

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

HEARD BEFORE THE INQUIRY PANEL
ON TUESDAY 20TH JUNE 2023 - DAY 51

51

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I N D E X

W I T N E S S

P A G E

DAWN, P77' S MOTHER

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1 THE INQUIRY RESUMED AT 10:00 A.M. ON TUESDAY, 20TH JUNE
2 2023 AS FOLLOWS:

3
4 CHAIRPERSON: Yes.

5 MR. MCEVOY: Good morning, Chair, good morning, Panel. 10:05
6 Today we resume with a section of patient experience
7 evidence, and the Inquiry will hear from the mother of
8 P77 and then, later in the day, P77's aunt. For the
9 purpose of proceedings, P77's mother is content to be
10 known by her first name, Dawn. She is content for P77 10:05
11 to be known by his first name, which is Timmy, Timothy.
12 Later in the day then, his aunt is happy to be known by
13 her first name, which is Catherine.

14 CHAIRPERSON: All right. We'll see how we go
15 obviously. I've met both witnesses very briefly this 10:06
16 morning, but choose a spot around 11.15 and let's get
17 started.

18 MR. MCEVOY: I should say the witness is going to be
19 accompanied by her family liaison officer, who is known
20 to the Inquiry as FLSW2. 10:06
21

22 P77'S MOTHER, DAWN, HAVING BEEN SWORN, WAS EXAMINED BY
23 MR. MCEVOY AS FOLLOWS:

24
25 1 Q. MR. MCEVOY: Good morning, Dawn. You are very welcome 10:07
26 to the Inquiry. We met earlier. As you know, my name
27 is Mark McEvoy, I am one of the Inquiry counsel.

28
29 Dawn, in the file before you is, hopefully, a copy of a

1 witness statement which you have prepared for the
2 Inquiry. You recognise it?

3 A. I do, yes.

4 2 Q. It comprises, on my count anyway, about 147 pages,
5 including exhibits. If I could ask you just to look at 10:08
6 the fifty-third page of the bundle.

7 A. Right.

8 3 Q. You'll see, hopefully, your signature.

9 A. Yes.

10 4 Q. All right. Just then for procedural purposes, are you 10:08
11 content then to adopt that statement and the exhibits
12 as the basis of your evidence to the Inquiry?

13 A. Very much so.

14 5 Q. Well, Dawn, what I am going do now is read out that
15 statement. There are some parts which I'll summarise 10:08
16 which are maybe of less relevance or relate less
17 specifically to Muckamore and to your son's experiences
18 there. There are some others, which, for legal
19 reasons, it is more appropriate for me to summarise.
20 I'll indicate where those junctures are when we arrive 10:08
21 at them, okay?

22

23 I'll begin just by indicating you have made the
24 following statement for the purpose of the Muckamore
25 Abbey Inquiry. Your connection with Muckamore is that: 10:08
26

27 "My son, Timmy, is a patient in Muckamore Abbey
28 Hospital. The relevant time periods I can speak about
29 are from November 2003 to the current day. Timmy is

1 still a detained patient in Muckamore. I attach
2 photographs of Timmy at exhibit 1."

3
4 Perhaps if our team can bring up maybe page 56 and page
5 57 in the statement. we will continue just for the 10:09
6 time being.

7
8 "My late husband, Mervyn, and I had three children.
9 Graham is the eldest, born in 1993. Timmy is my middle
10 child, born 1994. My youngest child is Ian, born 1995. 10:09
11 Mervyn and I separated in 2002 and divorced in 2004."

12 CHAIRPERSON: sorry, hold on a second. Can we rotate
13 that? we can carry on.

14 MR. MCEVOY: At 57, there may be a picture of Timmy at
15 present, as I understand it. 10:10

16 CHAIRPERSON: okay. Thank you.

17 MR. MCEVOY: "Mervyn and I separated in 2002 and
18 divorced in 2004. Mervyn died on 1st June 2017.

19
20 Timmy was born on Jubilee Maternity section of the 10:10
21 Belfast City Hospital. He was a normal birth and Timmy
22 was a very quiet baby. He was easily entertained. He
23 was walking when he was around one years old. By the
24 time he was in and around 16 months old, he had would
25 have some words such as "mama", "dada" and "milk". He 10:10
26 got the MMR vaccination at Finaghy Health Centre,
27 Belfast, when he was in and around 16 months old, and
28 after that he stopped talking. This may have been a
29 coincidence as opposed to Timmy stopping talking as a

1 result of receiving the vaccination.

2
3 Just before he was two years old, I started to notice
4 that Timmy was not reacting to unexpected sounds. I
5 took him to see his general practitioner, who is a 10:11
6 wonderful doctor. He made a referral to Royal Victoria
7 Hospital in Belfast for tests to be carried out to
8 assess his hearing. It was a male consultant in the
9 Audiology Department of the Royal Victoria Hospital;
10 however, I do not recall his name. I recall taking 10:11
11 Timmy to the hospital and going into a large room where
12 Timmy was put through a lot of hearing tests. I do not
13 recall the date. I recall the tests being quite
14 intensive, like clapping behind him and various beeping
15 noises. Timmy made some reaction to the sounds. The 10:11
16 verdict of the tests was that Timmy had excellent
17 hearing. This was communicated to me with a meeting
18 with the consultant at RVH. I do not recall the date
19 of the meeting. I remember that this devastated me
20 because if Timmy's hearing was not the problem, then I 10:11
21 was wondering what was wrong with him. This consultant
22 then referred Timmy to a doctor." **Then you name the**
23 **doctor.**

24
25 "In around the same time as Timmy had the hearing 10:12
26 tests, my late father happened to be reading an article
27 in a newspaper referring to autism. He asked me to
28 read the article and he told me that he thought Timmy
29 had autism. After reading the article, I also thought

1 Timmy had autism. I made an appointment with Timmy's
2 general practitioner and he also pointed me in the
3 direction of..." that doctor to whom the consultant
4 referred you.

5
6 "This doctor worked with Mencap at Segal House, which
7 was on Annadale Avenue in Belfast. I was persistent in
8 my pursuit of that doctor and I eventually got a
9 meeting with her. I cannot remember where the meeting
10 was or the exact date but it was in and around the
11 summer of 1996. Timmy was at this first meeting with
12 him and he was not reacting to the toys in the room.

13 It was quite emotionally upsetting for me. The doctor
14 and I had a few subsequent meetings on our own without
15 Timmy where I gave her information about Timmy's
16 ability and behaviours. She gave me a letter which
17 diagnosed Timmy with having a severe learning
18 disability with autistic tendencies. I cannot locate a
19 copy of the letter. He was two years old at this time
20 and that doctor referred Timmy to Segal House in
21 Belfast in September 1996."

22 Okay, Dawn. You then go on to discuss arrangements
23 around Timmy departing on his educational journey. In
24 fairness then, I think I would summarise by saying that
25 Timmy went to Torbank School, and that was in September
26 1998. He was there until he was 17 years old.

27
28 "Timmy was happy at Torbank School. Timmy used picture
29 exchange communication, or PEC cards, to communicate.

1 These are picture cards which Timmy points to to tell
2 where he wants to go or what he wants to do.
3 Timmy grew to be an adorable young gentlemen who does
4 not speak. When he was nine years old, however, he
5 became aggressive. I remember in the summer of 2003, I 10:14
6 was at home with Timmy and my dad was there. Out of
7 nowhere he grabbed me with what I can only describe as
8 adrenaline strength by the chest, and bit me on my
9 head, my arms and the back of my right hand. My dad
10 tried to intervene but I asked him to call 999. Timmy 10:14
11 was in a complete frenzy. Whilst we waited for the
12 ambulance for around an hour and 30 minutes, my other
13 son, Graham, happened to telephone me and when I was
14 telling him what was happening, he suggested that I get
15 Timmy's heavy blanket and put it round him. That 10:14
16 instantly worked to calm Timmy down and he was calm by
17 the time the ambulance arrived.

18
19 "The occupational therapist from Torbank School lived
20 across the road from us at the time, and I remember 10:14
21 that the ambulance driver asked her if she would come
22 in the ambulance with Timmy and me. She said she could
23 not. The ambulance took us to the Royal Belfast
24 Hospital for sick children. Timmy was not being
25 treated as a priority at the hospital because he was 10:15
26 calm. He started to become agitated again due to the
27 long wait, and I walked him around the hospital to try
28 and calm him down again. Timmy tried to grab me again
29 and two women came to my aid, breaking Timmy and I away

1 from each other. I did not know who these women were;
2 they were members of the public. One of the doctors
3 then saw us. I do not remember the name of the doctor.
4 I remember that the doctor told me to leave the room as
5 she seemed to be indicating that I was escalating 10:15
6 Timmy's behaviour. Timmy did not receive any
7 treatment, and we left the hospital that evening and he
8 went to school the following day as usual.

9
10 "On the day after Timmy attended hospital and I was at 10:15
11 school, I received a call from one of Timmy's teaching
12 assistant's at Torbank - I do not remember which
13 teaching assistant it was - asking me to collect Timmy
14 as his behaviour had escalated. He advised me that
15 Timmy was grabbing out and trying to bite. I collected 10:16
16 him from school and took him home. He went to school
17 again the following day. A few weeks later I received
18 a call from Timmy's teacher at the school - I do not
19 recall his name - to say that I had to collect Timmy
20 due to his aggressive behaviour. Again, he was 10:16
21 grabbing out and trying to bite. I collected him and
22 bought him home and he went to school the next day. A
23 few weeks after that, I received another call from the
24 school, again advising that Timmy was being aggressive.
25 I collected him and took him home. However, on this 10:16
26 occasion his aggressive behaviour continued towards me.

27
28 "I called Timmy's general practitioner at the health
29 centre and he came out to our house. I agreed with the

1 doctor that Timmy would going into Muckamore on a
2 voluntary admission basis as I could not cope with
3 Timmy's behaviour. Timmy's teacher at Torbank School
4 and a social worker were also in my house at the time
5 to support me due to Timmy's escalating behaviour. The 10:17
6 teacher and social worker drove Timmy and me to
7 Muckamore. Timmy was admitted to the Coniker Ward.
8 This was in September 2003, and he was there for nine
9 months until he was discharged on a staggered basis.
10 He was finally discharged in August 2004. 10:17

11
12 "Dr. H49 was the consultant in charge of Timmy at this
13 time. She was sharp and abrasive. She never smiled.
14 I remember attending the Christmas party in Muckamore
15 in 2003, and I was dancing and she never even smiled 10:17
16 when I caught her eye. Timmy was in Muckamore
17 full-time upon his admission in September 2003 and he
18 was not attending school. However, after a while, he
19 was allowed home one or two nights per week, except for
20 when I took my other two boys on holiday for a 10:18
21 fortnight. I believe that he was diagnosed with
22 epilepsy when in Muckamore on this occasion. I do not
23 think he received any medication when he was in
24 Muckamore at this time. He went in with such
25 aggression and came back home again "normal", just like 10:18
26 he was before the aggressive behaviour started.

27
28 "I remember Dr. H49 called an admission meeting. My
29 late husband did not want Timmy to be in Muckamore. I

1 remember Dr. H49 told my late husband that there was a
2 definite need for Timmy to be in Muckamore. My late
3 husband never accepted that Timmy had autism. I
4 visited Timmy every other day. I remember on one visit
5 Timmy attacked me. I started to cry and staff took him 10:19
6 away. I do not recall the date of the visit or the
7 staff member who intervened. I attended a few meetings
8 with staff at Muckamore when Timmy was in on this
9 occasion. There was always a lot of people at these
10 meetings, and Dr. H49 was always dismissive of my 10:19
11 contribution to the meeting. Dr. H49 glazed over and
12 was disinterested in what I had to say. She did not
13 want to know any background from me as Timmy's mother.
14 I was telling her what were normal behaviours for Timmy
15 and she would not listen to me. 10:19

16
17 The building where the meetings took place was really
18 old, at the back of Muckamore. It was horrible. It
19 was called Coniker. Prior to Timmy attending
20 Muckamore, the GP and I put Timmy on a diary free and 10:19
21 gluten free diet to try and ease his aggression.
22 Apparently some people have a condition called leaky
23 gut, and this can cause chemical reaction in the brain.
24 The diet was to keep Timmy calm and to sleep better.
25 The GP admitted that this diet seemed to be working. I 10:20
26 explained to the staff at Muckamore that Timmy was on
27 this diet. I was advised by staff at Muckamore - I do
28 not recall their names - that Timmy was grabbing food
29 from other children's plate and that he therefore was

1 eating diary and gluten and was not sick and did not
2 have diarrhea. That was the end of that diet as the
3 staff in Muckamore were not following it.

4
5 "Timmy was discharged in 2004 and he went back to 10:20
6 Torbank School in September 2004. The aggression had
7 gone and all was normal again. Timmy attended respite
8 care in Lindsay House Children's Home, which provides
9 short break respite care for children aged five to 18
10 years of age, located in Dunmurry. He attended this 10:20
11 respite care from in and around 2004 to in and around
12 2011. Unfortunately during one of his visits to
13 Lindsay House, he became aggressive whilst on a visit
14 to Dunmurry village, and a member of the public, who
15 apparently worked in the army, pinned him down to the 10:21
16 ground until he calmed down. I received a call from a
17 member of staff from Lindsay House to tell me about
18 this incident, which was sometime in the spring of
19 2011. I did not know what to do at the time, I was in
20 a bit of a panic as Lindsay House told me that they 10:21
21 could not keep Timmy. I called round a few places, I
22 do not remember where specifically, but I recall that I
23 eventually called Muckamore and spoke to a man, H12,
24 who worked in the day care centre at Muckamore. He was
25 very reassuring, calm and practical and had plenty of 10:21
26 time to talk the situation through with me. He told me
27 to allow Timmy to stay overnight in Lindsay House that
28 evening as planned and he should be calm again in the
29 morning, which he was. Timmy did not go back to

1 Lindsay House after that incident as Lindsay House
2 refused to allow him back due to the severity of his
3 behaviour that day.
4

5 "There were no further serious incidents of aggression 10:22
6 with Timmy up until May 2011. My children all loved
7 their grandad; they saw him every day. My dad was
8 diagnosed with cancer and died on his 70th birthday on
9 26th April 2011. On the day of the funeral, Timmy was
10 a perfect gentleman, he was very calm. I remember 10:22
11 thinking he was so handsome. A few days after the
12 funeral, I was in my mum and dad's house and there were
13 biscuits in the drawer. Timmy wanted a biscuit but I
14 told him he was not allowed one, and he grabbed me on
15 my chest. He was so intense. There was a darkness in 10:22
16 his face and his pupils were dilated. I was able to
17 calm Timmy down using a low voice and no eye contact.
18

19 "In July 2011, due to Timmy's escalating behaviour, a
20 social worker in the Belfast Trust introduced my sister 10:23
21 Catherine and I to a type of distress reaction
22 management training called MAPA. This is a collection
23 of skills that helps a person to become calm and regain
24 control of a difficult situation as soon as possible.
25 The social worker arranged for Catherine and I to have 10:23
26 MAPA training in Holywood, County Down.
27

28 "I recall one serious attack on me when Timmy was 17
29 years old. He grabbed me by the chest and pinned me up

1 against the wall in the kitchen in our home for 15
2 minutes. I was so scared. I avoided eye contact for
3 the full 15 minutes. He eventually laughed and walked
4 away. On another occasion when Timmy was also around
5 17 years old, he grabbed Ian, my youngest son who was 10:23
6 16 years old at the time, on his chest in his bedroom.
7 Ian told me that he was able to hold Timmy off without
8 hurting him but he did not have the strength to force
9 him away. Ian called me to come upstairs, and Ian was
10 able to get away and ran out of the bedroom and Timmy 10:24
11 did not follow him. Later on that day, Timmy
12 approached Ian and stroked him on the cheek as if he
13 was apologising.

14
15 From May 2011 I started receiving calls from Torbank 10:24
16 School to come and collect Timmy due to his aggressive
17 behaviour. Timmy was grabbing clothes of the staffs'
18 chests and trying to bite them. On the first occasion
19 I did collect Timmy and brought him home, I decided from
20 previous experience that if this ever happened again, I 10:25
21 would call 999. It did happen again, and on this
22 occasion I rang 999 and asked for the PSNI and an
23 ambulance. This was in September 2011. I met the PSNI
24 and the ambulance drivers at Torbank School together
25 with the school principal. It took from 2:00 p.m. to 10:25
26 9:00 p.m. to get Timmy admitted to the Iveagh Centre on
27 Broadway, Belfast. After completing the admission
28 forms, I got home around midnight. It was one of the
29 worst experiences of my life. I could not get a doctor

1 to come out to detain Timmy. Eventually, I got through
2 to a doctor from a general practitioner's practice on
3 the Ormeau Road, Belfast, to attend Torbank School and
4 he detained Timmy under the Mental Health (Northern
5 Ireland) Order 1986. Timmy was admitted to the Iveagh 10:26
6 Centre. I remember a female physiologist - I cannot
7 remember her name - who cared for Timmy in the Iveagh
8 Centre. She was very good with Timmy. I remember her
9 telling me that I had to give up day to day
10 responsibility for caring for Timmy. I found this 10:26
11 supportive and reassuring. She told me that I had to
12 have trust in the people who were caring for Timmy in
13 the Iveagh Centre because I was unable to look after
14 him myself at home, which was true.

15 10:26
16 "I had regular meetings with staff caring for Timmy
17 when he was in the Iveagh Centre. I felt I was kept
18 well informed and Timmy had a positive experience in
19 the Iveagh Centre. I only received minutes of the last
20 meeting that I had with staff in the Iveagh Centre, and 10:26
21 I had to ask for those from the receptionist. I was
22 not given minutes of any other meetings. I never saw
23 Timmy's bedroom in the Iveagh Centre but I was happy
24 with the treatment that Timmy received at the Iveagh
25 Centre. There was a behavioural therapist and a nurse 10:27
26 - I cannot remember his surname - who cared for Timmy
27 in the Iveagh Centre. Both were very good. I
28 remember" and you name the manager, "staff at the
29 Iveagh Centre engendered my trust because I could see

1 they were having a positive influence on Timmy's
2 behaviour.

3
4 "I recall going to the School of Dentistry at the RVH
5 Belfast for a dentist appointment with Timmy while he 10:27
6 was a patient in the Iveagh Centre. I do not recall
7 the exact date. A nurse attended with us. Timmy was
8 not cooperating, which made me anxious and which in
9 turn escalated Timmy's anxiety. I recalled that I
10 asked if we would be able to reschedule the 10:27
11 appointment, and he did. I really appreciated this at
12 the time; he was very understanding. Nurse reorganised
13 the appointment and I suggested that he accompany Timmy
14 on his own without me to the next appointment, which he
15 did. 10:28

16
17 "Timmy was not allowed to stay in the Iveagh Centre
18 beyond his 18th birthday. I recall telling the senior
19 minister in our church that Timmy was moving to
20 Muckamore and he was absolutely horrified. He just 10:28
21 kept saying "You must not let Timmy go to Muckamore".
22 I remember that I said to the minister "You must be
23 thinking of how it was years ago", because he was an
24 older gentleman, but he was quite insistent that it was
25 a horrendous place. I felt that things must have 10:28
26 improved given it was 2012 and, anyhow, I had no other
27 option.

28
29 "Timmy was discharged from the Iveagh Centre on 20th

1 September 2012, which was the day after his 18th
2 birthday. When Timmy was being moved from the Iveagh
3 Centre to Muckamore, I was not allowed to be involved.
4 He was transferred to Muckamore. I received a call
5 from the deputy manager in the Iveagh Centre - I do not 10:28
6 recall her name - on 20th September 2012 to advise me
7 that the transition had occurred but that Muckamore
8 advised that we were not allowed to visit Timmy at
9 Muckamore for a while to allow him to settle in. The
10 female who called me from the Iveagh Centre seemed a 10:29
11 bit weird on the phone. It sounded like she was going
12 to tell me some more information on the transition but
13 then decided against it. She told me she was not happy
14 with staff at Muckamore as she wanted to stay with
15 Timmy to assist with the transition but the staff at 10:29
16 Muckamore would not allow it.

17
18 "I had no introduction meeting when Timmy was admitted
19 to Muckamore. I recall I might have received a few 10:29
20 leaflets but no real information on the hospital, what
21 treatment Timmy would receive, who would look after
22 him, or how or where he would be looked after. I was
23 very much in the dark in respect of provision of
24 information. When Timmy was first admitted, I was
25 advised that I was not allowed to visit him. I phoned 10:29
26 Muckamore every single day and spoke to H397, the ward
27 manager on the PICU ward, which is where Timmy was
28 located. H397 advised me that Timmy screamed and cried
29 the whole of the first week in Muckamore. I am Timmy's

1 mother and I have never seen Timmy cry in my whole
2 life. H397 told me not to visit. H397 also advised me
3 on the phone during one of my calls to him that Timmy
4 screamed and cried the whole of his second week in
5 Muckamore also. He gave me no reassurance or 10:30
6 information as to what the staff were doing to
7 emotionally support my son. When I was eventually
8 allowed to visit Timmy, which was two weeks after his
9 transfer to Muckamore, Timmy looked exhausted and
10 completely washed out. I just hugged him and sang to 10:30
11 him. He also had his hair completely shaved off, like
12 a No. 1 with a bit of stubble. This happened the first
13 time Timmy was admitted to Muckamore in 2003 also. I
14 recall it was H118, a health care assistant, who cut
15 his hair in 2012. I was really horrified by this and 10:31
16 it was devastating for me to see Timmy with no hair. I
17 was never given a reason as to why Timmy's hair was
18 shaved. Timmy has lovely thick brown glossy hair. I
19 told H118 that I appreciated that he had cut Timmy's
20 hair but I did not want it cut that short again. I 10:31
21 wanted to build a positive relationship and Timmy was
22 dependant on him. It was cut that short again on one
23 other occasion but not again after that. I got the
24 impression that H118 just did not care what Timmy
25 looked like and did not respect my wishes. 10:31
26

27 "I never saw Timmy's bedroom on PICU, nor was I allowed
28 onto the ward. I was told by ward staff, mainly H397,
29 on a number of occasions that the ward was a dangerous

1 place and it was the private home of the residents.
2 PICU was a mixed ward of males and females. I was told
3 by a member of staff - I do not recall who it was -
4 that Timmy had a friend called P95. I visited Timmy in
5 the visitor's room. The door was always propped open 10:32
6 and I was given an alarm when I visited in case Timmy
7 attacked me.

8
9 "Within months of Timmy being admitted to Muckamore in
10 2012, his brothers say he was zombified; he was 10:32
11 expressionless and dull. I tried to discuss Timmy's
12 medication with Dr. H40 and Dr. H30 on a number of
13 occasions but it was never reduced down. It was and
14 still is difficult to get details of what medication
15 Timmy was on and the doses of medication. 10:32

16
17 "On 9th June 2022, after listening to the Belfast
18 Health and Social Care Trust's opening statement at the
19 public inquiry, I e-mailed Cathy Jack, the Chief
20 Executive of the Belfast Trust, to complain about 10:33
21 Timmy's medication. She replied on the same day but
22 her response was for me to ask Muckamore directly. I
23 have noticed Timmy's medication reduced over the last
24 few months. I attach a copy of my email exchange with
25 Kathy Jack in my exhibits at Exhibit 2. 10:33

26
27 I recall going to visit Timmy in and around 2012/2013.
28 I met a female nurse that I did not know, and she said
29 "Did you hear what is happening in the Ennis Ward". I

1 did not know what she was talking about but she did
2 mention something about abuse. When she realised that
3 my son was in PICU, she backed off. I recall that she
4 said to me that not every mother was like me and that I
5 really cared for and looked after Timmy, whilst other 10:34
6 families put their loved ones into Muckamore and do not
7 bother about them any more. I thought that this was
8 very sad and I told her so, but I think she was trying
9 to make out to me that I cared too much for Timmy and
10 that I should back off a bit. She said that I was the 10:34
11 odd one out but I know now that there were many
12 involved, interested and caring families with patients
13 in Muckamore; it was not just me.

14
15 "I recall attending Muckamore to visit Timmy in around 10:34
16 2013. There were four patient files sitting on the
17 desk on the front desk and Timmy's name was on the top
18 file. I remember thinking that these are very
19 confidential patient notes that I could just lift or
20 read or take away. I complained to H397 about this, 10:34
21 and I remember at the time he was very agitated that I
22 raised it with him, and he lifted the notes and took
23 them away.

24
25 "Between 2012 and 2017, I had very few formal meetings 10:35
26 with staff in Muckamore. All of the information which
27 I received was from the staff on the ward when I
28 visited, mainly H397. I was entirely reliant on the
29 information that the ward staff told me. Dr. H40 was

1 the consultant in charge of Timmy when he was admitted
2 in 2012. I did have some sporadic meetings with
3 Dr. H40 when Timmy first went into Muckamore. These
4 only took place when I repeatedly asked for them. A
5 female nurse, not always the same person, attended 10:35
6 these meetings. We discussed Timmy, and I did receive
7 information but I never received any minutes of these
8 initial meetings. In fact, I do not think anyone took
9 minutes of these meetings. I recall attending
10 Muckamore for a meeting some time in 2014 or 2015 with 10:35
11 what I thought was a meeting scheduled with Dr. H40. I
12 advised the female nurse at the reception area - I do
13 not remember her name - that I had a meeting with Dr.
14 H40 and she said no, the meeting is with me. She led
15 me to a room where there was a male community social 10:36
16 worker who was also attending the meeting. I cannot
17 remember the name of the social worker. I remember the
18 female nurse was very rude and did not let me or the
19 social worker speak. I made a formal verbal complaint
20 to Dr. H40 about that female nurse, which resulted in a 10:36
21 meeting with Dr. H40 and H77, the Assistant Service
22 Manager, sometime later. This was the first time that
23 I met H77, I do not recall the date. I recall during
24 this meeting, H77 was very agitated and angry that he
25 had to be there. Dr. H40 apologised for not attending 10:36
26 the previous meeting. I advised that I would not have
27 had to make the complaint if he had attended the
28 meeting because he would have allowed myself and the
29 social worker to speak, and he agreed. The meeting was

1 quick and I recall H77 leaving abruptly.

2
3 "On a number of occasions when I visited Timmy when he
4 was first admitted to Muckamore, I was told that Timmy
5 was either not available for the visit as he was 10:37
6 sleeping, or he was in seclusion and I could not see
7 him. I would only be told this after I attended
8 Muckamore. It happened so regularly that I suggested
9 that I should ring the ward in advance of travelling to
10 Muckamore to check if he was in seclusion, and the ward 10:37
11 staff agreed that this was a good idea. Even then I
12 would call in advance and be told that it was fine to
13 visit, however when I arrived I was on occasion told
14 Timmy was subsequently in seclusion and I could not see
15 him. Timmy seemed to be more in seclusion than not in 10:37
16 seclusion. When I asked why Timmy was in seclusion, I
17 was told by ward staff that Timmy was acting up or that
18 he had heightened aggression. When I asked the nurse
19 in charge on any particular day what he was doing to be
20 put into seclusion, I was advised Timmy was grabbing 10:38
21 out. I was given no information on what seclusion
22 meant or where seclusion was. I was given limited
23 information on how often and the duration of time that
24 Timmy spent in seclusion. When Timmy was in seclusion,
25 I was not allowed to see him. I recall on one occasion 10:38
26 - I cannot remember when exactly - having first phoned
27 to confirm it was suitable to visit, when I arrived at
28 Muckamore I was advised that Timmy was in seclusion and
29 I was not allowed to see him. I asked H397 how Timmy

1 was and how he was doing and that I would wait to see
2 if Timmy improved. I did wait but was then informed by
3 H397 that Timmy had just left with my ex-husband in the
4 car. I could not understand this because I was never
5 allowed to see Timmy in the visitor's room at Muckamore 10:39
6 when he was in seclusion, but he was allowed out of
7 seclusion to go for a drive in the car with his dad.
8 His dad and I had arrived to visit at the same time by
9 chance. This really upset me, and H397 had no answer
10 for me as to why my ex-husband was allowed to take 10:39
11 Timmy out straight from seclusion. I felt that H397
12 allowed this because my ex-husband was a man. I did
13 not complain about this any further; I did not think
14 there was any point. I did not know the structure in
15 Muckamore and H397 was difficult to deal with. 10:39

16
17 "On the occasions that I did get to see Timmy when I
18 visited, he would mainly just be out of the shower and
19 I had to wait until he finished. I often thought why
20 would they give Timmy a shower just when I arrive. The 10:40
21 staff presented Timmy to me like he had just been given
22 a special treat because he had just had a shower. The
23 staff member would say smiling "Timmy has just had a
24 shower". I recall on one occasion I visited Timmy and
25 he had not just had a shower, he looked filthy and his 10:40
26 hair was greasy. He was led out to me by a female
27 member of staff with black hair and I was devastated by
28 Timmy's appearance and told the female member of staff
29 that Timmy needed to shower. She was reluctant but

1 took Timmy away and gave him a shower and brought him
2 back to me. I thought to myself that I would visit
3 more regularly if it means Timmy would be showered more
4 regularly. I did not complain about this because I did
5 not know who to complain to and no one would care
6 anyway.

10:40

7
8 I recall having a meeting with Dr. H40 where I
9 discussed that I was concerned about the Bamford Report
10 and the ramifications that it would have for Timmy. I
11 was concerned that Timmy would be discharged from
12 Muckamore and where he would go following his
13 discharge. I recall Dr. H40 telling me that he would
14 have to pay lip service to the report. However, he
15 said that Timmy will never ever leave here; there was
16 no expectation that Timmy would ever come out of
17 Muckamore. This had a devastating impact on me as it
18 meant there was no hope for Timmy's future. In recent
19 times, I have learned that Muckamore is a hospital
20 where patients are treated and then discharged. I was
21 not told this when Timmy was admitted to Muckamore, and
22 certainly it was the view of Timmy's consultant that he
23 would never be discharged from Muckamore. It felt like
24 this was the end of the road for Timmy.

10:41

10:41

10:41

25
26 "I remember receiving a call from one of the nightshift
27 nurses at Muckamore to advise me that Timmy's heart
28 rate was very high. I do not remember which year this
29 was or the time period. Timmy was taken to the

10:42

1 Accident & Emergency Department at Antrim Area
2 Hospital. Timmy was on medication called Haloperidol,
3 I did not know about this medication. A consultant at
4 Antrim Area Hospital advised that Timmy was to come off
5 this medication immediately. I do not remember the 10:42
6 name of the doctor. I received various calls over the
7 course of the next week advising that Timmy's heart
8 rate was very fast. I wanted to speak to Dr. H40 about
9 the Haloperidol medication and I tried calling him on a
10 number of occasions. I tried to call him four days in 10:42
11 a row and eventually he did call me back. It was hard
12 to make him out on the call and I asked him if he was
13 calling from his car, which he confirmed that he was.
14 He was calling me through a speaker in his car. I felt
15 this was inappropriate, very inappropriate and 10:43
16 unprofessional and it was as if this was not an
17 important phone call that he was making. I told Dr.
18 H40 that the consultant at Antrim Area Hospital said
19 that Timmy was to come off Haloperidol. Dr. H40 told
20 me during this call that Timmy could not be taken off 10:43
21 the medication immediately and needed weaned off the
22 drug. He seemed to be suggesting that the consultant
23 in Antrim Area Hospital did not know what he was
24 talking about.

25
26 "Timmy was again taken to the Accident & Emergency
27 Department at Antrim Area Hospital due to a high heart
28 rate. I attended at the hospital and I waited four
29 hours to speak to the consultant. I do not recall his 10:43

1 name. The consultant told me that he had told
2 Muckamore to take Timmy off Haloperidol, but Timmy was
3 still on the medication. Dr. H40 ignored the advice of
4 the Accident & Emergency consultant. The consultant
5 said that he would follow up again directly with 10:44
6 Dr. H40. He also advised me that he was unwilling to
7 discharge Timmy unless he had confirmation from Dr. H40
8 that Timmy would be taken off Haloperidol as the
9 consultant was concerned that Timmy could have a heart
10 attack. I told the consultant what Dr. H40 had said 10:44
11 about Timmy being weaned off the medication. The
12 consultant reiterated that Timmy would not be leaving
13 the Accident & Emergency Department unless he had
14 assurances from Muckamore that Timmy would be taken off
15 the medication immediately. The consultant advised me 10:44
16 that he was going to call Dr. H40 immediately to speak
17 with him.

18
19 Dr. H30 took over from Dr. H40. I do not remember the
20 time period, but H30 was then off on sick leave for a 10:45
21 very long time and during this time I had no meetings
22 with Muckamore and therefore no information about
23 Timmy. I recall one day thinking that someone else
24 must be in charge if Dr. H30 is off on long-term sick
25 leave. I made inquiries with H397. H397 advised me 10:45
26 that Dr. H50 was standing in as consultant while
27 Dr. H30 was off sick. I did get a one-to-one meeting
28 with Dr. H50 to discuss Timmy at one stage but I do not
29 remember when this was.

1 "H334 and H89 were both nurses on Timmy's ward. Timmy
2 was in PICU from 2012 to 2018. He was transferred to
3 Cranfield 1 on trial on one occasion in and around
4 2015, 2016 for one week, but the nurse on that ward - I
5 do not recall her name - said "I couldn't have that", 10:46
6 referring to my son. She also said "I will let them
7 deal with that", meaning the staff in PICU. I recall
8 Timmy had a seizure when he was in Cranfield 1. I
9 cannot exactly when this was or who told me. I was
10 only told in 2018 by Dr. H30, one of the consultants in 10:46
11 charge of Timmy in Muckamore, that he was taken off
12 detention under the Mental Health Order during this
13 transfer from PICU to Cranfield 1 as the decision to
14 continue to detain him needed to be reviewed by a
15 tribunal, and he was transferred to Cranfield 1 as a 10:46
16 voluntary patient. Dr. H30 told me this was done as a
17 way to get around the system. I was advised by Dr. H30
18 that if Timmy was continuously detained, it had to be
19 reviewed by a tribunal. If he was taken out of
20 detention even for a brief period, this meant that his 10:47
21 detention did not need to be reviewed by a tribunal.
22 When Dr. H30 told me this, it was very much matter of
23 fact that this was the practice in Muckamore but I felt
24 that they were using a loophole to get round the law.
25 Timmy was then detained again under the Mental Health 10:47
26 Order and transferred back to PICU Ward.

27
28 "There were two nurses called H113 and H398 who looked
29 after Timmy on PICU Ward. When I visited Timmy, I

1 asked that the staff did not come in to speak to me in
2 front of Timmy as I preferred that they could speak to
3 me after my visit. My visits are precious time for
4 Timmy and I to spend together. I did not want to speak
5 about Timmy in front of him. All of the staff ignored 10:47
6 this, especially H397. I remember one visit in 2015 or
7 2016, when I was having a pleasant and relaxed time
8 with Timmy, and H113 came into the room and Timmy got
9 up and stood right beside him on his right-hand side.
10 It was as if Timmy was standing to attention. I asked 10:48
11 H113 what this was about and he said that it was
12 nothing, that Timmy was just his wee mate. I was
13 disturbed by this as I thought it was a bit unusual. I
14 was worried about this and I recall in the early days
15 of Timmy being in Muckamore, that he would flinch when 10:48
16 H113 came into the room. Timmy also used to flinch
17 when H397 came into the room. I remember saying to
18 H397 that Timmy used to flinch like that when his dad
19 came into the room, and Timmy's dad physically
20 assaulted him on numerous occasions. H397 just 10:49
21 responded talking about where he was going on his next
22 holiday.

23
24 "I recall visiting Timmy one time and he was making
25 very intense eye contact with me. I believe this was 10:49
26 in and around Christmas 2015. Timmy is non-verbal and
27 does not use sign language. He makes strong eye
28 contact with those who he trusts, like me and his
29 brothers. He was making such strong intense eye

1 contact with me, I kept saying to him I know you're
2 trying to tell me something but I do not know what it
3 is. I was upset because I did not know what he was
4 trying to tell me, so I just kept telling him that I
5 loved him and his brothers loved him, and I hugged and 10:49
6 kissed him. I raised this with H397 at the time.
7 However, he completely dismissed it.

8
9 "I recall a nurse called H271, who appeared to come
10 across as more senior. I do not know his official 10:50
11 title. He seemed to know Timmy and was good at dealing
12 with him, and perhaps some of the other nurses were not
13 managing Timmy's challenging behaviour so well. He was
14 a capable, polite man. I recall another nurse
15 assistant called H54; he seemed to be open and honest 10:50
16 with me. I recall having a meeting with H397 and
17 Dr. H30, I do not recall when this was, and H397 was
18 telling Dr. H30 that Timmy had been swimming.
19 After the meeting, I was walking out with H54 and H54
20 told me that Timmy had not been swimming for a long 10:50
21 time. I was so disappointed to hear this and I found
22 it deeply upsetting because Timmy loves to swim. I
23 followed up with H397 by telephone about this and he
24 admitted to me they should not have told Dr. H30 that
25 Timmy was swimming. I remember asking him if he would 10:51
26 correct this false information provided to Dr. H30 at
27 the meeting but he again responded talking about his
28 holidays. On another occasion I was visiting Timmy and
29 I went into my usual meeting room, and H54 was in there

1 with what looked like his lunch, and when I walked him
2 he snapped the lunch up and left the room abruptly
3 without speaking to me. I do not know if he was
4 annoyed that I was interrupting his lunch or not but it
5 was a prearranged visit. I have never seen H54 with 10:51
6 Timmy so I do not know how they get on.
7

8 I recall a Deputy Ward Manager called H16. I remember
9 that he had attended one of my meetings with Dr. H50 to
10 do with Timmy's diet some time in 2016. Dr. H50 was 10:51
11 filling in whilst Dr. H30 was off on sick leave. I was
12 provided with a sheet of paper, which looked like
13 something produced from a search on Google. It had a
14 few words on it to do with Timmy's diet. The word
15 "dietician" was spelt incorrectly. The piece of paper 10:52
16 looked like something that was conjured up to produce
17 something in writing to me. It was so poor they would
18 have been better to give me nothing. After that
19 meeting, H16 slipped me a small piece of paper and told
20 me covertly to have a look at that and call him. He 10:52
21 indicated to me that I should not speak about this to
22 anyone. It was the contact details of advocates at
23 Bryson House. I did not even know the service existed.
24 I made contact with Bryson House by telephone and I was
25 allocated a carer's advocate. I cannot recall when 10:52
26 this was in the process.
27

28 In and around 2016, 2017, my family put our money
29 together to purchase a rocking chair and weighted

1 blanket for Timmy for his Christmas present at the
2 suggestion of the ward. It cost £1200. H334, Timmy's
3 named nurse at the time, had to get the chair checked
4 by health and safety. It took about one year to get
5 the chair into Muckamore. We exhausted all possible 10:53
6 options and suggestions as family to get the chair and
7 blanket into Muckamore. We offered to get the chair
8 delivered to Muckamore. Then I suggested that we could
9 have the chair delivered to my home and we would then
10 arrange a removal van to bring it to Muckamore. All of 10:53
11 this was refused. We were told that the Belfast Trust
12 would have to order the chair directly, and when it
13 eventually did appear, six of the exact same chairs
14 appeared on the ward. I queried this with H397 on the
15 basis that my family had to buy the chair but Muckamore 10:54
16 then bought six of the identical chairs for other
17 patients. I later recall that H287, deputy in charge
18 of Learning Disability Services for the Belfast Trust,
19 advised me during a meeting on 9th August 2018 that the
20 Belfast Trust should have paid for Timmy's chair and 10:54
21 blanket, and I received a refund of £900 which H287
22 arranged, but she told me not to tell anybody about the
23 refund. I attach a copy of the minutes of the meeting
24 on 9th August 2018, Exhibit 3, prepared by my Bryson
25 House advocate, who also attended the meeting. 10:54
26

27 "During Timmy's time in PICU, I was constantly asked
28 for money by the staff to purchase things for Timmy
29 such as toiletries, money for the Cosy Corner cafe at

1 Muckamore and takeaways. The staff stipulated to me
2 that cash was preferable. I handed over cash every
3 week to H397 or whatever nurse was on duty at the time.
4 I was paying about £100 per week. I asked H397 on at
5 least five occasions for receipts or an account of what 10:55
6 the money had been spent on, and each time he replied
7 "Absolutely", but I never received anything from him.
8 I usually received a receipt from the ward for the
9 money I paid in but I never received any receipts for
10 the items that were allegedly purchased for Timmy. I 10:55
11 attach copies of some receipts at Exhibit 4. I recall
12 that I complained to the cash office in the
13 administration building in Muckamore in and around 2014
14 to 2015. I wanted to know the balance on Timmy's
15 account. I was advised by a woman who was working at 10:55
16 the administration desk, at the time on the telephone,
17 that I was not entitled to this information as this was
18 Timmy's money. The woman would not provide me with any
19 details. I did not understand this as I was the person
20 supplying the money. About a year later, I contacted 10:56
21 the administration desk again and got to speak to a
22 different woman which did provide me with Timmy's
23 balance, which was £100 at that time. I had expected
24 it to be a lot more given the amount of money I was
25 handing into Muckamore at the time. I recall my sons 10:56
26 saying to me that they did not understand how other
27 families less well off than us could afford to pay all
28 of the money I was paying into Muckamore every week.
29 We did not want Timmy to be without anything.

1 "I also recall from 2012 to 2017, every time I visited
2 Timmy he was wearing clothes that could only be
3 described as rags that did not belong to him. I bought
4 Timmy really nice clothes like Ulster rugby shirts, and
5 Canterbury and Nike sportswear, but I never saw him 10:57
6 wear them. I queried with H89, the nurse in PICU Ward,
7 and she advised me that if Timmy's pad leaked, his
8 clothes needed to be boiled in the sluice, which mostly
9 destroyed the clothes and they had to be put in the
10 bin. I suggested to her that there is no point in 10:57
11 putting clothes into boiling sluice if the outcome is
12 that they have to go into the bin; they may as well be
13 taken off Timmy and be put straight into the bin.
14 Timmy never wore the good clothes that I bought him and
15 H89 suggested to me that I should stop buying Timmy 10:57
16 good clothes. However, I wanted Timmy to dress in the
17 same way that his brothers dress.

18
19 "I also recall purchasing Timmy an expensive pair of
20 boots in and around May 2015 and every time I visited, 10:57
21 he was not wearing them. I queried this with whichever
22 nurse was on the ward at the time and I got various
23 answers like "He kicks the heels out of them", or "He
24 does not like wearing them". More recently, since I
25 have become aware of the abuse, I believe staff did not 10:58
26 allow Timmy to wear the boots because it was easier to
27 drag him along the floor in his socks.

28
29 "I recall on another occasion I had purchased nice

1 shoes for Timmy, and the staff told me that he did not
2 want to wear them as his toes were too cramped. I
3 discovered to my horror when I went to give Timmy a
4 foot massage in around April 2015 that Timmy's toenails
5 were so long that they grew over the top of his toe and 10:58
6 curled at the back. It was not the shoes that were the
7 problem, it was his toenails. I remember being
8 devastated about this at the time. I complained to
9 H397 and told him that all of the staff, including him,
10 are involved in changing and bathing Timmy and they 10:58
11 should have noticed. He did not have much of a
12 response for me. I asked for the podiatrist to come in
13 and see Timmy on the same day. I recall I had a small
14 pair of baby nail clippers in my bag and I tried tidy
15 up Timmy's nail as best I could. I took a photograph 10:59
16 of Timmy's toenails but I subsequently deleted it as I
17 found too upsetting to look at. Sometime later I was
18 giving a foot massage and his toenails were nearly as
19 bad as the last time I clipped them. I absolutely
20 flipped out. I approached H397 and asked them why 10:59
21 Timmy's nails were like this again. I went on and on
22 about the state of Timmy's toenails to all of the
23 nurses, and I eventually I was told that the podiatrist
24 did call but he was too busy to see Timmy. I was
25 absolutely appalled at the state of Timmy's toenails 10:59
26 but the staff did not seem to care. Their response
27 indicated that this was almost normal. Timmy did see
28 the podiatrist eventually, which was several weeks from
29 I raised the issue regarding Timmy's toenails. I kept

1 a check on Timmy's toes when I visited to make sure
2 they did not get into that state again. Every time I
3 raised a concern to H397, he would dodge my concern and
4 start talking about his holidays.

5
6 "When Timmy was younger and his grandad was still
7 alive, I spent a lot of time practising shaving on my
8 dad so that I knew how to shave Timmy properly. On my
9 dad's advice, I always purchased good razors for Timmy
10 such as Gillette and Mach3. These razors needed a new 11:00
11 blade inserted every few days but I was regularly being
12 asked by the staff on the ward to buy Timmy the whole
13 new razor, which is expensive. I do not know what was
14 happening to the razor part as this is reusable.

15 Frequently when I visited Muckamore, Timmy has a lot of 11:00
16 cuts on his face which looked like shaving cuts. I
17 queried this with the staff on the ward and the
18 response frequently came back Timmy had been shaved
19 using a disposal Bic razor. This is a very cheap razor
20 that I would never have used on Timmy. It was 11:01

21 suggested to me that I should buy Timmy an electric
22 razor. Initially I agreed, but then I remembered that
23 Timmy does not like the buzz or cutting sounds made by
24 an electric razor. I asked the staff to use the
25 Gillette or Mach3 razors I had purchased for him. It 11:01
26 really upset me that the staff were using cheap Bic
27 razors on Timmy when it was not what I had bought for
28 him. This battle on the type of razor used to shave
29 Timmy continues to this day.

1 "Timmy put on a lot of weight when he was in Muckamore.
2 I constantly raised it with various ward staff and his
3 various consultants. I recall raising the issue with
4 Dr. H50 in a meeting. I do not recall the year but it
5 was when Dr. H30 was off on long-term sick leave and 11:01
6 Dr. H50 was Timmy's stand-in consultant at the time.
7 Timmy's Bryson House advocate attended the meeting. I
8 remember it was suggested at this meeting that Timmy
9 would benefit from using an exercise bike but Dr. H50
10 did not seem to know what an exercise bike was. A 11:02
11 general practitioner who was at the meeting had to
12 explain it to him, which I thought was very strange.
13 Dr. H50 seemed to be oblivious to Timmy's weight gain.
14 At first I thought it might be due to his medication.
15 I recall the general practitioner - I do not recall his 11:02
16 name - suggesting that Timmy's diazepam be reduced by
17 Dr. H50 shot that idea down. I thought it was
18 unprofessional to speak to another doctor in this way
19 in front of me. I do not recall when this was but
20 Dr. H50 referred me to the dietician. I asked him why 11:02
21 did he refer me to the dietician, surely he should be
22 referring to the nurses on the ward to the dietician as
23 they are looking after Timmy. He replied, "No, you"
24 and pointed at his finger at me. I did meet the
25 dietician, I cannot remember when this was. I do not 11:03
26 remember her name but I recall that she presented as
27 being very defensive at the beginning of the meeting.
28 I think she thought that I was going to be difficult.
29 However, she relaxed when she realised that I had no

1 issue with the diet plan prescribed for Timmy, it was
2 the fact that the diet plan clearly was not being
3 followed by the nursing staff on the ward. Timmy would
4 not have been the size he was if it was being followed.

11:03

5
6 "I purchased flax seeds as Timmy had a constipation
7 problem, and I asked for these to be sprinkled into
8 Timmy's breakfast. I was told by a member of domestic
9 staff called H410 - I do not remember her name - to
10 stop bringing the flax seeds because they had about 12
11 boxes in the kitchen, which disheartened me because it
12 meant that staff in Muckamore were not using it in his
13 food as I had asked. I also phoned H89, one of the
14 nurses on the ward, in and around mid to late 2016 and
15 suggested she give more Timmy more fruit to assist with
16 constipation. I remember she told me with pride that
17 she was giving bananas and I had to tell her that
18 bananas can cause constipation. I recall that I also
19 spoke to Dr. H30 about Timmy's weight when he was back
20 from sick leave. I do not recall when this was. I
21 suggested to her Timmy should be allowed to use the
22 exercise bike, and she agreed. No change in Timmy's
23 weight seem to happen for a while but over the years
24 Timmy's weight did decrease.

11:03

11:04

11:04

11:04

25
26 "The ward staff in Muckamore made me feel like a bad
27 mother about being particular about what Timmy had to
28 eat. I was really concerned about his weight and the
29 size of Timmy's tummy because he was obese. I wanted

1 him to have a balanced diet but I was made to feel like
2 I was saying to the staff that Timmy should not have
3 any treats at all, which was not the case. The ward
4 staff would say to me that I was "insisting" on Timmy
5 having a good diet. I recall the ward staff would say 11:05
6 that they gave Timmy a wee treat, as if they were being
7 nice to him, and I was the bad mother who would not
8 allow her son any treats. The ward staff would say
9 "The mother does not allow Timmy to have any treats".
10 I recall at Timmy's Bryson House advocate telling me 11:05
11 that I should allow Timmy to have treats, which proved
12 to me that the staff in Muckamore were talking about me
13 behind my back and telling my Bryson House advocate
14 that I did not allow Timmy to have treats, which was
15 not true. Timmy has reflux and should not eat spicy 11:05
16 food. This was ignored by the staff. For example,
17 Timmy would be given salt and chili chicken or curry
18 takeaways, which he should not be eating.
19
20 "There is also a reluctance to allow or encourage Timmy 11:05
21 to exercise by Muckamore Staff. Every time I suggested
22 that Timmy should be taken for a walk or swimming, I
23 was constantly advised by ward staff that they were
24 short-staffed and they were not able to take Timmy out.
25 I recall asking ward staff that I wanted a meeting with 11:06
26 H12, the manager of the day care centre at Muckamore
27 that I had spoken to at the time when Timmy had to be
28 pinned down in the street in Dunmurry whilst he was
29 attending Lindsay House in respite care. I had good

1 faith in him as he helped me during that crisis. I
2 eventually had a meet with H12, which I think was in
3 around 2016, 2017. I explained that Timmy needed
4 exercise and fresh air as this was good for his
5 physical and mental health and helps to deescalate his 11:06
6 aggression. I suggested that Timmy be allowed out for
7 walks and on an exercise bike as well as swimming. I
8 explained to H12 I had constantly been asking for this
9 with the nursing staff and I remember he replied saying
10 "That information does not always reach me". I recall 11:07
11 during this meeting that he advised me that my
12 suggestions would be implemented. I had faith in him
13 as the day care manager that he would implement these.
14 He appeared affable, agreeable, and to know what he was
15 doing. I waited about six to eight months and 11:07
16 unfortunately my requests on exercises were not
17 implemented. I therefore asked for another meeting
18 with H12. During this meeting I asked him why he had
19 not made sure that my suggestions were implemented.
20 His response was vague. I recall thinking that my 11:07
21 suggestions would never be implemented. I was not
22 asking for the earth, I was only asking that my son get
23 some fresh air and exercise.

24
25 "Eventually, in around April 2020, Timmy was permitted 11:07
26 to exercise on a tricycle. This was arranged by the
27 care assistants called H399, H400 and H401. I do not
28 know their full names. I remember one time they did a
29 video call with me when he was on the tricycle. I have

1 had a lot of email communication with the ward staff
2 regarding Timmy's need for exercise and fresh air. By
3 way of examples, I would attach copies of three emails
4 dated 2nd September 2019, 5th June 2022 and 9th June
5 2022, where I have written to complain to Muckamore at 11:08
6 Exhibit 5.

7
8 "From when Timmy went into Muckamore in 2012, I
9 received calls on daily basis from various ward staff
10 in PICU to advise that Timmy had been hit by another 11:08
11 patient. I was always advised on these calls that I
12 had a right to report the incident to the PSNI, but the
13 undertone of the conversation was that Timmy has hit
14 patients and that the other families have not reported
15 the matter to the PSNI. I did not want to get the 11:08
16 patients into trouble because most of the time it is
17 not their fault, and as long as Timmy was okay, I never
18 felt the need to report the incidents to the PSNI.

19 In 2017 I remember I received a call from H402, a male
20 nurse in PICU ward, advising me that a female staff 11:09
21 member had pushed Timmy out of his rocking Chair to get
22 him over to eat his food. The male nurse asked me what
23 I wanted to do about it. I recall having a discussion
24 about how it happened. I asked if it was done in a
25 jovial way or was it done in an aggressive way. The 11:09
26 male member of staff suggested it was jovial, so I
27 decided not to report it".

28
29 Then we'll move past that as it touches on a memorandum

1 of understanding issue but maybe return to it in your
2 questions.

3 CHAIRPERSON: All right. I think you're going to come
4 back to that?

5 MR. MCEVOY: I am going to come back to that in my
6 question.

11:09

7
8 "I felt that H402 was a very good nurse. I remember
9 him telling me to "Speak up, Dawn. If you're unhappy
10 about something, speak up". This was before I was
11 aware of the abuse and therefore I did not understand
12 what he was saying. I was thinking but what would I
13 have to complain about over and above the issues that I
14 have raised, like with Timmy's toenails, his diet and
15 his lack of fresh air and exercise. He also said to me
16 at one time, like almost as if he was talking to
17 himself, "I don't think they are as bad on Timmy
18 probably because he has been here the longest". He
19 walked away after he made those comments and I did not
20 get a chance to ask him what he meant. I never saw him
21 again after he made those comments to me. Again, this
22 was before I was made aware of the abuse.

11:10

11:10

11:10

23
24 "Timmy was receiving no state income by way of benefits
25 from when he moved to Muckamore until a few years ago.
26 I did not know that he was entitled to benefits until
27 my advocate from Bryson House put me in contact with
28 H155, a social worker at Muckamore in around 2018. The
29 social worker should have advised me of this when Timmy

11:10

1 went into Muckamore. For many years I was paying money
2 into Muckamore Timmy was entitled to from the state.
3 This was the answer to the question from my sons as to
4 how other families could afford the payments that I was
5 making to Muckamore. 11:11

6
7 "My experience of the social work team in Muckamore is
8 that it is dreadful. Timmy's social worker was H93
9 when he started in Muckamore. I did have a few
10 meetings with him at the start but I was told by 11:11
11 someone on the ward - I cannot remember who - but it
12 was probably H397, H93 was off sick when I asked to
13 meet him for an appointment. I was then told this on a
14 number of occasions that H93 was off on long-term sick
15 leave. Therefore, as far as I was aware, Timmy did not 11:11
16 have a social worker for many years. I was speaking
17 with H93 recently and he advised me that he was
18 retiring. I was asking about him being off sick for a
19 number of years and he said he was not off sick. I do
20 not know what happened but the staff on the ward, 11:12
21 particularly H397, were telling me that H93 was off
22 sick and he told me recently that he was not, but if he
23 was not off sick, where was he all of those years
24 because he was not being Timmy's social worker. Timmy
25 was allocated a social worker called H403 a year or two 11:12
26 ago. I remember at my first meeting with him, he was
27 really positive and listening to me and when I asked
28 the question he would reply, "I will find that out for
29 you, Dawn". Within a month or two, he was like

1 everyone else who worked in Muckamore, like a closed
2 book and unwilling or perhaps unable to help me with my
3 queries and concerns."
4

5 That might be convenient. 11:12

6 CHAIRPERSON: You are about half way through, in fact,
7 aren't you? All right. It is important that people
8 can focus. We'll take 15 minutes. You will clearly
9 finish reading this before lunch?

10 MR. MCEVOY: Yes. 11:13

11 CHAIRPERSON: Then we'll see how the witness feels
12 about whether to carry on straight into questioning.

13 MR. MCEVOY: The witness and I have had a conversation
14 about some of the material. It's possible we will be
15 able to make a bit more time, but I think probably the 11:13
16 same again is fair to say.

17 CHAIRPERSON: That's fine. We are not rushing
18 anything. Okay, thank you very much indeed. 15
19 minutes.

20 11:13
21 THE INQUIRY BRIEFLY ADJOURNED AND RESUMED AS FOLLOWS:

22
23 CHAIRPERSON: Thank you very much.

24 MR. MCEVOY: Thank you, Chair.

25 11:36
26 Dawn, we paused at the end of paragraph 53, so I am
27 going to take it up at paragraph 54. All right. There
28 you tell us then:
29

1 "I found out about the abuse on PICU in September 2017.
2 I was told during a telephone call from whom I later
3 found out to be H411, who was a safeguarding manager in
4 the Belfast Trust. H411 phoned me out of the blue.
5 She did tell me her name at the start of the 11:36
6 conversation but I immediately forgot it. I did not
7 know where she was calling from. She told me that
8 there was abuse at Muckamore and that Timmy was
9 involved. She advised me that there were CCTV
10 footage". Then the next bit touches on the memorandum 11:37
11 of understanding and some of the matters that are at
12 the heart of the police investigation.
13 CHAIRPERSON: Sorry, can you give me the paragraph?
14 MR. MCEVOY: It's paragraph 54, Chair, and it's the...
15 CHAIRPERSON: The second part? 11:37
16 MR. MCEVOY: Just after "Timmy was involved".
17 CHAIRPERSON: All right. Dawn understands why we are
18 doing this?
19 MR. MCEVOY: And Dawn understands this.
20 A. Yes, I do. 11:37
21 MR. MCEVOY: Just to confirm. I don't want to speak
22 for you, of course.
23 A. You have explained it, yes.
24 MR. MCEVOY: If we can take it up then at the top of
25 page 26 and we are still on paragraph 54. I'll pick it 11:37
26 up there where you say:
27
28 "I remember that she abruptly ended the phone
29 conversation, saying that she had to go. She told me

1 that I was not to tell anyone because the PSNI were
2 involved. After the call, I did not remember her name
3 or know where she was calling from and I did not have a
4 phone number to call her back on. I found this to be
5 very traumatic. I had no warning of the phone call or 11:38
6 the information which was described to me about Timmy's
7 abuse. The only two people I told about the call was
8 my sister, Catherine, and Timmy's two brothers. I did
9 not tell anyone else as I recall H411 stressed on the
10 phone call to me that I was not to discuss it with 11:38
11 anyone.

12
13 "In January 2018, consultant Dr. H30, and H155, a
14 social worker at Muckamore, came out to visit me at my
15 home. Dr. H30 told me that there was potential for 11:38
16 Timmy to be resettled in March 2018. Dr. H30 appeared
17 to be very excited by this as she was clapping her
18 hands in a child-like manner. The resettlement was to
19 be done through a charity called Autism Initiatives.
20 This was the first time I heard anything about the 11:39
21 resettlement but it appeared from what Dr. H30 was
22 saying to me that it was all organised. I was
23 surprised by this. I was also surprised that they
24 thought this could be organised and implemented within
25 two months. I decided to take the opportunity to share 11:39
26 the information advised to me during my call with H411
27 in September 2017 regarding the abuse with Dr. H30 and
28 H155 at this meeting. H155 encouraged me to share the
29 information I had been given, and H155 and Dr. H30

1 advised me during the meeting that they were aware of
2 the abuse.

3
4 "During this meeting with H155 and Dr. H30, I was also
5 advised that Timmy's continued detention under the 11:39
6 Mental Health Order was to be the subject of a tribunal
7 review, which was Timmy's first review that he had
8 since he was admitted to Muckamore in 2012. This took
9 place between January 2018 and March 2018. I was
10 advised by H155 by email dated 8th January 2018 that I 11:40
11 should contact a solicitor to represent Timmy at the
12 tribunal, and then H284, a social worker based in a
13 health centre in Belfast, emailed on 10th January 2018
14 with details of a solicitor. A copy of these emails
15 are attached at Exhibit 6." Then you indicate who the 11:40
16 firm of solicitors was.

17
18 "The tribunal hearing was sitting in the administration
19 building at Muckamore. I attended the tribunal. At
20 this time, I thought Timmy was moving out of Muckamore 11:40
21 in March 2018. I recall that the solicitor came out of
22 the tribunal room and told me that the Queen's Counsel
23 who was sitting at the tribunal judge knew me. I
24 advised the solicitor that I was happy to proceed with
25 the tribunal judge was. I was allowed into the 11:41
26 tribunal hearing and I was invited to join everyone at
27 the table by the tribunal judge. Dr. H30 and H155 were
28 in attendance. I got the impression that the Muckamore
29 staff did not want me to be present at the tribunal.

1 After the reports were presented and discussed, the
2 tribunal was adjourned and we went into Dr. H30's
3 office where she advised me that she was leaving
4 Muckamore. The outcome of the tribunal with is that
5 Timmy continued to be detained under the Mental Health 11:41
6 Order 1986. I was pleased with that outcome.

7
8 "There was a meeting a few weeks after the tribunal and
9 Dr. H30 attended. The meeting was in Muckamore. I
10 cannot recall who else was in attendance. We discussed 11:41
11 the resettlement, and Dr. H30 seemed to be trying to
12 get everything sorted for the resettlement before she
13 left Muckamore. There was a form I needed completed
14 regarding Timmy's benefits which needed to be filled in
15 by a doctor in charge of Timmy. I recalled Dr. H30 11:42
16 taking the form from me at this meeting and
17 simultaneously completed it during the meeting, signed
18 it and gave it back to me.

19
20 "The resettlement did not proceed as planned in March 11:42
21 2018 as Autism Initiatives did not have the necessary
22 funding or staffing levels. There were ongoing
23 meetings between Autism Initiatives and Muckamore and
24 I. There were two psychologists working on the
25 resettlement in Muckamore but they both left Muckamore 11:42
26 before the resettlement took place. The psychologist
27 were called H404 and H405. I was working full-time
28 myself and was being asked to attend constant meetings
29 and phone calls at Muckamore. At the same time, I was

1 also receiving phone calls from H283, a social worker
2 and safeguarding in the Belfast Trust regarding
3 safeguarding issues with Timmy in Muckamore.
4

5 "On 8th March 2018, during a meeting which took place 11:43
6 in Fairview, which is a building across the road from
7 the Mater Hospital in Belfast, with my advocate from
8 Bryson House, H287, the deputy in charge of Learning
9 Disability Services for the Belfast Trust and a
10 Business and Service Improvement Manager of the Belfast 11:43
11 Trust assisted me in formulating a complaint against
12 H411. I recall after the meeting, I was unhappy with
13 some of the wording in the complaint and e-mailed the
14 Business and Service Improvement Manager of the Trust
15 on 14th March 2018, asking for it to be amended. I 11:43
16 attach a copy of the Service Group Complaint Inquiry
17 record form dated 8th March 2018 regarding H411 at
18 Exhibit 7, and a copy of my email to the Business and
19 Service Improvement Manager dated 14th March 2018 at
20 Exhibit 8. 11:44

21
22 "Shortly after I made this complaint, H411 phoned me to
23 discuss the complaint against her. She also called to
24 my house and mentioned the complaint again and
25 apologised on this occasion. I e-mailed the business 11:44
26 and service improvement manager on 23rd March 2018 to
27 advise him of this as I was unhappy about it. I cannot
28 recall if the Business and Service Improvement Manager
29 responded to my email. I attach a copy of my email to

1 the Business and Service Improvement Manager of the
2 Belfast Trust dated 23rd March 2018 at Exhibit 9.

3
4 "I was unhappy with the lack of information H397 gave
5 me. He had no compassion or interest in Timmy. Every 11:45
6 time I asked a direct question about Timmy such as was
7 Timmy in seclusion today, he responded by telling me
8 that he was just back from holiday or about to go on
9 holiday. He avoided answering any of my questions by
10 talking about something else. I raised this at the 11:45
11 meeting with H287 and the Business and Service
12 Improvement Manager on 8th March 2018. During that
13 meeting H287 suggested to me that if I was unhappy with
14 H397, then I should raise a formal written complaint
15 against him too, which I did at that meeting. I attach 11:45
16 a copy of the Service Group Complaint Inquiry record
17 form at Exhibit 10.

18
19 "I recall H397 calling me and asking me to retract the
20 complaint. I thought this was very unprofessional and 11:45
21 threatening. It seems that contacting the complainant
22 directly to intimidate them is standard practice at
23 Muckamore!

24
25 I subsequently received a call from another individual, 11:46
26 I do not know his position or where he was calling
27 from, to acknowledge that I had received my complaints
28 regarding H411 and H397. He advised me that H411 and
29 H397 had both been spoken to and were aware of the

1 complaints. I felt like he was pressing me to agree to
2 close the complaints, which I reluctantly agreed to do.
3 Having had very few meetings up to 2017, which was in
4 and around the time I was told about the abuse, I was
5 being inundated with meetings and phone calls by 11:46
6 Muckamore. Prior to 2017 I only knew of the ward
7 staff; Timmy's consultant; I met H77 once. Since 2017,
8 management at Muckamore and Belfast Trust have been
9 engaging with me whereas before I did not know these
10 people existed. 11:47

11
12 "In and around 2017, H282 took over as ward manager of
13 PICU. There were monthly update meetings at Muckamore
14 attended by over 10 staff members. No one introduced
15 themselves. I recall on a number of occasions asking 11:47
16 for minutes of the meetings from the ward staff who
17 also attended the meetings as there was clearly
18 somebody taking minutes, but I was told by H282 that it
19 would be a number of weeks before the minutes would be
20 available. At times during these meetings, I recall 11:47
21 that I could not hear what people were saying because
22 the note-taker was typing so loudly on the laptop.
23 When I followed up on receiving the minutes of
24 meetings, I was fobbed off time and time again. This
25 was with a variety of different ward staff. I rarely 11:48
26 ever received minutes of meetings.

27
28 "I recall that I was invited to attend a lot of
29 resettlement meetings at Muckamore. There would be

1 maybe 30 people at these meetings, and they lasted for
2 about two hours. I was really busy at work at this
3 time and I had to take annual leave to attend the
4 meetings. Some of the meetings were a waste of time
5 and I recall sitting watching everyone who was squeezed 11:48
6 around the boardroom table at Muckamore and thinking
7 they were all being paid. This was their job to attend
8 these meetings so it did not really matter if the
9 meeting achieved nothing, but I was juggling work and
10 taking annual leave to be there. It made me really 11:48
11 angry.

12
13 "I also recall that staff at those meetings used a lot
14 of acronyms and I did not always know what they mean.
15 On one occasion I remember H406, a social worker at 11:48
16 Muckamore, using an acronym and I asked her what it
17 meant. She stopped talking and said "oh, I actually do
18 not know what that stands for". So, the staff were
19 using terminology that they did not even understand
20 themselves, how was I supposed to understand?" 11:49

21
22 In the next number of paragraphs Dawn, from 65 through
23 to the bottom of paragraph 69 on page 31 then, you
24 detail before the Inquiry some matters which are
25 covered by the memorandum of understanding. I suppose 11:49
26 by way of reassurance on behalf of the Inquiry team, I
27 can indicate to you that Core Participants have this
28 information and, of course, the Inquiry itself has this
29 information.

1 CHAIRPERSON: I can indicate the Panel have all read
2 this statement, of course, in full, including those
3 paragraphs.

4 A. Yes.

5 MR. MCEVOY: Okay. So I am going to take up, Dawn,
6 then at paragraph 70 all right. 11:49

7 CHAIRPERSON: 70.

8 MR. MCEVOY: we are top of page 32 now. I think we
9 have a bit of inclement weather above us so I'll speak
10 up a little bit. 11:50

11
12 "Since I was made aware of the abuse, I had a meeting
13 with the finance man called H412 in a building beside
14 Graham House at Knockbracken Healthcare Park,
15 Saintfield Road, Belfast. I think he was senior 11:50
16 manager in Patient Client Accounting in Belfast Trust.
17 He advised me that he had meticulously gone through all
18 Timmy's money and receipts, and he laughed openly and
19 said there was a lot of money spent on takeaway food.

20 I recall the man saying "Timmy must be addicted to 11:50
21 takeaway food given the amount of money spent". I took
22 from what the man said and the way that he said it that
23 Timmy could not have eaten all of the takeaway food
24 that his money was allegedly used to buy. However, I
25 could not prove this. I have always been very wary as 11:51
26 to what is happening with the money I give to Muckamore
27 for Timmy.

28
29 "In the last year I am now occasionally given receipts

1 for Timmy's expenditure and I am given a statement on a
2 monthly basis. The amount of money that I am asked for
3 by Muckamore has reduced dramatically from when Timmy
4 was admitted to Muckamore in 2012. Muckamore has never
5 provided me with a full account for all of the money 11:51
6 which I gave into the hospital for Timmy.

7
8 "In and around 2018 I recall receiving a call from a
9 dentist from the School of Dentistry at the Royal
10 Victoria Hospital. She was calling to ask my 11:51
11 permission to do some work on Timmy's teeth. She
12 advised me that Timmy's teeth had not been cleaned for
13 years. This would confirm not only that the staff at
14 Muckamore did not brush Timmy's teeth, but also that he
15 had not seen a dentist or brushed his teeth since he 11:52
16 went into Muckamore in 2012. This is clearly neglect.
17 I was really upset by this because from Timmy was a
18 baby, I took Timmy to the dentist regularly and I
19 absolutely made sure that his teeth were brushed every
20 day because I did it myself. He was prescribed 11:52
21 fluoride after that devastating news that his teeth had
22 not been brushed, and he needed a massive amount of
23 work done to his teeth under general anaesthetic. Even
24 after this, I recall staff on the ward at Muckamore
25 telling me that they were having trouble getting Timmy 11:52
26 to brush his teeth. I told them that he will allow you
27 to brush his teeth if he was relaxed in the bath. I
28 spelt this out to them. The dentist even provided the
29 ward with an information sheet on how to brush Timmy's

1 teeth. This issue continues on the ward to this day.
2 I still do not think that the ward staff are brushing
3 Timmy's teeth regularly because when I speak to ward
4 staff and ask if they brushed Timmy's teeth when he was
5 in the bath, they look at me strangely as if they do 11:53
6 not know to brush Timmy's teeth when he is in the bath.
7 This demonstrates not just poor management but also
8 gross neglect of my son's care. I would like the
9 Public Inquiry to ask for Timmy's dentistry notes from
10 when he went into Muckamore in 2012. I suspect there 11:53
11 are none from 2012 to 2018 as I do not believe he saw a
12 dentist during this time, and this is neglect.

13
14 "In and around the beginning of 2018, I do not recall
15 the exact date, H287 held a meeting with all of the 11:53
16 families of the patients in Muckamore. During this
17 meeting, she informed the families that it was not
18 correct for the staff to have told families that they
19 were not allowed in to see patients' bedrooms or to be
20 on the wards, as those were not the rules at the time. 11:54
21 I recall a meeting was arranged at short notice at
22 Knockbracken Healthcare Park, which is one of the
23 headquarters of the Belfast Trust. During the meeting,
24 which was attended by H287 and Dr. H50, in and around
25 2018, I was told that H397 had left Muckamore by H287 11:54
26 and that he would never be back again. I was also
27 advised that there was widespread abuse on the PICU
28 Ward. I recall during this meeting that I had said "I
29 realise that the ward is a dangerous place". Having

1 said very little during this meeting, Dr. H50 spoke up
2 very defensively, replying that the ward was not a
3 dangerous place. This was contrary to what I had been
4 constantly told and was the reason given to me as to
5 why I was not allowed on the ward. Dr. H50 also
6 advised me that I should have been allowed on to the
7 ward and also in to see Timmy's bedroom.

11:55

8
9 "I had also been told by ward staff that I was not
10 allowed to take photos of Timmy. During this meeting
11 Dr. H50 also advised me this was not the case. It took
12 until February 2019 for me to be eventually allowed in
13 to see Timmy's bedroom, which was a year after this
14 meeting took place.

11:55

15
16 I recall that the Director of Learning Disability of
17 Belfast Trust and author of the A Way to Go Report came
18 out to my home in and around September/October 2018.
19 My sister Catherine and my two sons were also in
20 attendance at this meeting. The author of the report
21 came across as a caring person. Prior to that, I
22 remember being at a group parents meeting in Muckamore
23 in 2018 where the author of the report was speaking and
24 she said that she had met with all of the families of
25 the abused patients at Muckamore. I told her that she
26 had not met with me. I think this is the reason for
27 her subsequent visit although I do not know. We were
28 offered counselling by the Director of Learning
29 Disability at that meeting which would be paid for by

11:55

11:55

11:56

1 the Belfast Trust. I advised her I would like to take
2 up the offer of counselling, and it took her six months
3 to organise it for me. My sister Catherine and my two
4 sons declined the offer of counselling".

5 CHAIRPERSON: You don't need this, do you? 11:56

6 (Thunderstorm overhead). Let's just take a moment.
7 what we'll probably do, because it is a little way to
8 go, we will probably take a break after Mr. McEvoy has
9 finished your statement. We'll probably take a break
10 and carry on after that because I realise that even 11:57
11 listening to this is probably quite difficult for you.

12 A. It is. And listening to that is very difficult.

13 CHAIRPERSON: That doesn't help either.

14
15 Okay, Mr. McEvoy. 11:57

16 MR. MCEVOY: "I was advised by H12, the day care
17 manager in charge, on 22nd November 2018, that Timmy
18 was receiving a foot massage in Muckamore and one of
19 the staff from Autism Initiatives, who later was
20 promoted to manager of the house which Timmy was 11:57
21 resettled into, reported that a staff member swore at
22 Timmy. Apparently during the foot massage, another
23 Muckamore staff member went over to the member of staff
24 who was carrying out the foot massage and said "Get his
25 fucking shoes out because we need to get this fucker 11:57
26 out of here". He was referring to Timmy. A person
27 also advised that the male member of staff kicked
28 Timmy's foot off the footstool. H12 told me this
29 safeguarding matter was dealt with internally and it

1 was really nothing other than the ward staff having a
2 bad attitude. He said that the ward staff should not
3 have used the bad language and that he had been spoken
4 to and it would not happen again. I was very annoyed
5 about this but H12 advised me that it could not be 11:58
6 taken any further because there were no independent
7 witnesses, which I did not understand because the
8 incident had been witnessed and reported by a staff
9 member of Autism Initiatives and he was independent. I
10 received a letter from the Belfast Trust dated 3rd 11:58
11 January 2019 confirming this. I attach a copy of the
12 letter from the Belfast Trust dated 3rd January 2019 at
13 Exhibit 11. I complained to the Director of Learning
14 Disability by email dated 13th January 2019 regarding
15 this, but I did not escalate the incident any further 11:59
16 and I heard nothing more about it. I attach a copy of
17 my email to the Director of Learning Disability dated
18 13th January 2019 at Exhibit 12.

19
20 "In the middle of 2018 the seclusion room at Muckamore 11:59
21 was transformed and a photo was sent to the BBC Nolan
22 Show. Richard Pengelly and Sean Holland, Chief Social
23 Worker in the Department of Health at that time, came
24 to Muckamore in and around the end of 2018. I recall
25 another patient's father and his wife attended, and my 11:59
26 sister Catherine and I attended. I met another mother,
27 whom I believed to be P55's mother, who advised me that
28 she had taken her son out of Muckamore. At that
29 meeting, Richard Pengelly guaranteed all families would

1 be out of Muckamore by the end of the year. He
2 apologised for the abuse in a prewritten statement
3 which he read out to the families. He did not
4 understand families with disability members and he
5 lacked empathy and did not come across at all sincere 12:00
6 or knowledgeable at that meeting.

7
8 "I recall receiving a call in 2018 from a female nurse
9 in Muckamore - I do not recall her name - advising me
10 that she had a message for me from H251 on patient 12:00
11 safeguarding in Muckamore. I recall it was over the
12 weekend. She advised me that H251 had received a call
13 from the Irish News advising that they had an anonymous
14 caller making inquiries regarding Timmy's finances.
15 This really startled me that some anonymous person must 12:00
16 have information about Timmy's finances and they took
17 this to the press. I was advised by this nurse that
18 H300, a Muckamore Services Manager, would give me a
19 call after the weekend. H300 did call me. I relayed
20 my concern to him and he did not really seem too 12:01
21 bothered or interested. He seemed to sneer at me
22 during this call. I advised him that I would contact
23 the PSNI and he did not really seem to care and had the
24 view that he did not know why I would be concerned
25 about this. I did telephone the PSNI and I was advised 12:01
26 by them that it was UTV calling the Irish News to ask
27 if they had any information on Timmy's finances;
28 therefore the call was not anonymous. I never received
29 any follow-up from H251 or H300 at Muckamore regarding

1 this matter.

2
3 "I also recall when I requested copies of Timmy's
4 medical notes, which was in and around the middle of
5 2018, there was a delay in these being provided. I did 12:01
6 not receive them until 2019. H290 was the Assistant
7 Service Manager at Muckamore. She was the person who
8 was eventually tasked with having Timmy's medical notes
9 released to me. I recall that I attended about three
10 different meetings where she was present and she came 12:02
11 across as a very dismissive person. This was not
12 exclusive as to how she treated me. She was a prickly
13 character. I remember during one of the meetings, she
14 said to me something like "You do not know what you are
15 talking about, you're Timmy's mother". I was 12:02
16 specifically looking for Timmy's care plan. I raised
17 this during one of the Muckamore Departmental Assurance
18 Group meetings, and the Director of Nursing at the
19 Department of Health at the meeting said she would get
20 this sorted for me. I was on my way to the car having 12:02
21 just left the meeting when I received a call from H290
22 saying that I had to return to Muckamore straightaway
23 as the Director of Nursing at the Department of Health
24 told her that she had to make sure that I received
25 Timmy's medical notes and care plan. 12:02
26

27 "I recall that I filled in a form with H290 that day
28 and signed it, and she said that it had to go into the
29 post. I also had to provide proof of my

1 i d e n t i f i c a t i o n , w h i c h w a s r i d i c u l o u s b e c a u s e T i m m y h a d
2 b e e n a p a t i e n t i n M u c k a m o r e s i n c e 2 0 1 2 a n d e v e r y b o d y
3 k n e w w h o I w a s . I d i d , h o w e v e r , p r o v i d e m y d r i v i n g
4 l i c e n c e . I d o n o t r e c a l l w h a t h a p p e n e d t o t h a t r e q u e s t
5 b u t I r e c a l l t h a t I h a d t o f i l l i n t h e s a m e f o r m o n t w o 12:03
6 a d d i t i o n a l o c c a s i o n s . I t l e d m e t o b e l i e v e t h a t
7 M u c k a m o r e w e r e r e v i e w i n g t h e n o t e s b e f o r e p r o v i d i n g
8 t h e m t o m e a n d I w o n d e r e d i f t h e y w e r e e x t r a c t i n g
9 i n f o r m a t i o n f r o m t h e n o t e s . I d o n o t h a v e a n y p r o o f o f
10 t h i s , o f c o u r s e . 12:03

11
12 "I e v e n t u a l l y r e c e i v e d t h e b o x e s o f r e c o r d s w e l l o v e r
13 s i x m o n t h s l a t e r . I r e c a l l m y a d v o c a t e f r o m B r y s o n
14 H o u s e c a l l i n g m e a n d s a y i n g t h a t t h e b o x e s w e r e r e a d y
15 t o b e c o l l e c t e d , a n d m y s i s t e r , t h e a d v o c a t e a n d I 12:03
16 a t t e n d e d M u c k a m o r e a n d p h y s i c a l l y t o o k t h e b o x e s a w a y .
17 T h e r e w a s a g i r l c a l l e d 4 0 7 w h o w o r k e d i n t h e
18 a d m i n i s t r a t i o n b u i l d i n g i n M u c k a m o r e - I d o n o t
19 r e m e m b e r h e r s u r n a m e - w h o w a s m a k i n g t h e b o x e s
20 a v a i l a b l e f o r u s . I r e m e m b e r s h e w a s v e r y r u d e , s o 12:04
21 m u c h s o t h a t I m a d e a v e r b a l c o m p l a i n t t o D r . H 5 0 . H e
22 d i d n o t h a v e a n y a n s w e r f o r m e .

23
24 "D u r i n g o n e o f t h e r e s e t t l e m e n t m e e t i n g s i n a n d a r o u n d
25 J a n u a r y 2 0 1 9 a t M u c k a m o r e , a t t e n d e d a l s o b y A u t i s m 12:04
26 I n i t i a t i v e s , s o m e o n e a t t h e m e e t i n g , I d o n o t r e c a l l
27 w h o i t w a s , s u g g e s t e d t h a t T i m m y m a y n e e d t h r e e - t o - o n e
28 c a r e . T h i s s e e m e d t o s p o o k A u t i s m I n i t i a t i v e s a s t h e y
29 w e r e p r e p a r i n g t h e r e s e t t l e m e n t o n t h e b a s i s o f

1 two-to-one care. After the meeting I e-mailed the Head
2 of Learning Disability at Belfast Trust on 11th January
3 2019 regarding this. I attach a copy of my email
4 exchange with her at Exhibit 13. She rang me on a
5 Saturday, complaining that every time a resettlement is 12:04
6 being arranged out of Muckamore, somebody always says
7 something to try and put a spanner in the works. H287
8 then telephoned me on the Monday also irate about this,
9 and she told me that she would sort it out, which she
10 did. After that, Timmy was back to two-to-one status. 12:05
11 The resettlement did proceed in March 2019 and it went
12 really well initially for the first month. Timmy was
13 in 43 Glen Road, Belfast, which was a bungalow. Timmy
14 was on the ground floor with an en suite. Timmy seemed
15 to be really happy and settled, and his brothers and I 12:05
16 were really happy too. We were able to visit Timmy and
17 sit at the table while he was having his food, which
18 would not have been allowed at Muckamore. His food was
19 good and his bedroom was really nice. He was receiving
20 two-to-one care and he knew the manager in charge of 12:05
21 the house on Glen Road."

22
23 Then, Dawn, in the following paragraphs, I am going to
24 summarise them but what you do for the Inquiry is you
25 give some detail as to how that resettlement progressed 12:05
26 in the Glen Road. Then taking up then, if I could, at
27 paragraph 88, eight which is at the bottom of page 39.
28 Having described then how things started to develop
29 during the resettlement, you then tell us:

1
2 "In June 2019 I received a call from the manager at
3 Autism Initiatives in the facility on the Glen Road
4 asking me to come and collect Timmy. He told me Timmy
5 was in the car all day and flipped out when he tried to 12:06
6 put him to bed. Belfast Trust had failed Timmy as they
7 were not checking his care under this resettlement. I
8 advised the manager that I was not coming to get Timmy.
9 Again, on 27th June 2019, I received another call from
10 the manager of Autism Initiatives advising that they 12:06
11 had phoned a taxi to collect Timmy to take him on his
12 own to Muckamore where he would be left outside
13 Muckamore in the middle of the grass area. Thankfully
14 this did not happen. However, a social worker called
15 H416 called out to the Glen Road house to see what the 12:07
16 situation was. She phoned me to say staff at Glen Road
17 locked Timmy into his bedroom and were setting food
18 plates on the floor without cutlery, then relocking the
19 door. She thought this was acceptable but it sounded
20 to me like they were treating Timmy like a dog. His 12:07
21 pad was unchanged throughout this period and Timmy is
22 doubly incontinent. Muckamore sent a number of nurses
23 to the Glen Road, including H282. Glen Road staff
24 would not let the Muckamore nurses into the house
25 initially; the manager called the PSNI. Muckamore 12:07
26 spoke to the PSNI and the nurses were allowed in. They
27 cleaned Timmy up as he had not been cared for or
28 changed for a number of hours, and the Muckamore nurses
29 took Timmy outside. The manager questioned the nurses

1 and said this was unsafe. However, the Muckamore
2 nurses were happy to take Timmy down the lane, into
3 their vehicle and back to Muckamore. The Muckamore
4 staff did a good job that evening.

5
6 "I had a meeting with the Director of Learning
7 Disability in the Belfast Trust and H406 at Muckamore
8 the following day. I was glad that Timmy was back in
9 Muckamore. He was admitted to Cranfield 2 Ward. On
10 the Director of Learning Disability and H287 joining
11 Muckamore in and around 2018, things were changing for
12 the better. The Director of Learning Disability left
13 in 2019 and there was a succession of different people
14 in teams. They all had good intention but the tail was
15 wagging the dog. The ward staff were continuing the
16 bad practice and were not listening to those in senior
17 positions."

18
19 Then there is a mention of -- I think there is a
20 mention of a car which had been purchased on Timmy's
21 behalf. we'll move past that and pick up at 92 on page
22 41.

23
24 "I recall attending a meeting in a hall in Muckamore
25 sometime in 2019 when Robin Swann MLA, the Northern
26 Ireland Minister of Health, attended. I expressed
27 during this meeting how worried I was about my son in
28 Muckamore and the current quality of his treatment.
29 The Director of Unscheduled and Acute Care at Belfast

1 Trust and H315, divisional nurse, who attended that
2 meeting, neither of whom I had met before, came up to
3 me following the meeting asking why I was so concerned.
4 We had a meeting later on that week with the Interim
5 Director of Learning Disability and Mental Health 12:09
6 Services within the Trust. My sister Catherine and
7 both advocates from Bryson House attended this meeting
8 also. During this meeting, I advised those in
9 attendance that I knew absolutely nothing about Timmy's
10 life because I could never get through on the phone 12:09
11 when I called the ward. No one ever answered the
12 phone. We had a discussion about this, which lasted
13 one hour, and I asked to be given a daily phone call
14 from the staff at Muckamore during this meeting. I
15 also advised that it would be good to have some notes 12:10
16 available so that I would know what Timmy's day looked
17 like, such as he ate this for breakfast and he did
18 whatever next. I recall the Director of Unscheduled
19 and Acute Care saying that I was not asking for
20 anything out of the ordinary and that I would receive a 12:10
21 daily update. After that, I received daily updates
22 from ward staff on Timmy's day, and a monthly meeting.
23
24 "Everything in Muckamore seems to be about process and
25 writing up the correct paperwork. There is little 12:10
26 emphasis on the actual patients. As I noted earlier in
27 my statement, Timmy had a diet sheet with healthy meals
28 and a treat twice per week, which is a balanced diet.
29 Therefore, the paperwork was correct but the staff were

1 clearly not following the diet plan given the weight
2 Timmy had put on whilst in Muckamore. A lot of the
3 staff were related in Muckamore and they seemed to
4 change roles very quickly. One day they were
5 responsible for one thing and the next day they were 12:11
6 responsible for something else. So, I never really
7 knew who I had to speak with to raise concerns about a
8 particular topic because the personnel changed so
9 often. I recall in more recent times asking H315 to
10 provide me with a personnel chart with everyone's roles 12:11
11 and who everyone was. This was put into a family fact
12 sheet with very small type but it was not on the format
13 I was expecting. Nurse H315 advised me that she would
14 redo this but she never did.

15
16 "There is no extraction fan or window in Timmy's en
17 suite bathroom at Muckamore. There is absolutely no
18 ventilation at all. I think this is appalling. I
19 recall that I raised this with the Director of Learning
20 Disability, H287, and the nurses on the ward and I 12:12
21 asked how this was building control compliant. None of
22 them seemed to care or think that it was a problem. If
23 Timmy had a bowel movement, the stench would stay in
24 his bedroom because there is no window or extractor fan
25 to remove the smell. In July 2019 I purchased a Dyson 12:12
26 Air Purifier, which is a bladeless fan, for Timmy's
27 bedroom at quite an expense to me. I was liaising with
28 the Director of Learning Disability for a long time to
29 have this installed by the Estates team in Muckamore.

1 Initially they just put the fan in the room but Timmy
2 bit through the control and therefore it needed to be
3 installed in a box made by a carpenter. It took six to
4 eight months for this to be installed. Apparently
5 Timmy and the staff now all love the fan, especially in 12:13
6 the summer when it can get quite hot. The filter needs
7 changed every six months and I always have to ask the
8 staff on the ward to do this on a number of occasions
9 before the filter actually ends up being changed. I
10 think this is essential for Timmy's health. 12:13

11
12 "On 6th August 2019 I was invited to join a group
13 called Muckamore Departmental Assurance Group, MDAG, in
14 response to the abuse in Muckamore by carer coordinator
15 H413 by email. I attach a copy of that email dated 6th 12:13
16 August 2019 at Exhibit 15. I thought long and hard
17 about it and I did agree that I would join. It has
18 been a good networking group and all five Trusts are
19 represented. Sean Holland, Head of Social Work in the
20 Department of Health, chairs the group meetings once a 12:13
21 month initially and now every other month. I recall on
22 a number of occasions, Sean tried to make out that I
23 was at this meeting to represent the families of
24 patients at Muckamore. I had to correct him on more
25 than one occasion to make it clear that I was only 12:14
26 there to represent myself and Timmy and no one else.

27
28 P90's sister was also in MDAG. She was there to
29 represent the Society of Parents and Friends of

1 Muckamore, and her brother, who is also a patient in
2 Muckamore. I recall asking if my sister Catherine
3 could join the MDAG but this was pointblank refused by
4 the Department of Health. I wasn't given a reason why.

12:14

5
6 "I recall that H287 set up a group which Catherine and
7 I were invited to attend. This was for the purpose of
8 achieving better communication and to allow relatives
9 to make suggestions. We did make some suggestions,
10 such as having notes available regarding Timmy's day.

12:14

11 H287 said this was a good idea, but it was never
12 implemented. I also suggested that it would be good if
13 the staff had business-like cards with their title on
14 them and contact details. This was turned down and
15 H287 advised this is not something they would be able
16 to do. There were about two of these meetings and then
17 they stopped happening because H287 left. I felt these
18 meetings were paying lip service to show that Muckamore
19 engage had with families but they never acted upon any
20 of the suggestions, none of which were unreasonable.

12:15

12:15

21
22 "There was also a carer's forum set up around the same
23 time. This was also with the view to aid communication
24 between staff at Muckamore and the families, but no
25 change was implemented as a result of this forum.

12:15

26
27 "The union representative of the RQIA on MDAG, I recall
28 just after one of our meetings I asked her if I could
29 speak to her and I asked her why no one from the RQIA

1 had spoken to me to ask what I had to say about
2 Muckamore. She replied it was up to me to approach
3 them and handed me a business card with contact details
4 and walked off. This was the first personal contact I
5 had with RQIA. In and around January 2020, I had a 12:16
6 subsequent meeting with two representatives of the RQIA
7 at their offices. The meeting lasted for about three
8 hours and I talked for most of the time about my
9 experiences in Muckamore. My sister Catherine and my
10 Bryson House advocate attended this meeting with me. 12:16
11 The RQIA were conducting an audit into Muckamore at
12 this time. I asked Muckamore to see one of the
13 protection plans, which they showed me but it was very
14 unprofessional, it was like something a child had put
15 together. It was not signed and it had amalgamated two 12:16
16 safeguarding incidents into one. If the Inquiry were
17 able to get a copy of the minutes of that meeting, it
18 would be helpful to the Inquiry.

19
20 "The outcome of this gruelling meeting with RQIA was 12:16
21 that Muckamore got a full tick and clean bill of health
22 from RQIA. I found that the RQIA did not listen to me.

23
24 "In February 2020, two women came to my home to discuss
25 resettlement with Timmy. Their names were H299 and 12:17
26 H408, and they were both resettlement officers at
27 Muckamore. I gave them tea and buns during our
28 meetings. In the summer of 2020, which was during the
29 Covid lockdowns, visitors had to sign in and sign out

1 with the Muckamore at the building where the swimming
2 pool is located when we were visiting. After I signed
3 in one day, I got speaking to a male pool attendant.
4 His daughter had also been in Muckamore. I do not
5 recall his name, but he started talking to me about the 12:17
6 abuse in Muckamore. He happened to mention the name
7 H299, and I asked him who she was. He advised me that
8 H299 was H397's wife. I was so shocked when I heard
9 this. To think this woman was out at my home and I
10 gave her tea and buns and she is the wife of H397 in 12:18
11 relation to whom there are allegations in respect of
12 Timmy. I was absolutely disgusted and I felt violated
13 by this. I made a complaint to the Interim Director of
14 Learning Disability and H315 regarding this by way of
15 email dated 27th August 2020. I sent further emails 12:18
16 on 1st September 2020, and on 8th September 2020 as no
17 one responded. I eventually received an acknowledgment
18 of the complaint by email from the Complaints
19 Department at the Belfast Trust on 9th September 2020.
20 I attach copies of the email chain at Exhibit 16. 12:18

21
22 "This pool attendant seemed to have a lot of
23 information about the abuse and I think it would be
24 worthwhile for the Inquiry to make contact with him.
25 Unfortunately I cannot recall his name. However, he 12:19
26 was the only male pool attendant so it should not be
27 difficult to identify him.

28
29 "I recall contacting Antrim Police Station on one

1 occasion in February 2020 and I spoke to a police
2 officer" whom you name. "I was calling regarding an
3 assault on Timmy. This police officer was very
4 disinterested in what I had to say. His view, which he
5 expressed to me in no uncertain terms, was that the 12:19
6 patients in Muckamore lacked capacity and therefore
7 there was no point in investigate being any alleged
8 assault. He advised me that the police were very busy
9 and told me that he was just back from a domestic abuse
10 case which he had to attend on his own because there 12:19
11 was no one else available to go with him. He was
12 insinuating that this domestic abuse call was much more
13 important than what I was calling to report. He
14 advised me that the staff in Muckamore have a very
15 difficult job, and he appeared to be siding with the 12:19
16 staff. I spoke to another police officer about this" -
17 I think this is one of the police officers from the
18 investigation - "about this, and he advised me that I
19 should make a complaint, which I did to the police
20 station. The Chief Inspector of Antrim Police Station 12:20
21 telephoned me to apologise and said the police officer
22 to whom I had originally spoken had been given a
23 serious talking to.

24
25 "At a later date, I complained to the Police Ombudsman 12:20
26 by telephone. I advised the Police Ombudsman Office
27 was that my concern was there was collusion between
28 Antrim Police Station and Muckamore. I was advised
29 during the telephone call - I do not remember the

1 person's name - that they noted my comments and
2 acknowledged them.

3
4 "With all of the abuse and neglectful treatment Timmy
5 has received over the years in Muckamore, I want him to 12:20
6 be resettled into other accommodation. In 2020 I
7 lodged a judicial review against the Belfast Health and
8 Social Care Trust and the Department of Health, with
9 the focus of having Timmy resettled out of Muckamore.
10 On 26th January 2022 Mr Justice Rooney allowed my 12:21
11 judicial review and declared that ongoing failure of
12 the first-named respondent, the Department of Health,
13 to provide the applicant, Timmy, with a suitable
14 placement within a reasonable period of time is
15 unlawful and incompatible with their obligations 12:21
16 pursuant to Section 6 of the Human Rights Act 1998 and
17 Article 8 of the European Convention on Human Rights.
18 The judge ordered that the Belfast Trust and the
19 Department of Health have until late 2024 to resettle
20 Timmy. I attach a copy of the court order dated 26th 12:21
21 January 2022 at Exhibit 17."

22
23 The next paragraph, Dawn, then touches again on matters
24 which are covered by the memorandum of understanding,
25 as does the paragraph after that, so 101 and 102. 12:21
26

27 would it be possible to take up at paragraph 103 then
28 at the bottom of page 46.
29

1 "I recall attending Muckamore on a prearranged visit to
2 see Timmy on Boxing Day 2021. I bought Timmy's brother
3 Ian and Ian's girlfriend, Jade. Timmy was presented to
4 us in such a poor state. His pad was clearly full and
5 had not been changed in some time. He had not been 12:22
6 given his medication and looked very neglected. I made
7 a formal complaint by email to H251, the designated
8 Adult Protection Officer at Muckamore, on 29th December
9 2021. H251 did respond on 30th December 2021 to advise
10 that she would refer the matter to the PSNI and also 12:22
11 decide how best to deal with the complaint within
12 Muckamore. To this day, I have not received
13 confirmation of the outcome of the investigation of my
14 complaint. I attach copies of my email exchange with
15 H251 at Exhibit 18. 12:23

16
17 "In and around autumn 2021, RQIA held a virtual
18 meeting, and I was invited to attend. It was to be a
19 discussion with the carers of patients in Muckamore.
20 H282 provided me with the online link to the meeting, 12:23
21 which I thought was unusual given that the meeting was
22 organised by the RQIA. I spoke up at this meeting and
23 complained that I was concerned about safeguarding
24 issues at Muckamore. I recall there were two other
25 carers at the meeting, and one, I do not know who it 12:23
26 was, completely agreed with me. I was told at the
27 meeting that my concerns would be investigated and that
28 someone would get back to me. A number of months
29 passed and I received a call on 23rd December 2021 from

1 H417, a social worker from the Belfast Trust. She had
2 attended the meeting with RQIA. I remember I was
3 standing in my driveway ready to get into my car, with
4 a bunch of flowers that I was going to take to my aunt.
5 H417 told me that she was following up on my complaints 12:24
6 and advised me that I was the only person saying
7 anything negative. She told me that I was the only
8 person giving negative feedback and that all the other
9 families were happy. I felt I was being gaslighted yet
10 again. She said, "Maybe your standards are too high." 12:24
11 I was shocked by this statement and I replied that my
12 standards are high but I expect the Belfast Trust's
13 standards should be even higher. I advised her that I
14 never received a follow-up from RQIA and they told me
15 that they would follow up with me after the meeting. 12:25
16 H417 told me she was calling on their behalf also,
17 which did not make sense because the two bodies are
18 supposed to be completely independent. She told me
19 that the other families were happy, and I suggested to
20 her that maybe the other families are too afraid to 12:25
21 speak up. She replied that perhaps their loved ones
22 were easier to deal with than Timmy behaviour-wise.
23 Again, I could not believe she was saying this to me
24 and replied that every patient had a bespoke package of
25 care. I finished the call saying that she had angered 12:25
26 me and I no longer wanted to continue with the
27 discussion.
28
29 "The RQIA did eventually apologise to me for not

1 following up directly after that online meeting. I was
2 speaking to the head of RQIA during an unannounced RQIA
3 inspection at Muckamore in July 2022. She said that
4 H417 should not have said that she was calling on
5 behalf of the Trust and RQIA. I raised the discussion 12:26
6 that I had with H417 at the Muckamore Assurance Group
7 meeting in February 2022 and advised that no one
8 apologised to me for what H417 had said to me. As with
9 most things that happened in Muckamore, no one seemed
10 to care. I recall that the Director of Social Work at 12:26
11 the Belfast Trust was asked by Sean Holland to comment
12 on this, and she said she would get back to me. An
13 appointment was made by her secretary but her first
14 available date for a meeting was in June 2022. The
15 first meeting was on Zoom and the second meeting was at 12:26
16 Knockbracken Healthcare Park. The Director of Mental
17 Health and Learning Disability Services attended the
18 meeting. She did apologise to me. There was an action
19 plan to address a number of issues around
20 unprofessional practice brought to their attention by 12:27
21 my sister Catherine and me.

22
23 "Timmy's communication skills have deteriorated
24 dramatically since he went into Muckamore. When he was
25 in school, he used PEC cards as a form of 12:27
26 communication. When Timmy went into Muckamore in 2012,
27 I asked if he was having speech therapy. The response
28 I received from the ward staff is that Timmy did not
29 need it because he was non-verbal, but speech therapy

1 is well beyond how someone speaks, it is about general
2 communication. The staff have said from he went into
3 Muckamore in 2012 right up to the current day that the
4 staff know Timmy well and know what he wants and
5 therefore they do not need to use PEC cards, but this 12:27
6 does not help Timmy communicate with strangers. What
7 will Timmy do when he leaves Muckamore and is in the
8 community to communicate, if he ever will.

9
10 "There have been hundreds of safeguarding incidents 12:28
11 involving Timmy in Muckamore. I have attached a report
12 at Exhibit 19 which details the incidents during the
13 period of July 2021 to July 2022 of which there are 17
14 entries. H240, Designated Adult Protection Officer, is
15 responsible for staff on patient safeguarding at 12:28
16 Muckamore. I had a meeting with her in 2022 to discuss
17 safeguarding. She advised me that if there is a
18 safeguarding incident in Muckamore, she reviews what
19 happened and checks to see if there was a breakdown in
20 the application of the policy of the hospital. If 12:28
21 there is no policy on the incident, then it is her
22 responsibility to write it and deliver it to the
23 hospital. She advised me that it is not her
24 responsibility to check that the hospital has
25 implemented the policy. I remember saying to her that 12:28
26 her job therefore is not preventative, safeguarding
27 only becomes involved after the event. I think this is
28 ridiculous. I recently raised this with H234,
29 divisional nurse at Muckamore, and I advised that there

1 should be a joined-up approach but she advised me that
2 safeguard and the nursing staff are very much two
3 different teams. It is always the tail wagging the dog
4 in Muckamore.

5
6 "I recall being told by H409, Assistant Service Manager
7 at Muckamore, that there is a real disconnect between
8 the management and the ward staff. You are told that
9 the internet and telephone reception is very poor in
10 Muckamore, we are told that if someone is on a Teams
11 call, the internet for the rest of the hospital does
12 not work. I find it very hard to get through on the
13 telephone when I call. I am told that if someone is on
14 the phone on the ward, then the other extensions in the
15 hospital cannot be used. I have requested video calls
16 with Timmy, especially during the Covid restrictions
17 when I was not allowed to visit, and also when Timmy
18 has tested positive for Covid, which has been three
19 times now, but staff say that they cannot work the
20 technology. This is nonsense and they simply cannot be
21 bothered.

22
23 "I think that I was groomed by the staff at Muckamore.
24 They continue to make sure that I must be grateful for
25 the work that they are doing and I feel an obligation
26 to thank them even for the smallest of tasks. I think
27 it is because Timmy is so vulnerable and they are
28 caring for him, so I have to be nice to them in the
29 hope that in turn they would be nice to Timmy. When

1 the staff member tells me something, I have to believe
2 them, there is no other alternative.

3
4 "I have found all of the information about the abuse
5 and neglect of Timmy to be harrowing and devastating, 12:30
6 not only for myself but thinking of Timmy and what my
7 wee son has had to endure as a patient in Muckamore
8 where he should have received person-centered care,
9 compassion and protection for a person with complex
10 needs. I am fully aware that Timmy has issues and can 12:31
11 have a meltdown and present with challenging
12 behaviours. There was no kindness, compassion or even
13 basic human decency in the way he has been treated,
14 and, in my opinion, is continuing to be treated in
15 Muckamore. 12:31

16
17 "Timmy and I have been and still are disrespected and
18 marginalised at every turn. Our wishes, aspirations
19 and needs means nothing in the face of the process
20 which is Muckamore. Throughout Timmy's time in 12:31
21 Muckamore, it seems that anything that happens to him
22 is always explained or interpreted in terms of it being
23 Timmy's fault. For example, it is his fault that
24 another patient hit him because he did not get out of
25 the way quickly enough. There are times when I feel 12:32
26 the whole infrastructure is set up to make any query,
27 complaint or even asking for basic information to be a
28 long, drawn-out process which is physically and
29 mentally exhausting so that it grinds you down and

1 grooms you into defeat and dismissiveness.

2
3 "As a family, we have carefully discussed picking our
4 battles, given the volume and nature of our multiple
5 concerns about Timmy's care and circumstances over the 12:32
6 years, as to take on all of these issues is
7 overwhelming and too traumatic when the odds are so
8 clearly stacked against the patients and the families.
9 There is a lot of talk about the community of
10 Muckamore. However, I and Timmy's brothers have only 12:32
11 met some families after the abuse was uncovered.
12 Before the public discovery of abuse, I rarely met
13 another family but if I did, the interaction was
14 abruptly interrupted and curtailed by staff. On
15 reflection, this was a very controlled, clinical 12:33
16 environment which was not family-friendly. This
17 coercive atmosphere makes each family feel isolated and
18 plays into their narrative of we are the only ones that
19 have ever asked the question. Divide and conquer
20 appears to be the staff motto. 12:33

21
22 "Families are already vulnerable as we are fully aware
23 that Muckamore has total control over our loved ones.
24 Any time I have raised this as a concern, there has
25 been a general dismissive attitude. Unfortunately, we 12:33
26 now know that this was well-founded and may still be
27 true today. Since the abuse on CCTV was uncovered, I
28 thought that standards of care, staff behaviours and
29 attitudes would improve, and they did for a while.

1 Unfortunat ely, it appears that Muckamore is reverting
2 back to type and I hear repeated comments of "Things
3 have always been done this way". Surely they should
4 realise that this is a damning sentence. There was
5 radical change in the collective management and
6 leadership of Muckamore, and intense scrutiny from
7 RQIA. However, it does not appear to have any impact
8 on the day-to-day operations.

12:34

9
10 As time goes on, I have heard less from the Belfast
11 Trust. It is now six years since the abuse was
12 uncovered and I think that we have not had credible
13 answers and an acknowledgment of the damage and
14 devastation this has caused to all our lives. It has
15 been very traumatic trying to come to terms with this,
16 particularly as I was being advised by the PSNI that
17 the number of incidents against Timmy were
18 considerable. I believe, as Timmy's mother, his
19 brothers, Graham and Ian, and his aunt Catherine are
20 Timmy's voice and advocates. No one can justify or
21 cover up the inhumane and degrading treatment and abuse
22 he has suffered in Muckamore. We are, hopefully,
23 planning for Timmy's successful resettlement back into
24 the community. We as a family are very distressed and
25 traumatised about how Timmy has been abused and totally
26 let down in all aspects of his care. Timmy's basic
27 human right not to be exposed or subjected to any form
28 of inhumane, degrading or abusive treatment in a
29 statutory hospital environment was not upheld by

12:34

12:34

12:35

12:35

1 Muckamore, the Belfast Trust or the Department of
2 Heal th.

3
4 "Muckamore still wants to be a place apart. It is set
5 up that way and, realistically, it makes life easier 12:35
6 for the Belfast Trust if this marginalised, extremely
7 vulnerable community can be quietly discounted,
8 silenced and ignored. Perhaps their needs are too
9 complex or too expensive to treat with professionalism,
10 compassion and in a human rights compliant manner. I 12:36
11 would always want Timmy to be treated with kindness and
12 compassion but I now know that this is too much to
13 expect. Now, all I ask is that my son be treated with
14 basic decency and compassion, as kindness is long
15 forgotten and seemingly irrelevant in the care, 12:36
16 protection and management of human beings with a severe
17 intellectual impairment.

18
19 "I have a large volume of documents being medical
20 reports, medical notes and email exchanges with 12:36
21 Muckamore and the Belfast Trust concerning Timmy, which
22 I am happy to provide to the Inquiry if the Inquiry
23 would like to review the same."

24
25 Then, Dawn, you have provided a declaration of truth at 12:37
26 the very end, page 53. As I asked you at the start,
27 then you have confirmed your signature and date.

28 A. Yes.

29 CHAIRPERSON: Right. well, Dawn, first of all, thank

1 you very much for a very full and detailed statement.
2 I recognise just sitting there listening to that must
3 have brought back to you a lot of unpleasant emotions
4 and thoughts. I think the best thing for us to do now
5 is to take a break and to give you a breath of fresh 12:37
6 air, if it is not too grim outside, but somebody will
7 look after you from the Inquiry staff. we'll come back
8 at 1.45, so we'll have just over an hour's break.

9
10 Mr. McEvoy has probably explained it to you, he is not 12:37
11 going to go through the whole thing again but he is
12 going to alight on various parts of your evidence that
13 he thinks will be of particular interest to the
14 Inquiry, and also to give you a chance to expand on any
15 areas that you want to expand on. All right. 12:38

16 A. Right. Thank you.

17 CHAIRPERSON: we'll take a break now until 1:45.

18
19 THE INQUIRY ADJOURNED FOR LUNCH AND RESUMED AS FOLLOWS:

20 12:38
21 CHAIRPERSON: Thank you. Sorry for the slight delay.
22 All right.

23 MR. MCEVOY: Thank you, Chair.

24
25 Dawn, on behalf of the Inquiry team, thank you for a 13:53
26 vivid and compelling witness statement. You have
27 discussed in that statement a number of themes that are
28 of interest to the Inquiry and touch on the terms of
29 reference. If it's all right with you, I'd like to

1 talk about some of those with you. There are about
2 five or six in total, and you have given us a lot of
3 detail on them. As I go through, I'll give you an
4 opportunity just maybe to say anything more you want to
5 about those particular issues.

13:54

6
7 The first is that of MAPA. You described back in July
8 2011, I think before Timmy would have gone into
9 Muckamore for the second time --

10 A. Yes.

13:54

11 6 Q. -- actually going and getting some MAPA training, which
12 was arranged for you?

13 A. It was wonderful. It really, really -- what's was the
14 word, empowering.

15 7 Q. Go ahead.

13:54

16 A. Just my sister, Cathy, and I went down. It wasn't Anne
17 Brannigan that took the course, she was the one that
18 organised it for us. I think there were two men and a
19 women. Anyway, they were wonderful. You know, simple
20 things. They weren't teaching us MAPA, I don't
21 think --

13:55

22 8 Q. Okay.

23 A. -- that the staff would be taught, it was more how to -
24 and I won't stand up - but, you know, standing
25 sideways, if Timmy is coming to try and bite you, you
26 know, it's less antagon -- and explained what the
27 reasons behind it were. He can't attack your vital
28 organs and it's less combative.

13:55

29 9 Q. Yes?

1 A. Me looking at Timothy, it could be perceived as
2 aggressive. So that whole session, I think it was a
3 whole day, was really empowering; very, very helpful.

4 10 Q. Sometimes during the course of the Inquiry, we've heard
5 the term "deescalation" or "deescalation techniques" 13:55
6 being used.

7 A. Yes.

8 11 Q. You said a moment or two ago, as far as you are aware,
9 if I understand you correctly it's maybe different from
10 the MAPA training that might have been given to staff? 13:56

11 A. You know, looking back on it, I've discovered I don't
12 think that is quite MAPA --

13 12 Q. All right.

14 A. -- the way the staff are taught. It is a MAPA with
15 regard to family members. 13:56

16 13 Q. Yes.

17 A. Which I've asked for since then, but they don't do that
18 any more. They don't interact with families, teaching
19 them that sort of thing. I think that would have been
20 so helpful to everybody. 13:56

21 14 Q. Of course, as you say in your evidence, that's before
22 the Timothy went into Muckamore?

23 A. Yes, yes. To try and prolong -- because the social
24 worker -- I don't think I mentioned her name, I don't
25 think she's there. 13:56

26 15 Q. Don't worry.

27 A. The social worker at that time in the community, I
28 asked for help and she said, I'm sorry, there is
29 nowhere for Timmy, and I said but he went into that

1 Coniker back then, and she said yeah, there's nowhere
2 like that any more. And I said but I'm not asking for
3 him to go somewhere and stay there, just to go fix him
4 and return him to me. Then there is nowhere for him.
5 She said, you know, if he comes to try and bite you, 13:57
6 just keep your mobile phone in your hip pocket at all
7 times and take it out and dial 999 and also make sure
8 you're exits are clear. I said do you realise that I
9 wouldn't have time to put my hand on my phone, never
10 mind dialling 999. So anyway, I got that MAPA 13:57
11 training. It was just a very stressful time.
12 Basically, I was trying to contain --

13 16 Q. Yes.

14 A. -- Timothy in the community because I was told there
15 was nowhere for him to go. But then one of these days 13:57
16 of thinking I'll ring that person, you know, some of
17 the contacts, you know, that I had come across, I'll
18 ring that person to see if they can help; no, try
19 somebody else; no. Then I rang the -- it's very close
20 to where I live, a lady psychologist, I think, I don't 13:58
21 know, but in a building very close to me. I happened
22 to ring her and she happened to answer the phone, it
23 was just amazing. And she was so helpful to me and she
24 said, you know, but there is somewhere for Timothy to
25 go. That was the start of for me getting help. 13:58

26 17 Q. When would that have been then, that you had that? Is
27 that around --

28 A. It was around the time of MAPA training.

29 18 Q. Around 2011 then?

1 A. Yeah, 2011. But, yeah, that was a very, very -- you
2 read in the statement about the day Timothy went from
3 Torbank School to the Iveagh Centre.

4 19 Q. Yes.

5 A. You read out what I had said about one of the most 13:59
6 stressful days of my life.

7 20 Q. Yes?

8 A. I still think about that, it was traumatic, it was
9 terrible. My own -- Timmy's own GP - not the one I've
10 referred to in the statement, another one - rang me 13:59
11 back two hours after I had phoned him to say I'm sorry,
12 you're outside my area, I can't come to see Timothy.
13 And it was actually a policeman, once I heard that, a
14 policeman -- the police and the ambulance men that day
15 were absolutely first class. But one of the policemen 13:59
16 went like that to be, and tapped what I perceived to be
17 his walkie-talkie as if 'leave it with me'. It was
18 actually him that got the GP to come. So, as I say, it
19 was like everything was against me.

20 21 Q. Yes. Yes. Yes, that's very vivid. 13:59

21 A. And then the social worker came, because he had to sign
22 off, and he came on his bike and he had all the gear
23 on, he had to take it off. It was just -- the whole
24 scene was very difficult. We were all -- it was the
25 principal of the school, the vice principal, one 14:00
26 teacher and two classroom assistants. As I say, the
27 room was full of people, including two police and two
28 ambulance men. Which, the police and ambulance,
29 actually in the end, I don't think they were used but

1 then he must have got -- he must have gone in the
2 ambulance to get the Iveagh Centre. But that was a
3 very, very difficult day for me.

4 22 Q. The reason why I had asked you a couple of moments ago
5 about MAPA and use of MAPA, you've clarified it a 14:00
6 little bit by saying you think it might have been
7 something different from --

8 A. Slightly, yes.

9 23 Q. When the Inquiry heard evidence from Trust officials
10 over the past number of weeks, Trust officials told the 14:00
11 Inquiry that they don't use MAPA any more, that they've
12 replaced it with a --

13 A. They've changed the name. It is still MAPA, they've
14 changed the name. And that was a couple of months ago.

15 24 Q. Were you made aware of that change? 14:01

16 A. Yeah, because somebody on -- a nurse on the phone said
17 whatever the new term was, I said sorry, what's that;
18 she said it's the old MAPA.

19 25 Q. It was described as a positive behaviour support. It
20 wasn't given a precise title? 14:01

21 A. It was an acronym she gave me.

22 26 Q. Did she describe what it meant?

23 A. Changing the name doesn't change MAPA or the behaviour
24 holds. My sister Cathy, in her statement, will go
25 further into that with you. 14:01

26 27 Q. Do you know whether those sorts of techniques, however
27 they are labelled or described now, whether those are
28 made use of on Timmy?

29 A. Well, Timothy -- I frequently get told on the phone

1 that "we escorted Timothy to his bedroom". Now,
2 escorted means manhandled, presumably using MAPA holds;
3 I don't know. Then up until recently he has been
4 escorted to his bedroom where from time to time, he was
5 secluded in his bedroom. As far as I know, that's the 14:02
6 main place he was secluded. But now, there is a High
7 Court, doctor -- I can't say the name, Timmy's
8 consultant said that Timothy could be -- Timmy
9 basically doesn't need held under the Mental Health Act
10 for detention. So, through the High Court we've got an 14:02
11 interim order for he is a voluntary patient. But then
12 it's ongoing; there's the next court session or
13 whatever interaction is in September. But in the
14 meantime, it means theoretically Timmy should not be
15 secluded in Muckamore but he is still escorted to his 14:03
16 bedroom.

17 28 Q. This takes me onto the next topic I had hoped to ask
18 you about, which is that of seclusion. You have
19 mentioned the use of seclusion --

20 A. Yeah. 14:03

21 29 Q. --if I can put it this way, historically, earlier on in
22 other words, in Timmy's journey, if I can use that
23 term, in Muckamore. Do you know whether or perhaps how
24 recently Timmy might have been subject of seclusion?

25 A. Well, you see, this is a bit controversial what I am 14:03
26 about to say I think he is still being secluded but
27 under a different name, because when his bedroom is his
28 seclusion, where do you draw the line between -- was
29 that seclusion or... I know you are meant to lock.

1 They have a lock up here for seclusion and a lock lower
2 down for just locking the door. And there was
3 accidental seclusion last August. I'm sure you wonder
4 how on earth do you do that, but somebody accidentally
5 locked the top lock and how they were -- 14:04

6 30 Q. On his bedroom?

7 A. In his bedroom. And how they were alerted to it, Timmy
8 was inside his bedroom looking out of the wee window as
9 if let me out. So, I was told about it.

10 CHAIRPERSON: could I just ask, if the top lock isn't 14:04
11 pushed up and it is just the middle lock, can Timmy
12 leave the room?

13 A. The lower lock is meant to be for Timmy's, they say
14 -what's the word - comfort. He likes to make sure that
15 he is safe in his room and he likes to hear the click 14:04
16 of the lock. But for seclusion, there is a higher lock
17 that probably Timmy couldn't reach, and it's only
18 outside the door, so he can't get out once that's
19 locked.

20 CHAIRPERSON: If it is only the middle lock, he could 14:05
21 leave the room?

22 A. He could leave the room, yeah.

23 31 Q. MR. MCEVOY: So, you were starting to say that your
24 understanding of seclusion is even if he is confined in
25 his bedroom in that way that you describe; is that it? 14:05

26 A. I feel he is still being secluded but in different --
27 in a different way.

28 32 Q. A number of Trust officials have told the Inquiry that
29 seclusion hasn't been used in Muckamore since August

1 2022. what would you say about that?

2 A. Maybe that -- two things. First of all, that's maybe
3 when his accidentally secluded or -- but I do believe
4 that Timmy is still being secluded but they are just
5 not telling me fully. They are wording it differently. 14:05

6 33 Q. Yeah. Okay.

7 A. Because escorted to his bedroom and then secluded, and
8 they are not just saying "and then secluded". Oh, yes,
9 you meant deescalation earlier. They are meant to try
10 and deescalate the situation but they still do take 14:06
11 hold of him. But I think it's training, I think it's
12 training of the staff because, yes, Timmy can be a
13 scary person when he -- you know, when it escalates.
14 But there are ways and some of the health care
15 assistants can do it, I have seen them doing it. 14:06
16 Actually, FLSW2 has seen them as well. They are very
17 good at like nipping it in the bud, you know.

18 34 Q. Let's talk a bit more about that.

19 A. Stopping it before it really starts. One time Timothy
20 went to a health care assistant and he bent. what he 14:06
21 does is he grabs you here, and then he brought his head
22 down into the health care assistant's chest sort of
23 thing. The health care assistant didn't shout, didn't
24 speak, that's exactly what you're meant to do, and he
25 just held on to him. 14:07

26 35 Q. The health care assistant?

27 A. Pardon?

28 36 Q. The health care assistant held on?

29 A. Yeah, yeah. No, I mean in a nice way. And then said

1 "let go, Timothy", and Timothy let go, because if you
2 shout or scream that completely escalates the
3 situation. I have had to speak -- well, I have spoken
4 to agency staff, two agency staff, because they were
5 actually raising their voice. One of them screamed. I 14:07
6 said please don't do that.

7 37 Q. Sidetracking slightly for a moment. That health care
8 assistant - without naming names, of course - do you
9 know whether that health care assistant is a permanent
10 member of staff at Muckamore or whether they are agency 14:07
11 staff; can you tell us?

12 A. No, he is permanent. All three health care assistants
13 that I am referring to are permanent, local people.

14 38 Q. That permanent staff, is having that contact with
15 permanent staff important to Timmy? In other words, if 14:08
16 they were chopping and changing faces --

17 A. It is so much better for Timmy to have a stable staff.
18 It was actually one health -- one of those three health
19 care assistants, I recently wrote like - I don't know
20 how to word it - like a review, just saying -- sending 14:08
21 it up to one of the senior staff just saying how
22 professional she was, how caring she was. She had a
23 sense of humour, which is essential in that line of
24 work.

25 39 Q. Yes, of course. 14:08

26 A. She keeps Timothy clean because Timothy quite often -
27 that's distresses me to think about it - is not -- he
28 is not clean. He is not cleaned, he is not groomed, he
29 is not well cared for. But she, when she is on duty,

1 Timmy is always the way I would expect him to be.
2
3 The other two male staff, they just show they care.
4 And what they do is, I think is very relevant, they
5 show they care for Timothy but they also show respect 14:09
6 for me. And I know that's probably not in their job
7 description but that's a huge thing for me, if they are
8 showing me respect, because it also ties in with
9 they'll show Timothy respect.

10 40 Q. Can you give us some examples of how they show respect 14:09
11 to you? How do you?

12 A. "Hiya Dawn, how are you", as opposed to, "Yes, well,
13 we've just changed him now, do you want to go for a
14 walk now or what"? It's having, well, a sense of
15 humour I have already mentioned. It's just -- and 14:09
16 FLSW2, you witnessed that with that.

17 CHAIRPERSON: Use the name. I don't think it's a
18 problem as we've used the name twice now.

19 MR. MCEVOY: Your liaison officer has a cipher. Don't
20 worry. 14:10

21 A. Did I say a name there?

22 CHAIRPERSON: Don't worry, everybody has

23 MR. MCEVOY: Please don't worry.

24 CHAIRPERSON: In this case, I don't think it's a
25 problem at all. 14:10

26 41 Q. MR. MCEVOY: It may not have been picked up anyway.
27 So, in terms of that sort of giving of respect.

28 A. Yeah.

29 42 Q. If there is an issue, if you have like a daily sort of

1 concern, let's take the example of the shaving which
2 you described very vividly.

3 A. Still happening, that.

4 43 Q. If you were sort of concerned, say take for example, 14:10
5 maybe there is a miss or something like that, how would
6 you address that and how would that be received then?

7 A. For quite a number of years now since the abuse, now
8 that I know senior staff, even though they change a
9 lot, I don't go to the ward manager or the ward, I just
10 go to whoever is up there that I have the email address 14:10
11 for and I e-mail them. Sometimes I don't get a reply
12 at all.

13 44 Q. You would take a concern like that to a senior level?

14 A. Even though that's fairly simple, I would, because
15 basically nothing happens when I speak to the ward 14:11
16 about it.

17 45 Q. Okay. Even those health care assistants that you
18 mention?

19 A. Well, it wouldn't be that appropriate to say to health
20 care assistants, I don't think, when it's... They do 14:11
21 know about the shaving situation.

22 46 Q. Yes.

23 A. One of them, actually she's not there any more, I think
24 she was deputy co-director or something and she was
25 only there for a small period, but she actually -- she 14:11
26 actually, when I sent her an email, I think she rang me
27 or emailed me back; she said I am going to Muckamore
28 now, I'll pop in and buy Timmy a razor, which she did
29 and delivered. Now, that's not what I expect but to me

1 that was outstanding and caring for Timothy. I don't
2 understand where all the razors go to. I just don't
3 understand it.

4 47 Q. Does that situation - I have used the shaving example -
5 but does that still prevail then? 14:12

6 A. Yeah, I'm afraid so.

7 48 Q. Other aspects of Timmy's personal care, his hygiene,
8 what is the situation presently there? Has there been
9 any improvement, can you tell us?

10 A. Well, Timothy needs all his personal needs attended to. 14:12
11 There was no availability of a bath - Timmy loves a
12 bath in the evening - for some time they were waiting
13 for a part is what I was told. I'm changing slightly
14 the subject here, but a bath. So they would give him a
15 shower, which he doesn't like as much, or they don't 14:12
16 give him a shower. But there was a health care
17 assistant who came back, who had been studying to
18 become a nurse, she is back in Muckamore, and she rang
19 me to give me the update that night, and she went yes,
20 and he has had his bath. I went he has had his bath, 14:13
21 how did he have a bath? She said the problem was with
22 our bath so I just brought him into the next ward.
23 Using your initiative? Using common-sense for the sake
24 of the patient? I know that's not what you asked me.

25 49 Q. It was. I mean, I was asking you really about that 14:13
26 theme which comes across in your witness statement
27 about the lack of attention to Timmy's hygiene.

28 A. I also think, to be fair to the staff, I don't think
29 they know about hygiene, especially at the start of

1 lockdown and Covid and everything. And I went -- I
2 said I better go wash my hands now, maybe it was just
3 before or after Covid and they went no, just use the
4 hand sanitiser. But she just -- we had just left the
5 bathroom. I left because Timmy had left. Do they not 14:13
6 really understand that Timothy and anybody working with
7 Timothy, they all should be washing their hands after
8 they had been to the toilet?
9
10 I saw one nurse using those blue rubber gloves and she 14:14
11 dealt with Timmy's personal needs at the toilet, and
12 then she did something else with these gloves on and
13 then something else. I thought dear God.
14 CHAIRPERSON: Dawn, can I just get an idea about timing
15 when these things happen. The buying the razor for 14:14
16 instance --
17 A. Yes.
18 CHAIRPERSON: -- which you thought was really
19 impressive, how long ago was that?
20 A. Well, I bought him a razor two months ago. 14:14
21 CHAIRPERSON: The member of staff.
22 A. No, no, but I'm just saying two months ago. That
23 member of staff, she has now left, so six months.
24 CHAIRPERSON: Relatively recently?
25 A. Yeah. Yeah. 14:14
26 CHAIRPERSON: And the bath, when they took him to a
27 different ward; was that relatively recently as well?
28 A. Very recently, yeah. Three weeks ago, I would say.
29 CHAIRPERSON: But your experience at Muckamore has been

1 -- I mean, you seem very surprised that those things
2 happened. Do we take it that your experience of
3 Muckamore is that that's quite unusual, or that's a
4 more recent sort of approach?

5 A. Sorry, what was unusual? 14:15

6 CHAIRPERSON: You were surprised that somebody had
7 actually gone out and used their initiative.

8 A. Oh, surprised. Yes, surprised and delighted, that had
9 never happened before. That was going like above and
10 beyond. It also showed that she understood what I was 14:15
11 saying because I think there is a lack of caring at
12 Muckamore and I don't think an awful lot has changed in
13 the last six years, and it upsets me a lot and I just
14 feel I have to be constantly vigilant and trying to
15 speak up for Timothy. 14:15

16 CHAIRPERSON: Yes.

17 A. I know he loves me and I know he knows I love him but,
18 for example, he wouldn't have any understanding. I
19 couldn't tell him about today and I don't need to
20 because I know we both love each other and I'll do my 14:16
21 best for him.

22 50 Q. MR. MCEVOY: You described a few moments ago when you
23 have even a fairly basic concern, a kind of daily
24 concern --

25 A. Yes. 14:16

26 51 Q. -- about a personal care need, shaving or washing,
27 showering, bathing; if you have a concern about that,
28 your instinct now - my word - is to go straight to the
29 sort of senior management?

1 A. Straight to...

2 52 Q. It's okay, I'm not asking you to name them.

3 A. The co-director, I think she is, or maybe she is
4 director now; meaning its ridiculous I have to go that
5 high to get something. 14:16

6 53 Q. The question I was going to ask you was when did you
7 get to the point were you felt -- if you can give us an
8 approximate point in time, when did you feel that that
9 was what you had to do? In other words --

10 A. A number of years ago. 2018, it would have been. 14:17
11 Again, somebody on that list who can't find the thing.

12 54 Q. Don't worry.

13 A. She was director, she was my go-to person. I even said
14 to her, why are you my go-to person, you're away up
15 there. And she just said it's fine. 14:17

16 55 Q. Can I ask you, what was it, was there an event or
17 incident that prompted you then to decide rather than
18 deal with this at a sort of ward level, I am now just
19 going to bring everything --

20 A. Because I asked what I deem to be the appropriate 14:17
21 people, and nothing, nothing came of it. The ward
22 sister promised she would do something, nothing came of
23 it. So I just discovered I had to go higher. It was
24 higher, it wasn't deciding I will go higher. I will go
25 to that person -- 14:18

26 56 Q. The person who gets things done?

27 A. -- that will get things done.

28 57 Q. I suppose my question is what was it therefore? Did
29 something happen then that you saw a result, you saw a

1 result --

2 A. So I continued to go to that person.

3 58 Q. What was it that made you think this is where I am
4 going to have to go now?

5 A. Well, even down to counselling, which was mentioned 14:18
6 earlier, it took her six months to get the...

7 59 Q. Was it that offer of counselling that you describe in
8 your statement that was what --

9 A. That took six months in order to get to it set up for
10 payment for the counsellor, but she eventually did it. 14:18

11 60 Q. Was it the fact of that offer nonetheless that made you
12 think this is the person that gets things down?

13 A. Yes. Yes, it took her a long time. There was somebody
14 below her, whose name is on that; it was pointless me
15 telling her because she never did anything. At one 14:18
16 point this other person said to me, after me telling
17 her whatever situation it was, and she said well,
18 really, you shouldn't be ringing me, you should be
19 ringing the service manager for this. And I went oh,
20 because it was like I felt, not quite like a slap in 14:19
21 the face but oh. And she went but it's okay, no, I'll
22 pass this on.

23 61 Q. Was it passed on?

24 A. No, not my --

25 62 Q. What was the issue at that particular time? 14:19

26 A. I am trying to remember what it was. It might have
27 been even the outside space. They had a chalet, a hut
28 or whatever, down in the far corner of the grounds.
29 When I raised the subject, this was two chairs in this

1 like chalet, two chairs with nails sticking up on the
2 arms of the chair. I had to point this out could you
3 get Estates to tap the nails over or pull them out or
4 do something.

5 63 Q. Was that an area within a ward, attached to a ward? 14:19

6 A. No. It was in the grounds and it was in the far
7 corner, and it was somewhere for me to take Timmy when
8 I called to visit him that was more private, because
9 sometimes the senior management will say oh I saw you
10 out with Timothy the other day, and I thought it's like 14:20
11 a gold fish bowl.

12 64 Q. You could take him down to this place?

13 A. Away down there, yeah, yeah. And there's benches now.

14 65 Q. It is within the grounds?

15 A. It is within the grounds. It's in the corner near the 14:20
16 entrance to Muckamore.

17 66 Q. What was the issue then. This furniture was in a --

18 A. Two bits of wooden chairs with nails sticking in the
19 arms, and cigarette butts all over the place. And
20 there was even one of those blue rubber gloves stuffed 14:20
21 down into somewhere around the chair. I reported this

22 to the social worker and somebody higher up. The
23 social worker didn't even know that area existed and I
24 thought, well, it looks as if staff do. I didn't say
25 that, but somebody has been using it. Then the more 14:20
26 senior person said that they would get it. I said

27 about the grass being six inches high, you know.
28 During Covid, I visited Timothy and naturally only
29 wanted to see him outside and didn't want -- wanted to

1 wear my mask and all the rest of it. I said that's the
2 only place I can bring him and if it is raining, we
3 would go into that wee shelter. Anyway, one day it
4 just disappeared and there was another wee shelter
5 across the way, it was gone. Literally nobody has ever 14:21
6 told me or given me the explanation for that.

7 67 Q. Just to try and locate what you are telling us in time,
8 when was this? When did this issue arise about the use
9 of this? Was this during Covid?

10 A. I think it was during Covid, yes, in lockdown. 14:21

11 68 Q. During one of the lockdowns in particular then?

12 A. Pardon?

13 69 Q. During a lockdown?

14 A. Yes.

15 70 Q. All right. So, you raised an issue then about the 14:22
16 condition, as you say, the furniture and sort of the
17 general --

18 A. The grass.

19 71 Q. And what then -- with whom did you raise it? Now, we
20 don't need a name. 14:22

21 A. One of the senior managers.

22 72 Q. Was the concern taken on board?

23 A. The grass was cut and the nails were dealt with. But
24 then later on, as I say, the two huts disappeared.

25 73 Q. In terms then we have already talked about when you 14:22
26 sort of raise an issue now, you raise it at a senior
27 level.

28 A. Just to get things down.

29 74 Q. So, the Inquiry can take it then that what prompted you

1 to sort of think that this was the way to do things was
2 at the point in time, as you discussed in your
3 statement, when you were offered the counselling, or
4 was it something else?

5 A. Yeah, and that person who offered me the counselling is 14:22
6 the one I continue to use. I even said to her I feel
7 I'm using you, and she said that's okay.

8 75 Q. You retain a relationship with that person in that way?

9 A. Yes. She was quite pleasant to deal with but mostly
10 because she got things done. 14:23

11 76 Q. Going back to the personal care issue there. We've
12 talked about the daily aspects of personal care,
13 bathing and shaving and so on. What's very striking in
14 your statement obviously is those needs such as
15 podiatry and dentistry. We moved on some time 14:23
16 obviously since those issues first arose; was there
17 ever an improvement? Take the podiatry, first of all,
18 of course, was anything ever done to improve that
19 issue?

20 A. First of all, I want to say I've never met the 14:23
21 podiatrist. Apparently he has changed over recent
22 years, I don't know. But no, there is still a problem
23 with Timothy's feet and callouses. I asked for a
24 report a month ago, exactly a month ago, from the
25 podiatrist, could he email me a report, and I got the 14:24
26 report. What was strange was his name wasn't anywhere
27 on it, although he had sent me the email.

28 77 Q. Taking a step back, Dawn, just from that, has anyone
29 within Muckamore ever explained to you how they go

1 about attending to a need? Let's take the podiatry
2 example, first of all.

3 A. There is a monthly meeting.

4 78 Q. Has anybody ever explained to you how the process - I
5 know you are critical of the process - what the 14:24
6 procedure, let's say, is in Muckamore for attending to,
7 like, podiatry?

8 A. No, nobody has explained that. I did ask and got the
9 structure, the staff structure. But as it changes
10 quite a bit, it is hard to keep up with who is who 14:25
11 within that structure.

12 79 Q. Can the Inquiry take it therefore that the podiatry
13 situation hasn't been resolved?

14 A. It's better. It hasn't been resolved. My point about
15 seeing the report no date on it, it says Timothy's two 14:25
16 callouses on his feet is caused by wearing socks on the
17 ward or bare feet. That's what has caused the
18 callouses.

19 80 Q. Okay.

20 A. I'm not sure whether I can say this but I'll just say 14:25
21 it carefully. The staff -- PSNI told me that it aided
22 moving Timmy A to B if he had no shoes on.

23 81 Q. Okay. I think you say that in your statement anyway.

24 A. I do. Slippery floors, right. It referred to that in
25 the podiatrist's report. 14:26

26 82 Q. Okay.

27 A. I replied to the ward manager to say is this an old
28 report from the podiatrist when he did this, because my
29 belief was he either wears his shoes or slippers on the

1 ward, so is this old? I am still waiting for the
2 podiatrist to get back to Muckamore.

3 83 Q. You visit Timmy how often?
4 A. Once a week.

5 84 Q. What is he wearing on his feet when you visit him? 14:26
6 A. Frequently he is in bed asleep when I visit him in the
7 afternoon, which upsets me greatly, that a grown man of
8 28, healthy, is asleep during the afternoon. Mostly I
9 believe it to be down to PRN which could have been --

10 85 Q. I am going to ask you about that -- 14:26
11 A. -- a couple of days ago.

12 86 Q. I am going to ask you about that topic in a minute.
13 A. So he is quite often in bed. If he is not in bed, he
14 is wearing slippers, like slip-in slippers.

15 87 Q. Okay. You have given vivid descriptions of the state 14:27
16 of his feet on a number of occasions. Has there been
17 an improvement in terms of the care --
18 A. Yes, yes.

19 88 Q. -- of his toe nails?
20 A. Yes, it is. I have never seen it as bad as those two 14:27
21 times and it was years ago --

22 89 Q. Yeah.
23 A. -- in PICU. But still not right, still not good.

24 90 Q. Do you know how often a podiatrist --
25 A. No, I don't. 14:27
26 91 Q. -- visits.
27 A. But I did ask last Tuesday at a monthly meeting about
28 the podiatrist and they said, oh, the podiatrist is
29 here today; oh, good, could you ask him to send me a

1 report or to explain what the date of that last report
2 was. Nobody got back to me.

3 92 Q. Moving then just to the dentistry then. You've
4 described the situation with regard to Timmy's teeth
5 and the issues that you've had to contend with there 14:28
6 and Timmy has had to contend with. What is the
7 situation? If we move back in time, when, if there was
8 one, was there an improvement? I know there was an
9 attention given to him at the School of Dentistry?

10 A. It was a bit like after the abuse was out, there was a 14:28
11 certain member of staff who seemingly trying to improve
12 things. Well, I felt people were brushing his teeth
13 around that time but it seems to have trailed off. In
14 my opinion, it's trailed off.

15 93 Q. You've described that there is a method and Timothy -- 14:28
16 A. The easiest way is when he is in the bath, nice and
17 relaxed, you brush his teeth with toothpaste and then
18 you hand him the toothbrush. Even if he is only
19 sucking it in his mouth, at least you are getting
20 something done. 14:29

21 94 Q. What is your perception of the extent to which that is
22 being -- that continues to be something?

23 A. I have no way of knowing is really the answer. I just
24 don't know. Could I just mention while we're on this
25 subject, the Royal School of Dentistry, the couple or 14:29
26 two or three times that Timmy has had to attend there,
27 they have been absolutely superb. Kind, professional.
28 Kind to Timmy, kind to me. Just wonderful.

29 CHAIRPERSON: Could I just ask about dentistry. Do you

1 know what sort of work Timothy has had to have done on
2 his teeth, because they got to a stage, I think, you
3 mention in your statement when they were quite bad?
4 A. They were, yeah. So many fillings and I think he got
5 one tooth out. Descaling, they did all that, under 14:29
6 general anaesthetic. But, as I say, the Royal School
7 of Dentistry was just -- they were amazing. And what's
8 very relevant is they were giving me information, they
9 were keeping me up-to-date with what they were going to
10 do or what they had done. That was very severely 14:30
11 lacking in Muckamore.
12 95 Q. MR. MCEVOY: Moving on. You started to tell us, in
13 fact, about the question of PRN --
14 A. Yes.
15 96 Q. -- and medication more generally. The question of 14:30
16 Haloperidol, which is a medicine that you described and
17 its use.
18 A. Yes.
19 97 Q. Do you know whether, and if so when, it continues to be
20 used? 14:30
21 A. It's not used at all now. I know that because the
22 current consultant has given me a list of Timmy's
23 medication.
24 98 Q. Yes.
25 A. As far as I know, that hasn't been given since those 14:30
26 days I referred to in my statement.
27 99 Q. Are there any PRNs that Timmy is still subject to?
28 A. Oh, yes, yes, yes. There is first line, you would know
29 second line, but it has a big effect on him as far as I

1 know. Not at the time when you want it to work but in
2 two, maybe three days' time, Timmy will be out for the
3 count, he will be asleep during the day. Then that's a
4 knock-on effect of not sleeping at night. I have
5 actually e-mailed the head of the Belfast Trust about 14:31
6 it.

7 100 Q. Yes, that's right. You described that?
8 A. So they are doing some kind of a monitoring scheme of
9 PRN given.

10 101 Q. Do you know why the Haloperidol was stopped? 14:31
11 A. Because it was killing Timothy. He would have died.

12 102 Q. You described the A&E consultant at Antrim --
13 A. Yeah, he was quite angry --

14 103 Q. Effectively demanding that it be stopped?
15 A. -- he was indignant. I said no, but I had a discussion 14:32
16 after the first time you said to come off it and the
17 consultant has explained that you have to wean somebody
18 off this, you can't just stop giving it. I said it has
19 potential to kill Timothy. Timmy's heart rate was so
20 very high. I can't remember the numbers now. But he 14:32
21 could have had a heart attack and died.

22 104 Q. How was that issue resolved? We have a good account of
23 you in your statement saying that the A&E consultant
24 was saying this has got to be stopped ASAP because it
25 is dangerous - I am summarising - and then you have the 14:32
26 consultant in Muckamore saying --

27 A. Well, the A&E consultant said, you know, if you could
28 pass this on to him that he must stop this right now.

29 105 Q. Yes.

1 A. No more Haloperidol. I went on talking to him and he
2 went oh, right, so he thinks you can't take him off it,
3 I said that's what he said to me. He said actually I
4 don't want you to do anything, I will deal with this --
5 106 Q. Okay. 14:33
6 A. -- consultant to consultant. I'm not exaggerating, I
7 never saw Timmy's consultant again. You know, maybe a
8 coincidence, maybe he had been moved off somewhere
9 else. I just never had any contact with him again.
10 107 Q. How soon after that? From your recollection, how soon 14:33
11 after that when you were given that, you had that
12 conversation with the A&E consultant, how soon after
13 that did the Haloperidol stop?
14 A. Immediately, and he has never been on it again as far
15 as I know, and he hasn't been near death as far as I 14:33
16 know. But he has had -- maybe I've told you this but
17 he has had Covid at least five times in Muckamore.
18 108 Q. You mentioned three times, I think, in your statement.
19 A. Yes. Five times now.
20 109 Q. In terms of the use of medicine, the medication, you 14:33
21 described an impression of Timmy being zombified?
22 A. My sons are over there, that's what they say. I don't
23 like them saying that but I know what it means,
24 expressionless, not a good colour, and just like on
25 automatic pilot. 14:34
26 110 Q. "Expressionless" and "dull", I think, were the words
27 that you used?
28 A. Yeah.
29 111 Q. That is something that your sons noticed, then an

1 impression that they formed not long after Timmy went
2 into Muckamore in 2012?

3 A. Yes, that's right.

4 112 Q. For how long and how often would that have been an
5 impression that you had?

14:34

6 A. There has been an improvement recently. Like, I was
7 there on Thursday and he was zombified. We took him
8 out, the three of us took him out on the Saturday and
9 that's the way he was. Just no expression, nothing.
10 Dull. I blame that on medication.

14:34

11
12 The fact that he has got a very large tummy at the
13 moment could be too much food, but the ward are telling
14 me that in effect - these are my words - that it's
15 Timmy's fault because when they go to take him out for
16 a walk, they bring him out of the building and then he
17 turns round and comes back in so he is not getting
18 exercise. But Timothy didn't get exercise during the
19 Covid lockdown because they were in the ward. Then
20 when Covid was lifted, he didn't get out because I was
21 told they were short of staff. I said for Timothy's -
22 I may have said this in the statement - physical and
23 mental health, he needs fresh air and exercise, as
24 every one you do. We all as human beings need those
25 two things. So, yeah.

14:35

14:35

14:35

26 113 Q. The weight gain is something I wanted to ask you about
27 as well, and diet more generally. Quite a long time
28 ago you described wondering whether Timmy had leaky gut
29 and all those sort of things?

1 A. Oh, yes but that's nothing do with the size of his
2 stomach.

3 114 Q. No, no, but diet has always been, and Timmy's diet in
4 particular, has always been, very understandably,
5 something you worry about; you're concerned about it? 14:36

6 A. Yes. Concerned about, yeah.

7 115 Q. I suppose when it's not up to you to make sure, you
8 don't have ultimate control over when and how he eats?

9 A. Yeah, I have no control.

10 116 Q. Before he went into Muckamore in 2012, how would you 14:36
11 have described his physical condition for a man of his
12 age?

13 A. Strong and healthy but he was quite thin at that point.

14 117 Q. When he was at home with you?

15 A. When he was at home, when he was younger, he put on a 14:36
16 bit of weight. Then, you know, one of those ping
17 moments that you realise wait a minute, everything
18 Timothy eats, I am providing, so therefore I need to
19 control this. When he comes out -- when he comes home
20 from school in the bus, I don't need to go and buy 14:37
21 bread or whatever I have forgotten to get, and
22 therefore Timmy gets something when he is there; I will
23 do that all in the morning when Timmy is at school. It
24 also applies, that, to Muckamore. Everything he eats
25 is provided for by the Belfast Trust. 14:37

26 118 Q. Yep.

27 A. Obviously Muckamore don't love Timothy the way I love
28 him. If you actually love somebody you need to -- and
29 Timothy hasn't capacity, so therefore you have to do

1 what's right for that young man. Yes, awk, he wants to
2 eat five burgers, let him eat five burgers. Really?
3 119 Q. Just so we can kind of try and get an idea when these
4 weight issues and issues with diet started to be
5 problematic, if you like, he went into Muckamore in 14:38
6 2012 and he was --
7 A. He was slim.
8 120 Q. He was slim.
9 A. Close to thin, but yeah.
10 121 Q. Two big healthy brothers? 14:38
11 A. Two big healthy brothers, yes. They were very slim at
12 the time too.
13 122 Q. would they have all eaten the same sort of thing?
14 A. Well yes, except I don't know what Graham and Ian would
15 eat at school. They had money, and you know... 14:38
16 123 Q. Thinking back at that time, and as mum at home I
17 suppose is what I mean, would everybody have eaten the
18 sort of thing?
19 A. Oh I see, at meal times? Yes.
20 124 Q. Yes. I should have made that clear. 14:38
21 A. Even when he was on the gluten and dairy free diet,
22 which wasn't really fair to them but I said to them,
23 look, for me to make this work, could we all go on
24 this. I bought a bread-maker, gluten free, and he was
25 getting lots of exercise. 14:39
26 125 Q. I know your FLSW2 is there but obviously we don't need
27 any prompting, if that's okay.
28
29 So thinking back to that point in time, you know, he

1 was eating reasonably well and he was slim, as you say.

2 A. Plenty of exercise.

3 126 Q. Plenty of exercise. When he was at home with you, what
4 would he have done for exercise? What was the regime?

5 A. Go to his brother's football and rugby matches. We 14:39
6 went to the park. He didn't really like the park, so
7 it was walking from A to B and going to do things for
8 his brothers with me.

9 127 Q. Yeah, of course.

10 A. Like walking round the pitch. 14:39

11 128 Q. Plenty of movement.

12 A. Lots of movement, and interest.

13 129 Q. Okay. How long after he went into Muckamore did you
14 first begin to detect weight gain?

15 A. Not really until I think it was 2015 or '16. I can't 14:39
16 remember because --

17 130 Q. He has been in there about three or four years
18 approximately at that point?

19 A. Yeah. Yeah.

20 131 Q. Okay. 14:40

21 A. It is an awful word to use but he had then and has now
22 a gut, a big gut, and he doesn't drink beer. You know,
23 that sort of a big tummy which concerns me; just it's
24 not healthy.

25 132 Q. How quickly - of course, we are dealing in 14:40
26 approximations I appreciate that - how rapidly did you
27 notice this tummy, this weight gain appear?

28 A. No. Just one day I thought my goodness, it was more
29 like a sudden. On Saturday there, or two Saturdays

1 ago, he was wearing a tightly fitting T-shirt which
2 just was lovely, showing his bump as such.

3 133 Q. Still, I think you said that his weight had decreased a
4 little bit over time?

5 A. Oh, yes but then it's increased again. 14:41

6 134 Q. It's increased again.

7 A. It's increased again. I think it's because you would
8 understand you would need, you know, you need a really
9 good ward sister or manager to keep the discipline up
10 and remind people of what they should be doing. I 14:41
11 don't think it's just Timothy, as I told one of the
12 consultants, I think all the patients in Muckamore,
13 they shouldn't be allowed to eat. Yes, there is human
14 rights and everything but because they are vulnerable,
15 they shouldn't be allowed to eat whatever they like at 14:41
16 all times, you know.

17

18 The Cosy Corner, which I know you haven't asked me
19 about, isn't really great at all. It's not very nice
20 at all. But he has access to that. 14:41

21 135 Q. As you say, you made reference to a diet plan in which
22 there was a treat allowed once or twice a week, but
23 what do you say about how closely that is observed in
24 terms of the provision of treats?

25 A. Well, because I brought it up last Tuesday, a week ago, 14:42
26 they are now doing a chart, allegedly, writing down
27 everything that goes into Timothy's mouth.

28 136 Q. And that's a recent development, is it?

29 A. From last Tuesday or Wednesday. Wednesday, I think it

1 started.

2 137 Q. Was anything like that ever done before?

3 A. At the time I brought it up that you referred to in my
4 statement, at that time it was done.

5 138 Q. It must have been discontinued at some point in time if 14:42
6 they have started doing it again?

7 A. I don't know. Oh, no, no, it was only done to prove to
8 them; they did it to prove to themselves sort of thing
9 how much Timothy was eating. You know, I could eat far
10 too much, but what I am trying to say is sometimes you 14:42
11 are not aware of how much you have been eating. That,
12 I think, is why they did it for Timothy.

13 139 Q. In terms of you've given an indication of like
14 interactions that you have had with dieticians --

15 A. Yes. 14:43

16 140 Q. -- and your efforts to get property of dietetic input
17 in Timmy's care, can you think back to when and if a
18 satisfactory programme was ever put in place in terms
19 of getting that input, when that would have been?

20 A. You mean years ago? 14:43

21 141 Q. Yes.

22 A. It was just after I met with that consultant that
23 didn't know what an exercise bike was.

24 142 Q. Okay.

25 A. It was just after that. You referred to in my 14:43
26 statement of he said he would refer me to a dietician
27 and I said you don't mean me, you mean the ward staff.
28 What he actually did was "I mean you", is what he did.
29 I thought that was quite antagonistic but it didn't

1 bother me as long as I got speaking to a dietician.
2 She was defensive to start with because dear knows what
3 she had been told about me. But once she -- a few
4 minutes in, she realised, I think, this mother is a
5 very reasonable mother. She read out the diet plan, 14:44
6 which was just - how do you word it - a well-balanced
7 diet plan with occasional treats. I said that's superb
8 but is that what they are actually giving Timothy.
9 Then that's when they started writing things down,
10 which I never saw. 14:44

11 143 Q. So, nobody ever gave you -- from what we can gather
12 from the statement, no one in Muckamore has ever given
13 you an explanation for the weight gain?
14 A. No. No. In fact, this time round it is Timmy's fault
15 because he doesn't go for a walk. 14:44

16 144 Q. Other than that.
17 A. Other than that, there is no explanation. Is it PRN;
18 is it eating too much? I don't know. I don't know.

19 145 Q. If you were asked - and I am asking you, I suppose - if
20 you were asked what you think the cause is -- 14:45
21 A. I think it's actually eating too much but I don't know.
22 I don't know. There is something else which I don't
23 know whether is in the statement or not, when Timothy
24 went into that Autism initiatives placement --

25 146 Q. Yes. 14:45
26 A. -- I was up to see Timmy and there was a nurse from
27 Muckamore there and obviously the staff from Autism
28 initiatives, Timothy looked as if he was holding his
29 breath. Did I mention that? No. He was holding his

1 breath, "look at Timothy" and then he went like that
2 and fell down. The nurse from Muckamore said oh, yeah,
3 he does that frequently. I said what? Nobody had told
4 me and I didn't know that. The consultant confirmed
5 that he did it frequently. I asked could I see -- 14:45
6 could he look up the records or whatever tell me when
7 he first did this.

8 147 Q. .yes?
9 A. He never came back to me. Just never did. I asked
10 three different occasions at meetings. 14:46

11 148 Q. So you think that's a behaviour that he may have --
12 A. It started in Muckamore but it still was out when he
13 was in the community for those three or four months,
14 and he is doing it again now. He fell against a wall
15 two days ago. I said to the nurse on the phone did he 14:46
16 hit his head, and the answer was I don't know.

17 149 Q. Dawn, as his mum, what do you put that behaviour down
18 to?
19 A. I actually have no idea. The consultant said that it's
20 probably, you know, stimulus, he likes the stimulus of 14:46
21 the dizziness. But I don't know.

22 150 Q. In terms of just before we leave the diet issue, have
23 you ever heard something called a must chart; has that
24 expression been used?
25 A. A muscle? 14:47

26 151 Q. A must chart.
27 A. No.

28 152 Q. I know he is non-verbal, of course, but is there any
29 way that he could indicate to you that he is full, he

1 has had enough to eat?

2 A. He just doesn't eat any more, it is as simple as that.

3 He will eat a lot before he doesn't want any more and

4 he sometimes, you know, refuses something --

5 153 Q. Yes. 14:47

6 A. -- because he wants something else.

7 154 Q. My next question was going to be how might he indicate

8 to you his likes and dislikes?

9 A. He makes it very clear, for somebody non-verbal, his

10 needs. 14:47

11 155 Q. His likes and dislikes?

12 A. Yes. If I am up, I always take him outside and we go

13 for a nice walk around the grounds. Then when we come

14 back in, he will turn to me in a very loving way and

15 just go like that, as if you can go now. I think 14:47

16 that's wonderful. He can communicate to me when he

17 wants.

18 156 Q. In terms of diet, how might he indicate to you, look,

19 his preference is maybe for burger and chips as opposed

20 to chicken curry or whatever it might be. How would 14:48

21 you know? How would somebody (inaudible) know that?

22 A. I used to be able to show -- have photographs, and I

23 was make him choose between two things. Sometimes it

24 was four at one stage. It depends how bright he is at

25 the time, and then he can choose. I don't know what 14:48

26 Muckamore do, I don't know. But I have spoken to the

27 speech therapist and she said she agrees with me that

28 we need to start speech therapy up again for

29 communication when one day Timmy might be out in the

1 community, living.

2 157 Q. Yeah.

3 A. So that new people can communicate with him.

4 158 Q. Picking up on that then, you know you described that
5 when he was at Torbank, he used the PEC, the cards? 14:48

6 A. Yes.

7 159 Q. Not something that has been used in Muckamore, to your
8 knowledge?

9 A. No, it hasn't been. What I need to say about that is
10 they started off with object exchange, and then they 14:49
11 moved up to, I think it was photographs.

12 160 Q. Yes.

13 A. Then they moved up to symbols. Then that time that
14 Timmy became aggressive when he was in Torbank and
15 ended up in Coniker or the Iveagh Centre - it must have 14:49
16 been the Iveagh Centre - just before that or during
17 that time, I felt and the school felt he lost his
18 ability to get to that third stage and he was down at
19 the object, back to the object exchange.

20 161 Q. But he could still have used that method, presumably? 14:49

21 A. Yes. Yes.

22 162 Q. And not something, even the object exchange, was
23 something that was deployed or made use of while in
24 Muckamore?

25 A. They didn't need. I said to the ward manager. Awk, we 14:50
26 don't need that, we know Timothy. I said yeah but it
27 would just be helpful to keep that up for one day him
28 being out of Muckamore, or for new staff.

29 163 Q. Again, as his mum - not an expert perhaps but as his

1 mum - what do you foresee? Clearly you're anticipating
2 a day when he might be out in the community, and we'll
3 come on to that in a few moments. What do you foresee
4 in terms of his ability to pick up that learning that
5 was back at school age? 14:50

6 A. Timmy has peaks and troughs in his ability to learn.
7 If he is one of the good spells of learning, absolutely
8 he could pick that up again. But if he is one of the
9 more dull or zombified positions, yeah, it would be...

10 164 Q. So if he is clear of medication and things -- 14:50

11 A. Yes.

12 165 Q. -- his learning will be...

13 A. Yeah.

14 166 Q. Okay. That's helpful?

15 A. You see you say about the expert, I would love to speak 14:51
16 to the experts to discuss all this.

17 167 Q. You have a lot to give, and information in terms of --
18 A. Well, I want to hear. I want to hear what they think
19 because I don't have that opportunity.

20 168 Q. Now, could I ask you, and this is I suppose a delicate 14:51
21 topic as I'm sure you've gathered from the way in which
22 we approached your statement, there was reference to
23 the investigation into abuse which has involved
24 examination of CCTV and so on and so forth. I want to
25 ask you one specific question, okay. 14:51

26 A. Right.

27 169 Q. I'll put it like this: From your understanding of what
28 you have learned about the CCTV as it regards Timmy,
29 and as far as you have been made aware, does it show

1 the type of care that you were led to believe was being
2 provided to Timmy by Muckamore staff?

3 A. Absolutely not.

4 170 Q. That's fine.

5 A. Absolutely not. I was appalled and distressed to hear 14:52
6 about it. The police were very, very kind in being
7 able to say it in as kind a way as possible.

8 171 Q. Again this is just a very specific question, you were
9 given certain information by Muckamore staff, and then
10 you were given -- 14:52

11 A. Muckamore staff?

12 172 Q. You were given certain information then, I think,
13 subsequently during the course of the investigation. I
14 think you say that in your --

15 A. Do I? 14:52

16 173 Q. Yes.

17 A. About the abuse?

18 174 Q. Beforehand, were you told about how Timmy was looked
19 after?

20 A. Oh that male nurse, yes, yes. That was really bizarre 14:52
21 because he was a nice man and more mature; a bit
22 younger than me. But yeah.

23 175 Q. Okay, we'll leave that there. Can I ask you about the
24 question of resettlement. You've given a very detailed
25 description of the attempt at resettlement on the Glen 14:53
26 Road and the difficulties that were encountered there.
27 The Inquiry has seen all of the detail in your
28 statement and heard something about it this morning.
29

1 In view of that, what do you make of the prospect of
2 resettlement and what that might hold for Timmy?

3 A. Even though it sounds bizarre, I am quite hopeful to
4 get somewhere for Timothy. I have discussing with a
5 certain charity provider and they are giving me hope, 14:53
6 but I am trying to suppress that a little in case it
7 doesn't work out. But yeah, the next time certainly
8 when I get a mobility car, I'll think twice about that.

9 176 Q. Is it an aspiration for Timmy then that you'll find
10 somewhere in the community for him? 14:54

11 A. I don't know. I very much want to find somewhere for
12 Timothy because that first month in the Autism
13 initiatives house on the bungalow on the Glen Road,
14 they were anticipating new surroundings, new people,
15 Timmy just took to it really well and was really happy. 14:54
16 One day I called up and he was sitting in the sort of
17 living room at a table eating healthy food in a clean,
18 clean environment. The boys and I were really happy.

19 177 Q. It showed you what was possible, in other words?

20 A. What was possible, but the car ruined it. The overuse 14:54
21 of the car.

22 178 Q. One of the other issues then that comes through clearly
23 is about finances and the issues that you have
24 encountered, being able to - I guess my word - audit
25 Timmy's finances and get some answers about where the 14:55
26 money goes and so on. The other issue is that of
27 benefits and being made aware, I guess, of what you may
28 be entitled to and what Timmy may, in fact, be entitled
29 to?

1 A. I was disappointed with myself. He went in those days
2 DLA, and I was told by DLA that's it, once he goes into
3 Muckamore, that's it, there is no benefits. What I
4 should have done was got advice on that and realised
5 that there was ESA you could apply for. 14:55

6 179 Q. Now, you're being harsh on yourself, if I might say so,
7 about that.

8 A. I thought, I would be honest with you, I did feel bad;
9 why didn't I push or investigate that.

10 180 Q. Can the Inquiry take it that no one within Muckamore or 14:55
11 Belfast Trust sort of sign posted you in terms of --

12 A. No, not at all. It was actually the Bryson House, my
13 advocate for Bryson House, contacted one of these
14 people on the list, a social worker, and she then
15 e-mailed me the information. 14:56

16 181 Q. Okay. It was quite some time after Timmy had gone into
17 Muckamore in 2012 before you even got as far as
18 accessing advocacy services?

19 A. I did try and apply for a refund for the years that I
20 didn't but I didn't get that, that didn't work out. 14:56
21 But I did find it hard to be honest, financially. I
22 felt I was plowing all this money into Muckamore for
23 Timothy, but I didn't want Timothy to want for anything
24 and I possibly made the mistake of telling the ward
25 staff that. 14:56

26 182 Q. In terms of the questions that you have about the
27 Trust's management of Timmy's finances, do you feel
28 that questions are still lingering?

29 A. Not too -- well, I can't talk about the past but not

1 too bad at the moment.

2 183 Q. You can talk about the past, if you think there are
3 issues going back in time?

4 A. I sort of indicated that in the statement really,
5 because basically the bottom line to that is there is 14:57
6 no proof of misusing Timmy's money. At the moment I am
7 fairly happy because I get -- I don't know who this
8 person is in the Finance Department but I get a monthly
9 statement. It's not like you would get from the bank
10 but it gives me an idea. Two months ago she itemised 14:57
11 -- the girl itemised something that was Christmas gifts
12 or something. I asked her could you not do that for
13 everything, all the money that goes out. She says
14 well, maybe, you know, maybe I could do that. So, I'm
15 hoping that that will then... 14:57

16 184 Q. Can you see expenses on takeaway food and other sorts
17 of things?

18 A. No, they don't say what the money has been spent on.
19 It is just money in and money in and I am putting money
20 in. 14:58

21 185 Q. It is not itemised to that degree?

22 A. No, no. I am hopeful that they might do that now that
23 I have asked.

24 186 Q. Dawn, I don't have any other questions for you. Those
25 are the themes I had hoped to cover arising from your 14:58
26 statement. The Panel may have some questions for you.
27 It's very possible they will.
28
29

1 THE WITNESS WAS QUESTIONED BY THE PANEL AS FOLLOWS:

2
3 CHAIRPERSON: I have a few. I'll turn to my colleagues
4 in a moment. Can I just pick up on something you just
5 said so I don't forget it. When did that accounting of 14:58
6 the money start? You now get a piece of paper.

7 A. I get a statement.

8 CHAIRPERSON: Yes.

9 A. I contacted - better not say the name - a man, and he
10 is based in the City Hospital and asked him about 14:58
11 finances. Then he transferred -- I don't mean
12 transfer. That was in 2018, I would say.

13 CHAIRPERSON: Right.

14 A. So I have been getting those statements since then.

15 CHAIRPERSON: Before that, you hadn't seen anything in 14:59
16 writing?

17 A. Nothing. Nothing.

18 CHAIRPERSON: I'll hand over to Professor Murphy.

19 PROFESSOR MURPHY: I just wanted to ask you about
20 those, I think, three health care assistants that you 14:59
21 felt were managing Timmy's behaviour really well. The
22 way that's supposed to work is that someone is supposed
23 to have a care plan and a behavioural support plan that
24 provides that kind of information for all the staff,
25 and they all then are supposed to follow it. My 14:59
26 question is did you ever see the care plans, and did
27 they consult you about them, and likewise with
28 behavioural support plans?

29 A. Any time that I wanted to see the care plan, the

1 protection plan, any kind of report, anything at all, I
2 have to e-mail. Like it was mentioned in the
3 statement, I have to email, what is it, confidentiality
4 within the Belfast Trust - I'd forgotten the initials -
5 to prove who I am and explain why I want this and who 15:00
6 my son is and everything. Then it takes normally on
7 average two months for me to get this.

8
9 I had a meeting three years ago with a new social
10 worker. I said I had a lot of concerns and I would 15:00
11 like to -- I asked could he meet with me. I for some
12 reason or other assumed he would bring the care plan
13 with him but, no, he didn't. When I asked it was as
14 if... I had to go through that channel that I can't
15 think of the name of, to the department within the 15:00
16 Belfast Trust asking for my son's care plan, protection
17 plan, anything that I wanted.

18 187 Q. In the monthly meetings that you have had, when you've
19 had them, that kind of discussion never comes up?

20 A. What's in the care plan? 15:01

21 188 Q. Yes.

22 A. No, never. Never comes up. The care plan was
23 mentioned recently in that I was listening in to one of
24 these sessions you had, and somebody from the Belfast
25 Trust mentioned that -- sorry, wait a minute. I am 15:01
26 flooded with all this information. Mentioned, oh yes,
27 a named nurse, a key worker. A key worker. So I
28 immediately, as I was watching you all in here I
29 e-mailed somebody, an assistant service manager, asking

1 did Timothy have a key worker, and I was told yes, and
2 a named nurse. I asked who it was, I was told. I said
3 oh, I met that nurse just two days ago for the first
4 time and she is Timmy's named nurse; how long has she
5 been Timmy's named nurse? Since January. See, to me 15:02
6 that's the lack of attention to communicating with the
7 family, especially when my son is non-verbal and lacks
8 capacity it. You can't really communicate with him
9 about abstract things. Surely they should have -- they
10 should be contacting the mother. 15:02

11
12 Oh, yes and you mentioned care plan. I asked what the
13 key worker's duties were, and I got an email - this was
14 all by e-mail - a list of about five things their
15 duties were. One of them was, or two of them were, to 15:02
16 keep the care plan up to date and the protection plan.
17 But I only see anything like that when I go through
18 that Belfast Trust department requesting them, proving
19 who I am et cetera. Data protection is who I am trying
20 to... 15:02

21 189 Q. Okay.

22 A. I have learned so much trying to protect Timothy,
23 including those acronyms and everything, but sometimes
24 it gets too much. The different people involved and
25 where they are and what's their position oh, but now 15:03
26 they are this position now. It's hard.

27 190 Q. You have had to become an expert.

28 A. Yeah. Yeah.

29 191 Q. Thank you.

1 CHAIRPERSON: Dr. Maxwell.

2 DR. MAXWELL: I would like to ask you about your
3 observations about the way the ward works. You talked
4 about three health care assistants who were very good
5 with Timmy, and you've also talked about occasions when 15:03
6 the personal care wasn't adequate at all.

7 A. Yeah.

8 192 Q. Do the health care assistants do different types of
9 work from the staff nurses?

10 A. I don't know is the answer. 15:03

11 193 Q. If I phrase it in a different way, did you see the
12 staff nurses actually interacting with Timmy doing nail
13 care?

14 A. Rarely, no, rarely. You're right, it's health care
15 assistants or, dare I say it, ordinary nurses. The two 15:04
16 nurses in charge are normally in, there is like an
17 office off the nurse's station, in there, and I can't
18 even see in. They are doing paperwork, allegedly. So
19 I don't see them, I therefore can't interact with them,
20 and I don't see them interacting with Timothy. 15:04

21 194 Q. So you have not seen them interact with Timothy?

22 A. No. No.

23 195 Q. You talked about sometimes you'll get phone calls, and
24 more recently you get regular phone calls about what's
25 happening. Do you know who those telephone calls are 15:04
26 from, and are they from the same person each time?

27 A. It's different people every time. Sometimes it's a
28 nurse; sometimes it's health care assistance.

29 196 Q. Sometimes a health care assistant will ring up to tell

1 you there has been an incident or --

2 A. No, no, no. Since the year that Robin Swann was up at
3 Muckamore and I had that conversation with those two
4 people, I get daily phone calls. Update phone calls to
5 hear how Timmy is. 15:05

6 197 Q. That be a health care assistant might do the daily
7 update?

8 A. Yeah, absolutely.

9 198 Q. But if there was an incident --

10 A. There was an incident recently there; it was an 15:05
11 ordinary nurse, yeah. When I say ordinary, he wasn't
12 the nurse in charge.

13 199 Q. He was a qualified nurse but not the nurse in charge?

14 A. He was a qualified nurse. Yes, yes, he was.

15 200 Q. If I hear you correctly, you're saying the nurses in 15:05
16 charge, you don't have much interaction with them?

17 A. I have little interaction.

18 201 Q. You haven't seen them with Timmy?

19 A. No, I definitely haven't seen them with Timmy.

20 202 Q. The qualified nurses who aren't in charge, do they have 15:05
21 much direct contact with Timmy?

22 A. Yeah. I have seen them. Yeah, they do.

23 203 Q. Do you think that they are overseeing what the health
24 care assistants are doing --

25 A. No. 15:06

26 204 Q. -- because they have the training?

27 A. The health care assistants, the three that I am talking
28 about, not all of them but those three, in my opinion,
29 are way and above some of the nurses.

1 205 Q. I am thinking about some of the other health care
2 assistants. Do you think the ordinary nurses, the
3 qualified nurses --

4 A. I have never witnessed that. I don't know, I don't
5 know. 15:06

6 206 Q. So you don't know?

7 A. I don't know is the answer.

8 207 Q. Just coming back to the named nurse. You were saying
9 that there has been a new named nurse appointed in
10 January, and you didn't find out until -- 15:06

11 A. Last week.

12 208 Q. -- last week. Were there ever periods of time over the
13 10, 11 years that Timmy has been there when you did
14 know that there was one nurse in particular looking
15 after his care? 15:06

16 A. When he first moved in, there was a really lovely
17 nurse, and she looked after Timothy and me. One day
18 she told me that here's my email address if you ever
19 want to ask me something; I can either reply to you or
20 the next time I see you give you the answer. I felt 15:07
21 very professional and compassionate. Then, about a
22 week after that giving of the email, the nurse in
23 charge of PICU came up to me laughing like this, and I
24 thought what is it, what on earth is it. He told me
25 that that nurse had died by falling down the stairs. 15:07
26 That's how he told me, coming along, laughing. Then he
27 said "I just thought you would be interested because
28 you seem to be close". That upset me a lot, what sort
29 of a person is he in charge of the ward, which included

1 looking after my son.

2 209 Q. Just finally, you made a comment when you were
3 answering one of the questions from counsel and you
4 said to me you'd understand the leadership of the ward
5 is important. Did you see different standards of care 15:08
6 depending on who was in charge?

7 A. Yes, very much so, yes. You know the old ward sister
8 that people referred to as a bit of a dragon, or some
9 other derogatory term, which I think we need to a
10 certain extent, there was some very, very nasty nurses 15:08
11 in charge. Yeah, I actually made a formal -- not a
12 formal complaint but a compliant through email about
13 one in particular, an agency staff that was the nurse
14 in charge. It was very upsetting, what she did to me,
15 basically I wasn't allowed into the ward. But then I 15:08
16 spoke to that senior manager, the one that actually
17 left in the razor for Timothy, she made sure that I did
18 get in that day. I was told now only five minutes,
19 you're only allowed in for five minutes; not from the
20 senior manager but from this nurse, and then -- and 15:09
21 only allowed in his bedroom, specified that. But Timmy
22 saw me. I was wearing a mask. He brought down my mask
23 and gave me a kiss in front of her and I thought oh, my
24 God, she won't like that. Anyway, I put my mask back
25 and then Timmy led me out to the outside space, which 15:09
26 was just a concrete area. It's not very nice but at
27 least it's outside. Timmy lay down on the tarmac and I
28 got down too and was talking to him, singing to him
29 maybe. Then this particular nurse in charge came out

1 and said I thought I told you that you had to stay in
2 the bedroom, you were told it was only five minutes you
3 were allowed. I thought, what should I do here; I am
4 not doing any harm, there is no other patients about
5 and I thought but it's not worth it to talk back, to 15:10
6 defend myself or whatever, for Timmy's sake. So, I
7 just got up and left.

8
9 But I have passed that on to actually the director, the
10 current director. I passed that on to her at the time 15:10
11 but that was very -- it was awful. I even thought --
12 anyway I won't go into it. But anyway, that was
13 difficult.

14 210 Q. Thank you very much.

15 A. I think you have a nursing background, don't you, and 15:10
16 that's why there was certain things you will understand
17 this, you will know what I am trying to say. Now that
18 you two won't, but what I am trying to say.

19 211 Q. Thank you.

20 CHAIRPERSON: I just want to ask a few questions. You 15:10
21 really seem to feel that nothing happened if you spoke
22 to the people at ward level?

23 A. Yes, yes.

24 212 Q. You told us that now you have access to more senior 15:11
25 management, as it were, you would do that pretty
26 automatically now. When did that change? At what
27 point did you feel you could go to the senior managers
28 of the Trust to get something to happen?

29 A. 2018 or '19. It all started with that member of -- the

1 director standing in as my go-to person.

2 213 Q. Yes.

3 A. And that sort of gave me confidence, well, I'll go to
4 her. I don't want to go right up to her, let's try the
5 one slightly lower. But she did nothing for me. 15:11

6 214 Q. So, before that --

7 A. I didn't know anybody in senior management. Nobody at
8 all.

9 215 Q. I understand that. Did you ever speak to the nurses in
10 charge, one of the nurses in charge of the ward? 15:12

11 A. Oh, yes. Yes.

12 216 Q. Did anything happen as a result of that?

13 A. Generally, no is the answer.

14 217 Q. You also speak in your statement, I think, about
15 speaking, was it to Bryson House and advocates. Did 15:12
16 you ever have somebody who you could speak to outside
17 of Muckamore who would give you assistance or support
18 as an advocate for you or for Timmy?

19 A. It was just the Bryson House advocates that I knew
20 about. I only knew because one member of staff slipped 15:12
21 me a note at the contact meeting.

22 218 Q. How did they help you?

23 A. Well, at the very first stage in 2018, this girl
24 advocate that came with me to that place Fairview.
25 It's just -- it's a bit like that MAPA training, it 15:12
26 empowers you, you've got back up. The way they treat
27 you, as if not quite that you're mad but you're
28 troublesome, whereas she backed me up 100%. She said I
29 was completely right, what you're doing.

1 219 Q. Just one last thing. You told us about your
2 interaction with the podiatrist and Timmy's feet.
3 Also, in your statement you talk about things like
4 having to buy the weighted blanket and the chair?
5 A. Yes. 15:13

6 220 Q. Did you have any interaction with occupational
7 therapists --
8 A. Recently.

9 221 Q. -- or speech and language therapists?
10 A. Only recently. No, not in those days. This has been 15:13
11 in the last year.

12 222 Q. Physios?
13 A. Mo. Oh, no, I have never been in touch with a physio.

14 223 Q. Any interaction with allied health professionals in
15 terms of speech and language or OTs has been very 15:13
16 recent; in the last couple of years?
17 A. Very recent. In the last year; year and a half
18 actually.

19 224 Q. Were you aware of their existence before that?
20 A. Yeah but apparently Timmy didn't need OT, Timmy didn't 15:14
21 need speech therapy. I did ask.

22 225 Q. Who told you that?
23 A. Purely the ward staff.

24 226 Q. All right.
25 A. When I was watching the sessions last week or the week 15:14
26 before, there was some people sitting here saying about
27 the policies and procedures and what was happening.
28 what they should have said these are the policies and
29 procedures and we expect them to be enacted in the

1 hospital but that's not always the case. Yeah.

2 227 Q. We do understand that.

3 A. Yeah. Right.

4 228 Q. That's something we are going to be exploring later on
5 in the Inquiry, so don't worry about that.

15:14

6

7 Dawn, can I just thank you very much indeed for coming
8 to speak about Timothy. You've spoken very clearly.

9 It must have been very difficult for you to make this
10 journey, to make such a full statement and then to come
11 here and speak about it. I just want to thank you very
12 much. You've certainly given a voice to Timmy, which I
13 know you wanted to do.

15:15

14 A. I'm glad to hear that, yeah. Thank you. Thank you to
15 everybody.

15:15

16 CHAIRPERSON: Thank you. We'll take a break now
17 because I think we are going to hear from your sister.
18 I think that will be a bit shorter than your evidence
19 but we'll take a break just for sort of 15 minutes now.
20 Thank you very much indeed.

15:15

21

22 THE INQUIRY BRIEFLY ADJOURNED AND RESUMED AS FOLLOWS:

23

24 CHAIRPERSON: Thank you.

25 MR. MCEVOY: Chair, Panel, the next witness is
26 Catherine, who is the aunt of P77. There is a brief
27 statement on two quite short exhibits then.

15:40

28

29

1 CATHERINE, P77' S AUNT, HAVING BEEN SWORN, WAS EXAMINED
2 BY MR. MCEVOY AS FOLLOWS:

3
4 229 Q. MR. MCEVOY: Okay. Catherine, good afternoon. You
5 have been present for Dawn's evidence so you have some 15:40
6 idea of how things run now. If I can take you just to
7 the folder that's in front of you which contains a copy
8 of a statement in your name. It totals 33 pages. If I
9 could ask you to turn to page 16, there is a
10 declaration of truth and, hopefully, your signature. 15:41

11 A. Yes.

12 230 Q. And a date of 27th April '23?

13 A. Yeah.

14 231 Q. Do you wish then to adopt that statement as the basis
15 of your evidence to the Inquiry? 15:41

16 A. Yes.

17 232 Q. I am going to read that statement in in much the same
18 way as I did with Dawn's. I'll do that now and then I
19 will have some very brief questions for you at the
20 conclusion. 15:41

21
22 "My connection with Muckamore is that my nephew
23 Timothy, known as Timmy, is a patient in Muckamore. The
24 relevant time periods that I can speak about is
25 November 2003 to the current day. Timmy is still a 15:41
26 detained patient in Muckamore. I attach a copy of
27 Timmy and me at Exhibit 1.

28
29 "My sister Dawn has made a detailed statement to the

1 Inquiry dated 19th April 2023. I have had the
2 opportunity to read this statement and I agree with the
3 content of Dawn's statement. I make this statement to
4 add some additional information which I recall, and
5 also to set out my observations in respect of Timmy's 15:42
6 detention at Muckamore as is stated. As my mum and dad
7 grew older, I became their carer and therefore spent a
8 lot of time with my mum and dad and we frequently
9 discussed our thoughts on Timmy's detention in
10 Muckamore, both when he was nine years old in 2003, and 15:42
11 again in 2012. My dad died on 26th April 2011 and mum
12 died on 9th July 2017.

13
14 "I recall when Timmy first went into Muckamore in 2003,
15 my mum and dad were absolutely terrified for him. They 15:42
16 advised me that they had heard previous scandals about
17 patients in Muckamore, and knew of other patients who
18 had been abused in Muckamore. My dad was a man of his
19 word and if people spoke to him in confidence, he would
20 not breach this confidence. My dad was an optician and 15:42
21 a member of a golf club in Belfast and he knew a lot of
22 people, both socially and through his work. My dad was
23 adamant that Muckamore was a terrible place but never
24 went into any detail as to why he had formed this view.
25 Similarly, he never disclosed who had told him about 15:43
26 Muckamore. I recall in 2003 I tried to alleviate their
27 concerns by advising them that these were probably
28 stories from times years ago and that this was in the
29 past. My dad voiced his extreme concern when Timmy

1 went into Muckamore.

2

3 "There was nowhere else for Timmy to go due to Timmy's
4 aggression, and Dawn had no other options. Dawn never
5 liked for me or my mum or dad to visit Timmy in 15:43
6 Muckamore. She discouraged us arranging a visit as I
7 think she thought it would be too upsetting for us. I
8 think she was concerned that we would notice things
9 that we were not happy about or that we did not think
10 were right, things that Dawn was already aware of but 15:43
11 did not speak to us about. I think she felt that there
12 was nothing she could do about them and there were no
13 other options for Timmy.

14

15 "My mum told me that Dawn was probably afraid that I 15:44
16 would go into Muckamore and be outspoken about what I
17 saw, which could then have created further problems for
18 Timmy. Accordingly, my mum, dad and I were reliant on
19 the information which Dawn fed back to us about her
20 visits to Timmy and the meetings she attended at 15:44
21 Muckamore, and we had confidence that Dawn was doing
22 everything that could be done for Timmy as his mother.

23

24 "During Timmy's first admission to Muckamore in 2003,
25 2004, what my parents said about Muckamore was 15:44
26 confirmed to us as a family. When Dawn told us how the
27 staff spoke to her, we did not like it. Dawn also
28 reported to us that the staff did not listen to what
29 she had to say in respect of her experience of Timmy's

1 behavioural traits as Timmy's mother. All we could do
2 was try to support Dawn.

3
4 "Timmy was on a gluten and dairy free diet before he
5 went into Muckamore in 2003. I recall that my mum and 15:45
6 dad had gone to the length of putting a child lock on
7 the fridge to stop Timmy getting at dairy foods in
8 their house. Dawn was making gluten free bread and
9 Dawn would not be known for her enthusiasm for home
10 baking. Timmy was looking good and healthy. When Dawn 15:45
11 advised me that Muckamore told her that Timmy was
12 eating gluten and dairy off other patient's plates, I
13 was really annoyed to hear this. I recall that my mum
14 and I discussed that there really should be enough
15 staff in Muckamore to stop patients taking food off one 15:45
16 another's plates. If we as a family were able to stop
17 Timmy eating gluten and dairy, how were the staff in
18 Muckamore not able to do the same? The staff just
19 clearly could not have been bothered.

20
21 "I recall that my dad was surprised when the staff were 15:45
22 getting Timmy ready for a phased release from Muckamore
23 in 2004. From what my dad had heard, once a patient
24 was admitted to Muckamore, they would never get out.
25 Our family were delighted that Timmy was actually 15:46
26 released from Muckamore and that his aggression was
27 fixed. My mum, dad, and I had discussions about
28 Muckamore, mainly over a cup of tea at the side of
29 their bed. My mum and dad had nightmares about

1 Muckamore and would wake up in the middle of the night
2 looking talk to me about Timmy and Muckamore. In 2011,
3 when my dad was dying, he gave mum and I our jobs.
4 Mine was to look after mum and also to make sure that
5 Timmy ever, ever went back into Muckamore again. Mum 15:46
6 was to look after the boys, being Dawn's three
7 children.

8
9 "When dad died in 2011, Timmy's behaviour was getting
10 worse as in his aggression was escalating. Timmy's 15:46
11 social worker, H432, was telling Dawn and I that there
12 was nowhere for Timmy to go. Mum and I knew that
13 Muckamore was open. We were horrified that we were
14 even considering a return for Timmy to Muckamore.
15 However, Timmy was big and strong and my mum was 15:47
16 seriously concerned that Timmy could end up
17 accidentally killing Dawn, whom he clearly loved,
18 during one of his violent outbursts. My mum did not
19 want Timmy responsible for murdering her daughter and
20 it was against that backdrop that we as a family were 15:47
21 prepared to consider Muckamore again.

22
23 "In 2011, my mum was unwell and admitted to RVH. My
24 mum and I discussed that we would encourage Dawn to
25 call the PSNI and ambulance the next time that Timmy's 15:47
26 school called her to collect him due to heightened
27 aggression, which we did. I received a phone call from
28 Dawn in September 2011 advising me that she was at
29 Torbank School and the PSNI and an ambulance were

1 there. Dawn wanted Timmy detained due to his
2 aggressive behaviour. It took a very long time to get
3 a general practitioner to attend the relevant paperwork
4 to detain Timmy. It was a terrible day for Dawn as we
5 waited hours and hours at Torbank School. Eventually, 15:48
6 Dawn did get a general practitioner to sign the
7 relevant forms and Timmy was taken to the Iveagh
8 Centre, which is located right by the RVH in Belfast.
9 By the time Timmy was admitted, Dawn and I were not
10 finished at the Iveagh Centre until 11.00 15:48
11 p.m. /midnight. After I left the Iveagh Centre, I went
12 straight to the RVH to visit my mum to tell her what
13 had happened despite the lateness of the time at night
14 because I knew she would want to know. Her response
15 was to say "at least it is not Muckamore" and that 15:48
16 "he's close to me" given the proximity of the two
17 buildings. My dad died, and my mum, Dawn and I were
18 hopeful that the Iveagh Centre would have been able to
19 fix Timmy so that he would not have to go to Muckamore.
20 15:48
21 "The Iveagh Centre was a positive experience for Dawn
22 and Timmy. Staff at the Iveagh Centre seemed to
23 welcome Dawn and they appeared interested in Dawn's
24 contribution as Timmy's mother. They were respectful
25 and supportive towards Dawn. In September 2012, when 15:49
26 it was approaching Timmy's 18th birthday, plans were
27 being made for Timmy to be transferred to Muckamore.
28 I recall Dawn telling me that the staff at the Iveagh
29 Centre said that they had to move heaven to earth to

1 allow Timmy to have his birthday in the Iveagh Centre
2 and for the transfer to take place the following day.
3 I remember my mum's words were "They have got their
4 claws into him now". She was referring to Muckamore.
5 We never thought Timmy would get out of Muckamore, and 15:49
6 he was likely to be abused in some way.

7
8 "I recall my mum and I going to visit the senior
9 minister of our church in April 2016. I was sent away
10 to make tea or something because my mum wanted to talk 15:49
11 to the minister on her own. This was after my dad had
12 died. My mum advised me that the minister knows what
13 my dad knew about the abuse in Muckamore and that it
14 was still happening. The minister was horrified that
15 Timmy was in Muckamore, but there were no other 15:50
16 options. Timmy had a man's strength and Dawn was a
17 small female and could not physically manage him.
18 Timmy has two brothers but it would not be fair on them
19 to ask them to look after Timmy. They have their own
20 lives to live. Accordingly, mum and I had to support 15:50
21 Dawn for Timmy to go into Muckamore.

22
23 "When Timmy was moved to Muckamore in September 2012,
24 Dawn was advised by Muckamore staff, and in particular
25 H397, the nurse in charge of PICU Ward where Timmy was 15:50
26 admitted, she was not allowed to visit him. Those were
27 the rules. My mum said Timmy's not an animal that they
28 are trying to break. Timmy was so upset and distressed
29 the first few weeks in Muckamore in September 2012 that

1 we thought it would have been better if he had have
2 been allowed to see Dawn as a loving face, but Dawn
3 told us that this was refused by H397. Instead, they
4 wanted to break Timmy's spirit and make him conform.

15:51

5
6 "I recall that mum occasionally suffered from urinary
7 tract infections and would sometimes become confused as
8 a result. As soon as she came back round to herself,
9 the first person she would ask after was Timmy. She
10 would ask is Timmy okay. I recall my mum pointing out 15:51
11 to me that Timmy seemed to be in seclusion a lot. My
12 mum would say to Dawn that it was all she had to ask
13 for permission to see her son, as Dawn would call
14 Muckamore in advance of the visit to check to see if he
15 was in seclusion. Dawn was not allowed to see Timmy 15:51
16 when he was in seclusion and my mum did not think this
17 was right. My mum was also annoyed that she never had
18 any photos of Timmy as Dawn had been told by Muckamore
19 staff she was not allowed to take photos. Dawn
20 followed the Muckamore rules set out to her by H397 and 15:52
21 she had no reason to query them.

22
23 "It seemed as if, when Dawn had reported to me that she
24 had had a difficult meeting with a member of Muckamore
25 staff, or if she complained about something, the 15:52
26 outworkings would be that Dawn would not be allowed to
27 see Timmy for a number of weeks thereafter. It was as
28 if Muckamore staff were punishing Dawn. In paragraph
29 37 of Dawn's statement, she refers to a meeting whereby

1 H397 told Timmy's consultant that Timmy had been
2 swimming, which was not correct. Dawn asked H397 to
3 follow up with the consultant and correct this
4 information, which he did not want to do. Dawn did not
5 see Timmy for nearly six weeks after this. We stopped 15:52
6 encouraging Dawn to complain because the outworkings of
7 her complaints were that she was not allowed to see
8 Timmy, and that was not in the best interests of Timmy
9 or Dawn.

10
11 "I was looking after mum and the only way I could
12 support Dawn was to listen to what she had to say in
13 detail and retain the information. Mum and I purchased
14 nice clothes for Timmy to wear in the same way we
15 bought for Dawn's other two sons. Dawn reported to us 15:53
16 that she never saw Timmy wear these nice clothes, he
17 was always dressed in other people's clothes, which
18 were torn. I believe the staff took Timmy's nice
19 clothes and either kept them for themselves or gave
20 them to their children. I did not like this but I did 15:53
21 not say anything about it.

22
23 "Dawn, mum and I were concerned about Timmy's weight
24 when he was in Muckamore from 2012. Dawn reported to
25 us that Timmy looked pregnant. It took Dawn such a 15:53
26 long time to get Muckamore staff to realise that Timmy
27 was overweight because of the food that Muckamore was
28 allowing Timmy to eat. Timmy does not cook or shop for
29 himself, he eats what is handed to him. The staff in

1 Muckamore were clearly overfeeding Timmy. We were
2 pleased when Timmy's weight was starting to come down
3 in and around 2016 and 2017.

4
5 "The only time Muckamore listened what Dawn was saying 15:54
6 was when she was giving Muckamore cash. My mum was
7 absolutely horrified as to the amount of cash which
8 Dawn was paying to the ward, mainly H397 at Muckamore.
9 My mum wanted to give Timmy money and make sure he
10 wanted for nothing but she did not want to pay in cash. 15:54
11 Instead, she insisted in paying money by cheque and she
12 made sure that I did the same. My mum was very
13 financially aware. Dawn told the staff at Muckamore
14 that she never wanted Timmy to want for anything, which
15 was a mistake because they treated Dawn like a cash 15:54
16 machine in return.

17
18 "Dawn had a concern that if she did not pay over the
19 money that was requested, then Timmy would be abused
20 and forgotten about by the staff in Muckamore. Mum and 15:54
21 I paid cheques into Muckamore for Timmy as presents for
22 his birthday and Christmas. My mum felt that this gave
23 more credibility and accountability to the money that
24 was paid into Muckamore for Timmy. We wanted Timmy to
25 have money in his account in case he needed anything. 15:55
26 My mum was very keen to ensure that Timmy received the
27 rocking chair and weighted blanket that we had agreed
28 to buy for him in Christmas 2016, which Dawn refers to
29 in paragraph 39 of her statement. Muckamore suggested

1 that we buy the chair as a present, but there appeared
2 to be a whole lot of bureaucracy around Timmy getting
3 this chair. My mum asked me to phone a removal company
4 to see whether the chair could be delivered to her
5 house and then the removal company could deliver it to 15:55
6 Muckamore. My mum told me to ring Muckamore, which I
7 reluctantly did. I think I spoke with 397. He gave me
8 a load of drivel down the phone about having to follow
9 procedures and in the end he told me that they had to
10 get the chair through the Belfast Trust. We had paid 15:55
11 Muckamore for the chair and my mum thought Muckamore
12 staff had pocketed the money. The deputy in charge of
13 Learning Disability Services for Belfast Trust arranged
14 for us to receive a refund of the money paid, which
15 confirmed to me that my mum was probably correct. My 15:56
16 mum had passed away by the time we received the refund.
17
18 "I was concerned regarding the relationships between
19 staff members at Muckamore. If they were not married
20 to each other, they were relatives or in a 15:56
21 relationship, or next door neighbours, or some form of
22 close connection. The staff talked about this openly,
23 it was not a secret. This meant that no one was
24 independent. I remember Dawn telling me that H397 told
25 her that he was the cousin of H334, a nurse at 15:56
26 Muckamore. H334 came across as a nervous guy, always
27 anxious and a bit depressed. This was before he went
28 off on long-term sick leave in and around 2016, 2017,
29 which coincided with the discovery of the abuse. By

1 the time H334 returned to work, a lot of staff members
2 were suspended and he was like a different person. He
3 was outgoing and happy.
4

5 "I recall that Dawn advised me that she was speaking 15:57
6 with H334 when he returned from sick leave and she
7 mentioned to him that he was H397's cousin. H334
8 denied this, which was strange. I believe that H334's
9 previous behaviour was as a result of being under the
10 influence of abusive staff members but that is just my 15:57
11 opinion, of course.
12

13 "I noticed that any new staff member to Muckamore
14 started enthusiastic and positive and ready to perform
15 the role to the best of their ability. I observed, and 15:57
16 also from what Dawn told me, that within a period of
17 six weeks, the new staff had either asked for a
18 transfer, handed in their notice or, worst of all,
19 conformed with the negative behaviours and practices of
20 the existing staff members. From what I observe and 15:58
21 also from what Dawn tells me, I believe this still to
22 be the position today. This is the case for nurses,
23 general practitioners, social workers, doctors and
24 dieticians. It is across the board. If they stay
25 beyond six weeks, they become consumed by the negative 15:58
26 hospital culture.
27

28 "I recall being in a meeting with the Interim Director
29 of Learning Disability and Mental Health Services at

1 the Belfast Trust with my sister Dawn, and when Dawn
2 suggested a simple change as to how the staff in
3 Muckamore reported to her, a response was "This is the
4 way it has always been done". Therefore, this is the
5 attitude at the highest level, not just junior staff. 15:58
6 Surely by now very senior management should know that
7 there are flaws in how things have always been done and
8 change is necessary.

9
10 "I can reflect and see this more clearly than Dawn 15:59
11 because Dawn is at the coal face of dealing with issue
12 after issue concerning Timmy and she is consumed with
13 that and making sure he is okay.

14
15 "My mum seemed to know that there was abuse in 15:59
16 Muckamore but she seemed to think this was limited to
17 financial abuse. I do not know where she obtained this
18 knowledge. As a family, we could afford financial
19 abuse and keep up with the demands of Muckamore for
20 money. To hear that our worst fears of what dad had 15:59
21 said about Muckamore were true, that the abuse was not
22 limited to financial, was awful. Thankfully, my mum
23 died just before we learned the full extent of the
24 abuse on Timmy.

25 15:59
26 "I recall a meeting in around late 2018 held in the
27 Antrim Area Hospital in Antrim. The meeting was
28 organised by Muckamore to discuss the abuse with
29 families of those with relatives in Muckamore. The

1 Chair of the Board of Belfast Trust and the Chief
2 Executive of the Belfast Trust both attended. They
3 were very apologetic. They advised us at this meeting
4 that they did not know about the abuse and assumed that
5 everything was fine in Muckamore because they had not 16:00
6 heard any signs of discontent in years. The deputy in
7 charge of Learning Disability in the Belfast Trust also
8 attended this meeting, but it was their job to make
9 sure everything was okay, not simply assume so because
10 they had not heard anything. The Chair and Chief 16:00
11 Executive seemed to think this was a justifiable
12 excuse. This meeting was not overly useful as families
13 did not know all the facts or the extent of the abuse
14 at that time, and had an underlying fear that their
15 loved one would be discovered to have been abused as 16:00
16 well as Timmy.

17
18 "I regularly attended meetings with Dawn at Muckamore
19 to support her, relating to anything from monthly
20 update meetings on Timmy's treatment, resettlement, or 16:00
21 meetings with management from Muckamore and/or the
22 Belfast Trust. During any meeting, there is always
23 someone taking notes, usually very loudly typing on a
24 keyboard, almost to the point that the typing sound
25 drowns out whoever is talking, which is very 16:01
26 irritating. When Dawn or I ask for the minutes of the
27 meeting, it usually takes months for them to be
28 available. This is the case even when the meetings are
29 being recorded on Zoom. If the minutes are produced,

1 which are not always the case, the minutes are written
2 in a way to highlight the positives and ignore the
3 negatives of the discussion at the meeting. They do
4 not detail anything discussed which is not on the
5 original agenda. It is difficult to challenge the
6 content of the minutes because they are not incorrect
7 but they do not accurately reflect the tone of the
8 meetings or the behaviours projected by people at the
9 meeting.

16:01

10
11 "Occasionally I am in Dawn's house when she is
12 attending a Muckamore Departmental Assurance Group
13 online and overhear the meeting. When the minutes of
14 these meetings are produced, again they do not reflect
15 what was said at the meeting. I recall attending an
16 update meeting with Dawn at Muckamore. This was in and
17 around September 2021. In the morning before the
18 meeting, it would be the usual course for Dawn to be
19 sent through a report from each department at Muckamore
20 who is involved in the care of Timmy. During the
21 course of the update meeting, H409, assistant service
22 manager at Muckamore who chaired the meeting, allowed
23 each department to read out their report verbatim.
24 There were a number of other Muckamore staff present at
25 the meeting but I do not recall their names. Dawn
26 rightfully asked questions on the content of what was
27 being read out during the course of this meeting; it
28 was to do with Timmy's care at Muckamore. After the
29 meeting, Dawn advised me that H409 telephoned her and

16:01

16:01

16:02

16:02

1 advised that some of the staff found her questioning to
2 be contentious and upsetting. She advised Dawn that
3 none of the staff had made a formal complaint but that
4 in future, Dawn should not ask questions during the
5 course of these meetings. She should keep these and 16:03
6 put them to 409 at the end of the meeting and she will
7 address them separately.

8
9 "Dawn made contact with H315, divisional nurse at
10 Muckamore, to complain about what 409 had said to her. 16:03
11 H315 advised Dawn that she did not believe that H409
12 could have said this. She arranged a meeting with
13 Dawn, H315 and H409, and I also attended. I do not
14 remember exactly when this was but it was shortly after
15 the meeting in September 2021. During the course of 16:03
16 this meeting, H409 denied advising Dawn that she was
17 not allowed to ask questions at the update meeting.
18 She said that if this was what she inferred, then she
19 apologised. Going forward, the meetings were recorded
20 on Zoom, which Dawn and I were happy with as it limited 16:03
21 how antagonistic the staff behaved. There is a feeling
22 of them, the Muckamore staff, and us, Dawn and I, at
23 these meetings. It feels like Dawn is only provided
24 information on Timmy's care if Muckamore staff are
25 forced to do so by Dawn. 16:04
26

27 "I recall in late 2021 or early 2022 that Dawn advised
28 me that she went to Muckamore to visit Timmy and was
29 told by an agency lead nurse called H433 - she does not

1 recall her surname - that Timmy was not available for a
2 visit. This was in the reception area of the hospital.
3 Dawn advised me that the nurse was very aggressive
4 towards her. She advised Dawn on three occasions that
5 Timmy was not available, even though Dawn accepted this 16:04
6 the first time the nurse told her so. The nurse kept
7 saying she would not be seeing Timmy on that day. Dawn
8 advised me that the nurse leaned over the reception
9 desk towards her in an aggressive way and Dawn thought
10 that the nurse might hit her. Dawn advised me that the 16:04
11 nurse would not press the release button to open the
12 door to let her out, and only did so after being asked
13 by Dawn a few times. Dawn sent an email to H234,
14 Interim Co-Director of Nursing, to complain about this.
15 I do not have a copy of the email. I do not know if 16:05
16 H234 responded to the email but Dawn advised me that
17 H234 had advised her that she would ask the member of
18 staff to have reflections on how she treated Dawn.

19
20 "During a meeting in Norr House at Knockbracken 16:05
21 Healthcare Park on 15th June 2022, which was attended
22 by H428, Director For Learning Disability Services at
23 the Belfast Trust; H414, a director of Muckamore, H234,
24 FLSW2, family liaison officer, Dawn and I, Dawn brought
25 up her complaint regarding the incident with the nurse 16:06
26 at the reception desk. H414 advised that she had not
27 heard about this; H234 had not informed her. When Dawn
28 asked H234 had she not informed H414 of her complaint,
29 H234 put her head down and shook it slowly from side to

1 side. Dawn went through her experience with H414
2 during this meeting and H414 seemed to be taking this
3 very seriously. However, she never followed up or
4 seemed to do anything about it. This is a good example
5 of Muckamore saying they will do something but then
6 doing nothing. 16:06

7
8 "As the aunt of a patient, I feel that safeguarding in
9 Muckamore was always poor. Prior to the discovery of
10 the abuse in 2017, 2018, the only people that we could 16:06
11 approach if we had an issue which we were not happy
12 about with Timmy's care in Muckamore were H251,
13 patient-on-patient safeguarding in Muckamore, or H283,
14 a social worker in safeguarding in the Belfast Trust.
15 When Dawn phoned H283 to talk with the safeguarding 16:07
16 issue, H283 would keep her on the phone for a very long
17 time talking about her own life issues. Dawn advised
18 me that H283 had a remarkable way of avoiding a
19 question and directing the conversation away from the
20 topic that Dawn wanted to discuss. Dawn therefore 16:07
21 never got anywhere with H283.

22
23 "When the abuse was discovered, I did some research on
24 the internet and this was the first time that I had
25 heard of or come across RQIA or the Patient Client 16:07
26 Council. Surely both of these organisations should
27 have been involved in Muckamore but Dawn or I had never
28 heard of them. I recall that after the discovery of
29 the abuse and RQIA started to audit Muckamore, the

1 staff at Muckamore would be able to tell us when RQIA
2 were conducting a surprise visit. It is not much of a
3 surprise if the hospital knew that they were coming.
4

5 "In paragraph 97 of Dawn's statement, she refers to a 16:08
6 meeting at RQIA's offices in which she attended with
7 two members of RQIA staff. I was also in attendance at
8 this meeting. This was an incredibly difficult meeting
9 for Dawn as she relayed everything that had happened to
10 her son in Muckamore. As Dawn says in her statement, 16:08
11 despite all of what she relayed to RQIA at this
12 meeting, Muckamore received a clean bill of health from
13 RQIA, which is ridiculous. I am aware from research
14 that I have conducted on the internet that RQIA here in
15 Northern Ireland do not have the same powers as they do 16:08
16 in England and Wales. They are like a dog with no
17 teeth and the Belfast Trust simply indulge them.
18

19 Post-2017, Dawn has been advised of a huge number of
20 safeguarding incidents involved Timmy. I do not know 16:09
21 the exact number. I understand that when a
22 safeguarding incident occurs, Muckamore are supposed to
23 complete a form called APP1 and Dawn should receive a
24 copy of this form. I am advised by Dawn that she does
25 not recall ever having received one of these forms 16:09
26 despite the number of safeguarding incidents Timmy has
27 been involved in. Therefore, Muckamore are still not
28 following their own procedures. It appears that the
29 more serious the safeguarding incident, the longer

1 takes to be investigated and for the outcome to be
2 established. Surely if the incident is so serious,
3 then it should be investigated rapidly. An incident
4 can take two to three years to be investigated. By way
5 of example of this, I recall in March 2021 Dawn had 16:09
6 advised me that she had received a phone call from a
7 nurse in Muckamore - I do not know who this was - to
8 advise her that they suspected that Timmy had broken
9 his toe and Muckamore would open a safeguarding
10 incident concerning this. Once safeguarding looked 16:10
11 into the incident, they identified that Timmy had
12 incurred this broken toe during an incident two weeks
13 previous when Timmy was being violent and needed to be
14 restrained. Dawn has been provided with three
15 different explanations as to how Timmy incurred his 16:10
16 broken toe. The first explanation is that Timmy was
17 wearing flip flops and his foot pushed forward and one
18 of the Muckamore staff stood on his toe while trying to
19 restrain him. The second explanation is that while
20 trying to hold Timmy in a MAPA hold, a nurse had stood 16:10
21 on Timmy's foot for 23 seconds. The final explanation
22 is the same as the second, only that the nurse stood on
23 Timmy's foot for nine seconds. All explanations
24 identify the same incident and there is CCTV of the
25 incident but there are different versions of what 16:10
26 actually happened.

27
28 "I understand a member of the safeguarding team at
29 Muckamore referred this incident to the PSNI.

1 Dr. H224, Timmy's consultant at the time, did not
2 arrange for Timmy to attend hospital to have his toe
3 x-rayed. Her explanation was that if Timmy's toe was
4 broken, then there was nothing the hospital can do for
5 him. Therefore, there is no evidence that Timmy's toe 16:11
6 was indeed broken. Accordingly, the PSNI advised they
7 could not take the matter forward. The PSNI, however,
8 advised, having reviewed the CCTV footage of the
9 incident, they were unhappy because some of the holds
10 used by Muckamore staff during this incident which 16:11
11 resulted in Timmy's toe being broken are not compliant
12 with MAPA, and they referred the matter to a specialist
13 in MAPA technique. Dawn just received in the post a
14 letter from the Belfast Trust a few days ago, a letter
15 from the Belfast Trust dated 13th April 2023, which 16:11
16 encloses a copy of the report prepared by that
17 specialist dated 16th March 2022 following the referral
18 from the PSNI. I attach a copy of this report at
19 Exhibit 2. On the last page of this report, the
20 specialist states whilst "Staff 1 and Staff 4 feel this 16:12
21 is appropriate way to behave towards patients, they
22 remain a risk to Timothy and other vulnerable people in
23 their care".

24
25 "FLSW2, our family liaison officer, has advised me from 16:12
26 inquiries that he has made Staff 1 and Staff 4 were put
27 on suspension within a few days of this report being
28 prepared by the specialist but this means that due to
29 the length of time that it took for this matter to be

1 investigated, these members of staff were working with
2 Timmy and other vulnerable people for a full year
3 before they were suspended, during which time, in the
4 specialist's view, being a risk to such patients. This
5 astounds me." 16:12

6
7 Catherine, you then go on to talk about Dawn's private
8 life and background. I am not intending to read it out
9 in its entirety but I'll pick it up just where you say
10 on fourth line down: 16:13

11
12 "I believe that Muckamore has the ability to coercively
13 control Dawn. Every interaction Dawn has with
14 Muckamore, there is the undertone that Muckamore have
15 total control over Timmy. Therefore, Dawn advises me 16:13
16 that she feels like she needs to be nice to the staff
17 in Muckamore. The coercive control is subtle but
18 constant. It is lucky that Dawn is strong enough to
19 deal with the staff in Muckamore. I am conscious when
20 I am speaking to Dawn about Timmy's treatment that I do 16:13
21 not reinforce anything which she is told by Muckamore.
22 I have insisted that Dawn documents all of her
23 interactions with Muckamore by way of email,
24 particularly around safeguarding, and that in turn she
25 insists that any responses she receives are also 16:13
26 documented in writing. I trust Dawn to deal with
27 Muckamore in everything that she does or does not do is
28 in the best interests of Timmy. This includes her
29 picking her battles and only pushing certain points

1 with Muckamore so far."

2

3 Catherine, thank you for that statement. I only have a
4 couple of questions arising from it, and it's really
5 from your perspective as Dawn's sister. 16:14

6 A. Mhm-mhm.

7 233 Q. Obviously the Inquiry has heard first-hand from Dawn,
8 both in her statement and oral evidence today, but you
9 get to experience her on a daily basis. Perhaps we
10 have seen one version of Dawn today but can you tell us 16:14
11 about the toll that Timmy's experience in Muckamore has
12 taken on her from your own perspective?

13 A. No matter how upsetting anything is, we were brought
14 you don't embarrass people, you don't show your
15 emotions, and that goes for sitting here today. Any 16:15
16 meetings she has with Belfast Trust or the hospital,
17 it's you deal sensibly, logically, with the people in
18 front of you, and then you wait and you get in the car
19 and you drive five miles down the road and then you can
20 fall apart. You cannot fall apart because the fact 16:15
21 that she is labelled "mother" means instantly as soon
22 as she starts to speak, anybody in the meeting will go,
23 we don't need to listen any more, wait for her to
24 finish and then they reengage. So added to that, if
25 Dawn got emotional, there would be absolutely no 16:15
26 credibility.

27

28 It's permanently pushing water uphill. There just
29 never seems to be an end to it. There never seems to

1 be an end to safeguarding incidents or worries about
2 Timmy, you know. We self-check that are we being
3 neurotic. Our standards are very low, we just want
4 Timmy not to get hurt; that's it. We don't want them
5 necessarily to be nice to him, just don't hurt him. 16:16

6
7 We've actually had a discussion as to whether we should
8 give evidence because Timothy is still in Muckamore and
9 what sort of subtle retribution will be taken out on
10 Dawn and Timothy? How long will it be before Dawn 16:16
11 isn't allowed to see Timothy because well, he might
12 have Covid so we need to seclude him; or well, you
13 know, he was a bit upset today so he is asleep. They
14 always have plenty of excuses. But there will be
15 something but, again, upbringing it's right thing to do 16:17
16 because you do need to hear what the reality is,
17 regardless of the effects that it has on Dawn and the
18 rest of the family.

19 234 Q. Catherine, could I then ask you just one other matter
20 to ask you about. In the body of your statement, you 16:17
21 referenced becoming aware of two statutory
22 organisations namely, the RQIA and the Patient Client
23 Council. The RQIA, you have discussed some
24 interactions with them. Taking that organisation
25 first, based on the interactions that you and Dawn have 16:17
26 had with the RQIA - I mean, you mention the lack of
27 teeth that you perceive it has - is there anything that
28 you think it could do better from your perspective as
29 the carers for Timmy?

1 A. I think they should make a surprise visit, an actual
2 surprise visit, not seeing staff two days beforehand
3 going "RQIA are doing a surprise visit in two days, I
4 have to get all the paperwork right". I mean, I know
5 Northern Ireland is a small place, but seriously. 16:18

6 235 Q. Then in terms of the Patient Client Council, you had no
7 interactions with them?

8 A. I didn't even know they existed. As for Muckamore,
9 you know.

10 236 Q. How would you describe your interactions with them 16:18
11 having since found out about them and what they do?

12 A. Well meaning but clueless. They think their normal
13 reality is normal for Muckamore, and they apply those
14 standards. That's not normal for Muckamore. Muckamore
15 is a whole different standard. So it's like they can't 16:19
16 conceive that... They expect a certain level of
17 professionalism.

18 237 Q. Yeah.

19 A. A certain level of, you know, that's the way everybody
20 does things because obviously in every hospital that is 16:19
21 the way that everyone does things. That doesn't apply
22 to Muckamore, and they don't seem to get that concept.
23 It is a different scale.

24 238 Q. Okay. Thank you.

25 A. Sorry. 16:19

26 239 Q. Those are the questions I have for you. It may be that
27 the Panel have some questions.

28 CHAIRPERSON: We don't. I think your sister has
29 covered a lot and you've added to that. Can I just

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thank you very much for coming along, particularly for supporting your sister and helping to give a voice for Timothy that we have heard. Can I thank you both very much again.

16:20

All right. We're next sitting tomorrow, I think at ten o'clock. That is right. Tomorrow we will be starting to be able to use the live stream again. Thank you very much.

16:20

THE INQUIRY ADJOURNED TO 10.00 A.M. ON WEDNESDAY, 21ST
JUNE 2023