

Witness Name: Heather Marie Wilshaw-Jones
Statement No.: 1
Exhibits: N/A
Dated: 30/05/2024

THIRLWALL INQUIRY

WITNESS STATEMENT OF Heather Marie Wilshaw-Jones

I, Heather Marie Wilshaw-Jones, will say as follows: -

Personal Details

1. I am a Principal Clinical Scientist specialising in Biochemistry, currently working at Northern Care Alliance, Royal Oldham Hospital. I completed my training at Salford Royal Foundation Trust between 2011 and 2014 and qualified as a Clinical Scientist in September 2014 when I gained registration with the Health Care Professionals Council (HCPC), registration number PD.
2. Following qualification, I worked as a Senior Clinical Scientist at Aintree University Hospital from September 2014 until July 2016, with some cross-site working at Royal Liverpool University Hospital. In July 2016, all laboratory staff were officially transferred to Liverpool Clinical Laboratories, a network consisting of Aintree University Hospital and Royal Liverpool University Hospital laboratories. I then worked as a Senior Clinical Scientist on both Aintree and Royal Liverpool sites until November 2016.
3. I passed the Royal College of Pathology Part 1 exam in 2016 and then gained employment as a Principal Clinical Scientist at Sheffield Teaching Hospitals in November 2016, where I worked until September 2022. My current employment, since September 2022, is as a Principal Clinical Scientist at Northern Care Alliance based at the Royal Oldham Hospital site.
4. Whilst working as a Senior Clinical Scientist at Liverpool Clinical Laboratories between 2015 and 2016, my duties included participation in the Duty Biochemist rotas at Aintree and Liverpool sites, which included clinical validation of results, involvement in the point-of-care team, performance of audits, involvement in quality assurance aspects, attendance at multi-disciplinary team meetings, research and development, and teaching and training.

Child F

5. With regards to Child F, I was involved in communicating insulin and c-peptide results to the Countess of Chester Hospital, as per statement INQ0000922 and call log INQ0000862. At the time, as far as I recollect, the process for communicating results of blood tests concerning babies back to a hospital/requesting clinician was a combination of person to person and electronic reporting. All results would be electronically reported back to the requestor, but results would additionally be telephoned if they breached certain limits or were otherwise considered urgent or unusual by the Duty Biochemist. Results would be communicated directly to the neonatal unit if located within the hospital or would be phoned to the laboratory that sent the sample if the sample had been referred in from outside hospitals. I can't remember what the specific process was for insulin and c-peptide results at the time and I no longer work at the trust.
6. I can't remember the specific process in 2015-2016 for communicating or flagging results that were considered urgent, other than as described above. As the laboratory is removed from the patient and does not have the full clinical picture, safeguarding concerns are for clinical staff to identify.
7. On 12th August 2015, I received and communicated results in relation to Child F to the Countess of Chester Hospital, as per INQ0000861 and INQ0000862. The results show a low c-peptide and high insulin. This is difficult to interpret without a corresponding glucose level. In INQ0000862, I can see that I added a comment stating '?Exogenous – suggest send sample to Guildford for exogenous insulin'. This meant that I was querying whether exogenous insulin had been given, due to the pattern of c-peptide and insulin results i.e. low c-peptide and high insulin. Exogenous insulin is insulin not produced by the body i.e. from an external source. At the time, the insulin assay at Liverpool was not able to detect exogenous insulin so a sample would need to be sent to another laboratory with the capability to do this.
8. From INQ0000862, I can see that I phoned the results to the Countess of Chester Biochemist at the Countess of Chester Hospital. I do not recall the conversation or who I spoke to.
9. I do not recall if myself or anyone else at Liverpool Clinical Laboratories took any additional action as a consequence of the test results.
10. I do not know if the process for communicating or flagging results of insulin and c-peptide testing has been altered or improved since 2015-2016 as I no longer work at the trust.

11. I cannot comment on safeguarding concerns where results might indicate that insulin has been administered to a baby, as this is a decision made by the clinical team. The laboratory does not have the full clinical picture.

12. I cannot give any recommendations from a laboratory perspective regarding keeping babies in hospital safe from the deliberate injection of insulin.

Statement of Truth

I believe that the facts stated in this witness statement are true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

Signed: _____ Personal Data _____

Dated: _____ 30/05/24 _____