

Witness Statement Ref. No.

161/1

**NAME OF CHILD:** Claire Roberts

**Name:** T Blue

**Title:** Triage Nurse in A&E

**Present position and institution:**  
Not currently working.

**Previous position and institution:** D grade staff nurse, in Children's A&E at RBHSC.  
*[As at the time of the child's death]*

**Membership of Advisory Panels and Committees:** Nil  
*[Identify by date and title all of those between January 1995-December 2010]*

**Previous Statements, Depositions and Reports:** Nil  
*[Identify by date and title all those made in relation to the child's death]*

**OFFICIAL USE:**  
List of previous statements, depositions and reports attached:

Ref:	Date:	

**IMPORTANT INSTRUCTIONS FOR ANSWERING:**

*Please attach additional sheets if more space is required. Please identify clearly any document to which you refer or rely upon for your answer. If the document has an Inquiry reference number, e.g. Ref: 049-001-001 which is 'Chart No.1 Old Notes', then please provide that number.*

*If the document does not have an Inquiry reference number, then please provide a copy of the document attached to your statement.*

- (1) Describe your work commitments to the Royal Belfast Hospital for Sick Children (RBHSC) from the date of your employment there as a nurse, including the department/s and locations in which you worked and the periods of time in each department/location, and in particular with regard to the period 21<sup>st</sup> October 1996 to 23<sup>rd</sup> October 1996.**

I worked as a full time staff nurse in the A&E department of the Royal Belfast Hospital for Sick Children from June 1993 to October 1996.

- (2) State the times at which you were on duty between 21<sup>st</sup> October 1996 to 23<sup>rd</sup> October 1996 and in particular:**
- (a) Whether you were on duty and present in the hospital at all times or**
  - (b) Whether you were on call during that period**
  - (c) What contact you had with Claire and her family during that period including where and when that contact occurred**

I was on duty and present in the A&E department of RBHSC from 12:15hrs to 20:15hrs on the 21<sup>st</sup> October, 1996. Documentation shows that I met with and carried out a triage assessment on Claire Roberts at 19:03hrs. This assessment would normally be carried out in the designated triage assessment area, situated in the main waiting area of the Children's A&E department. As triage nurse it would have been my role to direct Claire and her family to the treatment area and into the care of my colleagues, to await assessment by the Paediatric SHO. As recorded on the A&E notes, the Paediatric SHO commenced his assessment of Claire at 19:15hrs.

- (3) Describe what you considered to be your role in relation to, and responsibilities towards, Claire and her family over the period from her attending A&E in RBHSC on 21<sup>st</sup> October 1996 until 23<sup>rd</sup> October 1996 when ventilatory support was withdrawn, and in particular:**
- (a) From Claire's attendance at A&E at RBHSC until her arrival in Allen Ward**
- My role as the triage nurse on shift in the A&E department was to see and assess each patient as soon as possible after their arrival to the department in order to determine their priority of need for medical assessment and intervention. A triage assessment would include some baseline observations and a brief history from the parents.
- (b) While Claire was in Allen Ward until her admission to PICU**

I had no role in Claire Roberts' time in Allen ward or PICU.

**(4) Describe your role, responsibilities and actions in relation to:**

**(a) Claire's fluid administration, monitoring and management**

I had no role in Claire Roberts' fluid administration.

**(b) The making and recording of observations of Claire including determining the type of and reviewing the frequency of those observations.**

According to documentation, I carried out a triage assessment including some baseline observations, following Claire's arrival to the A&E but had no further role in observations carried out on Claire Roberts.

**(5) In relation to the actions which you have described above in respect of Claire's fluid management etc. and the making of observations etc.:**

**(a) Explain the reasons for your actions**

The observations documented at triage were carried out in order to assist assessment of Claire's presenting condition shortly after her arrival to A&E, in order to determine the priority of her need in receiving medical attention. Observations at triage were also useful in forming a baseline for any further observations.

**(b) State which of them you carried out on the express instructions of a doctor, identifying in each case:**

**(i) The doctor concerned**

**(ii) The instructions they gave you**

**(iii) When they gave them to you**

I do not recall being instructed by a doctor to carry out observations on Claire Roberts at any time in A&E on the 21<sup>st</sup> October, 1996.

**(c) Whether you sought advice from or consulted with any other doctor or nurse prior to taking any of those actions, and if so:**

**(i) Identify the person from whom you sought advice/consulted and state when you did so**

**(ii) State the nature of the advice you sought/the issues on which you consulted**

**(iii) State the advice that you received and identify the person who gave it to you**

**(iv) If you did not seek any such advice or consultation, explain why not**

I do not believe that I sought the advice of a colleague before carrying out my assessment or observations, as my role as triage nurse was to assess and determine a priority level for Claire in attaining medical assessment.

- (6) Describe and explain any discussions you had with any doctor and/or nursing staff in relation to Claire whilst you were on duty between her attendance at A&E on 21<sup>st</sup> October 1996 and 23<sup>rd</sup> October 1996, including:
- (a) The identity of the person concerned
  - (b) Where and when the discussions took place
  - (c) What prompted the discussions

I have no recollection of a discussion with a colleague about Claire on that date but determine from the times recorded on Claire's notes that her care would have been handed over to the nurse in charge of the treatment area directly after my triage in order to allocate a cubicle for Claire. A colleague in the treatment area would have taken over Claire's care at this time allowing me to return to my role as triage nurse in the designated triage area to meet and assess any further patients arriving to the A&E.

- (7) State whether you reported Claire's condition, including her blood results, to any doctor(s) at any time during your period on duty over 21<sup>st</sup> October 1996 to 23<sup>rd</sup> October 1996, and if so:
- (a) Identify the doctor(s) to whom you reported and state the time at which you reported .
  - (b) State the means by which you conveyed that report e.g. orally, in person, by telephone, in writing.
  - (c) Describe and explain what you reported.
  - (d) State whether, as a result of your report, Claire:
    - (i) Was reviewed or reassessed, and if so explain the result of any such review / assessment
    - (ii) Had her care/treatment changed, and if so describe any changes that were made and explain the reason for them
  - (e) If Claire was not reviewed/reassessed or did not have her care/treatment changed, then please give the reasons.

With reference to the times recorded on Claire Roberts' notes it is determined that she was assessed by Dr Puthuchearry promptly after triage, therefore Claire's care would have been handed over to a colleague in the treatment area following her triage.

- (8) Identify precisely on Claire's medical notes and records the entries that you made or which were made on your direction and state below:

(a) when each of the identified entries was made

(b) the source of the information recorded in the entry

As documented, I recorded Claire's temperature, pulse, respiratory rate and pupils' reaction to light, at 19.03hrs as part of the triage assessment. (090-010-012)

(9) Explain the policy and procedure at the RBHSC in October 1996 for nurses contacting the Registrar directly if they were unhappy with the SHO's/junior doctor's response.

A senior nurse was able to directly contact the Registrar on call at any time if unhappy with an SHO's response.

(10) Explain the policy and procedure at the RBHSC in October 1996 for nurses contacting the Consultant directly if they were unhappy with the responses of SHO/Registrar.

The senior nurse or nurse in charge was in a position to contact the Consultant on call if there were any difficulties with the SHO or Registrar.

(11) Identify the person(s) responsible for informing the nursing staff on Allen Ward of the:

(a) Reasons for Claire's admission

I believe that at that time initial bed bookings were frequently made by the A&E nursing staff contacting the Sister in charge of the hospital carrying the bleep, who would then allocate an appropriate ward to take each patient. The A&E staff would often contact the ward directly to discuss further details including time of admission.

(b) Primary and ongoing diagnosis of Claire's condition

The Registrar or ward SHO would also inform the ward of the primary and ongoing diagnosis. Nurse to nurse handover would have been given by the A&E staff nurse who accompanied Claire to Allen ward. I have no recollection of who contacted Allen ward or who accompanied Claire Roberts to the ward on that evening as I was off duty at 20:15hrs and the night staff would have taken over Claire's care at this time with their shift commencing at 20:00hrs. According to the time documented, Claire's bed was booked at 20:45hrs and she was transferred to the ward at a later time, giving Allen ward time to prepare a bed and any equipment. Each ward would normally ring A&E when the bed was made ready. The time recorded on the ward nursing notes state that Claire arrived to the ward at 21:45hrs. (090-041-142)

(12) *"Nature of complaint - Lethargy, vomiting and pale [...] Medication - none [...] Special interest code - EP epileptic"* (Ref: 090-010-012)

(a) State if you made these notes, and if so, state the source(s) of this information, in particular *"epileptic"*

I do not recall making these notes. Often special interest coding for data purposes were entered by doctors at time of previous attendance and discharge from A&E. The diagnoses

were entered into the computer system by the medical secretarial staff. Such codes would appear automatically on subsequent notes.

- (b) Describe any discussions you had with Claire's parents regarding her symptoms and condition

Claire's parents would have been asked for a brief history at triage to assist the assessment for her priority in attaining medical intervention.

- (c) State if you saw the letter from Claire's GP, Dr D Savage during triage (Ref: 090-011-013). If not, state why

I cannot recall seeing the letter from Claire's GP. In cases where the patient was seen by the Paediatric SHO swiftly following the triage assessment, it was often the Paediatric SHO who initially read the GP letter. As triage nurse my primary concern would have been the prompt assessment of the patient and their presenting condition at time of arrival to the A&E department.

- (d) State whether a child with a past history of seizures, who was fit free for 3 years and off anti-convulsants for 18 months, who had a questionable seizure the day of admission, could accurately be described as epileptic, and state the reasons why

I am unable to comment on the medical diagnosis. The term 'epileptic' would only be noted at triage if the parents stated the same or if automatically entered on the patient's notes from a previous diagnosis during a prior attendance to A&E.

- (13) "Time 19.03, Temperature 36.9, Respiratory rate 24, Heart rate 96" (Ref: 090-010-012)

- (a) State if it was you who took these initial observations at 19:03

I believe I carried out the triage observations as part of the initial assessment.

- (14) Explain why no further recordings of Claire's vital signs were taken between triage admission at 19:03 and her admission to Allen Ward at 21:45 (Ref: 090-041-142).

I cannot offer an explanation as to why no further recordings are now available. Following an initial triage, unless the patient remained in the triage or waiting area, the patient's subsequent observations would be carried out by colleagues within the treatment area and were often recorded on a separate observation chart. This observation chart would form part of the handover to the ward.

- (15) State whether you measured Claire's weight on her attendance in the A&E Department, and if so, state by what means, where it was measured and recorded.

I believe that Claire was not weighed at the initial triage as I believe from the timings on the documentation, that she was directed promptly to the treatment area for assessment by the Paediatric SHO.

- (16) State whether you completed the treatment form (Ref: 090-021-049), and if so state when you completed it.

I did not complete the treatment form. This is not my handwriting. I believe that this form was normally ward based.

- (17) State the policy for commencing neurological observations on a child in A&E at the time of Claire's admission.

Neurological observations were commenced in A&E when a patient's condition determined their need, in cases such as seizures, head injuries and any concern regarding a decreased level of consciousness. A neurological observation chart would be commenced shortly after triage, in cubicles.

- (18) State who was the medical registrar referred to in your note ("*S/B Medical Reg*") at Ref: 090-010-012

(a) State at what time and the location where the medical registrar attended and examined Claire

(b) Identify who called the medical registrar, and state why and when she was called

I did not record '*S/B Medical Reg*'. This is not my handwriting. I do not have knowledge regarding this.

- (19) State whether any blood samples were taken from Claire in A&E for testing, and if so, state the results of those blood tests and identify the note or record of those results.

I do not have knowledge of any blood tests carried out on Claire Roberts as I was not involved in her care following triage.

- (20) In relation to the specimen of urine collected in the A&E Department by uri-bag and taken for analysis (Ref: 090-010-012):

(a) State whether the urine specimen was tested, and if so where

I did document '*Uri Bag*' at triage, following application of the same but do not believe was involved in the testing of a urine sample. This may have been carried out in A&E or on Allen ward, depending on when the sample was obtained.

(b) State the results of the urinalysis of that sample and identify the note or record of those results

N/A

- (21) State at what time Claire left the A&E Department on 21<sup>st</sup> October 1996 to be transferred and admitted to Allen Ward.

I do not have knowledge of the actual time Claire Roberts left the A&E department as I was off duty at 20:15hrs.

- (22) Identify who made the "*Primary diagnosis*" of "*Encephalitis?*" (Ref: 090-012-014) and state when that diagnosis was made.

I do not have knowledge of who made this diagnosis but would assume that it was one of the medical staff present in A&E that evening.

**(23) State if any alternative diagnoses were made and, if so:**

- (a) Describe and explain what those alternative diagnoses were
- (b) Identify who made them and when
- (c) Explain why they were not noted on the A&E notes at Ref: 090-012-014.

I do not have knowledge of any alternative diagnoses for Claire Roberts made by the medical staff.

**(24) State whether you or any other person informed the Allen Ward nursing staff of "Primary diagnosis Encephalitis?" made in the A & E Department. If so, state who was informed of this primary diagnosis and when they were informed. If not, state the reasons why not.**

I did not have contact with Allen ward staff regarding Claire Roberts.

**(25) State whether there were any 'Protocols', 'Guidelines' and/or practice and procedure manual(s) in RBHSC in October 1996 that related to the observations that should be made of a paediatric patient, including their type and frequency:**

- (a) Whilst in the A & E Department

I do not recall specific protocols, guidelines and/or practice and procedure manual(s) in 1996.

**(26) Describe any discussions you had regarding Claire's condition with:**

- (a) Nurse E.A. Jackson
- (b) Dr Janil Pathucheary
- (c) Dr Bernie O'Hare

Due to the passage of 15 years, I do not recall any detail of any discussions regarding Claire Roberts with any members of staff in A&E. I can only confirm that I would have had to speak to the nurse in charge about Claire's triage assessment in order to allocate a cubicle to facilitate Claire's prompt assessment by the Paediatric SHO, as the nurse in charge would have been responsible for the co ordination of the patient care within the treatment area. I do not recall any discussion with either doctor in A&E regarding Claire Roberts.

**(27) Identify the A & E Department sister and/or the nurse in charge with overall responsibility during your care and treatment of Claire.**

A senior staff nurse on duty at this time on the 21<sup>st</sup> October, 1996, would have been designated nurse in charge of the department. Sister Mandy Hawthorne was not on duty on this date but was Sister in charge of the A&E department in October, 1996.



**(28) In October 1996, state whether nursing care was prescribed by doctors, nurses or both.**

Nursing care was prescribed by both doctors and nursing staff in October, 1996.

**(29) Explain the nature and status of the document entitled 'Discharge/Transfer Advice Note' at Ref: 090-007-009, identify who completed that document and state when and where it was completed.**

I do not have knowledge of who completed this form but believe that this was always completed by medical staff as part of the discharge or transfer process at the time of a patient's discharge or transfer from a ward.

**(30) State whether you are a member of the RCN or a union, and if so, state whether you have communicated with that organisation in relation to the treatment and death of Claire, and if so, state when you communicated with it.**

**(31) Describe your perception of the seriousness or otherwise of Claire's condition during your care of her, and give the reasons for your view.**

I believe that my perception of the seriousness of Claire Roberts' condition during triage was such that I gave a high priority for her need for medical intervention and Claire was transferred directly from triage to a cubicle where a Paediatric SHO commenced an assessment as documented at 19:15hrs.

**(32) Describe your communication with Claire's parents and family and in particular:**

**(a) State what information you communicated to Claire's parents and family, and what information they gave to you**

I believe that my communication with Claire's parents was solely at the triage assessment in order to obtain a brief history of Claire's condition to determine an assessment of her needs in the A&E department and to prioritise her care and need for medical intervention.

**(b) Identify to whom you passed on the information that you received**

I believe that I would have passed on any information from my triage to one of my colleagues in the treatment area or cubicle.

**(c) State when and where you told them this information**

I do not recall when and exactly where this information was passed on and cannot identify any recorded communication with the staff or family in the main treatment area of the department.

**(d) Identify where the information you communicated/received is recorded or noted**

I do not recall when and exactly where this information was passed on and cannot identify any recorded communication with the staff or family in the main treatment area of the department.

- (e) State whether you recorded Claire's parents'/family's understanding of the information that you gave them and their concerns

I cannot identify any recorded communication with Claire's parents on the A&E triage notes.

- (f) If you did record the information and their concerns, identify the documents containing that record. If you did not record it, explain why not

See 32e

- (33) Describe in detail any audit and learning that you were involved in relating to the death of Claire:

- (a) With nursing colleagues
- (b) Within the department
- (c) As an individual

I was not involved in any audit or learning relating to Claire's death.

- (34) Prior to 21st October 1996:

- (a) State your knowledge and awareness of the case of Adam Strain, his Inquest and the issues arising from it

I had no prior knowledge and was not aware of the case of Adam Strain.

- (b) State the source of your knowledge and awareness and when you acquired it
- (c) Describe how that knowledge and awareness affected your care and treatment of Claire

- (35) Since 21<sup>st</sup> October 1996:

- (a) State your knowledge and awareness of the case of Adam Strain, his Inquest and the issues arising from it

I have been made aware of this case through the Claire Robert's case. I have had a brief overview of the case of Adam Strain through the Inquiry website.

- (b) State the source of your knowledge and awareness and when you acquired it
- (c) Describe how that knowledge and awareness affected your work

- (36) Describe in detail the education and training you received in relation to:

- (a) Fluid management and balance (in particular hyponatraemia)

- (b) Record keeping
- (c) Assessment of children with reduced level of consciousness (e.g. Glasgow Coma Scale)
- (d) Assessment of children with a learning disability
- (e) Assessment of children with diarrhoea and vomiting
- (f) Communication with parents of sick children
- (g) Resuscitation in children
- (h) Recognition of the deteriorating child

through the following, providing dates and names of the institutions/bodies:

- (i) Undergraduate level
- (ii) Postgraduate level
- (iii) Hospital induction programmes
- (iv) Continuous professional development

I trained as a General & as a Sick Children's nurse in the RVH & in the RBHSC. My nurse training and in particular RSCN encompassed all of the above. After qualifying I worked as an A&E staff nurse in Children's A&E from 1993 to 1996. Regular in house training from medical Consultants and senior Nursing staff including, specific training in resuscitation and the assessment and nursing care of the sick child.

(37) Prior to 21<sup>st</sup> October 1996, describe in detail your experience of dealing with children with hyponatraemia, including the:

- (a) Estimated total number of such cases, together with the dates and where they took place
- (b) Number of the children who were aged less than 10 years old
- (c) Nature of your involvement
- (d) Outcome for the children

I cannot recall any such individual cases in A&E prior to 21<sup>st</sup> October 1996. I can only conclude that as with most A&E patients, involvement as a staff nurse would be relatively brief due to the very process of A&E.

(38) Since 21<sup>st</sup> October 1996, describe in detail your experience of dealing with children with hyponatraemia, including the:

- (a) Estimated total number of such cases, together with the dates and where they took place

- (b) Number of the children who were aged less than 10 years old
- (c) Nature of your involvement
- (d) Outcome for the children

I cannot recall any such cases after 21<sup>st</sup> October, 1996 in my subsequent role as a Children's A&E nurse in Guy's Hospital, London.

**(39) Identify any 'Protocols' and/or 'Guidelines' which governed Claire's care and treatment.**

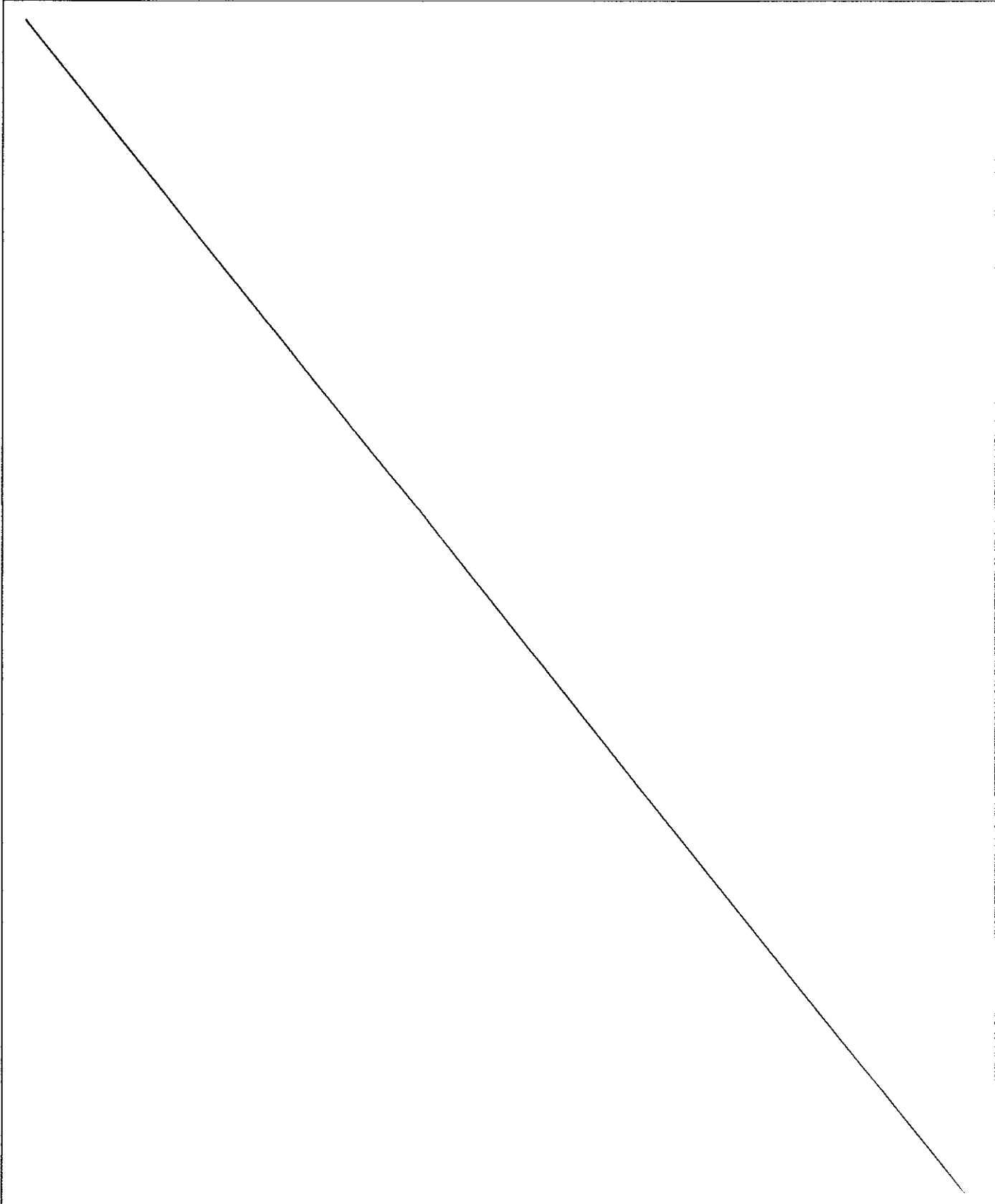
I do not recollect any specific protocols and/or guidelines from this time.

**(40) Provide any further points and comments that you wish to make, together with any documents, in relation to:**

- (a) The care and treatment of Claire from her attendance on 21<sup>st</sup> October 1996 to her death on 23<sup>rd</sup> October 1996
- (b) Record keeping
- (c) Communications with Claire's family about her condition, diagnosis, and care and treatment
- (d) Lessons learned from Claire's death and how that has affected your practice
- (e) Current Protocols and procedures
- (f) Any other relevant matter

I have no further information to give regarding the above questions. I was unaware of the death of Claire Roberts until very recently when contacted by the Trust, as I had moved to London at the end of October 1996 to commence a new post.

I was very saddened to learn of this young child's death and wish to extend my deepest sympathy to the family of Claire Roberts.



**THIS STATEMENT IS TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF**

Signed:

*Tracy Blue*

Dated: 13-2-12