Telephone Note In

Matter No:	I&S	1 -	Ian Pace

Client: Countess of Chester Hospital NHS Foundation Trust

Matter: Countess: General Employment 2016

Lawyer: Ian Pace
Date: 18 July 2016

Subject: Telephone in from client re Sue Hodkinson regarding

Lucy Letby - neo-natal unit (Sue Hodkinson)

Call in from Sue Hodkinson. Sue calling IP in relation to a matter that Dee Appleton-Cairns had spoken to her about earlier last week relating to the neonatal unit. It relates to an employee called Lucy Letby.

I explained that I understood from my call with Dee that there were a number of ongoing issues relating to the neonatal unit. Specifically, there had been a rise in the number of patient deaths on the unit and a preliminary data investigation has been undertaken which had revealed that this particular employee was prevalent on the unit at all of the relevant times. The Trust has now downgraded its admission arrangements and has arranged for an external review.

The employee was on annual leave until last week. She was on leave for about two weeks. When she returned to work the Trust called her into a meeting (on Wednesday last week) to explain the current position. She asked whether it was her and she made a comment that she looks after all of the babies. The line manager and deputy director of nursing held a meeting with her. They framed the meeting on the basis that they wanted to provide her with support and arranged for her to continue working on the unit with close clinical supervision.

They put her on notice that the Trust may want her to work away from the unit for a period of time. She asked who was talking about her. The line manager and deputy director explained that the rota provides that she was prevalent at the time of the relevant incidents and the other consultants were raising some concerns about her.

She was happy to go under clinical supervision and this started to happen on Thursday of last week.

On Friday, there was a meeting which expressed some concern by the consultants relating to her continuing to work. A number of consultants have raised some concerns and have been particularly active talking about her. They are making comments such as she is the problem.

The Trust is now considering calling the police. She is due back on the ward today.

The Trust now want to consider redeploying her to another area of the Trust, pending further investigation into the incidents on the unit. The evidence does not at the moment say that it is her and this will only become clear pending completion of the internal review. All the information says at the moment is that she was on the rotas at the time of the relevant incidents. However, there is a significant body of staff saying "it is her".

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