

MUCKAMORE ABBEY HOSPITAL INQUIRY  
SITTING AT CORN EXCHANGE, CATHEDRAL QUARTER, BELFAST

HEARD BEFORE THE INQUIRY PANEL  
ON WEDNESDAY, 6TH JULY 2022 - DAY 10

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1           THE INQUIRY RESUMED, AS FOLLOWS, ON WEDNESDAY, 6TH JULY  
2           2022

3  
4           CHAIRMAN: Thank you very much. Thank you. Yes, good  
5           morning.

10:01

6           MR. DORAN: Good morning. The Panel will be hearing  
7           from one witness today. The witness is the father of a  
8           former patient who is ciphered in the statement as P11.

9  
10          Now, I have spoken to the witness this morning and he  
11          wishes to waive anonymity on behalf of his son, and the  
12          witness's name is Michael Overend and his son is also  
13          called Michael.

10:01

14  
15          Before the witness is called, I want to say something  
16          about the context of the witness's evidence, very  
17          briefly.

10:01

18  
19          The witness made a statement on 11th April 2022. The  
20          witness's son was a patient at Muckamore between 1989  
21          and 1999. Michael was discharged from Muckamore in  
22          December 1999. As the Panel is aware, the time frame  
23          of the Terms of Reference permits the Inquiry to report  
24          and make findings on events that occurred between 2nd  
25          December 1999 and 14th June 2021. That means that the  
26          evidence given by the witness in relation to his son's  
27          time at Muckamore falls outside the time frame of the  
28          Terms of Reference.

10:02

10:02

1 I would, however, wish to bring two points to the  
2 Panel's attention at this stage.

3  
4 First, as you're aware, the Terms of Reference permit  
5 the Inquiry to receive and to take account of evidence 10:03  
6 outside of that time frame. It may do so, according to  
7 paragraph 3 of the Terms of Reference:

8  
9 "Where such evidence will assist the Inquiry in  
10 examining, understanding and reporting on matters 10:03  
11 within the Terms of Reference."

12  
13 It is, therefore, permissible for the Inquiry to hear  
14 from the witness.

15 10:03  
16 The extent to which the evidence will assist the Panel  
17 in examining, understanding and reporting on the Terms  
18 of Reference will, of course, be a matter for the Panel  
19 itself to assess in due course.

20 10:03  
21 The second point is that even though the witness's son  
22 left Muckamore in 1999, the witness communicated  
23 concerns to the relevant Trust in the years after his  
24 son's discharge. The Inquiry will, of course, be  
25 examining the adequacy of methods to communicate 10:04  
26 concerns regarding the treatment of patients within the  
27 time frame of the Terms of Reference. The Inquiry will  
28 also be examining the response to such concerns.  
29

1 The Inquiry will see, as we go through the witness's  
2 evidence, that there is correspondence raising a  
3 complaint that does fall squarely within the time frame  
4 of the Terms of Reference.

5 CHAIRMAN: Yeah. I mean just to be complete, the  
6 particular incident about which we are likely to hear  
7 most I think occurred back in 1990.

10:04

8 MR. DORAN: That's correct.

9 CHAIRMAN: But the complaint and the follow-up actually  
10 happened much later, as you've indicated.

10:05

11 MR. DORAN: Yes, indeed.

12 CHAIRMAN: Yeah.

13 MR. DORAN: Quite aside from the witness's statement  
14 and the evidence that he may give arising from the  
15 statement, there is one other matter that I wish to  
16 bring to the Panel's attention, and that relates to a  
17 second, very recent statement made by the witness and  
18 with which the Panel and Core Participants will not be  
19 familiar.

10:05

20  
21 The witness made a further statement to the Inquiry  
22 team on 20th June 2022. That statement deals  
23 predominantly with the care received by the witness's  
24 son in the years subsequent to his time in Muckamore.  
25 The statement identifies the relevant time period as  
26 1999 to 2018. The statement raises multiple issues  
27 about the community care arrangements that were in  
28 place for the witness's son during those years.  
29

10:05

10:05

1 Now, in the assessment of the Inquiry counsel team, an  
2 examination of the issues raised about Michael's care  
3 in the years subsequent to his stay in Muckamore would,  
4 in fact, carry us beyond the Terms of Reference. Of  
5 course in saying that I mean absolutely no criticism 10:06  
6 whatsoever of the witness. He, understandably, wishes  
7 to highlight issues of concern relating to his son's  
8 care over the years. It is, however, important that  
9 the Inquiry adheres to the Terms of Reference. The  
10 Inquiry has the statement and, of course, your counsel 10:06  
11 team will keep matters of that nature under review.  
12 But it is important that I should clarify that today's  
13 evidence will be confined to the witness's first  
14 statement only, which everyone will have seen.

15 CHAIRMAN: I think, for the sake of transparency, 10:07  
16 I should also make it clear. I, of course, have a dual  
17 role as Chair of this Inquiry, both to sit on the Panel  
18 as an assessor of the facts but, also, I have an  
19 administrative role. I think it is right to declare  
20 that I have seen that second statement that you have 10:07  
21 averted to. I agree with your assessment of it. It  
22 doesn't actually revert to Muckamore Abbey Hospital at  
23 all, it is simply about the care that his son received  
24 post his release.

25 MR. DORAN: Yes. 10:07

26 CHAIRMAN: And I also take the view that is outside our  
27 Terms of Reference.

28 MR. DORAN: Thank you for that indication, Chair.  
29



There are some preliminary references to the point in time at which the witness's son was discharged from Muckamore.

CHAI RMAN: Indeed. Yeah. Absolutely.

MR. DORAN: But we can ask the witness about that process in the course of his evidence today.

10:08

Now, I have explained these points to the witness and he is fully understanding of the position.

CHAI RMAN: Fine. Thank you.

10:08

MR. DORAN: so if Michael Overend could be called then to give evidence.

MR. MICHAEL OVEREND, HAVING BEEN SWORN, WAS EXAMINED BY  
MR. DORAN AS FOLLOWS

10:08

CHAI RMAN: Good morning, Mr. Overend.

MR. DORAN: Mr. Overend, thank you for attending to give evidence today. I'm Sean Doran, counsel to the Inquiry. We had the chance to briefly met this morning.

10:09

A. Yeah.

1 Q. I think we also met briefly a few weeks ago when you  
came to visit the Inquiry premises.

A. Yeah. That's correct.

10:09

2 Q. That's right. I think you may even have had the opportunity to sit in the witness chair at that time.

A. I did, yeah. A dummy run, yeah.

3 Q. Yes. So I've explained the procedure for giving

1 evidence. Basically I will be reading out your  
2 statement and I'll then be asking you some questions  
3 about it.

4 A. Yeah.

5 4 Q. Now, you have indicated that you wish to waive 10:10  
6 anonymity on behalf of your son; isn't that right?

7 A. That's correct, yeah.

8 5 Q. So you have no issue about your son being referred to  
9 by name?

10 A. No. My son is a totally innocent child. 10:10

11 6 Q. I'll be calling your son "Michael" throughout your  
12 evidence.

13

14 Now, I have mentioned to you that the Inquiry is also  
15 using cipher numbers for staff members who might be 10:10  
16 implicated in abuse of patients, and you'll note that  
17 in your statement there is a staff member who is  
18 referred to as H44.

19 A. Yes.

20 7 Q. Now, when I read your statement and ask you questions, 10:10  
21 I'll be using that number, H44. Can I ask you to use  
22 that number, also, if necessary?

23 A. Yeah. Yeah.

24 8 Q. And one other thing that I explained to you was that  
25 before the evidence started last week, the Chair 10:11  
26 explained that he would be taking a precautionary  
27 approach when it came to the naming of other people who  
28 might be subject to criticism.

29 A. Yes.

1 9 Q. -- but who haven't yet had an opportunity to comment.  
2 You understand that?

3           A.    Yes, I do.  Yeah.

4 10 Q. And in the course of your statement, you refer on --  
5 and in the exhibits, I should say, you refer on a  
6 number of occasions to the Assistant Director of  
7 Nursing Services, isn't that right?

8 A. Yeah. That's correct. Yeah.

9 11 Q. And also the business manager?

10 A. That's correct, yeah.

11 12 Q. well, I'm just going to be using those titles rather  
12 than the names.

13 A. That's fine, yeah. That's fine.

14 13 Q. You're comfortable with that?

15 A. Yes. Yeah.

16 14 Q. Now, I'm going to read the statement in, and I think  
17 you have a copy in front of you. It is the redacted  
18 version of the statement, but don't worry about that.  
19 You'll see as I read through that I will be using the  
20 name or the names as appropriate of yourself and your  
21 son.

22 A. Yeah.

23 15 Q. Now, for the record, the reference number for the  
24 statement is MAHI-STM-007-1.

25 10:12

26 "Statement of Michael Overend.

27

28 I, Michael Overend, make the following statement for  
29 the purpose of the Muckamore Abbey Hospital Inquiry.

1 In exhibiting any documents I will use my initials, MO.  
2 So my first document will be "M01".  
3

4 Section 1. Connection with MAH.  
5

10:13

6 My connection with MAH is that I am a relative of a  
7 patient at MAH. My son, Michael, was a patient.  
8

9 Section 2. Relevant time period.  
10

10:13

11 The relevant time periods that I can speak about are  
12 between 1989 and 1999.  
13

14 My son, Michael, was born in 1979. Michael is now  
15 42-years old. Michael was diagnosed with  
16 self-injurious behaviour, SIB, learning difficulties  
17 and autism. He has partial blindness and it is  
18 believed that he is partially deaf.  
19

10:13

20 Due to the SIB, Michael was recommended to be admitted  
21 to MAH. He was assessed by someone in MAH. I do not  
22 recall who this was as one day I went to college and  
23 when I came home Michael was gone. Michael was 9-years  
24 old when he was admitted to MAH. He was a voluntary  
25 patient. He went in on 5th May 1989 and was there  
26 until the end of August 1999. During this time Michael  
27 came home to visit me, his mother and brother and  
28 sisters.  
29

10:14

10:14

1 Michael was admitted to the Conicar Ward. This is an  
2 adult ward and Michael was the only child on the ward.  
3 We were told there was nowhere else for him to stay.  
4

5 There is one date that particularly stands out for me, 10:14  
6 which is 8th June 1990. It was around this time when  
7 Michael's mother and I talked about starting to take  
8 him home for visits. I remember this date because it  
9 is Michael's mother's birthday on 1st June and his  
10 brother's birthday on 2nd June. 10:15

11  
12 I believe his first visit home was on Saturday,  
13 2nd June, 1990. He was home for about four hours. On  
14 the 8th June 1990, Michael's mother telephoned MAH  
15 around 3:00 p.m. or 3:30 p.m. to see about taking him 10:15  
16 home on the Saturday. I remember the time of day  
17 because of school time for the kids. She was on the  
18 phone and I was standing a few feet away. I heard her  
19 say "face a bit of a mess", and MAH said we should just  
20 leave him there. Michael's mother then hung up the 10:15  
21 phone. She called her cousin, Michael's relative, to  
22 find out if her daughter, Michael's relative, was home  
23 so that she could drive her up to MAH. I am aware that  
24 there was a call around 6.30 p.m., but I cannot  
25 remember the details of it. Michael's mother then went 10:16  
26 up to MAH and brought Michael home on Friday, 8th June  
27 1990. I do not remember what time he came home at but  
28 it was still bright.  
29

1 As soon as Michael came home it was blatantly obvious  
2 that he had two black eyes. I remember thinking  
3 I would take photographs as the camera was sitting on a  
4 the unit as it was used for Michael's mother and  
5 Michael's brother's birthdays the week before. Copies 10:16  
6 of the photograph showing Michael's black eyes are  
7 enclosed at M01.

8  
9 One of the photographs taken was with my sister-in-law  
10 who had called to the house along with my brother as 10:16  
11 they needed an address for a local man who had passed  
12 away. Michael's mother was out collecting Michael at  
13 this time. The photographs were taken shortly after he  
14 came home.

15 10:16  
16 It took some time for Michael to come around. I could  
17 see the fear in his eyes. We made a fuss of him and  
18 gave him lots of kisses and cuddles. I think he was  
19 relieved to be home. I felt devastated when I saw  
20 Michael's black eyes as he cannot defend himself. 10:17  
21 I know he did not give himself black eyes. Michael  
22 often hit himself in his jaw but he never gave himself  
23 any black eyes and has not in the 42 years since I have  
24 known him. He has not had a black eye from 8th  
25 June 1990 to date that I am aware of. I have not known 10:17  
26 Michael to have black eyes other than on 8th June 1990.  
27 I wanted to report the black eyes to the police. I was  
28 half way out the door to go to the police station when  
29 Michael's mother begged me not to as she was afraid

1 that if we contacted the police MAH might not take  
2 Michael back.

3  
4 He was also on medication that we did not have.  
5 Michael's mother begged me not to report the injuries 10:17  
6 to the police, and because of the fear factor that  
7 surrounded MAH I agreed not to.

8  
9 I brought Michael back to MAH on the Monday around  
10 lunchtime. I remember it was lunchtime as patients 10:18  
11 were eating their lunch. I think I brought him back on  
12 my own. Michael's mother may have been there, but I am  
13 not sure. I walked Michael in to the ward. On  
14 entering the ward I seen a member of staff called H44  
15 in the room. I do not know his rank but he did not 10:18  
16 wear a uniform. H44 was either standing or sitting at  
17 a table when he shouted over to me: "Mr. Overend, the  
18 night staff on duty didn't notice anything coming off  
19 shift. It was only when morning staff went on that  
20 they noticed Michael. The nurse on duty is an 10:18  
21 excellent nurse and I would trust her with anybody."  
22 I am 100% sure this is exactly what he said. I thought  
23 this was odd as I did not speak to him prior to him  
24 saying this. I just looked at him and did not say  
25 anything. He did not say anything after that. I left 10:18  
26 Michael there and went home.

27  
28 Michael's mother and I visited Michael at MAH  
29 regularly. During a visit to see Michael I was pushing

1 him in his wheelchair outside. I do not remember the  
2 date. A patient pointed at Michael and made shaking  
3 motions with his hands and then pointed at Conicar  
4 Ward. I understood that he was saying that they were  
5 shaking Michael. I remember speaking to H44 who told  
6 me not to listen to the patients. I did question why a  
7 patient would do that. Nothing further came from it.

10:19

8  
9 When we visited Michael, without letting MAH know we  
10 were coming, we would find Michael wearing adult  
11 clothes that were four or six times too big for him.  
12 Michael's mother would tell the staff to take them off  
13 and put his own clothes on him. To make sure that  
14 Michael wore his own clothes, Michael's mother ensured  
15 name tags were put on to Michael's clothes. When we  
16 would collect Michael from MAH to bring him home we  
17 would check the clothes he was wearing to make sure  
18 they were with his name tag on them. If the clothes he  
19 was wearing were not his, we would insist that they  
20 were changed.

10:19

10:19

10:20

21  
22 I remember one time he was wearing a very large green  
23 rugby-style t-shirt when we visited him. It was so big  
24 that it was down to his knees. Michael's mother told  
25 the staff to take it off them. This happened several  
26 times when he was in MAH.

10:20

27  
28 Michael was on medication that was given by MAH.  
29 I remember around March 1995 that he came home one day



1 completely doped up. He was like a zombie. I remember  
2 the date as we had moved into a bungalow that had been  
3 specially built for Michael in March 1995. I remember  
4 he sat on our sofa and he did not know where he was.  
5 He could not hold a sandwich. This went on for several 10:20  
6 weeks. We had had enough and said to MAH that Michael  
7 was not coming home in that state anymore. Things were  
8 different after this as he was not quite so medicated.

9  
10 Michael started school in September 1995 and was in 10:21  
11 three or four days per week. He then moved to  
12 five days per week and stayed at home during this time.  
13 He went to MAH for respite at the weekend. Although  
14 Michael was at home during the week we were told that  
15 for Michael to use MAH he would have to remain listed 10:21  
16 as a patient and that MAH were to receive his benefits.  
17 This meant that if something happened to Michael, they  
18 would have a bed for him. I was told if MAH did not  
19 receive his benefits, then Michael may not get a bed if  
20 needed. I cannot recall who told me this. 10:21

21  
22 Michael was also in the Rathmullan Ward for a time when  
23 he was around 16 or 17-years old. During his time  
24 there, a Sister in charge of the ward would call  
25 Michael's mother with updates on how Michael was doing. 10:22  
26 I would listen to these calls too. I do not know her  
27 name. I remember one time particularly as she told  
28 Michael's mother that Michael was doing well. He was  
29 eating and was happy, which we were pleased about. The

1 next day I decided to call to see Michael. I did not  
2 tell MAH that I was coming. I remember walking into a  
3 large recreation room or hall where the patients were  
4 watching a Daniel O'Donnell video. I remember seeing  
5 Michael. He was segregated from the group and lying on 10:22  
6 the floor. Michael was crying and sobbing his eyes out.  
7 This is only the third or fourth time I have seen him  
8 cry in his life. He did not usually cry. A staff  
9 member was with him. I do not know her name but would  
10 describe her as a heavy-made girl who was wearing a 10:22  
11 carer's uniform. She was trying to lift Michael up on  
12 to a two-seater settee. I gave her a hand to lift  
13 Michael up. I asked her what happened and did he fly  
14 into one. She told me that he had been like this for  
15 the past three days. I asked how she knew this and she 10:23  
16 told me that she had been working with him the past  
17 three days. I knew then that the Ward Sister had told  
18 us lies that Michael was doing really well less than  
19 24-hours earlier. I was disgusted and heartbroken. If  
20 I thought someone would have listened, I would have 10:23  
21 reported it.

22  
23 Michael was due to be reintroduced into the community  
24 in April 1999 to live in supported living  
25 accommodation. He was to be cared for by United 10:23  
26 Response, now Positive Futures. Michael did not leave  
27 MAH until 31st August 1999, as United Response did not  
28 send their staff members to MAH to get trained.  
29

1 From approximately March 1999, we met with MAH about  
2 Michael coming back in to the community. We were not  
3 happy that it took so long for Michael to be moved from  
4 MAH. I remember at one meeting in MAH a psychologist  
5 saying that MAH had been looking at releasing Michael 10:24  
6 since the previous November and she said that they were  
7 no further forward since November.

8  
9 Shortly after, the care manager set a date. United  
10 Response were paid from April, although Michael did not 10:24  
11 live in supported living accommodation until the end of  
12 August. Michael was discharged as a patient from MAH  
13 in November 1999.

14  
15 I recall reading a newspaper article around 1997 about 10:24  
16 a staff member who was charged with assault against a  
17 patient in MAH. The family were not told by MAH how  
18 the patient sustained certain injuries. I remember  
19 thinking that it sounded a lot like my experience with  
20 MAH, as staff at MAH did not explain how Michael got 10:24  
21 the black eyes on 8th June 1990. I started to raise  
22 queries with MAH and the Hospital Trust not long after.

23  
24 I remember Michael's mother and I met with two people  
25 from the Mental Health Commission on 1st June 1999. 10:25  
26 The reason I remember the date is that it is Michael's  
27 mother's birthday. I do not know what the exact role  
28 of the Mental Health Commission is, but I believe they  
29 were there to check on patients and make sure they were

1           okay. Michael's mother and I met with them in MAH.  
2           I remember one was a heavy-set man and a small lady.  
3           We met in a living room-type room with a settee and  
4           coffee table. I showed them photos of Michael's black  
5           eyes taken on 8th June 1980. The man was very 10:25  
6           dismissive. He looked at the photographs and threw  
7           them on to the coffee table. He said "it is only a  
8           couple of black eyes." I was shocked and astounded  
9           that he would say this about my son. I said that if it  
10          were one of his grandkids, nephew or niece, he would 10:25  
11          have the police, board of governors and solicitors on  
12          it. He then turned to the woman and said "come on, we  
13          have another two of these to do before lunch." He got  
14          up and left. The woman seemed flabbergasted and said  
15          she would try to do something. She took our name and 10:26  
16          address but we did not hear from her.  
17  
18          I asked for access to Michael's notes held at MAH,  
19          particularly relating to the incident on the 8th June  
20          1990. I met with the Assistant Director of Nursing 10:26  
21          Services, also referred to with surnames spelt  
22          differently in correspondence at Muckamore Abbey  
23          Hospital in October 2021.  
24  
25          I attended MAH with my brother but I was the only one 10:26  
26          allowed to look at the files. The Assistant Director  
27          of Nursing Services told me that he was there to help  
28          answer any questions and copy any documents for me.  
29          I remember asking him for the ward daily diary for

1 8th June 1990 and was told that it was likely stored in  
2 a warehouse somewhere. I asked him for a copy of the  
3 X-ray taken of Michael's face on 8th June 1990 and  
4 where Michael was sleeping at the time. He told me  
5 that he did not know anything about my son and did not 10:27  
6 know Michael at all. He told me he did not know  
7 anything about the incident or Michael. I was looking  
8 for the X-ray from the 8th June 1990 but it was not  
9 there. I asked him if it was usual for an X-ray not to  
10 be kept on file and he said he did not know anything 10:27  
11 about it.

12  
13 When going through Michael's records I came across a  
14 memorandum dated 13th June 1990 that had been completed  
15 by a person with the name of the person I met at the 10:27  
16 hospital with the letters "ADWS" after the name."

17  
18 If I can just pause for a moment, Chair. I've  
19 established with the witness that ADWS should, in fact,  
20 read ADMS, which stands for Assistant Director of 10:28  
21 Nursing Services. As the Panel will see in due course,  
22 the error in the statement is perfectly understandable  
23 because in the memorandum to which the witness refers,  
24 the "M" in ADWS does, in fact look like a -- sorry, the  
25 "M" in ADMS does in fact look like a "w". So that 10:28  
26 appears to be where the misunderstanding has occurred.  
27 But it should read ADMS.

28 CHAIRMAN: Right. Okay.

29 MR. DORAN:

1 "The memorandum details the incident and is titled  
2 "Accident Form: Michael Overend. Conicar. 8th June  
3 1990." A copy of the memorandum is enclosed at M02.  
4 It is clear that the Assistant Director knew Michael  
5 but he pretended not to. When I gave the memorandum to 10:29  
6 him to copy I made sure that he could see his name on  
7 it. He turned green and ran out of the room. He came  
8 back about 25 minutes later. He said that he had  
9 somewhere else to be and I needed to "hurry up" on  
10 several occasions. 10:29

11  
12 I have seen a notification of accident report dated  
13 8th June 1990, enclosed at M03, that records the  
14 incident occurred at 4:00 p.m. but that the place of  
15 occurrence is unknown. It also records that the cause 10:29  
16 is unknown and that there were no witnesses. The  
17 nature of the injury is recorded as "swelling/bruising  
18 of L mandible." Waveney Hospital A&E report dated  
19 8th June 1990 at 18:50 reports Michael had face  
20 injuries self-inflicted with a bruised L-side mandible 10:30  
21 and swelling. The referral for an X-ray records  
22 Michael as having a bruised L-side mandible and  
23 swelling.

24  
25 Michael was sent for an X-ray but the report only says 10:30  
26 that there was no bony injury. It does not comment on  
27 the bruising to his eyes. These documents are enclosed  
28 at M04, M05 and M06. When comparing the report to an  
29 incident in 21/23 July 1992, copy notification and

1 Waveney A&E Report is at M07 and M08. The 1992 A&E  
2 report refers to swelling at right side of face,  
3 whereas the 8th June 1990 records facial injuries.  
4 I believe this suggests that Michael had more than a  
5 jaw injury on 8th June 1990. Why would the hospital 10:31  
6 write "facial injuries" if it was just the jaw?  
7

8 I am shocked that MAH did not have any information  
9 about how Michael got two black eyes. The accident  
10 in July 1992 took place at home and a lot of 10:31  
11 information was recorded. I believe that Michael was  
12 assaulted and neglected by staff at MAH.  
13

14 I contacted MAH and The Trust in early 2002 and asked  
15 to see Michael's files again as I felt that I did not 10:31  
16 get the time that I needed to look at them during my  
17 meeting with the Assistant Director of Nursing Services  
18 in October 2001. When I asked to see the files again  
19 they asked me what I want out of the files. I said  
20 that I did not know as I am not a medical person. 10:31

21 I asked for daily drug records. The reason I asked for  
22 these records is because of conversations I had with  
23 the business manager who was based in Muckamore Abbey  
24 Hospital. He claims in his letter of 18th November  
25 1999 that Michael was not at home that weekend of 10:32  
26 8th June 1990 and did not stay overnight at home until  
27 7th September 1990. This is not true. Myself, my  
28 sister-in-law, who is in the photographs at M01, and my  
29 brother, remember Michael coming home during this time,

1 as set out at paragraph 7.

2  
3 Copy correspondence between me and the business manager  
4 is enclosed at M09.

5 10:32  
6 I have lodged a number of complaints and raised  
7 questions about Michael's time in MAH with North and  
8 West Belfast Health and Social Services Trust  
9 (The Trust). I have found that I have been blocked by  
10 MAH and the Hospital Trust when trying to find out what 10:33  
11 happened to my son."

12  
13 The statement then closes with the declaration of truth  
14 and it is signed Michael Overend and it is dated 11th  
15 April 2022. 10:33

16  
17 Now, Mr. Overend, you've had the chance there to  
18 consider the statement. Are you satisfied with the  
19 statement as it stands?

20 A. Yeah, more or less. The wee bit about Michael coming 10:33  
21 home, it sounds as if, you know, when Michael came in  
22 the door --

23 16 Q. Can I ask you to come forward towards the microphone,  
24 just to make sure that everything is picked up.

25 A. The wee bit about when Michael came in the door when he 10:33  
26 came home.

27 17 Q. Yes.

28 A. It sort of suggests that, you know, the first thing  
29 I thought of was lifting a camera and taking a



1 photograph of him. That's not the way it was. We were  
2 totally devastated. And what happened was after about  
3 10 or 15 minutes it may have been, my mouth was dried  
4 up and all of that, and I went out to get a drink of  
5 water. I got a glass of water, and when I was walking 10:34  
6 back in, again I saw the camera and I says "I'm going  
7 to take photographs of this".

8 18 Q. Yes.

9 A. That second. It sort of suggests to me that, you know,  
10 as soon as he came in the door I said "oh, hold on, 10:34  
11 I'll get a camera here." You know, that's just --  
12 that's not the way it happened, you know.

13 19 Q. Yes. So you are just really correcting the impression  
14 that the statement gives.

15 A. Yeah. Yeah. 10:34

16 20 Q. And, in fact, it wasn't immediately on Michael entering  
17 the house that you took the photographs.

18 A. Well when he came in, we were devastated.

19 21 Q. And a little bit later you saw the camera and thought:  
20 I'm going to take some photos. 10:34

21 A. Yeah. And the actual reason the camera was there was,  
22 as it states in the statement, that it was Michael's  
23 mother's birthday the previous Saturday and it was  
24 [Name] birthday -- [Name] birthday the day before.  
25 Sorry, [Name] birthday the day before and [Name] 10:35  
26 birthday on the Saturday.

27 22 Q. Yes. So those dates are fixed in your mind.

28 A. Yeah.

29 23 Q. Yes.

1 CHAIRMAN: We're getting the names that you've  
2 redacted. I don't think it actually matters too much,  
3 but the witness has just used the names that I think  
4 you had omitted. [Name] and --  
5 MR. DORAN: Of the -- yes. Well I think we may, 10:35  
6 actually, exercise the pause facility, and that's on  
7 the basis of a discussion that I had with the witness  
8 before.  
9 CHAIRMAN: Right. Okay. So could we just stop the  
10 live feed for the moment. Take those names out of the 10:35  
11 transcript.  
12 MR. DORAN: Just to explain, Mr. Overend, we had a  
13 discussion before in which we discussed your preference  
14 for your wife's name not being used in the course of  
15 the evidence. And you, quite naturally, said her name. 10:35  
16 A. Oh, did I?  
17 24 Q. Yes, you did. You did, indeed. Even -- I didn't even  
18 pick up on it, but the Chair did.  
19 A. I didn't realise.  
20 25 Q. And if that happens, we can pause for a moment just to 10:36  
21 make sure that the name doesn't go on the feed to the  
22 other room. And also to make sure that the name  
23 doesn't appear on the transcript.  
24 CHAIRMAN: Okay. Let's move on. Thank you.  
25 26 Q. So you have clarified then what happened when Michael 10:36  
26 came home in June 1990. Now, aside from that, is there  
27 anything else in the statement that you wanted to add  
28 to or change?  
29 A. I don't think so. I don't think so, no.

1 27 Q. Are you content to adopt that statement as the basis of  
2 your evidence?  
3 A. Yes. I am.  
4 28 Q. I'm going to ask you some questions now arising from  
5 it. You said that Michael was born in 1979? 10:36  
6 A. [REDACTED].  
7 29 Q. And he is now 42?  
8 A. That's correct.  
9 30 Q. And you say that he was at Muckamore between 1989 and  
10 1999. 10:37  
11 A. He was admitted to Muckamore on 5th May 1989. He got  
12 out of Muckamore 30th August 1999.  
13 31 Q. Yes.  
14 A. But I came across a documented that stated he wasn't  
15 actually released, officially discharged as a patient, 10:37  
16 until the following year. March or something I think  
17 it was.  
18 32 Q. Yes. I was going to ask you about that a bit later.  
19 So it seems that he was -- he actually left Muckamore  
20 in August 1999? 10:37  
21 A. That's correct. Yeah. That's correct, yeah.  
22 33 Q. But the formal date of discharge was November.  
23 A. Officially discharged the following year. You know.  
24 34 Q. Yes. Now, do you know, during that period between  
25 August and November, was he in Muckamore again during 10:37  
26 that time?  
27 A. Well, no. Once Michael came out in August that was  
28 him, and thank God he's still out, you know.  
29 35 Q. Yes. Once he left in August, that was it?

1 A. That was it, yes.

2 36 Q. That's very helpful. Now, you mention in your  
3 statement that he was admitted to the Conicar ward?

4 A. That's correct.

5 37 Q. And you say that he was 9-years old at the time? 10:38

6 A. When he went in, yeah.

7 38 Q. And you also refer to him being in the Rathmullan ward  
8 when he was 16 or 17, isn't that right?

9 A. Yeah. Yeah. What happened there was that Michael's  
10 consultant -- consultant psychiatrist, he was a great 10:38  
11 man with Michael, you know, and he said to Michael's  
12 mother: I want you -- I'll bring you around three  
13 wards. I'm giving you the name of three wards and you  
14 pick which ward that you want Michael to go, which you  
15 think would be suitable. 10:38

16 39 Q. Was he in Conicar at that time?

17 A. He was in Conicar at the time, yeah. Well he was in  
18 Conicar, but you have to remember during that time he  
19 was home for two and three days a week, four days a  
20 week. We actually had him at school as well. 10:38

21 40 Q. Yes.

22 A. You know. So he was down as a patient at Muckamore for  
23 a long time, but a lot of that time was spent at home  
24 as well, you know.

25 41 Q. Yes, but at that time when he was in the Hospital he 10:39  
26 was in the Conicar ward?

27 A. He was in the Conicar ward and the consultant  
28 psychiatrist says to Michael's mother, "I'm giving you  
29 the name of three wards. Go around and have a look at

1           them and see which ward you would think would be  
2           suitable for Michael." So Michael's mother went round  
3           the wards and chose Rathmullan.  
4  
5           Now that brings up another thing was that when he was 10:39  
6           in Rathmullan, after he was in Rathmullan for a while,  
7           this sister who had told us that Michael was doing  
8           well, and this and then all the rest of it.  
9       42   Q.   Yes, the one you mentioned in the statement?  
10       A.   Yeah. She turned around and said to Michael's mother 10:39  
11       one day "I don't think this ward is suitable for  
12       Michael", and Michael's mother said "why is that?"  
13       "Oh, I just don't think it's suitable." Michael's  
14       mother turned around and says "well, the consultant  
15       psychiatrist gave me three wards to pick and I picked 10:39  
16       this ward. So if you have a problem with that,  
17       I suggest you take it up with him."  
18       43   Q.   But Rathmullan was the ward that your wife had chosen  
19       specifically?  
20       A.   That's correct, yeah. 10:40  
21       44   Q.   And were those the only two wards that Michael was in?  
22       A.   They were the only two wards he was in. I have to say  
23       at this stage, once the behaviour nurse set up a core  
24       team for Michael, everything just progressed great.  
25       The staff were brilliant in it. They done a fine job, 10:40  
26       you know.  
27       45   Q.   Where was the core team based?  
28       A.   In Rathmullan ward.  
29       46   Q.   In Rathmullan.

1 A. They were set up -- I think it was about maybe a year  
2 or 15 months or something before Michael got out. But  
3 that was the basis of Michael getting back into the  
4 community, that he had a core team. Whether he was in  
5 Muckamore or whether he was in the community. 10:40

6 47 Q. Yes, and was the purpose of the core team to assist  
7 Michael in resettling into the community?

8 A. Not when it was originally set up.

9 48 Q. What was its purpose when it was originally set up?

10 A. The purpose was that you had trained staff looking 10:40  
11 after Michael, because Michael is very, very difficult  
12 to look after. If you don't know him, it would  
13 frighten you if you were put into a room and told to  
14 look after him, do you know. Because it is -- because  
15 the self-injurious behaviour. It is, you know, 10:41  
16 traumatic, so to speak.

17 49 Q. Yeah.

18 A. But it ended up with this core team, what they actually  
19 did was when Michael moved in to the community, some of  
20 that core team went with him for I think it is a period 10:41  
21 of four weeks or six weeks, went to where he was  
22 living, showed the staff how to do this, how to do  
23 that. They done a great job, the last...

24 50 Q. And were the core team employed by Muckamore?

25 A. Yeah. They were based in Muckamore permanently. 10:41

26 51 Q. We'll maybe come back to that later in your evidence,  
27 but is it fair to say then roughly speaking Michael was  
28 in Conicar for about seven years and Rathmullan for  
29 about three?

1 A. Yeah. well he -- I think he would have been in  
2 Rathmullan for the last say two, two and a half years  
3 or something, you know.

4 52 Q. Yes. You say that Conicar was an adult ward but  
5 Michael was the only child there? 10:42

6 A. There was nowhere else for him. It was all adults.  
7 There was nobody Michael's age. I never even saw  
8 anybody Michael's age in Muckamore.

9 53 Q. Do you remember roughly how many other adults there  
10 would have been on the ward? 10:42

11 A. It's hard to say because when we went up to get  
12 Michael, Michael was usually in a recreation room,  
13 something about the size of this maybe, you know, maybe  
14 it would be a bit smaller.

15 54 Q. Yes. 10:42

16 A. And there was just so many adults up and down and  
17 doddering about, you know. You know it was just -- you  
18 know you could have been going in, people come out of a  
19 football match, so to speak. It was just, you know,  
20 everybody walking around, you know. 10:42

21 55 Q. Did you ever raise that issue with the Hospital about  
22 why Michael was on an adult ward?

23 A. We couldn't do anything about it because we were told  
24 that there was nowhere else for him. Full stop,  
25 basically, you know. 10:42

26 56 Q. But did you raise the issue with the Hospital?

27 A. Well there was nothing I could do about it, do you know  
28 what I mean.

29 57 Q. You were told this is where he's going to be?

1           A.    This is it. This is where he is. It's an adult ward  
2                   and there's nowhere for him to go. We were told that.  
3                   When somebody says to you, you know, there's nowhere  
4                   for him to go. You see we were all new to this too, do  
5                   you know what I mean, at the time. 10:43

6    58   Q.    Yes. Yes. Absolutely. Well I just wanted to go on  
7                   and ask you about your son's disabilities. You do give  
8                   a summary of his disabilities in your statement.

9           A.    Well it hasn't got all his disabilities down there, you  
10                  know. 10:43

11   59   Q.    Do you want to expand on that?

12           A.    Well, Michael is deaf, blind, autistic, profound  
13                  learning disability. He has no mobility. Suffers  
14                  epilepsy, and bowel problems. And obviously SIB,  
15                  self-injurious behaviour. Although his behaviour is 10:43  
16                  quite good recently, you know.

17   60   Q.    Yes. I was going to ask you about that, the  
18                  self-injurious behaviour. How does that manifest  
19                  itself?

20           A.    Well, he doesn't give himself black eyes. He punches 10:43  
21                  himself in the jaw, and has done for years. And he's  
22                  been brought to hospital on several occasions because  
23                  of jaw injuries, but Michael never -- that's the only  
24                  time in Michael's 42 years that I've saw black eyes.

25   61   Q.    Yes. 10:44

26           A.    The only time. The only other incident that came close  
27                  to a black eye was when he moved into the community and  
28                  his eyelid was a bit black and there was a scrape along  
29                  there (indicating), but that happened -- that was a



1 carpet burn on the carpet, do you know what I mean.

2 62 Q. Yes. But just the behaviour that you describe of  
3 Michael hitting his jaw, has that been fairly constant  
4 over the years?

5 A. Well it was for quite a number of years. But this last 10:44  
6 few years he has been right and good, you know. He  
7 also attends Everton Day Care Centre, and the staff in  
8 there is absolutely brilliant with him. They do a  
9 fantastic job, you know.

10 63 Q. Yes. 10:44

11 A. And they're well trained. And they have a core team.  
12 They've had a core team from the day and hour Michael  
13 moved in there in 1999. Just before the pandemic I was  
14 at a meeting and they had a list of the names in  
15 Michael's core team, and there was twelve of them, and 10:45  
16 there was at least eight or nine of them that I knew  
17 had worked with Michael for several years.

18 64 Q. Yes.

19 A. The experience they have is unbelievable, and they're  
20 absolutely brilliant with him. I've never had one 10:45  
21 moment of controversy with them. I've never had to  
22 make a complaint. They've just done a fantastic job.  
23 Very professional.

24 65 Q. So with Michael's core team you're very content?

25 A. Yeah. Well his core team in day care, Everton Day Care 10:45  
26 Centre.

27 66 Q. Yes.

28 A. They do a fantastic job. I think part of it is, is  
29 because they set up a core team for him coming out and

1           they've kept to the core team.

2   67   Q.    Yes. Just going back to Michael's disabilities. Can  
3           he communicate with you?

4           A.   No. No. No communication.

5   68   Q.    So if something was happening to him, he couldn't tell   10:45  
6           you about it?

7           A.   No. No. No. No. No.

8   69   Q.    Now, you draw attention in your statement to a number  
9           of things that occurred during your son's stay in  
10          Muckamore. But is it fair to say that what happened   10:46  
11          in June 1990 is uppermost in your mind?

12          A.   Oh, yes. Yes. Most definitely. Because, you know,  
13          the last thing you expect a child coming out from a  
14          hospital is to have black eyes and facial injuries, do  
15          you know.   10:46

16   70   Q.    Well I'm going to ask you in some more detail about  
17          some of the matters that you raise in your statement  
18          and then we're going to go and look at how you raise  
19          the issue with the Hospital and with The Trust.

20          A.   Yeah.   10:46

21   71   Q.    So let's look at what happened first then. You recall  
22          that Michael's first visit home after going into  
23          Muckamore in May 1989 was on Saturday, 2nd June 1990?

24          A.   That's correct. Yeah. Yeah. Yeah. It was actually  
25          [Name] and -- it was actually Michael's mother   10:47  
26          instigated that.

27   72   Q.    Can we just pause again briefly?

28          CHAIRMAN: Yeah. Sorry, thank you. I missed that one.

29          Thank you. Yeah. Thank you.

1 73 Q. MR. DORAN: Don't worry, Mr. Overend. Yes, you were  
2 saying that Michael's mother...  
3 A. Michael's mother instigated this because there didn't  
4 seem to be anything happening, you know, and the way  
5 she looked at it was get him home and let him know he's 10:47  
6 still got family.  
7 74 Q. Yes. You wanted to get your son home?  
8 A. Yeah.  
9 75 Q. And the following Friday then you say that your wife  
10 phoned the Hospital to ask about taking your son home 10:47  
11 on the Saturday.  
12 A. I was standing near her when she did phone.  
13 76 Q. But I think you heard her say "face a bit of a mess"?  
14 A. Yes. I was standing two foot away from her. I think  
15 she actual says it and she looked at me at the same 10:48  
16 time, you know. So "face in a mess", you know.  
17 77 Q. So you've got the impression that something had  
18 happened to your son?  
19 A. Well we knew straightaway.  
20 78 Q. And is it right to say that the hospital's view was 10:48  
21 that Michael should stay in the hospital rather than go  
22 home?  
23 A. What Michael's mother was told was "his face is in a  
24 bit of a mess, just leave him for a few days." I think  
25 that was the gist of it, you know. 10:48  
26 79 Q. But Michael's mother was determined to make  
27 arrangements to get him home, is that right?  
28 A. Well you see, as soon as Michael's mother put the phone  
29 down, the two of us looked at each other. "I smell a

1           rat. I smell a rat", and within seconds she was on the  
2           phone to a relative about getting a lift up to  
3           Muckamore.

4    80   Q.    Yes. So she made the arrangements to get him home and  
5           she brought him home? 10:48

6           A.   No. Yes, that night she -- what the problem was, was a  
7           relative was actually working and Michael's mother was  
8           told that she didn't finish until about 5:00 o'clock or  
9           something and sometimes on a Friday she'd go shopping.  
10          So his mother wasn't sure what time she would have been 10:49  
11          able to get the lift up to Muckamore at, you know.

12   81   Q.    Yes. But she made sure that she got there?

13          A.   Oh, she made sure she was getting there. There was  
14          nothing going to happen. And I minded the other kids,  
15          you know what I mean. 10:49

16   82   Q.    Yeah. You've said in your statement when Michael  
17          arrived home it was blatantly obvious that he had two  
18          black eyes?

19          A.   Well the photographs prove it, you know. Yeah.

20   83   Q.    The Panel have the photographs. They are exhibited to 10:49  
21          your statement at page 11 to 18. From now on, Chair,  
22          I will just use the page reference rather than the full  
23          statement reference.

24          CHAIRMAN: Is it possible to put these up on the screen  
25          or not? I'm just thinking. I mean the patient isn't 10:50  
26          being anonymised, so there's no reason not to.

27   84   Q.    MR. DORAN: I would suggest that we perhaps allow the  
28          witness to indicate whether he is comfortable with  
29          that. I mean I know, Mr. Overend, you have indicated

1           that you don't want your son to be anonymised. would  
2           you be comfortable with your son's photographs being  
3           shown on the screen?

4           A.    Yes. Yes. No problem.

5   85   Q.    So that means that they will be seen on the screen in   10:50  
6           this room and also by anyone who is watching the  
7           proceedings by live link.

8           A.    I've no problem with that. No problem whatsoever.

9   86   Q.    You've no problem with that. very well. If the --  
10          Chair, I understand that it would take some time.   10:50  
11          CHAIRMAN: Okay. well we can do that later. But  
12          I think in general terms the public are entitled to see  
13          that which is not being restricted.

14          MR. DORAN: Yes. I should say, Chair, that it was only  
15          confirmed this morning that there would not be a   10:51  
16          restriction on the...

17          CHAIRMAN: Absolutely. No criticism intended at all.  
18          But in general terms, that should be the rule, that the  
19          public are entitled to see what we see.

20          MR. DORAN: Yes. I should say also that there are   10:51  
21          other exhibits that contain names that I will not be  
22          referring to.

23          CHAIRMAN: That need redacting. No, I understand that  
24          entirely.

25          MR. DORAN: So I won't be asking for those to be   10:51  
26          displayed on the screen.

27          CHAIRMAN: Sure. Okay. Thank you.

28          A.    I've some photographs in my pocket, if they'd be any  
29          help?

1 87 Q. MR. DORAN: well that's -- there's no need for now,  
2 Mr. Overend. The Panel have the photographs and  
3 we will show them later on.  
4  
5 were they all taken on that day? 10:51  
6 A. I was thinking about that. I think there's a couple of  
7 them that I might have taken on the Monday before  
8 we brought Michael back. I think it was the ones  
9 where, ehm, his face, and the bruising seems to be a  
10 wee bit more faded than the other ones. 10:52  
11 88 Q. Okay. But they were all taken in or around that time?  
12 A. Oh, yes, yes. Yeah. Yeah.  
13 89 Q. And just for clarification, did you take the  
14 photographs specifically to make sure that you had a  
15 visual record of your son's injuries? 10:52  
16 A. No. The reason I took the photographs was that  
17 I remember some time before it there was a social  
18 worker or a health visitor was in the house one day and  
19 we were talking away and this and that, and they turned  
20 around and says "oh, I noticed a wee bruise on 10:52  
21 Michael's leg", and I says "aye, he got that playing  
22 about", I says. "He clatters into things." So what I  
23 did was when I, I take the photographs, I says "I'll  
24 show them. The next time anybody comes in to me and  
25 says about a bruise on Michael's leg, I'll show them 10:52  
26 the photographs and say what about them bruises?".  
27 90 Q. Just to be clear, what do you say the photographs show  
28 in terms of Michael's eyes?  
29 A. The black eyes. They're badly bruised and all the rest

1 of it. I've actually a photograph here that I meant to  
2 show you in the witness room to show the Panel that was  
3 taken of Michael the week before it, do you know what  
4 I mean, when he hadn't got black eyes. When you look  
5 at him without the black eyes and look with the black 10:53  
6 eyes, there's a hell of a difference, you know.

7 91 Q. We can make arrangements for that earlier photograph to  
8 be introduced in evidence as well. There's no need to  
9 worry about that now, Mr. Overend?

10 A. I meant to tell you in there just so, you know, you 10:53  
11 could compare the two of them, you know.

12 92 Q. Don't worry about that. Critically, you brought the  
13 photographs to the Panel's attention. You've exhibited  
14 them to your statement and we'll have a further look at  
15 them later on. But basically you're saying it was 10:53  
16 clear your son had black eyes when he arrived home?

17 A. There's no doubt about it whatsoever.

18 93 Q. And you've said that apart from that date you don't  
19 recall your son having a black eye?

20 A. He's never had black eyes. Never had black eyes. 10:54

21 94 Q. And I think you say in your statement your instinct was  
22 to report the matter to the police at that point in  
23 time?

24 A. Yeah. Yeah. I -- as I'm sure you'll understand, I was  
25 so angry, you know. I was questioning myself. 10:54  
26 I opened the door and says "I'm away". Michael's  
27 mother, "what are you doing? what are you doing?", and  
28 I says "I'm going to the police station." The police  
29 station is two minutes behind us. Directly behind us

1 more or less, you know.

2 95 Q. Did she persuade you not to go?

3 A. She said "don't." She says "if you get the police  
4 involved they'll not take him back in and there's  
5 nowhere else for him to go", and that's the only 10:54  
6 reason, you know. There was nowhere else for Michael  
7 to go. Obviously he's a 9-year old child in an adult  
8 ward in a long-stay hospital. So he hasn't got -- he  
9 wasn't even on the children's ward in the hospital. So  
10 there was nowhere else for him to go. 10:55

11 96 Q. So were you concerned, really, that if you reported the  
12 matter your son wouldn't receive the specialist care  
13 that he needed within the hospital?

14 A. All I wanted -- my exact words was if -- if I can say  
15 it is -- I says "I'm not letting the bastards away with 10:55  
16 this." That's what my words were.

17 97 Q. You used the phrase that you didn't report, you used  
18 the phrase because of the fear factor that surrounded  
19 Muckamore. What did you mean by that?

20 A. Well, the talk was at the time -- and with everybody 10:55  
21 sort of I knew, you know like, Muckamore was a place to  
22 be feared, you know. There was always -- even when he  
23 went there at the start, you know, we heard older  
24 people talking about Muckamore and about what happens  
25 in there, and this and that and all the rest of it, you 10:56  
26 know. It was a -- but we couldn't do anything about it  
27 because there was nowhere else for him to go. Full  
28 stop.

29 98 Q. And you brought him back then on the Monday?



1           A.    I did, yeah.

2    99   Q.    And you explain in your statement that a member of  
3               staff said something to you, H44, he  
4               said...(INTERJECTION)

5           A.    Yeah. As I walked Michael in, patients was having 10:56  
6               their dinner, and he was at the table. I'm not sure  
7               where he was sitting. He was sort of really bent over  
8               the table a wee bit or something as if he was helping  
9               someone, and I'm walking in that way and he's there  
10              (indicating), and all I heard was "Mr. Overend", and 10:56  
11              I turned around and he says "the night staff on  
12              duty didn't notice anything. It was only when the  
13              morning staff came on that they noticed Michael, and  
14              the nurse on duty is an excellent nurse. I would trust  
15              her with anybody." 10:56

16   100   Q.    And those are the exact words you've used in your  
17               statement?

18           A.    The exact words. I'll never forget them.

19   101   Q.    And what did you take from that?

20           A.    I just -- I looked at him and I just -- disgust. 10:56  
21               Disgust.

22   102   Q.    And did you have any further conversation?

23           A.    I didn't, I didn't open my mouth to him, no. I didn't  
24               open my mouth to him, you know.

25   103   Q.    So this was you bringing Michael back in to Conicar in 10:57  
26               1990?

27           A.    Yes, on the Monday at lunchtime it was. Lunchtime.

28   104   Q.    And as we'll see, you followed this matter up later on,  
29               several years later.

1 A. Yeah. Yeah.

2 105 Q. I just wonder, do you recall raising the matter at the  
3 time back in 1990?

4 A. No. We weren't told you could make a complaint.  
5 We weren't told anything. I can remember Michael's 10:57  
6 mother saying something to me about "they're going to  
7 keep a closer eye on him" or something like that.

8 106 Q. Yes.

9 A. That could have been maybe a social worker or somebody  
10 telling her that or whatever. Because you see, 10:57  
11 Michael's mother had always more information than me  
12 because different members, or different health workers,  
13 et cetera, would be visiting the house and all the rest  
14 of it, do you know what I mean. So --

15 107 Q. Yes. 10:58

16 A. And I wasn't always there, you know. So she would have  
17 had more -- she would have been privy to more  
18 information than me. And there's things I found out  
19 several years later that I didn't know at the time.  
20 You know? 10:58

21 108 Q. So it was only in later years that it occurred to you  
22 to raise the matter?

23 A. Yeah. Well, what happened was, when I saw that article  
24 in the newspaper about this patient had suffered  
25 injuries and there was somebody charged with it and -- 10:58  
26 but obviously staff was saying that nothing ever  
27 happened, do you know what I mean, and I says that's  
28 exactly the same type of thing happened Michael.

29 109 Q. So it was hearing that news report that prompted you to

1 take action yourself?

2 A. Yeah. Yeah.

3 110 Q. we'll come to that in a moment. I understand, Chair,  
4 that the photographs can be displayed now.

5 CHAIRMAN: Good. Okay. Thank you. 10:58

6 MR. DORAN: I think there are eight photographs in  
7 total. If we could just run through those eight pages,  
8 please. Perhaps a few seconds on each.

9 CHAIRMAN: Yeah. Certainly. Do you want to give the  
10 reference -- oh, we've got the reference. 10:59

11 MR. DORAN: Yes. If we can just make sure that  
12 we don't go beyond the photographs. Because, as  
13 I've said, there are exhibits that contain names  
14 following immediately afterwards. So basically the  
15 final page will be MAHI-STM-007-18. 10:59

16 CHAIRMAN: We're not getting -- yes, that's it.

17 MR. DORAN: Needs to be scrolled, I think.

18 CHAIRMAN: Mr. Overend, all of these photographs, you  
19 say, show the black eyes. They were all taken in  
20 relation to those injuries. 11:00

21 A. I have the photographs in my pocket which I think is  
22 actually better than -- some of them would be clearer  
23 than what actually is on the screen.

24 CHAIRMAN: That's fine. I think we can get the  
25 impression anyway. Thank you. 11:01

26 MR. DORAN: And this is the final photograph then at  
27 page 18.

28 CHAIRMAN: That's the last one. Yeah. Yeah. And that  
29 actually may be the best one from our point of view to

1 show the black eyes. Can you just scroll up a little  
2 bit? That's it. Thank you. Yeah. Thank you very  
3 much.

4 MR. DORAN: Thank you. So if we could have the photo  
5 taken off screen now, please. Thank you. 11:01

6 CHAIRMAN: How much longer do you think you've got?  
7 The witness has been going about an hour, but if --

8 MR. DORAN: I think we'll probably need another hour,  
9 chair.

10 CHAIRMAN: Another hour. I think we better take -- 11:01

11 MR. DORAN: There are quite a few exhibits to be  
12 considered.

13 CHAIRMAN: Yeah. All right. Well I think what we'll  
14 do is just take a break so that you have a break for  
15 about ten minutes. Then we'll come back in. It 11:01  
16 doesn't feel -- I expect you feel you could carry on,  
17 but you've also got to concentrate and make sure you  
18 get your evidence right. So I think it is best if  
19 we just take a breather, ten minutes, and then we'll  
20 come back in and finish your evidence. Right. 11:02  
21 Thank you very much, Mr. Overend. Okay, we'll rise.  
22

23 THE INQUIRY ADJOURNED BRIEFLY AND RESUMED AS FOLLOWS

24

25 CHAIRMAN: Thank you. 11:02

26 111 Q. MR. DORAN: Mr. Overend, I'm not going to ask you about  
27 all of the matters you discuss in your statement. The  
28 statement is before the Inquiry, but there are a couple  
29 of matters that I wanted to ask you about before

1 we move on and look at the various records that you've  
2 exhibited to your statement.

3 A. Yeah.

4 112 Q. First of all, in paragraph 13 you say that around  
5 March 1995, your son came home completely doped up. 11:19

6 A. Yeah.

7 113 Q. Can you tell us something more about that?

8 A. We actually went and got Michael and brought him home.  
9 We -- when Michael was coming home we went up and  
10 collected him and brought him home and then brought him 11:19  
11 back again.

12 114 Q. How often would he come home around that time?

13 A. It's hard to say over the years, because at the start  
14 we couldn't get Michael home at all. Then it was a  
15 case of we got him home, took him home for four hours, 11:19  
16 six hours, eight hours. Tried an overnight  
17 stay, didn't work. Left it. Tried it again. And it  
18 progressed from that right up until he was actually  
19 home and going to school five days a week.

20 115 Q. Yes. 11:19

21 A. So although he was at Muckamore for a period of  
22 ten years or so, a lot of that time was spent at home.

23 116 Q. Yes.

24 A. It could have been four hours, as I say at the start,  
25 and then it could have been five days. 11:20

26 117 Q. So this, 1995, he would have been about 15/16 at that  
27 time; is that right?

28 A. Yeah. At that time now when we were taking him home,  
29 we would have had him home two or three days a week.

1 118 Q. Yes.  
2 A. That particular period of time, we weren't long moved  
3 into the bungalow, which was basically built for  
4 Michael's needs. That's how I remember it. We moved  
5 in in March 1995. 11:20  
6 119 Q. You had the bungalow specially built for Michael?  
7 A. It was specially adapted for Michael's needs, you know,  
8 shower room and bedroom, et cetera.  
9 120 Q. Yes.  
10 A. Yeah. And we brought him home and we thought he was 11:20  
11 maybe just a bit tired, you know, a bit tired. Maybe  
12 he didn't sleep or something. We got him home and  
13 we had him on the settee, and he would have -- you  
14 know, he loved his family hugging him and kissing him,  
15 and all the rest of it, and he sat there and his head 11:20  
16 was down like that. (Indicating). Tried to give him a  
17 sandwich --  
18 121 Q. And you're lowering your head.  
19 A. Yeah. That's how his head was. You would have thought  
20 he was drunk. That's the only way I could explain it. 11:21  
21 If you gave him a sandwich he just couldn't, he  
22 couldn't even hold the sandwich. He was just -- and he  
23 was like that for days, for a couple of days.  
24 122 Q. And I take it that was not how you knew Michael to be  
25 normally? 11:21  
26 A. Oh, no, no. No, no. It was a waste of time taking him  
27 home if he is going to be like that. He can't even,  
28 you know, sort of communicate with his own family,  
29 can't touch his own family. He just was on a different

1 planet, basically.

2 123 Q. On the first occasion that this happened, how long was  
3 he like that for?

4 A. At least two days, maybe three days.

5 124 Q. And you say that this went on for a number of weeks? 11:21

6 A. It went on for several weeks. It got to the stage  
7 where it just struck me sort of one day and I says  
8 "this is it. Not good enough", and we brought him back  
9 up, told the staff and says "he's not coming home in  
10 that state anymore. This isn't on." Now, Michael had 11:22  
11 a consultant psychiatrist that I referred to earlier on  
12 there.

13 125 Q. Yes.

14 A. He was an absolute gentleman. He done an awful lot of  
15 work for Michael. He was an absolutely godsend. And 11:22  
16 I would put my life on it that if he was in charge of  
17 Michael at that time he wouldn't have sanctioned  
18 anything like that. [REDACTED]  
19 [REDACTED]

20 126 [REDACTED] 11:22  
21 [REDACTED]  
22 [REDACTED]  
23 [REDACTED]  
24 [REDACTED]  
25 [REDACTED] 11:23

26 A. But, as I say, under no circumstances would Michael's  
27 consultant psychiatrist have sanctioned that.  
28 Definitely not. He was always aware of, if Michael  
29 reached a certain level of medication and he was doing

1           okay with it, he wouldn't have touched it. He wouldn't  
2           have -- give him more or give him less. It was always  
3           a big thing with him, you know. There's definitely no  
4           way he would have sanctioned that. I don't know how it  
5           happened. But it certainly didn't come from him. 11:23  
6           I would put my life on that.

7 127 Q.   MR. DORAN: But is it right to say that when you raised  
8           the matter it changed?

9           A.   Oh, it did change. We just went up and we says "he's  
10          not coming home anymore until this is sorted out. 11:23  
11          I don't know what youse are doing with him, or what  
12          medication he's on, or what he's not getting, but we're  
13          not taking him home until it's sorted." I think maybe  
14          a fortnight or three weeks later things seemed to be  
15          sorted out, you know. 11:24

16 128 Q.   So when you raised the issue that did seem to make a  
17          difference.

18          A.   Yeah, well, we brought him back -- well, you see it  
19          wasn't a case -- nobody would have came out and had a  
20          meeting with you and says "what's wrong?", and this and 11:24  
21          that. We just went up and says "look, he's not coming  
22          home anymore until this is sorted out. That child  
23          doesn't know where he's going, where he's coming from,  
24          where he is, what he is doing. He doesn't even  
25          recognise his own family." It was unreal. 11:24

26 129 Q.   Now there's another thing that I wanted to ask you  
27          about and that relates to Michael's time in Rathmullan,  
28          and you say that you felt the ward sister had told you  
29          lies --



1 A. Yeah.

2 130 Q. -- about how Michael was feeling at a particular point  
3 in time?

4 A. No doubt about it. No doubt about it. What happened  
5 was -- I'm saying Ward Sister, I think she was a Ward 11:24  
6 Sister. I don't know. She was a nurse. But she would  
7 have phoned Michael's mother and says "are you taking  
8 Michael home this week?" He's blah, blah, blah. He's  
9 this, he's that. And I was listening to the phone call  
10 the day that she rang up. "Michael's eating. 11:25  
11 Michael's doing this. Michael's brilliant. Michael's  
12 this." When Michael's mother put the phone down,  
13 I turned around and my exact words were "if Michael's  
14 so good, what's he doing in there in the first place?"  
15 The way she's talking he should be at University or 11:25  
16 serving an apprenticeship or something. She was -- he  
17 was that good and all the rest of it. I knew it wasn't  
18 Michael. Full stop. And his mother knew it wouldn't  
19 have Michael. Full stop. So I says I'll go up and  
20 check it out tomorrow. I went up to Rathmullan Ward 11:25  
21 the next day and I walked in and there was a big group  
22 of patients sitting with this Daniel O'Donnell video  
23 on, music going and what not, and Michael was over  
24 there lying on the floor. And he was crying. Sobbing.  
25 And Michael didn't cry. That was -- I think that was 11:26  
26 about the third time I had saw Michael ever crying in  
27 his life. And it was heartbreaking.

28 131 Q. So you sensed there was something wrong?

29 A. I knew by the phone call that she wasn't -- the way she

1 described Michael was not Michael. People know their  
2 own children, you know. That's the reason I went up.  
3 I says "if Michael's so good, what's he doing in there  
4 in the first place then?" It's like -- it's like  
5 somebody bumping up a boxer whose only had two fights, 11:26  
6 bumping him up as a world champion, so to speak.

7  
8 So when I went in, as I said Michael was lying on the  
9 floor crying and sobbing. There was a big heavy-made  
10 girl bending over and trying to lift him up, and I went 11:26  
11 over. "What happened love?", and the two of us lifted  
12 him up. It was a two-seater settee. Put him on the  
13 two-seater. I says "what happened? Did he just fly  
14 into one?"

15 132 Q. What did you mean by that? 11:27

16 A. Fly into one? That he just -- you see Michael could  
17 have been sitting, you know, nice and peaceful and  
18 sedate and all the rest of it, and then just next thing  
19 - bang, you know.

20 133 Q. There would be a sudden change? 11:27

21 A. Well his mother used to describe him like the weather  
22 in Belfast, you know: sun, rain, storms, thunderstorms,  
23 lightning, et cetera. So that's the way Michael would  
24 be. And I said "did he fly into one?", and she says  
25 "no, he's been like that the past three days", and 11:27  
26 I says "you what?" She says "he's been like that the  
27 past three days." I says "how do you know?" She says  
28 "because I've been working with him." I said "have  
29 you?", and she says "aye, I've been working with him

1 the past three days." So...

2 134 Q. I wonder was there any exploration then of what had  
3 happened to him at that time? What had caused him to  
4 be like that?

5 A. Lying on the floor? 11:28

6 135 Q. Yes.

7 A. Well, I can't even remember asking the girl about it.  
8 It could have been a case of maybe it was a seizure  
9 working on him. Sometimes if a seizure was working on  
10 Michael his behaviour could be up on the left for three 11:28  
11 or four days, and then he has a seizure and his  
12 behaviour would be fine for the next four or five days.  
13 That's just the way it worked, do you know. It could  
14 have been that. It could have been -- he could have  
15 had an ear infection, could have had a urinary tract 11:28  
16 infection.

17 136 Q. But you don't know what the cause was at that time?

18 A. No, we don't know. You see if anything is wrong with  
19 Michael what you do is you eliminate these different  
20 things. Has he an ear infection? Has he a urinary 11:28  
21 tract infection? Has he this, has he that? Is he  
22 constipated? You know.

23 137 Q. But you felt that you had been deceived the day before?

24 A. Well we were told, we were told 24-hours before that  
25 that Michael was great. He was eating, he was doing 11:28  
26 this and he was doing that, he was doing this and doing  
27 that. And I knew it wasn't Michael, you know. And his  
28 mother knew that it wasn't him.  
29

1  
2 138 Q. Now, I want to move on to your raising these issues  
3 with the hospital and with others at a later stage, and  
4 you've explained that you heard a news story about  
5 Muckamore in or around 1997? 11:29  
6 A. It was a newspaper article, actually.  
7 139 Q. Ah! You read an article in the paper about a case  
8 arising from Muckamore, is that right?  
9 A. Yeah. Yeah. That's correct, yeah.  
10 140 Q. And that set you thinking. 11:29  
11 A. Yeah.  
12 141 Q. And you say that you met with a couple of people from  
13 the Mental Health Commission?  
14 A. That's correct, yeah.  
15 142 Q. In June 1999. 11:29  
16 A. Yeah. There's a document of it in the file.  
17 143 Q. Yes. I see that. For the reference, that is at  
18 page 27, and if I may turn briefly to that. There's no  
19 need for the Panel to turn to the letter itself, but at  
20 page 27 one finds a letter from the business manager to 11:30  
21 Mr. Overend and his wife, and the letter reads:  
22  
23 "Mental Health Commission visit to Muckamore Abbey  
24 Hospital on 1st June 1999.  
25 11:30  
26 I refer to your request for an interview with the  
27 Commission on its forthcoming visit to Muckamore Abbey  
28 Hospital and they would confirm that an appointment has  
29 been scheduled for 11:00 a.m. in Rathmullan."

1  
2 A. That's correct.  
3 144 Q. So you obviously went along then to the meeting?  
4 A. Myself and his mother.  
5 145 Q. Yes. And you had arranged the meeting yourself. You 11:30  
6 had asked to meet the Commission whose members were  
7 coming to the hospital?  
8 A. I think what happened was there was a wee poster up on  
9 the board, if you want to meet with these Mental Health  
10 Commission. 11:30  
11 146 Q. Yes.  
12 A. Leave your name or something, or phone up such and such  
13 or whatever it was. I can't remember the actual  
14 context. But that's how it came about, you know?  
15 147 Q. Yeah. And you went to the meeting then? 11:31  
16 A. Yeah.  
17 148 Q. And you showed them the photographs, I believe.  
18 A. Yeah.  
19 149 Q. Are they the same photographs that you've shown us  
20 today? 11:31  
21 A. Them photographs, yeah. Yeah.  
22 150 Q. I think it's fair to say from your statement that you  
23 felt that the man -- there was a man and a woman and  
24 you felt that the man was very dismissive of your  
25 concerns? 11:31  
26 A. He looked at the photographs and then he stood up and  
27 he threw them down on the table like that, as if it  
28 was -- I don't know, just threw them down like that.  
29 Didn't set them down, threw them down like that. "It's

1           only a couple of black eyes." I was shocked! And his  
2           mother was shocked. And the wee woman who was with  
3           him, she -- she was shocked too. She seemed to be  
4           shocked too. And I says to him, "well if it was any of  
5           your relations, your grandkid or something, you'd have 11:32  
6           a solicitor, the police and all the rest of it on it",  
7           I says, and he turned around and he says to the woman,  
8           "come on" -- whatever he name was -- "we've another  
9           couple of these to do before lunch."  
10 151 Q. Did he ask you any further questions about what had 11:32  
11           happened?  
12           A. He didn't ask me anything at all. And the thing about  
13           that is Michael's mother said to me that very night,  
14           she says "Mick, I hope we get justice for our Michael  
15           and find out what happened to him. I'm not going 11:32  
16           through this no more. I don't want any more to do with  
17           it", and she didn't.  
18 152 Q. But I think you said that the woman took contact  
19           details from you.  
20           A. She says "give us your name and your address", and 11:32  
21           we gave the name and address. We never heard anything  
22           from it, you know.  
23 153 Q. So you didn't hear anything whatsoever after?  
24           A. Nothing whatsoever. Nothing whatsoever.  
25 154 Q. And you then say that you raised the matter with the 11:32  
26           Hospital itself?  
27           A. Yeah, I started writing to them and that, you know.  
28 155 Q. Yeah. And you had a meeting with the Assistant  
29           Director of Nursing Services?

1 A. No, I didn't have a meeting with him.

2 156 Q. Just, if you just go back to --

3 A. I had a meeting with the business manager.

4 157 Q. Yes. I'm just -- I just wanted to go back to your  
5 statement where you say -- this is where you asked for 11:33  
6 access to the notes.

7 A. Yeah.

8 158 Q. And you say in your statement at paragraph 19:  
9

10 "I asked for access to Michael's notes held at MAH 11:33  
11 particularly relating to the incident on 8th June  
12 1990."

13

14 Then you say:

15 11:33

16 "I met with..."

17

18 - and you gave the name. We know that that person is  
19 the or was the Assistant Director of Nursing Services.

20 A. The only time I met him was when I went to access the 11:33  
21 files.

22 159 Q. When you went to look at the files. Yes. Well let's  
23 just...(INTERJECTION)

24 A. Now I had a meeting with the business manager myself  
25 and Michael's mother. 11:34

26 160 Q. Yes. Yes. And we can come on to talk about that in  
27 due course. But I just wanted to ask you about the  
28 meeting with the Assistant Director of Nursing  
29 Services, because that's when you went along to get the

1 records, isn't that right?

2 A. I went along to have a look at his file, yeah.

3 161 Q. I just wanted to ask you how that visit worked. Had  
4 you asked in advance for access to the records?

5 A. Yeah. Yeah. I had -- if I'm not mistaken, I had been 11:34  
6 to a solicitor and asking about different things and he  
7 turned around and says to me, look, legal aid wouldn't  
8 cover me going to Muckamore to access the files. He  
9 says "you're very well versed on everything that has  
10 happened to your son, you'd be the best person to look 11:34  
11 at the files." So I can't remember exactly how it came  
12 about, but I was given access to the files.

13 162 Q. Yeah.

14 A. And I went along with my brother. My brother drove me  
15 up. But he had to sit in the corner out of the road. 11:35  
16 He wasn't allowed near the files.

17 163 Q. But the Assistant Director gave you access to the  
18 files?

19 A. Yeah. Yes.

20 164 Q. I just wonder how that worked? Were you put in the 11:35  
21 room and then the files brought to you, or had the  
22 files been prepared for you before your arrival?

23 A. The file was sitting there when I walked into the  
24 room.5.

25 165 Q. I see. 11:35

26 A. A big -- I think there was actually a couple of files,  
27 maybe. A big -- there was a lot, a lot of paperwork,  
28 you know. But I walked into the room and he says  
29 "you're not allowed to look at them", to my brother.



1 "There's a chair over there, sit over there." He  
2 introduced himself and says: "I'm here to help you.  
3 Ask any question you want. If you want photocopying  
4 done, I'll do it for you. No problem. Everything  
5 is" -- so I asked a couple of questions. One of them 11:35  
6 was where's the daily diary, the ward diary for 1990?  
7 It's probably in a -- what did he say -- a warehouse  
8 somewhere. I says "was Michael in a room of his own or  
9 was he in a dormitory type facility?". "I don't know."  
10 He says "I don't know your son at all. I don't know 11:36  
11 anything about your son. I don't know your son at  
12 all." That was one of his -- and so I knew exactly  
13 where I wanted to look in the file.

14 166 Q. And this is around 2001, is that right?

15 A. This is February 2001. No, sorry -- 11:36

16 167 Q. Don't worry about exact dates.

17 A. It was October. October 2001.

18 168 Q. Yes.

19 A. Or October 2000, was it?

20 169 Q. It was certainly some considerable time after the 11:36  
21 incident.

22 A. Oh, yes, yes, yeah. It was either October 2000 or  
23 2001. So I'm looking through the file. As I say I had  
24 asked a couple of questions, and no answer from him.  
25 Didn't know Michael at all. So my thinking was, right, 11:37  
26 I knew for a fact that this happened on 8th June. So  
27 I says to myself, I'll go to 1st June and take it to a  
28 week before the incident, a week after the incident.

29 170 Q. You came across a memo then, is that right?

1 A. Yeah. I said "sorry, what's your name again?", and he  
2 gave his name. And I had the memorandum right in front  
3 of me and there was one or two other things. There was  
4 two other pieces of paper I wanted photocopied. So  
5 I handed him the first one. Right. Handed him the 11:37  
6 second one. And the third one. I held it up like that  
7 so he could see it quite clearly.

8 171 Q. And his name was on it, is that right?

9 A. His name was on it. Now he was standing 2-foot away  
10 from me. So I'm that there about maybe 2-foot away 11:37  
11 from his face, and I says "and I want that photocopied,  
12 please", and he looked at it and he turned forty shades  
13 of -- he turned green, or whatever colour it was, and  
14 he actually bolted. Actually very, very quick, you  
15 know, just bolted. My brother says "what happened to 11:38  
16 him?", and I says, "well, he didn't know Michael but he  
17 sent a memorandum to somebody about Michael's  
18 injuries."

19 172 Q. So did you feel he was embarrassed then at seeing his  
20 name on the document? 11:38

21 A. I'm sure he was. Well, it took him 20/25 minutes to  
22 come back again. 20/25 minutes to photocopy  
23 three pieces of paper, you know.

24 173 Q. But just in fairness to him, is it possible that he  
25 just didn't recall compiling that memo some years 11:38  
26 before?

27 A. Well, there's the fact that he said he didn't know.  
28 Michael. Michael was 9-years of age when he went into  
29 Muckamore. He was in an adult ward. The patients in

1 Muckamore knew Michael. See if we had Michael out in  
2 the grounds, there was patients would have came over to  
3 Michael, rubbed his hand, rubbed his shoulder, give him  
4 a kiss. This is patients with learning disabilities.

5 174 Q. Yes. 11:39

6 A. Some of them verbal, some of them non-verbal. They  
7 knew Michael, but he didn't know Michael! Now this is  
8 a child in an adult ward at a long-stay facility for  
9 people with learning disabilities.

10 175 Q. So you felt that he wasn't being frank with you? 11:39

11 A. Well, there's other words for it.

12 176 Q. Well, let's have a look at the memo itself. Chair, I'm  
13 going to be going through a series of exhibits now.  
14 I'm not going to ask for them to be shown, but if I can  
15 ask the Panel to begin at page 19? 11:39

16 CHAIRMAN: Sure. Yeah. Just to make it clear, the  
17 Core Participants of course have these because they're  
18 tacked to the back of the statement.

19 MR. DORAN: They do, indeed.

20 CHAIRMAN: And so anybody who wants to follow can just 11:39

21 scroll through.

22 MR. DORAN: These are all exhibited to the statement.  
23 Michael, are you content if we go through these  
24 exhibits now and if I read through some bits of them  
25 and ask you questions about them? 11:40

26 A. Yeah. If I can help, I'll help.

27 177 Q. That's great. You've got them in front of you. I'm  
28 going to point you to page 19 first. That's the  
29 memorandum we've been talking about.

1 A. Yeah. Yes. Yes. Yeah.

2 178 Q. You can see that it is from the Assistant Director of  
3 Nursing Services. I'll just pause to note that that is  
4 the letter "M" that looks like a letter "W" that caused  
5 the error in the statement. And that is to the 11:40  
6 Director of Nursing Services and it is dated 13th June  
7 1990. It is titled:  
8  
9 "Accident form: Michael Overend. Conicar. 8th June  
10 1990." 11:40  
11  
12 It says:  
13  
14 "Michael has a recent history of very regular  
15 self-abuse. Indeed, this is the main reason for his 11:41  
16 admission to Conicar.  
17  
18 The self-abuse takes the form of hitting his head  
19 surface with his fists, slapping and nipping his..."  
20 11:41  
21 -- and the next word is difficult to read -- and then  
22 the word "body".  
23  
24 "He has had to be supplied with a specially made  
25 protective helmet which he wears when his behaviour is 11:41  
26 at its very worst. Swelling and bruising of his  
27 mandible are very likely a result of this self-abuse.  
28 Initial X-ray report revealed no bony injury. Further  
29 specialist report to follow."

1  
2 Then there's an asterisk and down below the asterisk  
3 "see overleaf". So that's the --  
4 A. That's probably something I wrote myself maybe on the  
5 back of it, you know. 11:42  
6 179 Q. Yes. So throughout these documents, I should say, you  
7 have taken notes; isn't that right?  
8 A. Yeah. Put them on the back of it so that --  
9 180 Q. Yes. For your own use.  
10 A. For my own use, yeah. 11:42  
11 181 Q. I just wonder, those various handwritten notes that  
12 appear on the documents, on the letters and other  
13 documents, did you make those notes at the time you  
14 received the documents or did you make the notes when  
15 you were making your statement? 11:42  
16 A. No, no, they'd have been made at the time or in and  
17 around the time I received the documents.  
18 182 Q. I see. So you get the documents or the letter and you  
19 write on it.  
20 A. Yeah. 11:42  
21 183 Q. Yes. I see.  
22 A. It could be four or five days later. Maybe something  
23 just pops into my head and I say "oh, put that down on  
24 the back of it", to remind myself about it, do you  
25 know. 11:42  
26 184 Q. Yes. But just if I can pick out three points from the  
27 memo. First of all, there's a mention of swelling and  
28 bruising of the mandible, of the jaw.  
29 A. Yeah.

1 185 Q. Secondly, there is no reference whatsoever to black  
2 eyes?

3 A. That's correct.

4 186 Q. And the memo says that the swelling and bruising are  
5 likely to be the result of Michael's self-abusing 11:43  
6 behaviour?

7 A. Yeah. I've no problem with that bit neither.

8 187 Q. In relation to swelling and bruising around the jaw?

9 A. Yeah. No problem with that whatsoever.

10 188 Q. And is the problem that you have with that document 11:43  
11 that there's no reference to --

12 A. Black eyes.

13 189 Q. -- the black eyes.

14 A. -- and the bruising on his face.

15 190 Q. I see. Let's just look at the next document then which 11:43  
16 is at page 20, and that is titled "Notification of  
17 accident", and we'll not go through every detail, but  
18 at "Details of Accident" we have the date of 8th June  
19 1990. Time 4:00 p.m. "Place of occurrence: Unknown."  
20 Down below: 11:43  
21

22 "Nature of injury: Swelling/bruising of L mandible.  
23 Description of accident including possible contributory  
24 factors: Cause unknown. Possibly self-inflicted due  
25 to self-abusive pattern of behaviour." 11:44  
26

27 A. Yeah.

28 191 Q. And, again, no reference there to black eyes.

29 A. Black eyes or bruising. I can't understand how they

1 can say "place of occurrence unknown." Do you know  
2 like, he's in a Hospital. Do you know what I mean?

3 192 Q. Yes.

4 A. Michael wasn't allowed to get up and walk out and go  
5 wherever he wanted, do you know what I mean. Michael 11:44  
6 was limited to where he could go. He was kept in.  
7 There was doors that Michael couldn't open, if you know  
8 what I mean. He wasn't -- he hadn't -- the doors  
9 weren't flung wide open and Michael could go where he  
10 wanted. 11:44

11 193 Q. So you can't understand why it would have been recorded  
12 "place of occurrence unknown"?

13 A. No. No. No. No. You see, the other thing that comes  
14 into my mind is that in another letter three or  
15 four days before this, some eagle-eyed member of staff 11:45  
16 noticed that Michael had a small graze to his right  
17 cheek or something, do you know what I mean?

18 194 Q. Well let's move through the documents. The next page  
19 then there is a form that appears to be a kind of  
20 referral form. If one looks at the left-hand margin, 11:45  
21 there is a reference to "Accident and Emergency  
22 Department Waveney Hospital", and the date at the top  
23 left is 8th June 1990. The time, 10:50, and in a  
24 little box to the top left-hand corner of the form,  
25 which is headed "Nature of Injury Complaint", the words 11:45  
26 "face inj self-inflict" are inserted.

27 A. Yeah.

28 195 Q. So "face inj", which appears to be shorthand for face  
29 injury.

1 A. Yeah.

2 196 Q. And then below, the history is described as:

3

4 "Referred from Muckamore Abbey. "

5 11:46

6 And that looks like "hist of self-abuse".

7 A. Yeah.

8 197 Q. Then below:

9

10 "Bruised L side mandible. Swelling plus bite ?" 11:46

11

12 So that's the reference form to the hospital.

13 A. Yeah.

14 CHAIRMAN: I think Dr. Maxwell can assist.

15 DR. MAXWELL: It's not. It's the report. It's the 11:46

16 report of the A&E Department. It's their form on

17 arrival at A&E completed by the A&E staff.

18 A. No.

19 MR. DORAN: well I will defer to the Panel's expertise

20 on that matter, certainly. 11:47

21 DR. MAXWELL: -- fracture.

22 CHAIRMAN: Thank you.

23 198 Q. MR. DORAN: Just in relation to that, Mr. Overend, is

24 your point again that it doesn't refer specifically to

25 black eyes? 11:47

26 A. Michael has been taken to the hospital on several

27 occasions with injuries to his jaw, and it always

28 stated "injury to jaw. Check left mandible", or

29 "injury to left mandible", or whatever it was, you know



1           what I mean. But nothing about the black eyes. That  
2           wasn't in Michael's file by the way. I don't know  
3           where I got that from.

4   199   Q.   Is this not one of the documents you got from  
5           Muckamore? 11:47

6           A.   No. If I'm not mistaken I sent to Waveney Hospital,  
7           years after the incident, and got the X-ray and I think  
8           that was along with the X-ray, perhaps. Because  
9           I remember when I got the X-ray it stated on it face  
10          injury or facial injury, or whatever it was. 11:47  
11          I remember that. And the first thing I said was that,  
12          you know, the notification of the accident, no black  
13          eyes on that, but this is the same day. You know.

14   200   Q.   So just to be clear, you've not only gone to Muckamore  
15           to get relevant documents, but you've also gone to 11:48  
16           Waveney Hospital as well?

17          A.   Yeah. Well I think it cost me £12 or £14 or something,  
18          you know.

19   201   Q.   But you've done that --

20          A.   But the authorities at Muckamore, they weren't worried 11:48  
21          about an X-ray being missing, do you know what I mean.  
22          So I got the X-ray and it says on it "facial injuries".

23   202   Q.   You've done this because you want to get to the bottom  
24           of what happened to your son; isn't that right?

25          A.   Yeah. Yeah. 11:48

26   203   Q.   So you've checked all of the possible sources of  
27           documentation?

28          A.   Well I did what I could, do you know what I mean?

29   204   Q.   Yes.

1  
2  
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29

Now, let's go on to the next document, and this is a referral letter from Muckamore Abbey Hospital and it is dated 8th June 1990, and it is from Conicar Villa. I think the wards used to be called villas at that stage, isn't that right?

11:49

A. Yeah. Yeah. Well Conicar was actually referred to as C1 as well, you know.

205 Q. Right. And this note says:

11:49

"Dear Doctor,  
Thank you for seeing this 10-year old mentally handicapped boy. He has a history of severe self-abusive behaviour and was noted to have significant bruising of his L-jaw this afternoon (no injury witnessed) but I suspect it is as a consequence self-injury.

11:49

On examination he has bruising and swelling over the L-side of the mandible. On palpation it appears tender and gives the impression of..."

11:50

-- and the next word is very difficult to decipher  
DR. MAXWELL: Crepitus.

206 Q. MR. DORAN: Sorry? Crepitus. Again, the expertise of the Panel is very helpful:

11:50

"The crepitus in the middle eighth of pressure. Buccal examination reveals nothing of significance apart from

1 a healing bite injury sustained days ago. His jaws  
2 appear to occlude normally.

3  
4 I would be grateful if you could X-ray the area  
5 concerned to exclude any fracture. In view of his 11:50  
6 behaviour I will give him 5mg of Diazepam prior to  
7 leaving Muckamore."

8  
9 So that's the referral for X-ray, essentially. Then on  
10 the next page, at page 24, one sees the radiologist's 11:51  
11 report.

12 CHAIRMAN: We probably don't need to read through each  
13 of these, I wouldn't have thought.

14 MR. DORAN: I'm not going to read through each and  
15 every document in the exhibits, Chair, but I do think 11:51  
16 it is important to look at these documents specifically  
17 because the witness wants to make the particular point  
18 about the absence of reference to the black eyes.

19 CHAIRMAN: All right. Yeah. Okay. I mean I think  
20 we can take it as read there is a complete absence of 11:51  
21 reference to black eyes in any of these documents.

22 A. Yeah.

23 MR. DORAN: Indeed.

24 CHAIRMAN: You can take it as you want to, but --

25 MR. DORAN: Yes. But as the Panel will see, the 11:51  
26 witness has taken great care to obtain the documents  
27 and present them to the Panel exhibited to his  
28 statement, and I just want to make sure that he is  
29 absolutely satisfied that he has the opportunity of

1           commenting appropriately.

2           CHAIRMAN: Sure. Yeah. Yeah. Absolutely.

3           A. I'm satisfied with your comment there.

4 207 Q. MR. DORAN: So the -- again, the X-ray report refers to  
5 no bony injury being identified. Now, I don't think 11:52  
6 I need to look in any detail, really, at the next  
7 document, because this relates to an entirely different  
8 incident; isn't that correct? It's at page 25 and it's  
9 "notification of accident", and it is dated -- well,  
10 the date reference is between 21st July and 23rd July 11:52  
11 '92.

12          A. Yeah.

13 208 Q. And that's an entirely different incident.

14          A. The difference between that and their notification of  
15 accident is that we know he received this injury at 11:52  
16 home. See when Michael is self-abusive, even with the  
17 two of us working with him --

18 209 Q. Yes.

19          A. You might stop nine punches, but he'll get through on  
20 the tenth one, and this was over a period of two or 11:53  
21 three days, constantly during the night, it is non-stop  
22 for 48 hours or 50 hours of whatever it was. But what  
23 I'm saying about that one is --

24 210 Q. That's what I wanted to ask you actually. You're  
25 drawing a contrast between that and the earlier 11:53  
26 document?

27          A. Contrast. But nowhere -- place of injury or:  
28  
29 "Place where incident happened."

1  
2 [Address] Michael's home. "Cause of injury", and it  
3 has "self-injurious behaviour". "Witnesses", his  
4 mother and myself. That's in total contrast to their  
5 notification of accident: Place: Unknown. Cause: 11:53  
6 Unknown. Witnesses: None.

7 211 Q. So you're saying, really, that the detail in this  
8 document contrasts with the absence of detail in the  
9 earlier document --

10 A. -- the absence of detail in the other one. 11:53

11 212 Q. Yes. The Panel has these documents and can consider  
12 that point carefully.

13

14 Then there's another form relating to that matter on  
15 page 26, which I don't need to look at. We've looked 11:54  
16 at page 27 already, which refers to the meeting with  
17 the Commission, and I'm now going to move on then to  
18 your raising of concerns with the Hospital.

19 A. Yeah.

20 213 Q. So we've talked about the incident. We've talked about 11:54  
21 you raising it with the Mental Health Commission.

22 A. Yeah.

23 214 Q. We've discussed the efforts that you made to obtain  
24 documentation. I just want to look now at the response  
25 of the Hospital when you raised the issue with them. 11:54

26 A. Can I just say? See these documents?

27 215 Q. Yes.

28 A. I haven't looked at these documents since  
29 fifteen years.

1 216 Q. Well I don't want you to worry about that.  
2 A. You know?  
3 217 Q. I am going to read through parts of them. You've got  
4 them in front of you. You'll have the opportunity to  
5 comment in due course. But there are some of them that 11:55  
6 I think it is important for me to refer to the Panel,  
7 and I want to do that.5?  
8 A. Yeah.  
9 218 Q. And this -- I think it is important that we look at the  
10 document on page 28, because this essentially sets out 11:55  
11 the Hospital's position on the issues that you raised  
12 about June 1990, and this is a letter to you and your  
13 wife from the business manager, and it is dated 28th  
14 September 1999.  
15 11:55  
16 Forgive me, Chair, I'm going to read through this  
17 document in its entirety for the record because this  
18 essentially represents the Hospital's position as  
19 regards the witness's concerns.  
20 CHAIRMAN: Right. 11:56  
21 MR. DORAN:  
22  
23 "I refer to the concerns which you raised about an  
24 incident involving Michael some years ago which  
25 we subsequently discussed at a meeting on 27th May 11:56  
26 1999. I have also received a call from the Eastern  
27 Health and Social Services counsel in respect of your  
28 concerns.  
29

1 I would at the outset wish to apologise for not having  
2 responded to you sooner. This was due to a  
3 misunderstanding on my part that your concerns were to  
4 be addressed through the visit and meeting with the  
5 Mental Health Commission.

11:56

6  
7 Prior to our meeting with you on 27th May 1999, I've  
8 gone through Michael's records looking specifically at  
9 1990. During that year there were a number of  
10 incidents where Michael had sustained injuries to his  
11 face. Whilst the causes of these injuries were not  
12 always directly observed, they generally resulted from  
13 his episodes of severe self-injurious behaviours which  
14 tend to be directed at his face.

11:56

15  
16 Following our meeting on 27th May 1999, I contacted the  
17 senior social worker. Michael's files at the relevant  
18 location did not, unfortunately, shed any further light  
19 on this incident. I then conducted a further review of  
20 Michael's nursing and medical records since his  
21 admission to hospital.

11:56

11:57

22  
23 I now feel that the incident to which you are referring  
24 was reported on 6th February 1991. The report for this  
25 incident records bruising and swelling to Michael's  
26 forehead. The medical and nursing records confirm  
27 these injuries. They also confirm a puffing and  
28 discolouration to his left eyelid which was noted on  
29 7th February 1991 but was felt to have arisen from the

11:57

1 bruising above it.

2  
3 The injury was first noticed in the morning when  
4 nursing staff got Michael out of bed. The night staff  
5 had not noticed anything untoward occurring during the 11:57  
6 night of 5/6th February. The cause and timing of the  
7 incident is recorded as "unknown" on the accident  
8 report. I have been unable to find any further  
9 information in his nursing or medical notes to indicate  
10 how this incident might specifically have occurred. 11:58  
11

12 I believe that this is the incident to which you  
13 referred as the records also indicate that Michael went  
14 home on a planned visit and that Michael's mother  
15 called Michael's general practitioner and had 11:58  
16 photographs taken of his face.  
17

18 I have spoken with the Charge Nurse at Conicar at that  
19 time and he has no recollection of this specific  
20 incident. I can, however, confirm that Michael was not 11:58  
21 on constant observation, though one-to-one nursing was  
22 implemented occasionally for short periods when he was  
23 particularly disturbed.  
24

25 Michael, as you know, had protective arm splints and a 11:58  
26 helmet. He did not, however, wear these continually,  
27 rather staff put them on him during periods of  
28 self-injurious behaviours.  
29



1 I am sorry that I have not been able to obtain any  
2 further information from his records on how exactly  
3 Michael's injuries occurred. I am sure you will  
4 appreciate that given the time scales involved it is  
5 extremely difficult to shed any more light on the issue 11:59  
6 now. It is implied from the records that the injuries  
7 were associated with his self-injurious behaviours.  
8 However, as the records indicate, the incident was not  
9 witnessed, it is impossible to prove or disprove this.

10  
11 I can appreciate fully your concerns that the severity  
12 of the bruising was in excess of what you normally  
13 associated with Michael's self-injurious behaviours.  
14 Equally, it is clear from Michael's notes that he was  
15 capable of causing significant self-harm to his face 11:59  
16 and head even when wearing protective gear.

17  
18 I know that Michael has recently left the Hospital and  
19 I hope his community placement is progressing well.

20  
21 If you would wish to discuss this matter further,  
22 please do not hesitate to contact me."

23  
24 So that's from the business manager to you and your  
25 wife in September 1999. 11:59

26 A. Yeah. Well I remember that meeting vividly. What  
27 happened was I had only started wearing glasses at the  
28 time --

29 219 Q. Now which night are you -- are you talking about the

1 February 1991?

2 A. No, I'm talking about this meeting.

3 220 Q. The meeting. Sorry. Yes.

4 A. With the business manager.

5 221 Q. Yes. Yes. 12:00

6 A. Myself and Michael's mother. And I had only started

7 wearing glasses several months before this.

8 MR. DORAN: Sorry, we need to use the pause function.

9 I think there was a name that the witness used that

10 we have not been using. 12:00

11 CHAIRMAN: Okay. Was it a place name?

12 MR. DORAN: It was the name of the business manager.

13 CHAIRMAN: Oh, I'm sorry. Right. I did miss that.

14 I will have to get the transcript and correct it.

15 222 Q. Again, Mr. Overend, please don't worry about this 12:00

16 because it does happen.

17 CHAIRMAN: Right. Yeah. We're ready to go ahead.

18 223 Q. MR. DORAN: We're ready to ahead. You were explaining

19 that you had a meeting with the business manager.

20 A. Yeah. Yeah. And I remember it vividly because as 12:00

21 I say I had only started wearing spectacles four, five,

22 six months before this for reading, and when myself and

23 Michael's mother went into the meeting with him, he had

24 a couple of documents there, and he's "there's the

25 document there", and I went "I have no glasses", and 12:01

26 I looked at it and I couldn't see it, and I says "look,

27 does it say anything on that about black eyes?", and he

28 says "no", and I says "well then that's not the

29 document I'm talking about. That's not the incident

1 I'm talking about." The other thing is, No. 5 on this  
2 here --

3 224 Q. Yes, and you have marked them, is that right? You've  
4 numbered the paragraphs?

5 A. Yeah. Yeah. No. 5, it is just -- 12:01

6 225 Q. Yes.

7 A.

8 "I believe this is the answer to which you refer as the  
9 records indicate...went home on planned visit..."

10 12:01

11 Blah, blah, blah.

12

13 "...general practitioner and had photographs taken of  
14 his face."

15 12:01

16 226 Q. Yes.

17 A. We didn't have photographs taken of his face and  
18 we didn't contact his general practitioner. But  
19 Michael's mother turned around and says that to try  
20 and, you know, "his doctor knows about this", you know. 12:02

21 227 Q. Yes.

22 A. "You better watch yourself", sort of speak. That's  
23 what she said that for.

24 228 Q. But you're saying that didn't actually happen in  
25 February 1991? 12:02

26 A. No, it didn't happen. No. It didn't happen. No, it  
27 didn't happen.

28 229 Q. But your wife may have said that that happened and  
29 that's why it appears on the record?

1           A.    Yeah.  No, no, she did say about that, "I got  
2                    photographs taken and I've went to his GP."  You see  
3                    Michael's GP at the time had actually a lot to do with  
4                    Muckamore, like Board of Trustees or something like  
5                    that.  Something along them lines. 12:02

6   230   Q.    Yes.

7           A.    You know he was -- and [Name] said it just to sort of,  
8                    you know, "you better be on your guard like.  Make sure  
9                    he's all right", you know.  "His doctor has photographs  
10                  of it and all", you know. 12:02

11   231   Q.    But basically the business manager is saying we think  
12                  you're confusing June 1990 with another incident that  
13                  occurred in February 1991?

14           A.    Absolutely no way.  Look, when I -- when this whole  
15                  thing started off, I went to the central library and 12:03  
16                  looked through the Irish News for that period.

17   232   Q.    Yes.

18           A.    And got a copy of the death insertions of the local man  
19                  who had died.  And he died on 7th June.  This incident  
20                  happened on 8th June.  My brother was in the house on 12:03  
21                  the 8th June to go around to this gentleman's house to  
22                  pay his respects, but he didn't know where the street  
23                  was because he wasn't from that area.  There's no doubt  
24                  about this whatsoever.

25           CHAIRMAN:  Could I just ask -- just to cut through this 12:03  
26                  a bit, could I just ask this:  was there only one  
27                  occasion --

28           MR. DORAN:  Sorry, Chair, the witness used his wife's  
29                  name again.  If we could just pause for a moment.

1 CHAIRMAN: Okay. Right. Can we pause the feed. Take  
2 it out.

3  
4 Could I just ask, was there only one occasion upon  
5 which photographs were taken of Michael's injuries when 12:04  
6 he came home, or were there two occasions when  
7 photographs were taken of Michael's injuries? How many  
8 times did you take photos of his injuries?

9 A. Just the once.

10 CHAIRMAN: Just the once. 12:04

11 A. The 8th June.

12 CHAIRMAN: Right. So the only photographs that you  
13 could have shown to the Hospital would have been those  
14 ones.

15 A. Yeah. Yeah. Michael's mother just says that to him. 12:04  
16 She didn't take photographs of him. But at that  
17 particular time Michael was coming home with marks on  
18 his face and his head, different bruises, all the rest  
19 of it. When we brought him back we asked the question:  
20 where did he get this mark from? Where did he get that 12:04  
21 mark from? There was never any answers. And I had  
22 forgot all about this. And a few months ago I was  
23 talking to my younger brother, my brother who had  
24 accompanied me to Muckamore to access his files. He  
25 turned around out of the blue and he says to me, he 12:04  
26 says, "I remember years ago I called into your house  
27 and you and your wife was talking about it, and you  
28 were sick to death of Michael coming home" -- Michael's  
29 mother said the same -- "you were sick of him coming

1 home with marks on him and nobody is giving us  
2 explanations for these", and my brother says to me, he  
3 says, "and one day you turned around to them and says  
4 "I demand to know where he got that mark from"." And  
5 then I was told five minutes later, when they spoke to 12:05  
6 somebody else, was he fell out of bed. I couldn't  
7 recollect this conversation, but that's what my brother  
8 told me several months ago.

9 233 Q. MR. DORAN: Yes. But I just want to come back to the  
10 point that the Chair raised about photographs. You 12:05  
11 have said there was only one occasion on which you took  
12 photographs of injuries, and that was June 1990?

13 A. Yeah. Yeah.

14 234 Q. But if you look back there at page 29 and the paragraph  
15 that you've referred to, where you say -- where the 12:05  
16 business manager said: "I believe that this is the  
17 incident to which you referred." Now he was talking  
18 about February 1991.

19 A. Yeah.

20 235 Q. 12:06  
21 "As the records also indicate that Michael went home on  
22 a planned visit and that Michael's mother called  
23 Michael's general practitioner and had photographs  
24 taken of his face."  
25 12:06

26 A. Yeah.

27 236 Q. But you're saying that that didn't happen?

28 A. No.

29 237 Q. But Michael's mother said that it happened?

1 A. Yes. Yes.

2 238 Q. And that explains why it appears on the record?

3 A. Yeah. Yeah.

4 239 Q. I see.

5 A. Michael's mother did say that. I remember her saying 12:06

6 it, do you know what I mean?

7 240 Q. Yes.

8 A. She says that because we were fed up with him coming

9 home with marks on his face and not being explained.

10 The other fact of the matter too is that Michael -- 12:06

11 which I didn't know at the particular time was that he

12 was -- something to do with Board of Trustees or Board

13 of Governors or something. Some position in Muckamore

14 Abbey Hospital.

15 241 Q. After this you had an exchange of correspondence with 12:06

16 the business manager, isn't that right?

17 A. Yeah.

18 242 Q. And you kept raising the issue and you kept asking for

19 further information.

20 A. Yeah. Yeah. 12:07

21 243 Q. I'm not going to go through that documentation today.

22 I just did want to ask you about one record that was

23 given to you, and that appears at page 40, and this is

24 the document that relates to periods of leave.

25 A. Yeah. 12:07

26 244 Q. And at the top of the document it says:

27

28 "Admitted to Conicar Ward on 5th May 1999. Temporary

29 transfer 1st May to 2nd May to hospital."

1  
2 Then it sets out the periods of leave, and the first  
3 one on that list is 7th September 1990 to 8th September  
4 1990.

5 A. Yeah. Yeah. 12:07

6 245 Q. But are you saying that that essentially is wrong?  
7 That's omits the earlier period of leave?

8 A. That's -- we had Michael home -- look, the business  
9 manager and different ones I can remember was, they  
10 actually tried to tell me that we hadn't got Michael 12:08  
11 home from Friday night to the Monday, because the  
12 record says home leave started on the 7th and 9th.  
13 We had Michael home the week before it as well.

14 246 Q. Yes.

15 A. We had Michael home the week after it. We had started 12:08  
16 taking Michael home in June.

17 247 Q. Yes.

18 A. The first time home was his brother's birthday and his  
19 mother's birthday. That's the first four hours we had  
20 him home. Then we were taking him home, as I said 12:08  
21 before, that it could have been four hours, could have  
22 been six hours. Then we tried an overnight stay and  
23 the overnight stay didn't work. Then we kept on  
24 bringing him back during the day and so on and so, and  
25 he ended up being home five days a week. 12:08

26 248 Q. Essentially you're saying that record is incomplete.  
27 It doesn't include the earlier visits?

28 A. No, it doesn't include. It's --

29 DR. MAXWELL: Can I just ask a question? Were the



1 periods of leave before September just for the day, and  
2 the overnight stays away from the ward started in  
3 September, or did he stay at home with you overnight  
4 in June?

5 A. No. Well, he stayed with us overnight in June when he 12:09  
6 had the black eyes. He was with us from the Friday  
7 night until Monday at lunchtime when I brought him back  
8 to Muckamore. But other than that, we had been taking  
9 Michael home -- we had just started the week before the  
10 injuries -- that was his first week home. Because 12:09  
11 there was nothing happening, and his mother turned  
12 around and we spoke a bit and said "we have to start  
13 taking him home. He has got a family here. He needs  
14 to know his family is here." So he was coming home for  
15 four hours, then six hours, then eight hours. Then 12:09  
16 we tried the overnight stay. The overnight stay didn't  
17 work on the first occasion. I'm not sure it worked on  
18 the second occasion. But then we eventually got him  
19 overnight, and then two days, three days, four days,  
20 five days. But it was a long, long drawn-out process. 12:10  
21 DR. MAXWELL: And when was that first occasion for the  
22 overnight stay when it didn't work? Do you recall when  
23 it was?

24 A. No, he was home overnight when he had the black eyes.  
25 But after that I couldn't recall the first time he 12:10  
26 actually stayed overnight, because it was a long  
27 drawn-out process, as I say. When it didn't work the  
28 first time -- we had to get somebody to -- I think it  
29 might have been a community nurse or something to drive

1 us back with Michael at midnight, I think it was,  
2 because of his behaviour, and I brought him back,  
3 I think it was midnight or something like that. So  
4 then we put that on the back burner for a wee while and  
5 just, you know, six hours, eight hours, ten hours. Got 12:10  
6 him early in the morning, brought him back up at night  
7 maybe and then just tried him -- but it was a very,  
8 very long drawn-out process. It would be hard to say,  
9 be honest with you. I can't really remember.  
10 DR. MAXWELL: Okay. That's fine. Thank you. 12:11  
11 249 Q. MR. DORAN: So you had a lengthy exchange with the  
12 Hospital and eventually then you make a complaint,  
13 isn't that right?  
14 A. Tried to make a complaint.  
15 250 Q. Right. Well let's have a look at what you actually 12:11  
16 did. Your letter appears at page 41, and I think you  
17 have -- you have written "Official Complaint" at the  
18 top.  
19 A. Yeah.  
20 251 Q. It is dated 26th March 2001. I'm not going to bring 12:11  
21 you through all of this, but I do want to ask you about  
22 parts of it. It is:  
23  
24 "Dear business manager,  
25 I wish to make an official complaint into the facial 12:11  
26 injuries my son Michael sustained in June 1990."  
27  
28 And then you go through a lot of detail. As I say, I'm  
29 not going to go through it all. If you look at the

1 next page, page 42, there is something I want to ask  
2 you about. You say halfway down the page.

3  
4 "We were never told at that time that Michael was going  
5 to hospital for an X-ray or he had actually been to 12:12  
6 hospital for same. It wasn't mentioned during above  
7 phone call nor was it mentioned when we brought him  
8 back to MAH on Monday, 11th June 1990."

9  
10 Just on that point, so the conversation that you 12:12  
11 described your wife having with the Hospital, are you  
12 saying there was no reference in that conversation to  
13 him having been X-rayed? So the Hospital didn't tell  
14 you that he had been X-rayed?

15 A. No. No. I didn't know Michael had been for an X-ray. 12:12  
16 I found out years later. I think it was when I started  
17 communicating with the business manager.

18 252 Q. Yes. And just going --

19 A. But on that day neither Michael's mother nor myself  
20 were told he was away for an X-ray or that he was going 12:13  
21 for an X-ray.

22 253 Q. Just going to the end of your letter there you say, "As  
23 I stated" -- this is on page 44:

24  
25 "As I stated earlier in this letter, I want to make 12:13  
26 this an official complaint to find out once and for all  
27 exactly what happened to my son."  
28  
29

1           A.    Yes.

2   254   Q.    Yes.  Then -- and I want, Chair, to read this letter in  
3           because this is the response on behalf of the Trust to  
4           the complaint made by the witness.  It appears at  
5           page 45, and it is dated 6th April 2001: 12:13  
6

7           "Dear Mr. Overend,  
8           I refer to your letter of 26th March 2021 indicating  
9           your wish to make an official complaint on the facial  
10          injuries your son Michael sustained in June 1990. 12:13  
11

12          I would wish to advise you that there is a time limit  
13          for making a complaint which is normally within  
14          6 months of the event, or within 6 months of the  
15          complainant becoming aware of the cause for a 12:14  
16          complaint, or 12-months of the date of the event,  
17          whichever is the earlier.  
18

19          There is discretion for this time limit to be extended  
20          where it would be unreasonable in the circumstances of 12:14  
21          a particular case for the complaint to be made earlier  
22          and where it is thought possible to investigate the  
23          facts of the case.  I am quite clear that neither of  
24          these two requirements apply in this case.  
25 12:14

26          I would point out that the Trust has over the last year  
27          made considerable efforts to facility all your queries  
28          and requests for information in respect of facial  
29          injuries sustained by Michael in the early 1990s.  This

1 included investigation by myself of the incident  
2 involving Michael on 8th June 1990, this involved going  
3 through Michael's medical and nursing records and  
4 speaking with the charge nurse at the time and the then  
5 Assistant Director of Nursing Services who wrote to the 12:14  
6 Director of Nursing Services about the incident of  
7 8th June 1990. Neither of these gentlemen were able to  
8 throw any further light on the incident then had been  
9 in their original reports, nor indeed unsurprisingly  
10 had either of them any recollection of this specific 12:15  
11 incident.

12  
13 You personally have been given full access to Michael's  
14 clinical records, including photocopies of any extracts  
15 which you requested. I do not believe there is 12:15  
16 anything more which we can reasonably do in respect of  
17 providing you with any further information of or  
18 explanation of this incident."

19  
20 Then on the following page there are handwritten notes 12:15  
21 that I think were handwritten notes on the reverse of  
22 the letter by yourself; is that correct?

23 A. Yeah, that's my writing, yeah.

24 255 Q. Then the letter, the concluding part of the letter is  
25 on page 47, and it reads: 12:15

26  
27 "You have under the complaints procedure a right to  
28 complain about this decision not to waive the time  
29 limit. Should you wish to do so then please write to

1 the Director of Planning Contracts and Information,  
2 North and West Belfast Health and Social Services  
3 Trust. "

4  
5 And it gives the address. You went on then to write to 12:15  
6 that individual, isn't that correct?

7 A. Yeah.

8 256 Q. And if one goes then to page 50, one finds the response  
9 from the Director of Planning and Contracts dated  
10 19th June 2001, and basically the director says that 12:16  
11 he would:

12  
13 "...concur with the business manager that the grounds  
14 for exercising discretion to extend the time limit  
15 would not be met in this case. The facilitation of 12:16  
16 your numerous requests for information was made in the  
17 context of providing information and access to health  
18 records, not in response to a formal complaint.  
19 Notwithstanding the Trust's rejection of the complaint  
20 on the basis of time limit, I do not believe that there 12:16  
21 is anything more we could reasonably do in respect of  
22 providing you with any further information or  
23 explanation. "

24  
25 So really he is turning down your request. 12:17

26 A. As they did.

27 257 Q. Yes. There's a reference then in the final paragraph,  
28 and I just wanted to ask you about this, to a further  
29 right to complain to the complaints convenor at the

1 Eastern Health and Social Services Board.

2 A. Yeah.

3 258 Q. I wonder did you ever go down that route?

4 A. We did, yes. Yeah. Yeah.

5 259 Q. Can you remember what happened? 12:17

6 A. Well what happened was, I went to meet these people,

7 and I remember one particular incident where they says

8 "we're going to send to Muckamore, get the details sent

9 to us", et cetera, et cetera, et cetera. Then when

10 I was back down in the office they turned around and 12:17

11 the guy had the details there, but he hadn't even got

12 the letter of complaint, that one that you just

13 referred to, 26th March, that wasn't there. And there

14 was five or six other letters that wasn't even there.

15 This same person -- I was going to call him "gentleman" 12:18

16 there -- this same person turned around and stated to

17 me that "even if you've got photographs, even if you've

18 seen the photographs of Michael's injuries, it will be

19 put down to poor record-keeping." That's what his

20 words were. 12:18

21 260 Q. So, basically, Mr. Overend, you went --

22 A. And I know his name, you know.

23 261 Q. You went as far as you could go in exploring this?

24 A. Of course I did. Of course I did, yeah.

25 262 Q. And you didn't get the answers that you were seeking? 12:18

26 A. No. I still haven't got it. As far as I'm concerned,

27 Belfast Trust apparently made an apology a couple of

28 weeks ago. How can they apologise for something they

29 haven't even admitted it happened. You know. So their

1 apology rings very hollow with me, personally.

2 263 Q. well, you've made that point. I just wanted to ask you  
3 about how Michael is. First of all, before I ask you  
4 about how Michael is getting on now, I just wanted to  
5 ask you about his discharge from Muckamore. 12:19

6 A. Yeah.

7 264 Q. I think you explain in your statement that he was  
8 supposed to leave earlier than he actually did leave;  
9 is that right?

10 A. He was supposed to leave in April, yeah. 12:19

11 265 Q. And he ultimately left in August?

12 A. August. The end of August.

13 266 Q. He went to supported living accommodation then; is that  
14 right?

15 A. well you see, the big delay was they did not send their 12:19  
16 staff up to be trained at the Rathmullan ward.

17 267 Q. This is United Response you're referring to?

18 A. Yes. That's correct, yeah. They did not send -- it is  
19 down in the information that I made in that other  
20 statement. 12:19

21 268 Q. But your dissatisfaction was with United Response as  
22 opposed to with Muckamore; is that correct?

23 A. Yeah. The staff in Rathmullan were very annoyed about  
24 it too. It states -- there's a review -- there's a  
25 multidisciplinary meeting around that time and the 12:20  
26 nurses in Rathmullan were disgusted and annoyed that  
27 they did not come up. But some of them staff was  
28 actually doing it on a voluntary basis. They weren't  
29 getting paid for showing them the ropes, so to speak,



1 on some occasions, as far as I'm aware. They did not  
2 send their staff up. And on one occasion they sent one  
3 member of staff up and they got a bit of training, but  
4 they left a couple of weeks later. So they would have  
5 to repeat that and all the rest of it. They 12:20  
6 just didn't send them up. Do you know. And we were  
7 going to pull the plug on the whole move, Michael's  
8 mother and myself. It's down in black and white as  
9 well.

10 269 Q. But in terms of the move, you were dissatisfied with 12:20  
11 this other --

12 A. Of course we were.

13 270 Q. -- it was United Response that you were dissatisfied 12:21  
14 with. It wasn't the staff at Muckamore as such?

15 A. Yeah. And I was dissatisfied a few years ago. The 12:21  
16 Chief Executive was on the TV stating that people  
17 should get out of Muckamore, they need to be made  
18 accountable, and this and that and all the rest. My  
19 son was kept in Muckamore because they didn't do what  
20 they were supposed to do. 12:21

21 271 Q. Well I want to come back now just to ask you how  
22 Michael is getting on now. What kind of accommodation  
23 is he living in now?

24 A. He is actually in a nursing facility now quite close to 12:21  
25 where we live. He's back in his own community. He was  
26 in the Hospital -- he was brought into Hospital  
27 26th November last year. He had aspiration pneumonia.  
28 He was two stone underweight. Had been for a long  
29 time. I made complaints about it and rocked the boat,

1 as you do. There's actually a bit of action happening  
2 now on it. But I would say he's quite safe where he  
3 is.

4 272 Q. What support is there in place for him now?

5 A. Well, he's one-to-one and 24-hours. The staff up 12:22  
6 there, they're on 2 hours, 2 hours, 2 hours, and it's  
7 maybe a good thing because I've had incidences in the  
8 past where staff are caught sleeping while they're  
9 supposed to be looking after Michael, and if Michael  
10 had a seizure when they were sleeping, Michael could be 12:22  
11 dead. Do you know what I mean. So I'm quite happy  
12 about that, and my family is happy about it. We're  
13 just glad we've got him out of the accommodation where  
14 he was in, because whether Belfast Trust like it or  
15 not, my son's human rights were being abused up until 12:22  
16 the day he went into hospital on 26th November last  
17 year. They sat on their hands. Did little or nothing  
18 about it. I'm stating under Articles 3, 8 and 9 of the  
19 Human Rights Act, my son is a victim of human rights  
20 abuse as well. 12:22

21 273 Q. Well, Mr. Overend, you have come and you have spoken on  
22 your son's behalf today. I've asked you a lot of  
23 questions and I have brought you through a lot of  
24 documents that you helpfully provided to the Inquiry.

25 A. I'm just glad I kept my composure. 12:23

26 274 Q. I want to say thank for coming to give your evidence.

27 A. Thank you.

28 MR. DORAN: Those are all the questions that I have for  
29 you, but it may be that the Panel members will want to

ask you some questions just now.

END OF DIRECT EXAMINATION

CHAIRMAN: I've just got a few, and then I'll turn to my colleagues.

12:23

MR. OVEREND WAS THEN QUESTIONED BY THE INQUIRY PANEL AS FOLLOWS

12:23

275 Q. CHAIRMAN: I just want to ask you about the incident about the medication, when, in your statement, you talk about Michael coming home and he was doped up. Do you remember that?

A. Yeah. Yeah. I remember it fiercely.

12:23

276 Q. You said he was like a zombie, and it was in 1995, and you said "this went on for several weeks. We'd had enough."

A. Yeah.

277 Q. So was he coming home from hospital at that time every weekend he was doped up? How did it work?

12:23

A. No. No, at that particular time we were taking Michael home maybe two days or three days a week. It could be Monday to Wednesday, it could have been Tuesday to Friday or something like that.

12:24

278 Q. Right.

A. And then it wasn't very long after that we actually got him into school. He started school that same year I think was it, if I'm not mistaken. But the way it

1           worked was we went up to Muckamore and brought him  
2           home, and then we brought him back to Muckamore.

3   279   Q.    Sure.

4           A.    But when we collected him, you know, he could have  
5           maybe appeared as if he was sleeping, or he was tired   12:24  
6           or something. Do you know, he might have been awake  
7           all night. But when we got him home his head was down.

8   280   Q.    How long, how long did that period go on for when you  
9           thought he was being --

10          A.    I don't know. It could have been three, it could have   12:24  
11          been four, it could have been five weeks. I'm not  
12          sure. But it went on too long.

13   281   Q.    Right. How did it stop? Why did it stop?

14          A.    Well I'm not sure whether Michael's mother was with me.  
15          It usually took the two of us to bring him back. So   12:25  
16          more than likely she would have been there. We went  
17          back to the ward and turned around and just says "look,  
18          we're not taking him home no more in this state. He  
19          doesn't know who he is. He doesn't know where he is.  
20          He doesn't know his own family", you know.   12:25

21   282   Q.    Right.

22          A.    You could have brought him and put him anywhere. He  
23          didn't -- that went on for days.

24   283   Q.    Did things get better after that?

25          A.    Well after we says we weren't taking him home, I think   12:25  
26          within a couple of weeks we get phone calls "oh,  
27          we've looked at his medication, we've done this, we've  
28          done that." But as I say, if his consultant  
29          psychiatrist had of been there at the time -- I know

1 over the years sometimes he might have took a year out  
2 to do something else, but if he was there there was no  
3 way he would have been overmedicated like that, because  
4 he was an absolute gentlemen and he worked very hard  
5 for Michael, you know. There's no way he would have  
6 sanctioned that. 12:26

7 CHAIRMAN: All right.

8  
9 END OF QUESTIONING BY THE INQUIRY PANEL

10  
11 CHAIRMAN: Nothing else? 12:26

12 MR. DORAN: Nothing further, Chair.

13 CHAIRMAN: All right. Mr. Overhead, it just leaves me  
14 to thank you very much for coming to talk to us and  
15 tell us about Michael. We're very grateful. It has  
16 been very helpful. 12:26

17 A. Thank you. Thank you for listening. Thank you.

18 CHAIRMAN: Thank you very much indeed. If you'd like  
19 to go now with the Secretary to the Inquiry.

20 A. Thank you very much. 12:26

21 CHAIRMAN: All right.

22  
23 THE WITNESS WITHDREW

24  
25 CHAIRMAN: All right. I think that completes the  
26 evidence that we've got for today? 12:26

27 MR. DORAN: Yes.

28 CHAIRMAN: Indeed, it completes this period of sitting  
29 in terms of hearing evidence. So, first of all, I just

1 wanted to thank all the Inquiry staff, the  
2 stenographers, the AV technicians, for making the last  
3 two weeks, in fact, run so smoothly. Because not all  
4 public inquiries get off to such a smooth start, and  
5 I think it is worth noting that it is down to their  
6 work that that has happened.

12:27

7  
8 I want to thank all the core participants for their  
9 courtesy during these hearings and at least generally  
10 observing the rules about telephones and noises off.  
11 So, thank you all.

12:27

12  
13 We will be publishing the dates of the resumption of  
14 our hearings, but they will not be resuming, as you  
15 know I think, before 5th September. So it just leaves  
16 me to wish everybody a good break, for those of you who  
17 are taking a break from work, and we will see you back  
18 in September.

12:27

19  
20 Could I please ask for -- the Inquiry is not  
21 functioning next week at all. There will be no admin  
22 staff. So if you do send a letter into the Inquiry  
23 there will be a week's delay, at least.

12:27

24  
25 Could I ask that the room, and indeed the floor, is  
26 cleared by 1:00 o'clock today, because we have staff  
27 training that has to take place on this floor. So  
28 thank you very much indeed, and we'll now rise. Thank  
29 you, Mr. Doran.

12:28

1 MR. DORAN: Thank you, Chair.

2  
3 THE INQUIRY WAS THEN ADJOURNED TO MONDAY, 5TH SEPTEMBER  
4 2022