

MUCKAMORE ABBEY HOSPITAL INQUIRY
SITTING AT CORN EXCHANGE, CATHEDRAL QUARTER, BELFAST

HEARD BEFORE THE INQUIRY PANEL
ON WEDNESDAY, 30TH NOVEMBER 2022 - DAY 27

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1 THE INQUIRY RESUMED, AS FOLLOWS, ON WEDNESDAY, 30TH
2 NOVEMBER 2022

3
4 CHAIRMAN: Good morning.

5 MR. MCEVOY: Good morning, Chair. Good morning Panel. 09:58
6 The programme for today is initially the morning
7 session of evidence in relation to the mother of P63
8 and then at the conclusion of that session then the
9 reading in of a statement of the brother of P68.

10 CHAIRMAN: Sorry, please don't get up, I've left my 09:58
11 mouse. Next door, sorry. Thank you very much.

12 MR. MCEVOY: At the conclusion of the P63 evidence will
13 be the reading in of a statement from the brother of
14 P68. It is -- I just want to flag to the Inquiry at
15 this stage that it is likely that that will be the 09:59
16 subject of submissions and I will deal with those when
17 that juncture is reached, but it is intended then that
18 my colleague, Ms. Briggs, will read that into the
19 record. But that's more than likely this afternoon.
20 In terms of -- 09:59

21 CHAIRMAN: Sorry, when you refer to submissions, do you
22 mean the likelihood of a restriction?

23 MR. MCEVOY: There will be an application. In terms
24 then of the plan for this morning, this will be what
25 I would describe as an evidence session relating to P63 09:59
26 and in particular P63's mother. If the Inquiry and
27 everyone present will indulge me, I'll describe what
28 I intend to do.
29

1 Essentially it will be a presentation into the Inquiry
2 record of statements and exhibits produced to the
3 Inquiry from P63's mother and to other persons
4 associated with her who have told us that they are able
5 to assist the Inquiry in conveying her patient 10:00
6 experience to the Inquiry. The Inquiry, of course, has
7 previously received into evidence by way of reading in
8 a number of statements from individuals who have not
9 been present.

10
11 The significance of what you are going to hear this 10:00
12 morning is that P63's mother, and indeed P63 himself,
13 are now deceased. It will be readily apparent to the
14 Inquiry that P63's mother was engaged with the Inquiry
15 and its work prior to her passing. And, although she 10:00
16 did not survive long enough to give her statements to
17 the Inquiry's statement-taking team, as the Inquiry
18 will see had been her wish, she was, it appears, able
19 to produce a written narrative of her experience with
20 assistance from her family liaison social worker. So 10:01
21 to that end the statement of P63's mother is, in
22 effect, exhibited to another statement from that family
23 liaison social worker.

24
25 So, Chair, Panel members, what I propose to do in a few 10:01
26 moments then is to commence by reading in the statement
27 of the family liaison social worker, who is SW4, then
28 to take the Inquiry directly to the statement of P63's
29 mother.

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Before I do so I should indicate that in this evidence session the Inquiry will receive into evidence two statements from another person who is described as a friend of P63's mother. That person provides an initial statement which is their own first-hand account from which I propose to read relevant portions and a second statement which encompasses a significant number of potentially relevant exhibits. The purpose of that second statement is to account for the circumstances by which the statement maker came into possession of those exhibits. It sounds a bit cryptic but it will be apparent when I read them out. Again then relevant extracts which will then be read into the record.

10:01

10:02

10:02

It is important to note that core participants will, as always in this Inquiry, have had sight of all of the materials I'm going to open to you. It will be apparent that core participants that there are a number of junctures in the statements where the accounts touch on territory covered by the Memorandum of Understanding between the Inquiry, the police service and the Public Prosecutions Service. I just want to make it clear on behalf of your counsel team that, as has been the practice thus far in the hearings, as inquiry counsel I will indicate where and when those junctures are reached for the purposes of the record.

10:02

10:02

CHAIRMAN: In relation to those paragraphs, you regard them, and you can take it the Panel will read them and

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take them into account --

MR. MCEVOY: I'm not going to read them out. I think everyone present is familiar with the practice by now, Chair so hopefully that will be clear.

10:03

So bearing those remarks, introductory remarks in mind, Chair, Panel members, I'm going to move now and read, as I've indicated, the statement of SW4 first of all.

EVIDENCE RELATING TO P63

STATEMENT OF SW4 READ INTO RECORD

This is a statement dated 14th June 2022. SW4 then says:

10:03

"I make the following statement for the purpose of the Muckamore Abbey Hospital Inquiry. In exhibiting any documents I will use my initials, SW4, so my first document will be SW41.

10:03

My connection with Muckamore is that I was the Family Liaison Officer (FLO) to P63's mother (deceased) who prepared a witness statement in respect of her son, P63, (deceased) who was a patient at Muckamore.

10:04

I attach a copy of the witness statement dated 28th January 2022, prepared by P63's mother with my assistance before she died."

1 That should read SW41.

2

3 "The scope of the statement is limited to my
4 appointment as FLO to P63's mother as referred to in
5 paragraph 1 above.

10:04

6

7 The relevant time period I can speak about is between
8 the beginning of February 2020 and 10th February 2022.

9

10 I have been employed as a senior social worker by the
11 Belfast Health and Social Care Trust ("The Trust")
12 since May 2018. I was assigned FLO duties in January
13 as I was working in the adult safeguarding historical
14 investigations team at that time. I remain in this
15 seconded position as an FLO and as a designated adult
16 protection officer at this time.

10:04

10:05

17

18 At the beginning of February 2020 I was appointed as
19 FLO to P63's mother."

20

10:05

21 She then indicated the basis of her initial engagement
22 which touches on the Memorandum of Understanding.

23

24 "At the initial home visit P63's mother asked me to let
25 her know as soon as possible of the discovery of any
26 further incident of ill treatment and, accordingly,
27 I was speaking to P63's mother on the phone
28 from February 2020 onwards approximately every couple
29 of weeks. I also conducted numerous face-to-face home

10:05

1 visits with P63's mother over the course of the next
2 two years as part of the FLO ongoing support and
3 information giving. In the last week of P63's mother's
4 life I had daily contact with her.

10:06

5
6 In addition to advising P63's mother on the discovery
7 of any adult safeguarding incidents involving her son,
8 I kept P63's mother up to date on everything to do with
9 P63, as well as a general overview of where The Trust
10 was in terms of the investigation. I also shared with
11 her what information we had about the consultation and
12 the possibility, as it was at that time, of a public
13 inquiry. P63's mother was of the view that the public
14 inquiry was a good idea and she had a real desire for
15 those responsible to take accountability for their
16 actions and failure to act.

10:06

10:06

17
18 During my home visits P36's mother would reminisce
19 about P63's time at Muckamore and the many times that
20 she visited him as a patient. It is my professional
21 opinion that P63's mother's emotional health and to a
22 degree her physical health suffered after being
23 informed of P63's ill treatment. She told me that she
24 would wake in the middle of the night and would go over
25 and over the good and bad times when P63 was in
26 Muckamore. She advised me this would go around and
27 around in her head in the middle of the night and she
28 wasn't able to get back over to sleep or to get into a
29 place of comfort. She started sleeping frequently on

10:06

10:07

1 the sofa and this had an impact on her back and hip
2 pain. Her sleep remained disturbed for a long time.
3 P63's mother would not smoke in her bedroom and this
4 was why she returned to her living room at night. She
5 told me that at night she would sit up thinking about 10:07
6 P63 and the staff at Muckamore and would smoke one
7 cigarette after the other for hours at a time. I was
8 able to assess that her mood was affected and, with
9 P63's mother's consent, I liaised with her GP about
10 this and the impact of the ongoing investigation on her 10:07
11 health. Her GP responded accordingly.

12
13 When P63's mother heard the announcement that there
14 would be a public inquiry she was very pleased. P63's
15 mother visited her son regularly during his 26 years in 10:08
16 Muckamore. As you will note from her statement she
17 became very friendly with the staff at Muckamore and
18 invited them into her home for dinner often on a weekly
19 basis when P63 came home for a visit or at least when
20 the visits could be facilitated by Muckamore. There 10:08
21 were times, sometimes weeks, when P63's visits would be
22 suspended due to staff shortages.

23
24 P63's mother told me that she often wondered whether
25 any of those staff members who came into her home and 10:08
26 regularly had dinner with her were responsible for
27 P63's abuse or the abuse of any other patient. I was
28 not permitted to give her any names due to the confines
29 of confidentiality and the ongoing investigation and

1 P63's mother understood this, but it did not stop her
2 wondering for hours at a time or asking me.

3
4 I developed a very good working and therapeutic
5 relationship with P63's mother over the course of those 10:09
6 two years. She would sometimes try to catch me out and
7 say the names of staff members to see if it provoked
8 any reaction in my face. Whilst it was so serious she
9 became very good at reading my face and she would throw
10 out random names almost to catch me out. I would 10:09
11 always tell P63's mother that I wasn't allowed to give
12 this information and she would always say to me 'I know
13 you can't tell me but I just really want to know the
14 names'.

15 10:09
16 P63's mother wanted to be here until the end of the
17 inquiry and the investigation and to hear the names of
18 those responsible for the ill treatment of patients.
19 That mattered to her a great deal. She also reiterated
20 many times that she wanted the management at the 10:09
21 hospital, to the very top, she would state, to be
22 held accountable for letting patients and families
23 down. P63's mother also told me she got to know many
24 of the other patients over her years going to Muckamore
25 and she would spend time at every visit talking to 10:10
26 them. She described them as "the lads". She said that
27 in many ways the other patients became her main source
28 of being kept informed of what was happening on the
29 ward when she wasn't there.

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The first time I met P63's mother she described one particularly upsetting incident which happened a year or two after P63 was admitted to Muckamore. She said there was a patient who took his own life in Movilla A ward. She would say to me that she often wondered what would cause the boy to do this and she would say that she often thought of him and how sad it was. She would say: 'I can still see him now. He was the most handsome young lad, beautiful, dark hair and the loveliest smile'. P63's mother told me this lad was the same age as P63. It would bother her that she could not recall the patient's name. 10:10

P63's mother described being heartbroken for this patient. She also recalled that this had a very negative effect on the nurse in charge and that he went on sick leave and that she felt it had an impact on him for a long time. She could not recall the name of the nurse but it was a male nurse. She said it was an awful thing and it left a cloud over the ward. 10:11

P63's mother thought about that boy over the years and asked herself if the incident had anything to do with the fact that it was a mixed ward. P63's mother did not like the fact that P63 was on a mixed ward with sex offenders all in one dormitory. She didn't think it was appropriate. She thought that it must have had an effect on the other patients in terms of their safety. 10:11

1 P63 was on a mixed ward for 15 to 20 years at
2 Muckamore. She worried about that.

3
4 P63's mother would also tell me many stories of her own
5 life during my visits to her home. She advised me that 10:12
6 she left home in Ireland when she 16 with nothing more
7 than a suitcase and went to London."

8
9 There is then a description, Sir. I'm in the Inquiry's
10 hands but I am going to just give a synopsis. There's 10:12
11 just a description of P63's mother leaving, going to
12 England and basically setting out then the family
13 circumstances. I'll take it up at 14.

14
15 "In the time that I knew P63's mother she enjoyed 10:12
16 spending time with family and friends when they came to
17 visit her. She had a small, close circle of support.
18 She went for dinner most Thursday evenings, with her
19 trusted friend, to Lizzy Drake's restaurant which is a
20 small country pub in the middle of nowhere. She loved 10:12
21 the staff and everybody knew her in there.

22
23 A friend of P 63's mother, P63's mother and I had
24 dinner in that restaurant the same evening she passed
25 away. I found that P63's mother loved a bit of craic 10:13
26 and was an easy person to talk to. She enjoyed country
27 music. She would talk to me about her family, her life
28 and her regrets. I found P63's mother to be a
29 genuinely honest person who dealt with a lot of

1 difficult challenges in her life. She would talk to me
2 about what she felt she handled well but, much more
3 than that, she talked to me about what she felt she
4 could have done better. P63 and her engagement with
5 Muckamore was a big part of the latter." 10:13

6
7 There's then a description, Panel members, Sir, of the
8 initial engagement on the part of SW4 of P63's mother
9 with the Inquiry. I don't propose to read it.

10 CHAIRMAN: I don't think you need to read that. That, 10:13
11 it seems, is what triggered her to get her thoughts
12 down on paper.

13 MR. MCEVOY: That is right. Then if we then take up
14 the following paragraph indeed, SW4 moves on to tell
15 us: 10:13

16
17 "From October 2021 to January 2022 I assisted P63's
18 mother with the preparation of her witness statement.
19 We called it her written submission because we knew it
20 was the start of her process of sharing information 10:14
21 with the Public Inquiry. I made a number of
22 suggestions to her how she might start pulling her
23 thoughts together but ultimately the only method that
24 worked was to use structured, supported conversation
25 and time. Nothing was rushed, at least not until the 10:14
26 end when she found out she was terminally ill.

27
28 I am a trained Achieving Best Evidence or ABE
29 interviewer and I leaned heavily on the ABE model to

1 support me and P63's mother to achieve her goal.
2 I drew on those skills to assist P63's mother as a
3 bereaved parent in preparing for her statement. P63's
4 mother would talk to me and I would take notes and
5 converse with her and ask questions and clarify things 10:15
6 with her. I would then type up each draft and bring it
7 to P63's mother during the next visit to recommence
8 work on the draft. We used prompts, such as
9 photographs, personal items and documents to try to
10 prompt memories. I attach copy paragraphs." 10:15

11
12 She indicates the exhibits where the photographs exist.

13
14 "We even used P63's old running tracksuit and his gold
15 medal. The words and descriptions in the statement 10:15
16 attached completely belonged to P63's mother and she
17 was very particular that the account would be as
18 accurate as possible. It was very important to P63's
19 mother to prepare the statement so that she could speak
20 out for P63. The process was like completing life work 10:15
21 with a grieving mother.

22
23 Page 3 of the submission is the only page of the
24 document that I wrote myself to summarise how and why
25 the submission was compiled. This page was then read, 10:16
26 signed and dated by P63's mother and myself on 20th
27 January 2022.

28
29

1 Sadly P63's mother was diagnosed with lung cancer on
2 20th January 2022."

3
4 MS. RICHARDSON: Apologies, Chair, seemingly there is
5 no sound so we need to -- we don't know what is
6 happening. 10:16

7 CHAIRMAN: So people can't hear what is being said in
8 room B?

9 MS. RICHARDSON: Room B is fine it is --

10 CHAIRMAN: We will stop. Do they need five minutes? 10:17

11 MS. RICHARDSON: Yes.

12 CHAIRMAN: Sorry everybody.

13
14 ADJOURNMENT

15
16 CHAIRMAN: Do you know where it stopped working? 10:24

17 MR. MCEVOY: I don't, I'm not sure if we had it at all.
18 In consultation with the Inquiry Secretary what
19 I propose to do is simply to indicate to those on the
20 link that all we have covered to date is the statement 10:25
21 from the Family Liaison Social Worker who has simply
22 described in terms her relationship, the background to
23 and her relationship with P63's mother. I'm shortly
24 about then to move on to the substance really, which is
25 P63's mother's statement. 10:25

26 CHAIRMAN: Can I just offer our apologies to everybody
27 on the link, anybody who is watching, obviously it was
28 just a technical problem. We'll try to make sure that
29 doesn't happen again.

1 MR. MCEVOY: Thank you, sir. So I was just coming to
2 the point in the statement where I was reading out that
3 SW4 had indicated in her statement that sadly P63's
4 mother was diagnosed with lung cancer on 20th January
5 2022. That was just three weeks before her death on 10:25
6 10th February 2022.
7
8 "When P63's mother was diagnosed her main concern was
9 that she wouldn't be alive to see the Public Inquiry.
10 P63's mother was determined that the Inquiry would do 10:26
11 their work right and she did not want P63 to be
12 forgotten about."
13
14 There is then, Panel, a discussion by SW4 in her
15 statement of personal engagements between P63 and 10:26
16 members of the Inquiry team. I don't think it is
17 relevant or appropriate that that be read out.
18 CHAIRMAN: I agree.
19 MR. MCEVOY: I will take it up then towards the
20 conclusion of the statement where P63's mother -- 10:26
21 CHAIRMAN: Just pause for a second. Is everything all
22 right?
23 MR. MCEVOY: SW4 then tells us towards the end:
24
25 "P63's mother was due to meet with the solicitors to 10:27
26 give her formal statement to the Inquiry on
27 11th February 2022. Sadly she died the night before on
28 10th February 2022.
29

1 I am very glad that I helped P63's mother complete the
2 attached statement, that her words will be heard and,
3 more importantly for P63's mother, that P63 will not be
4 forgotten. It has been my privilege to work with P63's
5 mother and be part of P63's story and their journey." 10:27
6 CHAIRMAN: Thank you very much. Right.

7
8 STATEMENT OF P63'S MOTHER READ INTO RECORD:

9
10 MR. MCEVOY: The statement then from P63's mother 10:27
11 commences at 027-11. There's a picture of P63 as a
12 youngster and there is reference to P63, one can see
13 from the way he is dressed there he is taking part in
14 an event and there's mention of that in the body of the
15 statement, which I'm just about to read out. This is 10:28
16 the covering note that was described by SW4 in the body
17 of her statement.

18
19 "The following is an account of some memories and
20 recollections of P63's mother in relation to her son, 10:28
21 P63, told to her Belfast Health and Social Care Trust
22 Family Liaison Officer, SW4, over the course of
23 multiple home visits between October 2021 and January,
24 2022, the method being that P63's mother would talk and
25 SW4 would write and converse with her and ask questions 10:28
26 and clarify. SW4 then completed the typing up and
27 brought each draft back to P63's mother at the next
28 home visit to recommence the work. Photographs,
29 personal items and documents and even P63's old running

1 tracksuit were used to prompt memories and
2 explanations. The words and descriptions are
3 completely belonging to P63's mother and SW4's role was
4 to prompt recall and promote reminiscence of incidents
5 and help P63's mother group memories into topics which 10:29
6 are captured under subheadings. SW4 suggested the
7 written structure that follows and P63's mother pointed
8 out throughout the process what she wanted edited or
9 amended to ensure the account was exactly what she
10 meant to communicate to the Public Inquiry Team." 10:29

11
12 She then goes on to indicate that:

13
14 "After a meeting with the Inquiry Team at an engagement
15 session in October 2021, P63's mother decided she would 10:29
16 get some of her thoughts down on paper in advance of
17 speaking directly to the Inquiry Team and making her
18 statement and to tell them anything that might help
19 them achieve their work. Additionally P63's mother
20 wants to leave a lasting record for P63. Therefore 10:30
21 this written submission is not to replace P63's
22 mother's statement that is to be given through Cleaver
23 Fulton Rankin, it is to assist her in sharing
24 information with the Inquiry Team. This page was the
25 last page typed up." 10:30

26
27 So written submission of P63's mother in relation to
28 her son, P63:
29

1 "To the Muckamore Abbey Hospital Public Inquiry.
2 Written submission of P63's mother in relation to her
3 son, P63, who was detained to Muckamore Abbey when he
4 was 17 years old and remained there for over 26 years
5 as a detained patient, December 1992 to early 2018. 10:30

6
7 P63 was born on [redacted], and died on his 46th
8 birthday, [redacted], son to..."

9 His parents are then named.

10 CHAIRMAN: Can we have the years, though? 10:31

11 MR. MCEVOY: I think '75 to 2018.

12
13 "I would like people to know a little about my son,
14 P63, as he was much more than just a long stay patient
15 in Muckamore. He was a great boy and I loved him 10:31
16 dearly. I miss P63 terribly. P63 was born on."

17
18 Gives birth date and gives the place where he was born.

19
20 "It was a forceps delivery and very rough but he was 10:31
21 born a healthy and bright boy and P63 was such a good
22 baby to look after. He ate well and slept well and
23 I could not have felt more lucky. I used to get up
24 during a check and even give him a little shake just to
25 see if he was okay, he was such a great sleeper. 10:31

26
27 My problems with P63 only really began when he started
28 walking at about 18 months old because once he started
29 he did not stop and he could be out the door and away

1 up the street like a shot if I didn't have eyes in the
2 back of my head.

3
4 I would describe P63 as a beautiful and affectionate
5 child. He was playful and, apart from the running off, 10:32
6 he was a good mannered child. P63 was the second child
7 born to our family, a little brother to his sister who
8 was 3 years old when P63 was born. P63's father and
9 I noticed that as P63 grew his development was slower
10 than we expected and that he wouldn't really respond to 10:32
11 stimulus in the same way his sister did. This was
12 checked out over lots of medical appointments. They
13 thought at first P63 might be deaf and then thought it
14 was mild cerebral palsy. But by the time he started at
15 school at 4 or 5 years old it was understood he had 10:32
16 significant special needs.

17
18 Despite his difficulties P63 was a great child and he
19 loved going to school. He would be up and dressed an
20 hour before the bus came for him and he would be 10:33
21 watching out the window for it. He loved going to
22 school and he had one great friend. The pair of them
23 were great friends and had so much fun when they were
24 together. The friend would often stay for sleep overs
25 and the pair of them were great pals. This was P63's 10:33
26 best friend until he went into Muckamore when after
27 that he lost so much from his normal life outside of
28 the hospital. As I say, the only trouble I ever had
29 with him was when he started to move. Boy, could P63

1 move and run. He loved running. When P63 started in
2 school, when he was aged 5 or 6, his then school
3 principal could see just how good a runner he was and
4 encouraged P63 to train and take part in the Special
5 Olympics representing Ulster. P63 loved this. 10:33

6
7 When P63 was 10 years old he won a gold medal running
8 the 100 metres in Croke Park, Dublin, in 1985 Special
9 Olympics European Games competing with athletes from 17
10 other countries, beating a lad who was from Belgium who 10:34
11 came second. P63 was awarded his medal by Ted Kennedy
12 and his picture was in all the papers at the time. It
13 was a really happy time in P63's life and he was so
14 proud of his abilities and we were so proud of him.

15 10:34
16 One the memories that always stands out for me at those
17 Games was what happened to the relay team. Just before
18 the relay race in Croke Park one of the boys took ill
19 and they were one runner short. So the coach asked if
20 P63 could stand in at short notice. Of course P63 10:34
21 wanted to run but he had never trained for the relay.
22 We all knew that once he started running he would not
23 stop at the hand-over point. Anyhow, it was decided
24 that P63 would be put as the last runner and a coach
25 stood close by him to tell him when he had to start 10:35
26 running. P63 never needed to be told twice, he would
27 be off like a shot. Usually I would be at the finish
28 line of P63's races shouting for him to stop. There
29 was plenty of sports days where you could hear over the

1 tannoy speakers: 'Would P63's mother please get off
2 the track' but Special Olympics, I could hardly stand
3 on the track. I remember P63's father and I were just
4 so proud of him that day.

5
6 The day he won his gold we all went for a meal
7 afterwards, me, P63's father, P63's sister, her friend
8 and P63. We decided to go to the poshest place we
9 could find. I remember P63 sitting down and being a
10 boy who loved his grub. He said out loud "where's my
11 fork and knife" but with his pronunciation it sounded
12 like "where's my f-ing knife" and all the people were
13 looking at him and him sitting there with his big,
14 serious face on him and his gold medal around his neck,
15 oblivious to the scene. I could not stop laughing. It
16 still makes me laugh when I think of his face. I can
17 still see it to this day.

18
19 Around that time P63 took part in many other runs, fun
20 runs, charity runs, club runs, you name it. He loved
21 to take part and always enjoyed the day. P63 won many
22 medals running in events when he was a boy and a young
23 teenager and he was always delighted with his
24 successes. I ran many of the fun runs with him and my
25 abiding memory is of P63 shouting back to me to keep up
26 with him. "Come on Plum" he would shout because he
27 couldn't pronounce mum.

28
29 I recall one holiday P63's father and I took the

1 children to one of the forest parks. P63 was maybe 14
2 or 15 at the time. One afternoon his big sister and
3 her friend went for a walk and took P63 with them.
4 After about an hour the two girls came back but no P63
5 with them. They said he wanted to wander back and had 10:36
6 gone off on his own. I was distraught at the thought
7 of my P63 being lost in a forest on his own and I
8 imagined all sorts of things. Of course P63's father
9 and I and the girls searched the local area, but no joy
10 in finding him. We got into the car and went to the 10:37
11 local police station but it was closed so we had to
12 drive on to the next town to seek help. It was whilst
13 we were standing in the next town trying to plan our
14 next steps when who do I see waving madly at me from an
15 oncoming van but P63. I could not believe it. The van 10:37
16 stopped and when P63 got out he was over the moon to
17 see us but not one bit bothered about being lost. Of
18 course I was horrified that he was cut and scraped to
19 bits by going through the forest on his own. The van
20 driver was able to tell us that P63 had just stood on 10:37
21 the side of the road and somehow made his way to and
22 thumbed a lift. The driver said he gathered P63 was a
23 vulnerable boy and agreed to take him into town. To
24 this day I will never know how P63 knew how to thumb a
25 lift and rescue himself. P63 really had lots of 10:37
26 potential and wit to do well in life."

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There then follow a number of photographs of P63 as a
child. Taking it up then at 027-19.

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"The real difficulties for P63 started in his mid teens, say age 16. I think puberty had got a lot to do with it. He was tall and strong but didn't know his own strength. When he got upset he would throw things and lash out. P63's father was a wheelchair user from his motorcycle accident in June 1975 which left him paralysed from his chest down so physically it became harder and harder to manage P63's behaviours and it was hard to understand how to help him.

More and more we turned to his school and learning disability professionals to help us with P63. It felt in the lead-up to his detention that things just went from worse to worse. It all happened so quickly and it is hard to remember all the details but it was a really difficult time. We trusted the doctor and social workers when they said P63 had to be detained to Muckamore for treatment and it was the safest place for him. There was simply no question of arguing with that, we just had to go with it.

In December 1992 P63 was detained for the first time for what we thought was going to be a few weeks. I never had any idea it would have gone on for over 26 years."

There's then a heading "Muckamore".

1 "One week became six and six weeks became six months
2 and before we knew it P63 had been in Muckamore for a
3 year. P63 was put in a locked ward called Movilla A
4 and it was a massive change and shock for Myself and
5 P63's father because P63 went from being a lad who 10:39
6 loved running and moving about to being in a locked
7 ward and sleeping in a dormitory with lots of other
8 boys and men, men much older than him. He was very
9 upset and could not understand in these first years why
10 he had to stay there and not come home with us. It 10:40
11 even took us a good while before we realised that P63
12 was on a mixed ward. I say mixed because it had males
13 on it who were sex offenders, many of them put there by
14 the courts, so P63 was mixed in with all of them.
15 These male patients later went to Six Mile Ward but at 10:40
16 that time they were just mixed with all the lads
17 together. We found this out by people talking and
18 eventually some of the staff quietly told us. It just
19 all felt wrong for our son, who was only 17 at that
20 time, to now be living in a dormitory like that. 10:40
21
22 Movilla A was not a nice place. It had bars on the
23 windows and there was no privacy for the lads inside.
24 This sent P63 crazy. He just got worse and worse in
25 terms of his mental health and behaviours. He was so 10:40
26 frustrated but this just seemed to make the reasons for
27 why he had to be kept detained all the more unarguable.
28 The more frustrated he got with the situation the more
29 we were told he could not be let out. How does a

1 family win in this situation and how is that fair?
2 There was nothing we could do.
3
4 Institutionalised. This was the word that P63's father
5 used frequently at our meetings with Muckamore's staff. 10:41
6 In those early years P63's father in particular
7 constantly raised the question of P63's discharge but
8 we were always told by the staff that there was just no
9 way P63 could be released and that he needed to stay in
10 Muckamore. The reason was that there was nowhere in 10:41
11 the community that could deal with P 63's care. Any
12 options to move him on to never worked out.
13
14 P63's father and myself raised the concerns about P63
15 becoming more institutionalised, as we seen it, and 10:42
16 losing the skills that he had had when he was at home,
17 such as brushing his teeth, dressing and washing with
18 help, helping in the kitchen, looking after himself.
19 You will see that from some of the letters I kept..."
20 10:42
21 CHAIRMAN: One second. There are transcript problems
22 with freezing, apparently it is coming back again. Is
23 anyone else having? No, right, I'm the only one.
24 Sorry to interrupt.
25 MR. MCEVOY: "You will see that from some of the 10:42
26 letters I kept. With P63 losing all of these skills
27 and every time we raised it we were told that there was
28 simply nowhere for P63 to go at this point. This was
29 just part of life at a big hospital.

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Before P63 went into Muckamore he could Count 1 to 10. He knew all his colours really well. He could even write his name, although he would get some of the letters back to front. In Muckamore P63 was usually on a one to one and sometimes a two to one. We often raised why, can't the supervising staff do something with him like teach him how to look after himself or do a puzzle or some reading or even some sports but we were always told the same line, Muckamore is not a school, it's a hospital. I never understood this. Why could the staff who were there with him anyway not just work with him to help him learn and keep the skills he had before he was detained, or even just keep him stimulated in some way instead of him being so bored and then him getting into bother.

Long before P63 came out of Muckamore he lost all these skills. I remember when he used to come on a dinner visit to visit his sister's house, he couldn't even manage the stairs and he was terrified of going up to use the toilet, which was upstairs. It used to take ages to coax him step by step and same even when he eventually left Muckamore in 2018 and would be walked around to home, the community placement was in the next street from our home. He used to be desperate at going up and down pavement steps, getting so nervous. Even stepping down a footpath he would be scared stiff. All the skill P63 had in himself as a child and young lad

1 was just gone. He lost everything. He just hadn't a
2 clue. Yet when we used to live around..."

3
4 Then it gives an address.

5
6 "... in our old house which had an upstairs, P63 could
7 manage the stairs no problem, but that was before
8 Muckamore.

9
10 P63 really did become terribly institutionalised over
11 his time in Muckamore and very dependent on others for
12 all sorts of things. I think P63's father and I became
13 institutionalised too and we fell into the sort of
14 acceptance that this was just the way it had to be. If
15 a boy was born with a learning disability like P63
16 he would just have to live in a hospital and we would
17 have to accept that and be grateful for it. As the
18 saying went, we need Muckamore.

19
20 I know as the years went on it became harder to imagine
21 him living outside the hospital. By the time P63's
22 discharge was coming through, when he was 43 years old,
23 I was actually terrified of how he would cope outside
24 of Muckamore. It is a very disabling thing to be in
25 long-term care for the person as well as the family.
26 Of course that was before I found out that he had been
27 picked up on CCTV. I think if I had known that sooner
28 I would have tried harder to get him out. I feel
29 I have let my son down as a mother."

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The next heading is "Bedroom".

"Back in the very early years as it became more likely that P63 wasn't getting out soon, P63's father and I asked for P63 to have his own room or some kind of space for some privacy. Because it was clear to us that from the ongoing issues P63 was having by living in a shared, locked space, he was struggling big time. Eventually the staff in Movilla A cleared out an old broom cupboard and said that P63 could have it for his bedroom but that we had to furnish it, so P63's father and I organised furnishing it. We organised a wardrobe, a bedside locker and a TV. The staff put up some timber with prongs underneath as a shelf. The staff organised a bed and mattress from the stores. It wasn't great but it did have a window, although it still had bars on it. The window looked out on to the yard. The yard was used as a place to put the lads when they were misbehaving. It was a seclusion yard. The room door had a small viewing pane in it so staff could keep an eye on P63 when he was in his room and the door could be locked from the outside but he couldn't get out from the inside.

10:45

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My memory about the mattress: When P63 became a patient in Muckamore he started to be incontinent of urine at night at times but he did not like wearing pads. This was also a big change for P63 and us

1 because before Muckamore P63 had never wet the bed or
2 been incontinent or anything like that. In fact P63
3 was always very fussy and particular about being clean.
4 I recall one time I went up to visit P63. This was
5 still Movilla A. He had been in his own bedroom for 10:47
6 some time at this stage and I sat down on his bed.
7 Well, I nearly died because I got soaked through with
8 urine. I pulled everything off the bed to find that
9 the mattress was absolutely soaking wet with urine and
10 because it was so sodden it must have been like that 10:47
11 for some time. I went absolutely mad and said
12 I wouldn't go home until they moved and replaced P63's
13 mattress. I watched as the staff pulled the mattress
14 off the bed and dragged it out into the yard where it
15 got dumped, the same yard where P63 and other patients 10:48
16 would be secluded to. I watched the urine drip from
17 the mattress on to the floor all the way out through
18 the ward. The staff just said they didn't know how it
19 got like that, there must have been a hole in the
20 mattress and it just filled up over time and they 10:48
21 denied they knew it had been like that. I just could
22 not accept that because staff must have seen it was
23 like that when they made the beds in the mornings.
24 I was so cross and I did not leave until they got a new
25 mattress from the stores and made it up for him again. 10:48
26 I just didn't budge. I sat with there with a wet
27 backside but I didn't care. I thought if I had not sat
28 down on the bed I would not have known that that was
29 what P63 was sleeping on.

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I rang his consultant about this and I was told that due to P63's medication it was probably making him sleep through and he was wetting the bed because he couldn't get himself up during the night to relieve himself. The consultant told us it was in P63's care plan for the staff to go in and get him up and take it to the toilet during the night but in terms of the medication he was on there was nothing could be done because the tablets were so needed. But it was also part of the plan that even when P63 wet the bed during the night the staff were supposed to change the sheets for him and help him. That was supposed to happen and we were told this. The thing ended up brushed to the side as one of those things. There was no apology from the staff, not to me or to P63. I just didn't think that was right.

Seclusion.

There were two ways in which P63 was secluded on a regular basis. One was in his bedroom and one was in the yard. The yard was an open but fenced-off area and at the end of the building. To describe the yard, well the yard was generally filthy and littered with old mattresses and bits of ward furniture. It had weeds growing in it. It was not looked after. Patients would be put outside in the yard to cool off if they misbehaved or the staff said they needed it and, say, the padded room was already in use by a patient. You

1 see Movilla A had a secluded room also which was all
2 padded green in colour. By the way, when you went up
3 to the ward you could see on the CCTV screen on the
4 nurse office that a patient would often already be
5 locked in and there was seldom ever anyone keeping an 10:50
6 eye on them from the office at the screen. You see
7 someone supervising the locked up person was supposed
8 to be the case. Say for example the person in the
9 seclusion room took a seizure or whatnot but you would
10 see the screen as you passed the office and no one 10:50
11 would be there keeping watch.

12
13 To get back to the yard, the door to the yard would be
14 locked at all times by staff so you are either locked
15 in or locked out, but there was no in between going in 10:50
16 or out if you pleased. P63 really looked forward to
17 our visits because at least in the nice weather we
18 would sometimes take him for a picnic with a big flask
19 of tea in the grounds of Muckamore and go for a walk.
20 P63 really loved his tea and going out. 10:51

21
22 It bothered P63's father greatly that it was a normal
23 part of life in Muckamore that no matter the weather
24 patients were put outside into the yard for seclusions.
25 P63's father wrote a letter to the ward about it. The 10:51
26 other problem with it was there was no staff outside
27 with the patients who were left to their own devices.
28 Patients were put outside where the likes of that
29 mattress that was sodden with P63's urine lay and it

1 didn't matter if they lay on it or did whatever, the
2 staff just let them get on with it. We visited two to
3 three times per week and staff always wanted to know
4 what time I was going up at so I would get rang every
5 second, third day by the ward staff to check. Although 10:51
6 I always gave the times if I had plans to visit, this
7 always bugged me that they rang to ask.

8
9 When you would go up you generally had to wait to be
10 let in and then you would be directed to the visitors 10:52
11 room first. Usually staff would say there were lads
12 getting or changed or washed or there was something
13 happening and we would have to wait until it was safe
14 to be brought down onto the ward. But on the rare
15 occasions sometimes we could just also get in as one or 10:52
16 maybe more of the doors were not locked, that happened
17 rarely.

18
19 When I visited it was usual for me to find out that P63
20 had been secluded that day or the day before and I'd 10:52
21 find this out from the other patients. So although
22 I don't know for sure how often he was secluded, I know
23 that it was frequent and that it was not normal for the
24 staff to phone me and tell me in those days. So, as
25 I say, I would usually find out first from some of the 10:52
26 other lads who would tell me if P63 was secluded. They
27 would be meeting me at the door because I always had
28 sweets in my pockets for them and they would say 'P63's
29 was a bad boy today, P63's mother, he was put outside'.

1 P63 would not be able to tell me himself but I would
2 normally go to the office to ask what happened with the
3 seclusion and I would normally be told that P63 had
4 been hitting out or misbehaving in some way. We were
5 always told the same thing, which was that he had been 10:53
6 aggressive or he refused staff direction.

7
8 But unlike later years when staff would phone me, for
9 example from Cranfield 2 to tell me if P63 hit another
10 patient or if he was hit by another patient, in those 10:53
11 days I was not rang to be told about incidents or about
12 seclusions. If you approached P63 right he would have
13 calmed down and no seclusion would be needed. Some of
14 the staff could do it, but most couldn't.

15 10:53
16 There was one occasion when P63's sister went to visit
17 P63 with her children with her. She was able to get in
18 to Moviila A. When she went to P63's room she found he
19 was locked in and he was completely naked. There was
20 no staff outside the door and when P63's sister found a 10:53
21 staff member to explain what was happening she was told
22 that P63 refused to get dressed that morning and that
23 was his choice. That made no sense, especially as P63
24 loved his clothes. Staff used to joke that P63 was the
25 best dressed in the whole hospital, including the 10:54
26 staff, so it didn't make sense that he didn't want to
27 get dressed, but this explanation, like all
28 explanations, was unsatisfactory.
29

1 P63's father wrote to the ward about the seclusions to
2 the yard and asked the staff to reconsider using it the
3 way they did. It didn't change anything. I should
4 mention that P63's father had a typewriter and was very
5 good at writing letters. He would use the carbon paper 10:54
6 so that we could keep the copy. Back in those days
7 I actually kept a journal and some diaries too and
8 I would keep a note of many things to do with P63 and
9 the ward. I used to have a lot of paperwork but some
10 time ago I threw a lot of it away. I regret this now. 10:55
11 I had no clue that one day someone would want to know
12 about what happened to the patients in Muckamore.
13 I have put what paperwork I did keep at the back of
14 this."

15
16 The next heading is "injuries". 10:55

17
18 "More than once P63's father also wrote to the hospital
19 about the injuries we could see on P63. P63's father
20 once made the point that if P63's father and I cared 10:55
21 for P63 in the same way the ward did, that social
22 services would not be too long from our door to take
23 P63 off us. But, again, it didn't change anything.

24
25 A memory that stands out in my head was the day 10:55
26 I discovered a bite mark on P63's thigh. This was
27 during the first year or two in Muckamore so P63 was 18
28 or 19 at the time. He was on one of his home visits
29 and I found this when I was helping him get his clothes

1 on in the bathroom. You could see it plain as day, a
2 full set of teeth marks. It was on his upper inner
3 right thigh. It was like a print that was so deep and
4 obvious. I asked P63 of course but all P63 kept
5 saying, over and over was "better now, better now". 10:56
6 I called P63's father in to look at it too, it was a
7 shock. When we got back to Muckamore I went to the
8 office and I kicked up merry hell. I was told they
9 would look into it and speak to the staff member who
10 had helped P63 get dressed that morning, but that 10:56
11 person wasn't about at the time so they said they would
12 phone me. So the next day I rang and rang to get
13 someone to give me an answer. I can't remember if
14 we put this complaint into writing or not but
15 we complained bitterly about it. My mind was thinking 10:56
16 of the fact P63 was in a mixed ward with other men who
17 had abused people sexually, but saying that didn't get
18 me anywhere. Eventually we were told that the staff
19 member did not see the injury when P63 was getting
20 dressed and they had no way of knowing how the bite 10:57
21 mark got there. That was really hard to hear because
22 P63 was on a one-to-one, and it never made sense
23 they didn't know how it happened or couldn't work out
24 possibilities. Eventually P63's father said to me to
25 just leave it because if we shouted any more about it 10:57
26 it might make it worse for P63, so we just left it.
27 This was one of the things that happened to my P63 that
28 were never, ever resolved.
29

1 I recall another occasion I visited and P63, he was
2 still in Movilla A at this stage, and he had a cut on
3 his head and a black eye. It is possible that P63's
4 father wrote a letter about this also but I asked the
5 staff of course what happened and staff said on that 10:57
6 occasion P63 had walked into a door. It was just the
7 most unbelievable answer to get and, on top of that,
8 I never ever once saw P63 walk into a door. I saw him
9 move at speed through plenty of doors but I never saw
10 him walk into one. Myself and P63's father complained 10:58
11 again. I can't remember if this was in writing or just
12 in person but you never got anywhere with complaining.
13 There was just no way to get satisfaction or proper
14 reassurance.

15
16 P63 always had bruises or cut knees. The cut knees
17 made sense to a degree because he could have fallen,
18 but the bruises usually didn't. The skin on his legs
19 was always quite bad too, red and sort of blistered.
20 I wondered if it was the urine on the bed that kept his 10:58
21 legs like that."

22
23 The next heading is "Staff".

24
25 "There were so many faces over the years and I can't 10:58
26 remember them all. But in Movilla A there were two
27 staff that P63 most especially hated to see coming on
28 shift, one called H349 the other H350. P63 was afraid
29 of both of them, that is the only way I can put it.

1 One time he managed to communicate to me and P63's
2 father that they stole his watches in the middle of the
3 night. He was able to say "3:00 a.m., 3:00 a.m." and
4 it was hard to know what this meant to P63. We don't
5 know how true that was about stealing watches as there 10:59
6 was no resolution to any time I raised about lost
7 property. But we were always buying and bringing up
8 watches for P63 because he liked to wear one but you
9 could not keep a watch in Muckamore, they constantly
10 went missing. The same as any good item you brought up 10:59
11 such as jackets or good clothes always went missing,
12 nothing could be kept. There was never an explanation
13 for this except the patient must have lost it and the
14 Hospital was not responsible for lost items.

15
16 I remember I used to buy P63 sweaters from McCall's and
17 they were pricey but they always disappeared. Or the
18 motorbike club would give us, P63's father and I, caps
19 and t-shirts for the lads who would be delighted with
20 this but, again, they went astray. Nothing good could 11:00
21 be kept by a patient in Muckamore.

22
23 The names I remember from them days of staff working in
24 the wards and come to my mind now are H351 and H77.
25 I remember H14 and H271, H352 and H12. There was H353 11:00
26 and H354, H353 was a nice man. There was an H355. He
27 was okay but aloof and didn't mix well with patients or
28 relatives. I remember a H52. I remember one time
29 going up to the ward and I found H52 sitting drinking

1 coffee with my P63 in the seclusion room. I never knew
2 what that was about. Lots of these people went on into
3 management positions in later years and some left but
4 I remember them as ward staff at the beginning. They
5 all had their good days and bad days with the patients 11:01
6 but everyone knew Muckamore inside and out. I remember
7 a staff nurse called H209 asking if he could use P63 as
8 part of some qualification he was going for. Of course
9 I said okay and I believe H209 did well so he was
10 promoted. I remember a sister, H214, she was 11:01
11 absolutely useless and she was only interested in her
12 hair. She was horrible to the patients and I genuinely
13 believe she just didn't like any of them but they
14 weren't all like that. I remember a nursing assistant
15 called H356. He had a great relationship with P63 and 11:01
16 P63 loved seeing him come on shift. H356 would
17 sometimes take P63 for his lunch to the golf club and
18 he would tell me that everyone there would always say
19 what great manners my P63 had.

20
21 I recall H356 had an uncle called H357 who also worked
22 with P63. P63 got on great with him too. H357 knew
23 P63 so well that he nearly knew P63's next move before
24 P63 did, and P63 just adored him. H357 would have
25 walked P63 all day in the grounds if he could and when 11:02
26 he was on P63 just loved any chance to get out.

27
28 P63 learned to swear great in Muckamore. He learned by
29 repetition and the staff were unbelievable swearers so

1 it was only natural P63 would copy them. In my
2 opinion, I always thought the thing with Muckamore
3 staff was they were all too related to each in some way
4 or closely connected to each other inside and outside
5 the Hospital, either through marriage or like brothers, 11:02
6 sisters, mothers, fathers or close family friends.
7 They had all been at each other's weddings or great
8 pals in some way or other. Now this could have good
9 points but mostly I never thought it a good thing in a
10 place like Muckamore. It was like a closed shop and I 11:03
11 would wonder that surely staff would all just cover for
12 each other if anything wrong was ever said or done.
13 None of them challenged each other, it was just the way
14 it was and I think that was a big part of the problem
15 in Muckamore. 11:03

16
17 I can recall another memory of the trip to Larne. This
18 was an away night for the lads on the ward and it was
19 arranged by the staff. The staff split them in half
20 and took one group away for an overnight and then there 11:03
21 was a barbecue for the relatives in the evening and
22 then the following night they did the same for the
23 other half of the lads and their relatives. I can't
24 recall the name of the place but it was a place close
25 to Larne. So there P63's father and I were at the 11:03
26 barbecue with P63 and the other staff and patients.
27 I recall one of the nurses arrived up to join the
28 barbecue. She was on night duty and I know this
29 because she kept telling us she was there for the night

1 shift and that she loved her job. Her name was H358,
2 I can't recall her surname but she was quite drunk.
3 You could smell the drink off her and she sat close to
4 us and kept on drinking. She was talking very loud.
5 Anyhow, she complained on and on about the cold and 11:04
6 after a time I said to her would she like a loan of
7 P63's father's jacket. P63's father's new jacket was
8 in the car and he hadn't even worn it yet. So she
9 thanked me and I got her P63's father's jacket which
10 she wore and before we left that evening she said 11:04
11 she would be sure to get it back to me again and I just
12 assumed that would be the case when I next visited P63
13 at the ward. Anyhow, each time I visited the ward
14 after that, the jacket wasn't left for me by the staff
15 nurse and then when I would say to her about it she 11:04
16 would just say she forgot it and would bring it the
17 next time. This went on a few times. In the end
18 I just reported it to the nurse in charge because it
19 was P63's father's jacket, and it was a brand new one
20 after all. The nurse in charge was called H52. He 11:04
21 said 'leave it with me, I'll sort it out'. It was
22 never sorted out and a short time after that the staff
23 nurse was moved to another ward so I saw her less
24 often. Any time I did see her though, at the Cosy
25 Corner, for example, she just turned her back on me and 11:05
26 avoided me. P63's father said in the end just leave
27 it, the jacket wasn't worth bothering about, so that
28 was that."
29

1 The next heading is "mixed ward at Killlead, male and
2 female".

3
4 "When Movilla A closed down and the new build just
5 opened, I think this was maybe in the early 2000s, 11:05
6 I can't just remember the year, it was supposed to be
7 one end male and the other end female but someone
8 decided to mix them. That was an absolute disaster.
9 Whoever thought that would be a good idea was crazy.

10 They took the girls and women from their ward and the 11:05
11 boys, men, all ages, from Movilla A and they mixed the
12 two groups in one ward, Killlead. There was absolutely
13 no proper supervision by the staff and the lads and
14 girls could clearly not handle it. Every time you went
15 up you would see lads walking about with their trousers 11:06
16 down around their ankles or sometimes young girls
17 having their periods and it all just there to be seen.

18 There was no decency for any of them and staff letting
19 them all do whatever they wanted. Sometimes staff even
20 laughing about the carry on. It was an absolute 11:06

21 disgrace. It is one of the worst times in my memories
22 when this happened and I'm sure that patients suffered
23 by the hands of each other, and not minded properly by
24 the staff. The staff just did not seem to care about
25 it. I believe a lot of parents, us included, 11:06
26 complained about this. They had to end the mixed ward,
27 thank God. It was proven to be a disaster so they
28 separated them again. The males went to Cranfield 2
29 and all the females kept the Killlead."

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The next heading is "new building, new wards".

"Aside from the disaster that was Killlead and the mixed experiment, when the new builds went up and there was a great feeling of a new start for everyone as they looked to be so modern in comparison to the old Movilla wards. There was a feeling that given the new structure of the new Cranfield wards that a lot of the problems would disappear as patients mostly now had their own bedrooms. We supported the ward staff of Cranfield 2. Myself and P 63's father bought the snooker table and gave it to the ward for P63 and the other patients to use. P63 loved playing snooker and we were glad to give him something to do. It was new buildings but all the same faces and a lot of the way Muckamore was didn't really change all that much."

There's then a section of the statement, Panel members, which deals with matters touching on the -- which are at the heart of the Memorandum of Understanding, essentially.

CHAIRMAN: So you are not going to read those?

MR. MCEVOY: I am not going to read --

CHAIRMAN: It is for the Panel to read those?

MR. MCEVOY: It is for the Panel to read those. But I'm going to take it up at the penultimate paragraph on that page, which is 02729.

1 "I am haunted now with the thought that if CCTV was
2 only recorded over a few months what was going on in
3 all those years P63 was there before they had proper
4 CCTV. What happened in Movilla A or Killlead or all
5 those other years in Cranfield? I cannot get it out of 11:08
6 my head that I knew so many of those staff. I play
7 things over in my head. The staff would tell me that
8 they used to fight over who would be taking P63 home
9 for his visit because they always got a good dinner at
10 my table. How can it be that some of those people 11:08
11 might have abused my P63? I can't get my head around
12 it. When I think of all that P63 lost by being there
13 so long. He was like an old man when he got out, sort
14 of hunched over and shuffling his feet when he walked.
15 Really and truly it is as if his life was stolen from 11:08
16 him. I should have seen more and done more. I should
17 have known what to do. P63 died in The Mater Hospital
18 on 19th February 2021. It was his 46th birthday.
19 He didn't know about the investigation. No one ever
20 spoke to him to see if there was anything he could 11:09
21 tell. I don't think he could have told anyway.

22
23 How I like to remember P63: P63 had a really deep
24 laugh and was full of devilment. When he got released
25 from Muckamore, when he was 43 years old, he moved into 11:09
26 another facility which was a supported living place.
27 Dr. H49 actually came to my house and she told me that
28 another facility would be a good choice for P63. She
29 was very good. This was a big adjustment for P63 and

1 for us but P63 got somewhat better and eventually there
2 was something about him more like his old self,
3 although physically he was never ever the same and he
4 still needed a lot of help with his behaviours. But
5 P63 would want to join in on conversations and 11:10
6 I thought that was a great sign for him after he got
7 out a while and some of the staff were so brilliant
8 with him. One of the staff at the other facility who
9 was really great with P63 was a worker who is named,
10 but P63 called her..." 11:10

11
12 And there is a nickname.

13
14 "...for some reason. This person or staff member wrote
15 a beautiful and funny poem about P63 after he died and 11:10
16 it was read out during his funeral service. We were
17 all laughing and crying at the same time."

18
19 P63's mother has then included a heading entitled "what
20 I want from the public Inquiry". It is not long and 11:10
21 I'm going to read it in in conclusion.

22
23 "I want to find out and tell me why P63 had to be kept
24 in hospital for so long. There surely had to have been
25 something better for him. Nearly 27 years is not 11:10
26 right. He didn't commit a crime. He was just a lad
27 with a learning disability. I want the Inquiry to get
28 to the bottom of this. How is it possible that when
29 Muckamore knew years ago that there was abuse why did

1 they let it go on? Why were things like the bite marks
2 and black eyes and seclusions and abuse of P63 and
3 other patients pushed under the carpet? I want someone
4 to get to the bottom of that and tell me for my sake
5 and P63's father's and most of all for P63." 11:11

6
7 Then the final paragraph just touches on I suppose an
8 issue which may touch on the Memorandum of
9 Understanding. But finally then P63's mother says:

10 11:11
11 "My biggest regret is that I wish I hadn't been so
12 naive about it all because I will always carry this
13 guilt until the day I die. I feel I failed him as a
14 mother. I want the Public Inquiry to do its best to
15 get to the truth of Muckamore. Thank you." 11:11

16
17 Then there's a signature and a date of 20th
18 January 2022.

19 CHAIRMAN: There are quite a few exhibits I think have
20 been referred to. You have been going for about an 11:12
21 hour and a quarter, would you like a break?

22 MR. MCEVOY: I think that might be to everyone's
23 benefit, a short comfort break might come as a relief.

24 CHAIRMAN: I know what it is like. Especially when you
25 are concentrating on not reading something out, it is 11:12
26 hard work. We'll take 15 minutes and then you'll take
27 us through the exhibits.

28 MR. MCEVOY: Thank you, sir.

29 CHAIRMAN: Thank you very much indeed.

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ADJOURNMENT

CHAIRMAN: Right, so the exhibits.

MR. MCEVOY: Thank you, Sir. Thank you, Panel members. 11:31

There are, as the Inquiry will be aware and as core participants will be aware, a fairly substantial number of exhibits. I'm going to direct you to a selection of them, as I indicated at the outset, and take you to specific pieces of largely correspondence but some other materials. I should just touch on, though, by way of background what is in the initial stages, the first number of items that are included, just to sort of set the scene. P63's mother gave us, just for example, correspondence relating to his primary education with various authorities, educational authorities and trusts and so on. There are extracts from school reports and so on giving an idea of his progress and abilities and so on. 11:32

CHAIRMAN: There were some exhibits that didn't show up particularly well. 11:32

MR. MCEVOY: They are not, they have not copied in or scanned in particularly well for whatever reason.

CHAIRMAN: we'll leave it to you. If they are important they can be printed up. 11:32

MR. MCEVOY: I don't think that they are, in my assessment, but the Inquiry might well come to a different view, but they don't appear to be as germane

1 as some other matters, some other exhibits.

2
3 As I was indicating there are some school reports
4 giving an indication to his mum and dad of his progress
5 through school and so on. And there's an indication of 11:33
6 his receipt into guardianship. There are essentially
7 cursory sort of copies of his orders and admission for
8 assessment and so on. There is nothing of
9 significance, I think, turning on them other than just
10 to confirm what P63's mother has told us in the body of 11:33
11 her statement. There's nothing controversial, I don't
12 think, about the dates.

13
14 The first exhibit that I wanted to turn up for the
15 Inquiry's attention is a letter which appears at 11:33
16 027-52. It is a letter which P63's father addressed to
17 Mr. McCullough at the Resource Centre in Dunmurray and
18 it is dated 17th August 1994. This touches on an
19 admission to another facility, Kimberley House. I will
20 just read out, if it is in order, I'll read out the 11:34
21 letter in its entirety because it draws on some of the
22 themes that were specifically mentioned in terms of the
23 headings that P63's mother told us about.

24
25 "Dear Robert, I take the liberty to write to you with 11:34
26 reference to P63's possible admission to Kimberley
27 House, Newtownards. My wife and I recently had an
28 interview with Mr. Aaron Sloane, a project manager of
29 Challenge, when she [sic] explained the aims and

1 objectives of the facility they hope to open. We were
2 very impressed with what she [sic] had to say. As you
3 are aware, we appreciate the care that P63 receives at
4 Muckamore but we feel that the facilities there do not
5 bring out the best in P63 i.e. dormitory accommodation, 11:35
6 activities, social and recreational, appropriate
7 occupational activities - a creation of dependency.

8 Some examples of this:

9 1. Self-care skills retention. P63 can no longer shave
10 himself. He pays no attention to his teeth, indeed 11:35
11 seems now not to worry about being himself or keeping
12 himself clean.

13 2. Activities of daily living. No opportunity to
14 partake in basic cookery, shopping, basic monetary
15 skills, et cetera, et cetera, as far as we know. 11:35

16 3. Social isolation in relation to the opposite sex to
17 the extent he now finds it difficult to be in mixed
18 company.

19 All of the above we attribute to his becoming
20 institutionalised. In relation to the sometimes 11:36
21 aggressive nature of P63's behaviour, we feel that
22 given the right environment where P63 is constructively
23 occupied, along with the help of medication, these
24 outbursts could be managed. Over the past years P63
25 has been in and out of various institutions, a nomadic 11:36
26 lifestyle, to say the least. He has not had the
27 opportunity for a settled or dignified lifestyle.

28 We feel this lack of continuity is having repercussions
29 on P63's emotional state. This is very evident when he

1 has to return to Muckamore after a visit home. We are
2 aware that the Government White Paper, People First,
3 advocates a move from institutional care to
4 community-based living and we feel this is the way
5 forward for P63. His present lifestyle is severely 11:36
6 restricting him from reaching his potential. However,
7 we feel Kimberley House offers him an opportunity to
8 live as normal a life as possible, bearing in mind his
9 disability. To this end, sir, if you agree that this
10 is the way forward for P63 we would respectfully ask 11:37
11 you to lend your support in having a place allocated to
12 him at Kimberley House.

13
14 Having said all above, my wife and I would like to
15 point out that we are indebted to the staff at 11:37
16 Muckamore and would be the first to agree that they are
17 extremely caring and kind to P63. We are of the
18 opinion that with the amount of patients in their care,
19 the staff are second to none and in no way is anything
20 we have said in this letter is to be taken as criticism 11:37
21 of Muckamore. We are searching for what is best for
22 P63. "

23
24 The first word in the next sentence is a bit illegible
25 but I'll take it up: 11:38
26

27 "I would take this opportunity to thank you and your
28 colleagues for your help, concern and support both to
29 P63 and ourselves. "

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CHAIRMAN: The first word is just the name, I think.

MR. MCEVOY: It is just the name. "Yours faithfully",
P63's father. That's the 17th August 1994.

11:38

The next document I briefly wanted then to draw to your
attention appears at 027-55. This is apparently a
fairly short document, one page, being a decision of
the Review Tribunal dated 15th May 1995. It is a
decision in relation to P63 classifying a mental
disorder at the time of application to reference simply
as severe mental impairment. That's under part 1.
Then under part 2 there's a pro forma text which is:

11:38

"The Mental Health Review Tribunal has considered the
reference made to it in respect of the person named
above and hereby directs that..."

11:39

The text entered in by the Tribunal is simply as
follows:

11:39

"He should continue to be detained under the Mental
Health Order NI 1986."

The Inquiry will note then there are about a dozen or
so lines that are provided on the form after that which
are blank and they offer to continue overleaf, if
necessary, there is no other text. It is signed and
dated the 15th May 1995.

11:39

1
2 Turning then to 027-57. This is a letter from P63's
3 father addressed to H352, for the attention of H352, at
4 ward Movilla A, Muckamore Abbey Hospital, Antrim. It
5 is dated 28th February 1996. 11:40

6
7 "Dear H352, it is with regret that my wife and I find
8 it necessary to register our growing concern as to the
9 care our handicapped son, P63, is experiencing in
10 Muckamore Abbey Hospital. It is no secret that P63's 11:40
11 mental health is making little or no progress and that
12 in itself leaves our son vulnerable to many other kinds
13 of problems. You are aware of the physical injuries
14 that P63 has been subjected to over the past few weeks,
15 for example four black eyes, five separate bites, 11:40
16 skinned knuckles and various lacerations to his legs
17 and the physical pain that goes with this coupled with
18 his weight loss leaves my wife and I wondering as to
19 the suitability of Muckamore Abbey Hospital to properly
20 care for our son. We have in the past voiced our 11:40
21 concern when told P63 was out in the yard for his own
22 safety. It is noticeable by us that since we last
23 emphasised this concern that we have only once been
24 told that P63 had been expelled to the courtyard. One
25 of our difficulties with the seclusion in the yard is 11:41
26 the cold at this time of year. Surely there are other
27 ways in which P63 can be protected..."

28
29 And that word is underlined.

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"We wonder if P63 was receiving this kind of treatment at home under our care how long social services would permit him to remain at Home. Both my wife and I have, on many occasions, expressed our gratitude and indeed praise to you and your staff for the way in which you and your team have been looking after P63. However whilst we have no reason to change our opinion on the limited staff employed on Movilla A, it becomes increasingly apparent to us that the ward is grossly understaffed and that something should be done as a matter of urgency, both on the staffing levels and the mix of patients. We would not presume to dictate or to try to advise on what needs doing but surely it is obvious to all that the present situation cannot be tolerated.

11:41
11:41
11:42

P63's mother and I fully realise that there has to be a place for all handicapped people but, frankly, our first and main concern is for P63.

11:42

We would respectfully request that a copy of this letter be forwarded to any person or persons you deem to be able to assist in P63's wellbeing. We hold ourselves ready to attend any meeting. It is fair to advise you that I have reported my concerns to Mr. Campbell Killick, P63's social worker. A further difficulty has arisen with regard to P63's home visits as Mr. Killick has informed us that if we are to obtain

11:42

1 assistance by way of personnel when returning P63 to
2 hospital, a cost of £15 will be incurred and he,
3 Mr. Killick, is not sure where this money can be found.
4 We await your comments and urgent advice, yours
5 faithfully."

11:43

6
7 Then P63's father's signature and just an indication
8 that the letter has been copied to Mr. Killick.

9
10 The next exhibit I propose to read in appears at
11 027-62. This, again, is a letter from P63's father.
12 This letter is dated the 16th April 1998. It is
13 addressed to Dr. H90, consultant psychiatrist,
14 Muckamore Abbey Hospital.

11:43

15
16 "Dear Dr. H90, following our recent meeting, P63's
17 mother and I would like to clarify some of our concerns
18 relating to P63's care. P63's disabilities and health
19 problems prevent him meeting his own needs in the way
20 the majority of patients do. We therefore feel that it
21 is essential that Muckamore takes an active role in
22 assessing P63's needs and responding sensitively to
23 them. P63's mother and I believe that P63's needs
24 include safety, an environment where he cannot harm
25 himself or be harmed by others. We feel that it is
26 unacceptable that vulnerable patients be accommodated
27 on the same ward as convicted offenders who might seek
28 to exploit them. You are aware that P63 was recently
29 assaulted by another patient and this has heightened

11:43

11:44

11:44

1 our concerns about this issue. P63 has had a number of
2 other injuries in the past.

3
4 Privacy: Like other men of his age, P63 requires
5 personal space of his own that reflects his individual 11:44
6 interests. The dormitory setting may be acceptable for
7 short stay patients but it is not satisfactory for P63
8 who has lived there for six years and will be there for
9 some time to come. The current system of laundering
10 and storing clothes has frequently resulted in items 11:45
11 being lost or damaged. We have provided P63 with
12 sufficient clothing but it seems staff rarely have
13 these items to hand. As far as we are aware P63 has no
14 personal locker for his belongings and, as a result,
15 some of his possessions have been lost or broken. 11:45
16 Although we would like P63 to have more personal items,
17 it is not appropriate for us to bring them to hospital
18 in the present circumstances. This institutional
19 setting is far from what is generally agreed to be
20 normal and we feel it is having a counterproductive 11:45
21 effect.

22
23 Training: As far back as 1994, P63's mother and
24 I noticed a decline in P63's self-care skills and to
25 our dismay this decline has continued progressively to 11:46
26 date. I have enclosed a social report dated 1993 which
27 illustrates the extent of his deterioration. P63 no
28 longer washes or dresses independently and has lost
29 interest in his appearance and personal hygiene. P63

1 has lost the skills in basic cooking, money
2 recognition, et cetera. His eating skills, in
3 particular, have deteriorated during his hospital stay.
4 P63 was in the past able to eat independently and
5 appropriately with good table manners. He now eats at 11:46
6 a pace and in quantities we feel are unhealthy.
7 We accept that some of this deterioration may be
8 resulting from P 63's health, however we feel he has
9 not been receiving appropriate training and education
10 during his stay in Hospital. When P63 visits home 11:46
11 we attempt to instruct him in basic tasks and he has
12 shown an ability to retain these skills, however, he
13 quickly loses them on returning to hospital. For a
14 period in 1996 P63 was provided with one-to-one staff
15 support. Although this was primarily for reasons of 11:47
16 safety, we observed a significant improvement in P63's
17 presentation, skills and behaviour. We have concluded
18 that the training and support P63 receives is limited
19 by the levels of staffing and that the deterioration in
20 P63's is at least partly a consequence of inappropriate 11:47
21 staffing levels.

22
23 Daycare/occupation: As far as we know P36 does not
24 seem to have the opportunity to participate in the
25 activities of normal community living, i.e. shopping, 11:47
26 basic cooking et cetera. In preparing for a community
27 placement these needs must be assessed and a programme
28 of training and preparation set up to address them.
29

1 Social: P63 has few social outlets outside the daycare
2 setting and those that exist tend to be groups of
3 patients from the ward. He rarely has an opportunity
4 to pursue his interests as an individual. The all male
5 environment of M7A has not required P63 to relate to 11:48
6 female staff or patients and as a result he now finds
7 it difficult to be in mixed company. We feel that
8 these social factors have contributed to P63's
9 difficulties in moving to a community placement. P63
10 Has been accustomed to the hospital environment and he 11:48
11 is unsettled by the significantly different
12 community setting.

13
14 We feel that Muckamore Abbey Hospital must take a more
15 active role in supporting P63 and preparing him for 11:48
16 community placement. The key elements of this should
17 include promotion of P63's privacy and dignity,
18 promotion of safe accommodation, promotion of as normal
19 a lifestyle as possible for P63, prepare P63 for
20 community living, development of self-help and social 11:49
21 skills, introduction to activities of community living.
22 P63's mother and I wish to stress that our concerns do
23 not reflect on any individual staff members but rather
24 on the structures, procedures and practices within the
25 Hospital. We now believe that it is unrealistic to 11:49
26 assume that P63 can move directly from his present
27 situation to a community placement. There is currently
28 no provision within P63's care plan to prepare him for
29 community living.

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To ensure that P63 has a satisfactory quality of life and to promote his opportunity to live in a community setting, minimum standards of care should be agreed. This should include P63 should have his own room with storage for his clothes and belongings. P63 should not be accommodated with convicted offenders or other patients who are likely to injure or exploit him. P63 should have staff support appropriate to social, recreational and care needs. If necessary this should include an element of one-to-one support. P63 should be included in a programme to develop self-help and social skills. We look forward to your views as to how these minimum standards can be achieved. Yours sincerely. "

11:49

11:50

11:50

There is then an acknowledgment of that letter which appears at, a short letter of acknowledgment of that letter which appears at 66 from an administrative services manager on behalf of the Chief Executive of then North and West Belfast Trust. Then moving through to 68, there is a letter 027-68 there is a letter dated 21st April 1999. I will take you to the letter to which this letter is a response in due course because it appears in another location, but if the Inquiry will note it.

11:50

11:51

"Dear P63's parents, thank you for your letter of 9th April 1999. This is quite detailed and covers a number

1 of points which we discussed at our recent meeting. I
2 have forwarded a copy of the letter to the complaints
3 officer who dealt with your previous letter and a much
4 more detailed reply will be sent to you in due course.

11:51

5
6 In your final paragraph you ask how Muckamore Abbey can
7 work with you to ensure that P63's care is appropriate
8 to his needs and of a high quality. You have always
9 been very constructive in your correspondence and I
10 know that it is received in the way you intended and
11 that your concern is that there appears to be little
12 capacity to make the changes suggested. I think it
13 would be helpful to await a formal reply from the
14 Hospital before considering what other action, if any,
15 you may wish to take."

11:51

11:52

16
17 That is signed H90, consultant psychiatrist.

18
19 There is then a further letter from P63's father which
20 appears at 027-70.

11:52

21 CHAIRMAN: It is a matter for you but I think you can
22 probably summarise some of these rather than reading
23 them in full, because we either have or will read them
24 ourselves.

25 MR. MCEVOY: These are fairly detailed letters, I was
26 just about to indicate, but what we have here is just a
27 letter of 22nd June '99, again to Dr. H90 indicating
28 that there's an ongoing course of correspondence with
29 Mr. Black, the then Chief Executive of The Trust, and

11:52

1 articulating the tenor of the response which is that a
2 number of the day-to-day, what are described by H90 as
3 day to day issues are best addressed at a ward level
4 and then setting out just a number of fairly granular
5 possible resolutions. Picking up on the third of those 11:53
6 which is institutionalised behaviour, which is a theme.
7

8 "We are concerned that during a stay in hospital P63
9 has developed a number of inappropriate behaviours that
10 may be detrimental when a community placement is 11:53
11 sought. We feel that agreed staffing levels for P63
12 are such that some time could be set aside to promote
13 appropriate self-help skills. "
14

15 Then just an invitation overleaf: 11:53
16

17 "As you are aware, P63's mother and I are anxious to
18 retain a role in P63's care and welfare. We would be
19 grateful if you could raise the above issues for
20 discussion at ward level. We would also value an 11:53
21 opportunity to participate in the ongoing planning of
22 our son's care. "
23

24 There is then a letter, 027-73. I should say that this
25 letter appears to be a response to a letter of 11:54
26 complaint. We do not have available the -- I have not
27 been able to locate the original letter to which this
28 is a response but, nonetheless, it is perhaps important
29 that I give some idea of the content then into the

1 record. So this is a response, again, from The Trust,
2 Mr. Black, the Then Trust Chief Executive. It is
3 coming inside the Inquiry's terms of reference now
4 because it is dated 17th November 2000, and it is in
5 response to a complaint of 17th October 2000, made to 11:54
6 Sister H214, Movilla A ward concerning bruising to
7 P63's right eye. Mr. Black goes on to say:

8
9 "This complaint was investigated by H359 Senior Nurse
10 Manage at Muckamore. In the completion of her 11:55
11 investigation H359 discussed the injury to P63 with
12 staff on Movilla A and received a report of the
13 incident from the sister."

14
15 The letter goes on to give details about the nature of 11:55
16 P63's supervision, it was constant, gives the times.
17 Goes on to say:

18
19 "On Sunday 15th October 2000, two days before the date
20 of the complaint at 10:00 a.m. it was reported that P63 11:55
21 was displaying difficult behaviour and was being
22 verbally abusive. He was escorted from the day room to
23 the unlocked safety seclusion room where he settled
24 quickly. There was no incidents of physical aggression
25 displayed either by or towards P63. Later that day at 11:55
26 teatime P63 became verbally elated and overturned a
27 plant pot in the day room. He was escorted to the ward
28 recreation room where he settled immediately. On
29 Sunday 15th October 2000 between 9:00 a.m. and

1 8:30 p.m. there were no incidents reported or noticed
2 of physical aggression displayed towards P63, nor were
3 there any other untoward incidents such as falls or
4 trips et cetera. P63 went to bed at 8:30, at this time
5 general observation commenced. There were no accidents 11:56
6 or incidents reported or noticed by the night staff.
7 Said staff first noticed the injury the following
8 morning. When questioned by staff as to how his eye
9 injury occurred P63 was unable to provide any
10 explanation as to the cause. He simply stated "I don't 11:56
11 know". When the bruising to his eye was noticed P63
12 was referred to the medical officer who after examining
13 P63 did not feel any treatment to his eye was
14 required."

15
16 Mr. Black then goes on to say:

17
18 "I can understand your concern and distress at the lack
19 of an explanation as to how this injury occurred to
20 P63's eye. Unfortunately however H359's investigation 11:56
21 has not indicated any cause or evidence as to a
22 possible cause of P63's injury. I am sorry, therefore,
23 that we are unable to offer an explanation as to how
24 the injury occurred. I know that it is not
25 particularly satisfactory from your point of view and 11:57
26 I would assure you that it is certainly not how we
27 would wish things to be. When an injury is sustained
28 by a patient in the overwhelming majority of cases it
29 is observed and an explanation is available.

1 Occasionally an injury will occur which either has not
2 been observed or, even if observed, a connection is not
3 perhaps made between the incident and the subsequent
4 bruising which may only become apparent some time
5 later."

11:57

6
7 Mr. Black then goes on to say if you feel it would be
8 helpful to discuss the matter further, he directs them
9 then to Mr. Donnelly, the Complaints Officer at the
10 Hospital and gives his details. He says then if any
11 further information is required on P63's treatment and
12 care he directs them to the sister H214 or Dr. H90.
13 The letter concludes there.

11:57

14
15 There is then, at page 76, a letter from Mr. Donnelly,
16 by then the Assistant Director of Hospital Services at
17 The Trust's. It is dated the 27th July 2002. It is an
18 acknowledgment of the registration of a facility or
19 wards complaint with a number, a nominal concerning P63
20 at Muckamore. It simply says:

11:57

21
22 "Your complaint will be investigation by The Trust
23 under its complaint procedure."

24
25 with a copy of the complaints leaflet enclosed. The
26 complaint to which that letter is in response does not,
27 unfortunately, appear to have been retained within
28 P63's mother's own exhibits. But that's the response
29 letter.

11:58

11:58

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Then turning to 78, this is concerning then the same complaint. This is a letter of 8 August 2002.

"I refer to your recent complaint about aspects of the care received by your son, P63, whilst admitted to Muckamore Abbey Hospital. I write to advise you that the Trust investigation, near complete, has been delayed. I will be in touch with you in the near future and would apologise for any annoyance caused by the delay." 11:59 11:59

That's signed by an administrative services manager.

At page 82 there commences a longer document which is a multidisciplinary review of nursing. It begins at 82 and goes through until 86. 82 is the cover sheet giving a date of 15th June 2005 relating to P63 at a time when he was in Movilla. It indicates the named nurse, H14, that it follows from the last review which was on 18th August 2004, the next of kin is given as P63's father. 11:59 12:00

It will be seen then at the top of 027-83 that there are six recommendations listed following from that last review, which would have been in August 2004. The recommendations are simply put as follows: 12:00

"To continue with Level 4 observations for 7:30 a.m. to

1 8:30 p.m. to monitor physical medical condition for
2 any deterioration, continue to facilitate regular home
3 visits, continue to foster P63's independence and
4 maintain current skills, continue to monitor any
5 changes in mental health behaviour patterns and to 12:00
6 identify any possible hospital or community placement
7 for the future."

8
9 I don't propose, sir, unless you wish me to, to go into
10 the detail of everything that is identified there. 12:01

11 CHAIRMAN: No. Before you go on, back on page 82,
12 which is the head sheet, the cover page, it indicates
13 who was present. It also indicates that the patient's
14 father was invited but appears not to have attended.

15 MR. MCEVOY: Yes. There's a column of boxes, a small 12:01
16 matrix in the corner which is invited/attended.

17 There's simply one tick in the box to say that the next
18 of kin was invited but no other tick to say -- we don't
19 know whether he attended or not. I suppose the other
20 point to note on this particular document, sir, while 12:01
21 we're on it is that his status at this particular time
22 is voluntary, noted as voluntary.

23
24 Turning back to the substance of the document itself,
25 the first section deals with P63's physical health. It 12:02
26 talks about some physical conditions from which he was
27 suffering and then the medical therapies in relation to
28 those. Also then the monitoring in relation to his
29 weight which at that time was 90 kilos with a BMI of

1 29. It is recorded that there hasn't been any change
2 since last year. Presumably that is since the last
3 review. There's discussion of his nutrition, expresses
4 his likes and dislikes by choosing his meal from the
5 ward menu. Likes going to the Cosy Corner et cetera. 12:02
6 It indicates his abilities around dressing and
7 undressing. It notes he is largely able to complete
8 his own dressing and undressing. Some assistance in
9 relation to buttons and belts and so on, chooses his
10 own clothing for the day. Notes that staff continue to 12:03
11 encourage this independence, that is in relation to
12 dressing and undressing. In terms of personal bathing,
13 it is recorded he prefers to bathe daily, able to carry
14 out his own personal hygiene, staff continue to assist
15 with verbal and physical prompts, full assistance 12:03
16 required with shaving.

17
18 Overleaf then dental matters are addressed, six-monthly
19 checkups. It indicates that P63 is able to carry out
20 oral hygiene himself but requires some assistance from 12:03
21 staff to complete the task thoroughly. No dental
22 problems noted at present. Nothing of significance
23 noted under podiatry. There is some discussion in
24 relation to issues of continence, indicating that some
25 assistance is required from staff and medical 12:03
26 treatments administered in relation to that, there's
27 indication that he continues to suffer from nocturnal
28 urinary incontinence nightly, although no indication of
29 when that began in this document. Nothing is noted of

1 significance under mobility.

2
3 "In terms of safety, P63 continues to be aware of some
4 everyday dangers such as road traffic. However the
5 spontaneity of his behaviours and continuing episodes 12:04
6 of over excitability mean that this awareness is not
7 constant therefore P63 continues to require assistance
8 from staff too continuously maintain a safe
9 environment."

10
11 There is some discussion around his sleeping patterns,
12 not appear to be of significance. Under mental health
13 then:

14
15 "P63 continues to be cared for as a voluntary patient 12:04
16 in Movilla A. On occasion he presents as anxious and
17 easily excited however his general mental state has
18 appeared relatively stable over the last 12 months."

19
20 Communication is dealt with then overleaf, the top of 12:04
21 the next page.

22
23 "Continues to enjoy good expressive and receptive
24 communication skills, able to express his likes and
25 dislikes. Depending on his mental state P63 will often 12:05
26 require staff to repeat statement several times to
27 allow them to become concrete for him. Questions may
28 be repetitive which appear to indicate need for
29 reassurance that events are going to happen, home

1 visits, attending work, et cetera."

2
3 There is some discussion at 11 under the heading of
4 socialisation and relationships.

5
6 "P63 continues to enjoy most social activities within
7 the hospital, including games night, swimming, walking,
8 playing pool and cycling. In terms of interaction with

9 his peers, P63 prefers to interact with members of
10 staff. Although at times he will interact appropriate

11 with his peers these episodes tend to be short in
12 duration and initiated by P63. P63 continues to find

13 it easier to interact with his peers when he can do so
14 one to one or in small groups. P63's family continue

15 to visit regularly, several times a week, and P63's
16 mother continues to phone daily for an update from

17 staff. Home visits care of staff have continued but on
18 a less frequent basis due to P63 increasingly going on

19 home visits care of his family. After consultation
20 with P63's parents it was agreed that staff visits

21 should continue at some level so that P63 will still
22 associate a visit home care of staff as something

23 positive. It has been noted in the nursing care plan
24 that there have been a greater of reported incidents of

25 aggression whilst on home visits since the last review,
26 however it should be remembered that P63 now attends

27 home visits on a much more frequent basis and for the
28 most part these visits remain extremely positive."

29

1 It then goes on to note an incident which took place on
2 3rd April 2005 when due to an aggressive outburst at
3 home P63's parents required the assistance of staff to
4 return P63 to Movilla A.

5
6 "Unfortunately at the time this assistance was
7 unavailable which led to the visit having a negative
8 impact for both P63 and his family. However after a
9 meeting on 20th April 2005 involving P63's father,
10 nurse H12 and H77 a protocol was formulated to avoid a 12:06
11 similar occurrence. It is hoped that P63's parents are
12 reassured this is the case."

13
14 There's then a discussion of P63's participation in
15 daytime activity and recreation, attendance at The 12:07
16 Moyola day care five sessions per week in the
17 afternoons, he appears to look forward to them.

18
19 "It has been noted at ward level recently that P63
20 appears to be tolerating his sessions better and there 12:07
21 have been fewer occasions where he has asked or been
22 required to return early from same."

23
24 "P63 takes a keen special in his appearance and enjoys
25 choosing his clothes. He is able to do this with 12:07
26 appropriately with support."

27
28 There is reference to historical incidents in relation
29 to his conduct towards female staff but it is noted

1 that it hasn't been reported for two years and is not
2 currently a problem. Then at the end there's
3 discussion of his behaviour.
4

5 "P63's problem behaviours remain the same as previous 12:08
6 reviews. Behaviours recorded since the last review
7 included outward aggression towards others, includes
8 hitting, kicking and pushing, throwing objects,
9 destruction of property and shouting. Of these
10 behaviours the nursing care plan shows only one marked 12:08
11 increase in frequency since the last review. This
12 increase is in the area of outward aggression, all
13 other behaviours show no decline. In the period 2003
14 to 2004, 35 incidents of outward aggression were noted.
15 In the period 2004 to 2005, present date, 75 incidents 12:08
16 were noted. However, this should be seen in context to
17 142 recorded incidents in 2001 to 2002 and 104
18 incidents in the 2002 to 2003 period."
19

20 Nothing is noted under what is described as 12:09
21 "spiritual". It is signed H14 on 12th June 2005.
22

23 At 027-88 there's a medical review then in relation to
24 P63 completed on the -- well it is dated 13th June
25 2005. It is completed by a doctor H360 who is an SHO 12:09
26 to Dr. H50. It notes that the last review was
27 August 18th, 2004. It makes reference to the
28 multidisciplinary review which we have just been
29 through. The medical review then says in summary:

1
2 "P63 is a 30-year old man with moderate learning
3 disability, treatment resistant schizophrenia and
4 epilepsy. Remains on constant level 4 observation. In
5 April 2005 P63 became unsettled on home leave. There 12:10
6 were difficulties in arranging transport back to the
7 ward. As a result nurse H12 arranged a meeting with
8 staff and parents and a protocol was drawn up."
9
10 There is reference then to his past medical history of 12:10
11 epilepsy. Then physical examination just makes
12 reference to some ongoing physical health care
13 conditions, routine examinations of his vitals. Then
14 overleaf is just mention of an investigation in
15 relation to levels of lithium and a note of the 12:10
16 medications at that time he was taking, prescribed
17 medications.
18
19 Turning then to 027-91, the inquiry will see a day care
20 services report with The Trust's heading at Muckamore 12:11
21 at the top in relation to P63, again dated 15th June
22 2005, when P63 was in Movilla A. It indicates that his
23 key worker at that time was H361 and the SDCW is H362.
24 I confess I'm not sure what that stands for but no
25 doubt others will be able to clarify that. There is 12:11
26 reference to the dates of his attendance, in other
27 words every afternoon, Monday to Friday. There is
28 discussion of his punctuality and attendance, what's
29 available to him and how he is performing. Discusses

1 how he likes to have a quick chat with staff on arrival
2 to discuss what activities are taking place. It notes
3 that he responds well to a structured timetable. Likes
4 to participate in contract work as his first activity.
5 Allows him to settle into a routine that he enjoys
6 concentrating on completing. Likes to keep busy. Can
7 be distracted. It says overleaf:

12:12

8
9 "He will settle with an explanation with staff
10 reassurance and direction."

12:12

11
12 Then it goes on to indicate the types of activities he
13 likes to do in terms of education or tabletop
14 activities. Completes worksheets and so on and reacts
15 well to encouragement and praise. Enjoys cookery.
16 Indicates some of the things he enjoys making in that
17 class. Similarly for arts and crafts. Notes he
18 doesn't like getting his clothes or hands dirty but has
19 adapted well when given reassurance, et cetera. It
20 talks about how he enjoys participation in a particular
21 art project and seems to look forward to that class
22 each week.

12:12

12:13

23
24 In terms of participation in group music sessions,
25 noted that he was shy and apprehensive when offered to
26 join in with staff and peers and the music therapist,
27 but with persuasion and coaching he has become more and
28 more at ease and it does note his personality shines
29 through during group music. Enjoys singsongs and the

12:13

1 freedom to express his enjoyment by clapping his hands
2 and so on. Overleaf, note C: He enjoys swimming.
3 Does not partake of the computer suite. Does like to
4 go for walks and continues to enjoy his weekly visit to
5 the Cosy Corner. Enjoys meeting people and chatting to 12:13
6 them. Goes to the counter with staff and independently
7 chooses and purchases drinks and snacks, waits for
8 change and receipt which has enhanced his confidence
9 and independence. Notes some other games and
10 activities he likes to enjoy. Likes to enjoy the 12:14
11 outside garden. And then after an indication of some
12 social events he has participated in it says in terms
13 of his concentration:
14
15 "P63 shows good concentration when completing his 12:14
16 contract work when the environment is quiet and he has
17 people around him. Becomes distracted when people
18 enter the room as he likes to know who they are and to
19 be introduced."
20 12:14
21 Overleaf it discusses behaviour in the day care
22 setting. Mostly very polite and friendly to staff and
23 peers. Likes to help staff make the tea break and
24 asking peers what would they would like for their drink
25 and snack. Continue to be a few periods of unsettled 12:14
26 behaviour each month, usually comprising of P63
27 throwing or pushing away his contract work and wanting
28 to go for a walk instead. Escorting staff take him out
29 for a walk and he calms down. Notes this has only

1 required physical intervention once in the day care
2 setting. Gives the date 6th May 2005. Settled quickly
3 and returned to his work. There's also physically
4 aggressive twice and did not require a PI on those
5 occasions.

12:15

6
7 In terms of comments:

8
9 "P63 remains very content with Moyola day care and we
10 feel we are adequately meeting his needs. P63 has
11 coped very well on occasions when the room is noisy or
12 if other patients are being difficult. He has
13 responded well to several staff changes in the past
14 12 months. Day care activities allow P63 to promote
15 his personality, increase positive interactions and
16 social skills. He has coped and adapted well and built
17 up a good rapport with new day care staff. Overall P63
18 portrays himself as a happy, pleasant, likeable young
19 man who is a pleasure to work with at day care."

12:15

12:15

20
21 It states some objectives for him on an ongoing basis
22 to continue to promote -- the promotion of time spent
23 talking about his timetable choice, et cetera,
24 participation in a range of individual and group
25 activities, fairly general. Signed by H361,
26 dated June 14th, 2005.

12:15

12:15

27
28 There's a short document at 96 which is simply an
29 invitation to an outpatient dental appointment.

1 There's no detail in relation to whether that is just a
2 check-up but it does indicate an appointment for
3 assessment for dental treatment.

4 CHAIRMAN: Did you say 96?

5 MR. MCEVOY: 96. 12:16

6 CHAIRMAN: That hasn't been copied for us but we have
7 it on screen.

8 MR. MCEVOY: Nothing turns on it, Sir, simply to say it
9 is an appointment for assessment for dental treatment
10 and it is dated 26th June 2006. That's signed by the 12:16
11 senior dental officer.

12 CHAIRMAN: The next document I have got copied is 182.
13 I have it on screen if you want to refer to it.

14 MR. MCEVOY: The next document I was going to take you
15 to was 100 if you have it. Document 100 is a copy of a 12:17
16 letter to P63's father, it is addressed to
17 Mr. Somerville, the then Director of Learning
18 Disability Services at the Hospital. Dated
19 17th February 2007.

20 CHAIRMAN: We have that on screen. 17th February is 12:17
21 the one you are referring to?

22 MR. MCEVOY: Yes. I can deal with it very briefly. It
23 is a letter to which P63's father was copied on behalf
24 of a number of other -- it's a letter sent on behalf of
25 a number of other relatives and it concerns a 12:18
26 discussion, I think it is the Society of the Parents
27 and Friends of Muckamore. It is a discussion in
28 relation to operational procedures in the hospital and
29 one of the matters of discussion related to the

1 operation of M7A. It simply notes to Mrs Somerville:

2
3 "At least four parents with sons in this ward expressed
4 very strong concerns that there's talk of again
5 increasing numbers there. Until last October the ward 12:18
6 was severely overcrowded but patients and parents had
7 no option but to tolerate the stressful situation over
8 many years. However, on commissioning the new wards
9 numbers were reduced in M7A due to a significant
10 improvement in the ward environment. Noise levels were 12:18
11 greatly reduced and consequently an improvement in
12 behaviour patterns and general demeanour of the
13 patients became immediately obvious. This reduction in
14 numbers coupled with an increase in the level of
15 stimulating activities has resulted in the lads 12:19
16 becoming much more settled. It is felt very strongly
17 that to again inflict change by increasing numbers
18 would badly impact upon the quality of life of these
19 severely disabled and vulnerable people and should not
20 even be considered. We appreciate the pressures on the 12:19
21 Hospital and are grateful for the care afforded to our
22 family members but we must ask that you might possibly
23 seek an alternative solution to this problem. With
24 many thanks for your help."

25
26 That is signed on behalf of the society.

27
28 There's then a response to that letter and, again, it
29 is copied to P63's father can be seen at the top, that

1 appears at 102. The response then, this is the
2 response from Mrs Somerville, dated 13th March 2007.

3
4 "Thank you for your letter following your recent
5 meeting of the Society. I must say I am pleased to 12:19
6 hear that the families have noticed improvements in
7 their relatives in Movilla A. Staff have made similar
8 reports and there appears to be no doubt that the
9 smaller number of patients on the ward is having a
10 positive impact. You will be pleased to hear we are 12:20
11 not considering increasing the numbers in Movilla A
12 again. As you know we have been tasked by the minister
13 to ensure that no patients are in a locked ward who do
14 not require to be in one. We have been exploring a
15 number of options to address this and our current 12:20
16 preference is to crease the numbers in Movilla B. This
17 may mean at certain times a patient from Movilla B
18 might have to be accommodated in Movilla A if a need
19 arises for seclusion or a higher level of security than
20 Movilla B can provide. We would not anticipate, 12:20
21 however that Movilla A numbers would increase by more
22 than one or two people at any time. We have not yet
23 finalised our solution to the locked wards and
24 discussion will take place with families when we do. I
25 welcome the input from the Society and we are taking 12:20
26 your views about Movilla A into account as we explore
27 the best way to address the issue. I trust this will
28 provide reassurance to your members and I thank you for
29 expressing such a clear view about the benefits seen in

1 Movilla A."

2
3 At 027-105 there's a handwritten note prepared by P63's
4 father. It is dated 14th March 2015. I'll read it out
5 as best I can into the record. 12:21

6
7 "On Saturday my wife telephoned the ward to enquire of
8 P63's health. She was told by the nurse who answered
9 that allegedly P63 was involved in some kind of
10 inappropriate behaviour earlier in the day with a 12:21
11 female nurse. This came as a shock to P63's mother and
12 I, bearing in mind that we had our concerns that our
13 son was once again being put into a situation where
14 this type of allegation may be made. On 8th March
15 we attended a meeting with Dr. H49 and other staff 12:21
16 members and P63's situation with female staff was
17 mentioned. Can you tell me why P63 should be put into
18 a situation with junior female staff and into a
19 situation where these allegations might be made? This
20 has happened to P63 before and our worry is that there 12:22
21 is no one who witnessed any wrong by P36 but this
22 allegation will be put on his file and P63 will have to
23 carry this nonsense and suspicions of wrongful
24 behaviour with him. Can you tell us how much
25 experience this nurse has?" 12:22

26
27 we only have one page of the letter.
28
29

1 The next series of exhibits then in the papers deal
2 with matters which are covered by the Memorandum of
3 Understanding. I'm not proposing to open those in
4 great detail but if I can take the Inquiry through to
5 027-127.

12:23

6 CHAIRMAN: which is in landscape.

7 MR. DORAN: It is in landscape. It is described in the
8 body of the statement as a person-centred planning
9 document from a PCP meeting at the Hospital. So the
10 first couple of pages are in landscaped format and it
11 is headlined "unresolved issues" with a list of bullet
12 point questions.

12:23

13
14 "What do we need to do to support P63 when he goes
15 home? Is it important to him to have someone there for
16 support? P63 used to be a very good swimmer and has
17 won competitions but seems to have lost confidence in
18 his swimming. What would it take for P63 to become a
19 more confident swimmer? What works best in letting P63
20 know when his family is coming to visit. How do we
21 help him to understand? Is P63 interested in going for
22 a run? He used to thoroughly enjoy before he came into
23 hospital. If so, how often and what support does he
24 need to do so? How do we best support P63 in crowds?
25 P63 enjoys motorbike and stock car racing, particularly
26 with his dad, but sometimes becomes upset if it becomes
27 too crowded. What does a good night's sleep mean to
28 P63? At home P63 used to thoroughly enjoy cycling. Is
29 it something he still enjoys doing, if so how often and

12:23

12:24

12:24

1 what support does he need to do so? How often does P63
2 want to go to aromatherapy? At present he attends
3 about once per month. Does he want to attend more
4 often? P63 needs to know he can leave a situation if
5 he wants to. How often do we need to check with him if 12:24
6 he wants to leave? How does P63 want us to support him
7 during a seizure, before, during and after?"

8
9 Then refers to 027-129. Then there is a list of what's
10 described at the top as what's working for P63. 12:25

11
12 "P63 sees his family, that is his mum and dad on a
13 weekly basis and his sister, brother and nieces on a
14 fortnightly basis. P63 is usually with staff he knows
15 well and likes and is aware of who will be with him for 12:25
16 the next part of the day. P63 gets out of the ward
17 every day, for example for a walk or to the canteen.
18 He enjoys going to work and has a close relationship
19 with. . . ."

20
21 And names a staff member. 12:25

22
23 "P63 has a member of staff with him from wakening until
24 he goes to bed. He has his own bedroom where he can go
25 to spend time away from the others. His room is also 12:25
26 much more homely than previously and his parents have
27 recently given him new photographs of his family for
28 his room. P63 spends most of his day and evening away
29 from the day room avoiding a lot of his "must not

1 haves". P63 is doing some of the things he likes to do
2 and is interested in on a weekly or daily basis such as
3 running errands, cookery, setting the tables before
4 meals, playing pool, going out for meals, going to
5 aromatherapy, watching TV in his room and listening to 12:26
6 music. P63 generally has a consistent routine in his
7 day and is aware of what is happening next. P63 looks
8 well and regularly receives new clothes which he really
9 likes, fleeces."

10
12:26
11 overleaf then is a list of what is not working for P63.

12
13 "P63 is presently not going on home visits on a regular
14 basis, he used to go once per week for a number of
15 hours. Also visits with his parents are not as 12:26
16 pleasurable as they used to be and they are very
17 confined to the ward. (? Risk in case P63 becomes
18 upset). He is also not going out for drives in the car
19 with his parents. It is generally thought the people
20 P63 spends time with in his day are not aware of how 12:26
21 P63 communicates with others and how he wants us to
22 communicate with him. (See communication chart in the
23 plan). This is thought to be a contributory factor in
24 P63 becoming upset or unsettled. P63 spends his
25 evenings often unoccupied, sometimes bored. 12:27
26 Although P63 spends some of his time doing things he enjoys
27 doing he could have more of a variety of things in his
28 day.

29 Incontinence at night:

1 There is an issue around telling P63 when an event he
2 is looking forward to is happening or when his family
3 are coming to visit. P63 has difficulty understanding
4 the concept of time and therefore becomes anxious
5 around when these things are actually happening. " 12:27

6
7 It indicates that a friend from work has moved out of
8 hospital.

9
10 "P63 is on a ward where a lot of his must not have 12:27
11 happen on a daily basis. People shouting, being
12 interrupted in what he is doing, noisy. P63 no longer
13 participates in some of the activities he really
14 enjoyed when he was younger, running, cycling, going to
15 stock car and motorbiking racing, building trophies 12:28
16 from his father's shop.

17 What is working for P63 from his family's point of
18 view:

19 P63 being able to ring home, have a chat and catch up
20 on news. P63 also sometimes rings his sister if his 12:28
21 parents are not in. P63 celebrated his birthday
22 recently with family members and friends. P63's
23 bedroom is more homely and generally looking better.
24 He has visits from mum, dad and P63's sister. We have
25 also learned that it is important to P63 that his 12:28
26 family go home when P63 has had enough. P63 generally
27 spends his time with the staff he knows well and
28 likes. "
29

1 overleaf is a list of what is not working for P63 from
2 the family's point of view.

3
4 "His bedroom needs to be more personalised, bed settee,
5 stereo, TV and video. His parents feel P63 is drifting 12:28
6 away from home. All staff need to be aware of P63's
7 plan, especially those who are not familiar with P63.
8 P63 seems to have lost a lot of skills he used to have
9 regarding looking after himself. Turnover of staff,
10 new people. Private space for P63 when he has 12:29
11 visitors. Issue around visitors going down to P63's
12 room when they come to visit. Other people's privacy.
13 Payment for transport, caravelle. P63's balance is
14 running low, and often runs out of money. P63 is often
15 bored in the evenings. P63 sometimes needs to know 12:29
16 when he has done something wrong."

17
18 Then overleaf, what is working for P63 from other
19 people's point of view.

20 12:29
21 "P63's room. Continuity of staff at work has improved.
22 Staying longer in day care, up to 4:00 p.m. some days.
23 His "language" has improved. Incontinence at night has
24 improved."

25 12:30
26 Then what is not working for P63 from other people's
27 point of view.

28
29 "Concerns regarding his journey home, how do we best

1 support P63. Need to find ways to deal with P63 when
2 he is upset in an adult way. P63's finances may limit
3 him getting out on trips and day care."
4

5 Overleaf and into the following number of pages there 12:30
6 is a series of action plans then. I don't propose to
7 go through those in detail but what they set out, if
8 I can just explain what they show, the document that
9 I've quoted from is not dated. There is no -- I
10 certainly haven't been able to locate a date on it. 12:30

11 But this action plan talks about dates during the
12 course of 2001. So it's possible, although we can't be
13 sure, it's possible that the document from which I just
14 read out dates back to that year. But the action plan
15 indicates who within the Muckamore staff in the 12:31
16 left-hand column will do what in terms of actions,
17 various actions in relation to P63's care, and by
18 dates, and the dates, as I say, are interspersed
19 throughout 2001. The action plan goes over, I think,
20 some five or six pages in total. It starts on 135 and 12:31
21 goes through to 139. So it is detailed but concludes
22 after that.

23
24 So those are the main documents of substance that P63's
25 mother included with her statement. There is then a 12:32
26 series of documentation which really touches on the
27 matters which are at the heart of the Memorandum of
28 Understanding. I don't propose to go through them in
29 detail. There is also a discussion and information

1 around P63's care outside of the hospital, end of life
2 care and so on. It is not relevant in the view of your
3 counsel team. And then there is information and
4 correspondence in relation to the institution of this
5 Inquiry.

12:32

6
7 So, sir, all I simply ask you and the Panel and those
8 present just to take into account in accordance with
9 P63's mother's wishes is just to have a look at the
10 photographs that she has included at the end. These
11 bear out what she went into detail in the course of her
12 statements, his running tracksuit, his gold medal and
13 so on and so forth, I'm sure everybody will take
14 cognizance of those.

12:32

15 CHAIRMAN: I think again we have more photographs
16 actually on screen than we have had --

12:33

17 MR. McEVOY: There is quite a number. I think they
18 start at 164 and run through until 168.

19 CHAIRMAN: which shows him in hospital.

20 MR. McEVOY: I think at 169, that's right.

12:33

21 CHAIRMAN: Can I ask on timing, because you have
22 another statement to deal with and quite a lot of
23 exhibits, I am not surprised this is taking a while,
24 there's absolutely no complaint, I think this is the
25 correct way of dealing with it. But how long do you
26 think, do you think the next witness is as long as --

12:33

27 MR. MCEVOY: I don't believe so. If the Inquiry were
28 minded we could pause for a briefer lunch now. It is a
29 natural break before I go to the next two statements

1 and exhibits.

2 CHAIRMAN: well, I wonder, there's a first statement,
3 isn't there, which is quite short, and then there is a
4 second one that deals with the exhibits. I wonder if
5 you can deal with the first. 12:34

6 MR. MCEVOY: And then pause. That, might be the most
7 appropriate.

8 CHAIRMAN: Thank you.

9

10 STATEMENT OF P63'S MOTHER'S FRIEND READ INTO RECORD: 12:34

11

12 MR. McEVOY: The next statement then is the first
13 statement then that was provided to the Inquiry by a
14 friend of P63's mother. It is dated 14th June 2022.
15 And he says then, this person says then: 12:35

16

17 "I as a friend of P63's mother make the following
18 statement for the purpose of the Muckamore Abbey
19 Hospital Inquiry."

20

21 He then sets out his connection with Muckamore: 12:35

22

23 "My connection with Muckamore is that I was a close
24 friend of P63's mother (deceased) whose son P63
25 (deceased) was a patient at the Hospital." 12:35

26

27 He makes reference then to the orders of service for
28 the funerals of both P63 and his mother. He tells us
29 then relevant time period he can speak about is between

1 September 2017 and 10th February 2022.

2
3 In the next section, then, this friend of P63's mother
4 describes the background to his friendship with P63's
5 mother, describes her as a dear friend with the 12:36
6 friendship going back over some 30 years. He conveys
7 to us it was P63's mother's wish that she wanted him to
8 contribute to the Inquiry on her behalf. He describes
9 the background. It is not relevant but he describes
10 the background to her life experience up to her 12:36
11 marriage to P63's father, the birth of two children,
12 then the circumstances which brought them back to
13 Northern Ireland.

14
15 He then takes up at paragraph 10 by telling us that: 12:36

16
17 "After P63's mother's husband died in September 2017
18 I took over driving P63's mother to Muckamore to visit
19 P63 as it was P63's father who normally drove her.
20 P63's mother had no other way of getting to Muckamore. 12:37
21 I met P63 a number of times during pick ups, drop offs
22 and special meals out. P63's mother talked about him
23 all the time and I certainly knew all about him.
24 I would usually drop P63's mother off at the front door
25 and pick her up at the same place. P63 normally 12:37
26 accompanied her to the front door and I found him very
27 civil and courteous. He always seemed to be a grand
28 young man to me. I also had dinner with P63's mother
29 and P63 on a number of occasions on P63's and P63's

1 mother's birthdays. P63's mother like to be very
2 hospitable. She loved company and entertaining. She
3 insisted that they always went to [redacted] for their
4 birthday treat. P63 would be accompanied by two staff
5 members from Muckamore at all times. I can't remember 12:38
6 any of their names. P63's mother's birthday was in
7 December so the first occasion would have been in
8 December '17. We were celebrating P63's's mother's
9 birthday at the restaurant and P63's was there with the
10 two staff from Muckamore. I recall that P63's mother 12:38
11 asked the staff why they hadn't ordered anything. The
12 staff said they were not allowed to eat or take part in
13 the meal. They said they were told this by their boss.
14 P63's mother was absolutely raging that the Muckamore
15 staff couldn't have dinner with her and P63. That was 12:38
16 P63's mother, she would have bought the whole place
17 their dinner and she didn't like anyone being left out.
18 I remember there were two male nurses on that occasion.
19 Muckamore staff had to sit and watch us eat and P63's
20 mother was furious. 12:38

21
22 P63 was a great fellow. He never had any trouble on
23 these special occasions. He was a character in his own
24 right. He was headstrong like P63's mother and he
25 would speak his mind very clearly. If he wanted to go 12:38
26 home that was it. He would sometimes shout out
27 "where's my dinner" in the restaurant, which we laughed
28 at but other diners would be a bit shocked by this.
29 He didn't really have a grasp of how that came across

1 but in every other way he was very well mannered when
2 he went out.

3
4 P63 always did what P63's mother or the staff told him
5 so if he was getting animated in any way and they told 12:39
6 him to settle down he always did it. I never ever saw
7 P63 be aggressive towards anyone in my company.

8 I never saw him behave badly towards anyone or
9 furniture or anything else when I saw him on those
10 occasions. P63's mother did tell me that P63 had been 12:39
11 aggressive to her in the past at home but I never
12 witnessed this. It was part of his illness. She said

13 that he would be upset afterwards and he always
14 apologised. I recall that the Muckamore staff always
15 appeared to behave appropriately on these occasions. 12:39
16 If P63 started to get loud P63's mother and the
17 Muckamore staff were able to control him by speaking to
18 him. There were never any problems. There was never
19 any reason to intervene.

20 12:40

21 P63's mother talked about various incidents in
22 Muckamore. I can't recall the detail of all of them
23 but she said she knew things weren't right. She said
24 she would pull the staff up on certain things and told
25 them their behaviour wasn't appropriate. P63's mother 12:40
26 told me she and P63's father wrote numerous letters
27 about their concerns and complaints. Some of these
28 letters were answered, some weren't. She kept some of
29 the letters but many of them were discarded over the

1 years and the bundle she kept was the tip of the
2 iceberg. Nothing ever changed and things were always
3 brushed under the carpet.

4
5 P63's mother told me that P63 went into Muckamore a 12:40
6 young man and became an old man within weeks. She said
7 he lost the skills very quickly. He could count to 12
8 when he went into Muckamore and within weeks he didn't
9 know how to. She didn't think the Muckamore staff
10 spent any time doing this with him. P63's mother told 12:40
11 me she wasn't sure if Muckamore was safe or not.
12 She didn't like the situation with P63 in Muckamore but
13 Muckamore said it wasn't possible to bring him home.
14 P63 was in a mixed room for a long time, over 15 years.
15 P63's mother did not like that. A mixed ward is a ward 12:41
16 with sex offenders in the same dormitory. P63's mother
17 thought this was inappropriate and that it must have
18 impacted on the other patients. She was always worried
19 about P63 being sexually abused."

20 12:41
21 The statement goes on to discuss matters which are
22 touching on the -- which are covered by the Memorandum
23 of Understanding. I don't propose to read them out.
24 I will take it up at paragraph 23 of the statement
25 where knowledge of those matters, the witness says, 12:41
26 were absolutely devastating to P63's mother. She
27 couldn't believe what she was hearing. He then goes on
28 to say that:
29

1 "From that day on all P63's mother talked about was
2 Muckamore. P63's mother was very upset by this and she
3 remained upset by it until she died. P63's mother
4 tortured herself that she had let P63 down, that she
5 had not tried hard enough to get him out of Muckamore 12:42
6 and that she had not protected him. P63's mother
7 blamed herself. Right up until she died she carried a
8 lot of guilt for P63 being in Muckamore all that time.
9 He was there for 26 years. It was a terrible thing to
10 see the impact that the abuse investigation had on her. 12:42
11 She was also very angry with Muckamore for letting this
12 happen. She stopped sleeping properly. She would say
13 the thoughts and memories would go round and round in
14 her head. She thought about the staff she knew and
15 trusted and tortured herself asking were they a part of 12:42
16 the abuse of patients, her P63 or other patients. She
17 felt really let down by the staff at Muckamore for all
18 of it. It was terrible for her.

19
20 The Muckamore staff brought P63 home for visits on a 12:42
21 Sunday. P63's mother would invite them in and make
22 them dinner too. She was so hospitable and entertained
23 everyone. She knew them very well. She heard about
24 their lives. She thought about that. She talked about
25 the Muckamore staff who would have had dinner in her 12:43
26 house on those Sundays at the home visits. She would
27 name them and talk about them. She would say what were
28 they really like? She says she felt as if she had the
29 wool pulled over her eyes. It was a terrible breach of

1 trust. On the whole P63's mother and P63's father
2 believed at the time that P63 was safe enough and cared
3 for at Muckamore. However there were many times when
4 P63's mother and P63's father complained about things
5 or raised things with Muckamore and P63's father wrote 12:43
6 numerous letters. P63's mother never felt these things
7 were ever properly resolved so in the end they just had
8 to get on with things and hope P63 was okay. P63's
9 mother knew the staff at Muckamore well. She said a
10 lot of them were related to one another in some way or 12:43
11 they were friends outside of work. P63's mother said
12 that was part of the problem at Muckamore, she thought
13 they covered up for one another. P63's mother never
14 slept properly again after the abuse investigation came
15 to light. It went round and round in her head. She 12:44
16 asked herself, who were the abusers, did she know them,
17 were they people in her house, did they have dinner
18 with her. She tormented herself. She knew most of the
19 staff so she knew she would know the abusers. She
20 asked herself could she have done more, could she have 12:44
21 got P63 out. She blamed herself for what happened.
22 I told her that she needed to sleep and that she needed
23 to go to bed but she couldn't. She would get up for
24 tea in the middle of the night and she would lay on the
25 sofa most nights. This had a very detrimental affect 12:44
26 on P63's mother's health, both physically and mentally.
27 She was always thin but she started to lose a lot of
28 weight and she stopped leaving the house. I did
29 everything for her after that. I did all of her

1 shopping. I took her to appointments."

2
3 I will take it up at paragraph 34, just after some
4 items touching on the Memorandum of Understanding.

5
6 "P63's mother worried terribly about whether P63 had
7 been sexually abused. She was never advised this
8 happened but she was very worried about it. P63's
9 mother went more and more into herself as abuse was
10 uncovered and as time went on. She became very
11 withdrawn. It was the only thing she was ever talking
12 about. It consumed her. There was nothing else in her
13 head. Every time she heard about a new incident she
14 got worse and worse. She would put two and two
15 together and get five. She started recording every
16 news programme on every channel on Sky Q in case she
17 missed something about Muckamore. P63 died on his 46th
18 birthday in February 2021 so she had her grief as a
19 mother to contend with as well. P63's mother became
20 very ill in early 2022. She had a short but aggressive
21 illness. She knew that she wasn't going to be around
22 to see the Inquiry to its conclusion so she asked SW4
23 if she could arrange to speak with the Inquiry Team.
24 She wanted to have her voice heard. SW4 spoke to the
25 Inquiry."

26
27 I'm not proposing to go into any of that. So there's
28 just some discussion then after that of engagements
29 with the Inquiry Team. I'm going to take it up towards

1 the end of the statement where the witness tells us, he
2 notes:

3
4 "P63's mother wanted to take SW4 out for dinner to
5 thank her for all her help going out for dinner on a 12:46
6 Thursday evening. P63's mother was due to give her
7 witness statement on the Friday to Cleaver Fulton
8 Rankin. P63's mother, SW4 and I had a great evening.
9 P63's mother was in very good form and I could see a
10 change in her. She even had a glass of wine and 12:46
11 dessert. Unfortunately P63's mother took ill after the
12 meal and she passed away later that evening. P63's
13 mother's dying wish was that things change for the
14 better for all patients with disabilities."

15
16 He goes on to say:

17
18 "She was so happy before she died and believed that the
19 Public Inquiry would result in change. P63's mother is
20 buried with a picture of P63 and his gold medal. 12:47
21 I placed it on her chest as she loved that picture."
22

23 That's the end of the first statement.

24 CHAIRMAN: That deals with the first statement.

25 I think the second statement is really focused on 12:47
26 producing a number of exhibits and you'll take us to
27 the ones that you feel are most relevant.

28 MR. MCEVOY: That second statement simply adduces those
29 and explains how he came by them.

1 CHAIRMAN: If we can start again, we'll just take an
2 hour, if that's all right, we will try to start again
3 at ten to two. Thank you very much.

4
5 LUNCHEON ADJOURNMENT

6
7
8 THE INQUIRY RESUMED AS FOLLOWS:

9
10 SECOND STATEMENT OF P63'S MOTHER'S FRIEND:

11
12 MR. McEVROY: This is the second of the statements made
13 to the Inquiry by the friend of P63's mother. The
14 statement is dated 27th September 2022.

15
16 "I, friend of P63's mother, make the following
17 statement for the purpose of the Muckamore Abbey
18 Hospital Inquiry. This is my second statement to the
19 Inquiry. I gave my first statement on 14th June 2022,
20 referred to hereafter as my first statement." 13:50

21
22 He then repeats the nature of his connection with
23 Muckamore.

24
25 "In my first statement to the Inquiry I provide 13:50
26 relevant information dealing with the time period
27 between September '17 and 10th February 2022, the date
28 of P63's mother's death. I would like to provide
29 additional documentation to the Inquiry that I recently

1 discovered on Friday, 8th August 2022 and Tuesday 23rd
2 August 2022."

3
4 I'm just going to pick up at paragraph 6.

5
6 "Since providing my first statement to the Inquiry
7 I have discovered further relevant documentation that
8 I would like to provide to the inquiry on P63's
9 mother's behalf. I have been going through P63's
10 mother's belongings at her house. Whilst I was
11 clearing out a shed in the garden at the back of the
12 house on Friday 8th August 2022 I came across several
13 briefcases in the rafters. Upon opening the briefcases
14 and reviewing the contents I discovered that they
15 contained P63's father's old motorbike club
16 documentation. P63's father, who is deceased, was P63
17 mother's husband. In one of the briefcases I
18 discovered an orange paper folder of documentation
19 labelled "P63 personal" on the front. I have now had
20 an opportunity to review the contents of this folder
21 which I believe relate to 63's mother and P63's father,
22 P63 and his care at Muckamore. I have exhibited the
23 contents of the orange folder at Exhibits 1 to 45.
24 Following the discovery of the folder entitled "P63
25 personal" and referred to above I undertook a search of
26 P63's mother's home to ascertain whether there were any
27 other similar files or documents. I discovered several
28 other documents which I believe are of relevance to the
29 Inquiry and which I have attached at exhibits 46 to 49.

13:50

13:51

13:51

13:51

13:51

1 Exhibits 46 and 47 are copies of original diaries for
2 2017 and 2018 respectively. They appear to relate to
3 P63's care at Muckamore and after he was resettled into
4 the community. They appear to contain handwritten
5 notes made by P63's father and P63's mother. During 13:52
6 the search I also located the documents attached at
7 Exhibits 48 and 49, which are an article from Court
8 News NI dated 21st December 2021 which deals with the
9 ongoing investigations which are the subject of the
10 Memorandum of Understanding and the document entitled 13:52
11 "A Review of Governance and Leadership at Muckamore
12 Abbey Hospital" dated the 31st July 2020."

13
14 I pause there just to indicate to the Inquiry I think
15 it is a document with which the Inquiry is familiar and 13:53
16 has got through other sources.

17
18 "Before P63's mother died she prepared a bundle of
19 documentation for the Inquiry which was attached to her
20 written submission. She told me she recalled there 13:53
21 being further documentation and correspondence
22 regarding P63's care at Muckamore over the years but
23 she thought that she must have thrown the rest of it
24 away and she refers to this in her written submission.
25 I believe that the documents exhibited to this 13:53
26 statement may contain some of the documentation and
27 correspondence that she was referring to and that P63's
28 mother would have wanted me to provide these to the
29 Inquiry.

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I would like to highlight several documents for the attention of the Inquiry. Exhibit 34 is a letter dated 19th June 2000 to Dr. H90, consultant psychiatrist at Muckamore from P63's father. In this letter P63's father complains about P63's care and he refers to an incident regarding P63's mattress being soaked in urine on 18th June 2000. A copy of the letter was also sent to ward sister H214 and is attached at exhibit 35. There is a reply from Dr. H90 at exhibit 36 describing the incident as very distressing and indefensible, dated 22nd June 2000. Dr. H90 refers to an investigation taking place under the complaints procedure but I cannot find any such report in the folder. I believe this is the incident that P63's mother refers to in her written submission.

I refer to three letters contained within the folder from North and West Belfast Health and Social Care Trust to P63's father and attached at Exhibits 23, 24 and 25. I also refer to Exhibit 16 which is a practice mental health report dated 12th September 1994. The originals of these documents are on carbon paper and unfortunately most of the content is illegible when the documents are scanned. The writing is however faintly visible. For the assistance of the Inquiry the content of these inquiries has been copy typed and attached to the respective exhibit.

1 In P63's mother's written submission she also refers to
2 an incident where P63 had a black eye. She states that
3 a complaint was raised and that P63's father may have
4 written a letter to Muckamore about it. There is a
5 letter contained within the folder and attached at 13:55
6 Exhibit 39 which refers to a complaint in relation to
7 bruising around P63's eye. The letter is addressed to
8 P63 care of Movilla A Muckamore from Oscar Donnelly,
9 business manager dated 19th October 2000. It refers to
10 a complaint of 17th October to ward sister H214 in 13:55
11 relation to the injury and states that the complaint
12 will be investigated. I believe this may be the letter
13 that P63's mother was referring to in her written
14 submission. The response is contained in P63's
15 mother's written submission as an attachment as 13:55
16 document number 16, letter to P63's parents from
17 Mr. Black, Chief Executive, North and West Health and
18 Social Care Trust dated 17th November 2000.

19
20 Within the orange folder referred to above I located a 13:56
21 booklet entitled "Muckamore Abbey Information Booklet
22 for Patients and Relatives" which I have attached to my
23 statement at Exhibit 41. I believe this may be of
24 interest to the Inquiry. I have conducted a further
25 search of P63's mother's house and cannot find any 13:56
26 other relevant documentation to provide to the
27 Inquiry."
28
29

1 That's signed and dated then 27th September 2022.
2 There's a list of exhibits with a brief explanation,
3 Panel, which starts at 064-7 and runs through until
4 064-9, just for ease of reference.

5
6 Just before I begin to take you through some of the
7 exhibits, you'll have noted the explanations and the
8 descriptions of some of the materials that the witness
9 has provided to the Inquiry. I don't intend to open
10 many of them in considerable length. They're for
11 example the complaints procedures and so on, those can
12 be read by the Inquiry, but I am going to take you to
13 the correspondence and a number of other similar
14 materials which are enclosed.

15 CHAIRMAN: Do we start at page 91?

16 MR. McEVOY: Yes. Just for the Inquiry's note, I may
17 just mention something that occurred to me over the
18 break, which is just in the interests of contrast,
19 actually. The Inquiry may briefly want to bring up a
20 document, actually, before we do move to that, Sir
21 which is 064-62. It is marked in pencil Exhibit 17.
22 It should read "day care services multi disciplinary
23 review report".

24 CHAIRMAN: Hold on a second because I don't think it is
25 copied for us. I have got it on screen.

26 MR. McEVOY: It may not be.

27 CHAIRMAN: If we find the relevant statement.

28 MR. McEVOY: I can come back to it.

29 CHAIRMAN: Just give us a moment.

1 MR. McEVOY: I can go back to it at the end, sir. It
2 is a small point.

3 CHAIRMAN: Give us a second, we might find it. I think
4 we are going to get it, it says "day care services
5 mul tidisciplinary review", hold on a second. It takes 13:59
6 a while to load this because there are so many
7 exhibits.

8 MR. McEVOY: The Inquiry will be familiar with the
9 document. I know the Panel members will have seen the
10 document. It is a multidisciplinary review report. 13:59
11 There is no obvious date on it other than to say on the
12 second page, which is 63, there is reference to a date
13 in the body of the document which is a date of Friday
14 21st October 1994 so it is reasonable to assume it must
15 date to some time around then. In the session before 14:00
16 lunch we looked at the multi-disciplinary review report
17 from 2005 which was in quite some detail over a number
18 of pages and this is a similarly titled document but
19 the Inquiry will see it takes up only a page and a
20 half. The headings are similar to those we looked at 14:00
21 this morning but you'll see, just in terms of day care
22 services attendance:
23

24 "P63 attends most available sessions with (inaudible)
25 contracts. Punctuality: P63 is escorted by Movilla A 14:00
26 staff, usually arriving within 15 minutes of any
27 allocated sessions. Work performance: P63 is very
28 difficult to motivate, will attempt a task under
29 constant verbal prompting but will stop after a few

1 minutes saying he cannot do it. When P63 first
2 attended the contracts department his behaviour was
3 erratic and disruptive, at this time it was difficult
4 to assess his schools. Present behaviour has
5 improved. "

14:01

6 CHAIRMAN: Just slow down a tiny bit.

7 MR. McEVOY: Sorry. It's the effect of the double
8 espresso.

9 CHAIRMAN: Yes.

10 MR. McEVOY: "At present behaviour has improved however
11 contracts currently available are unsuitable for P63
12 resulting in frustration and occasional displays of
13 inappropriate behaviour, banging tables, abusive
14 language, et cetera. Supervision: P63 requires
15 constant one-to-one supervision when carrying out any
16 task required of him. Memory and concentration: P63
17 cannot remember the details of a task from day to day
18 and his concentration is quite poor. Comprehension:
19 P63 seems to understand any given verbal directions or
20 instructions. Adaptability: P63 does not have any
21 problems with adapting to change. Relationships with
22 colleagues: P63 prefers to remain solitary and sits
23 with his back to his peers. Communication skills: P63
24 can speak clearly and make his needs known. "

14:01

14:01

14:02

14:02

25
26 Overleaf, other activities. Activities available:
27 Leisure and recreation, drama therapy sessions and
28 music sessions from Friday 21st October, 1994.
29

1 "Participation: P63 enjoys music of all types and
2 interacts quite well with his peers when put into this
3 environment. Aims: Short term to increase the range
4 of activities available to P63 within day care."

14:03

5
6 CHAIRMAN: So far as that date is concerned, it is
7 obviously backward looking.

8 MR. McEVOY: It is backward looking. Similarly titled
9 but a quite different document we looked at this
10 morning is 2005, that one, I think it is fair to assume 14:03
11 certainly 1994 or thereabouts.

12 CHAIRMAN: Or some time thereafter.

13 DR. MAXWELL: It was written as contemporaneous notes
14 but from 1994.

15 MR. McEVOY: Exactly, exactly. I know that wasn't 14:03
16 copied for you, but just having gone through that other
17 document this morning, I thought it might be of
18 interest for the Inquiry to be taken through it.

19 CHAIRMAN: We're going to move on to the letter of 9th
20 April. Page 91. 14:03

21 MR. McEVOY: That's right, 91.

22
23 So this is 9th April 1999. The Inquiry, just for its
24 note, will recall this morning at 027-68 there was a
25 letter which was written in response to this letter, 14:04
26 and I indicated then I would be taking you to the
27 letter which initiated that response. That's the
28 location of the response from The Trust.

1 This letter, then, is addressed to Dr. H90, consultant
2 psychiatrist at Muckamore.

3
4 "Dear Dr. H90, following our recent meeting P63's
5 mother and I feel it is necessary to put in writing our 14:04
6 concerns relating to P63's care in hospital. You will
7 remember we wrote to you on 16th April."

8
9 It probably should read 1998.

10 14:04
11 "Identifying a number of issues. At that time the
12 Hospital investigated our concerns and actively
13 attempted to address these, however, it is our belief
14 this momentum has now been lost and a number of issues
15 remain unresolved. We would summarise these as 14:04
16 follows.

17
18 Safety: P63 continues to be accommodated in a ward
19 along with adult men who have been convicted of
20 offences. P63, as you know, is an extremely vulnerable 14:05
21 individual and the presence of sexual offenders in
22 particular causes P63's mother and me great concern.

23 Privacy: P63 currently is in his own room which was
24 agreed as a temporary measure until a more permanent
25 room could be identified. P63's mother and I feel that 14:05
26 P63 moving from a dormitory setting has been extremely
27 positive for him. He now has his own private lockers
28 in which his personal belongings are kept. As you will
29 be aware his temporary accommodation is not entirely

1 satisfactory. There are bars on the window and there
2 is not the facility for us to provide additional
3 personal items such as P63's portable television in the
4 present setting."

14:06

5
6 I think there's a handwritten note on the side:

7
8 "Radio seems to be used only when we are there."

9
10 Next heading:

14:06

11
12 "Recreational opportunities: It is our understanding
13 that P63 has not been out on recreational activities
14 since Christmas. We understand this may in some way be
15 related to his poor health situation. However, we feel
16 that even during periods of ill health efforts should
17 be made to ensure that P63 has as normal a life as
18 possible."

19
20 Next heading is family contact. "It has been some time
21 since..."

22 CHAIRMAN: Can you just hold on a second. I only have
23 one page of that. I just have to find it in the --

24 MR. McEVOY: Page 92.

25 CHAIRMAN: Yes.

14:07

26 MR. McEVOY: Next heading is family contact.

27
28 "It has been some time since P63 has visited P63's
29 mother and myself at home. We accept that this again

1 may be related to his health over the last few months,
2 however we believe that every effort should be made to
3 ensure that P63 continues to have contact with us in
4 our home setting.

5 Health: We would like it to be noted that there has 14:07
6 been a significant improvement in one of P63's physical
7 health conditions and we believe that this is a direct
8 result of the care he has received on the ward.

9 Institutional setting: We are aware that Down Lisburn
10 Trust is currently making efforts to identify a 14:07
11 placement for P63 in the Lisburn area, however we are
12 concerned that the success of such a placement relates
13 directly to the way in which the transition is managed.

14 It has always been our belief that efforts must be made
15 while P63 is in Hospital to prepare him for community 14:08
16 living. We feel that the progress of P63's

17 accommodation should be built upon so that he is
18 eventually able to experience a similar setting to that
19 which would be provided in the community. In addition,
20 we would like to stress the need to address P63's 14:08

21 quality of life in the hospital setting. We feel that
22 efforts need to be made to ensure that he feels
23 comfortable and relaxed in his environment. P63's
24 mother and I feel strongly that the provision of
25 television and music in P63's room would have a 14:08
26 relaxing influence and would improve his quality of
27 life.

28 Conclusion: Although much effort was made to address
29 our concerns when we highlighted them last year,

1 we feel that to some extent the process has come to a
2 standstill. Muckamore Abbey has failed to address a
3 number of the key issues highlighted and in particular
4 issues relating to P63's quality of life and privacy.
5 Although Down Lisburn Trust are making efforts to place 14:09
6 P63 this should not be seen as an alternative to
7 providing appropriate care while he is in hospital.

8
9 Once again, P63's mother and I wish to stress that our
10 opinions are not a reflection on the care provided by 14:09
11 staff, but rather on the structures, procedures and
12 practices within the Hospital. I would be grateful for
13 your opinion as to how Muckamore Abbey and ourselves
14 can work together to ensure P63's care is appropriate
15 to his needs and of a high quality. 14:09
16 yours sincerely. "

17
18 That is from P63's father.

19
20 There is then some duplication because the documents 14:09
21 that we looked at this morning reappear then. But
22 there are some additional matters that the witness has
23 included. If I can take it up. This is one of the
24 letters he specifically referred to in the body of his
25 statement at 102 then, 064-102. 14:10

26 CHAIRMAN: Again, I think we just have the first page
27 of that, but we can find it on the screen.

28 MR. McEVOY: This is again addressed to H90 at
29 Muckamore and dated 19th June 2000.

1
2 "Dear H90, on Sunday 18th June 2000 my wife and
3 I visited our son, P63, in his room at Movilla A. As
4 you are aware P63 has been ill all of the previous week
5 and according to our information he had been confined 14:10
6 to bed on antibiotics with a urinary infection. On
7 entering his room we found P63 lying on his right side
8 facing the wall in a bed soaked and stinking from
9 urine. We had been accompanied to his room by the
10 staff nurse on duty and at a rear door convenient to 14:11
11 P63's room there was another member of staff seated in
12 the doorway. When we went into the room both members
13 of staff came in with us. When we complained about the
14 state of P63's bed the young man who had been seated by
15 the door said "I tried to change him but he wouldn't 14:11
16 let me". After gentle verbal persuasion P63 got up.
17 He was naked and there was steam emitting from his body
18 from where he had been lying in his own urine. He took
19 a seat in the armchair in his room, still naked. The
20 staff nurse covered his knees with a towel and the 14:11
21 young man changed the bed clothes. I realised we had
22 put this man on to his back foot and that he was quite
23 nervous. He did not clean the mattress but simply
24 changed the linen. The staff directed that P63 should
25 have a wash and the young man asked P63 to accompany 14:11
26 him to the showers. P63 verbally declined and the
27 young man brought in a half basin of water instead.
28 I was, however, able to persuade P63 that a shower
29 would be better and he went with the young man and had

1 a shower. P63's mother had brought some new pajamas
2 for P63 and he attired himself in these and sat on the
3 armchair chatting to us while the staff nurse was
4 making arrangements at my request for P63 to be seen by
5 a GP.

14:12

6
7 During this time P63's mum sat on the edge of P63's bed
8 and on getting up she felt that her dress was wet. On
9 close examination, to our horror, we found that when
10 pressing P63's mattress urine oozed out of a hole in
11 the plastic covering. My wife reported this to the
12 staff in the office and another member of staff arrived
13 at P63's room, stripped the bed, took the mattress off
14 the bed and as the mattress was being carried away from
15 the room urine was spilling out therefrom. The
16 offending mattress was put outside and the bed itself,
17 being wet with urine, was cleaned and sprayed with a
18 solution by a staff member. A different mattress was
19 produced and P63's bed was made up freshly.

14:12

14:13

20
21 I regretfully contend that my son is not receiving
22 nursing care that is his right. It cannot be right
23 that P63 is expected to lie in a bed soaked in urine
24 looked after by staff who say "He would not allow me to
25 change his bed". I realise P63 can be difficult due to
26 his illness, but both my wife and I have discussed this
27 bed wetting problem before and I can only think that
28 this problem in the first instance, that is bed
29 wetting, arose from bad nursing care and this now seems

14:13

14:13

1 to have gotten worse, i.e. when he is physically ill it
2 would appear that he is allowed to lie in a bed fit
3 only for dumping.

4
5 What I saw on Sunday leaves me with absolutely no 14:13
6 alternative but to complain in the strongest possible
7 way and to plead that our son may never have to suffer
8 this discomfort and indignity again, whether he is
9 physically ill or otherwise. There are several other
10 things that I would like to discuss with you at your 14:14
11 earliest convenience. We realise staff is in short
12 supply in the hospital. Thankfully the majority of
13 staff over the years have been very good but,
14 regretfully, P63's day-to-day life is, in my opinion,
15 reduced to an existence and he now no longer enjoys any 14:14
16 quality of a normal life, even taking into account his
17 illness. His filthy bed on Sunday was the last straw
18 and respectfully I must ask that the circumstances be
19 looking into and dealt with as a matter of urgency by
20 whoever is in charge of P63's care. I respectfully ask 14:14
21 you to advise me as to the person or persons I should
22 be in touch with to ensure this happens.
23 Yours faithfully."

24
25 It is again signed by P63's father. It is copied to 14:15
26 H90 and to H214. The copies are at the pages
27 following. I take it up then at 064-106, which is the
28 response which was mentioned in the statement from H90.
29 This is dated 22nd June 2000.

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"Dear P63's father. Thank you for your letter of 19th June 2000 which I received yesterday. In it you describe a very distressing and indefensible situation. Senior nurse management had already heard about this from P63's mother and are investigating this under the complaints procedure. I hope that you will get a written response in the very near future. I note that towards the end of your letter you say that there are other things which you would wish to discuss and I will telephone you within the next few days to make a mutually convenient appointment. I share your concern at the very distressing circumstances you describe. Yours sincerely, H90."

14:15
14:15

The next document of significance, although I'm not going to open it, is a document I think the Inquiry may have seen previously, it is entitled "A consultation document in relation to the closure of seven resettlement wards and reduction of treatment and bed capacity at Muckamore Abbey Hospital, June 2000". Its relevance is in this morning's session there was mention of a meeting of members of the Society and there was a letter that the Inquiry will recall was written on behalf of members and copied to P63's father.

14:16
14:16
14:16

CHAIRMAN: Sorry, just before you go on, though, in relation to the letter that we've just looked at, the date, 22nd June, which refers to an investigation,

1 we don't have the --

2 MR. McEVOY: we don't appear to have the workings of
3 that.

4 CHAIRMAN: Right, that's something we may want to
5 follow up. 14:17

6 DR. MAXWELL: In the bundle, but you have it referred
7 to in the transcript, the witness also wrote to the
8 senior nurses and so, as this respondent has said, it
9 would have been the nurses who would have responded to
10 it. 14:17

11 CHAIRMAN: But we don't have that response.

12 DR. MAXWELL: No, but --

13 CHAIRMAN: we can probably follow it up. Thank you
14 very much.

15 MR. McEVOY: Just in relation to the consultation 14:18
16 document, I think the significance of its inclusion is
17 that there was reference in the evidence this morning
18 or in the material this morning from P63's mother in
19 relation to a consultation exercise around proposed
20 closure of a ward. This is the consultation document. 14:18
21 Nothing of relevance, I think, certainly nothing of
22 relevance at this juncture turns on the content of the
23 consultation document save to say in its entirety its
24 reproduced there. But it obviously was an issue which
25 exercised P63's mother in the way she described in her 14:18
26 statement which was read in this morning. There is
27 then a sort of newsletter-type document which begins at
28 064 page 139. I would draw the Inquiry's particular
29 attention just to what is on 141 under a heading within

1 that newsletter entitled "consultation progress".
2 Again, this document doesn't appear, as far as I can
3 see, to be dated but there are dates within the body of
4 it. If the Inquiry will indulge me I'll read in the
5 relevant sections. 14:19

6
7 "Consultation on the closure of seven resettlement
8 wards and reduction in treatment bed capacity at
9 Muckamore Abbey Hospital ended on 14th October 2000.
10 Following a two-week extension period it was agreed 14:19
11 that the summary report on the process and proposals on
12 the way forward will be presented to the public section
13 of the Trust board meeting on 31st January 2001."

14
15 It goes on just to say in the next paragraph: 14:19

16
17 "It is now acknowledged that the targets set in the
18 regional strategy will not be met within the time scale
19 of 2002. It is also accepted that extra resources will
20 be required to develop both a comprehensive community 14:20
21 service and a core hospital to underpin community
22 services and providing specialist treatment for those
23 who require inpatient assessment and treatment.

24
25 85 responses were received to the consultation document 14:20
26 covering a wide range of issues. Many commented on the
27 policy and strategy and raised the issues of timescale
28 and resources as well as the order of ward closures. A
29 number of responses also reflected a continuing

1 opposition to further settlement from the hospital with
2 others expressing an anxiety about both the future of
3 hospital services and adequacy of community services to
4 support people who may be resettled. "

14:20

5
6 It then goes on to indicate a number of local political
7 representatives and others of significance who have
8 taken an interest in the issue and concludes then by
9 saying:

10
11 "Staff in The Trust continues to seek ways to reassure
12 families and patients that any resettlements in future
13 will be as carefully planned and overseen as they have
14 been to date.

14:20

15
16 The Minister's statement is recognition that at the
17 highest level of government there is an understanding
18 of the need for great care to be taken in any future
19 plans for resettlement. "

14:21

20
21 There is then -- there is, and I'm not going to open
22 it, the inclusion in the exhibits of, as the witnesses
23 mentioned, various materials including a patients'
24 charter and so on and information about Muckamore. It
25 is undated. It is hard to gauge when it relates to.
26 I'm not intending to take the Inquiry to that. If
27 I can, however, I will just take up at page 184. These
28 are the beginning, I'm only going to read out a small
29 selection of them, Chair, Panel members, just to give

14:21

14:21

1 you a flavour of what's contained. But these are the
2 diary entries to which the witness made reference for
3 the years 2017 and 2018 that he discovered. I'm just
4 going to read some of those into the record. At 184,
5 064-184 --

14:22

6 CHAIRMAN: Just hold on. I'm sorry. I just want to
7 look at what we're -- are they contemporaneous diary
8 entries?

9 MR. McEVOY: we have to presume that they are. We
10 can't be sure. It appears to have been a diary by
11 P63's father.

14:22

12 CHAIRMAN: Yes. Sorry, go ahead.

13 MR. McEVOY: so this one is dated Saturday,
14 11 February, 2017.

14:23

15
16 "According to staff P63 unsettled and requiring calming
17 tablet. According to staff tablet three days in a row.
18 He had been off his tablets completely for some time.
19 Named nurse arrived. P63 calmed down with little
20 problem. Passed while wants to stay in his room and
21 generally seems to be left to that."

14:23

22
23 Overleaf is the next day, 064-185, Sunday morning.
24 This is Sunday, 12th February 2017.

14:23

25
26 "Sunday morning wanted to stay in room. At lunchtime
27 he settled and my wife and I arrived and took P63 to
28 Cosy Corner. He ate up well but was unhappy when
29 we took him back saying "don't leave me here". "

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I think there's some reference to a young female nurse we phoned -- I'm not sure what that says, the handwriting is a little hard to make out. Then there's Monday 13th February 2017 overleaf.

14:24

"My wife and I and others are alarmed with the way P63 has been treated and we would respectfully request a meeting with you and whoever details the staff on Cranfield 2, if that is possible. P63 seems to be the victim of staff who are, in our opinion in the main are unable for whatever reason to cope/nurse him. Shortage of..."

14:24

Something I can't quite make out -- staff. At least two young men.

14:25

CHAIRMAN: "Female".

MR. McEVOY: Female staff. At least two young men needed in the recent past.

PROF. MURPHY: I think it's "shortage of male staff". So the F is from the "of".

14:25

MR. McEVOY: "Shortage of".

CHAIRMAN: You're right.

MR. McEVOY: This is Wednesday, 15 February 2017:

"Visited P63. He was okay but maybe on short fuse. He can't wait to get home on Sunday for his birthday."

14:25

CHAIRMAN: Right. I'm not sure the rest is going to give us very much.

MR. McEVOY: No. That's to give you a flavour of the

1 details. There's decreasing detail after that. I
2 think a particularly striking, slightly shorter entry
3 is to be found at 199, which is 26th February 2017.
4 The entry is:

5
6 "Visited and went to Cosy Corner with two staff. Not
7 great, God love him."

14:26

8
9 The entries as I say decrease in detail for many months
10 after that. In the 2018, this is the last of the
11 entries I was proposing to read in. 064-267. This is
12 for April 2018, Sunday 29th April 2018:

14:26

13
14 "P63 home. Looks ill. Arrived in wheelchair. Not
15 eating. Cannot stand. Very worried."

14:27

16
17 Those are the exhibits arising from the additional
18 materials provided by P63's mother's friend. That
19 concludes the presentation of the evidence and
20 materials in relation to P63's mother.

14:27

21 CHAIRMAN: Mr. McEvoy, thank you very much. That was
22 quite a task. All right, is there one more statement,
23 I think, to read?

24 MR. McEVOY: There is. There is a statement, Sir, from
25 the brother of patient P68. I indicated at the outset
26 this morning that we anticipated that there might be an
27 application and, indeed, there has been. There has
28 been a request from the Public Prosecution Service that
29 that statement be the subject of a restricted reporting

14:27

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order.

CHAIRMAN: Is it material covered under Operation Turnstone?

MR. McEVROY: It is.

CHAIRMAN: All right. It is a very short statement 14:28
indeed but there are specific criticisms about this
that it could interfere with the criminal matters. In
those circumstances, in line with the policy that we've
adopted in relation to this type of material and in
order to protect the criminal trial process, and in 14:28
accordance with the MOU that I have personally signed,
I will make a full restriction order which means, I'm
afraid, that the feed has to be cut to Room B and
outside of this room.

MR. McEVROY: Thank you, sir. would it be possible to 14:28
have a five-minute break?

CHAIRMAN: Of course. If we take ten minutes, we will
try to start again at 2:45 to give everybody a break.
Thank you very much, indeed.

ADJOURNMENT

1 END OF RESTRICTION ORDER

2
3 CHAIRMAN: That concludes that statement?

4 MS. BRIGGS: That concludes the statement and today's
5 hearing. 15:05

6 CHAIRMAN: Ms. Briggs, thank you very much, indeed.
7 That actually concludes the evidence from our 44th
8 witness to date. The Inquiry is now going to halt its
9 activities, as you know, this year. Just so that
10 everybody knows, the Inquiry offices will be closed 15:05
11 between 22nd December and the 3rd January next year so
12 please don't expect a response to any e-mails or
13 correspondence.

14
15 Obviously the plan for next year's, or rather the 15:05
16 schedule for next year's sittings will be sent out as
17 soon as possible but I can warn everybody, it is
18 unlikely we are going to sit again, I'm afraid, until
19 either late February or even early March.

20 15:05
21 That concludes the business that we have this year.
22 It seems rather early to do so, but I wish everybody a
23 merry Christmas and a very relaxing holiday, which
24 I think everybody deserves.

25 15:06
26 So thank you very much, everybody for your attendance
27 and we will see you in the New Year.

28
29 THE INQUIRY WAS THEN ADJOURNED