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Date

24 October 2013

Mr Anne Dillon
Senior to the Inquiry
The Inquiry into Hyponatraemia-related Deaths
Arthur House
41 Arthur Street
BELFAST
BT1 4GB

Dear Ms Dillon

RE: RUTH BULLAS

IN THE MATTER OF:
THE INQUIRY INTO HYPONATRAEMIA-RELATED DEATHS (Conor Mitchell)

Brief Comments on Proposed Opening Address on Behalf of Conor Mitchell

We act for Nurse Bullas and write on her behalf in relation to the content of the family's proposed opening statement¹. We are aware of the developments at the Inquiry in recent days.

The family's opening statement correctly recognises, at 4 separate points, the limited scope of the Inquiry into Hyponatraemia-Related Deaths when it comes to Conor's death (see paragraphs 1, 1d), 12 and 23).

The opening statement also correctly recognises that this inquiry into Conor's death is primarily to look at what lessons were learnt from the deaths of Adam, Claire and

¹ This was received by us by email at 15.19 on 23 October 2013, with a request to comment by "close of play", if possible. Because Nurse Bullas is outside the jurisdiction it was not possible to take her instructions on the proposed opening within this time frame. However, we have now been able to do this.

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Raychel (see statement, paragraph 1a)). The family has accepted that it is for the Inquiry to determine the “*appropriate and important issues that now fall within the remit of the Inquiry at this stage*” (paragraph 1b)). It is our understanding that the Inquiry has made that determination that the clinical management of Conor’s spasm/ seizure activity is not an issue falling within it’s remit.

Given all of the above, we are surprised that the proposed opening statement persists in closely addressing the issue of spasm/ seizure activity. We are also surprised it persists in naming or identifying individual members of medical and nursing staff in relation to this issue. These matters are outside the Inquiry’s terms of reference, outside of the Chairman’s recent decisions on scope and outside of the opening statement’s own understanding of the proper issues. Furthermore, we feel that parts of this statement are simply unfair to the treating staff. Specific aspects of their management on the spasms/ seizure issue are being criticised by the family in open court. While one can understand the family’s strength of feeling, we submit these detailed matters should not put in this way in an opening statement before this Inquiry².

It is not our intention to further delay the delivery of the family’s opening statement and we do not think it constructive to here go through each and every paragraph of the document. In the spirit of achieving a workable way forward, we focus on 5 points:

- (1) Paragraph 12d)iv): We propose the second part of this sentence should be amended to read, “*...and they feel their communications to the nursing staff were not acted on.*” The Family’s concerns in this section of the opening are, of course, based on their recollection and interpretation of events. It would be fairer and more accurate if this was clearly reflected in the language.
- (2) Paragraph 18: We propose the final part of this paragraph is amended to read, “*...no note was taken of this seizure or, what the family believes, were other seizures later in the day...*” The reason for proposal is, we hope, obvious.
- (3) Paragraph 20: The 3rd sentence currently singles out “*the nurse*” (i.e. a single nurse). This comment is not understood to relate specifically to fluid management only. If it is, then it is not our understanding that the family complained to a single nurse about fluid management. We propose that the words “*from the nurse*” are simply deleted. This is

² At the time the Inquiry’s opening statement was made it had not been possible to take instructions from Nurse Bullas.

the fairest thing to do. Admissions on communication shortcomings have been dealt with at Trust level in relation to the MAU generally and not in relation to individual nursing staff, or by individual nursing staff. Our proposed amendment would more properly reflect that.

- (4) Paragraph 23: We are not sure that the final sentence of this paragraph accurately reflects the concession made by the Trust, in particular the reference to “*problems surrounding the seizure activity...*” By letter dated 22 October 2013 the Trust’s Chief Legal Adviser wrote “*The Trust would like to acknowledge that communication with Conor’s family at the time of his admission to the Medical Admission Unit with respect to the presence of spasms/ seizures could have been better...*” (emphasis added). The final sentence should be amended accordingly.
- (5) Paragraph 24: We propose that the first part of this paragraph should be deleted (the section between “*Judy Mitchell...no internal investigation took place*”). This takes nothing away from the admission already made by Trust. There are 2 main reasons for this proposal:
- a) The reference to Nurse Bullas and the NMC is irrelevant to the Inquiry’s scope. The reference to the panel having found the family to be credible and consistent witnesses is also irrelevant to the Inquiry’s scope (to look at the implementation of the Hyponatraemia Guidelines at the CAH). The Inquiry will be aware that the hearing was in Nurse Bullas’ absence, her having already moved out of the jurisdiction. This part of the family’s opening is “*not within the remit of this Inquiry*” (adopting the language of the family’s opening, paragraph 12).
 - b) Furthermore a direct connection is apparently drawn (and certainly will be for the listener) between the Trust’s acceptance that there should have been a SAI and investigation into Nurse Bullas’ management specifically. This is unfair.

As stated we focus on a small number of points in the hope that the family can deliver their opening statement soon. However, we request that the Chairman carefully considers the limited number of points we have chosen to make. We understand the

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family wish to set out their experience of 8 and 9 May 2003 but we respectfully request that the Chairman ensures this Inquiry remains squarely within the terms of reference.

Yours sincerely

Megan Boyd
Solicitor
for Kennedys