

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

HEARD BEFORE THE INQUIRY PANEL  
ON TUESDAY 20TH JUNE 2023 - DAY 51

51

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I N D E X

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1           THE INQUIRY RESUMED AT 10:00 A.M. ON TUESDAY, 20TH JUNE  
2           2023 AS FOLLOWS:

3  
4           CHAIRPERSON:   Yes.

5           MR. MCEVOY:   Good morning, Chair, good morning, Panel.   10:05  
6           Today we resume with a section of patient experience  
7           evidence, and the Inquiry will hear from the mother of  
8           P77 and then, later in the day, P77's aunt. For the  
9           purpose of proceedings, P77's mother is content to be  
10          known by her first name, Dawn. She is content for P77   10:05  
11          to be known by his first name, which is Timmy, Timothy.  
12          Later in the day then, his aunt is happy to be known by  
13          her first name, which is Catherine.

14          CHAIRPERSON:   All right. We'll see how we go  
15          obviously. I've met both witnesses very briefly this   10:06  
16          morning, but choose a spot around 11.15 and let's get  
17          started.

18          MR. MCEVOY:   I should say the witness is going to be  
19          accompanied by her family liaison officer, who is known  
20          to the Inquiry as FLSW2.   10:06  
21

22           P77'S MOTHER, DAWN, HAVING BEEN SWORN, WAS EXAMINED BY  
23           MR. MCEVOY AS FOLLOWS:

24  
25       1   Q.   MR. MCEVOY:   Good morning, Dawn. You are very welcome   10:07  
26           to the Inquiry. We met earlier. As you know, my name  
27           is Mark McEvoy, I am one of the Inquiry counsel.

28  
29           Dawn, in the file before you is, hopefully, a copy of a

1 witness statement which you have prepared for the  
2 Inquiry. You recognise it?

3 A. I do, yes.

4 2 Q. It comprises, on my count anyway, about 147 pages,  
5 including exhibits. If I could ask you just to look at 10:08  
6 the fifty-third page of the bundle.

7 A. Right.

8 3 Q. You'll see, hopefully, your signature.

9 A. Yes.

10 4 Q. All right. Just then for procedural purposes, are you 10:08  
11 content then to adopt that statement and the exhibits  
12 as the basis of your evidence to the Inquiry?

13 A. Very much so.

14 5 Q. Well, Dawn, what I am going to do now is read out that  
15 statement. There are some parts which I'll summarise 10:08  
16 which are maybe of less relevance or relate less  
17 specifically to Muckamore and to your son's experiences  
18 there. There are some others, which, for legal  
19 reasons, it is more appropriate for me to summarise.  
20 I'll indicate where those junctures are when we arrive 10:08  
21 at them, okay?

22

23 I'll begin just by indicating you have made the  
24 following statement for the purpose of the Muckamore  
25 Abbey Inquiry. Your connection with Muckamore is that: 10:08  
26

27 "My son, Timmy, is a patient in Muckamore Abbey  
28 Hospital. The relevant time periods I can speak about  
29 are from November 2003 to the current day. Timmy is

1 still a detained patient in Muckamore. I attach  
2 photographs of Timmy at exhibit 1."

3  
4 Perhaps if our team can bring up maybe page 56 and page  
5 57 in the statement. We will continue just for the 10:09  
6 time being.

7  
8 "My late husband, Mervyn, and I had three children.  
9 Graham is the eldest, born in 1993. Timmy is my middle  
10 child, born 1994. My youngest child is Ian, born 1995. 10:09  
11 Mervyn and I separated in 2002 and divorced in 2004."

12 CHAIRPERSON: Sorry, hold on a second. Can we rotate  
13 that? We can carry on.

14 MR. MCEVOY: At 57, there may be a picture of Timmy at  
15 present, as I understand it. 10:10

16 CHAIRPERSON: Okay. Thank you.

17 MR. MCEVOY: "Mervyn and I separated in 2002 and  
18 divorced in 2004. Mervyn died on 1st June 2017.

19  
20 Timmy was born on Jubilee Maternity section of the 10:10  
21 Belfast City Hospital. He was a normal birth and Timmy  
22 was a very quiet baby. He was easily entertained. He  
23 was walking when he was around one years old. By the  
24 time he was in and around 16 months old, he had would  
25 have some words such as "mama", "dada" and "milk". He 10:10  
26 got the MMR vaccination at Finaghy Health Centre,  
27 Belfast, when he was in and around 16 months old, and  
28 after that he stopped talking. This may have been a  
29 coincidence as opposed to Timmy stopping talking as a

1 result of receiving the vaccination.

2  
3 Just before he was two years old, I started to notice  
4 that Timmy was not reacting to unexpected sounds. I  
5 took him to see his general practitioner, who is a 10:11  
6 wonderful doctor. He made a referral to Royal Victoria  
7 Hospital in Belfast for tests to be carried out to  
8 assess his hearing. It was a male consultant in the  
9 Audiology Department of the Royal Victoria Hospital;  
10 however, I do not recall his name. I recall taking 10:11  
11 Timmy to the hospital and going into a large room where  
12 Timmy was put through a lot of hearing tests. I do not  
13 recall the date. I recall the tests being quite  
14 intensive, like clapping behind him and various beeping  
15 noises. Timmy made some reaction to the sounds. The 10:11  
16 verdict of the tests was that Timmy had excellent  
17 hearing. This was communicated to me with a meeting  
18 with the consultant at RVH. I do not recall the date  
19 of the meeting. I remember that this devastated me  
20 because if Timmy's hearing was not the problem, then I 10:11  
21 was wondering what was wrong with him. This consultant  
22 then referred Timmy to a doctor." Then you name the  
23 doctor.

24  
25 "In around the same time as Timmy had the hearing 10:12  
26 tests, my late father happened to be reading an article  
27 in a newspaper referring to autism. He asked me to  
28 read the article and he told me that he thought Timmy  
29 had autism. After reading the article, I also thought



1 Timmy had autism. I made an appointment with Timmy's  
2 general practitioner and he also pointed me in the  
3 direction of..." that doctor to whom the consultant  
4 referred you.

5  
6 "This doctor worked with Mencap at Segal House, which  
7 was on Annadale Avenue in Belfast. I was persistent in  
8 my pursuit of that doctor and I eventually got a  
9 meeting with her. I cannot remember where the meeting  
10 was or the exact date but it was in and around the 10:12  
11 summer of 1996. Timmy was at this first meeting with  
12 him and he was not reacting to the toys in the room.

13 It was quite emotionally upsetting for me. The doctor  
14 and I had a few subsequent meetings on our own without  
15 Timmy where I gave her information about Timmy's 10:13  
16 ability and behaviours. She gave me a letter which  
17 diagnosed Timmy with having a severe learning  
18 disability with autistic tendencies. I cannot locate a  
19 copy of the letter. He was two years old at this time  
20 and that doctor referred Timmy to Segal House in 10:13  
21 Belfast in September 1996."

22 Okay, Dawn. You then go on to discuss arrangements  
23 around Timmy departing on his educational journey. In  
24 fairness then, I think I would summarise by saying that  
25 Timmy went to Torbank School, and that was in September 10:13  
26 1998. He was there until he was 17 years old.

27  
28 "Timmy was happy at Torbank School. Timmy used picture  
29 exchange communication, or PEC cards, to communicate.

1 These are picture cards which Timmy points to to tell  
2 where he wants to go or what he wants to do.  
3 Timmy grew to be an adorable young gentlemen who does  
4 not speak. When he was nine years old, however, he  
5 became aggressive. I remember in the summer of 2003, I 10:14  
6 was at home with Timmy and my dad was there. Out of  
7 nowhere he grabbed me with what I can only describe as  
8 adrenaline strength by the chest, and bit me on my  
9 head, my arms and the back of my right hand. My dad  
10 tried to intervene but I asked him to call 999. Timmy 10:14  
11 was in a complete frenzy. Whilst we waited for the  
12 ambulance for around an hour and 30 minutes, my other  
13 son, Graham, happened to telephone me and when I was  
14 telling him what was happening, he suggested that I get  
15 Timmy's heavy blanket and put it round him. That 10:14  
16 instantly worked to calm Timmy down and he was calm by  
17 the time the ambulance arrived.  
18  
19 "The occupational therapist from Torbank School lived  
20 across the road from us at the time, and I remember 10:14  
21 that the ambulance driver asked her if she would come  
22 in the ambulance with Timmy and me. She said she could  
23 not. The ambulance took us to the Royal Belfast  
24 Hospital for sick children. Timmy was not being  
25 treated as a priority at the hospital because he was 10:15  
26 calm. He started to become agitated again due to the  
27 long wait, and I walked him around the hospital to try  
28 and calm him down again. Timmy tried to grab me again  
29 and two women came to my aid, breaking Timmy and I away

1 from each other. I did not know who these women were;  
2 they were members of the public. One of the doctors  
3 then saw us. I do not remember the name of the doctor.  
4 I remember that the doctor told me to leave the room as  
5 she seemed to be indicating that I was escalating  
6 Timmy's behaviour. Timmy did not receive any  
7 treatment, and we left the hospital that evening and he  
8 went to school the following day as usual.

10:15

10 "On the day after Timmy attended hospital and I was at  
11 school, I received a call from one of Timmy's teaching  
12 assistant's at Torbank - I do not remember which  
13 teaching assistant it was - asking me to collect Timmy  
14 as his behaviour had escalated. He advised me that  
15 Timmy was grabbing out and trying to bite. I collected  
16 him from school and took him home. He went to school  
17 again the following day. A few weeks later I received  
18 a call from Timmy's teacher at the school - I do not  
19 recall his name - to say that I had to collect Timmy  
20 due to his aggressive behaviour. Again, he was  
21 grabbing out and trying to bite. I collected him and  
22 brought him home and he went to school the next day. A  
23 few weeks after that, I received another call from the  
24 school, again advising that Timmy was being aggressive.  
25 I collected him and took him home. However, on this  
26 occasion his aggressive behaviour continued towards me.

10:15

10:16

10:16

10:16

27  
28 "I called Timmy's general practitioner at the health  
29 centre and he came out to our house. I agreed with the

1 doctor that Timmy would going into Muckamore on a  
2 voluntary admission basis as I could not cope with  
3 Timmy's behaviour. Timmy's teacher at Torbank School  
4 and a social worker were also in my house at the time  
5 to support me due to Timmy's escalating behaviour. The 10:17  
6 teacher and social worker drove Timmy and me to  
7 Muckamore. Timmy was admitted to the Coniker Ward.  
8 This was in September 2003, and he was there for nine  
9 months until he was discharged on a staggered basis.  
10 He was finally discharged in August 2004. 10:17

11  
12 "Dr. H49 was the consultant in charge of Timmy at this  
13 time. She was sharp and abrasive. She never smiled.  
14 I remember attending the Christmas party in Muckamore  
15 in 2003, and I was dancing and she never even smiled 10:17  
16 when I caught her eye. Timmy was in Muckamore  
17 full-time upon his admission in September 2003 and he  
18 was not attending school. However, after a while, he  
19 was allowed home one or two nights per week, except for  
20 when I took my other two boys on holiday for a 10:18  
21 fortnight. I believe that he was diagnosed with  
22 epilepsy when in Muckamore on this occasion. I do not  
23 think he received any medication when he was in  
24 Muckamore at this time. He went in with such  
25 aggression and came back home again "normal", just like 10:18  
26 he was before the aggressive behaviour started.

27  
28 "I remember Dr. H49 called an admission meeting. My  
29 late husband did not want Timmy to be in Muckamore. I

1 remember Dr. H49 told my late husband that there was a  
2 definite need for Timmy to be in Muckamore. My late  
3 husband never accepted that Timmy had autism. I  
4 visited Timmy every other day. I remember on one visit  
5 Timmy attacked me. I started to cry and staff took him 10:19  
6 away. I do not recall the date of the visit or the  
7 staff member who intervened. I attended a few meetings  
8 with staff at Muckamore when Timmy was in on this  
9 occasion. There was always a lot of people at these  
10 meetings, and Dr. H49 was always dismissive of my 10:19  
11 contribution to the meeting. Dr. H49 glazed over and  
12 was disinterested in what I had to say. She did not  
13 want to know any background from me as Timmy's mother.  
14 I was telling her what were normal behaviours for Timmy  
15 and she would not listen to me. 10:19

16  
17 The building where the meetings took place was really  
18 old, at the back of Muckamore. It was horrible. It  
19 was called Coniker. Prior to Timmy attending  
20 Muckamore, the GP and I put Timmy on a dairy free and 10:19  
21 gluten free diet to try and ease his aggression.  
22 Apparently some people have a condition called leaky  
23 gut, and this can cause chemical reaction in the brain.  
24 The diet was to keep Timmy calm and to sleep better.  
25 The GP admitted that this diet seemed to be working. I 10:20  
26 explained to the staff at Muckamore that Timmy was on  
27 this diet. I was advised by staff at Muckamore - I do  
28 not recall their names - that Timmy was grabbing food  
29 from other children's plate and that he therefore was

1 eating dairy and gluten and was not sick and did not  
2 have diarrhea. That was the end of that diet as the  
3 staff in Muckamore were not following it.

4  
5 "Timmy was discharged in 2004 and he went back to 10:20  
6 Torbank School in September 2004. The aggression had  
7 gone and all was normal again. Timmy attended respite  
8 care in Lindsay House Children's Home, which provides  
9 short break respite care for children aged five to 18  
10 years of age, located in Dunmurry. He attended this 10:20  
11 respite care from in and around 2004 to in and around  
12 2011. Unfortunately during one of his visits to  
13 Lindsay House, he became aggressive whilst on a visit  
14 to Dunmurry village, and a member of the public, who  
15 apparently worked in the army, pinned him down to the 10:21  
16 ground until he calmed down. I received a call from a  
17 member of staff from Lindsay House to tell me about  
18 this incident, which was sometime in the spring of  
19 2011. I did not know what to do at the time, I was in  
20 a bit of a panic as Lindsay House told me that they 10:21  
21 could not keep Timmy. I called round a few places, I  
22 do not remember where specifically, but I recall that I  
23 eventually called Muckamore and spoke to a man, H12,  
24 who worked in the day care centre at Muckamore. He was  
25 very reassuring, calm and practical and had plenty of 10:21  
26 time to talk the situation through with me. He told me  
27 to allow Timmy to stay overnight in Lindsay House that  
28 evening as planned and he should be calm again in the  
29 morning, which he was. Timmy did not go back to

1 Lindsay House after that incident as Lindsay House  
2 refused to allow him back due to the severity of his  
3 behaviour that day.

4  
5 "There were no further serious incidents of aggression 10:22  
6 with Timmy up until May 2011. My children all loved  
7 their grandad; they saw him every day. My dad was  
8 diagnosed with cancer and died on his 70th birthday on  
9 26th April 2011. On the day of the funeral, Timmy was  
10 a perfect gentleman, he was very calm. I remember 10:22  
11 thinking he was so handsome. A few days after the  
12 funeral, I was in my mum and dad's house and there were  
13 biscuits in the drawer. Timmy wanted a biscuit but I  
14 told him he was not allowed one, and he grabbed me on  
15 my chest. He was so intense. There was a darkness in 10:22  
16 his face and his pupils were dilated. I was able to  
17 calm Timmy down using a low voice and no eye contact.

18  
19 "In July 2011, due to Timmy's escalating behaviour, a  
20 social worker in the Belfast Trust introduced my sister 10:23  
21 Catherine and I to a type of distress reaction  
22 management training called MAPA. This is a collection  
23 of skills that helps a person to become calm and regain  
24 control of a difficult situation as soon as possible.  
25 The social worker arranged for Catherine and I to have 10:23  
26 MAPA training in Holywood, County Down.

27  
28 "I recall one serious attack on me when Timmy was 17  
29 years old. He grabbed me by the chest and pinned me up

1 against the wall in the kitchen in our home for 15  
2 minutes. I was so scared. I avoided eye contact for  
3 the full 15 minutes. He eventually laughed and walked  
4 away. On another occasion when Timmy was also around  
5 17 years old, he grabbed Ian, my youngest son who was 10:23  
6 16 years old at the time, on his chest in his bedroom.  
7 Ian told me that he was able to hold Timmy off without  
8 hurting him but he did not have the strength to force  
9 him away. Ian called me to come upstairs, and Ian was  
10 able to get away and ran out of the bedroom and Timmy 10:24  
11 did not follow him. Later on that day, Timmy  
12 approached Ian and stroked him on the cheek as if he  
13 was apologising.

14  
15 From May 2011 I started receiving calls from Torbank 10:24  
16 School to come and collect Timmy due to his aggressive  
17 behaviour. Timmy was grabbing clothes of the staffs'  
18 chests and trying to bite them. On the first occasion  
19 I did collect Timmy and brought him home, I decided from  
20 previous experience that if this ever happened again, I 10:25  
21 would call 999. It did happen again, and on this  
22 occasion I rang 999 and asked for the PSNI and an  
23 ambulance. This was in September 2011. I met the PSNI  
24 and the ambulance drivers at Torbank School together  
25 with the school principal. It took from 2:00 p.m. to 10:25  
26 9:00 p.m. to get Timmy admitted to the Iveagh Centre on  
27 Broadway, Belfast. After completing the admission  
28 forms, I got home around midnight. It was one of the  
29 worst experiences of my life. I could not get a doctor



1 to come out to detain Timmy. Eventually, I got through  
2 to a doctor from a general practitioner's practice on  
3 the Ormeau Road, Belfast, to attend Torbank School and  
4 he detained Timmy under the Mental Health (Northern  
5 Ireland) Order 1986. Timmy was admitted to the Iveagh 10:26  
6 Centre. I remember a female physiologist - I cannot  
7 remember her name - who cared for Timmy in the Iveagh  
8 Centre. She was very good with Timmy. I remember her  
9 telling me that I had to give up day to day  
10 responsibility for caring for Timmy. I found this 10:26  
11 supportive and reassuring. She told me that I had to  
12 have trust in the people who were caring for Timmy in  
13 the Iveagh Centre because I was unable to look after  
14 him myself at home, which was true.

15 10:26  
16 "I had regular meetings with staff caring for Timmy  
17 when he was in the Iveagh Centre. I felt I was kept  
18 well informed and Timmy had a positive experience in  
19 the Iveagh Centre. I only received minutes of the last  
20 meeting that I had with staff in the Iveagh Centre, and 10:26  
21 I had to ask for those from the receptionist. I was  
22 not given minutes of any other meetings. I never saw  
23 Timmy's bedroom in the Iveagh Centre but I was happy  
24 with the treatment that Timmy received at the Iveagh  
25 Centre. There was a behavioural therapist and a nurse 10:27  
26 - I cannot remember his surname - who cared for Timmy  
27 in the Iveagh Centre. Both were very good. I  
28 remember" and you name the manager, "staff at the  
29 Iveagh Centre engendered my trust because I could see

1 they were having a positive influence on Timmy's  
2 behaviour.

3  
4 "I recall going to the School of Dentistry at the RVH  
5 Belfast for a dentist appointment with Timmy while he 10:27  
6 was a patient in the Iveagh Centre. I do not recall  
7 the exact date. A nurse attended with us. Timmy was  
8 not cooperating, which made me anxious and which in  
9 turn escalated Timmy's anxiety. I recalled that I  
10 asked if we would be able to reschedule the 10:27  
11 appointment, and he did. I really appreciated this at  
12 the time; he was very understanding. Nurse reorganised  
13 the appointment and I suggested that he accompany Timmy  
14 on his own without me to the next appointment, which he  
15 did. 10:28

16  
17 "Timmy was not allowed to stay in the Iveagh Centre  
18 beyond his 18th birthday. I recall telling the senior  
19 minister in our church that Timmy was moving to  
20 Muckamore and he was absolutely horrified. He just 10:28  
21 kept saying "You must not let Timmy go to Muckamore".  
22 I remember that I said to the minister "You must be  
23 thinking of how it was years ago", because he was an  
24 older gentleman, but he was quite insistent that it was  
25 a horrendous place. I felt that things must have 10:28  
26 improved given it was 2012 and, anyhow, I had no other  
27 option.

28  
29 "Timmy was discharged from the Iveagh Centre on 28th

1 September 2012, which was the day after his 18th  
2 birthday. When Timmy was being moved from the Iveagh  
3 Centre to Muckamore, I was not allowed to be involved.  
4 He was transferred to Muckamore. I received a call  
5 from the deputy manager in the Iveagh Centre - I do not 10:28  
6 recall her name - on 20th September 2012 to advise me  
7 that the transition had occurred but that Muckamore  
8 advised that we were not allowed to visit Timmy at  
9 Muckamore for a while to allow him to settle in. The  
10 female who called me from the Iveagh Centre seemed a 10:29  
11 bit weird on the phone. It sounded like she was going  
12 to tell me some more information on the transition but  
13 then decided against it. She told me she was not happy  
14 with staff at Muckamore as she wanted to stay with  
15 Timmy to assist with the transition but the staff at 10:29  
16 Muckamore would not allow it.

17  
18 "I had no introduction meeting when Timmy was admitted  
19 to Muckamore. I recall I might have received a few  
20 leaflets but no real information on the hospital, what 10:29  
21 treatment Timmy would receive, who would look after  
22 him, or how or where he would be looked after. I was  
23 very much in the dark in respect of provision of  
24 information. When Timmy was first admitted, I was  
25 advised that I was not allowed to visit him. I phoned 10:29  
26 Muckamore every single day and spoke to H397, the ward  
27 manager on the PICU ward, which is where Timmy was  
28 located. H397 advised me that Timmy screamed and cried  
29 the whole of the first week in Muckamore. I am Timmy's

1 mother and I have never seen Timmy cry in my whole  
2 life. H397 told me not to visit. H397 also advised me  
3 on the phone during one of my calls to him that Timmy  
4 screamed and cried the whole of his second week in  
5 Muckamore also. He gave me no reassurance or 10:30  
6 information as to what the staff were doing to  
7 emotionally support my son. When I was eventually  
8 allowed to visit Timmy, which was two weeks after his  
9 transfer to Muckamore, Timmy looked exhausted and  
10 completely washed out. I just hugged him and sang to 10:30  
11 him. He also had his hair completely shaved off, like  
12 a No. 1 with a bit of stubble. This happened the first  
13 time Timmy was admitted to Muckamore in 2003 also. I  
14 recall it was H118, a health care assistant, who cut  
15 his hair in 2012. I was really horrified by this and 10:31  
16 it was devastating for me to see Timmy with no hair. I  
17 was never given a reason as to why Timmy's hair was  
18 shaved. Timmy has lovely thick brown glossy hair. I  
19 told H118 that I appreciated that he had cut Timmy's  
20 hair but I did not want it cut that short again. I 10:31  
21 wanted to build a positive relationship and Timmy was  
22 dependant on him. It was cut that short again on one  
23 other occasion but not again after that. I got the  
24 impression that H118 just did not care what Timmy  
25 looked like and did not respect my wishes. 10:31  
26

27 "I never saw Timmy's bedroom on PICU, nor was I allowed  
28 onto the ward. I was told by ward staff, mainly H397,  
29 on a number of occasions that the ward was a dangerous

1 place and it was the private home of the residents.  
2 PICU was a mixed ward of males and females. I was told  
3 by a member of staff - I do not recall who it was -  
4 that Timmy had a friend called P95. I visited Timmy in  
5 the visitor's room. The door was always propped open 10:32  
6 and I was given an alarm when I visited in case Timmy  
7 attacked me.

8  
9 "Within months of Timmy being admitted to Muckamore in  
10 2012, his brothers say he was zombified; he was 10:32  
11 expressionless and dull. I tried to discuss Timmy's  
12 medication with Dr. H40 and Dr. H30 on a number of  
13 occasions but it was never reduced down. It was and  
14 still is difficult to get details of what medication  
15 Timmy was on and the doses of medication. 10:32

16  
17 "On 9th June 2022, after listening to the Belfast  
18 Health and Social Care Trust's opening statement at the  
19 public inquiry, I e-mailed Cathy Jack, the Chief  
20 Executive of the Belfast Trust, to complain about 10:33  
21 Timmy's medication. She replied on the same day but  
22 her response was for me to ask Muckamore directly. I  
23 have noticed Timmy's medication reduced over the last  
24 few months. I attach a copy of my email exchange with  
25 Kathy Jack in my exhibits at Exhibit 2. 10:33

26  
27 I recall going to visit Timmy in and around 2012/2013.  
28 I met a female nurse that I did not know, and she said  
29 "Did you hear what is happening in the Ennis Ward". I

1 did not know what she was talking about but she did  
2 mention something about abuse. When she realised that  
3 my son was in PICU, she backed off. I recall that she  
4 said to me that not every mother was like me and that I  
5 really cared for and looked after Timmy, whilst other 10:34  
6 families put their loved ones into Muckamore and do not  
7 bother about them any more. I thought that this was  
8 very sad and I told her so, but I think she was trying  
9 to make out to me that I cared too much for Timmy and  
10 that I should back off a bit. She said that I was the 10:34  
11 odd one out but I know now that there were many  
12 involved, interested and caring families with patients  
13 in Muckamore; it was not just me.

14  
15 "I recall attending Muckamore to visit Timmy in around 10:34  
16 2013. There were four patient files sitting on the  
17 desk on the front desk and Timmy's name was on the top  
18 file. I remember thinking that these are very  
19 confidential patient notes that I could just lift or  
20 read or take away. I complained to H397 about this, 10:34  
21 and I remember at the time he was very agitated that I  
22 raised it with him, and he lifted the notes and took  
23 them away.

24  
25 "Between 2012 and 2017, I had very few formal meetings 10:35  
26 with staff in Muckamore. All of the information which  
27 I received was from the staff on the ward when I  
28 visited, mainly H397. I was entirely reliant on the  
29 information that the ward staff told me. Dr. H40 was

1 the consultant in charge of Timmy when he was admitted  
2 in 2012. I did have some sporadic meetings with  
3 Dr. H40 when Timmy first went into Muckamore. These  
4 only took place when I repeatedly asked for them. A  
5 female nurse, not always the same person, attended 10:35  
6 these meetings. We discussed Timmy, and I did receive  
7 information but I never received any minutes of these  
8 initial meetings. In fact, I do not think anyone took  
9 minutes of these meetings. I recall attending  
10 Muckamore for a meeting some time in 2014 or 2015 with 10:35  
11 what I thought was a meeting scheduled with Dr. H40. I  
12 advised the female nurse at the reception area - I do  
13 not remember her name - that I had a meeting with Dr.  
14 H40 and she said no, the meeting is with me. She led  
15 me to a room where there was a male community social 10:36  
16 worker who was also attending the meeting. I cannot  
17 remember the name of the social worker. I remember the  
18 female nurse was very rude and did not let me or the  
19 social worker speak. I made a formal verbal complaint  
20 to Dr. H40 about that female nurse, which resulted in a 10:36  
21 meeting with Dr. H40 and H77, the Assistant Service  
22 Manager, sometime later. This was the first time that  
23 I met H77, I do not recall the date. I recall during  
24 this meeting, H77 was very agitated and angry that he  
25 had to be there. Dr. H40 apologised for not attending 10:36  
26 the previous meeting. I advised that I would not have  
27 had to make the complaint if he had attended the  
28 meeting because he would have allowed myself and the  
29 social worker to speak, and he agreed. The meeting was

1           quick and I recall H77 leaving abruptly.

2  
3           "On a number of occasions when I visited Timmy when he  
4           was first admitted to Muckamore, I was told that Timmy  
5           was either not available for the visit as he was 10:37  
6           sleeping, or he was in seclusion and I could not see  
7           him. I would only be told this after I attended  
8           Muckamore. It happened so regularly that I suggested  
9           that I should ring the ward in advance of travelling to  
10          Muckamore to check if he was in seclusion, and the ward 10:37  
11          staff agreed that this was a good idea. Even then I  
12          would call in advance and be told that it was fine to  
13          visit, however when I arrived I was on occasion told  
14          Timmy was subsequently in seclusion and I could not see  
15          him. Timmy seemed to be more in seclusion than not in 10:37  
16          seclusion. When I asked why Timmy was in seclusion, I  
17          was told by ward staff that Timmy was acting up or that  
18          he had heightened aggression. When I asked the nurse  
19          in charge on any particular day what he was doing to be  
20          put into seclusion, I was advised Timmy was grabbing 10:38  
21          out. I was given no information on what seclusion  
22          meant or where seclusion was. I was given limited  
23          information on how often and the duration of time that  
24          Timmy spent in seclusion. When Timmy was in seclusion,  
25          I was not allowed to see him. I recall on one occasion 10:38  
26          - I cannot remember when exactly - having first phoned  
27          to confirm it was suitable to visit, when I arrived at  
28          Muckamore I was advised that Timmy was in seclusion and  
29          I was not allowed to see him. I asked H397 how Timmy



1 was and how he was doing and that I would wait to see  
2 if Timmy improved. I did wait but was then informed by  
3 H397 that Timmy had just left with my ex-husband in the  
4 car. I could not understand this because I was never  
5 allowed to see Timmy in the visitor's room at Muckamore 10:39  
6 when he was seclusion, but he was allowed out of  
7 seclusion to go for a drive in the car with his dad.  
8 His dad and I had arrived to visit at the same time by  
9 chance. This really upset me, and H397 had no answer  
10 for me as to why my ex-husband was allowed to take 10:39  
11 Timmy out straight from seclusion. I felt that H397  
12 allowed this because my ex-husband was a man. I did  
13 not complain about this any further; I did not think  
14 there was any point. I did not know the structure in  
15 Muckamore and H397 was difficult to deal with. 10:39

16  
17 "On the occasions that I did get to see Timmy when I  
18 visited, he would mainly just be out of the shower and  
19 I had to wait until he finished. I often thought why  
20 would they give Timmy a shower just when I arrive. The 10:40  
21 staff presented Timmy to me like he had just been given  
22 a special treat because he had just had a shower. The  
23 staff member would say smiling "Timmy has just had a  
24 shower". I recall on one occasion I visited Timmy and  
25 he had not just had a shower, he looked filthy and his 10:40  
26 hair was greasy. He was led out to me by a female  
27 member of staff with black hair and I was devastated by  
28 Timmy's appearance and told the female member of staff  
29 that Timmy needed to shower. She was reluctant but

1 took Timmy away and gave him a shower and brought him  
2 back to me. I thought to myself that I would visit  
3 more regularly if it means Timmy would be showered more  
4 regularly. I did not complain about this because I did  
5 not know who to complain to and no one would care  
6 anyway.

10:40

7  
8 I recall having a meeting with Dr. H40 where I  
9 discussed that I was concerned about the Bamford Report  
10 and the ramifications that it would have for Timmy. I  
11 was concerned that Timmy would be discharged from  
12 Muckamore and where he would go following his  
13 discharge. I recall Dr. H40 telling me that he would  
14 have to pay lip service to the report. However, he  
15 said that Timmy will never ever leave here; there was  
16 no expectation that Timmy would ever come out of  
17 Muckamore. This had a devastating impact on me as it  
18 meant there was no hope for Timmy's future. In recent  
19 times, I have learned that Muckamore is a hospital  
20 where patients are treated and then discharged. I was  
21 not told this when Timmy was admitted to Muckamore, and  
22 certainly it was the view of Timmy's consultant that he  
23 would never be discharged from Muckamore. It felt like  
24 this was the end of the road for Timmy.

10:41

10:41

10:41

25  
26 "I remember receiving a call from one of the nightshift  
27 nurses at Muckamore to advise me that Timmy's heart  
28 rate was very high. I do not remember which year this  
29 was or the time period. Timmy was taken to the

10:42

1 Accident & Emergency Department at Antrim Area  
2 Hospital. Timmy was on medication called Haloperidol,  
3 I did not know about this medication. A consultant at  
4 Antrim Area Hospital advised that Timmy was to come off  
5 this medication immediately. I do not remember the 10:42  
6 name of the doctor. I received various calls over the  
7 course of the next week advising that Timmy's heart  
8 rate was very fast. I wanted to speak to Dr. H40 about  
9 the Haloperidol medication and I tried calling him on a  
10 number of occasions. I tried to call him four days in 10:42  
11 a row and eventually he did call me back. It was hard  
12 to make him out on the call and I asked him if he was  
13 calling from his car, which he confirmed that he was.  
14 He was calling me through a speaker in his car. I felt  
15 this was inappropriate, very inappropriate and 10:43  
16 unprofessional and it was as if this was not an  
17 important phone call that he was making. I told Dr.  
18 H40 that the consultant at Antrim Area Hospital said  
19 that Timmy was to come off Haloperidol. Dr. H40 told  
20 me during this call that Timmy could not be taken off 10:43  
21 the medication immediately and needed weaned off the  
22 drug. He seemed to be suggesting that the consultant  
23 in Antrim Area Hospital did not know what he was  
24 talking about.

25  
26 "Timmy was again taken to the Accident & Emergency  
27 Department at Antrim Area Hospital due to a high heart  
28 rate. I attended at the hospital and I waited four  
29 hours to speak to the consultant. I do not recall his

1 name. The consultant told me that he had told  
2 Muckamore to take Timmy off Haloperidol, but Timmy was  
3 still on the medication. Dr. H40 ignored the advice of  
4 the Accident & Emergency consultant. The consultant  
5 said that he would follow up again directly with 10:44  
6 Dr. H40. He also advised me that he was unwilling to  
7 discharge Timmy unless he had confirmation from Dr. H40  
8 that Timmy would be taken off Haloperidol as the  
9 consultant was concerned that Timmy could have a heart  
10 attack. I told the consultant what Dr. H40 had said 10:44  
11 about Timmy being weaned off the medication. The  
12 consultant reiterated that Timmy would not be leaving  
13 the Accident & Emergency Department unless he had  
14 assurances from Muckamore that Timmy would be taken off  
15 the medication immediately. The consultant advised me 10:44  
16 that he was going to call Dr. H40 immediately to speak  
17 with him.

18  
19 Dr. H30 took over from Dr. H40. I do not remember the  
20 time period, but H30 was then off on sick leave for a 10:45  
21 very long time and during this time I had no meetings  
22 with Muckamore and therefore no information about  
23 Timmy. I recall one day thinking that someone else  
24 must be in charge if Dr. H30 is off on long-term sick  
25 leave. I made inquiries with H397. H397 advised me 10:45  
26 that Dr. H50 was standing in as consultant while  
27 Dr. H30 was off sick. I did get a one-to-one meeting  
28 with Dr. H50 to discuss Timmy at one stage but I do not  
29 remember when this was.

1 "H334 and H89 were both nurses on Timmy's ward. Timmy  
2 was in PICU from 2012 to 2018. He was transferred to  
3 Cranfield 1 on trial on one occasion in and around  
4 2015, 2016 for one week, but the nurse on that ward - I  
5 do not recall her name - said "I couldn't have that", 10:46  
6 referring to my son. She also said "I will let them  
7 deal with that", meaning the staff in PICU. I recall  
8 Timmy had a seizure when he was in Cranfield 1. I  
9 cannot exactly when this was or who told me. I was  
10 only told in 2018 by Dr. H30, one of the consultants in 10:46  
11 charge of Timmy in Muckamore, that he was taken off  
12 detention under the Mental Health Order during this  
13 transfer from PICU to Cranfield 1 as the decision to  
14 continue to detain him needed to be reviewed by a  
15 tribunal, and he was transferred to Cranfield 1 as a 10:46  
16 voluntary patient. Dr. H30 told me this was done as a  
17 way to get around the system. I was advised by Dr. H30  
18 that if Timmy was continuously detained, it had to be  
19 reviewed by a tribunal. If he was taken out of  
20 detention even for a brief period, this meant that his 10:47  
21 detention did not need to be reviewed by a tribunal.  
22 When Dr. H30 told me this, it was very much matter of  
23 fact that this was the practice in Muckamore but I felt  
24 that they were using a loophole to get round the law.  
25 Timmy was then detained again under the Mental Health 10:47  
26 Order and transferred back to PICU Ward.

27  
28 "There were two nurses called H113 and H398 who looked  
29 after Timmy on PICU Ward. When I visited Timmy, I

1 asked that the staff did not come in to speak to me in  
2 front of Timmy as I preferred that they could speak to  
3 me after my visit. My visits are precious time for  
4 Timmy and I to spend together. I did not want to speak  
5 about Timmy in front of him. All of the staff ignored 10:47  
6 this, especially H397. I remember one visit in 2015 or  
7 2016, when I was having a pleasant and relaxed time  
8 with Timmy, and H113 came into the room and Timmy got  
9 up and stood right beside him on his right-hand side.  
10 It was as if Timmy was standing to attention. I asked 10:48  
11 H113 what this was about and he said that it was  
12 nothing, that Timmy was just his wee mate. I was  
13 disturbed by this as I thought it was a bit unusual. I  
14 was worried about this and I recall in the early days  
15 of Timmy being in Muckamore, that he would flinch when 10:48  
16 H113 came into the room. Timmy also used to flinch  
17 when H397 came into the room. I remember saying to  
18 H397 that Timmy used to flinch like that when his dad  
19 came into the room, and Timmy's dad physically  
20 assaulted him on numerous occasions. H397 just 10:49  
21 responded talking about where he was going on his next  
22 holiday.

23  
24 "I recall visiting Timmy one time and he was making  
25 very intense eye contact with me. I believe this was 10:49  
26 in and around Christmas 2015. Timmy is non-verbal and  
27 does not use sign language. He makes strong eye  
28 contact with those who he trusts, like me and his  
29 brothers. He was making such strong intense eye

1 contact with me, I kept saying to him I know you're  
2 trying to tell me something but I do not know what it  
3 is. I was upset because I did not know what he was  
4 trying to tell me, so I just kept telling him that I  
5 loved him and his brothers loved him, and I hugged and 10:49  
6 kissed him. I raised this with H397 at the time.  
7 However, he completely dismissed it.

8  
9 "I recall a nurse called H271, who appeared to come  
10 across as more senior. I do not know his official 10:50  
11 title. He seemed to know Timmy and was good at dealing  
12 with him, and perhaps some of the other nurses were not  
13 managing Timmy's challenging behaviour so well. He was  
14 a capable, polite man. I recall another nurse  
15 assistant called H54; he seemed to be open and honest 10:50  
16 with me. I recall having a meeting with H397 and  
17 Dr. H30, I do not recall when this was, and H397 was  
18 telling Dr. H30 that Timmy had been swimming.  
19 After the meeting, I was walking out with H54 and H54  
20 told me that Timmy had not been swimming for a long 10:50  
21 time. I was so disappointed to hear this and I found  
22 it deeply upsetting because Timmy loves to swim. I  
23 followed up with H397 by telephone about this and he  
24 admitted to me they should not have told Dr. H30 that  
25 Timmy was swimming. I remember asking him if he would 10:51  
26 correct this false information provided to Dr. H30 at  
27 the meeting but he again responded talking about his  
28 holidays. On another occasion I was visiting Timmy and  
29 I went into my usual meeting room, and H54 was in there

1 with what looked like his lunch, and when I walked him  
2 he snapped the lunch up and left the room abruptly  
3 without speaking to me. I do not know if he was  
4 annoyed that I was interrupting his lunch or not but it  
5 was a prearranged visit. I have never seen H54 with 10:51  
6 Timmy so I do not know how they get on.

7  
8 I recall a Deputy Ward Manager called H16. I remember  
9 that he had attended one of my meetings with Dr. H50 to  
10 do with Timmy's diet some time in 2016. Dr. H50 was 10:51  
11 filling in whilst Dr. H30 was off on sick leave. I was  
12 provided with a sheet of paper, which looked like  
13 something produced from a search on Google. It had a  
14 few words on it to do with Timmy's diet. The word  
15 "dietician" was spelt incorrectly. The piece of paper 10:52  
16 looked like something that was conjured up to produce  
17 something in writing to me. It was so poor they would  
18 have been better to give me nothing. After that  
19 meeting, H16 slipped me a small piece of paper and told  
20 me covertly to have a look at that and call him. He 10:52  
21 indicated to me that I should not speak about this to  
22 anyone. It was the contact details of advocates at  
23 Bryson House. I did not even know the service existed.  
24 I made contact with Bryson House by telephone and I was  
25 allocated a carer's advocate. I cannot recall when 10:52  
26 this was in the process.

27  
28 In and around 2016, 2017, my family put our money  
29 together to purchase a rocking chair and weighted



1 blanket for Timmy for his Christmas present at the  
2 suggestion of the ward. It cost £1200. H334, Timmy's  
3 named nurse at the time, had to get the chair checked  
4 by health and safety. It took about one year to get  
5 the chair into Muckamore. We exhausted all possible 10:53  
6 options and suggestions as family to get the chair and  
7 blanket into Muckamore. We offered to get the chair  
8 delivered to Muckamore. Then I suggested that we could  
9 have the chair delivered to my home and we would then  
10 arrange a removal van to bring it to Muckamore. All of 10:53  
11 this was refused. We were told that the Belfast Trust  
12 would have to order the chair directly, and when it  
13 eventually did appear, six of the exact same chairs  
14 appeared on the ward. I queried this with H397 on the  
15 basis that my family had to buy the chair but Muckamore 10:54  
16 then bought six of the identical chairs for other  
17 patients. I later recall that H287, deputy in charge  
18 of Learning Disability Services for the Belfast Trust,  
19 advised me during a meeting on 9th August 2018 that the  
20 Belfast Trust should have paid for Timmy's chair and 10:54  
21 blanket, and I received a refund of £900 which H287  
22 arranged, but she told me not to tell anybody about the  
23 refund. I attach a copy of the minutes of the meeting  
24 on 9th August 2018, Exhibit 3, prepared by my Bryson  
25 House advocate, who also attended the meeting. 10:54  
26

27 "During Timmy's time in PICU, I was constantly asked  
28 for money by the staff to purchase things for Timmy  
29 such as toiletries, money for the Cosy Corner cafe at

1 Muckamore and takeaways. The staff stipulated to me  
2 that cash was preferable. I handed over cash every  
3 week to H397 or whatever nurse was on duty at the time.  
4 I was paying about £100 per week. I asked H397 on at  
5 least five occasions for receipts or an account of what 10:55  
6 the money had been spent on, and each time he replied  
7 "Absolutely", but I never received anything from him.  
8 I usually received a receipt from the ward for the  
9 money I paid in but I never received any receipts for  
10 the items that were allegedly purchased for Timmy. I 10:55  
11 attach copies of some receipts at Exhibit 4. I recall  
12 that I complained to the cash office in the  
13 administration building in Muckamore in and around 2014  
14 to 2015. I wanted to know the balance on Timmy's  
15 account. I was advised by a woman who was working at 10:55  
16 the administration desk, at the time on the telephone,  
17 that I was not entitled to this information as this was  
18 Timmy's money. The woman would not provide me with any  
19 details. I did not understand this as I was the person  
20 supplying the money. About a year later, I contacted 10:56  
21 the administration desk again and got to speak to a  
22 different woman which did provide me with Timmy's  
23 balance, which was £100 at that time. I had expected  
24 it to be a lot more given the amount of money I was  
25 handing into Muckamore at the time. I recall my sons 10:56  
26 saying to me that they did not understand how other  
27 families less well off than us could afford to pay all  
28 of the money I was paying into Muckamore every week.  
29 We did not want Timmy to be without anything.

1 "I also recall from 2012 to 2017, every time I visited  
2 Timmy he was wearing clothes that could only be  
3 described as rags that did not belong to him. I bought  
4 Timmy really nice clothes like Ulster rugby shirts, and  
5 Canterbury and Nike sportswear, but I never saw him 10:57  
6 wear them. I queried with H89, the nurse in PICU Ward,  
7 and she advised me that if Timmy's pad leaked, his  
8 clothes needed to be boiled in the sluice, which mostly  
9 destroyed the clothes and they had to be put in the  
10 bin. I suggested to her that there is no point in 10:57  
11 putting clothes into boiling sluice if the outcome is  
12 that they have to go into the bin; they may as well be  
13 taken off Timmy and be put straight into the bin.  
14 Timmy never wore the good clothes that I bought him and  
15 H89 suggested to me that I should stop buying Timmy 10:57  
16 good clothes. However, I wanted Timmy to dress in the  
17 same way that his brothers dress.

18  
19 "I also recall purchasing Timmy an expensive pair of  
20 boots in and around May 2015 and every time I visited, 10:57  
21 he was not wearing them. I queried this with whichever  
22 nurse was on the ward at the time and I got various  
23 answers like "He kicks the heels out of them", or "He  
24 does not like wearing them". More recently, since I  
25 have become aware of the abuse, I believe staff did not 10:58  
26 allow Timmy to wear the boots because it was easier to  
27 drag him along the floor in his socks.

28  
29 "I recall on another occasion I had purchased nice

1 shoes for Timmy, and the staff told me that he did not  
2 want to wear them as his toes were too cramped. I  
3 discovered to my horror when I went to give Timmy a  
4 foot massage in around April 2015 that Timmy's toenails  
5 were so long that they grew over the top of his toe and 10:58  
6 curled at the back. It was not the shoes that were the  
7 problem, it was his toenails. I remember being  
8 devastated about this at the time. I complained to  
9 H397 and told him that all of the staff, including him,  
10 are involved in changing and bathing Timmy and they 10:58  
11 should have noticed. He did not have much of a  
12 response for me. I asked for the podiatrist to come in  
13 and see Timmy on the same day. I recall I had a small  
14 pair of baby nail clippers in my bag and I tried tidy  
15 up Timmy's nail as best I could. I took a photograph 10:59  
16 of Timmy's toenails but I subsequently deleted it as I  
17 found too upsetting to look at. Sometime later I was  
18 giving a foot massage and his toenails were nearly as  
19 bad as the last time I clipped them. I absolutely  
20 flipped out. I approached H397 and asked them why 10:59  
21 Timmy's nails were like this again. I went on and on  
22 about the state of Timmy's toenails to all of the  
23 nurses, and I eventually I was told that the podiatrist  
24 did call but he was too busy to see Timmy. I was  
25 absolutely appalled at the state of Timmy's toenails 10:59  
26 but the staff did not seem to care. Their response  
27 indicated that this was almost normal. Timmy did see  
28 the podiatrist eventually, which was several weeks from  
29 I raised the issue regarding Timmy's toenails. I kept

1 a check on Timmy's toes when I visited to make sure  
2 they did not get into that state again. Every time I  
3 raised a concern to H397, he would dodge my concern and  
4 start talking about his holidays.

5  
6 "When Timmy was younger and his grandad was still  
7 alive, I spent a lot of time practising shaving on my  
8 dad so that I knew how to shave Timmy properly. On my  
9 dad's advice, I always purchased good razors for Timmy  
10 such as Gillette and Mach3. These razors needed a new 11:00  
11 blade inserted every few days but I was regularly being  
12 asked by the staff on the ward to buy Timmy the whole  
13 new razor, which is expensive. I do not know what was  
14 happening to the razor part as this is reusable.

15 Frequently when I visited Muckamore, Timmy has a lot of 11:00  
16 cuts on his face which looked like shaving cuts. I  
17 queried this with the staff on the ward and the  
18 response frequently came back Timmy had been shaved  
19 using a disposal Bic razor. This is a very cheap razor  
20 that I would never have used on Timmy. It was 11:01  
21 suggested to me that I should buy Timmy an electric  
22 razor. Initially I agreed, but then I remembered that  
23 Timmy does not like the buzz or cutting sounds made by  
24 an electric razor. I asked the staff to use the  
25 Gillette or Mach3 razors I had purchased for him. It 11:01  
26 really upset me that the staff were using cheap Bic  
27 razors on Timmy when it was not what I had bought for  
28 him. This battle on the type of razor used to shave  
29 Timmy continues to this day.

1 "Timmy put on a lot of weight when he was in Muckamore.  
2 I constantly raised it with various ward staff and his  
3 various consultants. I recall raising the issue with  
4 Dr. H50 in a meeting. I do not recall the year but it  
5 was when Dr. H30 was off on long-term sick leave and 11:01  
6 Dr. H50 was Timmy's stand-in consultant at the time.  
7 Timmy's Bryson House advocate attended the meeting. I  
8 remember it was suggested at this meeting that Timmy  
9 would benefit from using an exercise bike but Dr. H50  
10 did not seem to know what an exercise bike was. A 11:02  
11 general practitioner who was at the meeting had to  
12 explain it to him, which I thought was very strange.  
13 Dr. H50 seemed to be oblivious to Timmy's weight gain.  
14 At first I thought it might be due to his medication.  
15 I recall the general practitioner - I do not recall his 11:02  
16 name - suggesting that Timmy's diazepam be reduced by  
17 Dr. H50 shot that idea down. I thought it was  
18 unprofessional to speak to another doctor in this way  
19 in front of me. I do not recall when this was but  
20 Dr. H50 referred me to the dietician. I asked him why 11:02  
21 did he refer me to the dietician, surely he should be  
22 referring to the nurses on the ward to the dietician as  
23 they are looking after Timmy. He replied, "No, you"  
24 and pointed at his finger at me. I did meet the  
25 dietician, I cannot remember when this was. I do not 11:03  
26 remember her name but I recall that she presented as  
27 being very defensive at the beginning of the meeting.  
28 I think she thought that I was going to be difficult.  
29 However, she relaxed when she realised that I had no

1 issue with the diet plan prescribed for Timmy, it was  
2 the fact that the diet plan clearly was not being  
3 followed by the nursing staff on the ward. Timmy would  
4 not have been the size he was if it was being followed.

11:03

5  
6 "I purchased flax seeds as Timmy had a constipation  
7 problem, and I asked for these to be sprinkled into  
8 Timmy's breakfast. I was told by a member of domestic  
9 staff called H410 - I do not remember her name - to  
10 stop bringing the flax seeds because they had about 12 11:03  
11 boxes in the kitchen, which disheartened me because it  
12 meant that staff in Muckamore were not using it in his  
13 food as I had asked. I also phoned H89, one of the  
14 nurses on the ward, in and around mid to late 2016 and  
15 suggested she give more Timmy more fruit to assist with 11:04  
16 constipation. I remember she told me with pride that  
17 she was giving bananas and I had to tell her that  
18 bananas can cause constipation. I recall that I also  
19 spoke to Dr. H30 about Timmy's weight when he was back  
20 from sick leave. I do not recall when this was. I 11:04  
21 suggested to her Timmy should be allowed to use the  
22 exercise bike, and she agreed. No change in Timmy's  
23 weight seem to happen for a while but over the years  
24 Timmy's weight did decrease.

11:04

25  
26 "The ward staff in Muckamore made me feel like a bad  
27 mother about being particular about what Timmy had to  
28 eat. I was really concerned about his weight and the  
29 size of Timmy's tummy because he was obese. I wanted

1 him to have a balanced diet but I was made to feel like  
2 I was saying to the staff that Timmy should not have  
3 any treats at all, which was not the case. The ward  
4 staff would say to me that I was "insisting" on Timmy  
5 having a good diet. I recall the ward staff would say 11:05  
6 that they gave Timmy a wee treat, as if they were being  
7 nice to him, and I was the bad mother who would not  
8 allow her son any treats. The ward staff would say  
9 "The mother does not allow Timmy to have any treats".  
10 I recall at Timmy's Bryson House advocate telling me 11:05  
11 that I should allow Timmy to have treats, which proved  
12 to me that the staff in Muckamore were talking about me  
13 behind my back and telling my Bryson House advocate  
14 that I did not allow Timmy to have treats, which was  
15 not true. Timmy has reflux and should not eat spicy 11:05  
16 food. This was ignored by the staff. For example,  
17 Timmy would be given salt and chili chicken or curry  
18 takeaways, which he should not be eating.  
19  
20 "There is also a reluctance to allow or encourage Timmy 11:05  
21 to exercise by Muckamore Staff. Every time I suggested  
22 that Timmy should be taken for a walk or swimming, I  
23 was constantly advised by ward staff that they were  
24 short-staffed and they were not able to take Timmy out.  
25 I recall asking ward staff that I wanted a meeting with 11:06  
26 H12, the manager of the day care centre at Muckamore  
27 that I had spoken to at the time when Timmy had to be  
28 pinned down in the street in Dunmurry whilst he was  
29 attending Lindsay House in respite care. I had good



1        faith in him as he helped me during that crisis. I  
2        eventually had a meet with H12, which I think was in  
3        around 2016, 2017. I explained that Timmy needed  
4        exercise and fresh air as this was good for his  
5        physical and mental health and helps to deescalate his 11:06  
6        aggression. I suggested that Timmy be allowed out for  
7        walks and on an exercise bike as well as swimming. I  
8        explained to H12 I had constantly been asking for this  
9        with the nursing staff and I remember he replied saying  
10       "That information does not always reach me". I recall 11:07  
11       during this meeting that he advised me that my  
12       suggestions would be implemented. I had faith in him  
13       as the day care manager that he would implement these.  
14       He appeared affable, agreeable, and to know what he was  
15       doing. I waited about six to eight months and 11:07  
16       unfortunately my requests on exercises were not  
17       implemented. I therefore asked for another meeting  
18       with H12. During this meeting I asked him why he had  
19       not made sure that my suggestions were implemented.  
20       His response was vague. I recall thinking that my 11:07  
21       suggestions would never be implemented. I was not  
22       asking for the earth, I was only asking that my son get  
23       some fresh air and exercise.  
24  
25       "Eventually, in around April 2020, Timmy was permitted 11:07  
26       to exercise on a tricycle. This was arranged by the  
27       care assistants called H399, H400 and H401. I do not  
28       know their full names. I remember one time they did a  
29       video call with me when he was on the tricycle. I have

1 had a lot of email communication with the ward staff  
2 regarding Timmy's need for exercise and fresh air. By  
3 way of examples, I would attach copies of three emails  
4 dated 2nd September 2019, 5th June 2022 and 9th June  
5 2022, where I have written to complain to Muckamore at 11:08  
6 Exhibit 5.

7  
8 "From when Timmy went into Muckamore in 2012, I  
9 received calls on daily basis from various ward staff  
10 in PICU to advise that Timmy had been hit by another 11:08  
11 patient. I was always advised on these calls that I  
12 had a right to report the incident to the PSNI, but the  
13 undertone of the conversation was that Timmy has hit  
14 patients and that the other families have not reported  
15 the matter to the PSNI. I did not want to get the 11:08  
16 patients into trouble because most of the time it is  
17 not their fault, and as long as Timmy was okay, I never  
18 felt the need to report the incidents to the PSNI.

19 In 2017 I remember I received a call from H402, a male  
20 nurse in PICU ward, advising me that a female staff 11:09  
21 member had pushed Timmy out of his rocking Chair to get  
22 him over to eat his food. The male nurse asked me what  
23 I wanted to do about it. I recall having a discussion  
24 about how it happened. I asked if it was done in a  
25 jovial way or was it done in an aggressive way. The 11:09  
26 male member of staff suggested it was jovial, so I  
27 decided not to report it".

28  
29 Then we'll move past that as it touches on a memorandum

1 of understanding issue but maybe return to it in your  
2 questions.

3 CHAIRPERSON: All right. I think you're going to come  
4 back to that?

5 MR. MCEVOY: I am going to come back to that in my  
6 question.

11:09

7  
8 "I felt that H402 was a very good nurse. I remember  
9 him telling me to "Speak up, Dawn. If you're unhappy  
10 about something, speak up". This was before I was 11:10  
11 aware of the abuse and therefore I did not understand  
12 what he was saying. I was thinking but what would I  
13 have to complain about over and above the issues that I  
14 have raised, like with Timmy's toenails, his diet and  
15 his lack of fresh air and exercise. He also said to me 11:10  
16 at one time, like almost as if he was talking to  
17 himself, "I don't think they are as bad on Timmy  
18 probably because he has been here the longest". He  
19 walked away after he made those comments and I did not  
20 get a chance to ask him what he meant. I never saw him 11:10  
21 again after he made those comments to me. Again, this  
22 was before I was made aware of the abuse.

23  
24 "Timmy was receiving no state income by way of benefits  
25 from when he moved to Muckamore until a few years ago. 11:10  
26 I did not know that he was entitled to benefits until  
27 my advocate from Bryson House put me in contact with  
28 H155, a social worker at Muckamore in around 2018. The  
29 social worker should have advised me of this when Timmy

1 went into Muckamore. For many years I was paying money  
2 into Muckamore Timmy was entitled to from the state.  
3 This was the answer to the question from my sons as to  
4 how other families could afford the payments that I was  
5 making to Muckamore.

11:11

6  
7 "My experience of the social work team in Muckamore is  
8 that it is dreadful. Timmy's social worker was H93  
9 when he started in Muckamore. I did have a few  
10 meetings with him at the start but I was told by 11:11  
11 someone on the ward - I cannot remember who - but it  
12 was probably H397, H93 was off sick when I asked to  
13 meet him for an appointment. I was then told this on a  
14 number of occasions that H93 was off on long-term sick  
15 leave. Therefore, as far as I was aware, Timmy did not 11:11  
16 have a social worker for many years. I was speaking  
17 with H93 recently and he advised me that he was  
18 retiring. I was asking about him being off sick for a  
19 number of years and he said he was not off sick. I do  
20 not know what happened but the staff on the ward, 11:12  
21 particularly H397, were telling me that H93 was off  
22 sick and he told me recently that he was not, but if he  
23 was not off sick, where was he all of those years  
24 because he was not being Timmy's social worker. Timmy  
25 was allocated a social worker called H403 a year or two 11:12  
26 ago. I remember at my first meeting with him, he was  
27 really positive and listening to me and when I asked  
28 the question he would reply, "I will find that out for  
29 you, Dawn". Within a month or two, he was like

1 everyone else who worked in Muckamore, like a closed  
2 book and unwilling or perhaps unable to help me with my  
3 queries and concerns."

4  
5 That might be convenient.

11:12

6 CHAIRPERSON: You are about half way through, in fact,  
7 aren't you? All right. It is important that people  
8 can focus. We'll take 15 minutes. You will clearly  
9 finish reading this before lunch?

10 MR. MCEVOY: Yes.

11:13

11 CHAIRPERSON: Then we'll see how the witness feels  
12 about whether to carry on straight into questioning.

13 MR. MCEVOY: The witness and I have had a conversation  
14 about some of the material. It's possible we will be  
15 able to make a bit more time, but I think probably the  
16 same again is fair to say.

11:13

17 CHAIRPERSON: That's fine. We are not rushing  
18 anything. Okay, thank you very much indeed. 15  
19 minutes.

11:13

20  
21 THE INQUIRY BRIEFLY ADJOURNED AND RESUMED AS FOLLOWS:

22  
23 CHAIRPERSON: Thank you very much.

24 MR. MCEVOY: Thank you, Chair.

11:36

25  
26 Dawn, we paused at the end of paragraph 53, so I am  
27 going to take it up at paragraph 54. All right. There  
28 you tell us then:  
29

1 "I found out about the abuse on PICU in September 2017.  
2 I was told during a telephone call from whom I later  
3 found out to be H411, who was a safeguarding manager in  
4 the Belfast Trust. H411 phoned me out of the blue.  
5 She did tell me her name at the start of the 11:36  
6 conversation but I immediately forgot it. I did not  
7 know where she was calling from. She told me that  
8 there was abuse at Muckamore and that Timmy was  
9 involved. She advised me that there were CCTV  
10 footage". Then the next bit touches on the memorandum 11:37  
11 of understanding and some of the matters that are at  
12 the heart of the police investigation.  
13 CHAIRPERSON: Sorry, can you give me the paragraph?  
14 MR. MCEVOY: It's paragraph 54, Chair, and it's the...  
15 CHAIRPERSON: The second part? 11:37  
16 MR. MCEVOY: Just after "Timmy was involved".  
17 CHAIRPERSON: All right. Dawn understands why we are  
18 doing this?  
19 MR. MCEVOY: And Dawn understands this.  
20 A. Yes, I do. 11:37  
21 MR. MCEVOY: Just to confirm. I don't want to speak  
22 for you, of course.  
23 A. You have explained it, yes.  
24 MR. MCEVOY: If we can take it up then at the top of  
25 page 26 and we are still on paragraph 54. I'll pick it 11:37  
26 up there where you say:  
27  
28 "I remember that she abruptly ended the phone  
29 conversation, saying that she had to go. She told me

1 that I was not to tell anyone because the PSNI were  
2 involved. After the call, I did not remember her name  
3 or know where she was calling from and I did not have a  
4 phone number to call her back on. I found this to be  
5 very traumatic. I had no warning of the phone call or 11:38  
6 the information which was described to me about Timmy's  
7 abuse. The only two people I told about the call was  
8 my sister, Catherine, and Timmy's two brothers. I did  
9 not tell anyone else as I recall H411 stressed on the  
10 phone call to me that I was not to discuss it with 11:38  
11 anyone.

12  
13 "In January 2018, consultant Dr. H30, and H155, a  
14 social worker at Muckamore, came out to visit me at my  
15 home. Dr. H30 told me that there was potential for 11:38  
16 Timmy to be resettled in March 2018. Dr. H30 appeared  
17 to be very excited by this as she was clapping her  
18 hands in a child-like manner. The resettlement was to  
19 be done through a charity called Autism Initiatives.  
20 This was the first time I heard anything about the 11:39  
21 resettlement but it appeared from what Dr. H30 was  
22 saying to me that it was all organised. I was  
23 surprised by this. I was also surprised that they  
24 thought this could be organised and implemented within  
25 two months. I decided to take the opportunity to share 11:39  
26 the information advised to me during my call with H411  
27 in September 2017 regarding the abuse with Dr. H30 and  
28 H155 at this meeting. H155 encouraged me to share the  
29 information I had been given, and H155 and Dr. H30

1        advised me during the meeting that they were aware of  
2        the abuse.

3  
4        "During this meeting with H155 and Dr. H30, I was also  
5        advised that Timmy's continued detention under the        11:39  
6        Mental Health Order was to be the subject of a tribunal  
7        review, which was Timmy's first review that he had  
8        since he was admitted to Muckamore in 2012. This took  
9        place between January 2018 and March 2018. I was  
10       advised by H155 by email dated 8th January 2018 that I        11:40  
11       should contact a solicitor to represent Timmy at the  
12       tribunal, and then H284, a social worker based in a  
13       health centre in Belfast, emailed on 10th January 2018  
14       with details of a solicitor. A copy of these emails  
15       are attached at Exhibit 6." Then you indicate who the        11:40  
16       firm of solicitors was.

17  
18       "The tribunal hearing was sitting in the administration  
19       building at Muckamore. I attended the tribunal. At  
20       this time, I thought Timmy was moving out of Muckamore        11:40  
21       in March 2018. I recall that the solicitor came out of  
22       the tribunal room and told me that the Queen's Counsel  
23       who was sitting at the tribunal judge knew me. I  
24       advised the solicitor that I was happy to proceed with  
25       the tribunal judge was. I was allowed into the        11:41  
26       tribunal hearing and I was invited to join everyone at  
27       the table by the tribunal judge. Dr. H30 and H155 were  
28       in attendance. I got the impression that the Muckamore  
29       staff did not want me to be present at the tribunal.



1 After the reports were presented and discussed, the  
2 tribunal was adjourned and we went into Dr. H30's  
3 office where she advised me that she was leaving  
4 Muckamore. The outcome of the tribunal with is that  
5 Timmy continued to be detained under the Mental Health 11:41  
6 Order 1986. I was pleased with that outcome.

7  
8 "There was a meeting a few weeks after the tribunal and  
9 Dr. H30 attended. The meeting was in Muckamore. I  
10 cannot recall who else was in attendance. We discussed 11:41  
11 the resettlement, and Dr. H30 seemed to be trying to  
12 get everything sorted for the resettlement before she  
13 left Muckamore. There was a form I needed completed  
14 regarding Timmy's benefits which needed to be filled in  
15 by a doctor in charge of Timmy. I recalled Dr. H30 11:42  
16 taking the form from me at this meeting and  
17 simultaneously completed it during the meeting, signed  
18 it and gave it back to me.

19  
20 "The resettlement did not proceed as planned in March 11:42  
21 2018 as Autism Initiatives did not have the necessary  
22 funding or staffing levels. There were ongoing  
23 meetings between Autism Initiatives and Muckamore and  
24 I. There were two psychologists working on the  
25 resettlement in Muckamore but they both left Muckamore 11:42  
26 before the resettlement took place. The psychologist  
27 were called H404 and H405. I was working full-time  
28 myself and was being asked to attend constant meetings  
29 and phone calls at Muckamore. At the same time, I was

1 also receiving phone calls from H283, a social worker  
2 and safeguarding in the Belfast Trust regarding  
3 safeguarding issues with Timmy in Muckamore.  
4

5 "On 8th March 2018, during a meeting which took place 11:43  
6 in Fairview, which is a building across the road from  
7 the Mater Hospital in Belfast, with my advocate from  
8 Bryson House, H287, the deputy in charge of Learning  
9 Disability Services for the Belfast Trust and a  
10 Business and Service Improvement Manager of the Belfast 11:43  
11 Trust assisted me in formulating a complaint against  
12 H411. I recall after the meeting, I was unhappy with  
13 some of the wording in the complaint and e-mailed the  
14 Business and Service Improvement Manager of the Trust  
15 on 14th March 2018, asking for it to be amended. I 11:43  
16 attach a copy of the Service Group Complaint Inquiry  
17 record form dated 8th March 2018 regarding H411 at  
18 Exhibit 7, and a copy of my email to the Business and  
19 Service Improvement Manager dated 14th March 2018 at  
20 Exhibit 8. 11:44  
21

22 "Shortly after I made this complaint, H411 phoned me to  
23 discuss the complaint against her. She also called to  
24 my house and mentioned the complaint again and  
25 apologised on this occasion. I e-mailed the business 11:44  
26 and service improvement manager on 23rd March 2018 to  
27 advise him of this as I was unhappy about it. I cannot  
28 recall if the Business and Service Improvement Manager  
29 responded to my email. I attach a copy of my email to

1 the Business and Service Improvement Manager of the  
2 Belfast Trust dated 23rd March 2018 at Exhibit 9.

3  
4 "I was unhappy with the lack of information H397 gave  
5 me. He had no compassion or interest in Timmy. Every 11:45  
6 time I asked a direct question about Timmy such as was  
7 Timmy in seclusion today, he responded by telling me  
8 that he was just back from holiday or about to go on  
9 holiday. He avoided answering any of my questions by  
10 talking about something else. I raised this at the 11:45  
11 meeting with H287 and the Business and Service  
12 Improvement Manager on 8th March 2018. During that  
13 meeting H287 suggested to me that if I was unhappy with  
14 H397, then I should raise a formal written complaint  
15 against him too, which I did at that meeting. I attach 11:45  
16 a copy of the Service Group Complaint Inquiry record  
17 form at Exhibit 10.

18  
19 "I recall H397 calling me and asking me to retract the  
20 complaint. I thought this was very unprofessional and 11:45  
21 threatening. It seems that contacting the complainant  
22 directly to intimidate them is standard practice at  
23 Muckamore!

24  
25 I subsequently received a call from another individual, 11:46  
26 I do not know his position or where he was calling  
27 from, to acknowledge that I had received my complaints  
28 regarding H411 and H397. He advised me that H411 and  
29 H397 had both been spoken to and were aware of the

1 complaints. I felt like he was pressing me to agree to  
2 close the complaints, which I reluctantly agreed to do.  
3 Having had very few meetings up to 2017, which was in  
4 and around the time I was told about the abuse, I was  
5 being inundated with meetings and phone calls by 11:46  
6 Muckamore. Prior to 2017 I only knew of the ward  
7 staff; Timmy's consultant; I met H77 once. Since 2017,  
8 management at Muckamore and Belfast Trust have been  
9 engaging with me whereas before I did not know these  
10 people existed. 11:47

11  
12 "In and around 2017, H282 took over as ward manager of  
13 PICU. There were monthly update meetings at Muckamore  
14 attended by over 10 staff members. No one introduced  
15 themselves. I recall on a number of occasions asking 11:47  
16 for minutes of the meetings from the ward staff who  
17 also attended the meetings as there was clearly  
18 somebody taking minutes, but I was told by H282 that it  
19 would be a number of weeks before the minutes would be  
20 available. At times during these meetings, I recall 11:47  
21 that I could not hear what people were saying because  
22 the note-taker was typing so loudly on the laptop.  
23 When I followed up on receiving the minutes of  
24 meetings, I was fobbed off time and time again. This  
25 was with a variety of different ward staff. I rarely 11:48  
26 ever received minutes of meetings.

27  
28 "I recall that I was invited to attend a lot of  
29 resettlement meetings at Muckamore. There would be

1 maybe 30 people at these meetings, and they lasted for  
2 about two hours. I was really busy at work at this  
3 time and I had to take annual leave to attend the  
4 meetings. Some of the meetings were a waste of time  
5 and I recall sitting watching everyone who was squeezed 11:48  
6 around the boardroom table at Muckamore and thinking  
7 they were all being paid. This was their job to attend  
8 these meetings so it did not really matter if the  
9 meeting achieved nothing, but I was juggling work and  
10 taking annual leave to be there. It made me really 11:48  
11 angry.

12  
13 "I also recall that staff at those meetings used a lot  
14 of acronyms and I did not always know what they mean.  
15 On one occasion I remember H406, a social worker at 11:48  
16 Muckamore, using an acronym and I asked her what it  
17 meant. She stopped talking and said "oh, I actually do  
18 not know what that stands for". So, the staff were  
19 using terminology that they did not even understand  
20 themselves, how was I supposed to understand?" 11:49  
21

22 In the next number of paragraphs Dawn, from 65 through  
23 to the bottom of paragraph 69 on page 31 then, you  
24 detail before the Inquiry some matters which are  
25 covered by the memorandum of understanding. I suppose 11:49  
26 by way of reassurance on behalf of the Inquiry team, I  
27 can indicate to you that Core Participants have this  
28 information and, of course, the Inquiry itself has this  
29 information.

1 CHAIRPERSON: I can indicate the Panel have all read  
2 this statement, of course, in full, including those  
3 paragraphs.

4 A. Yes.

5 MR. MCEVOY: Okay. So I am going to take up, Dawn,  
6 then at paragraph 70 all right.

11:49

7 CHAIRPERSON: 70.

8 MR. MCEVOY: We are top of page 32 now. I think we  
9 have a bit of inclement weather above us so I'll speak  
10 up a little bit.

11:50

11  
12 "Since I was made aware of the abuse, I had a meeting  
13 with the finance man called H412 in a building beside  
14 Graham House at Knockbracken Healthcare Park,  
15 Saintfield Road, Belfast. I think he was senior  
16 manager in Patient Client Accounting in Belfast Trust.  
17 He advised me that he had meticulously gone through all  
18 Timmy's money and receipts, and he laughed openly and  
19 said there was a lot of money spent on takeaway food.  
20 I recall the man saying "Timmy must be addicted to  
21 takeaway food given the amount of money spent". I took  
22 from what the man said and the way that he said it that  
23 Timmy could not have eaten all of the takeaway food  
24 that his money was allegedly used to buy. However, I  
25 could not prove this. I have always been very wary as  
26 to what is happening with the money I give to Muckamore  
27 for Timmy.

11:50

11:50

11:51

28  
29 "In the last year I am now occasionally given receipts

1 for Timmy's expenditure and I am given a statement on a  
2 monthly basis. The amount of money that I am asked for  
3 by Muckamore has reduced dramatically from when Timmy  
4 was admitted to Muckamore in 2012. Muckamore has never  
5 provided me with a full account for all of the money 11:51  
6 which I gave into the hospital for Timmy.

7  
8 "In and around 2018 I recall receiving a call from a  
9 dentist from the School of Dentistry at the Royal  
10 Victoria Hospital. She was calling to ask my 11:51  
11 permission to do some work on Timmy's teeth. She  
12 advised me that Timmy's teeth had not been cleaned for  
13 years. This would confirm not only that the staff at  
14 Muckamore did not brush Timmy's teeth, but also that he  
15 had not seen a dentist or brushed his teeth since he 11:52  
16 went into Muckamore in 2012. This is clearly neglect.  
17 I was really upset by this because from Timmy was a  
18 baby, I took Timmy to the dentist regularly and I  
19 absolutely made sure that his teeth were brushed every  
20 day because I did it myself. He was prescribed 11:52  
21 fluoride after that devastating news that his teeth had  
22 not been brushed, and he needed a massive amount of  
23 work done to his teeth under general anaesthetic. Even  
24 after this, I recall staff on the ward at Muckamore  
25 telling me that they were having trouble getting Timmy 11:52  
26 to brush his teeth. I told them that he will allow you  
27 to brush his teeth if he was relaxed in the bath. I  
28 spelt this out to them. The dentist even provided the  
29 ward with an information sheet on how to brush Timmy's

1 teeth. This issue continues on the ward to this day.  
2 I still do not think that the ward staff are brushing  
3 Timmy's teeth regularly because when I speak to ward  
4 staff and ask if they brushed Timmy's teeth when he was  
5 in the bath, they look at me strangely as if they do 11:53  
6 not know to brush Timmy's teeth when he is in the bath.  
7 This demonstrates not just poor management but also  
8 gross neglect of my son's care. I would like the  
9 Public Inquiry to ask for Timmy's dentistry notes from  
10 when he went into Muckamore in 2012. I suspect there 11:53  
11 are none from 2012 to 2018 as I do not believe he saw a  
12 dentist during this time, and this is neglect.

13  
14 "In and around the beginning of 2018, I do not recall  
15 the exact date, H287 held a meeting with all of the 11:53  
16 families of the patients in Muckamore. During this  
17 meeting, she informed the families that it was not  
18 correct for the staff to have told families that they  
19 were not allowed in to see patients' bedrooms or to be  
20 on the wards, as those were not the rules at the time. 11:54  
21 I recall a meeting was arranged at short notice at  
22 Knockbracken Healthcare Park, which is one of the  
23 headquarters of the Belfast Trust. During the meeting,  
24 which was attended by H287 and Dr. H50, in and around  
25 2018, I was told that H397 had left Muckamore by H287 11:54  
26 and that he would never be back again. I was also  
27 advised that there was widespread abuse on the PICU  
28 Ward. I recall during this meeting that I had said "I  
29 realise that the ward is a dangerous place". Having



1 said very little during this meeting, Dr. H50 spoke up  
2 very defensively, replying that the ward was not a  
3 dangerous place. This was contrary to what I had been  
4 constantly told and was the reason given to me as to  
5 why I was not allowed on the ward. Dr. H50 also  
6 advised me that I should have been allowed on to the  
7 ward and also in to see Timmy's bedroom.

11:55

8  
9 "I had also been told by ward staff that I was not  
10 allowed to take photos of Timmy. During this meeting  
11 Dr. H50 also advised me this was not the case. It took  
12 until February 2019 for me to be eventually allowed in  
13 to see Timmy's bedroom, which was a year after this  
14 meeting took place.

11:55

15  
16 I recall that the Director of Learning Disability of  
17 Belfast Trust and author of the A Way to Go Report came  
18 out to my home in and around September/October 2018.  
19 My sister Catherine and my two sons were also in  
20 attendance at this meeting. The author of the report  
21 came across as a caring person. Prior to that, I  
22 remember being at a group parents meeting in Muckamore  
23 in 2018 where the author of the report was speaking and  
24 she said that she had met with all of the families of  
25 the abused patients at Muckamore. I told her that she  
26 had not met with me. I think this is the reason for  
27 her subsequent visit although I do not know. We were  
28 offered counselling by the Director of Learning  
29 Disability at that meeting which would be paid for by

11:55

11:55

11:56

1 the Belfast Trust. I advised her I would like to take  
2 up the offer of counselling, and it took her six months  
3 to organise it for me. My sister Catherine and my two  
4 sons declined the offer of counselling".

5 CHAIRPERSON: You don't need this, do you?

11:56

6 (Thunderstorm overhead). Let's just take a moment.  
7 what we'll probably do, because it is a little way to  
8 go, we will probably take a break after Mr. McEvoy has  
9 finished your statement. We'll probably take a break  
10 and carry on after that because I realise that even  
11 listening to this is probably quite difficult for you.

11:57

12 A. It is. And listening to that is very difficult.

13 CHAIRPERSON: That doesn't help either.

14  
15 Okay, Mr. McEvoy.

11:57

16 MR. MCEVOY: "I was advised by H12, the day care  
17 manager in charge, on 22nd November 2018, that Timmy  
18 was receiving a foot massage in Muckamore and one of  
19 the staff from Autism Initiatives, who later was  
20 promoted to manager of the house which Timmy was  
21 resettled into, reported that a staff member swore at  
22 Timmy. Apparently during the foot massage, another  
23 Muckamore staff member went over to the member of staff  
24 who was carrying out the foot massage and said "Get his  
25 fucking shoes out because we need to get this fucker  
26 out of here". He was referring to Timmy. A person  
27 also advised that the male member of staff kicked  
28 Timmy's foot off the footstool. H12 told me this  
29 safeguarding matter was dealt with internally and it

11:57

11:57

1 was really nothing other than the ward staff having a  
2 bad attitude. He said that the ward staff should not  
3 have used the bad language and that he had been spoken  
4 to and it would not happen again. I was very annoyed  
5 about this but H12 advised me that it could not be 11:58  
6 taken any further because there were no independent  
7 witnesses, which I did not understand because the  
8 incident had been witnessed and reported by a staff  
9 member of Autism Initiatives and he was independent. I  
10 received a letter from the Belfast Trust dated 3rd 11:58  
11 January 2019 confirming this. I attach a copy of the  
12 letter from the Belfast Trust dated 3rd January 2019 at  
13 Exhibit 11. I complained to the Director of Learning  
14 Disability by email dated 13th January 2019 regarding  
15 this, but I did not escalate the incident any further 11:59  
16 and I heard nothing more about it. I attach a copy of  
17 my email to the Director of Learning Disability dated  
18 13th January 2019 at Exhibit 12.  
19  
20 "In the middle of 2018 the seclusion room at Muckamore 11:59  
21 was transformed and a photo was sent to the BBC Nolan  
22 Show. Richard Pengelly and Sean Holland, Chief Social  
23 Worker in the Department of Health at that time, came  
24 to Muckamore in and around the end of 2018. I recall  
25 another patient's father and his wife attended, and my 11:59  
26 sister Catherine and I attended. I met another mother,  
27 whom I believed to be P55's mother, who advised me that  
28 she had taken her son out of Muckamore. At that  
29 meeting, Richard Pengelly guaranteed all families would

1 be out of Muckamore by the end of the year. He  
2 apologised for the abuse in a prewritten statement  
3 which he read out to the families. He did not  
4 understand families with disability members and he  
5 lacked empathy and did not come across at all sincere 12:00  
6 or knowledgeable at that meeting.

7  
8 "I recall receiving a call in 2018 from a female nurse  
9 in Muckamore - I do not recall her name - advising me  
10 that she had a message for me from H251 on patient 12:00  
11 safeguarding in Muckamore. I recall it was over the  
12 weekend. She advised me that H251 had received a call  
13 from the Irish News advising that they had an anonymous  
14 caller making inquiries regarding Timmy's finances.  
15 This really startled me that some anonymous person must 12:00  
16 have information about Timmy's finances and they took  
17 this to the press. I was advised by this nurse that  
18 H300, a Muckamore Services Manager, would give me a  
19 call after the weekend. H300 did call me. I relayed  
20 my concern to him and he did not really seem too 12:01  
21 bothered or interested. He seemed to sneer at me  
22 during this call. I advised him that I would contact  
23 the PSNI and he did not really seem to care and had the  
24 view that he did not know why I would be concerned  
25 about this. I did telephone the PSNI and I was advised 12:01  
26 by them that it was UTV calling the Irish News to ask  
27 if they had any information on Timmy's finances;  
28 therefore the call was not anonymous. I never received  
29 any follow-up from H251 or H300 at Muckamore regarding

1           this matter.

2  
3           "I also recall when I requested copies of Timmy's  
4           medical notes, which was in and around the middle of  
5           2018, there was a delay in these being provided. I did 12:01  
6           not receive them until 2019. H290 was the Assistant  
7           Service Manager at Muckamore. She was the person who  
8           was eventually tasked with having Timmy's medical notes  
9           released to me. I recall that I attended about three  
10          different meetings where she was present and she came 12:02  
11          across as a very dismissive person. This was not  
12          exclusive as to how she treated me. She was a prickly  
13          character. I remember during one of the meetings, she  
14          said to me something like "You do not know what you are  
15          talking about, you're Timmy's mother". I was 12:02  
16          specifically looking for Timmy's care plan. I raised  
17          this during one of the Muckamore Departmental Assurance  
18          Group meetings, and the Director of Nursing at the  
19          Department of Health at the meeting said she would get  
20          this sorted for me. I was on my way to the car having 12:02  
21          just left the meeting when I received a call from H290  
22          saying that I had to return to Muckamore straightaway  
23          as the Director of Nursing at the Department of Health  
24          told her that she had to make sure that I received  
25          Timmy's medical notes and care plan. 12:02

26  
27          "I recall that I filled in a form with H290 that day  
28          and signed it, and she said that it had to go into the  
29          post. I also had to provide proof of my

1 identification, which was ridiculous because Timmy had  
2 been a patient in Muckamore since 2012 and everybody  
3 knew who I was. I did, however, provide my driving  
4 licence. I do not recall what happened to that request  
5 but I recall that I had to fill in the same form on two 12:03  
6 additional occasions. It led me to believe that  
7 Muckamore were reviewing the notes before providing  
8 them to me and I wondered if they were extracting  
9 information from the notes. I do not have any proof of  
10 this, of course. 12:03

11  
12 "I eventually received the boxes of records well over  
13 six months later. I recall my advocate from Bryson  
14 House calling me and saying that the boxes were ready  
15 to be collected, and my sister, the advocate and I 12:03  
16 attended Muckamore and physically took the boxes away.  
17 There was a girl called 407 who worked in the  
18 administration building in Muckamore - I do not  
19 remember her surname - who was making the boxes  
20 available for us. I remember she was very rude, so 12:04  
21 much so that I made a verbal complaint to Dr. H50. He  
22 did not have any answer for me.

23  
24 "During one of the resettlement meetings in and around  
25 January 2019 at Muckamore, attended also by Autism 12:04  
26 Initiatives, someone at the meeting, I do not recall  
27 who it was, suggested that Timmy may need three-to-one  
28 care. This seemed to spook Autism Initiatives as they  
29 were preparing the resettlement on the basis of

1 two-to-one care. After the meeting I e-mailed the Head  
2 of Learning Disability at Belfast Trust on 11th January  
3 2019 regarding this. I attach a copy of my email  
4 exchange with her at Exhibit 13. She rang me on a  
5 Saturday, complaining that every time a resettlement is 12:04  
6 being arranged out of Muckamore, somebody always says  
7 something to try and put a spanner in the works. H287  
8 then telephoned me on the Monday also irate about this,  
9 and she told me that she would sort it out, which she  
10 did. After that, Timmy was back to two-to-one status. 12:05  
11 The resettlement did proceed in March 2019 and it went  
12 really well initially for the first month. Timmy was  
13 in 43 Glen Road, Belfast, which was a bungalow. Timmy  
14 was on the ground floor with an en suite. Timmy seemed  
15 to be really happy and settled, and his brothers and I 12:05  
16 were really happy too. We were able to visit Timmy and  
17 sit at the table while he was having his food, which  
18 would not have been allowed at Muckamore. His food was  
19 good and his bedroom was really nice. He was receiving  
20 two-to-one care and he knew the manager in charge of 12:05  
21 the house on Glen Road."

22  
23 Then, Dawn, in the following paragraphs, I am going to  
24 summarise them but what you do for the Inquiry is you  
25 give some detail as to how that resettlement progressed 12:05  
26 in the Glen Road. Then taking up then, if I could, at  
27 paragraph 88, eight which is at the bottom of page 39.  
28 Having described then how things started to develop  
29 during the resettlement, you then tell us:

1  
2 "In June 2019 I received a call from the manager at  
3 Autism Initiatives in the facility on the Glen Road  
4 asking me to come and collect Timmy. He told me Timmy  
5 was in the car all day and flipped out when he tried to 12:06  
6 put him to bed. Belfast Trust had failed Timmy as they  
7 were not checking his care under this resettlement. I  
8 advised the manager that I was not coming to get Timmy.  
9 Again, on 27th June 2019, I received another call from  
10 the manager of Autism Initiatives advising that they 12:06  
11 had phoned a taxi to collect Timmy to take him on his  
12 own to Muckamore where he would be left outside  
13 Muckamore in the middle of the grass area. Thankfully  
14 this did not happen. However, a social worker called  
15 H416 called out to the Glen Road house to see what the 12:07  
16 situation was. She phoned me to say staff at Glen Road  
17 locked Timmy into his bedroom and were setting food  
18 plates on the floor without cutlery, then relocking the  
19 door. She thought this was acceptable but it sounded  
20 to me like they were treating Timmy like a dog. His 12:07  
21 pad was unchanged throughout this period and Timmy is  
22 doubly incontinent. Muckamore sent a number of nurses  
23 to the Glen Road, including H282. Glen Road staff  
24 would not let the Muckamore nurses into the house  
25 initially; the manager called the PSNI. Muckamore 12:07  
26 spoke to the PSNI and the nurses were allowed in. They  
27 cleaned Timmy up as he had not been cared for or  
28 changed for a number of hours, and the Muckamore nurses  
29 took Timmy outside. The manager questioned the nurses



1 and said this was unsafe. However, the Muckamore  
2 nurses were happy to take Timmy down the lane, into  
3 their vehicle and back to Muckamore. The Muckamore  
4 staff did a good job that evening.

5  
6 "I had a meeting with the Director of Learning  
7 Disability in the Belfast Trust and H406 at Muckamore  
8 the following day. I was glad that Timmy was back in  
9 Muckamore. He was admitted to Cranfield 2 Ward. On  
10 the Director of Learning Disability and H287 joining 12:08  
11 Muckamore in and around 2018, things were changing for  
12 the better. The Director of Learning Disability left  
13 in 2019 and there was a succession of different people  
14 in teams. They all had good intention but the tail was  
15 wagging the dog. The ward staff were continuing the 12:08  
16 bad practice and were not listening to those in senior  
17 positions."

18  
19 Then there is a mention of -- I think there is a  
20 mention of a car which had been purchased on Timmy's 12:08  
21 behalf. We'll move past that and pick up at 92 on page  
22 41.

23  
24 "I recall attending a meeting in a hall in Muckamore  
25 sometime in 2019 when Robin Swann MLA, the Northern 12:09  
26 Ireland Minister of Health, attended. I expressed  
27 during this meeting how worried I was about my son in  
28 Muckamore and the current quality of his treatment.  
29 The Director of Unscheduled and Acute Care at Belfast

1 Trust and H315, divisional nurse, who attended that  
2 meeting, neither of whom I had met before, came up to  
3 me following the meeting asking why I was so concerned.  
4 We had a meeting later on that week with the Interim  
5 Director of Learning Disability and Mental Health 12:09  
6 Services within the Trust. My sister Catherine and  
7 both advocates from Bryson House attended this meeting  
8 also. During this meeting, I advised those in  
9 attendance that I knew absolutely nothing about Timmy's  
10 life because I could never get through on the phone 12:09  
11 when I called the ward. No one ever answered the  
12 phone. We had a discussion about this, which lasted  
13 one hour, and I asked to be given a daily phone call  
14 from the staff at Muckamore during this meeting. I  
15 also advised that it would be good to have some notes 12:10  
16 available so that I would know what Timmy's day looked  
17 like, such as he ate this for breakfast and he did  
18 whatever next. I recall the Director of Unscheduled  
19 and Acute Care saying that I was not asking for  
20 anything out of the ordinary and that I would receive a 12:10  
21 daily update. After that, I received daily updates  
22 from ward staff on Timmy's day, and a monthly meeting.  
23  
24 "Everything in Muckamore seems to be about process and  
25 writing up the correct paperwork. There is little 12:10  
26 emphasis on the actual patients. As I noted earlier in  
27 my statement, Timmy had a diet sheet with healthy meals  
28 and a treat twice per week, which is a balanced diet.  
29 Therefore, the paperwork was correct but the staff were

1 clearly not following the diet plan given the weight  
2 Timmy had put on whilst in Muckamore. A lot of the  
3 staff were related in Muckamore and they seemed to  
4 change roles very quickly. One day they were  
5 responsible for one thing and the next day they were 12:11  
6 responsible for something else. So, I never really  
7 knew who I had to speak with to raise concerns about a  
8 particular topic because the personnel changed so  
9 often. I recall in more recent times asking H315 to  
10 provide me with a personnel chart with everyone's roles 12:11  
11 and who everyone was. This was put into a family fact  
12 sheet with very small type but it was not on the format  
13 I was expecting. Nurse H315 advised me that she would  
14 redo this but she never did.

15  
16 "There is no extraction fan or window in Timmy's en  
17 suite bathroom at Muckamore. There is absolutely no  
18 ventilation at all. I think this is appalling. I  
19 recall that I raised this with the Director of Learning  
20 Disability, H287, and the nurses on the ward and I 12:12  
21 asked how this was building control compliant. None of  
22 them seemed to care or think that it was a problem. If  
23 Timmy had a bowel movement, the stench would stay in  
24 his bedroom because there is no window or extractor fan  
25 to remove the smell. In July 2019 I purchased a Dyson 12:12  
26 Air Purifier, which is a bladeless fan, for Timmy's  
27 bedroom at quite an expense to me. I was liaising with  
28 the Director of Learning Disability for a long time to  
29 have this installed by the Estates team in Muckamore.

1 Initially they just put the fan in the room but Timmy  
2 bit through the control and therefore it needed to be  
3 installed in a box made by a carpenter. It took six to  
4 eight months for this to be installed. Apparently  
5 Timmy and the staff now all love the fan, especially in 12:13  
6 the summer when it can get quite hot. The filter needs  
7 changed every six months and I always have to ask the  
8 staff on the ward to do this on a number of occasions  
9 before the filter actually ends up being changed. I  
10 think this is essential for Timmy's health. 12:13

11  
12 "On 6th August 2019 I was invited to join a group  
13 called Muckamore Departmental Assurance Group, MDAG, in  
14 response to the abuse in Muckamore by carer coordinator  
15 H413 by email. I attach a copy of that email dated 6th 12:13  
16 August 2019 at Exhibit 15. I thought long and hard  
17 about it and I did agree that I would join. It has  
18 been a good networking group and all five Trusts are  
19 represented. Sean Holland, Head of Social Work in the  
20 Department of Health, chairs the group meetings once a 12:13  
21 month initially and now every other month. I recall on  
22 a number of occasions, Sean tried to make out that I  
23 was at this meeting to represent the families of  
24 patients at Muckamore. I had to correct him on more  
25 than one occasion to make it clear that I was only 12:14  
26 there to represent myself and Timmy and no one else.

27  
28 P90's sister was also in MDAG. She was there to  
29 represent the Society of Parents and Friends of

1 Muckamore, and her brother, who is also a patient in  
2 Muckamore. I recall asking if my sister Catherine  
3 could join the MDAG but this was pointblank refused by  
4 the Department of Health. I wasn't given a reason why.

12:14

6 "I recall that H287 set up a group which Catherine and  
7 I were invited to attend. This was for the purpose of  
8 achieving better communication and to allow relatives  
9 to make suggestions. We did make some suggestions,  
10 such as having notes available regarding Timmy's day.

12:14

11 H287 said this was a good idea, but it was never  
12 implemented. I also suggested that it would be good if  
13 the staff had business-like cards with their title on  
14 them and contact details. This was turned down and  
15 H287 advised this is not something they would be able  
16 to do. There were about two of these meetings and then  
17 they stopped happening because H287 left. I felt these  
18 meetings were paying lip service to show that Muckamore  
19 engage had with families but they never acted upon any  
20 of the suggestions, none of which were unreasonable.

12:15

12:15

21  
22 "There was also a carer's forum set up around the same  
23 time. This was also with the view to aid communication  
24 between staff at Muckamore and the families, but no  
25 change was implemented as a result of this forum.

12:15

26  
27 "The union representative of the RQIA on MDAG, I recall  
28 just after one of our meetings I asked her if I could  
29 speak to her and I asked her why no one from the RQIA

1 had spoken to me to ask what I had to say about  
2 Muckamore. She replied it was up to me to approach  
3 them and handed me a business card with contact details  
4 and walked off. This was the first personal contact I  
5 had with RQIA. In and around January 2020, I had a 12:16  
6 subsequent meeting with two representatives of the RQIA  
7 at their offices. The meeting lasted for about three  
8 hours and I talked for most of the time about my  
9 experiences in Muckamore. My sister Catherine and my  
10 Bryson House advocate attended this meeting with me. 12:16  
11 The RQIA were conducting an audit into Muckamore at  
12 this time. I asked Muckamore to see one of the  
13 protection plans, which they showed me but it was very  
14 unprofessional, it was like something a child had put  
15 together. It was not signed and it had amalgamated two 12:16  
16 safeguarding incidents into one. If the Inquiry were  
17 able to get a copy of the minutes of that meeting, it  
18 would be helpful to the Inquiry.

19  
20 "The outcome of this gruelling meeting with RQIA was 12:16  
21 that Muckamore got a full tick and clean bill of health  
22 from RQIA. I found that the RQIA did not listen to me.

23  
24 "In February 2020, two women came to my home to discuss  
25 resettlement with Timmy. Their names were H299 and 12:17  
26 H408, and they were both resettlement officers at  
27 Muckamore. I gave them tea and buns during our  
28 meetings. In the summer of 2020, which was during the  
29 Covid lockdowns, visitors had to sign in and sign out

1 with the Muckamore at the building where the swimming  
2 pool is located when we were visiting. After I signed  
3 in one day, I got speaking to a male pool attendant.  
4 His daughter had also been in Muckamore. I do not  
5 recall his name, but he started talking to me about the 12:17  
6 abuse in Muckamore. He happened to mention the name  
7 H299, and I asked him who she was. He advised me that  
8 H299 was H397's wife. I was so shocked when I heard  
9 this. To think this woman was out at my home and I  
10 gave her tea and buns and she is the wife of H397 in 12:18  
11 relation to whom there are allegations in respect of  
12 Timmy. I was absolutely disgusted and I felt violated  
13 by this. I made a complaint to the Interim Director of  
14 Learning Disability and H315 regarding this by way of  
15 email dated 27th August 2020. I sent further emails 12:18  
16 on 1st September 2020, and on 8th September 2020 as no  
17 one responded. I eventually received an acknowledgment  
18 of the complaint by email from the Complaints  
19 Department at the Belfast Trust on 9th September 2020.  
20 I attach copies of the email chain at Exhibit 16. 12:18

21  
22 "This pool attendant seemed to have a lot of  
23 information about the abuse and I think it would be  
24 worthwhile for the Inquiry to make contact with him.  
25 Unfortunately I cannot recall his name. However, he 12:19  
26 was the only male pool attendant so it should not be  
27 difficult to identify him.

28  
29 "I recall contacting Antrim Police Station on one

1 occasion in February 2020 and I spoke to a police  
2 officer" whom you name. "I was calling regarding an  
3 assault on Timmy. This police officer was very  
4 disinterested in what I had to say. His view, which he  
5 expressed to me in no uncertain terms, was that the 12:19  
6 patients in Muckamore lacked capacity and therefore  
7 there was no point in investigate being any alleged  
8 assault. He advised me that the police were very busy  
9 and told me that he was just back from a domestic abuse  
10 case which he had to attend on his own because there 12:19  
11 was no one else available to go with him. He was  
12 insinuating that this domestic abuse call was much more  
13 important than what I was calling to report. He  
14 advised me that the staff in Muckamore have a very  
15 difficult job, and he appeared to be siding with the 12:19  
16 staff. I spoke to another police officer about this" -  
17 I think this is one of the police officers from the  
18 investigation - "about this, and he advised me that I  
19 should make a complaint, which I did to the police  
20 station. The Chief Inspector of Antrim Police Station 12:20  
21 telephoned me to apologise and said the police officer  
22 to whom I had originally spoken had been given a  
23 serious talking to.

24  
25 "At a later date, I complained to the Police Ombudsman 12:20  
26 by telephone. I advised the Police Ombudsman Office  
27 was that my concern was there was collusion between  
28 Antrim Police Station and Muckamore. I was advised  
29 during the telephone call - I do not remember the



1 person's name - that they noted my comments and  
2 acknowledged them.

3  
4 "With all of the abuse and neglectful treatment Timmy  
5 has received over the years in Muckamore, I want him to 12:20  
6 be resettled into other accommodation. In 2020 I  
7 lodged a judicial review against the Belfast Health and  
8 Social Care Trust and the Department of Health, with  
9 the focus of having Timmy resettled out of Muckamore.  
10 On 26th January 2022 Mr Justice Rooney allowed my 12:21  
11 judicial review and declared that ongoing failure of  
12 the first-named respondent, the Department of Health,  
13 to provide the applicant, Timmy, with a suitable  
14 placement within a reasonable period of time is  
15 unlawful and incompatible with their obligations 12:21  
16 pursuant to Section 6 of the Human Rights Act 1998 and  
17 Article 8 of the European Convention on Human Rights.  
18 The judge ordered that the Belfast Trust and the  
19 Department of Health have until late 2024 to resettle  
20 Timmy. I attach a copy of the court order dated 26th 12:21  
21 January 2022 at Exhibit 17."

22  
23 The next paragraph, Dawn, then touches again on matters  
24 which are covered by the memorandum of understanding,  
25 as does the paragraph after that, so 101 and 102. 12:21  
26

27 would it be possible to take up at paragraph 103 then  
28 at the bottom of page 46.  
29

1 "I recall attending Muckamore on a prearranged visit to  
2 see Timmy on Boxing Day 2021. I bought Timmy's brother  
3 Ian and Ian's girlfriend, Jade. Timmy was presented to  
4 us in such a poor state. His pad was clearly full and  
5 had not been changed in some time. He had not been 12:22  
6 given his medication and looked very neglected. I made  
7 a formal complaint by email to H251, the designated  
8 Adult Protection Officer at Muckamore, on 29th December  
9 2021. H251 did respond on 30th December 2021 to advise  
10 that she would refer the matter to the PSNI and also 12:22  
11 decide how best to deal with the complaint within  
12 Muckamore. To this day, I have not received  
13 confirmation of the outcome of the investigation of my  
14 complaint. I attach copies of my email exchange with  
15 H251 at Exhibit 18. 12:23

16  
17 "In and around autumn 2021, RQIA held a virtual  
18 meeting, and I was invited to attend. It was to be a  
19 discussion with the carers of patients in Muckamore.  
20 H282 provided me with the online link to the meeting, 12:23  
21 which I thought was unusual given that the meeting was  
22 organised by the RQIA. I spoke up at this meeting and  
23 complained that I was concerned about safeguarding  
24 issues at Muckamore. I recall there were two other  
25 carers at the meeting, and one, I do not know who it 12:23  
26 was, completely agreed with me. I was told at the  
27 meeting that my concerns would be investigated and that  
28 someone would get back to me. A number of months  
29 passed and I received a call on 23rd December 2021 from

1 H417, a social worker from the Belfast Trust. She had  
2 attended the meeting with RQIA. I remember I was  
3 standing in my driveway ready to get into my car, with  
4 a bunch of flowers that I was going to take to my aunt.  
5 H417 told me that she was following up on my complaints 12:24  
6 and advised me that I was the only person saying  
7 anything negative. She told me that I was the only  
8 person giving negative feedback and that all the other  
9 families were happy. I felt I was being gaslighted yet  
10 again. She said, "Maybe your standards are too high." 12:24  
11 I was shocked by this statement and I replied that my  
12 standards are high but I expect the Belfast Trust's  
13 standards should be even higher. I advised her that I  
14 never received a follow-up from RQIA and they told me  
15 that they would follow up with me after the meeting. 12:25  
16 H417 told me she was calling on their behalf also,  
17 which did not make sense because the two bodies are  
18 supposed to be completely independent. She told me  
19 that the other families were happy, and I suggested to  
20 her that maybe the other families are too afraid to 12:25  
21 speak up. She replied that perhaps their loved ones  
22 were easier to deal with than Timmy behaviour-wise.  
23 Again, I could not believe she was saying this to me  
24 and replied that every patient had a bespoke package of  
25 care. I finished the call saying that she had angered 12:25  
26 me and I no longer wanted to continue with the  
27 discussion.

28  
29 "The RQIA did eventually apologise to me for not

1 following up directly after that online meeting. I was  
2 speaking to the head of RQIA during an unannounced RQIA  
3 inspection at Muckamore in July 2022. She said that  
4 H417 should not have said that she was calling on  
5 behalf of the Trust and RQIA. I raised the discussion 12:26  
6 that I had with H417 at the Muckamore Assurance Group  
7 meeting in February 2022 and advised that no one  
8 apologised to me for what H417 had said to me. As with  
9 most things that happened in Muckamore, no one seemed  
10 to care. I recall that the Director of Social Work at 12:26  
11 the Belfast Trust was asked by Sean Holland to comment  
12 on this, and she said she would get back to me. An  
13 appointment was made by her secretary but her first  
14 available date for a meeting was in June 2022. The  
15 first meeting was on Zoom and the second meeting was at 12:26  
16 Knockbracken Healthcare Park. The Director of Mental  
17 Health and Learning Disability Services attended the  
18 meeting. She did apologise to me. There was an action  
19 plan to address a number of issues around  
20 unprofessional practice brought to their attention by 12:27  
21 my sister Catherine and me.

22  
23 "Timmy's communication skills have deteriorated  
24 dramatically since he went into Muckamore. When he was  
25 in school, he used PEC cards as a form of 12:27  
26 communication. When Timmy went into Muckamore in 2012,  
27 I asked if he was having speech therapy. The response  
28 I received from the ward staff is that Timmy did not  
29 need it because he was non-verbal, but speech therapy

1 is well beyond how someone speaks, it is about general  
2 communication. The staff have said from he went into  
3 Muckamore in 2012 right up to the current day that the  
4 staff know Timmy well and know what he wants and  
5 therefore they do not need to use PEC cards, but this 12:27  
6 does not help Timmy communicate with strangers. What  
7 will Timmy do when he leaves Muckamore and is in the  
8 community to communicate, if he ever will.

9  
10 "There have been hundreds of safeguarding incidents 12:28  
11 involving Timmy in Muckamore. I have attached a report  
12 at Exhibit 19 which details the incidents during the  
13 period of July 2021 to July 2022 of which there are 17  
14 entries. H240, Designated Adult Protection Officer, is  
15 responsible for staff on patient safeguarding at 12:28  
16 Muckamore. I had a meeting with her in 2022 to discuss  
17 safeguarding. She advised me that if there is a  
18 safeguarding incident in Muckamore, she reviews what  
19 happened and checks to see if there was a breakdown in  
20 the application of the policy of the hospital. If 12:28  
21 there is no policy on the incident, then it is her  
22 responsibility to write it and deliver it to the  
23 hospital. She advised me that it is not her  
24 responsibility to check that the hospital has  
25 implemented the policy. I remember saying to her that 12:28  
26 her job therefore is not preventative, safeguarding  
27 only becomes involved after the event. I think this is  
28 ridiculous. I recently raised this with H234,  
29 divisional nurse at Muckamore, and I advised that there

1 should be a joined-up approach but she advised me that  
2 safeguard and the nursing staff are very much two  
3 different teams. It is always the tail wagging the dog  
4 in Muckamore.

5  
6 "I recall being told by H409, Assistant Service Manager  
7 at Muckamore, that there is a real disconnect between  
8 the management and the ward staff. You are told that  
9 the internet and telephone reception is very poor in  
10 Muckamore, we are told that if someone is on a Teams  
11 call, the internet for the rest of the hospital does  
12 not work. I find it very hard to get through on the  
13 telephone when I call. I am told that if someone is on  
14 the phone on the ward, then the other extensions in the  
15 hospital cannot be used. I have requested video calls  
16 with Timmy, especially during the Covid restrictions  
17 when I was not allowed to visit, and also when Timmy  
18 has tested positive for Covid, which has been three  
19 times now, but staff say that they cannot work the  
20 technology. This is nonsense and they simply cannot be  
21 bothered.

22  
23 "I think that I was groomed by the staff at Muckamore.  
24 They continue to make sure that I must be grateful for  
25 the work that they are doing and I feel an obligation  
26 to thank them even for the smallest of tasks. I think  
27 it is because Timmy is so vulnerable and they are  
28 caring for him, so I have to be nice to them in the  
29 hope that in turn they would be nice to Timmy. When

1 the staff member tells me something, I have to believe  
2 them, there is no other alternative.

3  
4 "I have found all of the information about the abuse  
5 and neglect of Timmy to be harrowing and devastating, 12:30  
6 not only for myself but thinking of Timmy and what my  
7 wee son has had to endure as a patient in Muckamore  
8 where he should have received person-centered care,  
9 compassion and protection for a person with complex  
10 needs. I am fully aware that Timmy has issues and can 12:31  
11 have a meltdown and present with challenging  
12 behaviours. There was no kindness, compassion or even  
13 basic human decency in the way he has been treated,  
14 and, in my opinion, is continuing to be treated in  
15 Muckamore. 12:31

16  
17 "Timmy and I have been and still are disrespected and  
18 marginalised at every turn. Our wishes, aspirations  
19 and needs means nothing in the face of the process  
20 which is Muckamore. Throughout Timmy's time in 12:31  
21 Muckamore, it seems that anything that happens to him  
22 is always explained or interpreted in terms of it being  
23 Timmy's fault. For example, it is his fault that  
24 another patient hit him because he did not get out of  
25 the way quickly enough. There are times when I feel 12:32  
26 the whole infrastructure is set up to make any query,  
27 complaint or even asking for basic information to be a  
28 long, drawn-out process which is physically and  
29 mentally exhausting so that it grinds you down and

grooms you into defeat and dismissiveness.

"As a family, we have carefully discussed picking our battles, given the volume and nature of our multiple concerns about Timmy's care and circumstances over the years, as to take on all of these issues is overwhelming and too traumatic when the odds are so clearly stacked against the patients and the families. There is a lot of talk about the community of Muckamore. However, I and Timmy's brothers have only met some families after the abuse was uncovered. Before the public discovery of abuse, I rarely met another family but if I did, the interaction was abruptly interrupted and curtailed by staff. On reflection, this was a very controlled, clinical environment which was not family-friendly. This coercive atmosphere makes each family feel isolated and plays into their narrative of we are the only ones that have ever asked the question. Divide and conquer appears to be the staff motto.

"Families are already vulnerable as we are fully aware that Muckamore has total control over our loved ones. Any time I have raised this as a concern, there has been a general dismissive attitude. Unfortunately, we now know that this was well-founded and may still be true today. Since the abuse on CCTV was uncovered, I thought that standards of care, staff behaviours and attitudes would improve, and they did for a while.



1 Unfortunately, it appears that Muckamore is reverting  
2 back to type and I hear repeated comments of "Things  
3 have always been done this way". Surely they should  
4 realise that this is a damning sentence. There was  
5 radical change in the collective management and  
6 leadership of Muckamore, and intense scrutiny from  
7 RQIA. However, it does not appear to have any impact  
8 on the day-to-day operations.

12:34

10 As time goes on, I have heard less from the Belfast  
11 Trust. It is now six years since the abuse was  
12 uncovered and I think that we have not had credible  
13 answers and an acknowledgment of the damage and  
14 devastation this has caused to all our lives. It has  
15 been very traumatic trying to come to terms with this,  
16 particularly as I was being advised by the PSNI that  
17 the number of incidents against Timmy were  
18 considerable. I believe, as Timmy's mother, his  
19 brothers, Graham and Ian, and his aunt Catherine are  
20 Timmy's voice and advocates. No one can justify or  
21 cover up the inhumane and degrading treatment and abuse  
22 he has suffered in Muckamore. We are, hopefully,  
23 planning for Timmy's successful resettlement back into  
24 the community. We as a family are very distressed and  
25 traumatised about how Timmy has been abused and totally  
26 let down in all aspects of his care. Timmy's basic  
27 human right not to be exposed or subjected to any form  
28 of inhumane, degrading or abusive treatment in a  
29 statutory hospital environment was not upheld by

12:34

12:35

12:35

1 Muckamore, the Belfast Trust or the Department of  
2 Heal th.

3  
4 "Muckamore still wants to be a place apart. It is set  
5 up that way and, realistically, it makes life easier 12:35  
6 for the Belfast Trust if this marginalised, extremely  
7 vulnerable community can be quietly discounted,  
8 silenced and ignored. Perhaps their needs are too  
9 complex or too expensive to treat with professionalism,  
10 compassion and in a human rights compliant manner. I 12:36  
11 would always want Timmy to be treated with kindness and  
12 compassion but I now know that this is too much to  
13 expect. Now, all I ask is that my son be treated with  
14 basic decency and compassion, as kindness is long  
15 forgotten and seemingly irrelevant in the care, 12:36  
16 protection and management of human beings with a severe  
17 intellectual impairment.

18  
19 "I have a large volume of documents being medical  
20 reports, medical notes and email exchanges with 12:36  
21 Muckamore and the Belfast Trust concerning Timmy, which  
22 I am happy to provide to the Inquiry if the Inquiry  
23 would like to review the same."

24  
25 Then, Dawn, you have provided a declaration of truth at 12:37  
26 the very end, page 53. As I asked you at the start,  
27 then you have confirmed your signature and date.

28 A. Yes.

29 CHAIRPERSON: Right. well, Dawn, first of all, thank

1 you very much for a very full and detailed statement.  
2 I recognise just sitting there listening to that must  
3 have brought back to you a lot of unpleasant emotions  
4 and thoughts. I think the best thing for us to do now  
5 is to take a break and to give you a breath of fresh 12:37  
6 air, if it is not too grim outside, but somebody will  
7 look after you from the Inquiry staff. We'll come back  
8 at 1.45, so we'll have just over an hour's break.

9  
10 Mr. McEvoy has probably explained it to you, he is not 12:37  
11 going to go through the whole thing again but he is  
12 going to alight on various parts of your evidence that  
13 he thinks will be of particular interest to the  
14 Inquiry, and also to give you a chance to expand on any  
15 areas that you want to expand on. All right. 12:38

16 A. Right. Thank you.

17 CHAIRPERSON: We'll take a break now until 1:45.

18  
19 THE INQUIRY ADJOURNED FOR LUNCH AND RESUMED AS FOLLOWS:

20 12:38  
21 CHAIRPERSON: Thank you. Sorry for the slight delay.  
22 All right.

23 MR. MCEVOY: Thank you, Chair.

24  
25 Dawn, on behalf of the Inquiry team, thank you for a 13:53  
26 vivid and compelling witness statement. You have  
27 discussed in that statement a number of themes that are  
28 of interest to the Inquiry and touch on the terms of  
29 reference. If it's all right with you, I'd like to

1 talk about some of those with you. There are about  
2 five or six in total, and you have given us a lot of  
3 detail on them. As I go through, I'll give you an  
4 opportunity just maybe to say anything more you want to  
5 about those particular issues.

13:54

6  
7 The first is that of MAPA. You described back in July  
8 2011, I think before Timmy would have gone into  
9 Muckamore for the second time --

10 A. Yes.

13:54

11 6 Q. -- actually going and getting some MAPA training, which  
12 was arranged for you?

13 A. It was wonderful. It really, really -- what's was the  
14 word, empowering.

15 7 Q. Go ahead.

13:54

16 A. Just my sister, Cathy, and I went down. It wasn't Anne  
17 Brannigan that took the course, she was the one that  
18 organised it for us. I think there were two men and a  
19 women. Anyway, they were wonderful. You know, simple  
20 things. They weren't teaching us MAPA, I don't  
21 think --

13:55

22 8 Q. Okay.

23 A. -- that the staff would be taught, it was more how to -  
24 and I won't stand up - but, you know, standing  
25 sideways, if Timmy is coming to try and bite you, you  
26 know, it's less antagon -- and explained what the  
27 reasons behind it were. He can't attack your vital  
28 organs and it's less combative.

13:55

29 9 Q. Yes?

1 A. Me looking at Timothy, it could be perceived as  
2 aggressive. So that whole session, I think it was a  
3 whole day, was really empowering; very, very helpful.

4 10 Q. Sometimes during the course of the Inquiry, we've heard  
5 the term "deescalation" or "deescalation techniques" 13:55  
6 being used.

7 A. Yes.

8 11 Q. You said a moment or two ago, as far as you are aware,  
9 if I understand you correctly it's maybe different from  
10 the MAPA training that might have been given to staff? 13:56

11 A. You know, looking back on it, I've discovered I don't  
12 think that is quite MAPA --

13 12 Q. All right.

14 A. -- the way the staff are taught. It is a MAPA with  
15 regard to family members. 13:56

16 13 Q. Yes.

17 A. Which I've asked for since then, but they don't do that  
18 any more. They don't interact with families, teaching  
19 them that sort of thing. I think that would have been  
20 so helpful to everybody. 13:56

21 14 Q. Of course, as you say in your evidence, that's before  
22 the Timothy went into Muckamore?

23 A. Yes, yes. To try and prolong -- because the social  
24 worker -- I don't think I mentioned her name, I don't  
25 think she's there. 13:56

26 15 Q. Don't worry.

27 A. The social worker at that time in the community, I  
28 asked for help and she said, I'm sorry, there is  
29 nowhere for Timmy, and I said but he went into that

1 Coniker back then, and she said yeah, there's nowhere  
2 like that any more. And I said but I'm not asking for  
3 him to go somewhere and stay there, just to go fix him  
4 and return him to me. Then there is nowhere for him.  
5 She said, you know, if he comes to try and bite you, 13:57  
6 just keep your mobile phone in your hip pocket at all  
7 times and take it out and dial 999 and also make sure  
8 you're exits are clear. I said do you realise that I  
9 wouldn't have time to put my hand on my phone, never  
10 mind dialling 999. So anyway, I got that MAPA 13:57  
11 training. It was just a very stressful time.  
12 Basically, I was trying to contain --  
13 16 Q. Yes.  
14 A. -- Timothy in the community because I was told there  
15 was nowhere for him to go. But then one of these days 13:57  
16 of thinking I'll ring that person, you know, some of  
17 the contacts, you know, that I had come across, I'll  
18 ring that person to see if they can help; no, try  
19 somebody else; no. Then I rang the -- it's very close  
20 to where I live, a lady psychologist, I think, I don't 13:58  
21 know, but in a building very close to me. I happened  
22 to ring her and she happened to answer the phone, it  
23 was just amazing. And she was so helpful to me and she  
24 said, you know, but there is somewhere for Timothy to  
25 go. That was the start of for me getting help. 13:58  
26 17 Q. When would that have been then, that you had that? Is  
27 that around --  
28 A. It was around the time of MAPA training.  
29 18 Q. Around 2011 then?

1 A. Yeah, 2011. But, yeah, that was a very, very -- you  
2 read in the statement about the day Timothy went from  
3 Torbank School to the Iveagh Centre.

4 19 Q. Yes.

5 A. You read out what I had said about one of the most 13:59  
6 stressful days of my life.

7 20 Q. Yes?

8 A. I still think about that, it was traumatic, it was  
9 terrible. My own -- Timmy's own GP - not the one I've  
10 referred to in the statement, another one - rang me 13:59  
11 back two hours after I had phoned him to say I'm sorry,  
12 you're outside my area, I can't come to see Timothy.  
13 And it was actually a policeman, once I heard that, a  
14 policeman -- the police and the ambulance men that day  
15 were absolutely first class. But one of the policemen 13:59  
16 went like that to be, and tapped what I perceived to be  
17 his walkie-talkie as if 'leave it with me'. It was  
18 actually him that got the GP to come. So, as I say, it  
19 was like everything was against me.

20 21 Q. Yes. Yes. Yes, that's very vivid. 13:59

21 A. And then the social worker came, because he had to sign  
22 off, and he came on his bike and he had all the gear  
23 on, he had to take it off. It was just -- the whole  
24 scene was very difficult. We were all -- it was the  
25 principal of the school, the vice principal, one 14:00  
26 teacher and two classroom assistants. As I say, the  
27 room was full of people, including two police and two  
28 ambulance men. Which, the police and ambulance,  
29 actually in the end, I don't think they were used but

1           then he must have got -- he must have gone in the  
2           ambulance to get the Iveagh Centre. But that was a  
3           very, very difficult day for me.

4   22   Q.    The reason why I had asked you a couple of moments ago  
5           about MAPA and use of MAPA, you've clarified it a           14:00  
6           little bit by saying you think it might have been  
7           something different from --

8           A.   Slightly, yes.

9   23   Q.    When the Inquiry heard evidence from Trust officials  
10          over the past number of weeks, Trust officials told the           14:00  
11          Inquiry that they don't use MAPA any more, that they've  
12          replaced it with a --

13          A.   They've changed the name. It is still MAPA, they've  
14          changed the name. And that was a couple of months ago.

15   24   Q.    Were you made aware of that change?                           14:01

16          A.   Yeah, because somebody on -- a nurse on the phone said  
17          whatever the new term was, I said sorry, what's that;  
18          she said it's the old MAPA.

19   25   Q.    It was described as a positive behaviour support. It  
20          wasn't given a precise title?                                   14:01

21          A.   It was an acronym she gave me.

22   26   Q.    Did she describe what it meant?

23          A.   Changing the name doesn't change MAPA or the behaviour  
24          holds. My sister Cathy, in her statement, will go  
25          further into that with you.                                   14:01

26   27   Q.    Do you know whether those sorts of techniques, however  
27          they are labelled or described now, whether those are  
28          made use of on Timmy?

29          A.   Well, Timothy -- I frequently get told on the phone



1           that "we escorted Timothy to his bedroom". Now,  
2           escorted means manhandled, presumably using MAPA holds;  
3           I don't know. Then up until recently he has been  
4           escorted to his bedroom where from time to time, he was  
5           secluded in his bedroom. As far as I know, that's the 14:02  
6           main place he was secluded. But now, there is a High  
7           Court, doctor -- I can't say the name, Timmy's  
8           consultant said that Timothy could be -- Timmy  
9           basically doesn't need held under the Mental Health Act  
10          for detention. So, through the High Court we've got an 14:02  
11          interim order for he is a voluntary patient. But then  
12          it's ongoing; there's the next court session or  
13          whatever interaction is in September. But in the  
14          meantime, it means theoretically Timmy should not be  
15          secluded in Muckamore but he is still escorted to his 14:03  
16          bedroom.

17       28   Q.    This takes me onto the next topic I had hoped to ask  
18                you about, which is that of seclusion. You have  
19                mentioned the use of seclusion --

20            A.    Yeah. 14:03

21       29   Q.    --if I can put it this way, historically, earlier on in  
22                other words, in Timmy's journey, if I can use that  
23                term, in Muckamore. Do you know whether or perhaps how  
24                recently Timmy might have been subject of seclusion?

25            A.    Well, you see, this is a bit controversial what I am 14:03  
26                about to say I think he is still being secluded but  
27                under a different name, because when his bedroom is his  
28                seclusion, where do you draw the line between -- was  
29                that seclusion or... I know you are meant to lock.

1           They have a lock up here for seclusion and a lock lower  
2           down for just locking the door. And there was  
3           accidental seclusion last August. I'm sure you wonder  
4           how on earth do you do that, but somebody accidentally  
5           locked the top lock and how they were -- 14:04

6   30   Q.   On his bedroom?

7           A.   In his bedroom. And how they were alerted to it, Timmy  
8           was inside his bedroom looking out of the wee window as  
9           if let me out. So, I was told about it.

10          CHAIRPERSON: Could I just ask, if the top lock isn't 14:04  
11          pushed up and it is just the middle lock, can Timmy  
12          leave the room?

13          A.   The lower lock is meant to be for Timmy's, they say  
14          -what's the word - comfort. He likes to make sure that  
15          he is safe in his room and he likes to hear the click 14:04  
16          of the lock. But for seclusion, there is a higher lock  
17          that probably Timmy couldn't reach, and it's only  
18          outside the door, so he can't get out once that's  
19          locked.

20          CHAIRPERSON: If it is only the middle lock, he could 14:05  
21          leave the room?

22          A.   He could leave the room, yeah.

23   31   Q.   MR. MCEVOY: So, you were starting to say that your  
24          understanding of seclusion is even if he is confined in  
25          his bedroom in that way that you describe; is that it? 14:05

26          A.   I feel he is still being secluded but in different --  
27          in a different way.

28   32   Q.   A number of Trust officials have told the Inquiry that  
29          seclusion hasn't been used in Muckamore since August

1           2022. what would you say about that?

2           A. Maybe that -- two things. First of all, that's maybe  
3           when his accidentally secluded or -- but I do believe  
4           that Timmy is still being secluded but they are just  
5           not telling me fully. They are wording it differently. 14:05

6   33   Q. Yeah. Okay.

7           A. Because escorted to his bedroom and then secluded, and  
8           they are not just saying "and then secluded". Oh, yes,  
9           you meant deescalation earlier. They are meant to try  
10          and deescalate the situation but they still do take 14:06  
11          hold of him. But I think it's training, I think it's  
12          training of the staff because, yes, Timmy can be a  
13          scary person when he -- you know, when it escalates.  
14          But there are ways and some of the health care  
15          assistants can do it, I have seen them doing it. 14:06  
16          Actually, FLSW2 has seen them as well. They are very  
17          good at like nipping it in the bud, you know.

18   34   Q. Let's talk a bit more about that.

19          A. Stopping it before it really starts. One time Timothy  
20          went to a health care assistant and he bent. what he 14:06  
21          does is he grabs you here, and then he brought his head  
22          down into the health care assistant's chest sort of  
23          thing. The health care assistant didn't shout, didn't  
24          speak, that's exactly what you're meant to do, and he  
25          just held on to him. 14:07

26   35   Q. The health care assistant?

27          A. Pardon?

28   36   Q. The health care assistant held on?

29          A. Yeah, yeah. No, I mean in a nice way. And then said

1 "let go, Timothy", and Timothy let go, because if you  
2 shout or scream that completely escalates the  
3 situation. I have had to speak -- well, I have spoken  
4 to agency staff, two agency staff, because they were  
5 actually raising their voice. One of them screamed. I 14:07  
6 said please don't do that.

7 37 Q. Sidetracking slightly for a moment. That health care  
8 assistant - without naming names, of course - do you  
9 know whether that health care assistant is a permanent  
10 member of staff at Muckamore or whether they are agency 14:07  
11 staff; can you tell us?

12 A. No, he is permanent. All three health care assistants  
13 that I am referring to are permanent, local people.

14 38 Q. That permanent staff, is having that contact with  
15 permanent staff important to Timmy? In other words, if 14:08  
16 they were chopping and changing faces --

17 A. It is so much better for Timmy to have a stable staff.  
18 It was actually one health -- one of those three health  
19 care assistants, I recently wrote like - I don't know  
20 how to word it - like a review, just saying -- sending 14:08  
21 it up to one of the senior staff just saying how  
22 professional she was, how caring she was. She had a  
23 sense of humour, which is essential in that line of  
24 work.

25 39 Q. Yes, of course. 14:08

26 A. She keeps Timothy clean because Timothy quite often -  
27 that's distresses me to think about it - is not -- he  
28 is not clean. He is not cleaned, he is not groomed, he  
29 is not well cared for. But she, when she is on duty,

1 Timmy is always the way I would expect him to be.  
2  
3 The other two male staff, they just show they care.  
4 And what they do is, I think is very relevant, they  
5 show they care for Timothy but they also show respect 14:09  
6 for me. And I know that's probably not in their job  
7 description but that's a huge thing for me, if they are  
8 showing me respect, because it also ties in with  
9 they'll show Timothy respect.

10 40 Q. Can you give us some examples of how they show respect 14:09  
11 to you? How do you?

12 A. "Hiya Dawn, how are you", as opposed to, "Yes, well,  
13 we've just changed him now, do you want to go for a  
14 walk now or what"? It's having, well, a sense of  
15 humour I have already mentioned. It's just -- and 14:09  
16 FLSW2, you witnessed that with that.

17 CHAIRPERSON: Use the name. I don't think it's a  
18 problem as we've used the name twice now.

19 MR. MCEVOY: Your liaison officer has a cipher. Don't  
20 worry. 14:10

21 A. Did I say a name there?

22 CHAIRPERSON: Don't worry, everybody has

23 MR. MCEVOY: Please don't worry.

24 CHAIRPERSON: In this case, I don't think it's a  
25 problem at all. 14:10

26 41 Q. MR. MCEVOY: It may not have been picked up anyway.  
27 So, in terms of that sort of giving of respect.

28 A. Yeah.

29 42 Q. If there is an issue, if you have like a daily sort of

1 concern, let's take the example of the shaving which  
2 you described very vividly.

3 A. Still happening, that.

4 43 Q. If you were sort of concerned, say take for example,  
5 maybe there is a miss or something like that, how would 14:10  
6 you address that and how would that be received then?

7 A. For quite a number of years now since the abuse, now  
8 that I know senior staff, even though they change a  
9 lot, I don't go to the ward manager or the ward, I just  
10 go to whoever is up there that I have the email address 14:10  
11 for and I e-mail them. Sometimes I don't get a reply  
12 at all.

13 44 Q. You would take a concern like that to a senior level?

14 A. Even though that's fairly simple, I would, because  
15 basically nothing happens when I speak to the ward 14:11  
16 about it.

17 45 Q. Okay. Even those health care assistants that you  
18 mention?

19 A. Well, it wouldn't be that appropriate to say to health  
20 care assistants, I don't think, when it's... They do 14:11  
21 know about the shaving situation.

22 46 Q. Yes.

23 A. One of them, actually she's not there any more, I think  
24 she was deputy co-director or something and she was  
25 only there for a small period, but she actually -- she 14:11  
26 actually, when I sent her an email, I think she rang me  
27 or emailed me back; she said I am going to Muckamore  
28 now, I'll pop in and buy Timmy a razor, which she did  
29 and delivered. Now, that's not what I expect but to me

1           that was outstanding and caring for Timothy. I don't  
2           understand where all the razors go to. I just don't  
3           understand it.

4    47   Q.   Does that situation - I have used the shaving example -  
5           but does that still prevail then? 14:12

6           A.   Yeah, I'm afraid so.

7    48   Q.   Other aspects of Timmy's personal care, his hygiene,  
8           what is the situation presently there? Has there been  
9           any improvement, can you tell us?

10          A.   Well, Timothy needs all his personal needs attended to. 14:12  
11          There was no availability of a bath - Timmy loves a  
12          bath in the evening - for some time they were waiting  
13          for a part is what I was told. I'm changing slightly  
14          the subject here, but a bath. So they would give him a  
15          shower, which he doesn't like as much, or they don't 14:12  
16          give him a shower. But there was a health care  
17          assistant who came back, who had been studying to  
18          become a nurse, she is back in Muckamore, and she rang  
19          me to give me the update that night, and she went yes,  
20          and he has had his bath. I went he has had his bath, 14:13  
21          how did he have a bath? She said the problem was with  
22          our bath so I just brought him into the next ward.  
23          Using your initiative? Using common-sense for the sake  
24          of the patient? I know that's not what you asked me.

25    49   Q.   It was. I mean, I was asking you really about that 14:13  
26           theme which comes across in your witness statement  
27           about the lack of attention to Timmy's hygiene.

28          A.   I also think, to be fair to the staff, I don't think  
29          they know about hygiene, especially at the start of

1 lockdown and Covid and everything. And I went -- I  
2 said I better go wash my hands now, maybe it was just  
3 before or after Covid and they went no, just use the  
4 hand sanitiser. But she just -- we had just left the  
5 bathroom. I left because Timmy had left. Do they not 14:13  
6 really understand that Timothy and anybody working with  
7 Timothy, they all should be washing their hands after  
8 they had been to the toilet?

9  
10 I saw one nurse using those blue rubber gloves and she 14:14  
11 dealt with Timmy's personal needs at the toilet, and  
12 then she did something else with these gloves on and  
13 then something else. I thought dear God.

14 CHAIRPERSON: Dawn, can I just get an idea about timing  
15 when these things happen. The buying the razor for 14:14  
16 instance --

17 A. Yes.

18 CHAIRPERSON: -- which you thought was really  
19 impressive, how long ago was that?

20 A. Well, I bought him a razor two months ago. 14:14

21 CHAIRPERSON: The member of staff.

22 A. No, no, but I'm just saying two months ago. That  
23 member of staff, she has now left, so six months.

24 CHAIRPERSON: Relatively recently?

25 A. Yeah. Yeah. 14:14

26 CHAIRPERSON: And the bath, when they took him to a  
27 different ward; was that relatively recently as well?

28 A. Very recently, yeah. Three weeks ago, I would say.

29 CHAIRPERSON: But your experience at Muckamore has been



1           -- I mean, you seem very surprised that those things  
2           happened. Do we take it that your experience of  
3           Muckamore is that that's quite unusual, or that's a  
4           more recent sort of approach?

5           A.     Sorry, what was unusual? 14:15

6           CHAIRPERSON: You were surprised that somebody had  
7           actually gone out and used their initiative.

8           A.     Oh, surprised. Yes, surprised and delighted, that had  
9           never happened before. That was going like above and  
10          beyond. It also showed that she understood what I was 14:15  
11          saying because I think there is a lack of caring at  
12          Muckamore and I don't think an awful lot has changed in  
13          the last six years, and it upsets me a lot and I just  
14          feel I have to be constantly vigilant and trying to  
15          speak up for Timothy. 14:15

16          CHAIRPERSON: Yes.

17          A.     I know he loves me and I know he knows I love him but,  
18          for example, he wouldn't have any understanding. I  
19          couldn't tell him about today and I don't need to  
20          because I know we both love each other and I'll do my 14:16  
21          best for him.

22   50    Q.     MR. MCEVOY: You described a few moments ago when you  
23                  have even a fairly basic concern, a kind of daily  
24                  concern --

25          A.     Yes. 14:16

26   51    Q.     -- about a personal care need, shaving or washing,  
27                  showering, bathing; if you have a concern about that,  
28                  your instinct now - my word - is to go straight to the  
29                  sort of senior management?

1           A.    Straight to...

2    52   Q.    It's okay, I'm not asking you to name them.

3           A.    The co-director, I think she is, or maybe she is

4                director now; meaning its ridiculous I have to go that

5                high to get something. 14:16

6    53   Q.    The question I was going to ask you was when did you

7                get to the point were you felt -- if you can give us an

8                approximate point in time, when did you feel that that

9                was what you had to do? In other words --

10          A.    A number of years ago. 2018, it would have been. 14:17

11                Again, somebody on that list who can't find the thing.

12    54   Q.    Don't worry.

13          A.    She was director, she was my go-to person. I even said

14                to her, why are you my go-to person, you're away up

15                there. And she just said it's fine. 14:17

16    55   Q.    Can I ask you, what was it, was there an event or

17                incident that prompted you then to decide rather than

18                deal with this at a sort of ward level, I am now just

19                going to bring everything --

20          A.    Because I asked what I deem to be the appropriate 14:17

21                people, and nothing, nothing came of it. The ward

22                sister promised she would do something, nothing came of

23                it. So I just discovered I had to go higher. It was

24                higher, it wasn't deciding I will go higher. I will go

25                to that person -- 14:18

26    56   Q.    The person who gets things done?

27          A.    -- that will get things done.

28    57   Q.    I suppose my question is what was it therefore? Did

29                something happen then that you saw a result, you saw a

1 result --

2 A. So I continued to go to that person.

3 58 Q. What was it that made you think this is where I am  
4 going to have to go now?

5 A. Well, even down to counselling, which was mentioned 14:18  
6 earlier, it took her six months to get the...

7 59 Q. Was it that offer of counselling that you describe in  
8 your statement that was what --

9 A. That took six months in order to get to it set up for  
10 payment for the counsellor, but she eventually did it. 14:18

11 60 Q. Was it the fact of that offer nonetheless that made you  
12 think this is the person that gets things down?

13 A. Yes. Yes, it took her a long time. There was somebody  
14 below her, whose name is on that; it was pointless me  
15 telling her because she never did anything. At one 14:18  
16 point this other person said to me, after me telling  
17 her whatever situation it was, and she said well,  
18 really, you shouldn't be ringing me, you should be  
19 ringing the service manager for this. And I went oh,  
20 because it was like I felt, not quite like a slap in 14:19  
21 the face but oh. And she went but it's okay, no, I'll  
22 pass this on.

23 61 Q. Was it passed on?

24 A. No, not my --

25 62 Q. What was the issue at that particular time? 14:19

26 A. I am trying to remember what it was. It might have  
27 been even the outside space. They had a chalet, a hut  
28 or whatever, down in the far corner of the grounds.  
29 When I raised the subject, this was two chairs in this

1           like chalet, two chairs with nails sticking up on the  
2           arms of the chair. I had to point this out could you  
3           get Estates to tap the nails over or pull them out or  
4           do something.

5    63   Q.    Was that an area within a ward, attached to a ward?           14:19

6           A.    No. It was in the grounds and it was in the far  
7           corner, and it was somewhere for me to take Timmy when  
8           I called to visit him that was more private, because  
9           sometimes the senior management will say oh I saw you  
10          out with Timothy the other day, and I thought it's like   14:20  
11          a gold fish bowl.

12   64   Q.    You could take him down to this place?

13          A.    Away down there, yeah, yeah. And there's benches now.

14   65   Q.    It is within the grounds?

15          A.    It is within the grounds. It's in the corner near the   14:20  
16          entrance to Muckamore.

17   66   Q.    What was the issue then. This furniture was in a --

18          A.    Two bits of wooden chairs with nails sticking in the  
19          arms, and cigarette butts all over the place. And  
20          there was even one of those blue rubber gloves stuffed   14:20  
21          down into somewhere around the chair. I reported this  
22          to the social worker and somebody higher up. The  
23          social worker didn't even know that area existed and I  
24          thought, well, it looks as if staff do. I didn't say  
25          that, but somebody has been using it. Then the more   14:20  
26          senior person said that they would get it. I said  
27          about the grass being six inches high, you know.  
28          During Covid, I visited Timothy and naturally only  
29          wanted to see him outside and didn't want -- wanted to

1 wear my mask and all the rest of it. I said that's the  
2 only place I can bring him and if it is raining, we  
3 would go into that wee shelter. Anyway, one day it  
4 just disappeared and there was another wee shelter  
5 across the way, it was gone. Literally nobody has ever 14:21  
6 told me or given me the explanation for that.

7 67 Q. Just to try and locate what you are telling us in time,  
8 when was this? When did this issue arise about the use  
9 of this? Was this during Covid?

10 A. I think it was during Covid, yes, in lockdown. 14:21

11 68 Q. During one of the lockdowns in particular then?

12 A. Pardon?

13 69 Q. During a lockdown?

14 A. Yes.

15 70 Q. All right. So, you raised an issue then about the 14:22  
16 condition, as you say, the furniture and sort of the  
17 general --

18 A. The grass.

19 71 Q. And what then -- with whom did you raise it? Now, we  
20 don't need a name. 14:22

21 A. One of the senior managers.

22 72 Q. Was the concern taken on board?

23 A. The grass was cut and the nails were dealt with. But  
24 then later on, as I say, the two huts disappeared.

25 73 Q. In terms then we have already talked about when you 14:22  
26 sort of raise an issue now, you raise it at a senior  
27 level.

28 A. Just to get things down.

29 74 Q. So, the Inquiry can take it then that what prompted you

1 to sort of think that this was the way to do things was  
2 at the point in time, as you discussed in your  
3 statement, when you were offered the counselling, or  
4 was it something else?

5 A. Yeah, and that person who offered me the counselling is 14:22  
6 the one I continue to use. I even said to her I feel  
7 I'm using you, and she said that's okay.

8 75 Q. You retain a relationship with that person in that way?  
9 A. Yes. She was quite pleasant to deal with but mostly  
10 because she got things done. 14:23

11 76 Q. Going back to the personal care issue there. We've  
12 talked about the daily aspects of personal care,  
13 bathing and shaving and so on. What's very striking in  
14 your statement obviously is those needs such as  
15 podiatry and dentistry. We moved on some time 14:23  
16 obviously since those issues first arose; was there  
17 ever an improvement? Take the podiatry, first of all,  
18 of course, was anything ever done to improve that  
19 issue?

20 A. First of all, I want to say I've never met the 14:23  
21 podiatrist. Apparently he has changed over recent  
22 years, I don't know. But no, there is still a problem  
23 with Timothy's feet and callouses. I asked for a  
24 report a month ago, exactly a month ago, from the  
25 podiatrist, could he email me a report, and I got the 14:24  
26 report. What was strange was his name wasn't anywhere  
27 on it, although he had sent me the email.

28 77 Q. Taking a step back, Dawn, just from that, has anyone  
29 within Muckamore ever explained to you how they go

1       about attending to a need? Let's take the podiatry  
2       example, first of all.

3        A.    There is a monthly meeting.

4 78 Q. Has anybody ever explained to you how the process - I  
5 know you are critical of the process - what the  
6 procedure, let's say, is in Muckamore for attending to,  
7 like, podiatry?

8           A.    No, nobody has explained that. I did ask and got the  
9                structure, the staff structure. But as it changes  
10              quite a bit, it is hard to keep up with who is who  
11              within that structure.

12 79 Q. Can the Inquiry take it therefore that the podiatry  
13 situation hasn't been resolved?

14           A.    It's better. It hasn't been resolved. My point about  
15                seeing the report no date on it, it says Timothy's two  
16                callouses on his feet is caused by wearing socks on the  
17                ward or bare feet. That's what has caused the  
18                callouses.

19 80 Q. Okay.

20           A.    I'm not sure whether I can say this but I'll just say  
21                it carefully.  The staff -- PSNI told me that it aided  
22                moving Timmy A to B if he had no shoes on.

23 81 Q. Okay. I think you say that in your statement anyway.

24       A.    I do. Slippery floors, right. It referred to that in  
25       the podiatrist's report.

26 82 Q. Okay.

27           A.    I replied to the ward manager to say is this an old  
28                report from the podiatrist when he did this, because my  
29                belief was he either wears his shoes or slippers on the

1           ward, so is this old? I am still waiting for the  
2           podiatrist to get back to Muckamore.

3   83   Q.    You visit Timmy how often?  
4           A.    Once a week.

5   84   Q.    What is he wearing on his feet when you visit him? 14:26  
6           A.    Frequently he is in bed asleep when I visit him in the  
7                   afternoon, which upsets me greatly, that a grown man of  
8                   28, healthy, is asleep during the afternoon. Mostly I  
9                   believe it to be down to PRN which could have been --

10 85   Q.    I am going to ask you about that -- 14:26  
11           A.    -- a couple of days ago.

12 86   Q.    I am going to ask you about that topic in a minute.  
13           A.    So he is quite often in bed. If he is not in bed, he  
14                   is wearing slippers, like slip-in slippers.

15 87   Q.    Okay. You have given vivid descriptions of the state 14:27  
16                   of his feet on a number of occasions. Has there been  
17                   an improvement in terms of the care --

18           A.    Yes, yes.

19 88   Q.    -- of his toe nails?  
20           A.    Yes, it is. I have never seen it as bad as those two 14:27  
21                   times and it was years ago --

22 89   Q.    Yeah.  
23           A.    -- in PICU. But still not right, still not good.

24 90   Q.    Do you know how often a podiatrist --  
25           A.    No, I don't. 14:27

26 91   Q.    -- visits.  
27           A.    But I did ask last Tuesday at a monthly meeting about  
28                   the podiatrist and they said, oh, the podiatrist is  
29                   here today; oh, good, could you ask him to send me a



1 report or to explain what the date of that last report  
2 was. Nobody got back to me.

3 92 Q. Moving then just to the dentistry then. You've  
4 described the situation with regard to Timmy's teeth  
5 and the issues that you've had to contend with there 14:28  
6 and Timmy has had to contend with. What is the  
7 situation? If we move back in time, when, if there was  
8 one, was there an improvement? I know there was an  
9 attention given to him at the School of Dentistry?

10 A. It was a bit like after the abuse was out, there was a 14:28  
11 certain member of staff who seemingly trying to improve  
12 things. Well, I felt people were brushing his teeth  
13 around that time but it seems to have trailed off. In  
14 my opinion, it's trailed off.

15 93 Q. You've described that there is a method and Timothy -- 14:28  
16 A. The easiest way is when he is in the bath, nice and  
17 relaxed, you brush his teeth with toothpaste and then  
18 you hand him the toothbrush. Even if he is only  
19 sucking it in his mouth, at least you are getting  
20 something done. 14:29

21 94 Q. What is your perception of the extent to which that is  
22 being -- that continues to be something?

23 A. I have no way of knowing is really the answer. I just  
24 don't know. Could I just mention while we're on this  
25 subject, the Royal School of Dentistry, the couple or 14:29  
26 two or three times that Timmy has had to attend there,  
27 they have been absolutely superb. Kind, professional.  
28 Kind to Timmy, kind to me. Just wonderful.

29 CHAIRPERSON: Could I just ask about dentistry. Do you

1 know what sort of work Timothy has had to have done on  
2 his teeth, because they got to a stage, I think, you  
3 mention in your statement when they were quite bad?

4 A. They were, yeah. So many fillings and I think he got  
5 one tooth out. Descaling, they did all that, under 14:29  
6 general anaesthetic. But, as I say, the Royal School  
7 of Dentistry was just -- they were amazing. And what's  
8 very relevant is they were giving me information, they  
9 were keeping me up-to-date with what they were going to  
10 do or what they had done. That was very severely 14:30  
11 lacking in Muckamore.

12 95 Q. MR. MCEVOY: Moving on. You started to tell us, in  
13 fact, about the question of PRN --

14 A. Yes.

15 96 Q. -- and medication more generally. The question of 14:30  
16 Haloperidol, which is a medicine that you described and  
17 its use.

18 A. Yes.

19 97 Q. Do you know whether, and if so when, it continues to be  
20 used? 14:30

21 A. It's not used at all now. I know that because the  
22 current consultant has given me a list of Timmy's  
23 medication.

24 98 Q. Yes.

25 A. As far as I know, that hasn't been given since those 14:30  
26 days I referred to in my statement.

27 99 Q. Are there any PRNs that Timmy is still subject to?

28 A. Oh, yes, yes, yes. There is first line, you would know  
29 second line, but it has a big effect on him as far as I

1 know. Not at the time when you want it to work but in  
2 two, maybe three days' time, Timmy will be out for the  
3 count, he will be asleep during the day. Then that's a  
4 knock-on effect of not sleeping at night. I have  
5 actually e-mailed the head of the Belfast Trust about 14:31  
6 it.

7 100 Q. Yes, that's right. You described that?  
8 A. So they are doing some kind of a monitoring scheme of  
9 PRN given.

10 101 Q. Do you know why the Haloperidol was stopped? 14:31  
11 A. Because it was killing Timothy. He would have died.

12 102 Q. You described the A&E consultant at Antrim --  
13 A. Yeah, he was quite angry --

14 103 Q. Effectively demanding that it be stopped?  
15 A. -- he was indignant. I said no, but I had a discussion 14:32  
16 after the first time you said to come off it and the  
17 consultant has explained that you have to wean somebody  
18 off this, you can't just stop giving it. I said it has  
19 potential to kill Timothy. Timmy's heart rate was so  
20 very high. I can't remember the numbers now. But he 14:32  
21 could have had a heart attack and died.

22 104 Q. How was that issue resolved? we have a good account of  
23 you in your statement saying that the A&E consultant  
24 was saying this has got to be stopped ASAP because it  
25 is dangerous - I am summarising - and then you have the 14:32  
26 consultant in Muckamore saying --

27 A. Well, the A&E consultant said, you know, if you could  
28 pass this on to him that he must stop this right now.

29 105 Q. Yes.

1 A. No more Haloperidol. I went on talking to him and he  
2 went oh, right, so he thinks you can't take him off it,  
3 I said that's what he said to me. He said actually I  
4 don't want you to do anything, I will deal with this --  
5 106 Q. Okay. 14:33

6 A. -- consultant to consultant. I'm not exaggerating, I  
7 never saw Timmy's consultant again. You know, maybe a  
8 coincidence, maybe he had been moved off somewhere  
9 else. I just never had any contact with him again.

10 107 Q. How soon after that? From your recollection, how soon 14:33  
11 after that when you were given that, you had that  
12 conversation with the A&E consultant, how soon after  
13 that did the Haloperidol stop?

14 A. Immediately, and he has never been on it again as far  
15 as I know, and he hasn't been near death as far as I 14:33  
16 know. But he has had -- maybe I've told you this but  
17 he has had Covid at least five times in Muckamore.

18 108 Q. You mentioned three times, I think, in your statement.

19 A. Yes. Five times now.

20 109 Q. In terms of the use of medicine, the medication, you 14:33  
21 described an impression of Timmy being zombified?

22 A. My sons are over there, that's what they say. I don't  
23 like them saying that but I know what it means,  
24 expressionless, not a good colour, and just like on  
25 automatic pilot. 14:34

26 110 Q. "Expressionless" and "dull", I think, were the words  
27 that you used?

28 A. Yeah.

29 111 Q. That is something that your sons noticed, then an

1 impression that they formed not long after Timmy went  
2 into Muckamore in 2012?

3 A. Yes, that's right.

4 112 Q. For how long and how often would that have been an  
5 impression that you had? 14:34

6 A. There has been an improvement recently. Like, I was  
7 there on Thursday and he was zombified. We took him  
8 out, the three of us took him out on the Saturday and  
9 that's the way he was. Just no expression, nothing.  
10 Dull. I blame that on medication. 14:34

11

12 The fact that he has got a very large tummy at the  
13 moment could be too much food, but the ward are telling  
14 me that in effect - these are my words - that it's  
15 Timmy's fault because when they go to take him out for 14:35  
16 a walk, they bring him out of the building and then he  
17 turns round and comes back in so he is not getting  
18 exercise. But Timothy didn't get exercise during the  
19 Covid lockdown because they were in the ward. Then  
20 when Covid was lifted, he didn't get out because I was 14:35  
21 told they were short of staff. I said for Timothy's -  
22 I may have said this in the statement - physical and  
23 mental health, he needs fresh air and exercise, as  
24 every one you do. We all as human beings need those  
25 two things. So, yeah. 14:35

26 113 Q. The weight gain is something I wanted to ask you about  
27 as well, and diet more generally. Quite a long time  
28 ago you described wondering whether Timmy had leaky gut  
29 and all those sort of things?

1 A. Oh, yes but that's nothing do with the size of his  
2 stomach.

3 114 Q. No, no, but diet has always been, and Timmy's diet in  
4 particular, has always been, very understandably,  
5 something you worry about; you're concerned about it? 14:36

6 A. Yes. Concerned about, yeah.

7 115 Q. I suppose when it's not up to you to make sure, you  
8 don't have ultimate control over when and how he eats?

9 A. Yeah, I have no control.

10 116 Q. Before he went into Muckamore in 2012, how would you 14:36  
11 have described his physical condition for a man of his  
12 age?

13 A. Strong and healthy but he was quite thin at that point.

14 117 Q. When he was at home with you?

15 A. When he was at home, when he was younger, he put on a 14:36  
16 bit of weight. Then, you know, one of those ping  
17 moments that you realise wait a minute, everything  
18 Timothy eats, I am providing, so therefore I need to  
19 control this. When he comes out -- when he comes home  
20 from school in the bus, I don't need to go and buy 14:37  
21 bread or whatever I have forgotten to get, and  
22 therefore Timmy gets something when he is there; I will  
23 do that all in the morning when Timmy is at school. It  
24 also applies, that, to Muckamore. Everything he eats  
25 is provided for by the Belfast Trust. 14:37

26 118 Q. Yep.

27 A. Obviously Muckamore don't love Timothy the way I love  
28 him. If you actually love somebody you need to -- and  
29 Timothy hasn't capacity, so therefore you have to do

1            what's right for that young man. Yes, awk, he wants to  
2            eat five burgers, let him eat five burgers. Really?  
3 119 Q.     Just so we can kind of try and get an idea when these  
4            weight issues and issues with diet started to be  
5            problematic, if you like, he went into Muckamore in 14:38  
6            2012 and he was --  
7            A.     He was slim.  
8 120 Q.     He was slim.  
9            A.     Close to thin, but yeah.  
10 121 Q.     Two big healthy brothers? 14:38  
11            A.     Two big healthy brothers, yes. They were very slim at  
12            the time too.  
13 122 Q.     would they have all eaten the same sort of thing?  
14            A.     well yes, except I don't know what Graham and Ian would  
15            eat at school. They had money, and you know... 14:38  
16 123 Q.     Thinking back at that time, and as mum at home I  
17            suppose is what I mean, would everybody have eaten the  
18            sort of thing?  
19            A.     Oh I see, at meal times? Yes.  
20 124 Q.     Yes. I should have made that clear. 14:38  
21            A.     Even when he was on the gluten and dairy free diet,  
22            which wasn't really fair to them but I said to them,  
23            look, for me to make this work, could we all go on  
24            this. I bought a bread-maker, gluten free, and he was  
25            getting lots of exercise. 14:39  
26 125 Q.     I know your FLSW2 is there but obviously we don't need  
27            any prompting, if that's okay.  
28  
29            So thinking back to that point in time, you know, he

1 was eating reasonably well and he was slim, as you say.

2 A. Plenty of exercise.

3 126 Q. Plenty of exercise. When he was at home with you, what  
4 would he have done for exercise? What was the regime?

5 A. Go to his brother's football and rugby matches. We 14:39  
6 went to the park. He didn't really like the park, so  
7 it was walking from A to B and going to do things for  
8 his brothers with me.

9 127 Q. Yeah, of course.

10 A. Like walking round the pitch. 14:39

11 128 Q. Plenty of movement.

12 A. Lots of movement, and interest.

13 129 Q. Okay. How long after he went into Muckamore did you  
14 first begin to detect weight gain?

15 A. Not really until I think it was 2015 or '16. I can't 14:39  
16 remember because --

17 130 Q. He has been in there about three or four years  
18 approximately at that point?

19 A. Yeah. Yeah.

20 131 Q. Okay. 14:40

21 A. It is an awful word to use but he had then and has now  
22 a gut, a big gut, and he doesn't drink beer. You know,  
23 that sort of a big tummy which concerns me; just it's  
24 not healthy.

25 132 Q. How quickly - of course, we are dealing in 14:40  
26 approximations I appreciate that - how rapidly did you  
27 notice this tummy, this weight gain appear?

28 A. No. Just one day I thought my goodness, it was more  
29 like a sudden. On Saturday there, or two Saturdays



1           ago, he was wearing a tightly fitting T-shirt which  
2           just was lovely, showing his bump as such.

3   133   Q.   still, I think you said that his weight had decreased a  
4           little bit over time?

5           A.   Oh, yes but then it's increased again. 14:41

6   134   Q.   It's increased again.

7           A.   It's increased again. I think it's because you would  
8           understand you would need, you know, you need a really  
9           good ward sister or manager to keep the discipline up  
10          and remind people of what they should be doing. I 14:41  
11          don't think it's just Timothy, as I told one of the  
12          consultants, I think all the patients in Muckamore,  
13          they shouldn't be allowed to eat. Yes, there is human  
14          rights and everything but because they are vulnerable,  
15          they shouldn't be allowed to eat whatever they like at 14:41  
16          all times, you know.

17

18          The Cosy Corner, which I know you haven't asked me  
19          about, isn't really great at all. It's not very nice  
20          at all. But he has access to that. 14:41

21   135   Q.   As you say, you made reference to a diet plan in which  
22           there was a treat allowed once or twice a week, but  
23           what do you say about how closely that is observed in  
24           terms of the provision of treats?

25          A.   Well, because I brought it up last Tuesday, a week ago, 14:42  
26          they are now doing a chart, allegedly, writing down  
27          everything that goes into Timothy's mouth.

28   136   Q.   And that's a recent development, is it?

29          A.   From last Tuesday or Wednesday. Wednesday, I think it

1 started.

2 137 Q. Was anything like that ever done before?

3 A. At the time I brought it up that you referred to in my  
4 statement, at that time it was done.

5 138 Q. It must have been discontinued at some point in time if 14:42  
6 they have started doing it again?

7 A. I don't know. Oh, no, no, it was only done to prove to  
8 them; they did it to prove to themselves sort of thing  
9 how much Timothy was eating. You know, I could eat far  
10 too much, but what I am trying to say is sometimes you 14:42  
11 are not aware of how much you have been eating. That,  
12 I think, is why they did it for Timothy.

13 139 Q. In terms of you've given an indication of like  
14 interactions that you have had with dieticians --

15 A. Yes. 14:43

16 140 Q. -- and your efforts to get property of dietetic input  
17 in Timmy's care, can you think back to when and if a  
18 satisfactory programme was ever put in place in terms  
19 of getting that input, when that would have been?

20 A. You mean years ago? 14:43

21 141 Q. Yes.

22 A. It was just after I met with that consultant that  
23 didn't know what an exercise bike was.

24 142 Q. Okay.

25 A. It was just after that. You referred to in my 14:43  
26 statement of he said he would refer me to a dietician  
27 and I said you don't mean me, you mean the ward staff.  
28 What he actually did was "I mean you", is what he did.  
29 I thought that was quite antagonistic but it didn't

1           bother me as long as I got speaking to a dietician.  
2           She was defensive to start with because dear knows what  
3           she had been told about me. But once she -- a few  
4           minutes in, she realised, I think, this mother is a  
5           very reasonable mother. She read out the diet plan, 14:44  
6           which was just - how do you word it - a well-balanced  
7           diet plan with occasional treats. I said that's superb  
8           but is that what they are actually giving Timothy.  
9           Then that's when they started writing things down,  
10          which I never saw. 14:44

11 143 Q.    So, nobody ever gave you -- from what we can gather  
12           from the statement, no one in Muckamore has ever given  
13           you an explanation for the weight gain?

14          A.   No. No. In fact, this time round it is Timmy's fault  
15           because he doesn't go for a walk. 14:44

16 144 Q.    Other than that.

17          A.   Other than that, there is no explanation. Is it PRN;  
18           is it eating too much? I don't know. I don't know.

19 145 Q.    If you were asked - and I am asking you, I suppose - if  
20           you were asked what you think the cause is -- 14:45

21          A.   I think it's actually eating too much but I don't know.  
22           I don't know. There is something else which I don't  
23           know whether is in the statement or not, when Timothy  
24           went into that Autism initiatives placement --

25 146 Q.    Yes. 14:45

26          A.   -- I was up to see Timmy and there was a nurse from  
27           Muckamore there and obviously the staff from Autism  
28           initiatives, Timothy looked as if he was holding his  
29           breath. Did I mention that? No. He was holding his

1 breath, "look at Timothy" and then he went like that  
2 and fell down. The nurse from Muckamore said oh, yeah,  
3 he does that frequently. I said what? Nobody had told  
4 me and I didn't know that. The consultant confirmed  
5 that he did it frequently. I asked could I see -- 14:45  
6 could he look up the records or whatever tell me when  
7 he first did this.

8 147 Q. .yes?  
9 A. He never came back to me. Just never did. I asked  
10 three different occasions at meetings. 14:46

11 148 Q. So you think that's a behaviour that he may have --  
12 A. It started in Muckamore but it still was out when he  
13 was in the community for those three or four months,  
14 and he is doing it again now. He fell against a wall  
15 two days ago. I said to the nurse on the phone did he 14:46  
16 hit his head, and the answer was I don't know.

17 149 Q. Dawn, as his mum, what do you put that behaviour down  
18 to?  
19 A. I actually have no idea. The consultant said that it's  
20 probably, you know, stimulus, he likes the stimulus of 14:46  
21 the dizziness. But I don't know.

22 150 Q. In terms of just before we leave the diet issue, have  
23 you ever heard something called a must chart; has that  
24 expression been used?  
25 A. A muscle? 14:47

26 151 Q. A must chart.  
27 A. No.

28 152 Q. I know he is non-verbal, of course, but is there any  
29 way that he could indicate to you that he is full, he

1 has had enough to eat?

2 A. He just doesn't eat any more, it is as simple as that.

3 He will eat a lot before he doesn't want any more and

4 he sometimes, you know, refuses something --

5 153 Q. Yes. 14:47

6 A. -- because he wants something else.

7 154 Q. My next question was going to be how might he indicate

8 to you his likes and dislikes?

9 A. He makes it very clear, for somebody non-verbal, his

10 needs. 14:47

11 155 Q. His likes and dislikes?

12 A. Yes. If I am up, I always take him outside and we go

13 for a nice walk around the grounds. Then when we come

14 back in, he will turn to me in a very loving way and

15 just go like that, as if you can go now. I think 14:47

16 that's wonderful. He can communicate to me when he

17 wants.

18 156 Q. In terms of diet, how might he indicate to you, look,

19 his preference is maybe for burger and chips as opposed

20 to chicken curry or whatever it might be. How would 14:48

21 you know? How would somebody (inaudible) know that?

22 A. I used to be able to show -- have photographs, and I

23 was make him choose between two things. Sometimes it

24 was four at one stage. It depends how bright he is at

25 the time, and then he can choose. I don't know what 14:48

26 Muckamore do, I don't know. But I have spoken to the

27 speech therapist and she said she agrees with me that

28 we need to start speech therapy up again for

29 communication when one day Timmy might be out in the

1 community, living.

2 157 Q. Yeah.

3 A. So that new people can communicate with him.

4 158 Q. Picking up on that then, you know you described that  
5 when he was at Torbank, he used the PEC, the cards? 14:48

6 A. Yes.

7 159 Q. Not something that has been used in Muckamore, to your  
8 knowledge?

9 A. No, it hasn't been. What I need to say about that is  
10 they started off with object exchange, and then they 14:49  
11 moved up to, I think it was photographs.

12 160 Q. Yes.

13 A. Then they moved up to symbols. Then that time that  
14 Timmy became aggressive when he was in Torbank and  
15 ended up in Coniker or the Iveagh Centre - it must have 14:49  
16 been the Iveagh Centre - just before that or during  
17 that time, I felt and the school felt he lost his  
18 ability to get to that third stage and he was down at  
19 the object, back to the object exchange.

20 161 Q. But he could still have used that method, presumably? 14:49

21 A. Yes. Yes.

22 162 Q. And not something, even the object exchange, was  
23 something that was deployed or made use of while in  
24 Muckamore?

25 A. They didn't need. I said to the ward manager. Awk, we 14:50  
26 don't need that, we know Timothy. I said yeah but it  
27 would just be helpful to keep that up for one day him  
28 being out of Muckamore, or for new staff.

29 163 Q. Again, as his mum - not an expert perhaps but as his

1           mum - what do you foresee? Clearly you're anticipating  
2           a day when he might be out in the community, and we'll  
3           come on to that in a few moments. What do you foresee  
4           in terms of his ability to pick up that learning that  
5           was back at school age? 14:50

6           A. Timmy has peaks and troughs in his ability to learn.  
7           If he is one of the good spells of learning, absolutely  
8           he could pick that up again. But if he is one of the  
9           more dull or zombified positions, yeah, it would be...

10   164   Q. So if he is clear of medication and things -- 14:50

11           A. Yes.

12   165   Q. -- his learning will be...

13           A. Yeah.

14   166   Q. Okay. That's helpful?

15           A. You see you say about the expert, I would love to speak 14:51  
16           to the experts to discuss all this.

17   167   Q. You have a lot to give, and information in terms of --

18           A. Well, I want to hear. I want to hear what they think  
19           because I don't have that opportunity.

20   168   Q. Now, could I ask you, and this is I suppose a delicate 14:51  
21           topic as I'm sure you've gathered from the way in which  
22           we approached your statement, there was reference to  
23           the investigation into abuse which has involved  
24           examination of CCTV and so on and so forth. I want to  
25           ask you one specific question, okay. 14:51

26           A. Right.

27   169   Q. I'll put it like this: From your understanding of what  
28           you have learned about the CCTV as it regards Timmy,  
29           and as far as you have been made aware, does it show

1 the type of care that you were led to believe was being  
2 provided to Timmy by Muckamore staff?

3 A. Absolutely not.

4 170 Q. That's fine.

5 A. Absolutely not. I was appalled and distressed to hear 14:52  
6 about it. The police were very, very kind in being  
7 able to say it in as kind a way as possible.

8 171 Q. Again this is just a very specific question, you were  
9 given certain information by Muckamore staff, and then  
10 you were given -- 14:52

11 A. Muckamore staff?

12 172 Q. You were given certain information then, I think,  
13 subsequently during the course of the investigation. I  
14 think you say that in your --

15 A. Do I? 14:52

16 173 Q. Yes.

17 A. About the abuse?

18 174 Q. Beforehand, were you told about how Timmy was looked  
19 after?

20 A. Oh that male nurse, yes, yes. That was really bizarre 14:52  
21 because he was a nice man and more mature; a bit  
22 younger than me. But yeah.

23 175 Q. Okay, we'll leave that there. Can I ask you about the  
24 question of resettlement. You've given a very detailed  
25 description of the attempt at resettlement on the Glen 14:53  
26 Road and the difficulties that were encountered there.  
27 The Inquiry has seen all of the detail in your  
28 statement and heard something about it this morning.  
29



1 In view of that, what do you make of the prospect of  
2 resettlement and what that might hold for Timmy?

3 A. Even though it sounds bizarre, I am quite hopeful to  
4 get somewhere for Timothy. I have discussing with a  
5 certain charity provider and they are giving me hope, 14:53  
6 but I am trying to suppress that a little in case it  
7 doesn't work out. But yeah, the next time certainly  
8 when I get a mobility car, I'll think twice about that.

9 176 Q. Is it an aspiration for Timmy then that you'll find  
10 somewhere in the community for him? 14:54

11 A. I don't know. I very much want to find somewhere for  
12 Timothy because that first month in the Autism  
13 initiatives house on the bungalow on the Glen Road,  
14 they were anticipating new surroundings, new people,  
15 Timmy just took to it really well and was really happy. 14:54  
16 One day I called up and he was sitting in the sort of  
17 living room at a table eating healthy food in a clean,  
18 clean environment. The boys and I were really happy.

19 177 Q. It showed you what was possible, in other words?

20 A. What was possible, but the car ruined it. The overuse 14:54  
21 of the car.

22 178 Q. One of the other issues then that comes through clearly  
23 is about finances and the issues that you have  
24 encountered, being able to - I guess my word - audit  
25 Timmy's finances and get some answers about where the 14:55  
26 money goes and so on. The other issue is that of  
27 benefits and being made aware, I guess, of what you may  
28 be entitled to and what Timmy may, in fact, be entitled  
29 to?

1 A. I was disappointed with myself. He went in those days  
2 DLA, and I was told by DLA that's it, once he goes into  
3 Muckamore, that's it, there is no benefits. What I  
4 should have done was got advice on that and realised  
5 that there was ESA you could apply for. 14:55

6 179 Q. Now, you're being harsh on yourself, if I might say so,  
7 about that.

8 A. I thought, I would be honest with you, I did feel bad;  
9 why didn't I push or investigate that.

10 180 Q. Can the Inquiry take it that no one within Muckamore or 14:55  
11 Belfast Trust sort of sign posted you in terms of --

12 A. No, not at all. It was actually the Bryson House, my  
13 advocate for Bryson House, contacted one of these  
14 people on the list, a social worker, and she then  
15 e-mailed me the information. 14:56

16 181 Q. Okay. It was quite some time after Timmy had gone into  
17 Muckamore in 2012 before you even got as far as  
18 accessing advocacy services?

19 A. I did try and apply for a refund for the years that I  
20 didn't but I didn't get that, that didn't work out. 14:56  
21 But I did find it hard to be honest, financially. I  
22 felt I was plowing all this money into Muckamore for  
23 Timothy, but I didn't want Timothy to want for anything  
24 and I possibly made the mistake of telling the ward  
25 staff that. 14:56

26 182 Q. In terms of the questions that you have about the  
27 Trust's management of Timmy's finances, do you feel  
28 that questions are still lingering?

29 A. Not too -- well, I can't talk about the past but not

1 too bad at the moment.

2 183 Q. You can talk about the past, if you think there are  
3 issues going back in time?

4 A. I sort of indicated that in the statement really,  
5 because basically the bottom line to that is there is 14:57  
6 no proof of misusing Timmy's money. At the moment I am  
7 fairly happy because I get -- I don't know who this  
8 person is in the Finance Department but I get a monthly  
9 statement. It's not like you would get from the bank  
10 but it gives me an idea. Two months ago she itemised 14:57  
11 -- the girl itemised something that was Christmas gifts  
12 or something. I asked her could you not do that for  
13 everything, all the money that goes out. She says  
14 well, maybe, you know, maybe I could do that. So, I'm  
15 hoping that that will then... 14:57

16 184 Q. Can you see expenses on takeaway food and other sorts  
17 of things?

18 A. No, they don't say what the money has been spent on.  
19 It is just money in and money in and I am putting money  
20 in. 14:58

21 185 Q. It is not itemised to that degree?

22 A. No, no. I am hopeful that they might do that now that  
23 I have asked.

24 186 Q. Dawn, I don't have any other questions for you. Those  
25 are the themes I had hoped to cover arising from your 14:58  
26 statement. The Panel may have some questions for you.  
27 It's very possible they will.  
28  
29

1           THE WITNESS WAS QUESTIONED BY THE PANEL AS FOLLOWS:

2  
3           CHAIRPERSON: I have a few. I'll turn to my colleagues  
4           in a moment. Can I just pick up on something you just  
5           said so I don't forget it. When did that accounting of 14:58  
6           the money start? You now get a piece of paper.

7           A. I get a statement.

8           CHAIRPERSON: Yes.

9           A. I contacted - better not say the name - a man, and he  
10          is based in the City Hospital and asked him about 14:58  
11          finances. Then he transferred -- I don't mean  
12          transfer. That was in 2018, I would say.

13          CHAIRPERSON: Right.

14          A. So I have been getting those statements since then.

15          CHAIRPERSON: Before that, you hadn't seen anything in 14:59  
16          writing?

17          A. Nothing. Nothing.

18          CHAIRPERSON: I'll hand over to Professor Murphy.

19          PROFESSOR MURPHY: I just wanted to ask you about  
20          those, I think, three health care assistants that you 14:59  
21          felt were managing Timmy's behaviour really well. The  
22          way that's supposed to work is that someone is supposed  
23          to have a care plan and a behavioural support plan that  
24          provides that kind of information for all the staff,  
25          and they all then are supposed to follow it. My 14:59  
26          question is did you ever see the care plans, and did  
27          they consult you about them, and likewise with  
28          behavioural support plans?

29          A. Any time that I wanted to see the care plan, the

1 protection plan, any kind of report, anything at all, I  
2 have to e-mail. Like it was mentioned in the  
3 statement, I have to email, what is it, confidentiality  
4 within the Belfast Trust - I'd forgotten the initials -  
5 to prove who I am and explain why I want this and who 15:00  
6 my son is and everything. Then it takes normally on  
7 average two months for me to get this.

8  
9 I had a meeting three years ago with a new social  
10 worker. I said I had a lot of concerns and I would 15:00  
11 like to -- I asked could he meet with me. I for some  
12 reason or other assumed he would bring the care plan  
13 with him but, no, he didn't. When I asked it was as  
14 if... I had to go through that channel that I can't  
15 think of the name of, to the department within the 15:00  
16 Belfast Trust asking for my son's care plan, protection  
17 plan, anything that I wanted.

18 187 Q. In the monthly meetings that you have had, when you've  
19 had them, that kind of discussion never comes up?

20 A. What's in the care plan? 15:01

21 188 Q. Yes.

22 A. No, never. Never comes up. The care plan was  
23 mentioned recently in that I was listening in to one of  
24 these sessions you had, and somebody from the Belfast  
25 Trust mentioned that -- sorry, wait a minute. I am 15:01  
26 flooded with all this information. Mentioned, oh yes,  
27 a named nurse, a key worker. A key worker. So I  
28 immediately, as I was watching you all in here I  
29 e-mailed somebody, an assistant service manager, asking

1 did Timothy have a key worker, and I was told yes, and  
2 a named nurse. I asked who it was, I was told. I said  
3 oh, I met that nurse just two days ago for the first  
4 time and she is Timmy's named nurse; how long has she  
5 been Timmy's named nurse? Since January. See, to me 15:02  
6 that's the lack of attention to communicating with the  
7 family, especially when my son is non-verbal and lacks  
8 capacity it. You can't really communicate with him  
9 about abstract things. Surely they should have -- they  
10 should be contacting the mother. 15:02  
11  
12 Oh, yes and you mentioned care plan. I asked what the  
13 key worker's duties were, and I got an email - this was  
14 all by e-mail - a list of about five things their  
15 duties were. One of them was, or two of them were, to 15:02  
16 keep the care plan up to date and the protection plan.  
17 But I only see anything like that when I go through  
18 that Belfast Trust department requesting them, proving  
19 who I am et cetera. Data protection is who I am trying  
20 to... 15:02  
21 189 Q. Okay.  
22 A. I have learned so much trying to protect Timothy,  
23 including those acronyms and everything, but sometimes  
24 it gets too much. The different people involved and  
25 where they are and what's their position oh, but now 15:03  
26 they are this position now. It's hard.  
27 190 Q. You have had to become an expert.  
28 A. Yeah. Yeah.  
29 191 Q. Thank you.

1 CHAIRPERSON: Dr. Maxwell.

2 DR. MAXWELL: I would like to ask you about your

3 observations about the way the ward works. You talked

4 about three health care assistants who were very good

5 with Timmy, and you've also talked about occasions when 15:03

6 the personal care wasn't adequate at all.

7 A. Yeah.

8 192 Q. Do the health care assistants do different types of

9 work from the staff nurses?

10 A. I don't know is the answer. 15:03

11 193 Q. If I phrase it in a different way, did you see the

12 staff nurses actually interacting with Timmy doing nail

13 care?

14 A. Rarely, no, rarely. You're right, it's health care

15 assistants or, dare I say it, ordinary nurses. The two 15:04

16 nurses in charge are normally in, there is like an

17 office off the nurse's station, in there, and I can't

18 even see in. They are doing paperwork, allegedly. So

19 I don't see them, I therefore can't interact with them,

20 and I don't see them interacting with Timothy. 15:04

21 194 Q. So you have not seen them interact with Timothy?

22 A. No. No.

23 195 Q. You talked about sometimes you'll get phone calls, and

24 more recently you get regular phone calls about what's

25 happening. Do you know who those telephone calls are 15:04

26 from, and are they from the same person each time?

27 A. It's different people every time. Sometimes it's a

28 nurse; sometimes it's health care assistance.

29 196 Q. Sometimes a health care assistant will ring up to tell

1           you there has been an incident or --

2           A.    No, no, no.   Since the year that Robin Swann was up at  
3           Muckamore and I had that conversation with those two  
4           people, I get daily phone calls.   Update phone calls to  
5           hear how Timmy is. 15:05

6   197   Q.    That be a health care assistant might do the daily  
7           update?

8           A.    Yeah, absolutely.

9   198   Q.    But if there was an incident --

10          A.    There was an incident recently there; it was an 15:05  
11          ordinary nurse, yeah.   When I say ordinary, he wasn't  
12          the nurse in charge.

13   199   Q.    He was a qualified nurse but not the nurse in charge?

14          A.    He was a qualified nurse.   Yes, yes, he was.

15   200   Q.    If I hear you correctly, you're saying the nurses in 15:05  
16          charge, you don't have much interaction with them?

17          A.    I have little interaction.

18   201   Q.    You haven't seen them with Timmy?

19          A.    No, I definitely haven't seen them with Timmy.

20   202   Q.    The qualified nurses who aren't in charge, do they have 15:05  
21          much direct contact with Timmy?

22          A.    Yeah.   I have seen them.   Yeah, they do.

23   203   Q.    Do you think that they are overseeing what the health  
24          care assistants are doing --

25          A.    No. 15:06

26   204   Q.    -- because they have the training?

27          A.    The health care assistants, the three that I am talking  
28          about, not all of them but those three, in my opinion,  
29          are way and above some of the nurses.



1 205 Q. I am thinking about some of the other health care  
2 assistants. Do you think the ordinary nurses, the  
3 qualified nurses --  
4 A. I have never witnessed that. I don't know, I don't  
5 know. 15:06  
6 206 Q. So you don't know?  
7 A. I don't know is the answer.  
8 207 Q. Just coming back to the named nurse. You were saying  
9 that there has been a new named nurse appointed in  
10 January, and you didn't find out until -- 15:06  
11 A. Last week.  
12 208 Q. -- last week. Were there ever periods of time over the  
13 10, 11 years that Timmy has been there when you did  
14 know that there was one nurse in particular looking  
15 after his care? 15:06  
16 A. When he first moved in, there was a really lovely  
17 nurse, and she looked after Timothy and me. One day  
18 she told me that here's my email address if you ever  
19 want to ask me something; I can either reply to you or  
20 the next time I see you give you the answer. I felt 15:07  
21 very professional and compassionate. Then, about a  
22 week after that giving of the email, the nurse in  
23 charge of PICU came up to me laughing like this, and I  
24 thought what is it, what on earth is it. He told me  
25 that that nurse had died by falling down the stairs. 15:07  
26 That's how he told me, coming along, laughing. Then he  
27 said "I just thought you would be interested because  
28 you seem to be close". That upset me a lot, what sort  
29 of a person is he in charge of the ward, which included

1 looking after my son.

2 209 Q. Just finally, you made a comment when you were  
3 answering one of the questions from counsel and you  
4 said to me you'd understand the leadership of the ward  
5 is important. Did you see different standards of care 15:08  
6 depending on who was in charge?

7 A. Yes, very much so, yes. You know the old ward sister  
8 that people referred to as a bit of a dragon, or some  
9 other derogatory term, which I think we need to a  
10 certain extent, there was some very, very nasty nurses 15:08  
11 in charge. Yeah, I actually made a formal -- not a  
12 formal complaint but a compliant through email about  
13 one in particular, an agency staff that was the nurse  
14 in charge. It was very upsetting, what she did to me,  
15 basically I wasn't allowed into the ward. But then I 15:08  
16 spoke to that senior manager, the one that actually  
17 left in the razor for Timothy, she made sure that I did  
18 get in that day. I was told now only five minutes,  
19 you're only allowed in for five minutes; not from the  
20 senior manager but from this nurse, and then -- and 15:09  
21 only allowed in his bedroom, specified that. But Timmy  
22 saw me. I was wearing a mask. He brought down my mask  
23 and gave me a kiss in front of her and I thought oh, my  
24 God, she won't like that. Anyway, I put my mask back  
25 and then Timmy led me out to the outside space, which 15:09  
26 was just a concrete area. It's not very nice but at  
27 least it's outside. Timmy lay down on the tarmac and I  
28 got down too and was talking to him, singing to him  
29 maybe. Then this particular nurse in charge came out

1 and said I thought I told you that you had to stay in  
2 the bedroom, you were told it was only five minutes you  
3 were allowed. I thought, what should I do here; I am  
4 not doing any harm, there is no other patients about  
5 and I thought but it's not worth it to talk back, to 15:10  
6 defend myself or whatever, for Timmy's sake. So, I  
7 just got up and left.  
8  
9 But I have passed that on to actually the director, the  
10 current director. I passed that on to her at the time 15:10  
11 but that was very -- it was awful. I even thought --  
12 anyway I won't go into it. But anyway, that was  
13 difficult.  
14 210 Q. Thank you very much.  
15 A. I think you have a nursing background, don't you, and 15:10  
16 that's why there was certain things you will understand  
17 this, you will know what I am trying to say. Now that  
18 you two won't, but what I am trying to say.  
19 211 Q. Thank you.  
20 CHAIRPERSON: I just want to ask a few questions. You 15:10  
21 really seem to feel that nothing happened if you spoke  
22 to the people at ward level?  
23 A. Yes, yes.  
24 212 Q. You told us that now you have access to more senior  
25 management, as it were, you would do that pretty 15:11  
26 automatically now. When did that change? At what  
27 point did you feel you could go to the senior managers  
28 of the Trust to get something to happen?  
29 A. 2018 or '19. It all started with that member of -- the

1 director standing in as my go-to person.

2 213 Q. Yes.

3 A. And that sort of gave me confidence, well, I'll go to

4 her. I don't want to go right up to her, let's try the

5 one slightly lower. But she did nothing for me. 15:11

6 214 Q. So, before that --

7 A. I didn't know anybody in senior management. Nobody at

8 all.

9 215 Q. I understand that. Did you ever speak to the nurses in

10 charge, one of the nurses in charge of the ward? 15:12

11 A. Oh, yes. Yes.

12 216 Q. Did anything happen as a result of that?

13 A. Generally, no is the answer.

14 217 Q. You also speak in your statement, I think, about

15 speaking, was it to Bryson House and advocates. Did 15:12

16 you ever have somebody who you could speak to outside

17 of Muckamore who would give you assistance or support

18 as an advocate for you or for Timmy?

19 A. It was just the Bryson House advocates that I knew

20 about. I only knew because one member of staff slipped 15:12

21 me a note at the contact meeting.

22 218 Q. How did they help you?

23 A. Well, at the very first stage in 2018, this girl

24 advocate that came with me to that place Fairview.

25 It's just -- it's a bit like that MAPA training, it 15:12

26 empowers you, you've got back up. The way they treat

27 you, as if not quite that you're mad but you're

28 troublesome, whereas she backed me up 100%. She said I

29 was completely right, what you're doing.

1 219 Q. Just one last thing. You told us about your  
2 interaction with the podiatrist and Timmy's feet.  
3 Also, in your statement you talk about things like  
4 having to buy the weighted blanket and the chair?  
5 A. Yes. 15:13

6 220 Q. Did you have any interaction with occupational  
7 therapists --  
8 A. Recently.

9 221 Q. -- or speech and language therapists?  
10 A. Only recently. No, not in those days. This has been 15:13  
11 in the last year.

12 222 Q. Physios?  
13 A. Mo. Oh, no, I have never been in touch with a physio.

14 223 Q. Any interaction with allied health professionals in  
15 terms of speech and language or OTs has been very 15:13  
16 recent; in the last couple of years?  
17 A. Very recent. In the last year; year and a half  
18 actually.

19 224 Q. Were you aware of their existence before that?  
20 A. Yeah but apparently Timmy didn't need OT, Timmy didn't 15:14  
21 need speech therapy. I did ask.

22 225 Q. Who told you that?  
23 A. Purely the ward staff.

24 226 Q. All right.  
25 A. When I was watching the sessions last week or the week 15:14  
26 before, there was some people sitting here saying about  
27 the policies and procedures and what was happening.  
28 What they should have said these are the policies and  
29 procedures and we expect them to be enacted in the

1 hospital but that's not always the case. Yeah.

2 227 Q. We do understand that.

3 A. Yeah. Right.

4 228 Q. That's something we are going to be exploring later on  
5 in the Inquiry, so don't worry about that. 15:14

6

7 Dawn, can I just thank you very much indeed for coming  
8 to speak about Timothy. You've spoken very clearly.  
9 It must have been very difficult for you to make this  
10 journey, to make such a full statement and then to come 15:15  
11 here and speak about it. I just want to thank you very  
12 much. You've certainly given a voice to Timmy, which I  
13 know you wanted to do.

14 A. I'm glad to hear that, yeah. Thank you. Thank you to  
15 everybody. 15:15

16 CHAIRPERSON: Thank you. We'll take a break now  
17 because I think we are going to hear from your sister.  
18 I think that will be a bit shorter than your evidence  
19 but we'll take a break just for sort of 15 minutes now.  
20 Thank you very much indeed. 15:15

21

22 THE INQUIRY BRIEFLY ADJOURNED AND RESUMED AS FOLLOWS:

23

24 CHAIRPERSON: Thank you.

25 MR. MCEVOY: Chair, Panel, the next witness is 15:40  
26 Catherine, who is the aunt of P77. There is a brief  
27 statement on two quite short exhibits then.

28

29

1 CATHERINE, P77'S AUNT, HAVING BEEN SWORN, WAS EXAMINED  
2 BY MR. MCEVOY AS FOLLOWS:  
3

4 229 Q. MR. MCEVOY: Okay. Catherine, good afternoon. You  
5 have been present for Dawn's evidence so you have some 15:40  
6 idea of how things run now. If I can take you just to  
7 the folder that's in front of you which contains a copy  
8 of a statement in your name. It totals 33 pages. If I  
9 could ask you to turn to page 16, there is a  
10 declaration of truth and, hopefully, your signature. 15:41

11 A. Yes.

12 230 Q. And a date of 27th April '23?

13 A. Yeah.

14 231 Q. Do you wish then to adopt that statement as the basis  
15 of your evidence to the Inquiry? 15:41

16 A. Yes.

17 232 Q. I am going to read that statement in in much the same  
18 way as I did with Dawn's. I'll do that now and then I  
19 will have some very brief questions for you at the  
20 conclusion. 15:41

21  
22 "My connection with Muckamore is that my nephew  
23 Timothy, known as Timmy, is a patient in Muckamore. The  
24 relevant time periods that I can speak about is  
25 November 2003 to the current day. Timmy is still a 15:41  
26 detained patient in Muckamore. I attach a copy of  
27 Timmy and me at Exhibit 1.

28  
29 "My sister Dawn has made a detailed statement to the

1 Inquiry dated 19th April 2023. I have had the  
2 opportunity to read this statement and I agree with the  
3 content of Dawn's statement. I make this statement to  
4 add some additional information which I recall, and  
5 also to set out my observations in respect of Timmy's 15:42  
6 detention at Muckamore as is stated. As my mum and dad  
7 grew older, I became their carer and therefore spent a  
8 lot of time with my mum and dad and we frequently  
9 discussed our thoughts on Timmy's detention in  
10 Muckamore, both when he was nine years old in 2003, and 15:42  
11 again in 2012. My dad died on 26th April 2011 and mum  
12 died on 9th July 2017.

13  
14 "I recall when Timmy first went into Muckamore in 2003,  
15 my mum and dad were absolutely terrified for him. They 15:42  
16 advised me that they had heard previous scandals about  
17 patients in Muckamore, and knew of other patients who  
18 had been abused in Muckamore. My dad was a man of his  
19 word and if people spoke to him in confidence, he would  
20 not breach this confidence. My dad was an optician and 15:42  
21 a member of a golf club in Belfast and he knew a lot of  
22 people, both socially and through his work. My dad was  
23 adamant that Muckamore was a terrible place but never  
24 went into any detail as to why he had formed this view.  
25 Similarly, he never disclosed who had told him about 15:43  
26 Muckamore. I recall in 2003 I tried to alleviate their  
27 concerns by advising them that these were probably  
28 stories from times years ago and that this was in the  
29 past. My dad voiced his extreme concern when Timmy



went into Muckamore.

"There was nowhere else for Timmy to go due to Timmy's aggression, and Dawn had no other options. Dawn never liked for me or my mum or dad to visit Timmy in Muckamore. She discouraged us arranging a visit as I think she thought it would be too upsetting for us. I think she was concerned that we would notice things that we were not happy about or that we did not think were right, things that Dawn was already aware of but did not speak to us about. I think she felt that there was nothing she could do about them and there were no other options for Timmy.

15:43

15:43

"My mum told me that Dawn was probably afraid that I would go into Muckamore and be outspoken about what I saw, which could then have created further problems for Timmy. Accordingly, my mum, dad and I were reliant on the information which Dawn fed back to us about her visits to Timmy and the meetings she attended at Muckamore, and we had confidence that Dawn was doing everything that could be done for Timmy as his mother.

15:44

15:44

"During Timmy's first admission to Muckamore in 2003, 2004, what my parents said about Muckamore was confirmed to us as a family. When Dawn told us how the staff spoke to her, we did not like it. Dawn also reported to us that the staff did not listen to what she had to say in respect of her experience of Timmy's

15:44

behavioural traits as Timmy's mother. All we could do was try to support Dawn.

"Timmy was on a gluten and dairy free diet before he went into Muckamore in 2003. I recall that my mum and dad had gone to the length of putting a child lock on the fridge to stop Timmy getting at dairy foods in their house. Dawn was making gluten free bread and Dawn would not be known for her enthusiasm for home baking. Timmy was looking good and healthy. When Dawn advised me that Muckamore told her that Timmy was eating gluten and dairy off other patient's plates, I was really annoyed to hear this. I recall that my mum and I discussed that there really should be enough staff in Muckamore to stop patients taking food off one another's plates. If we as a family were able to stop Timmy eating gluten and dairy, how were the staff in Muckamore not able to do the same? The staff just clearly could not have been bothered.

"I recall that my dad was surprised when the staff were getting Timmy ready for a phased release from Muckamore in 2004. From what my dad had heard, once a patient was admitted to Muckamore, they would never get out. Our family were delighted that Timmy was actually released from Muckamore and that his aggression was fixed. My mum, dad, and I had discussions about Muckamore, mainly over a cup of tea at the side of their bed. My mum and dad had nightmares about

1 Muckamore and would wake up in the middle of the night  
2 looking talk to me about Timmy and Muckamore. In 2011,  
3 when my dad was dying, he gave mum and I our jobs.  
4 Mine was to look after mum and also to make sure that  
5 Timmy ever, ever went back into Muckamore again. Mum 15:46  
6 was to look after the boys, being Dawn's three  
7 children.

8  
9 "When dad died in 2011, Timmy's behaviour was getting  
10 worse as in his aggression was escalating. Timmy's 15:46  
11 social worker, H432, was telling Dawn and I that there  
12 was nowhere for Timmy to go. Mum and I knew that  
13 Muckamore was open. We were horrified that we were  
14 even considering a return for Timmy to Muckamore.  
15 However, Timmy was big and strong and my mum was 15:47  
16 seriously concerned that Timmy could end up  
17 accidentally killing Dawn, whom he clearly loved,  
18 during one of his violent outbursts. My mum did not  
19 want Timmy responsible for murdering her daughter and  
20 it was against that backdrop that we as a family were 15:47  
21 prepared to consider Muckamore again.

22  
23 "In 2011, my mum was unwell and admitted to RVH. My  
24 mum and I discussed that we would encourage Dawn to  
25 call the PSNI and ambulance the next time that Timmy's 15:47  
26 school called her to collect him due to heightened  
27 aggression, which we did. I received a phone call from  
28 Dawn in September 2011 advising me that she was at  
29 Torbank School and the PSNI and an ambulance were



1 allow Timmy to have his birthday in the Iveagh Centre  
2 and for the transfer to take place the following day.  
3 I remember my mum's words were "They have got their  
4 claws into him now". She was referring to Muckamore.  
5 We never thought Timmy would get out of Muckamore, and 15:49  
6 he was likely to be abused in some way.

7  
8 "I recall my mum and I going to visit the senior  
9 minister of our church in April 2016. I was sent away  
10 to make tea or something because my mum wanted to talk 15:49  
11 to the minister on her own. This was after my dad had  
12 died. My mum advised me that the minister knows what  
13 my dad knew about the abuse in Muckamore and that it  
14 was still happening. The minister was horrified that  
15 Timmy was in Muckamore, but there were no other 15:50  
16 options. Timmy had a man's strength and Dawn was a  
17 small female and could not physically manage him.  
18 Timmy has two brothers but it would not be fair on them  
19 to ask them to look after Timmy. They have their own  
20 lives to live. Accordingly, mum and I had to support 15:50  
21 Dawn for Timmy to go into Muckamore.

22  
23 "When Timmy was moved to Muckamore in September 2012,  
24 Dawn was advised by Muckamore staff, and in particular  
25 H397, the nurse in charge of PICU Ward where Timmy was 15:50  
26 admitted, she was not allowed to visit him. Those were  
27 the rules. My mum said Timmy's not an animal that they  
28 are trying to break. Timmy was so upset and distressed  
29 the first few weeks in Muckamore in September 2012 that

1 we thought it would have been better if he had have  
2 been allowed to see Dawn as a loving face, but Dawn  
3 told us that this was refused by H397. Instead, they  
4 wanted to break Timmy's spirit and make him conform.

5  
6 "I recall that mum occasionally suffered from urinary  
7 tract infections and would sometimes become confused as  
8 a result. As soon as she came back round to herself,  
9 the first person she would ask after was Timmy. She  
10 would ask is Timmy okay. I recall my mum pointing out 15:51  
11 to me that Timmy seemed to be in seclusion a lot. My  
12 mum would say to Dawn that it was all she had to ask  
13 for permission to see her son, as Dawn would call  
14 Muckamore in advance of the visit to check to see if he  
15 was in seclusion. Dawn was not allowed to see Timmy 15:51  
16 when he was in seclusion and my mum did not think this  
17 was right. My mum was also annoyed that she never had  
18 any photos of Timmy as Dawn had been told by Muckamore  
19 staff she was not allowed to take photos. Dawn  
20 followed the Muckamore rules set out to her by H397 and 15:52  
21 she had no reason to query them.

22  
23 "It seemed as if, when Dawn had reported to me that she  
24 had had a difficult meeting with a member of Muckamore  
25 staff, or if she complained about something, the 15:52  
26 outworkings would be that Dawn would not be allowed to  
27 see Timmy for a number of weeks thereafter. It was as  
28 if Muckamore staff were punishing Dawn. In paragraph  
29 37 of Dawn's statement, she refers to a meeting whereby

1 H397 told Timmy's consultant that Timmy had been  
2 swimming, which was not correct. Dawn asked H397 to  
3 follow up with the consultant and correct this  
4 information, which he did not want to do. Dawn did not  
5 see Timmy for nearly six weeks after this. We stopped 15:52  
6 encouraging Dawn to complain because the outworkings of  
7 her complaints were that she was not allowed to see  
8 Timmy, and that was not in the best interests of Timmy  
9 or Dawn.

10  
11 "I was looking after mum and the only way I could  
12 support Dawn was to listen to what she had to say in  
13 detail and retain the information. Mum and I purchased  
14 nice clothes for Timmy to wear in the same way we  
15 bought for Dawn's other two sons. Dawn reported to us 15:53  
16 that she never saw Timmy wear these nice clothes, he  
17 was always dressed in other people's clothes, which  
18 were torn. I believe the staff took Timmy's nice  
19 clothes and either kept them for themselves or gave  
20 them to their children. I did not like this but I did 15:53  
21 not say anything about it.

22  
23 "Dawn, mum and I were concerned about Timmy's weight  
24 when he was in Muckamore from 2012. Dawn reported to  
25 us that Timmy looked pregnant. It took Dawn such a 15:53  
26 long time to get Muckamore staff to realise that Timmy  
27 was overweight because of the food that Muckamore was  
28 allowing Timmy to eat. Timmy does not cook or shop for  
29 himself, he eats what is handed to him. The staff in

1 Muckamore were clearly overfeeding Timmy. We were  
2 pleased when Timmy's weight was starting to come down  
3 in and around 2016 and 2017.

4  
5 "The only time Muckamore listened what Dawn was saying 15:54  
6 was when she was giving Muckamore cash. My mum was  
7 absolutely horrified as to the amount of cash which  
8 Dawn was paying to the ward, mainly H397 at Muckamore.  
9 My mum wanted to give Timmy money and make sure he  
10 wanted for nothing but she did not want to pay in cash. 15:54  
11 Instead, she insisted in paying money by cheque and she  
12 made sure that I did the same. My mum was very  
13 financially aware. Dawn told the staff at Muckamore  
14 that she never wanted Timmy to want for anything, which  
15 was a mistake because they treated Dawn like a cash 15:54  
16 machine in return.

17  
18 "Dawn had a concern that if she did not pay over the  
19 money that was requested, then Timmy would be abused  
20 and forgotten about by the staff in Muckamore. Mum and 15:54  
21 I paid cheques into Muckamore for Timmy as presents for  
22 his birthday and Christmas. My mum felt that this gave  
23 more credibility and accountability to the money that  
24 was paid into Muckamore for Timmy. We wanted Timmy to  
25 have money in his account in case he needed anything. 15:55  
26 My mum was very keen to ensure that Timmy received the  
27 rocking chair and weighted blanket that we had agreed  
28 to buy for him in Christmas 2016, which Dawn refers to  
29 in paragraph 39 of her statement. Muckamore suggested



1 that we buy the chair as a present, but there appeared  
2 to be a whole lot of bureaucracy around Timmy getting  
3 this chair. My mum asked me to phone a removal company  
4 to see whether the chair could be delivered to her  
5 house and then the removal company could deliver it to 15:55  
6 Muckamore. My mum told me to ring Muckamore, which I  
7 reluctantly did. I think I spoke with 397. He gave me  
8 a load of drivel down the phone about having to follow  
9 procedures and in the end he told me that they had to  
10 get the chair through the Belfast Trust. We had paid 15:55  
11 Muckamore for the chair and my mum thought Muckamore  
12 staff had pocketed the money. The deputy in charge of  
13 Learning Disability Services for Belfast Trust arranged  
14 for us to receive a refund of the money paid, which  
15 confirmed to me that my mum was probably correct. My 15:56  
16 mum had passed away by the time we received the refund.

17  
18 "I was concerned regarding the relationships between  
19 staff members at Muckamore. If they were not married  
20 to each other, they were relatives or in a 15:56  
21 relationship, or next door neighbours, or some form of  
22 close connection. The staff talked about this openly,  
23 it was not a secret. This meant that no one was  
24 independent. I remember Dawn telling me that H397 told  
25 her that he was the cousin of H334, a nurse at 15:56  
26 Muckamore. H334 came across as a nervous guy, always  
27 anxious and a bit depressed. This was before he went  
28 off on long-term sick leave in and around 2016, 2017,  
29 which coincided with the discovery of the abuse. By

1 the time H334 returned to work, a lot of staff members  
2 were suspended and he was like a different person. He  
3 was outgoing and happy.

4  
5 "I recall that Dawn advised me that she was speaking 15:57  
6 with H334 when he returned from sick leave and she  
7 mentioned to him that he was H397's cousin. H334  
8 denied this, which was strange. I believe that H334's  
9 previous behaviour was as a result of being under the  
10 influence of abusive staff members but that is just my 15:57  
11 opinion, of course.

12  
13 "I noticed that any new staff member to Muckamore  
14 started enthusiastic and positive and ready to perform  
15 the role to the best of their ability. I observed, and 15:57  
16 also from what Dawn told me, that within a period of  
17 six weeks, the new staff had either asked for a  
18 transfer, handed in their notice or, worst of all,  
19 conformed with the negative behaviours and practices of  
20 the existing staff members. From what I observe and 15:58  
21 also from what Dawn tells me, I believe this still to  
22 be the position today. This is the case for nurses,  
23 general practitioners, social workers, doctors and  
24 dieticians. It is across the board. If they stay  
25 beyond six weeks, they become consumed by the negative 15:58  
26 hospital culture.

27  
28 "I recall being in a meeting with the Interim Director  
29 of Learning Disability and Mental Health Services at

1 the Belfast Trust with my sister Dawn, and when Dawn  
2 suggested a simple change as to how the staff in  
3 Muckamore reported to her, a response was "This is the  
4 way it has always been done". Therefore, this is the  
5 attitude at the highest level, not just junior staff. 15:58  
6 Surely by now very senior management should know that  
7 there are flaws in how things have always been done and  
8 change is necessary.

9  
10 "I can reflect and see this more clearly than Dawn 15:59  
11 because Dawn is at the coal face of dealing with issue  
12 after issue concerning Timmy and she is consumed with  
13 that and making sure he is okay.

14  
15 "My mum seemed to know that there was abuse in 15:59  
16 Muckamore but she seemed to think this was limited to  
17 financial abuse. I do not know where she obtained this  
18 knowledge. As a family, we could afford financial  
19 abuse and keep up with the demands of Muckamore for  
20 money. To hear that our worst fears of what dad had 15:59  
21 said about Muckamore were true, that the abuse was not  
22 limited to financial, was awful. Thankfully, my mum  
23 died just before we learned the full extent of the  
24 abuse on Timmy.

25 15:59  
26 "I recall a meeting in around late 2018 held in the  
27 Antrim Area Hospital in Antrim. The meeting was  
28 organised by Muckamore to discuss the abuse with  
29 families of those with relatives in Muckamore. The

1 Chair of the Board of Belfast Trust and the Chief  
2 Executive of the Belfast Trust both attended. They  
3 were very apologetic. They advised us at this meeting  
4 that they did not know about the abuse and assumed that  
5 everything was fine in Muckamore because they had not 16:00  
6 heard any signs of discontent in years. The deputy in  
7 charge of Learning Disability in the Belfast Trust also  
8 attended this meeting, but it was their job to make  
9 sure everything was okay, not simply assume so because  
10 they had not heard anything. The Chair and Chief 16:00  
11 Executive seemed to think this was a justifiable  
12 excuse. This meeting was not overly useful as families  
13 did not know all the facts or the extent of the abuse  
14 at that time, and had an underlying fear that their  
15 loved one would be discovered to have been abused as 16:00  
16 well as Timmy.

17  
18 "I regularly attended meetings with Dawn at Muckamore  
19 to support her, relating to anything from monthly  
20 update meetings on Timmy's treatment, resettlement, or 16:00  
21 meetings with management from Muckamore and/or the  
22 Belfast Trust. During any meeting, there is always  
23 someone taking notes, usually very loudly typing on a  
24 keyboard, almost to the point that the typing sound  
25 drowns out whoever is talking, which is very 16:01  
26 irritating. When Dawn or I ask for the minutes of the  
27 meeting, it usually takes months for them to be  
28 available. This is the case even when the meetings are  
29 being recorded on Zoom. If the minutes are produced,

1 which are not always the case, the minutes are written  
2 in a way to highlight the positives and ignore the  
3 negatives of the discussion at the meeting. They do  
4 not detail anything discussed which is not on the  
5 original agenda. It is difficult to challenge the  
6 content of the minutes because they are not incorrect  
7 but they do not accurately reflect the tone of the  
8 meetings or the behaviours projected by people at the  
9 meeting.

16:01

10  
11 "Occasionally I am in Dawn's house when she is  
12 attending a Muckamore Departmental Assurance Group  
13 online and overhear the meeting. When the minutes of  
14 these meetings are produced, again they do not reflect  
15 what was said at the meeting. I recall attending an  
16 update meeting with Dawn at Muckamore. This was in and  
17 around September 2021. In the morning before the  
18 meeting, it would be the usual course for Dawn to be  
19 sent through a report from each department at Muckamore  
20 who is involved in the care of Timmy. During the  
21 course of the update meeting, H409, assistant service  
22 manager at Muckamore who chaired the meeting, allowed  
23 each department to read out their report verbatim.  
24 There were a number of other Muckamore staff present at  
25 the meeting but I do not recall their names. Dawn  
26 rightfully asked questions on the content of what was  
27 being read out during the course of this meeting; it  
28 was to do with Timmy's care at Muckamore. After the  
29 meeting, Dawn advised me that H409 telephoned her and

16:01

16:01

16:02

16:02

1 advised that some of the staff found her questioning to  
2 be contentious and upsetting. She advised Dawn that  
3 none of the staff had made a formal complaint but that  
4 in future, Dawn should not ask questions during the  
5 course of these meetings. She should keep these and 16:03  
6 put them to 409 at the end of the meeting and she will  
7 address them separately.

8  
9 "Dawn made contact with H315, divisional nurse at  
10 Muckamore, to complain about what 409 had said to her. 16:03  
11 H315 advised Dawn that she did not believe that H409  
12 could have said this. She arranged a meeting with  
13 Dawn, H315 and H409, and I also attended. I do not  
14 remember exactly when this was but it was shortly after  
15 the meeting in September 2021. During the course of 16:03  
16 this meeting, H409 denied advising Dawn that she was  
17 not allowed to ask questions at the update meeting.  
18 She said that if this was what she inferred, then she  
19 apologised. Going forward, the meetings were recorded  
20 on Zoom, which Dawn and I were happy with as it limited 16:03  
21 how antagonistic the staff behaved. There is a feeling  
22 of them, the Muckamore staff, and us, Dawn and I, at  
23 these meetings. It feels like Dawn is only provided  
24 information on Timmy's care if Muckamore staff are  
25 forced to do so by Dawn. 16:04  
26

27 "I recall in late 2021 or early 2022 that Dawn advised  
28 me that she went to Muckamore to visit Timmy and was  
29 told by an agency lead nurse called H433 - she does not

1 recall her surname - that Timmy was not available for a  
2 visit. This was in the reception area of the hospital.  
3 Dawn advised me that the nurse was very aggressive  
4 towards her. She advised Dawn on three occasions that  
5 Timmy was not available, even though Dawn accepted this 16:04  
6 the first time the nurse told her so. The nurse kept  
7 saying she would not be seeing Timmy on that day. Dawn  
8 advised me that the nurse leaned over the reception  
9 desk towards her in an aggressive way and Dawn thought  
10 that the nurse might hit her. Dawn advised me that the 16:04  
11 nurse would not press the release button to open the  
12 door to let her out, and only did so after being asked  
13 by Dawn a few times. Dawn sent an email to H234,  
14 Interim Co-Director of Nursing, to complain about this.  
15 I do not have a copy of the email. I do not know if 16:05  
16 H234 responded to the email but Dawn advised me that  
17 H234 had advised her that she would ask the member of  
18 staff to have reflections on how she treated Dawn.  
19  
20 "During a meeting in Norr House at Knockbracken 16:05  
21 Healthcare Park on 15th June 2022, which was attended  
22 by H428, Director For Learning Disability Services at  
23 the Belfast Trust; H414, a director of Muckamore, H234,  
24 FLSW2, family liaison officer, Dawn and I, Dawn brought  
25 up her complaint regarding the incident with the nurse 16:06  
26 at the reception desk. H414 advised that she had not  
27 heard about this; H234 had not informed her. When Dawn  
28 asked H234 had she not informed H414 of her complaint,  
29 H234 put her head down and shook it slowly from side to

1 side. Dawn went through her experience with H414  
2 during this meeting and H414 seemed to be taking this  
3 very seriously. However, she never followed up or  
4 seemed to do anything about it. This is a good example  
5 of Muckamore saying they will do something but then  
6 doing nothing.

16:06

7  
8 "As the aunt of a patient, I feel that safeguarding in  
9 Muckamore was always poor. Prior to the discovery of  
10 the abuse in 2017, 2018, the only people that we could  
11 approach if we had an issue which we were not happy  
12 about with Timmy's care in Muckamore were H251,  
13 patient-on-patient safeguarding in Muckamore, or H283,  
14 a social worker in safeguarding in the Belfast Trust.  
15 When Dawn phoned H283 to talk with the safeguarding  
16 issue, H283 would keep her on the phone for a very long  
17 time talking about her own life issues. Dawn advised  
18 me that H283 had a remarkable way of avoiding a  
19 question and directing the conversation away from the  
20 topic that Dawn wanted to discuss. Dawn therefore  
21 never got anywhere with H283.

16:06

16:07

16:07

22  
23 "When the abuse was discovered, I did some research on  
24 the internet and this was the first time that I had  
25 heard of or come across RQIA or the Patient Client  
26 Council. Surely both of these organisations should  
27 have been involved in Muckamore but Dawn or I had never  
28 heard of them. I recall that after the discovery of  
29 the abuse and RQIA started to audit Muckamore, the

16:07



1 staff at Muckamore would be able to tell us when RQIA  
2 were conducting a surprise visit. It is not much of a  
3 surprise if the hospital knew that they were coming.  
4

5 "In paragraph 97 of Dawn's statement, she refers to a 16:08  
6 meeting at RQIA's offices in which she attended with  
7 two members of RQIA staff. I was also in attendance at  
8 this meeting. This was an incredibly difficult meeting  
9 for Dawn as she relayed everything that had happened to  
10 her son in Muckamore. As Dawn says in her statement, 16:08  
11 despite all of what she relayed to RQIA at this  
12 meeting, Muckamore received a clean bill of health from  
13 RQIA, which is ridiculous. I am aware from research  
14 that I have conducted on the internet that RQIA here in  
15 Northern Ireland do not have the same powers as they do 16:08  
16 in England and Wales. They are like a dog with no  
17 teeth and the Belfast Trust simply indulge them.  
18

19 Post-2017, Dawn has been advised of a huge number of  
20 safeguarding incidents involved Timmy. I do not know 16:09  
21 the exact number. I understand that when a  
22 safeguarding incident occurs, Muckamore are supposed to  
23 complete a form called APP1 and Dawn should receive a  
24 copy of this form. I am advised by Dawn that she does  
25 not recall ever having received one of these forms 16:09  
26 despite the number of safeguarding incidents Timmy has  
27 been involved in. Therefore, Muckamore are still not  
28 following their own procedures. It appears that the  
29 more serious the safeguarding incident, the longer

1 takes to be investigated and for the outcome to be  
2 established. Surely if the incident is so serious,  
3 then it should be investigated rapidly. An incident  
4 can take two to three years to be investigated. By way  
5 of example of this, I recall in March 2021 Dawn had 16:09  
6 advised me that she had received a phone call from a  
7 nurse in Muckamore - I do not know who this was - to  
8 advise her that they suspected that Timmy had broken  
9 his toe and Muckamore would open a safeguarding  
10 incident concerning this. Once safeguarding looked 16:10  
11 into the incident, they identified that Timmy had  
12 incurred this broken toe during an incident two weeks  
13 previous when Timmy was being violent and needed to be  
14 restrained. Dawn has been provided with three  
15 different explanations as to how Timmy incurred his 16:10  
16 broken toe. The first explanation is that Timmy was  
17 wearing flip flops and his foot pushed forward and one  
18 of the Muckamore staff stood on his toe while trying to  
19 restrain him. The second explanation is that while  
20 trying to hold Timmy in a MAPA hold, a nurse had stood 16:10  
21 on Timmy's foot for 23 seconds. The final explanation  
22 is the same as the second, only that the nurse stood on  
23 Timmy's foot for nine seconds. All explanations  
24 identify the same incident and there is CCTV of the  
25 incident but there are different versions of what 16:10  
26 actually happened.

27  
28 "I understand a member of the safeguarding team at  
29 Muckamore referred this incident to the PSNI.

1 Dr. H224, Timmy's consultant at the time, did not  
2 arrange for Timmy to attend hospital to have his toe  
3 x-rayed. Her explanation was that if Timmy's toe was  
4 broken, then there was nothing the hospital can do for  
5 him. Therefore, there is no evidence that Timmy's toe 16:11  
6 was indeed broken. Accordingly, the PSNI advised they  
7 could not take the matter forward. The PSNI, however,  
8 advised, having reviewed the CCTV footage of the  
9 incident, they were unhappy because some of the holds  
10 used by Muckamore staff during this incident which 16:11  
11 resulted in Timmy's toe being broken are not compliant  
12 with MAPA, and they referred the matter to a specialist  
13 in MAPA technique. Dawn just received in the post a  
14 letter from the Belfast Trust a few days ago, a letter  
15 from the Belfast Trust dated 13th April 2023, which 16:11  
16 encloses a copy of the report prepared by that  
17 specialist dated 16th March 2022 following the referral  
18 from the PSNI. I attach a copy of this report at  
19 Exhibit 2. On the last page of this report, the  
20 specialist states whilst "Staff 1 and Staff 4 feel this 16:12  
21 is appropriate way to behave towards patients, they  
22 remain a risk to Timothy and other vulnerable people in  
23 their care".

24  
25 "FLSW2, our family liaison officer, has advised me from 16:12  
26 inquiries that he has made Staff 1 and Staff 4 were put  
27 on suspension within a few days of this report being  
28 prepared by the specialist but this means that due to  
29 the length of time that it took for this matter to be

1 investigated, these members of staff were working with  
2 Timmy and other vulnerable people for a full year  
3 before they were suspended, during which time, in the  
4 specialist's view, being a risk to such patients. This  
5 astounds me."

16:12

6  
7 Catherine, you then go on to talk about Dawn's private  
8 life and background. I am not intending to read it out  
9 in its entirety but I'll pick it up just where you say  
10 on fourth line down:

16:13

11  
12 "I believe that Muckamore has the ability to coercively  
13 control Dawn. Every interaction Dawn has with  
14 Muckamore, there is the undertone that Muckamore have  
15 total control over Timmy. Therefore, Dawn advises me 16:13  
16 that she feels like she needs to be nice to the staff  
17 in Muckamore. The coercive control is subtle but  
18 constant. It is lucky that Dawn is strong enough to  
19 deal with the staff in Muckamore. I am conscious when  
20 I am speaking to Dawn about Timmy's treatment that I do 16:13  
21 not reinforce anything which she is told by Muckamore.  
22 I have insisted that Dawn documents all of her  
23 interactions with Muckamore by way of email,  
24 particularly around safeguarding, and that in turn she  
25 insists that any responses she receives are also 16:13  
26 documented in writing. I trust Dawn to deal with  
27 Muckamore in everything that she does or does not do is  
28 in the best interests of Timmy. This includes her  
29 picking her battles and only pushing certain points

1 with Muckamore so far."

2  
3 Catherine, thank you for that statement. I only have a  
4 couple of questions arising from it, and it's really  
5 from your perspective as Dawn's sister. 16:14

6 A. Mhm-mhm.

7 233 Q. Obviously the Inquiry has heard first-hand from Dawn,  
8 both in her statement and oral evidence today, but you  
9 get to experience her on a daily basis. Perhaps we  
10 have seen one version of Dawn today but can you tell us 16:14  
11 about the toll that Timmy's experience in Muckamore has  
12 taken on her from your own perspective?

13 A. No matter how upsetting anything is, we were brought  
14 you don't embarrass people, you don't show your  
15 emotions, and that goes for sitting here today. Any 16:15  
16 meetings she has with Belfast Trust or the hospital,  
17 it's you deal sensibly, logically, with the people in  
18 front of you, and then you wait and you get in the car  
19 and you drive five miles down the road and then you can  
20 fall apart. You cannot fall apart because the fact 16:15  
21 that she is labelled "mother" means instantly as soon  
22 as she starts to speak, anybody in the meeting will go,  
23 we don't need to listen any more, wait for her to  
24 finish and then they reengage. So added to that, if  
25 Dawn got emotional, there would be absolutely no 16:15  
26 credibility.

27  
28 It's permanently pushing water uphill. There just  
29 never seems to be an end to it. There never seems to

1 be an end to safeguarding incidents or worries about  
2 Timmy, you know. We self-check that are we being  
3 neurotic. Our standards are very low, we just want  
4 Timmy not to get hurt; that's it. We don't want them  
5 necessarily to be nice to him, just don't hurt him.

16:16

6  
7 We've actually had a discussion as to whether we should  
8 give evidence because Timothy is still in Muckamore and  
9 what sort of subtle retribution will be taken out on  
10 Dawn and Timothy? How long will it be before Dawn  
11 isn't allowed to see Timothy because well, he might  
12 have Covid so we need to seclude him; or well, you  
13 know, he was a bit upset today so he is asleep. They  
14 always have plenty of excuses. But there will be  
15 something but, again, upbringing it's right thing to do  
16 because you do need to hear what the reality is,  
17 regardless of the effects that it has on Dawn and the  
18 rest of the family.

16:16

19 234 Q. Catherine, could I then ask you just one other matter  
20 to ask you about. In the body of your statement, you  
21 referenced becoming aware of two statutory  
22 organisations namely, the RQIA and the Patient Client  
23 Council. The RQIA, you have discussed some  
24 interactions with them. Taking that organisation  
25 first, based on the interactions that you and Dawn have  
26 had with the RQIA - I mean, you mention the lack of  
27 teeth that you perceive it has - is there anything that  
28 you think it could do better from your perspective as  
29 the carers for Timmy?

16:17

16:17

16:17

1 A. I think they should make a surprise visit, an actual  
2 surprise visit, not seeing staff two days beforehand  
3 going "RQIA are doing a surprise visit in two days, I  
4 have to get all the paperwork right". I mean, I know  
5 Northern Ireland is a small place, but seriously. 16:18

6 235 Q. Then in terms of the Patient Client Council, you had no  
7 interactions with them?

8 A. I didn't even know they existed. As for Muckamore,  
9 you know.

10 236 Q. How would you describe your interactions with them 16:18  
11 having since found out about them and what they do?

12 A. Well meaning but clueless. They think their normal  
13 reality is normal for Muckamore, and they apply those  
14 standards. That's not normal for Muckamore. Muckamore  
15 is a whole different standard. So it's like they can't 16:19  
16 conceive that... They expect a certain level of  
17 professionalism.

18 237 Q. Yeah.

19 A. A certain level of, you know, that's the way everybody  
20 does things because obviously in every hospital that is 16:19  
21 the way that everyone does things. That doesn't apply  
22 to Muckamore, and they don't seem to get that concept.  
23 It is a different scale.

24 238 Q. Okay. Thank you.

25 A. Sorry. 16:19

26 239 Q. Those are the questions I have for you. It may be that  
27 the Panel have some questions.

28 CHAIRPERSON: We don't. I think your sister has  
29 covered a lot and you've added to that. Can I just

1           thank you very much for coming along, particularly for  
2           supporting your sister and helping to give a voice for  
3           Timothy that we have heard. Can I thank you both very  
4           much again.

5  
6           All right. We're next sitting tomorrow, I think at ten  
7           o'clock. That is right. Tomorrow we will be starting  
8           to be able to use the live stream again. Thank you  
9           very much.

10  
11           THE INQUIRY ADJOURNED TO 10.00 A.M. ON WEDNESDAY, 21ST  
12           JUNE 2023