy
of the clinical notes... It would be inappropriate to secure notes; copy of
the notes was what I was looking for ... so that we could proceed with
any investigation.

D/Sgt Cross:

Right.

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DR JAMES FRANCIS KELLY

Tape Number and Tape Times:

Mr Kelly:

The context of that was at a previous case that had gone off to the

Coroner's - the notes had gone... off to England and we had major

delays in getting a copy of the notes back.

D/Sgt Cross:

Ok.

Mr Kelly:

I was concerned that in such a serious issue we wouldn't be able to

start the review because we would have no notes.

D/Sgt Cross:

Yes...Can I ask did you have any role in the selection of Doctor Quinn

as the expert?

Mr Kelly:

Em ... None whatsoever, I came back from annual leave to be informed that Doctor Quinn, as I have stated it is my understanding that it was Mr

Mills who decided it would be Doctor Quinn. I had no dealings in the

past with Doctor Quinn, in fact I don't think I'd ever met him and I

commented to Mr Fee that when we went up to visit him. I don't even

know what he looks like...So I had no dealings with him in the past and

I was not involved at all in the decision to appoint him as the external

paediatric advisor.

D/Sgt Cross:

Yes, Doctor, if I could show you, for the purpose of the tape this is

entitled LC Case Review WRC11...

Mr Kelly:

... That's the notes of the meeting that was held at Altnagelvin 21st of

June by Mr Fee and myself. This was held at the request of the

meeting was requested by Mr Mills as I referred to in my statement, he

in our normal meeting as Medical Director and Chief Executive

suggested that myself, Doctor Anderson and Mr Fee should meet with

Doctor Quinn when his report is ready. Mr Fee organised the date and

was specific about me attending because Doctor Anderson was away

and he was very keen that I would be there.

D/Sgt Cross:

Right.

DR JAMES FRANCIS KELLY

D/Sgt Cross:

Could I ask you to confirm this issue about whether Doctor Quinn made a comment on the suspension or not of Doctor O'Donohoe, you said that you made a record of that, now did you did you actually record

these minutes yourself and then have them typed up?

Mr Kelly:

That's me. The trouble with all of this, that's I would, I need to clarify this, is I'd have been sitting there scribbling things down on a bit of paper, I'd gone home and typed them up in the subsequent 24 hours and wouldn't have kept the originals.

D/Sgt Cross:

Yes.

Mr Kelly:

So to me this is an original because it has the computer dated it's more original than notes, which don't have, you could write a note at any stage, so this is this is what I was intending to do at the time, was to make sure there was an accurate record of things.

D/Sqt Cross:

Yes and therefore the last paragraph says here, Doctor Kelly asked is there an issue of incompetence, should consideration be given to temporary suspension, Doctor Quinn stated that he saw no reason for suspension. That's the paragraph that you referred to earlier.

Mr Kelly:

Mr Kelly:

Correct.

D/Sgt cross:

And you're happy that that is an accurate record of what transpired? Absolutely yeah and as I have said in my statement it was one of the reasons that I was quite keen to meet with Doctor Quinn, was is that I had Doctor Asghar's letter saying that Lucy Crawford was an example of incompetence. So I needed to clarify with the external paediatric opinion did any of this amount to incompetence and that question was specifically asked.

D/Sqt Cross:

Hm hm.

D/Con Hall:

He didn't see the report.

D/Sat Cross:

Unfortunately we don't have, Doctor Quinn made a statement to us, but

it was left with his solicitor to tidy up we'll say.

Solicitor:

Right.

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DR JAMES FRANCIS KELLY

D/Sgt Cross:

And we still haven't got a copy of it, but it's both our recollections quite

clearly that Doctor Quinn is saying he did his review and it's a case

note review, is his term for it and he submitted that report to you without

ever having seen the post-mortem report.

D/Sgt Cross:

Yes yeah.

Mr.Kelly:

Because I was there when he read the report.

D/Sgt Cross:

Well ...

Mr Kelly:

Mr Fee can give confirmation of that; the report arrived some days

earlier to the Trust.

D/Sqt Cross:

Hm hm.

Mr Kelly:

I don't know who it arrived to and was brought up by Mr Fee and

shared with him before he said anything on that day.

D/Sgt Cross:

Hm hm.

Mr Kelly:

Before he gave any, he went through that report, that's why there is

questions here because there was no discussion or issue of bronchial

pneumonia.

D/Sgt Cross:

Correct.

Mr Kelly:

Before the post-mortem.

D/Sgt Cross:

Correct.

Mr Kelly:

That is why that question was asked then and why there is a reference

here about post-mortem report, it is impossible to have that set of notes

if Doctor Quinn did not see the post-mortem report.

D/Sgt Cross:

Hm hm right ... And one way or another, Doctor, this review conducted

by Doctor Anderson and...Mr Fee didn't get to the answers. In your

opinion whose decision was it when this review is distributed, finalised,

whose decision is it to say this can't be the end of the story we must go

further or we have a review this is sufficient for our purposes?

Mr Kelly

I don't know how to answer that question, ... if I answer it in a slightly

different way.

D/Sgt Cross:

Fair enough.

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DR JAMES FRANCIS KELLY

Mr Kelly:

Bear with me, it is not unusual, I wouldn't say it's common, but it's not unusual to have a death, to have a post-mortem, to have a review of the case notes and still not have an answer. You have speculation as to what the causes were, such as bronchial pneumonia, such as encephalitis, such as some other matter, it isn't always clear. So it wouldn't have struck alarm bells the fact that there wasn't a specific case here, what we were getting was it could have been bronchial pneumonia.

D/Sgt Cross:

Hm hm.

Mr Kelly:

There could have been something else and that is also borne out by the sort of language used by Doctor Stewart from the College of Paediatricians in her report as well that there was still a number of possibilities, it became much more clear at the Inquest based on other experts testimony that it was most likely hyponatraemia, ... that's the only way I can think of answering that question for you.

D/Sgt Cross:

Hm hm ... And what you're saying to me is that while the report didn't produce an answer or a reason for the child's death the management, which would be, say, Mr Mills, Mr Fee and yourself? And Doctor Anderson as far as the review was concerned. You accepted that this is broadly speaking is now an unexplained death, we aren't going to get an answer and this is not altogether uncommon.

Dr Kelly

...Again I mean, did I have that thought process five years ago. It's a difficult question to answer; I regarded the review done by Mr and Mr Anderson as extremely comprehensive. It had involved an external paediatric opinion, both of those things were quite rare at that time to do such an extensive review that it contained all the appendices and all the interviews and all of the analysis and had external opinion and had post-mortem as well.

D/Sgt Cross:

Yeah.

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DR JAMES FRANCIS KELLY

Mr Kelly:

Considering all of that I thought that was a reasonable comprehensive review of the situation and again as we moved in to 2000 I didn't let it stop there, but not in the thought process that you're making. I didn't let it stop there. I says, well Doctor Asghar's raised this as an example of incompetence along with the other cases, get them all reviewed by the College again, we didn't stop. And when the College came back the second time, I had them look at it again and litigation, a different paediatrician looked at the issue, so I don't regard this an issue that we suddenly said, oh well, we'll ignore this from here on in and we kept, it wasn't in the thought process that you were describing, which is we have no answer, here we must go further and look elsewhere. I regard it as a very comprehensive review.

D/Sgt Cross:

Uh huh. Well Doctor ... let me put it to you, that the position may have been with the management team, that O'Donohoe has fouled up here, that has been highlighted by Doctor Asghar, there are questions about his competence, because that has been raised by yourself and others and whenever Doctor Quinn produced a report that didn't really get an answer and the review didn't really get an answer, there was a decision to the effect we'll pursue this no longer, because if we do, Doctor O'Donohoe is in difficulty. We know he's to blame, but we've done a fair bit and it's not highlighting him, let it sit.

Mr Kelly:

I think the evidence fairly clearly shows otherwise. The evidence is that Murray Quinn's report was shared within the Directorate, it was shared with the College of Paediatricians, Regional Advisor Moira Stewart, along with the other cases, all of the letters from Doctor Asghar were shared. It included that, Doctor Stewart's report and all the comments within that were shared with the Western Board with the most Senior Doctor in the Western Board, Doctor Bill McConnell, so I don't think that's the case at all, I think the opposite is the case, every opportunity that came up to have another person look at this was taken.

D/Sgt Cross:

Uh huh.

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DR JAMES FRANCIS KELLY

Mr Kelly:

The exact opposite is the case. The Trust was open to receive

comments on this from anybody that was available.

D/Sgt Cross:

You see another thing Doctor that puzzles me about the some of the detail of the review, Doctor Quinn in his part of the review in the case note review, he averaged all the fluids given to the child over the seven and a half hour period although in effect the vast majority of those fluids were only given over four hour period. Now to a lay person, you know just reading that, that occurred to me that doesn't make sense, because if I gave, let's say they had given five litres to the child within four hours, clearly that would have killed her, but there would have been no point in saying well five litres over 24 hours is reasonable, if she got it all in a four hour period and Doctor Quinn, nobody seems to have picked up that that's a nonsense figure and Doctor Stewart didn't pick it up, and therefore to a lay person looking at that there, it does

Mr Kelly:

Your answering the question yourself, because you're saying other paediatricians didn't think that was unusual.

D/Sgt Cross:

Mmh mmh.

.Mr Kelly:

Now you're asking a non-paediatrician to make a comment on that.

D/Sgt Cross:

I appreciate that.

look suspicious.

Mr Kelly:

I will bring you back to the notes of that that you have provided to me where Doctor Quinn is clearly stating there four hours at a 100 mls and the words after that were not excessive.

D/Sgt Cross:

Yeah but not grossly excessive.

Mr Kelly:

Not grossly excessive, so I accept what you're saying that he uses the seven hours in the written report, but he was completely aware. The other thing is that you do take the totality, you must not omit what was given in oral fluids, and if you go and look at the literature now that has emerged over.

D/Sgt Cross:

I accept that.

Mr Kelly:

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DR JAMES FRANCIS KELLY

Mr Kelly:

And if you go and look at the literature now that emerge of the last three to four years... there are cases described dramatically in America of children having the same problems as Lucy Crawford on oral fluids only. No intravenous fluids at all ... No number 18 solution, it's an issue of hypotonic fluids, so a child who stops eating and drinking and decides, the mother decides I'm only going to give it water, runs the risk of getting the same condition... And I wouldn't have even thought any more of it, so you do have to include the fluid that is taken in those early couple of hours.

D/Sgt Cross:

Yes...I accept that Doctor, but at the same the initial fluid amounted to 150 mls over three hours roughly.

Mr Kelly:

Hm hm.

D/Sgt Cross:

And then, which is 50 mls an hour but then it is double it from then on and yet Doctor Quinn averaged the totality... over the maximum period and to a lay person that looks as if you're actually reducing the hourly rate when you see that, I accept there he says, or you have said it differently.

Mr Kelly:

...Again I say to you are asking me to speculate or to comment on an expert senior Paediatrician...And to be critical of him... Now even if I wasn't a geriatrician if I was in any of the other, what is the point in getting external paediatric advice if you ignore it?

D/Sgt Cross:

Hm hm, fair enough. Do you recall did you directly contact Pathology or the Royal to discuss the PM.

Mr Kelly:

No...I had no interview with anybody in relation to this case review, I had no contact with the Royal, either the Pathology Department or the Paediatric Department at any stage in this... It would have been inappropriate for me to have had such contact given that I had set up a review.

D/Sqt Cross:

Doctor Kelly confirmed that he had some discussion with Doctor Asghar regarding his letter.

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DR JAMES FRANCIS KELLY

D/Sgt Cross:

...Could I ask, Doctor, do you recall any discussions about the role of

Doctor Auterson on the night in question and in the review process?

Mr Kelly:

No knowledge of any of the matter at all.

D/Sgt Cross:

He did provide a written report I think to Mr Fee, but he was never interviewed any further and was never asked for opinions and he did have opinions that were relevant, they came out at the Inquest and I think really that's the first, what I would directly ask you is, you know, do you recall any decision being taken not to involve Doctor Auterson?

Mr Kelly:

No again there's an impression coming across D/S Cross, that I was involved in decisions about review. The review was established and was given free reign to get on. So I have no knowledge of any such discussions, you would need to direct those at Doctor Anderson and Mr Fee. They were doing the review.

D/Sgt Cross:

Yes.

D/Sgt Cross:

...Could I ask Doctor are you aware of any discussions at any meetings say with Mr Fee, Doctor Anderson, Mr Mills, to the effect that any of those parties had discussed the review with the people at the Royal or in Pathology in the Royal, are you aware that that was done by other

people?

Mr Kelly:

No.

D/Sgt Cross:

And again I think you have copies of these, this is what I'm showing Doctor Kelly at the minute is WRC12, this is the record of the meeting with Doctor Halahakoon on the 23rd of June, if I could just ask you to confirm that that is your record?

Mr Kelly:

That is my notes typed up of that meeting at the time.

D/Sgt Cross:

That's page 1.

Mr Kelly:

Yes.

D/Sgt Cross:

Doctor Halahakoon speaking agrees with the content of that and then

page 2 the next page is a meeting with Sister Traynor on the same

date.

Mr Kelly:

Correct.

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DR JAMES FRANCIS KELLY

D/Sgt Cross:

On the 23rd of June, that's ...

Mr Kelly:

That's right.

D/Sgt Cross:

And you made those notes?

Mr Kelly:

Correct.

D/Sgt Cross:

At the top...Doctor Kelly explained that informal notes would be kept of

this meeting in view of the seriousness of the matters being discussed.

When I put that to Sister Traynor she says, Oh nobody told me that, I'm

not aware that notes were being taken.

Mr Kelly:

Hm hm.

D/Sgt Cross:

I appreciate that I'm interviewing her years later.

Mr Kelly:

I told her, and the reason it's in that one and not in Doctor

Halahakoon's is that I wouldn't expect a Sister or a nurse to understand

that I'd be taking notes.

D/Sgt Cross:

Right fair enough.

D/Sgt Cross:

Yes. At the top of page 3 Doctor, over the page you've said that Sister Traynor goes on to explain, Doctor Asghar is a difficult staff in that he needs constantly pushed, he shows no initiative, direction or drive.

Sister Traynor agrees that she says that, although it's her recollection

that what she actually, the totality of her discussion was that Asghar

was a good doctor when he arrived, but over a period of time for

various reasons the quality of his work declined and she says she

would have been very keen to have seen that recorded. That's not

recorded, have you any comment on that?

Mr Kelly:

I have no recollection, I would agree with her sentiment.

D/Sgt Cross:

Right.

Mr Kelly:

I've no recollection when it was actually said, these by the nature of any

notes, you know, this was not a taped interview, so I can't comment.

These are the notes I typed up at the time -five years on roughly, I don't

know, four and half years, and I don't know, but I agree with her

sentiment, I have no problem that she said that Doctor Asghar was a

good doctor, I personally support that comment myself.

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116-044-011

DR JAMES FRANCIS KELLY

D/Sgt Cross:

Right. Then doctor can I put it to you that since it is not recorded that Asghar was a good doctor but it is recorded that he is a difficult doctor that making the note like that, was an attempt to put a slant on Asghar

that diminished his credibility.

Solicitor:

I think Doctor Kelly has explained to you that was the note he made at the time in June 2000 and this is four and a half years later. I think.

D/Sat Cross:

Hm hm, but clearly an outsider looking at this - the only comment that is made is a negative one, when in fact a positive one is in your mind and in Sister Traynor's and I'm just putting it to you was it a deliberate act to leave the good point out and record the bad.

Mr Kelly:

The answer is that there was no deliberate act that is recorded because

it was a surprising comment.

D/Sgt Cross:

Hm hm. Right. Yeah.

Mr Kelly:

It's an unusual comment for anybody to make, so therefore it is recorded, key comments are made, key points are made, ... any conversation that lasts an hour and a half it cannot be represented fully page by page notes.

D/Sgt Cross:

Right. And then Doctor then on page 4 there is a record of your interview with Doctor Malik, I want to go over this in some more detail because Malik is a significant witness, but we're unable to interview him as yet... we have other documentation from him but not a direct interview. If I can just go through this. Doctor Kelly outlined the reasons for interview, related to comments in a complaint letter from Doctor Asghar, and explained the background incident review, but that the main purpose of the meeting was to test the validity of the comments made by Doctor Asghar, Doctor Kelly proceeded to ask Doctor Malik to outline the events after the death of Lucy Crawford and then Malik has told you Doctor, that he had been called by O'Donohoe on Monday to discuss the Lucy Crawford case and it was clear to Doctor Malik that Doctor O'Donohoe was upset by the death, Doctor O'Donohoe explained that there would be an inquiry into the

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DR JAMES FRANCIS KELLY

D/Sgt Cross:

circumstances surrounding the death, maybe leading to an outside review of the case by the College of Paediatricians and may even lead to a court case. Doctor Malik was advised that as the Senior House Officer directly involved he may need to contact the BMA and should consider seeking support from his colleagues. Doctor Malik was asked had he any close friends among the doctors he could talk with and in particular is there anyone from the same culture or national background would be available to provide support. Now you recall then Doctor Malik giving you that account and you're happy that's his account.

Mr Kelly:

That's recorded at the time what he was saying.

D/Sgt Cross:

Yeah.

Mr Kelly:

His explanation about the events.

D/Sgt Cross:

Yes.

Mr Kelly:

I would have had no knowledge of these events, but for Doctor

Asghar's letter in relation to his.

D/Sgt Cross:

Right. Doctor, these notes are made actually on the 7th of November, which is quite some time later now, we're six months down the road, and when you've said in the first paragraph the purpose of the meeting was to test the validity of the comments made by Doctor Asghar. Is that to the effect that Malik allegedly said to Ashgar that he should change notes and that he may be under duress, he could be blamed, are those the comments that you were testing?

Mr Kelly:

That ... Doctor Asghar is citing his conversation with Doctor Malik, that ... Doctor Malik was being intimidated... to changing notes. That was in his letter... The reason it's November rather than June/July is I had to wait and see was this going to be identified in the review, without interference to the review. I didn't feel I should be interviewing Doctor Malik while the review was ongoing.

D/Sgt Cross:

Yes.

Mr Kelly:

It wasn't dealt with within Mr Fee and Mr Anderson's review, I felt that

this was an omission and so I took action.

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DR JAMES FRANCIS KELLY

D/Sgt Cross:

Fair enough.

Mr Kelly:

I could in theory have asked others to get him, but Doctor Asghar had

been given the understanding that I would be organising you know the

harassment side, that I would be organising the review of his concerns.

So I had to deal with that.

D/Sgt Cross:

Fair enough. And so you've asked him, Doctor Malik if he was placed

under threat, duress or being intimidated at this stage by Doctor

O'Donohoe and his reply to that was no. You're quite clear that was

his reply.

Mr Kelly:

Absolutely clear. That's exactly what he replied and they're the words

he would have used.

D/Sgt Cross:

Right, yeah. And it was his view that Doctor O'Donohoe actually was

supporting him at the time.

Mr Kelly:

Which again was a surprise to me that he would say that given what

Doctor Asghar said in the letter, I wasn't expecting that.

D/Sgt Cross:

Yeah. And obviously did you see the Insight programme?

Mr Kelly:

I have seen the Insight programme.

D/Sgt Cross:

... This is exactly contrary to what was portrayed in the programme.

Mr Kelly:

I do realise that.

D/Sgt Cross:

And I assume they interviewed Asghar, that information came directly

from Asghar?

Solicitor:

I think we can make some assumptions on that officer.

D/Sgt Cross:

And then you asked what were the circumstances regarding the fluid

prescription.

Mr Kelly:

Hm hm.

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DR JAMES FRANCIS KELLY

D/Sgt Cross:

And Doctor Malik replied that he decided Lucy was not drinking sufficiently and needed IV, he was going to get a drip and contacted Doctor O'Donohoe. He was great, he was calm, he applied the emla cream, relaxed with staff and then decided to insert the IV line and that Doctor Malik signed the blank sheet in preparing the cannulation and I was then busy with three other omissions and didn't fill out the regime. I knew that this was a common practice to do that, sometimes if you're busy with other patients. Did Doctor O'Donohoe ask you to change your signature on the prescribing of fluids, were you intimidated to do anything? Doctor O'Donohoe told me that people may say the responsibility lay with Doctor Malik, Doctor O'Donohoe explained that he wouldn't let that happen, the ultimate responsibility lies with the consultant, Doctor O'Donohoe did not tell me to write anything or indicate any specific changes to make. I did however offer the notes if I wanted to add any new comments. Are you happy Doctor that that's an accurate record of what Malik said?

Mr Kelly:

Hm hm. And then to be absolutely clear, D/S Cross, I read out the exact wording of Doctor Asghar's comments...

D/Sgt Cross:

Did you, right?

Mr Kelly:

...But because his responses were so different...I felt I needed to read out the exact words that Doctor Asghar's letter.

D/Sgt Cross:

Yes.

Solicitor:

You could read out Doctor Malik's response, officer, as well.

D/Sgt Cross:

Doctor Malik has replied here that it is unfortunate that Doctor Asghar has misrepresented my words. Doctor O'Donohoe at no time harassed or intimidated me; my working relationship with Doctor O'Donohoe is excellent and has greatly enjoyed his job. I even stayed on an extra six

months. And you recall Doctor Malik saying that.

Mr Kelly:

Again an unusual phrase to use, I stayed on an extra six months, I

wasn't expecting any of that kind of commentary, so it's recorded.

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DR JAMES FRANCIS KELLY

D/Sgt Cross:

Hm hm. Did Doctor Malik say anything else to you that's not recorded,

that may explain why Asghar said what he said?

Mr Kelly:

Anything that would have been germane to the issues that you are

describing, harassment, bullying, changing of notes, altering anything

or even not altering or adding to, is recorded there and dealt with.

D/Sgt Cross:

Hm hm... Doctor Malik says to you, he did however offer the notes if I

wanted to add any new comment and you said you realise that would

be inappropriate. Why did you say that?

Mr Kelly:

I don't think three days after an event you should be adding any notes,

you may wish if you want.

D/Sgt Cross:

Hm.

Mr Kelly:

This is a medical director, my personal viewpoint.

D/Sgt Cross:

Fair enough.

Mr Kelly:

That if you want my advice if it was asked, well you may wish to record your own records but I don't think taking the medical notes out and

either altering, changing or adding anything to the notes.

D/Sgt Cross:

Ok. I suppose there is quite a few documents maybe in the police that similar views were maybe attached to, the like of custody records or something. However, if Doctor O'Donohoe had said to Doctor Malik even if it is three days later, you know, is there anything new you want to add, in your view would it have been wrong to add it if he had dated and timed it three days later, so that it is obvious for all to see, that this

is three days later?

Mr Kelly:

Wrong is the incorrect word to use.

D/Sgt Cross:

Right.

Mr Kelly:

I still don't think it's appropriate.

D/Sgt Cross:

Ok.

Mr Kelly:

I think that you shouldn't

D/Sgt Cross:

Right.

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DR JAMES FRANCIS KELLY

Mr Kelly:

Be either, if you want to have additional explanatory notes or whatever

supportive information you recorded and keep it in the file by yourself

...I don't think you should ever add to the notes.

D/Sgt Cross:

Ok.

Mr Kelly:

And if somebody wants to comment ask your advice. ...

Tape finished.

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