PRIVATE & CONFIDENTIAL

MUCKAMORE ABBEY HOSPITAL INQUIRY

SITTING AT CORN EXCHANGE, CATHEDRAL QUARTER, BELFAST

HEARD BEFORE THE INQUIRY PANEL

ON WEDNESDAY, 28TH SEPTEMBER 2022 - DAY 16

Gwen Malone Stenography Services certify the following to be a verbatim transcript of their stenographic notes in the above-named action.

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THE INQUIRY RESUMED ON WEDNESDAY, 28TH SEPTEMBER 2022 AS FOLLOWS:

CHAIRPERSON: Thank you very much. I am sorry for the short delay, but the witness wanted a little bit of time. Could I just mention two things before we start. I am sorry to say that tomorrow afternoon's witness is unwell - it's not a Covid related issue, it's something else - and so it is unlikely we're going to be able to sit tomorrow afternoon because we don't have other evidence that we can put in place, but tomorrow morning we hope will be effective. 10:17 10:17

Could I also just mention it is particularly important with the witnesses that we have today, that you have your phones on silent. No dings, please. Preferably on airplane mode if you can bear it, but at least on silent. Thank you very much. Okay. 10:17

MS. KILEY: Chair, may I mention a couple of housekeeping matters before the witness comes in? 10:18

CHAIRPERSON: Yes.

MS. KILEY: So the witness is on the schedule as the mother of former patient P28. She wishes to be known by her first name, which is P28's mother. The patient, P28 , will also be known which his first name, which is P28 , and there will also be mention I think in this morning's evidence to this witness's husband, who himself is due to give evidence this afternoon, and he will be known as P28's father. One of the things I wanted 10:18

to mention is that this witness will be accompanied by two people in the room. So sitting beside her in -- at the witness table --

CHAIRPERSON: Hold on a second. Yes. Sorry, continue.

MS. KILEY: Sitting beside the witness at the witness table will be the Reverend Colin Taylor, who knows that his role is a supporting one and that he isn't to intervene in evidence. But the witness has also asked that her husband sit at the table beside the Secretary to the Inquiry by way of support. 10:18 10:19

CHAIRPERSON: Okay. So obviously in normal court proceedings one would not have witnesses in the room when another witness is giving evidence. These are not court proceedings, this is an Inquiry, and we are entitled to take whatever seems to be the best course with any particular witness and there's no reason why we can't do that. 10:19

MS. KILEY: Yes.

CHAIRPERSON: I also understand that the witness - certainly the first witness - may need regular breaks. 10:19

MS. KILEY: About every 20 to 30 minutes, Chair. So we will keep an eye on it. But that there should be pretty regular breaks throughout this evidence.

CHAIRPERSON: No problem with that. Okay. One other thing to mention, which I am sure you've noted and people who have been following will have noted, the photographs that have been uploaded to Box are pretty difficult to view, and I think you've arranged that we can get better photographs at least on to the screens. 10:20

MS. KILEY: Yes, we're going to call them up on the screens. Now, unfortunately not every photo is compatible with the screens, we're not able to call them up, so we're going to use a mixture of electronic copies and hard copies, but I will call them up by their exhibit reference number whenever we're ready to deal with them. 10:20

CHAIRPERSON: Okay.

MS. KILEY: And the final thing to say, Chair, is that both these witnesses are Core Participants and they're represented by O'Reilly Stewart. 10:20

CHAIRPERSON: Right. Thank you very much. And, finally, there is no special restriction being asked for --

MS. KILEY: No, not at this stage, Chair. Now this first witness has indicated she is willing to try and give her evidence in open forum, and she has flagged that she may find difficulties with others being in the room, but if that's the case she will indicate that to us and we'll take a a break and take it from there, but she is going to try in the first instance. 10:20 10:21

CHAIRPERSON: That's fine. And no reason why Hearing Room B should not be open?

MS. KILEY: No.

CHAIRPERSON: Okay. Thank you. 10:21

P28'S MOTHER, HAVING BEEN SWORN, WAS EXAMINED BY MS. KILEY AS FOLLOWS:

CHAIRPERSON: Thank you. Can I just welcome you to the Inquiry and thank you very much for coming along today. I know how difficult this is for you. And if you need breaks, all you need to do is to say so.

THE WITNESS: Thank you.

CHAIRPERSON: I would also say this: Every witness finds the first three minutes nerve-wracking and then it just goes. It's magical. So don't worry if you are nervous now. I have never in 35 years known a witness who isn't nervous, but all we want you to do is tell us about P28 and we're going to start with Ms. Kiely actually reading through your statement. If you need a break at any stage at all, just put your hand up and let me know. All right?

THE WITNESS: Thank you.

CHAIRPERSON: Okay. Ms. Kiley.

MS. KILEY: Good morning, P28's mother

A. Good morning.

1 Q. You should have in front of you a black ring-binder that has your statement of evidence in it. Have you got that?

A. Yes.

2 Q. So as the Chair said, the first thing I'm going to do is read your statement into the evidence aloud. Okay? So after we do that, I will then ask you some questions about it, but, for now, all you need to do is listen to

me read it. Now, you will notice that in your statement some names have been redacted and replaced with a cipher, so that's some staff names and they've been replaced with a cipher that starts with the letter H and has some numbers beside it, and to help you follow that, you should also have a cipher list in front of you. Have you got that?

A. Yes, thank you.

3 Q. Okay. So as you know, I'm not going to be saying their names, I'll refer to them by their number, and in your evidence, if you want to refer to them I would ask you to do the same. Okay.

A. Thank you.

4 Q. So are you ready for me to read the statement, P28's mother

A. I am.

5 Q. Thank you.

"I, P28's mother make the following statement for the purpose of the Muckamore Abbey Hospital, MAH, Inquiry. In exhibiting any documents, I will use my initials . So my first document will be 1.

My connection with MAH is that I am a relative of a patient who was at MAH. My son, P28 known as P28 was a patient at MAH. I attach two photographs of P28 taken on 19th April 2014 at 1 and 2."

CHAIRPERSON: Should we not just be using in the circumstances?

MS. KILEY: Yes. Yes. Perhaps that's better.
CHAIRPERSON: We can sort the transcript out later.
MS. KILEY:

"...on an outing to the shops and prior to his admission to MAH. I also attach a photograph of my husband, P28's father with P28 in our home at 3. The relevant time period that I can speak about is between January 2017 and 18th February 2019." 10:25

10:26

Now, P28's mother I'm going to pause there because when we met this morning, you highlighted to me that that reference in paragraph 5 to "January" should in fact read February 2017. Is that right?

A. Yes. P28 was admitted to Muckamore on the 14th February. 10:26

6 Q. Okay. Thank you. So I will read what should be the corrected version of that sentence then. So:

"The relevant time period that I can speak about is between February 2017 and 18th February 2019. 10:26

I have four children, three boys and a girl. P28's brother P28 P28's brother P28's sister . I had four children in four-and-a-half years. 10:26

P28 was born in 1987 and is the eldest of twins. P28 and P28's brother were premature. They were born at 26 weeks as I found it very difficult to carry full term.

We were over the moon with the twins, especially as we had previously lost a baby. We discovered that they were disabled when they were around 18 months old. P28's brother was starved of oxygen at birth and his heart and lungs collapsed at three days old. 10:27

P28 was older and initially the stronger of the twins, but he took a turn for the worse at around three weeks old.

10:27

We always knew that P28's brother was very sick. We thought that we would lose him and we prepared ourselves for that. We got a phone call and rushed to the hospital thinking that we were indeed losing P28's brother However, when we got there, we found out that P28 had developed 10:27 septicaemia. They were both very sick and P28's father's dad very kindly got the grave sorted in the event that they died.

They were diagnosed as having disabilities when they 10:28 were around 18 months old. I was pregnant again by that stage with our daughter P28's sister . I was over the moon with P28's sister, a little girl that I could pamper.

P28's brother was having fits due to the starvation of oxygen at 10:28 birth. P28 was cross-eyed and could never focus. He couldn't sit up properly and didn't meet his milestones.

We eventually received a diagnosis of cerebral palsy, brain damage, sight impairment and epilepsy.

P28 would have grand mal seizures. He would go blue and his heart would stop. We struggled through those years with four tiny kids, two of them disabled. We had very little help and support, especially as P28's father's mum had been diagnosed by that stage with terminal cancer. It felt like a constant fight to get help. 10:28

P28 couldn't really walk properly so he was in a wheelchair for a long time. There were social issues with that. People would say "Why don't you get him out of the buggy?". 10:28

We got some support from Carrickfoyle and the Me Too Club, which helped our other children to understand the disabilities. We even took the children to Disney Land around that time in 1997, where P28 met the real Barney and was given a little stuffed Barney by him. Those are special memories. 10:29

We laugh when we think back to the plane journeys with the four kids, but we managed it. Sadly, it was the only time we were able to take the children abroad and so it was very special for us all. 10:29

When P28 was ten years old, he had major surgery on his legs and feet to help him to walk. He had the

bones broken in his feet and legs and bone grafts from his hips. He now wears Piedro boots to help with his mobility. It is quite important that he wears those boots. We have been through a lot to get him mobile. It has taken its toll. Obviously, looking after disabled kids is challenging. 10:30

P28 had to leave Carrickfoyle at the age of 10 years old. We had to look after a disabled child after surgery and he was still in his plastercasts. There was a rule that it was only up to the age of 10 years, and despite the situation post-surgery, they could not change that. We felt abandoned as they were a vital help and we could even ring them in the middle of the night for support, so we missed them very much. 10:30 10:30

Eventually, we got a fantastic opportunity from Ards TRC when P28 left school. P28 was there from the age of 19 years old until he was 29 years old. They were like an extended family. It is a daycare centre but we still called it "school". P28 went there every day. It was safe and secure and P28 loved it. He was very happy there. 10:30

You could turn up during the day to see what P28 was doing and you were made to feel very welcome. We could drop in for coffee and a chat and just stand and watch him to see what he was up to. 10:31

P28 loved relaxing in the evenings at home and we had good quality family time. We could go for walks in the summer, to the beach or forest, or to the shops. P28 loved to help with the groceries. P28 loved music and singing. My husband and I can both play instruments and P28 enjoyed this time. 10:31

P28 had a bedtime routine. He would wind down with music, a shower, PJs, and sometimes a hot chocolate with marshmallows to help P28 sleep. 10:31

P28 would go to bed with his favourite toys, including Barney and Tigger, and we would sing the Barney song. I treasure those special memories as I know they will never happen again. 10:32

My husband, P28's father has not been well for a number of years. He has had heart problems, angina, and what was thought to be meningitis which gave him bad headaches. He had several heart incidents which they thought were attacks, so he had to have stents fitted. He had problems with his spine where his vertebrae began to crumble. He was losing his balance and was falling over. He had problems with his vision and his hands. There were a lot of issues in our lives. I had P28's father to look after and P28 10:32

P28's father had to have extensive surgery on his spine and he took time off work for his illness and recovery. He

has never been able to return to work. He still has a lot of mobility problems. He was in a wheelchair for a while. We are both now disabled as I now have mobility problems and fibromyalgia.

P28 would go to school but would come home every evening and weekends. I was having to get help in the house because it was a lot to handle. P28's sister and P28's brother had to help out a lot. P28's brother moved out into supported living and is married now. 10:32 10:33

We managed as a family for a period of time. However, just prior to P28's father's surgery we got to a stage where we felt we couldn't manage P28's needs properly. There were mornings when I was literally crawling to get ready because I was in so much pain due to my fibromyalgia. We wanted to care for him at home, but we couldn't do it physically. We had to think of P28's future and make sure he was looked after properly, and by that stage P28's brothe and P28's sister wanted lives of their own. They wanted their own families. 10:33 10:33

We made the painful decision to contact Social Services. We needed help as P28's father was having the surgery. We wanted P28 somewhere safe and secure. 10:33

Initially, we dealt with H149 from Social Services. She is a senior social worker, and H146 is in that position now.

There were options for P28 but they weren't very good. They were very noisy, and one was in Downpatrick. It alarmed us about the options because P28 came from a quiet home and he liked quiet due to his autistic tendencies. 10:34

We went to view Facility A in Donaghadee close to our home and saw that there were only four residents. There were pets, a rabbit, and a cat, and we thought that it was brilliant. We have a cat and P28 likes animals. We got a care plan together that was quite extensive and it included a great deal of input from Ards TRC, which was important for the long-term plan for P28 They knew him and they were like an extended family. We felt that the care plan had been extensively worked through. It was a slow transfer from September 2014 onwards and P28 moved permanently in January 2015. Part of me was relieved because I could focus on P28's father He had to go to Dublin for his surgery in the March and a lot of my attention was on that. 10:34 10:34 10:35

P28 was in Facility A for approximately two years. There were red flags from the start. Things like dirty bathrooms. You couldn't put your finger on it, but you knew it wasn't what you expected it to be. It should have been better care than he had at home. They were the trained professionals, but it wasn't, it was 10:35

supposed to be safe. Over time, we realised it wasn't.

There was a time when P28 turned up to daycare at Ards TRC with a big black eye. It was passed off that he might have done it to himself, but he had never had an injury like that before. We took him to the Hospital. That was alarming and a shock. I don't know how he got the injury. It looked really bad. 10:35

He also showed up with his Piedro boots on the wrong feet. I couldn't understand how professionals don't know how to put them on. That was picked up by Elaine and Carrie in Ards TRC. Other times he turned up in dirty clothes. He was even in a lady's size 20 lilac top on one occasion. He was normally cleaned to an inch of his life and I had always made sure of that even when I was in excruciating pain. He had lovely clothes. I always made sure he looked and smelt nice, and Ards TRC can verify that. 10:36 10:36

The bathroom at Facility A wasn't clean. They were even using other tenants' towels and there was no privacy.

Another tenant sat in her wheelchair at P28's door. There was cat mess left and not cleaned up. 10:36

When we took P28 out he stank of urine and had faeces in his delicate areas. Ards TRC also flagged up these

concerns. I explained to the care staff that this would burn him there. Sometimes they did not give him his epilepsy medication, which was very concerning for us.

10:37

I complained to Social Services and said I was not happy at all. We went to meetings at the care providers' offices, which were upstairs, and hard on P28's father and myself to access due to our disabilities. There was no privacy there either and it was an open plan space. The Secretary was part of our church and she could hear everything. Some of the care workers we were discussing were also in our church, which caused us difficulties and socially damaged our family. We don't go to that church anymore as they made it impossible for us to stay.

10:37

10:37

It was a direct result of the connection with the care home and the stress that we were being put through. We raised the issues, but they were brushed aside and we were not listened to.

10:37

We found out that Facility A had called the police out because of P28's behaviour a few times. P28 was always very good at home, he never so much as knocked over an ornament. In all the years at daycare, or after his surgery at home, he had never behaved like that. I thought that things must be very bad to cause this. Never once in our lives have we had to call the

10:38

police for P28

We went up to Facility A and it was horrific. We went into the room and everything he had was smashed, all the things he had treasured from home. We were bewildered. It was like he wasn't our child, he was someone else. His cupboards and drawers were pulled out and the wood was smashed. His toys were thrown everywhere. His music player that he loved was smashed and the police were holding P28 with his arms behind his back. 10:38 10:38

P28 has the mental age of an 18-month old child. They were pushing him forward and he nearly fell on his face. The police officer said "You will need to leave", and I said "No, you are the imposter, you should leave". P28's father sat and held P28 H146 from Social Services was there and she was like a headless chicken. She almost seemed to delight in what was happening. She was pushing us to send him to MAH. Our baby was fine when he left our home and in two years they wanted him locked up. P28's father and I said no. We were told that if the police had to be called again within 48-hours, P28 would have to be sent to MAH. 10:39 10:39

I think he was given sedation but they called the police again 24-hours later. When we got the call, we got into the car and tried to get there before the police arrived. We literally grabbed our child and

everything he owned and put him in the car because we didn't want him to go to MAH."

Are you okay for me to continue? If you would like a break we can break there. 10:40

A. I am fine. You can continue.

7 Q. "We kept P28 at home and we were promised a care package by the weekend. They set us up to fail as the care package never came. We begged them to put the 10:40 care package in place and to bring P28's hospital bed down for us. We offered to get it but they refused, despite the fact that it belonged to P28 he needed it for his own safety due to his epilepsy. I believe that they had no intention for him to stay in our 10:40 house. They wanted him to go to MAH.

I went to collect some of P28's things from Facility A. The care workers kept changing and the young male worker there didn't know that P28 had a wheelchair. 10:40 The care plan should have been in his room and they should have been following it. I was shocked because the care worker had been working with P28 for a while. The carer couldn't find the wheelchair and just said to get him another one. I insisted on finding it 10:41 as it was P28's and it was suited to his needs. I eventually found it being used as a clotheshorse in the sunroom.

P28 was at home for around two weeks. He was not our son during this time. He was a monster and I couldn't reach him. Even Tigger and Barney didn't ease him. When we tried to hug him, he cowered and put his hands up to protect himself, like we were going to hit him. 10:41
He was having massive seizures. P28's father would put his feet out to stop P28 coming at him and P28 would try to bite them. I don't know what they did to my son at Facility A to make him behave like this. We were totally overwhelmed and didn't know how best to help 10:41
P28 we just knew that we didn't want him to end up in MAH.

P28's father and I had no sleep for the two weeks. P28 was at home, but we were both in a lot of pain. P28's father was on 10:42
morphine for his back and I had fibromyalgia, and around that time I had a suspected stroke. I rang Social Services every day begging for help, for P28's bed, and to put the care package in place.

10:42
I was frightened P28's father was going to have another heart attack as it was so much pressure on us having P28 at home. It was very traumatic.

Social Services said the care package would be another 10:42
eight weeks, but I said "We won't last another eight hours". We felt we had no choice but to allow P28 to be admitted to MAH. We were unable to look after him at home without the care package. It came to the point

of choosing between my son and husband.

I didn't understand what had gone wrong and why P28 would not settle for us at home. We had made his room like before. We had tried so hard to make him feel safe and, yet, it had not worked. I couldn't understand why P28 was so different and unreachable. Why did he attack us and cower from us? We were covered in bruises and we were exhausted. I barely remember what went on the night he was admitted to MAH except we came home without P28

A. Can I have a break, please?

8 Q. Yes. Sure.

CHAIRPERSON: Okay. We will take ten minutes to see how that does, but just let me know when you're ready, and if you can let your colleagues know.

MS. KILEY: Yes. Okay. Thank you.

CHAIRPERSON: Thank you.

10:44

THE INQUIRY ADJOURNED BRIEFLY AND RESUMED AS FOLLOWS:

CHAIRPERSON: Thank you.

MS. KILEY: Chair, I am also just being told the witness is having some difficulties hearing you whenever you speak, so it may be that your microphone could come closer to you?

CHAIRPERSON: I won't be saying very much, but I have got a very soft voice so I'll speak up.

A. Thank you very much.

CHAIRPERSON: All right. Thank you.

MS. KILEY: Okay, P28's mother I'm going to resume reading your statement at paragraph 32.

A. Thank you. 11:01

9 Q.

"P28 did not deserve to be in MAH. The staff at Facility A were responsible. P28 was abused and neglected in Facility A. I felt so guilty. I am his mum and I was supposed to protect him. There were 11:01 bruises on him, unexplained bruises. I know they did it and they did not care for him. The only way he could communicate it was through wrecking his room.

P28 was sectioned and sent to MAH on 14th February 11:01 2017. Taking P28 to MAH was like the betrayal of a deep trust. It is incredibly harrowing to recall all the months of stress and worry that eventually came to this point.

11:02

Compiling this statement has inevitably meant recalling painful memories. It has had a very detrimental effect on our health and well-being.

As we arrived at MAH we were afraid for our son. They 11:02 said it was the best for P28 and for us and that he would get the treatment he needed. I trusted them. I didn't know how to fix P28 and I couldn't look after both P28 and P28's father

The general practitioner was there - I can't recall their name - and H146 from Social Services.

When we got there it was a bit of a blur and there was a lot of focus on the paperwork rather than on P28 We were told by the doctors, the consultant and the care staff, that P28 would be cared for and that this was the best place for P28 They gave us a lot of reassurance. 11:02 11:03

The social workers were really there to hand over care of P28 and get the papers signed. It didn't feel like they were there to support us, but, rather, to relieve themselves of a problem case. 11:03

Every night P28 was with us we would sing the Tigger song. P28 would bounce to it and then we would put him in bed, gently turn down the lights, and sing the Barney song: "I love you, you love me, we are a happy family. With a great big hug and a kiss from me to you, won't you say you love me too". 11:03

Although this was a big part of P28's night-time routine, his previous care-givers were less than willing to continue this for him and I wondered if anyone at MAH would hug and kiss P28 that night or sing his songs with his special friends before bed. 11:03

I have attached a photograph of P28's father putting P28 to bed with Barney at 4.

When we left P28 in the bungalow at Facility A we thought he had a loving home. We had sung in the car all the way back to our house as we had felt sure it was a blessing for us all. In stark contrast to that, we cried all the way home from MAH as we felt that we had abandoned our son and failed to protect him. 11:04

I could not believe what was happening and I was in shock as the reality of the situation set in. P28's father says that to this day he feels it has never left him and he finds hard to choke back the tears. 11:04

We went back the next day to take P28's bedding, clothes and toys. P28 was on the Cranfield Ward. It felt alien and intimidating, but we wanted to see P28 and try to help him as best we could. 11:04

His room was small and everything was screwed down. You couldn't even open a window, and the whole place felt more like a prison. It was so wrong, but we were constantly reassured that it was best for P28 We made up his bed and sorted things in his room. I put some changes of clothes in his wardrobe. It felt like we were visiting our son in a prison: the security, the looking of the doors. It felt more like punishment than the caring treatment we wanted for P28 We felt 11:05

like a terrible injustice had been done. He was being punished for the incompetence at Facility A.

We were invited to meetings and these seemed to be on a monthly basis. We were given a family liaison officer - I can't recall her name - and she disappeared after a while. We never had any private time with her or time to build a trusting relationship. 11:05

There was another man who was supposed to be an advocate for P28 called H93. He was assigned fairly late and seemed to be annoyed he wasn't involved from the start. We didn't know who to trust or, indeed, if anyone assigned to us could be trusted at all. There never seemed to be an opportunity to build up trusting relationships and there was never any privacy away from other clinicians and Social Services' representatives. We never had any private or confidential time. 11:05 11:06

At the meetings, there were various staff members, nurses, social workers, the guy in charge of P28's care, H40, and H93. Elaine and Carrie came up from Ards TRC. 11:06

In these meetings we were able to discuss some of our concerns. In the beginning we mainly focused on behavioural challenges and a few health concerns. P28 was thought to have dental issues, so there was a plan of action put in place to deal with that. We 11:06

asked that continuity of care be paramount, especially due to the history of distress that P28 had already endured and because it was a vital part of his care plan. We asked for him to continue with his own dental consultant, Brian, but we were told that he had retired, which he had not. We often met Brian out for coffee and he had become a family friend, so we were shocked with that as a reason. When we questioned this, we were told that Board boundaries would be crossed and there would be financial implications. 11:07

P28 then ended up going through more traumas at the Royal Victoria Hospital without us present. P28 normally went to Down Hospital with us present. We felt pushed aside and ignored. It felt like the patient's needs were less of a priority than financial boundaries. 11:07

The other major health issue was seizure control and this was discussed at the meetings. They were logging when he was having fits and seizures, and I was happy with that. They didn't do that at Facility A. 11:07

I am sure that P28 had his medications mismanaged at Facility A, and there is strong evidence to support this. It had affected the way the drugs worked for him and his seizure control was compromised. It meant a whole change in how his epilepsy was managed from that point on. It was difficult as parents to keep up with 11:07

these changes. Often we didn't know what drugs he was on or the dosage.

We had shared a video of when P28 was having a seizure and how our then 6 year old granddaughter could tell when P28 was having a fit. While at the time the staff at Facility A could not. 11:08

At MAH, it was clear that P28 needed intervention and restructuring of the epilepsy management plan, so all this meant more changes. Getting the medication sorted out and getting the fits under control was a vital priority. P28 had a history of grand mal seizures that resulted in heart failure when he was very tiny. All of the care teams and Social Services have been informed of this. The mismanagement of the epilepsy care plan and the failure to maintain correct drug usage was a major concern to us. 11:08

I trusted that MAH would ensure this didn't happen. However, they changed his medication and we didn't know what it was. If they were not balanced right it would affect his behaviour. 11:09

The monthly meetings went on throughout the time that P28 was at MAH. I put a great dealt of trust in the clinicians who were in charge of P28's welfare. At no time were we told that P28 had been involved in the abuse concerns that later came to light. In fact, 11:09

it was the very opposite, that he was receiving the very best of care. However, as the months progressed, I began to see changes that started to flag up red lights for myself and my husband. Eventually, these meetings were geared towards P28's release. 11:09

We were told that he would be at MAH for at least six to eight weeks. We felt we can deal with the six to eight weeks. In the end, he was there for two whole years. It was a prison sentence. 11:10

There were many lost opportunities during P28's time at MAH. P28 was due to be best man at his twin brother's wedding in February 2017. There were all sorts of issues with staff, his care, even if he should be allowed to go at all. In the end, he missed the day. He spent it alone in MAH away from his family. This was, and is, a day tinged with sadness for us. He is absent from the wedding photos. 11:10

Another significant event was P28's 30th birthday. I tried to make the best of the bad situation, but P28 wasn't even allowed a cake.

Things had started off okay at MAH. Initially, P28's father and I were accepted into the ward and could see P28's room. At the beginning when we visited P28 it was more welcoming and the staff let us sit in the dayroom with him. There, we were able to let him have his 11:10

music and play with his toys, and we had a level of interaction. We would encourage him to eat and we could even walk him to his room. We would change him or arrange his things in his room. I tried to make the room homely, but it was impossible. I arranged his 11:11
trucks and spread them out so they looked nice. I arranged his nappies and toiletries. I put a throw on his bed and his special friends on his pillow. I tried to make his room like it was at home. This was really difficult because it was not normal. It was the best I 11:11
could do, but it still felt like prison.

As the weeks and months went on, things began to change. Things were going the same way as Facility A. I was living it all over again. It was a long and 11:11
tiring drive from -- your home. Often when we would get to MAH only to be told we were not allowed on to the ward or we couldn't visit P28

We got to know that if there was one particular member 11:12
of staff on duty there was always a reason why we couldn't get on to the ward. I cannot recall her name but she was distinctive as..."

-- and you describe some distinctive features which I'm 11:12
not going to read out, P28's mother

"It felt like they simply didn't want us there. They would bring P28 out to the visitors' room. The

visitors' room was totally inappropriate as there were only seats in there. P28 had toys in his room and we could engage with him, which made for a better family visit.

Sometimes we were given an alarm to get staff if we needed them. This shocked us. We were to press the alarm if P28 attacked us. All I could think of was the police at Facility A and for that reason we were never going to press the button. I attach a photograph of P28 and me in the visitors' room at MAH at 5. 11:12

It was very hard to have a good visit with P28 in these circumstances, and in many ways it was set up to fail and cause a behavioural incident. We tried to last an hour, but it was virtually impossible. 11:13

P28 needed music, so we tried to play stuff on our phones. He needed his bricks and toys. But we could not access them. In the end P28's father would sing to him and cuddle him and that was pretty much it really. 11:13

Sometimes we would put our foot down and tell them we didn't care what they said, we were going to see our son in his room. I just wanted to know that he was okay and safe, after what happened at Facility A, and I wanted to see for myself. 11:13

Our family unit was being crushed and shattered. No

other relatives felt that they could cope to visit, so we went alone. On the occasions that we did get into the unit at Cranfield 1, we were able to play with P28 I attach a photo from this time which shows P28 playing with his toys at 6."

P28's mother I can see you looking at the screens, and I know the photos...(INTERJECTION)

A. There's a delay.

10 Q. I know they're not up on them yet, but you can see them now, can you? 11:14

A. Yes.

11 Q. And I will give you an opportunity to tell the Panel a bit more about those later on in your evidence. Okay?

A. Yes. 11:14

12 Q.

"However, I also found him increasingly difficult to engage with us and he would look at us with empty eyes.

As time went by there was a definite change in the atmosphere. The staff were changing more frequently and continuity of care was starting to become an issue. 11:14

Things that we had taken for our son were now broken or had gone missing, even though they had been marked with his name. I was constantly running after his belongings. 11:14

During this time, P28's toy Barney went missing. It

had been with P28 for 22 years since our trip to Disneyland when he met the real Barney, so he was very special and he was now gone. Someone had replaced Barney with a giant Tigger, which P28 fell in love with and he still carries it about with him to this day. Someone stole Barney and replaced him, but no one has ever admitted taking him or acknowledged this. I know there was CCTV for abuse evidence gathering, I have asked if the theft of Barney was seen in these videos, but I am met with strange looks as if it is of no consequence, but it is important to P28 and, therefore, to us. 11:15 11:15

I attach at 7 a photograph of P28 with Barney. I have attached at 8 P28's special toys, including Barney and Tigger. 11:15

Things began to get much worse and when we went to visit P28 he was more and more unkempt. When we were allowed on the ward we noticed more bruising. He wasn't as clean as he used to be. His hair was long and dirty. Alarm bells started ringing. He stank and smelt of strong body odour and urine. His beard was long and he was thin and gaunt. His trousers were falling off him. I attach two photographs of P28 in and around this time, 9 and 10. 11:16 11:16

P28's toys went missing. I was told he had broken them, but I couldn't understand why he wasn't given

supervised play rather than becoming destructive. This was never a trait in his personality at home. He wouldn't so much as bump into an ornament. We never had to put them away, and if he did bump into something he was very upset. He only ever broke one cup on the mahogany table at home. This was a big red warning sign that things were not right again.

P28 was non-verbal. This was his way of communicating that things weren't right.

I started to notice injuries on P28 and we took photographs. I often saw unexplained bruises appearing. Around 4th March 2017, P28 appeared to have a bruise on his right eye. We complained to the staff - I cannot recall who - but this was complained away. They said that he might have hit himself with a toy or something. I attach a photograph of the bruising at 11. There was no investigation, to my knowledge.

Around Wednesday, 19th July, I noticed more bruising on P28's arms. Alarm bells were ringing but there was nothing that we could do. I attach four photographs taken of these bruises at 12, 13, 14 and 15. I complained to the staff - I cannot recall who - but this was explained away. I am not aware of any investigation."

CHAIRPERSON: Just so that you know, the photographs that are on screen are not particularly good. We've got much better photographs so we can actually see what you're talking about.

A. Thank you. Thank you. I noticed they didn't come up quite clearly. 11:18

CHAIRPERSON: No. Well, I noticed that, yes, and I've asked for these better copies. So, thank you. (Handed to the witness). Oh, and you've just been given a set. Thank you. 11:18

13 Q. MS. KILEY:

"P28 became even more withdrawn, peering from the top of his head with empty eyes. His clothes became worn. His lovely jumpers had been washed in too high a temperature and were destroyed. His trousers were torn and hung from him like rags. I was so upset. I could not understand how this was happening. They were given enough money to cover his needs. Yet here we were again experiencing the same issues we had at Facility A. 11:18 11:18

It became very clear to us that we could not protect P28 at MAH. Often when we saw P28 in the visitors' room at Cranfield 1 he would present with obvious injuries. I have attached two photographs at 16 and 17, taken on Sunday 15th April 2018, which show an injury to his head. 11:19

When we were allowed on the ward, we often changed P28 and found more bruises. I attach four photographs taken of P28's legs on 14th May 2018 at 18, 19, 20 and 21.

I attach another full length picture of P28 on 14th May 2018 at 22. I would like the Inquiry to see what MAH did to our child. In the space of four years, between Facility A and MAH, they turned my son into this. As P28's parents we will never forget this. He is our child, our baby. How could they do this to him? 11:19

There seemed to be a never-ending round of meetings. This took its toll on our health very much." 11:20

CHAIRPERSON: Just pause for a second. Put the photographs aside, just for a moment, so just follow the statement, and I think what will happen, I suspect, is Ms. Kiley is going to take you back to the photographs. All right? 11:20

MS. KILEY: I am at paragraph 58 now, P28's mother if you're following along.

A. Yes, I am.

14 Q. 11:20

"We seemed to be in a never-ending round of meetings. This took its toll on our health very much. There was little concern or support for us as two disabled parents. I don't really think that MAH or the South

Eastern Trust at the time had any real understanding or concern for what we were going through. We continued to battle on in these meetings. I always brought up the Facility A issues and would never let it disappear into the midst of time. The staff always tried to shut me up and said "This meeting isn't for those issues", however, this was why P28 was in MAH. 11:21

H146, the senior social worker, finally took me to an area off the hall outside the Cranfield Ward. It was a public waiting area with little privacy. I felt that due to the nature of what was being discussed that it was wholly inappropriate. P28's father was not able to sit in on this meeting as he was at the usual monthly meeting, so there was no witness. She admitted that the standard of care at Facility A was not to the standard it should have been and she said that Facility A had admitted there were errors. However despite requesting the notes at this meeting, they have never been provided and I have no record of this admission of failings. I felt the meeting was more to get me to shut up about Facility A and move on. I noticed MAH was becoming like Facility A. 11:21 11:21

We felt the need to take photographs of P28 and his injuries to show this was real and so that we would be believed. When we raised the issue at the meetings we were told the same old thing - these were self-inflicted injuries. 11:21

P28 started getting bite marks again at MAH. This happened at Facility A when he came back for Christmas one year, and it started again in MAH. P28 would bite his arms if he was distressed. However, sometimes you could see the injuries were definitely caused by someone else. 11:22

P28 had fingermarks on his arms and bruises in the shape of his hands. The response from the staff was always that they had to restrain him. They said that they needed three people to take him for a bath. I could do it with my disabilities without any help. 11:22

When I think about how things have progressed with the MAH abuse cases, I know in my heart that P28 was ill-treated and neglected, and that was never addressed. No one was ever brought to account for what P28 went through and that they have taken our family on this awful journey. 11:22 11:23

I was watching for the signs of it happening again at MAH, and P28's father and I felt powerless and ignored.

Our worst fears were realised when the news broke of the abuse cases in MAH. You can imagine our horror at the growing media coverage. There was a family support group set up within MAH by other parents, but we were told by the staff at MAH that P28 had never been 11:23

hurt. There were only two members of staff that were involved and it didn't happen on P28's ward. Neither P28's father nor I ever attended the meetings because of what the staff told us and we never received any support from that avenue. 11:23

However, I remain concerned as we had been previously told that the staff were often rotated around the different wards.

11:23

It was incredibly unnerving as I felt that P28 was showing signs of neglect. He was rapidly becoming more and more withdrawn. He was looking frail and his face was grey and his eyes sunken. He no longer sang. He was no longer happy. The joy had simply been switched off. 11:24

P28's father and I were constantly reassured that P28 had not been hurt at MAH and his ward, Cranfield, was not involved. I never imagine that we handed our son over again to another group of people who would prove in time to be no better than those who had hurt him at Facility A, and P28 had been the victim of abuse. 11:24

P28 was finally released from MAH on 18th February 2019. This was a long process. P28 had an assessment or around April 2017, which stated that he no longer needed treatment and no longer needed to be detained under the Mental Health Act. He was then a 11:24

voluntary patient. It was 20 months before he was finally released from MAH.

They found a bungalow in (a location) for P28 but it needed renovation and he couldn't move in until the work was done. P28 was made homeless from Facility A one month later in May 2017. 11:25

We did not find out until after the event as the letter was sent addressed to P28 at Facility A. Of course, P28 could never manage his own affairs. It was eventually sent on to P28's father 11:25

P28 now lives in the bungalow, which is local to our home. This makes it easier for us to see him. He is looked after by Positive Futures who seem to be giving P28 a good quality of care and lifestyle. He is still under the care of the South Eastern Trust and the same Social Services. The bungalow is adequate but not perfect for his needs. 11:25

I want to mention about P28's finances. P28 was in receipt of finance regularly when he was in MAH. This was always signed for and there are receipts. MAH had enough money to meet P28's day-to-day needs, such as new clothes when required, things like toiletries, outings, extra food. There was no excuse for his clothing to be torn like rags and there was no excuse for his personal hygiene to be compromised. 11:26

On his release from MAH, we had a meeting with H146 who was rather annoyed that P28 didn't have any savings when he left MAH. This was because he was always given money when he was in MAH, and anything left had been used to furnish and decorate his new home to the best of our ability. We even had to take out a small loan. 11:26

When he left he had nothing, but Social Services still threatened to check his bank accounts. H146 suggested that most patients left with a nest egg. We were upset by this attitude and it showed that they didn't really care about P28's needs for a comfortable home. 11:26

When P28 came out of MAH he was very damaged. He was no longer the same confident, laughing, smiley boy he used to be. It has taken so many months of work to get P28 to be anything like that boy who lived in our home for all those good, happy years we had as a family unit. 11:27 11:27

The daycare centre at Ards TRC decided that as P28 now has so many underlying issues, they are unable to offer him his placement back. P28 had loved his time there and they had become an extension of our family. 11:27

We have also experienced the loss of the structured network of support services that we once relied on and had grown to trust.

P28 was given a placement in Bangor but this meant that the intimacy of the relationship we had built up over ten years was gone. We never visited the Bangor centre and never built any strong ties with them. 11:27
Recently it was decided that P28 would no longer attend that placement.

For us there is a massive loss of the family unit. There is no longer a deep bond between P28 his 11:28
siblings and the wider family circle. The loving shared bond that P28 once had with his niece, has disappeared. She has been unable to visit him for years and she has grown up without her friend.
P28 had a very close and special relationship with 11:28
P28's niece and he was incredibly gentle with her and even held her when she was a tiny baby. He loved to play games like making Lego towers with her. They functioned on the same mental ability level for a long time when she was small and this cemented a very close 11:28
bond, which has now been broken.

She is the only one of our five grandchildren P28 has ever had the chance to develop a relationship with, as the other four were born or brought into our family 11:28
while P28 was in MAH.

I painfully acknowledge my own sense of self-protection which prevents me from having a deep and meaningful

relationship with P28 It is better that I do not know of any issues and so that causes me to become distant and detached. We would be powerless to do anything, and the threat of his incarceration in a hospital facility will forever hang over us. 11:29

Relating to P28 and his care providers has proved to be an ongoing problem for P28's father and I. Regardless of how good the staff are, we can't help but view everyone with suspicion. 11:29

P28 has never come back to our family home and we have never taken him back out on any trips or visits to the wider family. In many ways it feels like P28 never really did come home. 11:29

Soon after P28 left MAH..."

CHAIRPERSON: Are you reading this paragraph?
MS. KILEY: Yes. 11:29
CHAIRPERSON: Okay.
MS. KILEY:

"Soon after P28 left MAH, I can't recall the date, the police informed us that they had CCTV footage 11:29 showing at least 17 incidents involving P28 and the mistreatment by staff at MAH, and this was part of their investigation. At first it was a few incidents and then it grew. I wasn't allowed to see the videos

and I don't know the details of the incidents or who was involved in them. I wanted them to explain to me what happened, but it's largely a blur. It bounces back on me, my inability to look after my child. He was in hospital and he was there for his safety. I trusted them. MAH said it was the best place for P28 but it was the worst place for him.

I feel like I let my son down twice. This has crushed our family. I feel like we have been failed and our most vulnerable people and our most vulnerable families have been failed. It has been a very painful experience to do this but I just don't want this to happen to anyone else." 11:30

11:30

And then, P28's mother if you turn over the page, there is a section that says "Giving Evidence", I'm not going to read that, and then Section 5, and that is a declaration of truth, and there's your signature there and the date at the bottom, the 17th July. 11:31

I think you would like a break at the end of this reading, is that still the case, P28's mother

A. Yes.

15 Q. Yes. Okay. Could we take a short break? 11:31

CHAIRPERSON: Okay. Ten minutes or do you need a bit longer? Do you need to take a walk outside or are you going to stay on this floor? What's best?

A. I think I may take a walk outside and catch some air.

CHAIRPERSON: Sure. Okay. We'll take 15 minutes then. Thank you very much.

THE INQUIRY ADJOURNED BRIEFLY AND RESUMED AS FOLLOWS:

11:45

CHAIRPERSON: Thank you very much. I gather we are going to try and do another half hour.

MS. KILEY: Yes.

CHAIRPERSON: So I think what we're going to try and do is do another half hour, if you can manage that, and 11:54 then we'll take a break, and we'll be guided by you as to how long you need. All right.

A. Thank you. Thank you very much.

CHAIRPERSON: Okay. Thank you.

16 Q. MS. KILEY: Okay, P28's mother So you've now heard me read 11:55 out your statement.

A. Yes.

17 Q. And having heard me read it, are you happy that the contents of your statement are accurate?

A. Yes. 11:55

18 Q. And do you wish to adopt that as the basis of your evidence before the Inquiry?

A. Yes.

19 Q. Okay. So I now want to ask you a few questions about some of the things that you raised in your statement. 11:55 The first thing I want to ask you about, P28's mother is about P28 and his personality. So thinking back to the time that P28 was at home with you, so before he went into Facility A and before he went to MAH, can you

tell the Panel what his personality was like?

A. P28 was a happy, healthy, bubbly, engaged person, who loved life and had a wide circle of family and friends. He enjoyed his daycare and was involved in a wide range of interests and hobbies. He loved trips to the beach. 11:56
He loved the shops. He enjoyed going for a coffee and trips to the ice-cream parlour. He loved animals; we have animals at home, we had chickens and he loved to collect the eggs and he was very gentle with them. We didn't have any smashed eggs! And we have dogs, and he 11:56
loved playing with those. So he loved animals. And he loved this time of year and the leaves falling, because we could go to the park and he would kick the leaves. He loved Lego towers. He would make Lego towers with his niece . They would play for a long time 11:57
together doing things like that. He would build them up and then smash them down again, and she would go and collect all the pieces, and so they had a very, very close relationship. He loved music. He would sing. He particularly like Shania Twain, and that was 11:57
something that we, as a whole family, had fun with, because he would stand at the top of the stairs and he would sing very, very loudly, "Man I feel like a Woman", which would make everybody giggle. He loved Christmas. He loved Christmas with his family. 11:57

20 Q. And the music, P28's mother was something you also referred to in your statement. He loved music, but you also said he needed music. Can you tell the Panel how music helped P28

A. Yes. Music would calm P28 and we would use different kinds of music at different times. For example, often times when he came home from school, maybe we would have a time where he would play his tambourine and play with -- he had maracas and he had like a rainmaker that we had brought home from Spain, and he would play with all of those things and join in with music that we would do as a family at home. I can play the bodhrán and my husband plays the guitar, so we had a very interactive time together. But, also, when he was calming down for an evening, or when he was stressed, we would use music to calm him, which meant that we would have -- we would have a calmer type of music on, a quieter style of music that would help his mood and de-stress him, and often times that would be going most of the night as well in the background, quietly. 11:58 11:58 11:59

21 Q. And did he have behavioural difficulties whenever he was at home, and, if so, can you describe those to the Panel? 11:59

A. He, like any disabled child who is non-verbal, would use behavioural cues to help us to understand how he was feeling. So if he was upset, he might bite the back of his hand or reach out for you - maybe he would nip if he was really cross with you because you didn't get what he wanted. But massive behaviour problems, no, we didn't witness that at all in our home, until after he'd gone into Facility A. 12:00

22 Q. Yeah. And I want to ask you a little bit about that

now, and I know that you have particular concerns about P28's care in Facility A as well, and you have raised them comprehensively in your statement, and the Panel have that. What I particularly want to ask you about is the end of that placement and how the ending of that placement led to P28's admission to Muckamore. And one of the things you said in your statement was that at the end of the placement at Facility A, that the social worker, who is H146, was pushing you to send P28 to Muckamore. 12:00

A. Yes.

23 Q. Why did you feel that that was being pushed?

A. Because it was the only option she seemed to want us to take. There didn't seem to be any other options. That was the one that was on the table. That was the one that she kept telling us was the right place for P28 to be. But I couldn't understand that my child had gone from the loving, happy, bubbly boy, to someone who needed to be locked up in a hospital. I couldn't -- I couldn't understand how this had happened. I couldn't get my head around how this had happened. 12:01

24 Q. And so, at that time, whenever it was -- Muckamore was suggested, you describe you and your husband saying, no, you didn't want P28 to go at that time. Is that right? 12:02

A. Well, why would we? Why would any parent, faced with that prospect of your child being -- statement -- locked up in a facility like MAH? It just -- it was almost too much to get our heads around. We had gone

from having a happy, loving, caring family unit, where P28 was very much the centre of that, to that. How? Of course we didn't want P28 to go there. We would have done anything to bring P28 home to get back the family unit that we had, to get back the child that we had once had.

25 Q. And you did try to bring P28 home whenever the placement at Facility A ended, isn't that right?

A. Yes, it ended very abruptly. We, we were -- we were phoned a couple of times after the fact that the police had been called to P28 which was very alarming for us because P28 had never, ever presented in a way that required that at home, and we'd gone up to find a horrendous scene, which, even now, thinking about it, brings me to tears, because I cannot fathom how that could ever, ever have come to pass. And then when that was -- well, we had managed to calm that. I mean it was horrendous, but being there, cuddling P28 I remember P28's father putting P28 on his lap and just cuddling him to his chest, because P28 was completely and utterly traumatised. We'd managed to calm that situation down, and then we were told that if the police had had to be called again within 24-hours, that he would be going to MAH. We weren't really given an option; that was what we were told. So we were terrified, absolutely terrified for our child. And when that phone call did come, we went to get P28 as fast as we could. We -- I suppose at that point we would had imagined that if we could get P28 and

bring him back home where we had given him a safe, secure and happy environment for 27 years, that he would be okay.

26 Q. And what support did you get to bring P28 home?

A. They were very much against it. They were very against it. It felt like we were in a massive rush. I felt like -- I mean I was literally throwing things into bags and throwing things into the car to get my son in the car before the police came. It was horrific. I just wanted to save my child and take him home. I felt terribly guilty that I had allowed this situation to occur. Like, I felt that because I hadn't been able to care for P28's father and P28 together, that it led to that moment. And I'll never forget it. 12:05 12:06

27 Q. And you got him home, P28's mother and you have described in your statement he was home for about two weeks, isn't that right? 12:06

A. Yes.

28 Q. And you described a difficult time. And eventually you contacted, was it your GP or Social Services? 12:06

A. What happened was that he had came home and we were promised a care package -- we'd had a care package prior to P28 entering Facility A, so it was well-known to Social Services that both P28's father and I had disabilities at that stage and that we were in need of the care package. They knew that. They were perfectly aware that we needed a care package. They promised us that the care package would be there by the weekend. It wasn't. And P28 wasn't okay. 12:07

29 Q. And you then contacted, was it Social Services or your GP?

A. We were forced to do that after two weeks of only what I can describe as hell on earth. Our child wasn't our child. 12:07

30 Q. And P28 then eventually was admitted to Muckamore on the 14th February 2017, isn't that right?

A. He was. We - I phoned the Social Services and - I mean they hadn't even allowed us to have his bed, so obviously they had felt that the time he was with us 12:08 was only going to be temporary. That's the only conclusion I can come to. I phoned them and -- because I had been phoning constantly and asking about the care package, and I had said to them, "How long is it going to take?", and they said the care package would take at 12:08 least eight weeks, and at that point I had to tell them, "We're not going to last eight hours". We had had no sleep. And so we were forced into P28 going into MAH.

31 Q. And it was Cranfield Ward that he went into, isn't that 12:08 right?

A. It was Cranfield Ward, yes.

32 Q. And you and your husband went with P28 the night that he was admitted, is that right?

A. Yes, we did. We felt -- we felt we needed to take him. 12:09 We weren't going to let anyone else take him.

33 Q. And did you meet some of the staff then at Muckamore whenever you arrived?

A. Yes, we did.

34 Q. And did you have an opportunity to discuss with them what P28 was like, what he needed, his routine? Anything like that?

A. I can remember we talked -- we talked a little about P28 but there was a lot of paperwork. The night is a blur because of the entire amount of stress and upset involved. I felt there was a lot more emphasis on the paperwork than on P28 It was like we couldn't even really get him settled. It was very, very difficult. It was harrowing. 12:09 12:10

35 Q. And how did P28 settle into Muckamore?

A. I think initially it was helpful for P28 I think perhaps it was space away from the other Facility A, I don't know. It seemed that initially he seemed more settled. Happier. 12:10

36 Q. And you and your husband visited him regularly, isn't that right?

A. We visited him as much as we could, and initially it was fine, in that we gained access to the ward, I could sit with P28 in his room, I could arrange things in his room. It felt -- it felt very prison-like though. It didn't feel like a loving, caring environment. It was difficult, but there was access to his room. There was the ability to have toys. There was ability for him to have his special friends on his bed, for example, and I put his throw on his bed. But it wasn't a homely environment. Everything was screwed down. It, it didn't feel right. It felt like my son was in prison. 12:11 12:11

37 Q. And when you refer to having access to the ward and P28's room at that time, you said that that was initially. When did that change?

A. Ehm, I would say around six to eight weeks in, it changed. 12:12

38 Q. And how did that change?

A. There were times when we went up and we weren't allowed on to the ward. There was always a reason why, and we were told P28 would be brought out to us.

39 Q. What type of reasons were you given? 12:12

A. There was an incident on the ward.

40 Q. And, so, on those occasions you were told you weren't allowed into the ward but that P28 would be brought out to you, is that right?

A. Yes. 12:12

41 Q. And is that to the visitors' room?

A. It is, yes.

42 Q. And I think there is a photo of you and P28 in the visitors' room at 5. If we can bring that up? It's on the screen, P28's mother and you have it in front of you. 12:13

A. Yeah.

43 Q. Slightly better quality in the printed copy.

A. Yes.

44 Q. When was that taken?

A. I -- I can't say a specific date, but it does look a while into P28's stay there, because I can notice from the photograph that P28's hair has got quite long compared to the usual way that he would have his hair. I noticed that he has lost a tremendous amount 12:13

of weight, that he is looking quite gaunt.

45 Q. I'm going to come on and ask you about that, P28's mother because you have also provided other photos about that, so I will come on to that. But before we do that, I wanted to ask you a bit more about the visiting room, because you said that you felt that it was totally inappropriate for P28

A. Yes, it was.

46 Q. Can you explain to the Panel why that was?

A. P28 as we have already said, he loved his toys, he loved his music. He was a very active little boy. Sorry, I know he is a man, but he is still my little boy. When he was brought to the visitors' room, there were no toys provided, so he had none of his toys, none of his bricks, none of his cars. Nothing. He was just brought to us the way he was. There wasn't any way of providing his music, except we discovered that we could play some music on our phones, so we had to do that. There was nothing in the room, just chairs, and it's like in this situation where we are today, as adults, we can sit in a situation like this and talk to each other, but P28 had a mental age of 18 months; P28 sat on the floor, P28 played with bricks, P28 sang songs, P28 had teddies, P28 was disabled, he could not function adequately in a room like that. It was like it was set up to fail, and like it was almost set up to encourage a behavioural incident, because there was none of the things that made P28 feel safe and secure there.

47 Q. Were you ever told why those things weren't able to be in the room?
A. No.
48 Q. Did you ever ask for them?
A. Yes. 12:15
49 Q. And you said in your statement on some occasions that you put your foot down and asked to go into the ward?
A. Yes, I did.
50 Q. How was P28 during those visits whenever you got into the ward? 12:16
A. Sometimes P28 was wet, sometimes he was dirty. He -- I found it difficult to engage with him. It was difficult to -- well, he wouldn't smile, he wouldn't sing, he wouldn't do any of the things he usually did. He would basically look at you through the top of his 12:16 head. On one occasion he was still in bed, and I know that was quite late in the day because it takes quite a while for us to drive from where we live to the Hospital, so it was quite late in the day that P28 was still in bed, and the room was dark. He hadn't 12:16 been changed, he hadn't been washed.
51 Q. And you started telling us there, whenever we were looking at the photograph, about some physical changes that you started to notice in P28 When did you start to see that? 12:17
A. I would say it started around March 2017 when we noticed that P28 had what looked like the remnants of a bruise under his right eye.
52 Q. Mmm. And there were a number of occasions that you saw

-- you say you saw bruises, and we have photos of those and I'm going to come to those, but whenever you started talking about the physical changes, you had referred to P28 as looking a bit different, his hair being different?

A. Yeah.

53 Q. And having lost weight. Can you describe to the Panel what sort of changes you saw to his physical features?

A. Yes. P28 appeared to have lost an incredible amount of weight. His trousers hung on him and he was very grey, very gaunt-looking. His eyes were sunken in his head. His hair was long. His beard was gankey. He often stank of urine and body odour. He -- he was often dirty. 12:18

54 Q. And did you ever raise any of those issues with staff at Muckamore? Did you tell them? 12:18

A. Yes.

55 Q. Would you -- when would you have raised them?

A. On every occasion I found my child dirty.

56 Q. And what response did you get? 12:18

A. They did change him, but I'm not sure they did it when I wasn't there.

57 Q. Did they ever explain why he was in that state?

A. Sometimes they said it was because of staff shortage. But I don't see why my child should have been left dirty. My child was never dirty at home. 12:19

58 Q. And can P28 feed himself?

A. P28 needs support. P28 needs support feeding for a lot of reasons. P28 has a visual problem, so if

things aren't placed in front of him, he might not see them. P28 has cerebral palsy, so he may find it difficult to lift certain foods, especially foods that would spill - for example, yogurt or soup. P28 has epilepsy, so it's very important that he's monitored while he's eating in case he may choke on something while having a fit. So there's lots of reasons why P28 should be monitored and supervised while he is eating.

59 Q. Did he have a care plan at Muckamore? 12:20

A. Yes.

60 Q. And do you know did it mention those sorts of needs for feeding?

A. Yes, it would definitely have done that.

61 Q. Did anyone at Muckamore ever raise with you that they were having difficulties feeding P28 12:20

A. I don't recall that. I just know that P28 was -- every time that we went, P28 seemed to have lost weight, lost condition.

62 Q. And did you discuss that weight loss specifically with staff at Muckamore? 12:20

A. Yes, we did.

63 Q. Was any explanation given for the weight loss?

A. No.

64 Q. I know there were some photos that you want to show the Panel to show how P28 had changed, so I'll ask to call those up. The first are earlier photos. So, 1 and 2, please. Can you see those, P28's mother 12:20

A. Yes.

65 Q. They were taken in 2014, is that right?
A. This, this was taken when we were - I think it was taken when we were out having coffee. It seems to be out when we were in the shopping centre. P28 loved that, and you can see by his face he is smiling and happy, and it also shows the way that P28 would normally have looked when we looked after him at home. As you can see, his hair was cut short and his beard was also quite short and well kept and clean. I always made sure P28 was clean. I even -- I even put aftershave on him so he smelt nice when people got close to him, even though he didn't shave, I thought it was important that he smelt nice. It's so important when there's so many reasons why children like ours, it's difficult to get them socially accepted anyway, so smelling nice was one thing that I was particular about, and obviously his appearance as well. And you can see there that he was -- he wasn't fat or overweight in any way, but he was a normal, a normal size for his height. 12:21 12:22 12:22 12:22
66 Q. And so these were taken in 2014?
A. Yes.
67 Q. And we know he went into Muckamore in 2017. But did he look like this? This is indicative of what he looked like when he went into Muckamore, is that right? 12:22
A. He looked similar.
68 Q. Yeah.
A. He, he - he would not have been tremendously different in weight.

69 Q. Yeah. And then there were some photos that you referred to, taken at P28's time in Muckamore. So if we could get up 9 and 10, please. Can you recall when these were taken?

A. I think that was taken in 2018. 12:23

70 Q. Were these in the visiting room or on ward?

A. This was on a rare occasion where I got into his room. You can see his blue chair behind him. Initially he didn't have a chair in his room, but we managed to get that chair, and he has still got it. So that was one 12:23 thing that was very, very helpful. So, yes, I know that it was in his room at Muckamore because it's in the background.

71 Q. And if we could bring up 22 as well? I know you want to show the Panel this, P28's mother It should come up on 12:24 your screen. 22. And there's a copy of it at the back of the file.

A. I want people to see how different P28 looks from the P28 that left our home.

72 Q. And this photo no. 22, it was taken in Muckamore as 12:24 well. I can see the chair in the background, is that right?

A. Yes.

73 Q. And in fact, I think P28 seems to be wearing the same clothes as he was in those photos 9 and 10 that we were 12:24 looking at?

A. That probably would have been the same day.

74 Q. The same day. So in and around 2018?

A. Yes.

75 Q. And you felt P28 had suffered weight loss and changes in his physical features?

A. Yes.

76 Q. Were there any other differences in P28

A. Well, from the photograph that I can see -- from when we used to be in the visitors' room - I'm not sure what number you've got - but he has a red checked shirt on and it's in -- oh, sorry, 11. 11, is it? 12:25

77 Q. 11, please.

A. Yes. I mean, that was towards the start of him being in Muckamore. That was in the March. And you can see that he still had the weight on him there. 12:25

78 Q. Yes.

A. So, yes, it's a very, very marked change in P28 A marked change in his demeanour as well. The picture at 11, you can see a smile on his face. So we were -- we were at that stage able to engage with P28 He had some fight left in him there. And when we were able to be on the ward at that stage, yes, we could, we could reach P28 at that point, which was encouraging from what we had experienced at home, but after that it spiralled very much, and you can see the result. 12:25 12:26

79 Q. And you referred to noticing injuries on P28 So while we have the photos in front of us, I am going to ask you to refer the Panel to the photos that you took in respect of that. So, the first photo that you have provided is 11. 12:26

A. Yeah.

80 Q. And in your statement, P28's mother you said that that was

taken on 4th March 2017.

A. Yeah, that was shortly after...

81 Q. And we have just looked at it and you've said, you've described his smile and how he looks similar in terms of weight. 12:27

A. Yes.

82 Q. But was there also an issue in respect of his eye in this statement that you want to refer the Panel to?

A. Yes. We took this photograph because we noticed that there had been an injury to P28's eye, it would be on P28's right, and that can be seen in the photograph. There is a shadow under the right eye and it was yellowing, and that alarmed us. 12:27

83 Q. Was that the first occasion that you noticed an injury?

A. That was the first occasion that we noticed an injury on P28 at MAH. 12:27

84 Q. Did you raise that with staff at the time?

A. Yes.

85 Q. And what explanation did they give?

A. We were told that he had perhaps hit himself with a car or another one of his toys. 12:27

86 Q. What did you make of that explanation?

A. I was concerned. Naturally I was concerned. That's why we took the photo.

87 Q. And you continued to take photos then. There are photos at 12, 13 and 15. Unfortunately, 14, the quality is very poor. But if we look at 12, 13 and 15, P28's mother these are photos that you say were taken on 19th July 2017. Can you explain to the Panel what they 12:28

show?

A. Yes. It was quite -- it was quite worrying because when I did manage to get into the ward and see P28 and when I did have cause to remove clothing from P28 at times when he needed changed or a jumper off if he was warm, I would often find injuries like these - bruising. In 12 you can see a definite bruise to -- bruise to his upper arm - that would be P28's right arm, and a bruise on his wrist is just visible. On picture 13, it looks like the remnants of a grab mark on his wrist. 12:28 12:29

88 Q. And 15, then, as well, P28's mother was that taken at the same time as the two that we've just looked at?

A. I am not exactly sure...

89 Q. Okay. 12:29

A. -- of the date of that photograph. But, again, on the upper arm there is a bruise and that would be somewhere that P28 would naturally not be able to reach to inflict an injury on himself. It would be to the back of the arm in this area. (Indicating). Which alarmed us, and that is why we took the photo. 12:30

90 Q. And you are pointing to the back of the upper arm there?

A. Yeah. There is also, in this photograph, you can see on his back there's yellowing where he has also got a bruise. Now, that would be around here and it would not be easy for P28 -- (indicating). 12:30

91 Q. Just in the - above the ribs?

A. It would not be easy for P28 to inflict that injury

on himself.

92 Q. Did you speak to staff about those marks?

A. Yes.

93 Q. And what explanation was given for those?

A. That he'd inflicted them on himself in some way. That it must have been done through play. On another occasion we were, we were told that they had to restrain him. So it was very worrying. Very, very worrying. 12:30

94 Q. What explanation was given for the need for -- to restrain P28 12:31

A. Behavioural challenges.

95 Q. Did you ever need to restrain P28 at home?

A. No. I, I have physical disabilities and I was able to change P28 on my own to go to his daycare. I was able to shower P28 and dress P28 and make sure that he was clean and tidy, he had his nappy changed and he had his hair done, his beard trimmed, and he had his aftershave on, and he was always, always clean, and I did that whilst trying to help my husband through his illness as well. And I did that on my own because my children would come later in the day to help, so mostly I did that alone, and yet I was being told that it took three staff - not one, not two, but three trained staff to take my child for a shower and that he needed restraint. 12:31 12:32 12:32

96 Q. And were you told those things verbally, P28's mother

A. Yes.

97 Q. Did you ever see any incident reports?

A. I don't recall.
98 Q. Were you aware of any investigations?
A. I don't recall.
99 Q. And in terms of the possibility of self-infliction, did P28 self-harm? 12:32
A. Yes, he did.
100 Q. And in what way did he harm himself?
A. If P28 was very distressed, he may bite the back of his hand.
101 Q. Had you known him to bruise himself or mark himself in the type of ways that we see in these photos? 12:33
A. No. These are completely different injuries to the injuries that we would have experienced at home if he was upset.
102 Q. I've got two more photos, P28's mother I am conscious of the time. Are you happy enough for me to finish this section? 12:33
A. I am happy to finish this section.
103 Q. So the next photo that you referred to in your statement was one which you took on 15th April 2018. Photo 16. And there's a better copy in the hard copy, P28's mother if you'd like to turn it up. 12:33
A. Yes.
104 Q. And can you explain to the Panel what that shows?
A. Yes. It shows that -- well, P28's hair was left to get very long, to start with, and often times it was dirty and it smelled. You can see clearly on his forehead that he has an injury. I don't believe it was a self-inflicted injury. It's alarming that we could 12:33

see that injury. Again, we were in the visitors' room and, again, we feel that that was set up to fail and cause a behavioural incident. P28 also had, again, what appeared to be the remnants of a black eye on the right-hand side.

105 Q. Do you recall raising the observations at that time with the staff at Muckamore?

A. Every time that we saw an injury on P28 we raised it.

106 Q. Can you recall what explanation you were given for this particular injury? 12:34

A. That he had hit himself with a toy.

107 Q. Can I ask to you turn over and pull up 18, 20 and 21. Now, these were photos, P28's mother in your statement you say you took these on 14th May. 14th May 2018. 19 is missing because it's poor quality, but can you explain where on P28's body, looking at number 18 first, what area of P28's body does that show? 12:35

A. Yeah, that was -- that would have been again on his arm and his back.

108 Q. And number 20?

A. Number 20, yeah, quite alarmed again, because on one of the rare occasions we did get in and I was able to change P28 , P28 had bruising on his legs, right up to the top of his legs and his groin. 12:36

109 Q. And so that -- is that his inner right thigh that we can see there?

CHAIRPERSON: Left?

MS. KILEY: Inner left thigh.

A. That would be the left. That would be the left.

110 Q. And number 21?

A. Basically it's the same picture but showing the size.

111 Q. What explanation were you given?

A. I wasn't given any explanation at all. 12:36

112 Q. Did you specifically raise those marks with Muckamore staff?

A. Yes. Yeah. Every time. We were told that he had behavioural challenges while he was being changed, so I presume that meant that they felt that he had, he had 12:36 injured himself, but I wasn't happy with that explanation. I don't believe he did. In all the time I had him at home, which was 27 years, I have never seen these injuries on my son. Ever.

113 Q. And you have provided the photos to the Panel. These 12:37 were taken whenever you went to visit P28

A. Yes.

114 Q. So these were things that you noticed on P28

A. Yes.

115 Q. Were you ever telephoned or contacted by Muckamore 12:37 staff in advance of noticing these injuries to let you know that P28 had marks?

A. I don't recall.

116 Q. And were you aware of any investigations into any of these injuries? 12:37

A. No.

MS. KILEY: I think, Chair, that's an appropriate time for the break.

CHAIRPERSON: How long do you think would help? Do you

want an hour or a bit less than an hour?

A. Less than an hour?

CHAIRPERSON: 45 minutes.

A. That would be great. Thank you.

CHAIRPERSON: Okay. No worries at all. Okay. We'll start again then at -- we'll try and start at twenty five past. All right. Thank you very much. If you would like to go with Jaclyn. Thank you. 12:37

THE WITNESS THEN WITHDREW 12:38

CHAIRPERSON: How much longer do you think?

MS. KILEY: I think around half an hour, Chair.

CHAIRPERSON: Fine. Thank you very much. Okay. Thank you very much. 12:38

LUNCHEON ADJOURNMENT

THE INQUIRY CONTINUED AFTER LUNCH AS FOLLOWS:

CHAIRPERSON: There's not much more to go, so thank you. Okay.

A. Thank you. 13:35

117 Q. MS. KILEY: Okay, P28's mother One of the things I want to ask you about now is something that you said in your statement was something that was important to you, and that was the loss of Barney at Muckamore, and Barney was P28's special toy, as you had described it, and 13:35 you have provided photos of P28 with Barney that I know you want the Panel to see, so can I ask for 4 to come up, please? And there are -- it should be on your screen, P28's mother but there are also better qualities in the bundle if you would like to look at those. It's 13:36 number 4. Do you have that?

A. Yes, I do.

118 Q. And can you just describe to the Panel what that photo shows?

A. That is P28 at home. This is prior to him leaving 13:36 home, and this would have been a normal bedtime routine, where you can clearly see that we've got both Barney and Tigger in bed with P28 looks very tired there. What would normally happen would be that we would get P28 changed and he would maybe have a 13:36 shower, he'd have his marshmallows or hot chocolate, and then we would gradually ease him into a bedroom routine to help him to sleep. He would be taken up to his room and we would do the Tigger song first, "The

Wonderful Thing About Tigger", as I'm sure you all know it.

119 Q. - "Cause I'm the only one".

A. Yes, indeed. (Laughs). Yes. And P28 has a very special Tigger because it's fluffy, so we know which one which is Tigger 1, but then he has a plain one which is Tigger 2, because everyone who knows the Tigger stories know there is in fact two, because one's a reflection, so that's important. But those are important because they were part of a bedtime routine, but they were also the toys that helped P28 to stay calm and to help him to socially interact. 13:37 13:37

120 Q. And did you discuss that with staff at Muckamore, ever?

A. Yes. I did.

121 Q. So what did you tell them? 13:38

A. I told them that these were special friends, they were his special toys, they were very important to him. As I said, we used to do the Tigger song every night, but then he used to jump so hard I thought they'd come through the floorboards. And then we would get him tucked up in bed and he would sing the Barney song, and it's quite a poignant song, if anyone knows the words? It specifically says "I love you, you love me, we're a happy family. With a great big hug and a kiss from me to you, don't you say you love me too". And that really sums up how we were at that time: a very happy family, and every night that would be the song that would put P28 to sleep. So, yes, Barney was indeed very, very important to us, and that he'd had it for so 13:38 13:38

long.

122 Q. And you took Barney to P28 in Muckamore, isn't that right?

A. Yes, I did.

123 Q. And so did P28 continue to go to bed each night with Barney whilst he was in Muckamore? 13:39

A. I don't know, I was never there at night. I hope so. I know that the toys were on his pillow. I know that I would never have taken Tigger without Barney.

124 Q. But you did describe a time whenever Barney was lost? 13:39

A. Yes.

125 Q. Can you tell the Panel the impact that that had on P28

A. I think that had quite a major impact on P28 because P28 had Barney for 22 years. It was part of his 13:39 life. He -- he had -- he had Barney every night on his pillow. He had Barney to go to bed with every night. He had sung the Barney song literally every day since he got him, and it not only had an impact on Barney but I think it had an impact on us as well, because P28 13:40 met the real Barney in Florida, in the real Disneyland. It was a massive, massively hard job taking two disabled children to Disneyland, and we did it, and it was the only time we ever went abroad as a family, so it was a very poignant reminder of that special time we 13:40 had.

126 Q. And when you discovered that Barney was lost at Muckamore, you raised that with staff, isn't that right?

A. Yes.
127 Q. And how do you feel that they reacted to you raising that?
A. That it was only a toy, it wasn't important, you could get another one, that -- that they never saw it, that it was never there, that they would look for it, that they would look in the laundry. It just never came back. 13:40
128 Q. Okay.
A. And, instead, a massive great big Tigger appeared. I don't know whether it was swapped for Barney or whether somebody felt bad because Barney was missing, but it arrived instead. 13:41
129 Q. Okay. And I want to move on, P28's mother and ask you about medication and what medication P28 was on in Muckamore. So, you refer to P28's epilepsy. 13:41
A. Mm-hmm.
130 Q. And he was diagnosed with epilepsy as a child, is that right?
A. Yes. He has always had epilepsy. 13:41
131 Q. And was he on medication for that before he went into Muckamore?
A. Yes, he was.
132 Q. And you described in your statement the priority need to get that, the epilepsy under control. Isn't that right? 13:41
A. Yes.
133 Q. And what information were you given by Muckamore about the medication that they were giving P28

A. I don't recall I was given specifics. I certainly wasn't given anything written down. And -- at least I don't recall being given anything written down. And I feel like I lost track, and it worries me, it frightens me because I didn't really know what they were giving P28 I didn't -- when P28 was at home I knew exactly what he was getting, and exactly when he was getting it, and exactly what format he was getting it in. When he was in Muckamore, I had lost track of that, and in some ways I felt out of control because if, if P28 did come back to my care, I didn't know what he was getting. I didn't -- I felt like I'd lost control. I felt like I'd lost that vital bit of information, and I didn't feel -- I didn't feel it was safe. 13:42 13:42 13:43

134 Q. Was that something that you felt at the time, that it wasn't safe?

A. Yeah. I am very conscious of the fact that before P28 was 5, he had several very major seizures, and he had seizures and status that led to heart failure, and for a parent to go through that, to see their child going blue, and then not just staying blue but going black and limp in your arms, and trying to get your child to breathe again, even with some medical knowledge and understanding of how to revive a child, for a parent to go through that is very, very traumatic. And so I was very, very geared up to the fact that P28 was having seizures, and P28's seizures were at that stage described as complex 13:43 13:43

partial seizures, but they tended to come in clumps, and I was terrified that that would go back to the pattern, and if it went into that pattern, I was unsure whether it could be stopped. I was frightened at what they were doing. I was frightened at the level of care they were giving him regarding medication. And I had a sense that, because I couldn't engage with P28 I felt at times he was overmedicated.

135 Q. What made you think that?

A. It felt like he had a medical cosh because he -- he wasn't reacting the way that he normally would have at home. He wasn't responding to us in the way that you would normally expect him to. He wasn't engaging. He wasn't -- if you spoke to him, he, he would look at you with empty eyes. He would look at you through the top of his head. It was like -- it was like the lights were on and no one was at home. 13:44 13:44 13:45

136 Q. Did you ever raise concerns about his medication with staff at Muckamore?

A. Yes. 13:45

137 Q. What was the response that you got?

A. That they were working out what best medications to keep his epilepsy under control, and it just felt -- you see, for 27 years I had his medication and his epilepsy under control. It worked perfectly well. 13:45

138 Q. And were --

A. I didn't understand the change. I didn't understand the change. I didn't understand what had happened to make that not work anymore.

139 Q. Were you ever allocated someone who was a key contact at Muckamore who you could discuss those sorts of concerns with?

A. There was a lady that we were introduced to initially, and I think she had a kind of foreign accent, but we were never -- we were never given any time, private time with that lady to build up any of a trusting relationship -- 13:46

140 Q. Is this the family liaison officer?

A. I think so. And she kind of disappeared very quickly and I never saw her again, and I don't know what happened to her. 13:46

141 Q. What about the monthly meetings that took place? Were they an opportunity to raise concerns?

A. Yes, but often -- often I felt like our concerns were being dismissed. Like -- like they were the professionals, so -- and then we were just the parents, and yet, at times -- at times, we were called heros because we had looked after P28 and it kind of grates on me because we were parents, we did our best for our child. We had no special training, we had no degrees, we had no special -- we had no special courses on how to deal with things like epilepsy, we just did it because we loved our child and we cared. They had all of those things and they didn't look after him. I know they didn't. 13:46 13:47 13:47

142 Q. And you described in your statement P28's eventual discharge from Muckamore. That was in February '19, isn't that right?

A. Yes.

143 Q. But you also described how, in April 2017, P28 was assessed as no longer needing to be detained in Muckamore?

A. Yes, it rather perturbs me a little bit looking at it because, just prior to P28 going into Muckamore we had been asking for a care package and had been told that it would take eight weeks, at which point, as I have said, I had told them we wouldn't last eight hours. P28 went in to Muckamore, February '14th. We received a letter in April 2017 that said he had been assessed and he was no longer detained under the Mental Health Act but was a voluntary patient. A month later, we had a letter saying that his tenancy agreement for -- 13:48 13:48 13:49

144 Q. Facility A?

A. -- Facility A, had been terminated, mainly because he was in breach of contract because he wasn't there. Now, when I think about it, from February to April, eight weeks, that's eight weeks, and that's -- that's very significant now, because in September of 2017, we had another letter saying that P28 was detained again under the Mental Health Act. As a parent, there is two things that I want to ask: Was the assessment in the April a mistake or, if it was right, that P28 was okay, then what happened to my son between April and September to make him regress to the point that he needed again to be contained under the Mental Health Act? 13:49 13:50

145 Q. Well, you refer to receiving the first letter in April 2017. Before you received that letter, did anyone at Muckamore discuss what that letter said? So the letter told you that P28 no longer needed to be detained, isn't that right? And did anyone at Muckamore ever discuss that status with you before you received the letter? 13:50

A. No. Not that I can recall.

146 Q. After you received the letter and it told you that P28 didn't need to be detained, were there any discussions then about what would happen next, where P28 would go? 13:51

A. We weren't really given a great deal of option.

147 Q. And were there discussions with staff at Muckamore about those options? 13:51

A. No. It was just that P28 had to be given a correct placement for his needs, and at the time, it felt that the option of coming home and having the care package in place was not on the table. And as a parent, knowing now what I know, that P28 was in Muckamore for a further twenty months, which we now know was not a great place for P28 to be, eight weeks, eight weeks, folks, seems a really, really significant time. 13:52

148 Q. Why is that significant to you, P28's mother

A. Because that's how long we were told a care package could be put in place. We could have brought P28 home if he was well and if the correct care package was in place. 13:52

149 Q. You mentioned there --

A. -- didn't have that as an option.

150 Q. And you mentioned just a moment ago, P28's mother having received a letter in September 2017. What did that letter tell you?

A. That P28 was again assessed and that he was again -- he was again being kept in Muckamore under the Mental Health Act, which meant to us that his mental health had deteriorated, that there were issues, behavioural challenges, that meant that they'd come to that conclusion. As a parent, knowing what I saw prior to him going into Muckamore and the way that he had responded to what went on before, I now look at that space of time and I think was he simply asking for help? Was that the only way my son, who is non-verbal, could tell you that something was very, very wrong? And I have photos date-stamped between April and September which have very clear injuries on my child. 13:52 13:53 13:53

151 Q. And was that letter that you received in September a surprise to you?

A. Not really. It was a surprise in one way because, again, we faced another six months of him literally being incarcerated in a prison-like environment, but not so because, by that stage, we realised that this was simply what was going to happen, that P28 was not coming home. We had been told that his stay in Muckamore would be six to eight weeks. 13:54 13:55

152 Q. And it was -- how long was it in total in the end?

A. Two years. It was a whole two years. My son got a two-year prison sentence. Those who wanted P28

there, who expressed that P28 should be there, they got promotion; my son got prison.

153 Q. You referred to a number of assessments, whenever you were talking about the letters that you received. So he was assessed as not being needed to be detained in April '17, and he was assessed as again needing to be detained in September. Did you have any input into those assessments? 13:55

A. No. I don't feel that I did. I don't feel that we as a couple did. 13:55

154 Q. He was eventually discharged into a new home, and we're not saying that name just to protect his -- to protect P28 -- but he is still in that place, isn't that right?

A. He is, yes. 13:56

155 Q. And you have a photo of P28 now that I know you would like to show the Panel. It's at the back of the bundle and it's entitled "Photo A". Have you got it?

A. Which one are we talking about?

156 Q. The photo of P28 now. 13:56

A. That's the one. Yes. Yes.

157 Q. Can you tell the Panel when that was taken?

CHAIRPERSON: Can we just describe this? Is it the Merry Christmas?

A. No, no. I'm sorry, it is not. 13:56

CHAIRPERSON: It's not. Sorry. Just give me a second.

A. This is P28 and this is P28 in the facility that he is now in. He has gained weight and you can see that he has his hair and his beard cut. When I see

P28 , P28 doesn't smell of urine, he doesn't smell of faeces, he doesn't smell of body odour, and he is a child that I can again engage with, in that he responds to me and he has got what seems to be a little bit of a smile on his face there. He is a very different little 13:57
boy to -- I am sorry, he is an adult, but he is still my little boy, he is still, he is still my child. And he's more my P28 in that picture. But the truth is that since P28 went away to Muckamore, he has been back in my house for less than an hour. (Upset and 13:58
crying). I don't feel like my P28 has came home. Much like Barney. They have never came home.

158 Q. MS. KILEY: And I know, P28's mother as well, there's a photo that you have asked the Inquiry to provide because you want the Panel to see a comparison of P28 13:58

A. Yes --

159 Q. And we have printed that off in hard copy. You should have a copy of it in front of you there.

A. I do.

160 Q. And this is a comparison of some of the photos we saw 13:58
earlier. So 1 is on the left-hand side and 22 is on the right-hand side. What is it in particular that you would like to tell the Panel about those photos?

A. I want the Panel to look very closely at the picture from 2014. I had P28 for 27 years at home. P28 is 13:58
happy in that picture. P28 is well groomed in that picture. P28 is well fed in that picture. P28 has a look on his face of enjoyment in that picture. And now look at the other picture. This is what has

happened to my son. In four years of so-called professional care, this is what they've done to my son, and the pictures tell everything, because the picture of P28 in Muckamore is not my son! That is what they've done. 13:59

MS. KILEY: Okay. Thank you, P28's mother I don't have any other questions for you, but the Panel members might, so if you just stay where you are for the moment.

END OF EXAMINATION BY MS. KILEY 14:00

P28'S MOTHER, WAS QUESTIONED BY THE INQUIRY PANEL AS FOLLOWS:

CHAIRPERSON: I am going to turn to Dr. Maxwell first of all. 14:00

161 Q. DR. MAXWELL: So thank you for sharing all the experience and in helping us to understand P28 as a person. So you've talked about how Facility A, you didn't feel he was being well cared for and he deteriorated, and there was some incidents with the police and then you brought him home, and as much as you wanted to care for him it was just too much with your disabilities and your husband being ill. So can you tell me at what stage did he get detained under the Mental Health Act? 14:00 14:00

A. We had had P28 home for about two weeks. We were absolutely exhausted. Whilst we are being promised, we were being promised the care package, by the first

weekend, it never, it never materialised. We -- it was very obvious at that stage that it was going to be a temporary arrangement, because we were not able to get the bed that he needed, the profile bed that was so desperately needed. So it was set up to fail. We didn't get the facilities that we needed, we didn't get the support we needed. There were people that came to the house; an epilepsy nurse and a behavioural nurse, but there was no actual help with the care regime, and my husband was still recovering from spinal surgery, he'd had two, what they felt was heart attacks, so he'd had stents put in. I was literally at some stages crawling on my hands and knees to clean my child, to keep my child safe, and to ensure that he had what he needed. So, it was the point where we literally came to crisis breaking point, where I was screaming, screaming down the phone at Social Services for the care package, and I said to the social worker at the time, "Where is the care package?", and she said: "It will take at least eight weeks". And at that point, at that point I knew we were done. I knew, and I says "We won't last eight hours", and that's when he went into Muckamore, because we had done everything, everything to stop that happening, everything that we could possibly do. 14:01 14:01 14:02 14:02 14:02

162 Q. I completely understand that you had done more than most people could even imagine doing for him. I think my question is: you had accepted that, even though you didn't want him to go to Muckamore, you couldn't give

him the care he needed and that he would need to be admitted. So I am wondering why he went in as detained under the Mental Health Act if you were happy for him to go?

A. Because by this -- I wasn't happy for him to go. I was never happy for him to go to Muckamore. 14:03

163 Q. Right. Right.

A. But what I did have a home was a child that did not resemble the child that had gone into Facility A two years prior to that. When P28 came home, he was like a monster. He was cowering, he was -- he was terrified, and I couldn't -- I couldn't reach him. I couldn't fix him. And that was the main thing. I didn't know how to fix him. I didn't know how to undo the damage. I didn't have the skills anymore and I didn't have the -- I didn't know what to do. And the social worker said Muckamore would help, that he said it was the best place for him and that they knew what to do and they would give him the care that he needed, and in the -- in the photograph that is shown of him in the March, in his red shirt, in the dayroom, you can see that there was a smile there, and I could reach him at that point. But very, very quickly, things deteriorated and I felt that I could see a pattern. 14:03 14:04 14:04

164 Q. So can I ask, did you know when he was admitted to Muckamore that he was being detained under the mental Health Act? 14:05

A. Yes.

165 Q. So people did discuss that with you before he was

admitted to Muckamore?

A. Yes.

166 Q. And then you had the letter saying he no longer needed to be detained under the Mental Health Act, but you had a letter again in the September saying he was detained again? 14:05

A. Yes.

167 Q. Was that discussed with you before you had the letter saying he was being detained under the Mental Health Act? 14:05

A. No.

168 Q. So in September, you didn't know about it until after it had happened?

A. Yes.

169 Q. But in his original admission, they discussed it with you before he was admitted? 14:05

A. They had discussed it --

170 Q. Or told you?

A. Well, yes, told us. "Discuss" is the wrong word.

171 Q. Yeah. 14:05

A. Told. Basically, when things got into crisis at Facility A, when he was behaving totally out of character -- I mean, I have never seen my son like that. I have never ever, ever seen my son my like that, and I never want to again. It was totally out of character, and it was at that point that Muckamore was first mentioned, that they wanted him to go there. 14:06

172 Q. And were you ever at any point told what your rights as a parent of somebody who was detained under the Mental

Health Act were?

A. We weren't exactly told, but we were given an information leaflet. I felt confused. I felt -- (sighs) -- I felt overwhelmed. I, I didn't know what way to turn. I didn't know what to do that was best for P28 I didn't know what to do that was best for P28's father I didn't know what was best for anyone. I just wanted my child fixed. And I didn't know how to get my child fixed. I trusted them. I trusted them. And it's the worst thing I could have done. I trusted them with my child.

DR. MAXWELL: I understand. Thank you.

CHAIRPERSON: Do you mind -- I just want to ask one question off the back of that. Plainly, back in February of 2017, you didn't want P28 to go to Muckamore.

A. No. No parent really would, would they?

173 Q. That's what I just want to ask you about. Why not? What did you know about Muckamore at that time, or what did you think about Muckamore at that time that made you so resistant to P28 going there?

A. Because it was mentioned that he would be detained under the Mental Health Act, and I had had a happy, healthy, bubbly, beautiful boy, who was perfectly fine, who had been in my home for 27 years, who had been in his daycare for 10 whole years, who was perfectly fine, and then I was being told, in the space of two years, that he had gone from being a beautiful, loving, gentle -- gentle so much that --

174 Q. I have seen the picture with the baby, is that the one you're looking for?

A. Yes, gentle. So much so that I could trust my son to hold a baby. (Upset and crying).

175 Q. Yeah. Just, was it really his detention under the Mental Health Act as opposed to the facility that he was going to? That's what I'm asking about. 14:09

A. The facility was a hospital. It wasn't a care home. It wasn't -- it wasn't -- it didn't feel like for P28's care. It was for treatment. 14:09

176 Q. Yeah. So it was a different nature sort of place.

A. But it felt wrong. It felt so wrong because I felt that P28 had been crying out for help. It was his way of telling us something was wrong with what he had experienced at Facility A. 14:09

177 Q. Yeah.

A. It wasn't that he was bad, or naughty, or sick. He just wanted help. And he was traumatised because of what they did. He was traumatised because of the police, because of being forced on his face. He was traumatised. That's what was wrong. 14:10

178 Q. All right. All right. Professor Murphy, do you have anything? No.

END OF QUESTIONING BY THE INQUIRY PANEL 14:10

CHAIRPERSON: Is there anything else you want to ask?

MS. KILEY: No. No, Chair.

CHAIRPERSON: Is there anything else that you wanted to

tell us before we thank you?

A. I just want to say that Muckamore is only the tip of a very large iceberg, and it's blatantly obvious now to us as parents that our children are not safe in the care system anywhere. Parents need to be listened to and red flags need to be fully investigated. And safeguarding changes have to be made, because if you don't get this, our children will never be safe in the care system. And I'll repeat that because it's important: If you don't get this today, our children will never be safe in the care system anywhere. I want you to continue to look at the pictures, as if you don't get this, there will always be another P28 Please, look at this picture. This could be your child one day. Please, get this. Please get this.

14:10

14:11

14:11

CHAIRPERSON: I just want to thank you very much indeed for your very powerful evidence. It's quite obvious you couldn't have done any more than you did for P28 and the evidence that you have given has been extremely helpful and powerful, and we won't forget these photographs. So thank you very much indeed for coming to assist us.

14:11

A. Thank you.

CHAIRPERSON: We'll take a break.

A. Thank you for listening.

14:12

CHAIRPERSON: Thank you very much. If you would like to go with the Secretary to the Inquiry.

THE WITNESS THEN WITHDREW

CHAIRPERSON: We'll take a fifteen minute break.
MS. KILEY: Fifteen minutes. Thank you, Chair.
CHAIRPERSON: Okay. Thank you very much.

THE INQUIRY ADJOURNED BRIEFLY AND RESUMED AS FOLLOWS: 14:28

CHAIRPERSON: Thank you.
MS. KILEY: Chair, as you know, the next witness is P28's father. So if he could be called in. 14:34
He has asked to be known as P28's fath actually, so that's how I'll refer to him.
CHAIRPERSON: Thank you.
MS. KILEY: Chair, the same arrangement for accompanying persons applies, or the witness has asked 14:35
for it to apply. So the Reverend Taylor will sit beside the witness in the box, or at the table, and the -- his wife will sit beside the Secretary to the Inquiry.
CHAIRPERSON: Oh fine. She is coming back in? 14:35
MS. KILEY: She is.

P28'S FATHER, HAVING BEEN SWORN, WAS EXAMINED BY MS. KILEY AS FOLLOWS:

14:36

CHAIRPERSON: Good afternoon. Can I call you P28's father
A. You certainly can, yes.
CHAIRPERSON: Thank you very much. Thanks very much for joining us. You've seen how it's done. You've

seen your wife give evidence. So, Ms. Kiley is going to ask you some questions based around your statement. You won't be here for very long. If you need a break at any stage at all, if you're uncomfortable, just let me know and we'll stop. Okay. Ms. Kiley. 14:36

THE WITNESS: Thank you.

179 Q. MS. KILEY: Okay, P28's father So as you know, the first thing that I'm going to do is read out the statement that you have made to the Inquiry, and you should have a copy of that in front of you. Do you have that in the file? 14:36

A. I do, yes.

180 Q. And you will also -- should also have a list of ciphers referred to in your statement at the back of the file. Do you have that?

A. Yes. 14:37

181 Q. Okay. So the first thing I'll do is read that out and then I'll ask you some questions:

"I, P28's father make the following statement for the purpose of the Muckamore Abbey Hospital Inquiry (MAH). 14:37

In exhibiting any documents I will use my initials R. So my first document will be R1.

My connection with MAH is that I am a relative of a patient who was at MAH. My son, P28 known as P28 was a patient at MAH. I also attach a photograph of P28 at R1. 14:37

The relevant time period that I can speak about is between January 2017 and 18th February 2019."

P28's father I am just going to pause there, because you will remember whenever I got to this stage of P28's mother's statement she corrected that that reference to January '17 should in fact be February '17, is that right? 14:37

A. That's correct, 14th February.

182 Q. So I'll make that correction and read out the sentence as it should be. 14:38

"The relevant time period that I can speak about is between 14th February 2017 and 18th February 2019.

My wife, P28's mother has also given a statement to the Inquiry. 14:38

I find recalling the events surrounding P28's care very difficult as I suffer from Post-Traumatic Stress Disorder. Therefore I have attached to my statement a file of information and photographs compiled by my wife and I at R2. 14:38

A lot happened prior to P28 going to MAH. I will start at the incident where I was called to Facility A in January 2017. 14:38

My son, P28 who is disabled and has severe learning

disabilities, was living at Facility A at the time. P28 had lived in Facility A in Donaghadee for around two years prior to being admitted to the MAH.

One evening, in or around January 2017, my wife P28's mother and I received a call from Facility A to go up as P28 had been arrested under the Mental Health Act. Myself and P28's mother went up immediately. 14:38

P28 is a very affable person. To arrive and find him in such a state of mind was awful. He had smashed up his room, but P28 would never have touched an ornament in our house, or if he did he got upset. We found him in a terrible state. 14:39

I don't want to get into that too much as I suffer from Post-Traumatic Stress Disorder. 14:39

P28 used to have his music on, which kept him calm and happy. There was no music on that night.

After that, we had P28 at home for two weeks but it was absolute hell. During this time, I wasn't well. I have heart and back problems and I had a back operation in March 2015. 14:39

The way P28 came back from Facility A would be best described as "feral". He didn't resemble our son that we knew. P28 had been a calm, jokey, friendly and

loving person prior to this. We couldn't cope at home with him like this, no matter how much we wanted to.

P28 had been assessed and a care package was promised to us, but it never came, despite our desperation. 14:40

I tried to manage physically, but I just couldn't, and neither could my wife, P28's mother We were faced with having no other choice and arranged with the social worker, H146, to get P28 transferred to MAH. It was 14:40 at our request in the end, but we felt we had no other choice. He was put into MAH because we were advised that it was the best thing for him.

The night we took him to MAH was the longest night of 14:40 our lives. He was only supposed to be there for six to eight weeks, but he ended up there for two years.

P28 was on the Cranfield Ward. It was classified as an assessment ward, but they took a long time assessing 14:40 him.

P28's room was very cell-like. The windows opened only a little bit for air, but you needed a key for that. It also had bars. The room didn't even have a 14:41 chair at the start. His precious music player was put into a locked cabinet. Everything was screwed to the floor.

He was put in MAH in his late 20s. It was the hardest thing we ever had to do to walk out of that place. We went as often as we could at the start, but we stopped going as often as it was destroying us.

When P28 went into MAH he was a normal, chubby adult. After six or seven months in MAH, his face became drawn and he was covered in bruises. There were many incidents during his time at MAH, and I have documented some of them in the file attached at R2. 14:41

I always reported the incidents to the nurse in charge. I can't remember their names, but they said this was because he was bumping into tables and bumping into other things, but there is only so long you can use those excuses. 14:42

Some of the pictures in the file at R2 show a grip on his arm. You can actually see the fingermarks. We reported many incidents, more than the ones in the file attached at R2. 14:42

Some of the nurses were very friendly. However, there was a particular nurse who was very dismissive of anything we said. 14:42

During the family liaison meetings we were in some instances shouted down and at one point P28's mother was told to "shut up".

We never got any reasonable explanation about his bruises, which is why we began to document things, especially the bruising on his wrist. I made such a scene about that. I demanded that the nurse in charge, 14:42
I can't recall her name, record it into the incident book. They said they couldn't find the incident book. I told them verbally because I thought that is how it needed to be done. I don't know if they ever did record it because they never informed me. 14:43

They said they would look into it but I never heard anything back. I am not aware of any investigation into the incident.

14:43

I spoke to the nurse in charge about it again and she said it was being dealt with. I spoke to our social worker, who was very dismissive of the whole thing.

There were other instances when P28 had black eyes. 14:43
We took photos of some of these and they are documented in the file attached at R2.

We asked the staff, I can't remember who, "What is going on?" The excuse that was given was that he would 14:43
walk into things or hit himself when he came out of the shower. The staff also said that P28 would hit himself with his toys.

There were a lot of injuries during P28's time in MAH. On one occasion, I think around two weeks before Christmas in 2018, we bought P28 some new clothes for Christmas, and P28's mother wanted to try them on P28 as he was back in yet another tracksuit. On changing P28 we noticed there were bruises on his legs and I spoke to the nurse in charge and we were promised an investigation.

A few days later when we called up, the answer we got back from the MAH staff was that he must have walked into things or "P28 did it to himself". They said that P28 had a tendency to hit himself.

P28 had a tendency to bite himself when he got agitated or upset. These bruises looked like welts. I was never informed about any formal investigation and I must have reported at least half a dozen incidents. Any time I asked for an update, I was told that I had to speak to my social worker.

I believe that once the..."

-- and it's a particular nurse who you describe with potentially identifying features, so I am not going to read those words out, P28's father -- but you:

"...believe that once that nurse came along P28 started getting thinner and more agitated.

After about nine months we just wanted him out of MAH. Before we knew it, it was a year and he had been in there. All this time, P28 just got thinner, thinner and thinner.

The staff's attitude stank. Their attitude was that they were going to hide in the back and talk and let all the patients run riot.

On more than one occasion when we went in we were told there was an incident on the ward and that we couldn't come in to see P28 I can't recall the dates or who the member of staff was on those occasions. We were told that we could go to see him at the visitors' room. However, it had no structure and there were none of P28's toys or cars. The room was devoid of all love.

The Minister from our church, Jordan, was refused access when he went to visit P28 even though he should have been allowed to visit under the Freedom of Religion Act. I do not know the date this happened or the staff member involved. Jordan was allowed to visit and we had told the MAH staff that.

There seemed to be a complete culture of out of sight, out of mind. At the start, things seemed to be okay as it was winter. By the time it came to summer and the doors were open things seemed happier and more relaxed,

but by the time it got to Christmas the staff didn't even have a tree up. There was no sign of Christmas, no warmth of home.

By the time of P28's first Christmas in MAH, he basically sat and rocked and was very agitated. If you approached him too quickly he jumped and instinctively his hands went up to protect himself. 14:46

My wife, P28's mother and I brought it up to the staff on duty. I can't recall who, but we never heard anything back. We mentioned it at a meeting with H146, P28's social worker. 14:46

When P28 was in MAH, we brought him a whole load of new clothes, but when we visited he was always wet and dirty. I can't recall specific dates. We had to get him changed. We had to hunt around to get a towel and got one from the shower room, even though P28 had an ensuite. 14:46 14:47

Whilst getting P28 changed we noticed that he had bruises all down his legs and back. I tried to find him some trousers. When I went into the cupboard it was full of rags, not his clothes. These were not the clothes that we had bought P28 We cried. 14:47

We were very upset about P28's clothes. Everything seemed to be sent to the laundry to be industrially

cleaned. That was the explanation we got. P28's mother and I wrote P28's name on everything and we had a laundry bag, we thought surely it would come back. However, a lot of it was not the right stuff. Even if it was P28's, it was shredded. 14:47

On one occasion, we had bought P28 some new trousers, which he only had for two weeks, and the knees were shredded and the backside was ripped out of them. Most of the time he was dressed in a tracksuit. They seemed 14:48 to think that every disabled man should be wearing a tracksuit.

All the nice things that we bought P28 were gone. All his cars and toys, too. P28's Barney toy, which 14:48 was so precious to him, was gone. We never got any explanation for this.

I bought some expensive Tonka trucks that were supposedly indestructible, and they disappeared. We 14:48 reported this to the nurse in charge, or the nurse who was on duty, but there was no explanation. I can't recall her name. She was a..."

-- and you describe her. 14:48

"She seemed to be just doing her job.

Shortly after this, we received the word the P28 was

getting the bungalow. There was a lot of work to do converting the bungalow into two separate accommodations for P28 and another resident. We just wanted P28 out of MAH. We couldn't bring him home and there was nothing we could do. We were very worried about his weight loss and we reported it to the nurse in charge and the doctor. I can't recall their names. They both said that P28 didn't eat much. However, the staff would bring out food, set it in front of him and walk away. For example, they would put a yogurt pot in front of P28 but P28 couldn't open the lid. His eyesight is poor and he has the mental age of 18 months. He couldn't open it and he needed assistance. 14:48 14:49

Sometimes P28's mother and I were there and fed him, but the rest of the time they just set it in front of him. This happened even though the staff were told that he needed assistance in feeding and we reported it to the nurse in charge. We were told that there were staff shortages due to government cutbacks. It was a cacophony of horrors. They would blame everything under the sun except the fact that they were not doing their jobs. 14:49 14:49

There were patients on the ward that were dangerous. They were bigger than me and I'm 6 foot tall. It was not the right environment and it was a completely inappropriate place to put P28

His new accommodation came about only by us digging our heels in. It was Positive Futures' accommodation and there was a transition period for P28 to move across to the new bungalow. 14:50

The Positive Futures staff were not happy with the fact that they couldn't take P28 out for the first six to eight weeks of the assessment. They couldn't take P28 anywhere. That's when we realised just how much 14:50 of a prison MAH had become. P28 had not done anything to warrant a sentence.

One of the Positive Futures' staff, Gordon, I can't recall his second name, wanted to take P28 out as 14:50 part of the transition assessment but was not allowed to.

On another occasion Gordon actually witnessed P28 being manhandled by MAH staff wrongly and that he 14:50 actually had to step in to help P28 He said that he reported it to his line manager. Positive Futures came to us and notified us about the incident.

Positive Futures told us that they observed the issue 14:51 of feeding - food being left out of reach. They also said they saw breaches of MAPA. They witnessed unsafe handling and rough handling. Anne Coffey is the director of Positive Futures and Simon Ward was the

other member of staff in charge. Gordon reported these incidents to us.

I don't know if there was an investigation in MAH in relation to these incidents. They were reported and the MAH social worker and P28's social worker were supposed to be involved in investigating these incidents. 14:51

In the final two to three months, the staff from Positive Futures were on the ward with P28 more often for his assessment. Once they were involved we noticed the bruising stopped. All along P28's mother and I believed it was neglect. 14:51

We started to notice a deterioration on the ward regarding staff levels around this time, which would have been from around October 2018 through to when he left in February 2019. 14:51

We noticed a lack of staff training and that there were a lot more agency workers and a lot of dinners untouched.

The biggest shock for me with P28 was the weight loss, the bruises, the marks and the bumps. Some could have been accidental, but some were obviously caused by someone. I took great exception to someone doing this to P28 and it was reported to the nurse in charge and 14:52

Clinical Director at family meetings. A couple of times we were told this was not the best place to discuss this. But if that is not the place, then where is?

14:52

There's another incident that I would like to mention in my statement which doesn't involve P28 One day, I was about to go to P28's room and I noticed three members of staff physically dragging someone to the bathroom. I don't know who he was, but he was a resident. That would have been around February 2018. There was no one around to report the incident to so I mentioned it to our social worker, H146, as I didn't want to be seen to be interfering and it didn't directly affect P28 It was always hanging over us that if we didn't play ball P28 could be sent home to us. We knew it was going to be hell and that we wouldn't have been able to cope mentally and physically.

14:52

14:53

14:53

P28 now lives with Positive Futures in the bungalow. He loves it and he has staff to look after him. It's a bungalow and it was a good opportunity. It was an organisation that we have experience with as P28's twin was under their care. It is only now when P28 is at Positive Futures that we are starting to feel slightly more relaxed. However, we think if the incidents ever happened again, how would we be able to cope? I know I wouldn't be able to.

14:53

The professional staff at MAH talked to us like we were stupid. They had a bad attitude and treated us like some lower form of life. They were dismissive and at times damn rude. If P28 had to go through that again, I think he wouldn't make it; I know I wouldn't be able to handle it. 14:53

I feel angry, bitter and frustrated because our son was supposed to be there at MAH in a place of safety, but it is obvious that he wasn't. What makes it a hundred times worse is that I blame myself for putting him in there. If Social Services had done their job right to start with, or given us the help that we needed, maybe P28 would not have had to go to MAH. 14:54 14:54

We didn't receive any notification about the police investigation or arrest to begin with. We found out from the TV that eight staff members had been arrested and charged. Now we are part of the loop and it's easier we are included. 14:54

The police came to our house with another person and told us that there is CCTV evidence showing that there are at least 17 incidents involving P28 being mistreated. Every week there is a phone call telling us about new arrests and updates. The police have not divulged any specifics of the incidents, no names or dates. This is nearly worse as your mind plays tricks 14:54

on you. The police are very good at keeping us up to date. It makes things a lot easier and it is appreciated.

I want to say that P28's mother and I feel failed. I feel that we have been let down and our son has been let down by what we consider to be caring professionals. This has tainted the way we look at any professional now. We have become very insular as a family. Friends become very scarce if you try to tell them how you feel about what happened. We have no friends as such any more. 14:55 14:55

There has been very little support or help for us mentally. P28 has received very little help too. 14:55

P28's mother my wife, has great difficulty bonding with P28 now because of all the stress. Every time I see P28 I feel guilty because I took him there to MAH."

14:55

I'm not going to read the next section, P28's father which is just about giving evidence. And if you turn over to Section 5, then you will see the declaration of truth, and your signature is at the bottom there. Can you see that? And you have signed that on 14th July 2022. 14:56

A. Yes.

183 Q. So having heard me read that, P28's father are you happy that your statement is accurate?

A. Yes.

184 Q. And do you want to adopt that as the basis of your evidence before the Inquiry?
A. I do, yes.
185 Q. And are you okay to continue? I have a few questions for you, not too many, are you okay to continue with those now or would you like a break? 14:56
A. I'll continue.
186 Q. Okay. So, P28's father there are two exhibits to your statements. One is a photograph of P28 and we've got a better copy of that - I'll come to that in a second. The second is a mixture of photographs and text, which I think you referred to as a file, that's something both you and P28's mother compiled, is that right? 14:56
A. That's correct, yes.
187 Q. And that was something you compiled to help you prepare to make your statement to the Inquiry, isn't that right? 14:56
A. That is right.
188 Q. And, in fact, the information in that, and the photographs in that, are now reproduced in your Inquiry statements, in either yours or P28's mother's, isn't that right? 14:57
A. That's correct.
189 Q. So I'm not going to read that all out because it has already been read as either part of your statement or P28's mother's statement. Are you happy enough with that? 14:57
A. I am happy enough.
190 Q. And the same goes for the photos that are in that. You will have seen earlier they were reproduced in P28's mother's

statement and I took P28's mother through those. There is one photo that I wanted to bring up, and that is R1, but the better copy appears at 3. So it should be -- it should come up on your screen, P28's father And, in fact, there's an even better copy in hard copy in front of you. So these are the same photographs as P28's mother's, number 3?

A. That's one of P28 and myself at home.

191 Q. Yes. When that was taken? 14:57

A. That was taken, ehm, about a week or so after we got him home from Facility A. 14:58

192 Q. Right. So that was in 2017, then, February -- around about January or February 2017?

A. I think so, yes.

193 Q. And you have nice matching shirts on there? 14:58

A. We do.

194 Q. And another photo that you have since provided is Photo C, which is at the back of that bundle, that I know you also wanted to show the Panel, and I think it can again come up on the screen. Have you got that? That's you and P28 I think dressed as Santa Claus, is that right? 14:58

A. That's it. P28 was doing his best for a Santa impersonation.

195 Q. When was that taken? 14:58

A. That was taken not last Christmas but the Christmas before. That would have been Christmas '20.

196 Q. 2020?

A. Yeah.

197 Q. So was that at your house or his new --
A. That was in his new bungalow.
198 Q. And you can see the Christmas tree behind you and you've also got a fine Father Christmas jumper on there? 14:59
A. That's right, yeah.
199 Q. P28's father I wanted to ask you about something in your statement that you particularly referred to a few times, and that was the attitude of staff in Muckamore. You referred to that throughout your statement, and you 14:59 said on one occasion that you felt the attitude of staff stank. Can you explain what you mean by that to the Inquiry?
A. Most of the staff when we were at - up and down to Muckamore, and I will say when I say "most of the 14:59 staff", I do mean the majority of staff, their attitude was out of sight/out of mind. They had the tendency just to let the inmates run riot, and they preferred to huddle in groups and talk in the back room and stuff like that. And any time you asked them for something 15:00 it was almost like you were interrupting them. A couple of times, like when I would have brought P28's dinner out, they wouldn't even have cutlery. So how did they expect him to eat?
200 Q. And was that something that you observed on the ward? 15:00
A. That was on the ward, yes.
201 Q. And so whenever you described the other patients running around, whereabouts on the ward did that happen?

A. When you go through into Cranfield there's an open area just as you go into the ward, where they have dining room tables situated. P28 at times, we would find him sat at a table there and there would be food in front of him, including things like yogurt with a lid on, and P28's eyesight is very poor so he wouldn't be able to find anything to open the yogurt with anyway, or he doesn't have the dexterity to do it and, yet, they still repeatedly kept leaving his food there. And more than once they said "oh, he is not hungry". How they knew he wasn't hungry when they didn't bother trying to feed him is beyond me. 15:01 15:01

202 Q. And where were the staff on those occasions?

A. Generally had two or three staff in behind the counter. One in the kitchen area and the rest of them would have been in a back room. 15:01

203 Q. And you describe them as hiding?

A. They used to sort of --

204 Q. Why did you get that impression?

A. They would put the patients on one side of a counter and they would be the other side of the counter. And, as I said, in one of the points I talk about some of the residents being bigger than myself. There were some patients who were in Cranfield who obviously had mental problems, mental-health problems, and, as such, I mean I was frightened of them and I'm 6 foot. I can imagine some of the staff were probably in the same way, and I felt at times that they used the barrier as a way to distance themselves from them. But it also -- 15:01 15:02

it always felt like the inmates were running the asylum.

205 Q. And you also commented in your statement about staffing levels, and I think you particularly identified a period between October '18 and February '19 as a time when you noticed a particular deterioration in the staff levels. How was that apparent to you? 15:02

A. Well, for argument's sake, a normal staffing level any time we were there would be between five and six members of staff. Sometimes when we were on the ward I observed only three members of staff to cover the whole floor, and it seemed to coincide -- now we only know this with hindsight -- with staff being suspended for the purpose of investigation, and we only know this now because of the Inquiry, but there were staff that were disappearing off the ward and they weren't replaced, or if they were replaced, they'd be replaced with an agency staff member who hadn't a clue what was going on. 15:03 15:03

206 Q. And what sort of impact do you think that staff attitude and staffing levels had on P28's care at Muckamore? 15:03

A. We observed a lot more bruising, and a lot more times when P28 was stinking. He was unkempt. He was dirty. One day we went in, and it was around half eleven, quarter to twelve, and he was still in his bed and there was a tide mark in his bed from -- I mean P28 had a tide mark from his neck to his ankles where he had obviously soiled himself and weed, and he was 15:04

still lying in that at half eleven, and it shouldn't have been allowed.

207 Q. Was any explanation given to you as to why he was in that state?

A. Oh, I challenged the nursing staff why P28 was still in bed at this time and they said "oh, he was tired". 15:04

208 Q. Was any --

A. He might have been tired, but it wouldn't have hurt them to change him.

209 Q. Did they explain why he hadn't been changed? 15:04

A. Well the excuse that we got was "Oh, we were busy with other patients". There was always an excuse. There was never -- nobody was ever honest with us.

210 Q. You also, in your statement, described observing an incident in respect of another patient, not P28 So you heard me read that out. That's the incident you describe at paragraph 38 of your statement. 15:05

A. Yeah.

211 Q. And I think you say it would have been in and around February 2018. Can you describe for the Panel what you saw? 15:05

A. P28's room at that time was on the left-hand side of the building. So when you came through the main doors, you had the reception desk on your left -- sorry, P28's room was over on the right, second door on the right. I had went in to get something and I was coming out because I couldn't find it and I was looking for a member of staff, and that meant I was looking directly left up the corridor, and as I looked up the corridor 15:05

there was three members of staff - two men and a woman, and they were dragging, physically dragging a patient towards what I knew were the shower rooms, because I had been there before and got a towel before now, and I mean they weren't being too gentle about it, they were physically dragging this person. 15:06

212 Q. Do you know if the patient was male or female?

A. The patient was a male. Approximately mid-20s, I would have said. He was quite stocky. He was about my build. 15:06

213 Q. You said you didn't raise that with anybody on the ward, isn't that right, but you raised it with the social worker?

A. I raised it with our social worker.

214 Q. When did you do that? 15:06

A. Literally when I went home.

215 Q. And what response did you get to that?

A. She would investigate it and get back to us.

216 Q. Were you ever contacted as part of any investigation?

A. No, in fact two or three days later I phoned up to actually find out if anything was being done about it, and she said that they were dealing with it, and that was the last I've heard. 15:06

217 Q. I want now to ask you about the transition that P28 had from Muckamore to his new home, and you describe a bit about that in the statement. And one of the things you said was that one of the staff in Positive Futures wanted to take P28 out as part of that transition, but he wasn't allowed. Were you given any explanation 15:07

as to why that wasn't allowed?

A. We were told the reason why was because he was sectioned under the Mental Health Act and he wasn't allowed to leave the building.

218 Q. And who was it - without telling any names, can you remember who in Muckamore, what their role was? 15:07

A. She was the charge nurse.

219 Q. The charge nurse told you that. Okay. You also referred to Positive Futures, an incident that Positive Futures themselves notified you about, and that was 15:08 something that they observed in interactions between staff and P28 Can you recall when that took place?

A. It roughly took place around about -- well, between January and February of 2018/'19.

220 Q. What did they tell you about it? 15:08

A. They said that they had went in and -- well Gordon, staff member, said that he had went in and he found that there was a couple of staff members physically trying to drag P28 to change him. And he wasn't happy with the way they were physically manhandling him 15:08 and actually stepped in and said that he would carry on and do P28 because Gordon was like myself, P28 never, ever acted up whenever I changed him, and he couldn't understand why it took two of these guys to try and physically change P28 But they literally, 15:09 they had P28's arm and they had grabbed it that tight, I actually took photographs of the grab mark.

221 Q. When Gordon told you about that incident, was that the first time that you had heard about it?

A. That was the first time I had heard about that one.
222 Q. And did you ever discuss that particular one with any staff at Muckamore?
A. I spoke to the nurse in charge and I spoke to the Clinical Director's secretary, and to the Clinical Director, because we had a meeting later that day - one of these assessment meetings - and I brought it up there and, once again, I was told it wasn't the place, you know, not the place to bring it up, and... 15:09
223 Q. Were you told what was the place to bring it up? 15:10
A. No. That was the problem. I mean I reported it in the best way I can. I mean, the problem is, I just felt like we were banging our head against a brick wall because you can't -- you say something to someone and it just goes down the ether. Nobody ever seems to do anything about it. 15:10
224 Q. Were you aware of any investigation into that particular incident?
A. I know that our social worker, H146, she was told about it, as well as the family liaison officer up at Muckamore, and I was told that they would investigate the issue and get back to me. Nothing was ever done about it. 15:10
225 Q. So you don't know what the outcome of that investigation was? 15:11
A. No.
226 Q. One of the other things you describe, P28's father is a lack of support for, not just P28 but for you and P28's mother and I wanted to ask you a bit about that. What -- what

type of measures do you think that Muckamore could have put in place that would have helped you and P28's mother feel supported?

A. We could have -- they could have made the place feel a lot more homely, to start with. I mean, P28's room literally was a cell. I don't know if anybody in this room has actually been in a police cell, but I have, unfortunately, been in one or two -- not as an inmate, I might add -- in my connection with my church. P28's -- everything in P28's room was physically bolted down. There was bars on his windows. There was a key to try and open the window. You couldn't even -- there was no curtains because it was actually wooden shutters, was for control with a key, and, you know, there was no pictures. No nothing. It was just a room with a bed that was screwed to the floor, a plastic mattress, an ensuite, and that was the room. Eventually we managed to get a chair for it. But also, I mean, there was no -- there was never any offering of counselling or help with the transition, because both P28's mother and I suffered quite a lot from guilt with leaving P28 there, especially the amount of incidents that we saw when P28 was being hurt, and they have been reported, and I must have reported at least more than half a dozen, a dozen times, incidents where P28 had been hurt, and it was only because I took my phone with me and I took photographs. And the only reason why I took photographs was to safeguard P28's mother and I, because I was waiting for someone to

15:11 15:12 15:12 15:12 15:13

accuse us of hurting our son.

227 Q. P28's mother has taken the Panel through the photographs that you have provided to the Inquiry, and she and you have both told the Inquiry about how you raised some incidences that you observed with Muckamore. Have you ever shown anybody connected with Muckamore the photos that you have shown the Inquiry? 15:13

A. No.

228 Q. Okay. What about P28's new home. How is he doing there? 15:13

A. P28 is doing very well. He's happy. He's put the weight back on, thankfully, and we -- he is finally back to his singing and talking a wee bit, which we hadn't heard for well over four years.

229 Q. What type of facility is that? Is it nursing or support living? 15:14

A. It's a residential home with -- well there's three members of staff to look after P28 and there's three members of staff look after another resident. So the staffing levels are quite high in it. It's 24-hour care. He has his own living room, bedroom, kitchen and that, and they're very, very good to him. Take him out a lot in the car and, you know, they fill his days with trips and eating. 15:14

230 Q. Is he still listening to Shania Twain? 15:14

A. He's still listening to Shania Twain. Unfortunately!

231 Q. P28's father I don't have any other questions for you because I don't want to ask you to repeat matters that P28's mother has. But is there any other matter that you would

particularly like to raise with the Inquiry or tell the Inquiry about?

A. It's an answer to a question that was raised by -- sorry, I don't know your name.

DR. MAXWELL: That's okay. 15:15

232 Q. MS. KILEY: Dr. Maxwell.

A. -- one of the Panel members, about why P28 went in to Muckamore and how he went in. Whenever we got P28 from Facility A, when we were called to Facility A -- now, if you can imagine P28 is -- well he is 15:15 just slightly shorter than I am, with -- well, he's got my build now, but he didn't have then, but he was a normal build -- a giant toddler is the only way to describe him, because he is 18 months mental age. He would quite happily sit and black with his Duplo or 15:16 play with his bricks. When we were called to Facility A on the night before Muckamore, or two weeks before Muckamore, and when we got down there and I found a policeman kneeling on P28's back trying to handcuff him, face down, this kid was screaming the place down 15:16 trying to get up. Didn't understand what was going on. That's why we took P28 home. We weren't going to leave P28 like that. But taking P28 home, we were also faced with the fact that the social worker and the police were ready to section P28 that night 15:16 and I said, no, I was taking P28 home. So we took P28 home, managed him for two weeks with P28's mother and fought with the Social Services to try and get a care package. But after the two weeks, it was obvious that

we weren't going to cope. P28 had become completely feral. I mean there's no other word to describe it. He would attack anyone or anything that came within arm's reach. He would lash out, he would bite, and he just -- I mean he was in full fight or flight mode, and 15:17
that's the reason why eventually we ended up having to get him committed into Muckamore. Whenever we took him up to Muckamore it was on the advisement of the social worker, and it was her that arranged the original sectioning. So that's the reason why P28 was taken 15:17
in. But we were faced with that situation because Social Services didn't do their damn job, and we put him into Muckamore thinking that we were putting our son in a place which was actually going to help him, and within six months of P28 going into Muckamore, 15:17
he was black and blue. And I don't see any justice in that.

MS. KILEY: Okay, P28's father Thank you. I have no other questions, but the Panel may have some more for you.

15:18

END OF EXAMINATION BY MS. KILEY

P28'S FATHER, WAS QUESTIONED BY THE INQUIRY PANEL AS FOLLOWS:

15:18

CHAIRPERSON: Could I just ask this about the sort of care package that you were hoping to get and what might have helped you? What was the level of care package that you would have hoped for?

A. The care package that we were promised was at least three members of staff to help us with changing P28 settling him down and, you know, helping to get him back so that we could get him back into the day centre, because once he was at the day centre -- disabled kids, or young people especially, they like routine, and half the problems with -P28 hadn't any routine, so that's why he was getting agitated. Because in his mind he couldn't understand why he wasn't at school, why he wasn't doing the things he wanted to do. And that's what we were promised; we were promised help, especially at night, because while P28 was home for two weeks I had approximately two hours sleep in two weeks. 15:18 15:19

233 Q. And that would have been three members of staff for how many hours a day? 15:19

A. That would have been at least 14 hours a day. Well, we had two during the day and one sleepover at night.

CHAIRPERSON: Right. Okay. Sorry, Prof. Murphy.

PROF. MURPHY: Thank you for explaining about P28's time in Muckamore. I wondered if I could ask you about what you understood about his behaviour in Muckamore, because usually when people are sectioned under the Mental Health Act, their behaviour is very disturbed, and what you describe just before he went in does sound disturbed. But after that, did you think he was showing disturbed behaviour? Did anyone ever say to you he has attacked members of staff, he has been restrained, or anything like that? 15:19 15:20

A. After P28 was put into Muckamore, we never got one member of staff came to us and said that P28 had attacked them. And I think actually at the start Muckamore was very therapeutic because it was a controlled structure at the start. When their staffing levels were fine, there wasn't a problem, but it's only whenever they -- whenever P28 went in there, it was in February. Come the springtime, the doors were open outside, you know, they were allowed to wander into the garden, and there was a bit more freedom, and P28 was happy with that. Once the winter started coming in, that's when they closing in and there wasn't the staffing levels. 15:20 15:21

234 Q. Did he get to go to daycare in Muckamore? Because there was daycare there. 15:21

A. Only in the last six months of his time there. That would have been his final year, 2019 -- 2019 -- well, end of 2018/2019, he went to daycare in Muckamore one day a week.

235 Q. One day a week? 15:21

A. That's all they would allow him.

236 Q. And they never explained to you why he didn't get that before? Because he was obviously a young man who had enjoyed daycare previously?

A. Their reason before that was that he wasn't suitable for a placement in it. And I don't know, maybe they had their own criteria, but that was what we were told. 15:21

PROF. MURPHY: Okay. Thank you very much.

CHAIRPERSON: Sorry, I am just following the same line.

He was obviously detained under the Mental Health Act. Then there came a time when you were told he was no longer detained under the Mental Health Act and he was there voluntarily. Can you remember how far through his period of Muckamore that was? 15:22

A. Well, I think by the time we got to April -- from February to April, end of April --

237 Q. April '18?

A. Yes.

238 Q. Yes. 15:22

A. He was no longer sectioned then.

239 Q. No.

A. And he was there classified as a voluntary resident. By the time we got to September again of that year, they had re-admitted him as -- under the Mental Health 15:23 Act, and they seemed to have a policy of bouncing between one and the other, because they were almost aware of the fact that there was nowhere they could send them.

240 Q. No. And that second admission under the Mental Health 15:23 Act, were you given an explanation as to what had occurred to trigger that?

A. No. We weren't. I was just -- we were in -- I was in the family liaison meeting and they just brought it up in front of us and just said "and we're continuing to 15:23 keep P28 under the Mental Health Act".

MS. KILEY: Chair, just on that.

CHAIRPERSON: Yes.

MS. KILEY: You will recall that P28's mother also mentioned

those times and the letters in April and September, and I think she can make the letters available to the Inquiry.

CHAIRPERSON: That would be helpful.

MS. KILEY: So we can pursue that. 15:23

CHAIRPERSON: That would be helpful. And it's something we're going to want to follow up later with the Trust. Yeah.

END OF QUESTIONING BY THE INQUIRY PANEL 15:23

MS. KILEY: Yeah. There's nothing further.

CHAIRPERSON: Is there anything else you want to say to us?

A. The only thing I want to say, to reiterate what my wife said is that whether it be P28 or any other patient in Muckamore, I felt that the staff that worked there were jaded and didn't really care for their job, and I think that's reflected in how they treated some of the patients. 15:24 15:24

CHAIRPERSON: Yes. Can I just thank you on behalf of the Inquiry. I know how difficult it has been for you and your wife to come and give evidence today, and so we are very grateful for you making such a huge effort to come along and tell us all about P28 and it's been very important evidence. So thank you very much indeed. 15:24

A. Thank you for allowing us the opportunity.

CHAIRPERSON: Thank you.

THE WITNESS THEN WITHDREW

CHAIRPERSON: I think that completes our evidence for today.

MS. KILEY: It does.

CHAIRPERSON: Can I just mention publicly that I understand that it is very likely in relation to the witness tomorrow morning that a full restriction order will be applied for, and that is effectively under the MoU that we have. So it is likely that Hearing Room B will have to be closed. Obviously I would need to hear the application tomorrow, but it's just to warn parties who may be interested that there may have to be a full restriction order. And tomorrow afternoon we will not be sitting, for the reasons that we indicated earlier.

Can I thank everybody very much for today and we will see you tomorrow morning at 10:00 o'clock.

MS. KILEY: Thank you, Chair.

THE INQUIRY WAS THEN ADJOURNED TO THURSDAY, 29TH SEPTEMBER 2022 AT 10:00 A.M.