Thirlwall Inquiry

THE THIRLWALL INQUIRY

RULE 9 QUESTIONNAIRE FOR NURSES

Name: Cherryl Cuthbertson-Taylor Role as per Countess of Chester 2015-2016 Staff List: Nursery Nurse

Enclosed documents:

Witness statement dated 6 July 2018 (INQ0000069)

Audio recorded witness interview dated 6 November 2018 (INQ0007437)

Witness statement dated 4 December 2018 (INQ0000906)

Extract from transcript of Day 41 of trial (30 November 2022) relating to your evidence

(INQ0010286)

Questionnaire

Nursing career and employment at the Countess of Chester Hospital (the "hospital")

- Please provide a short summary of your nursing career. This summary should include at least the following information:
 - a. when you qualified as a nurse, including the educational institute or awarding body;
 - b. your nursing qualifications, including your nursing band from 2015 to the present;
 - C. details of your previous and current employment.

I qualified as an NNEB qualified nursery nurse in 1983 and started working in schools with ALN children. In October 1986 I started work as a band 4 nursery nurse at the countess of Chester hospital on the neonatal unit which I remained until November 2018 when I had to take early retirement I&S

2. What were your duties and responsibilities (including any management responsibilities) as a nurse on the neonatal unit (the "NNU") at the hospital in 2015 and 2016?

Between 2015 and 2016 I worked on the neonatal unit and transitional care. I would mainly work between nurseries 3 and 4 taking observations and bottle feeding or NG tube feeding. I spent my time changing and feeding the babies along with helping mums to breast feed and help with any general baby care.

As I was an experienced senior nursery nurse I would also take bloods i.e heal prick tests from the babies and teach the parents baby resuscitation.

I would also look after babies that were receiving phototherapy and sometimes monitor babies on lv fluids.

The culture and atmosphere on the NNU at the hospital in 2015-2016

3. How would you describe the quality of the management, supervision and/or support of nurses on the NNU between June 2015 and June 2016?

Management

My Line Manager between 2015-2016 was supportive and did pass on any concerns that I raised regarding staffing levels to her manager. I found the unit very stressful during this period due to increasing staff shortages and the increasing work load that was being expected of a band 4, Even Tho I was an experienced band 4 nurse I had not seen the staffing issues as bad as I had in 2015-2016. I was being asked to complete tasks that I was under qualified for I.e babies that required a band 5/6 nurse, When I raised these concerns to fellow colleagues I felt very under supported.

Despite concerns being raised to higher management regarding staffing level

4. How would you describe the relationships between: (i) clinicians and managers; (ii) nurses, midwives and managers; and (iii) between medical professionals (doctors, nurses, midwives and others) at the hospital between June 2015 and June 2016?

The relationships between the management and clinicians I would say was keep private as we as band 4s were very much kept in the dark. We were treated by the management and senior nurses as the untrained staff and on repeated occasions we advised that higher management wanted to move band 4s to other roles within the children's department in an already stretched unit. Certain senior nurses would delegate the workload to the lower bands and would often watch us run around and struggle with the excessive work load that we were given while sitting at the nurses station often on their mobile phones.

I would also say that the relationship between nurses and midwifes was very much an us and them relationship so therefore was only kept on a professional basis.

Concerns or suspicions

5. Were you given any training on how to report concerns about fellow members of staff? When? If so, how were any concerns to be reported?

We were told to write a Datix to report any clinical concerns but the reporting of staff members would only be done by going to see the line manager directly

6. Did you have any concerns or suspicions about the conduct of Lucy Letby ("Letby") while you worked on the NNU? If yes, what were your concerns or suspicions and did you raise them with anyone, either formally or informally?

Personally I found Lucy Letby to be a quiet and reserved character who I could only describe her personality as a little "ODD"

I was aware of several staff who felt the same way about her. There was some band 4 staff who were friends of hers but I as an older colleague got the impression she didn't like me. I did not have any concerns or suspicions about her care of the babies or as a nurse.

7. Were you aware of any suspicions or concerns of others about the conduct of Letby and, if so, when and how did you become aware of those concerns?

There were rumours going around the unit, that people were becoming suspicious of letby being on shift during each event. I was not formally informed by management of any concerns until letby was suspended and later arrested.

8. What discussion or debrief was there (formal or otherwise) with or between nurses, or between nurses and doctors, after the death of a baby?

There was never any discussions with Band 4s after the death of a baby.

9. Were you ever aware or worried about the increase in the number of deaths on the NNU? If so, when was this and what did you think?

Yes I was aware that there had been an increased amount of deaths on the unit how ever at the time we were very short staffed and had a high influx of very sick babies during that time. I did not think this was down to another member of staff.

Reflections

10. Do you think if the babies had been monitored by CCTV the crimes of Letby could have been prevented?

Yes I do.

11. What recommendations do you think this Inquiry should make to keep babies in NNUs safe from any criminal actions of staff?

CCTV to ensure all babies are kept safe.

More staff.

Increased monitoring of who is coming in and out of the unit

No mobile phones on the unit

More security around medication i.e Mediwell.

Request for documents

12. Do you have any documents or other information which are potentially relevant to the Inquiry's Terms of Reference? For example, any documents relating to concerns that were raised about Letby or the safety of the babies on the NNU in 2015 and 2016. If so, please itemise them and provide copies with your signed statement.

Personal Data
Signed: ______

Full Name: __Cherryl Cuthbertson Taylor______

Dated: _____20/03/2024______

WORK\51510071\v.1