The Inquiry into Hyponatraemia-related Deaths

Chairman: Mr John O'Hara QC

Ms Wendy Beggs
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Your Ref: NSCB04/1 NSCW50/1 NSCS071/1

Our Ref: AD-0495-13

Date: 11th January 2013

Dear Ms Beggs,

Thank you for your letter of 10th January 2013.

You are correct to say that the Inquiry's expert is critical of the fact that there was no senior surgical participation in the morning ward round. Indeed there is a broader criticism that no member of the surgical team more senior than a Senior House Officer saw Raychel throughout her time in the Altnagelvin Hospital.

Dealing with the ward round specifically it is important to consider the evidence already gathered by the Inquiry in this respect. From the witness statements of Mr. Gilliland and Mr. Zafar it appears that the arrangements in place at Altnagelvin in 2001 were such that it was not always the case that a Specialist Registrar or Consultant would attend the morning ward round.

Indeed Mr. Zafar has said that the SHO always conducted the morning ward round and it was only "sometimes" that more senior staff attended. Mr. Gilliland has explained that it was not normal clinical practice for all patients to be reviewed (at the ward round) by a consultant or specialist registrar if they had already been seen by an experienced member of staff. Moreover, Mr. Gilliland observes that Raychel's initial post-operative management was not significantly different to any other post-operative child since she was reviewed promptly (by Mr. Zafar) and appeared to be progressing appropriately.

Mr. Gilliland does not suggest that other clinical commitments would have prevented him from seeing Raychel had this been deemed necessary. On the contrary he is clear in telling the Inquiry that in addition to his normal daytime commitments he would have been available for consultation or direct clinical care of patients who had been placed under his care (such as Raychel) until 18:00 hours on the 8 June if this had been deemed necessary.

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Therefore to summarise the position, Mr. Gilliland's answer to the criticism that he or another senior colleague did not attend the ward round is approached by him by reference to Raychel's progress and condition at that time and the appropriateness of Mr. Zafar's attendance, rather than by suggesting any inability on his part (or that of a senior colleague) to attend.

Your assertion that there is an analogy between the position of Mr Gilliland and that of Dr Steen in Claire's case is not supported by the evidence before the Inquiry. Therefore it is not accepted that there is any basis for an application to the High Court at this stage. Furthermore there appears to be no reason why the evidence cannot proceed in Raychel's case with the option of making an application to the High Court at a later stage (if that becomes necessary) on this specific issue.

Yours sincerely,

Anne Dillon

Solicitor to the Inquiry

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