

Witness Name: William Vineall  
Statement No.: 5  
Exhibits: 7  
Dated: 7 April 2025

## THIRLWALL INQUIRY

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### FIFTH WITNESS STATEMENT OF WILLIAM VINEALL

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I, William Vineall, Director of NHS Quality, Safety and Investigations at the Department of Health and Social Care, 39 Victoria Street, London SW1H 0EH will say as follows:-

1. I make this statement on behalf of the Department of Health and Social Care (“the Department”) in response to a Rule 9 request dated 21 March 2025 for clarification of an issue raised by the Care Quality Commission (“CQC”) in its written and oral closing submissions. I am authorised to make this statement on behalf of the Department.
2. I am Director, NHS Quality, Safety and Investigations at the Department. I have held that post since 2020. Further details of my role and employment history are set out in my first witness statement to the Inquiry dated 5 April 2024 [INQ0015468].
3. I am asked to provide further information about an issue raised by the CQC in footnote 76 of its written closing submissions. Footnote 76 is a footnote to paragraph 55 of the CQC’s written closing submissions on pages 26-27. Paragraph 55 reads as follows:

“Following the arrest of Lucy Letby, CQC was involved in the Incident Coordination call of 4 June 2018 [INQ0017334] and Incident Coordination Panel Meetings of 10 July 2018 [INQ0017335], 22 October 2018 [INQ0017332], 28 January 2019 [INQ0017414] and 5 April 2019 [INQ0017402].”
4. Footnote 76 follows “28 January 2019 [INQ0017414]” on page 27 and states:

“CQC notes that at the meeting in January 2019 it was suggested, in response to a query regarding a Regulation 12 investigation, that this would take place following the police investigation and would need to be completed within three years of the allegation. It would, however, have been unlikely at that stage that CQC could complete an investigation (which requires significant resource and time) and bring a prosecution within the statutory time limit. CQC has previously

asked the DHSC to consider changes to the statutory framework to extend this period, due to the significant challenges that it can present, but this has not to date been taken forward.”

5. The point was addressed further by the CQC in their oral closing submissions, as set out at pages 66-68 of the 17 March 2025 transcript, which reads in material part:

**“MS RICHARDS:** ... So, my Lady, just still dealing with some of the deficiencies of approach which CQC has accepted. Following the June 2016 sharing of information, it was not until May 2017 that the hospital finally told the Care Quality Commission about the possibility of criminal conduct and the involvement of the police, and CQC looking at the position now accepts it was deferential to that. It was rightly concerned not to interfere with or prejudice the police investigation but that should not have stopped it from considering whether it needed to carry out its own investigations into whether there had been regulatory breaches and should not have stopped it from taking a decision as to whether a specific enforcement action should be contemplated, and that's particularly important because, as your Ladyship knows, there are statutory limits on the CQC's ability to take enforcement action.

You may have picked up, it's in a footnote in our written submissions, I'm afraid I can't remember which one, that the CQC has previously approached the Department of Health and Social Care with a view to exploring whether there could be an extension of those time periods which would require statutory amendment, but that hasn't been done. It is the Commission's experience that those time limits can be problematic in complex investigations.

**LADY JUSTICE THIRLWALL:** Has there been a response?

**MS RICHARDS:** My Lady, I don't know whether there's – I'm not sure there's been a lack of formal response, but there was no change made in response to those overtures, is my understanding.

**LADY JUSTICE THIRLWALL:** All right, thank you.

**MS RICHARDS:** It's not that they were ignored but there hasn't been a substantive change.

**LADY JUSTICE THIRLWALL:** Thank you.”

6. The Chair has therefore asked that the Department provides any record of such communications between the CQC and the Department on this subject. She has also requested that the Department confirms the reason the request was refused and

whether there are now any plans to amend the relevant statutory regulations and/or legislation. If there are no such plans, the Chair has asked the Department to confirm why not.

7. In October 2020, during the drafting of the Health and Care Bill in 2020, the CQC wrote to Department officials to request an amendment in what would become the Health and Care Act 2022 to remove the 3-year limitation provision on criminal enforcement (exhibit

**INQ0108946**

**WV/1**). This was part of a wider proposal to “*Amend the 2008 Act to make specified Part 1 offences into either way offences and open-ended limitation period*”. The aim of the proposal was to allow the CQC to prosecute complex cases where other enforcement authorities hold initial primacy of the investigation by allowing the CQC to wait until those other investigations were completed before the CQC made a decision to commence criminal proceedings without them being time-barred. This would enable the CQC to hold providers to account where appropriate. In parallel, the Department and the CQC were jointly undertaking a review of the CQC regulations, and the same proposal was included in the CQC’s list of proposals for that review (exhibits **WV/2** and **WV/3**). The CQC’s preference was for the proposal to be accommodated in the Health Bill since the removal of the statutory time limit requires an amendment to primary legislation.

**INQ0108942**

**INQ0108941**

8. There was a high bar for inclusion of proposals in the Health Bill and following consideration of the ‘*either way offences*’ proposal, the Department concluded that it was not a priority for being taken forward as part of the Bill. The reasons for this conclusion were two-fold. First, there were risks around safeguarding those involved in any prosecution, including witnesses and defendants; an open-ended limitation period would mean less certainty about when proceedings might be brought, and/or a lengthy period immediately following a police and Crown Prosecution Service prosecution. Second, the Department considered there were policy solutions that the CQC could explore instead of legislative change with the aim of improving their enforcement processes to ensure investigations are carried out in a timely manner. Such solutions included greater alignment and closer working with the police during investigations when two potential prosecutions are running in tandem to minimise the risk of having insufficient time to prosecute. This decision was conveyed to the CQC in October 2020 (exhibit **WV/1**).

9. Given the requirement for the statutory time limit to be amended in primary legislation, the parallel proposal in the CQC regulations review (secondary legislation) could not be

pursued and in April 2021 this was noted as no longer being taken forward as part of the regulations review (exhibit **WV/4**). **INQ0108948**

10. Since 2020, the CQC have therefore carried out work to improve their enforcement process in four (main) areas:

- a. Increased engagement and improved relationship management with coroners (the CQC have agreed an MOU with the Coroner's Society to help ensure early notification and disclosure to CQC of coronial concerns about the care or treatment received by the deceased).
- b. Increased engagement and improved relationship management with local police services and the Crown Prosecution Service (the CQC have established links with police forces across England and this has led to joint investigations where CQC can be involved in cases as soon as the police become aware).
- c. Creation of a dedicated National Enforcement Team ("NET") (including recruitment of regulatory investigators to lead investigations and progress them through to prosecution following initial assessment by inspectors).
- d. Introduction of a 'Specific Incident Triage' pilot (commenced in January 2025 in which NET investigator makes initial assessment and triage of notification of a specific incident received by an inspector to determine whether it needs to be progressed via the CQC's enforcement policy).

11. On 28 August 2024, the CQC interim Chief Executive Kate Terroni wrote to Baroness Merron, Parliamentary Under-Secretary of State, asking for the issue of the statutory

**INQ0108949**

limitation period to be revisited (exhibit **WV/5**). The Minister responded to the CQC on 1 November 2024 stating that she was "mindful that the CQC is prioritising its fundamental regulatory approach and focussing resources on the recovery plan to stabilise the CQC. Now is ...not the time to make changes to the statutory limitation power particularly given that amending section 90(2) would require primary legislation" but that she would be "happy to return to the CQC's proposal in the future" (exhibit **WV/6**). **INQ0108950**

12. At the request of the Department, the CQC submitted a briefing paper on 4 February 2025 to the CQC Sponsor Team on the actions they had taken (including those referred to above in paragraph 10) to improve their enforcement process and to work more closely with the police and coroners. This paper also sets out further information from the CQC on the case for amending the statute of limitation (exhibit **WV/7**). The Department is now considering this information. **INQ0108945**

**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 of its truth.

**Signed:**

**Personal Data**

**Dated:** 07 April 2025