

CHAIR'S STATEMENT AT THE END OF JUNE 2024

ISSUED ON 27 JUNE 2024

1. I want to start by thanking each and every witness who has assisted the Inquiry so far. The Panel does understand that giving evidence before a public inquiry can cause anxiety, and that the preparation of statements and the subsequent attendance here is time consuming. But the foundation of evidence that is being built to underpin our eventual report and recommendations is significant. I also want to pay a final tribute to Geraldine O'Hagan who did so much work to assist the families both in giving their loved ones a voice and in assisting them to help the Inquiry. Literally in her dying days she completed that work as far as she could, by giving evidence before us on 15 May 2024 to assist the Panel.
2. We recommenced our oral hearing sessions in February this year and unfortunately then had to break for several months. However, despite that, we have made significant progress. This year we have called a further thirty staff witnesses and read another nine. We have completed the significant task of hearing the core evidence in relation to the investigation into the issues on Ennis Ward, and we have also heard about the reports of David Bingham and Professor Owen Barr from their authors.
3. We have made significant inroads on the evidence we need to hear in the ten Organisational Modules. We have heard evidence on Organisation Module 1 – Patient Advocacy and Representation, Module 2 – Professional Education; and Module 3 - Professional Regulation, although we have not forgotten the General Medical Council from whom we have requested a further statement; Module 4 – the PSNI and their role in safeguarding we have yet to hear, but Module 5 and Module 6 have been substantial modules dealing with the important issues of inspection and resettlement respectively. Regarding Module 5, the Inquiry is still seeking to obtain evidence with regard to the role of the Mental Health Commission. We will also of course be picking up on some of the themes from these earlier modules with the witnesses who will be giving evidence in the later organisational modules.
4. In relation to the taking of witness statements which we have received over the past few months, a number of those from members of staff have included negative feedback about the process. Much of this feedback appears to have

generic wording. Nevertheless, it is fair to remark that the making of a statement can itself be stressful. However, this is an inquiry into serious abuse of highly vulnerable patients, and it is inevitable that the staff at the hospital will be asked to make statements and be expected to comply with the process. That may cause some anxiety, but the Inquiry has done what it can to make the process of giving evidence as easy as possible.

5. I have had requests from Phoenix Law to hear further evidence on how resettlement has been undertaken and how it has affected their clients. As we are all aware, the patient experience phase of the Inquiry closed in October 2023. It is not proposed to re-open that phase of the Inquiry. It must be recognised that the formal evidence part of the inquiry has boundaries and is limited to a large extent by our terms of reference which have an end date in June 2021. Nevertheless, the Panel will consider that request, and it may be that before designing any recommendations we will call for further material, in some form or another. It is unlikely to be by way of formal statements. The Solicitor to the Inquiry has written to Phoenix Law to respond to a number of issues they have raised, and I hope that Phoenix Law will share that letter directly with each of their clients.
6. Hearing days will begin again on 09 September, and we have a lot to deal with. As mentioned earlier, we still need to deal with evidence from the GMC and the Mental Health Commission (whether by way of written or oral evidence), as well as the PSNI in Module 4. In that first week, we will continue with the MAH staff witness evidence before turning to deal with Module 7, which will look at the organisational and operative management of BHSCT, Module 8 Professional Organisation and Oversight, Module 9, looking at the operation of the Trust Board and finally Module 10, the Department of Health.
7. We will sit from 09 September until the end of October 2024 for the completion of the oral evidence.
8. The proposal then is to take a break from 30 October to the 25 November 2024. We will then hear closing statements from Core Participants during the week of 25 November, and I will issue further instructions in relation to written and oral submissions closer to the time.
9. There will therefore be much to do over the summer, and we hope to provide the majority of remaining statements for MAH Staff witnesses and Organisational Modules by the first week of August 2024.
10. Finally, can I thank all of those involved in this Inquiry for their hard work and dedication. We have had some very long days recently and I would like to thank CPs and their representatives. Special thanks to Paula our Stenographer for bearing with us and never complaining. I would also like to thank our technical team, Eddie, Grace and Tara who make sure we broadcast appropriately and

always have the documents to hand. I would like to thank the Counsel team, the Solicitors team, the administrative staff and security staff as well as all those who make the hearing room and the statement sharing process work so well. We are also very appreciative of our counsellors who have provided a significant amount of support to our witnesses, they do that quietly and, in the background, but their work is essential.

11. May I wish everyone a good summer and we will see you all back here on 09 September.

Tom Kark KC
Chair MAHI