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STRICTLY PRIVATE & CONFIDENTIAL

Miss L Letby

PD

01st December 2016

Dear Lucy,

Firstly thank you for your time today, I appreciate how difficult and challenging this situation has been.

As outlined, the purpose of the meeting was to discuss your grievance and this letter is to confirm my findings as detailed below answers relating to all points raised in your grievance

1: The proposed plan of supervision of practice and repetition of competencies was not followed for any other member of staff, nursing or medical, and I wish to know why and if this was ever a true intention of the Trust.

I accept that there may have been a challenge with skill set, however numbers available according to the rotas I reviewed, demonstrated that this could have been an option, therefore I support this part of the grievance.

2: The reasons for me being instructed not to have contact with my NNU colleagues for an extended period of time.

I conclude that this was said with intention, however on reflection Karen Rees intended this to mean on a professional basis only, and not socially. This then led to miscommunication and misunderstanding, and therefore I uphold this part of the grievance.

3: Was I being investigated on a personal level and what is it that the external review may indicate in relation to me returning to NNU, and Why the external review panel did not know about my circumstances, and why so much emphasis has been put on waiting for the review when it is not looking at anything pertinent to my situation

I conclude that there was no personal investigation, but the Executive team have not been clear on what they expected the external review to demonstrate or not in relation to your situation, nor did they advise you of this.

4: I would like the Trust to outline to me how its values such as being 'open and honest' and we 'respect each other' have been adhered to in my situation

Whilst I recognise that the Board found themselves in a difficult position, I conclude that the trust have not been as open and honest with you as they could be, in relation to the circumstances.

5: I also wish to be informed of any evidence the Trust may have and the process they have followed.

During the course of this investigation I have not been made aware, nor has there been any allusion to, any evidence relating to any alleged wrongdoing by yourself. There has been repeated reference to a commonality between the dates and times that you were on duty and the collapse / deaths of a significant number of babies, but there is nothing to support that there is additional information or data beyond this, that has not been shared with you.

6: I would appreciate assurances from the Executive team that this has been dealt with appropriately and that my confidentiality is being maintained.

I conclude that the trust has not failed to protect your confidentiality with regard to the circumstances regarding your employment, that reasonable steps were taken to maintain confidentiality but as with any large organisation, employees do talk amongst themselves and will speculate, despite the best efforts of management.

7: I would like to know exactly what I have been accused of / what allegations have been made and by who and how the Trust has dealt with this.

I conclude that I fully support the conclusion that Chris Green came to and uphold this part of the grievance.

No party refutes that concerns were raised by the Consultants, in particular SB, to the Executive team around a perceived commonality between your presence on the NNU and the collapse/deaths of babies. I acknowledge that these concerns were raised through the appropriate channels in line with both the Trust Speak Out Safely Policy and the guidance proffered by the GMC (i.e. through the Executive team). However, I do not find that the consultants concerns, when reiterated to the Executive team were "clear, honest and objective" (GMC guidance). The evidence suggests that, whilst the Executive team acknowledged and appreciated these concerns, their preliminary fact-finding did not produce any information that prompted them to initiate either a formal internal or police investigation. I believe the intention was to continue to review this for the agreed 3 month period, prior to the loss of two triplets on the unit.



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I conclude that no formal allegations have been made with relation to you from any party. I have been unable to confirm the exact wording of any 'accusations' however the members of both the management team and the Executive team are clear that the accusations were, that there was a direct link between your presence on the NNU and the increase in deaths on the unit and that it was suggested by some of the paediatric consultants that that this link was due to *knowingly deliberate action by LL*.

In response to 'how have the Trust dealt with this', I conclude that the Trust have considered the concerns of the consultants in line with both the Disciplinary and Speak out Safely policies and believed that there was insufficient basis on which to undertake either a formal internal investigation or to initiate a police investigation.

I consider that there were a number of potential options available to the Trust:

- to initiate an internal investigation under the Trust Disciplinary Policy. I find that, given the nature of the allegations that this was not feasible as, if there was sufficient evidence the police should have been contacted in line with the Policy.
- to contact the police as above and request an investigation. I find that the Executive Board did not feel there was sufficient evidence to undertake this action.
- to exclude you from duty whilst the External Review and 'deep-dive' forensic review was undertaken.
- to redeploy you as an alternative to exclusion.

I conclude therefore the action of removing you from NNU while the External Review and 'deep-dive' forensic reviews were undertaken was within a range of reasonable responses available as it was believed that these reports would provide further information that would clarify any concerns regarding any deliberate action resulting in patient harm. Given the number of meetings in which these concerns are believed to have been discussed and the subsequent action taken by IH to address rumours coming from NNU, I believe it is inevitable that these accusations became known to you and I conclude that you should have been made aware from the outset. Furthermore, I find that you were not provided the opportunity to respond to the concerns as raised by the consultants, which I consider you had the right to do.

8: How will the Trust support me to return to NNU on a personal and professional level?

- The CEO and a Non-Executive representative, to apologise to you in the presence of your parents.
- After the final report is received and provided there are no references made to you, it is therefore put in writing that you have no case to answer.
- Mediation for you with both consultants, and also an apology from both consultants. This will provide support and reassurance to you when you return to your role in NNU.



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- Head of Nursing for Urgent Care, Karen Rees will be assigned as your Mentor, a point of reference should you have any concerns once you are returned to the unit.
- There will also be CPD support from the organisation in completion of a Masters programme or Advanced Neonatal course – this is in recognition of the time lost from clinical practice through secondment.

Summary

This was obviously a very unique, complex and sensitive situation. Whilst it is accepted that the Executive team could have been more open with you, communicating with you in a more regular and co-ordinated way, this Chair believes that the Executive team has acted in a balanced way with regard to the best interests of you, the Trust and the families of the babies.

However, it is clearly evident within the witness statements that your movement from the unit was orchestrated by the consultants with no hard evidence to support this action. Their behaviours and comments, as witnessed by a number of Senior Managers and Executive staff all fall far short of what is expected by the Trust and professional standards.

This behaviour has directly resulted in you, a junior colleague and fellow professional, feeling isolated and vulnerable, and putting your reputation in question. This is unacceptable and could be viewed as victimisation.

Immediate steps need to be taken to address these behaviours, ideally through mediation with Dr Brearey and Dr Jayaram and with apologies from all of the named consultants who made unsubstantiated comments. (Mr McCormack, Dr Brearey, Dr Jayaram and Doctor V)

It is hoped that these measures will support you back into the NNU and achieve a harmonious working environment for everyone, failure to comply with these reasonable measures from the named parties, should result in disciplinary action taken by the Trust.

The Chair would like to thank the Investigating officer for a thorough, balanced and honest investigation report. This has clearly been a very distressing case for all involved and I would like to thank everyone for their time, patience and candour.

Yours sincerely,

Annette Weatherly



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Chief Executive Tony Chambers

