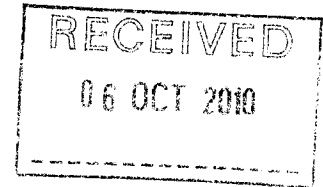


WITNESS STATEMENT TO THE PUBLIC INQUIRY INTO THE OUTBREAK OF  
CLOSTRIDIUM DIFFICILE IN NORTHERN TRUST HOSPITALS

WITNESS NAMES: JOHN THOMPSON



STATEMENT OF EVIDENCE

I, John Thompson, say as follows:

1. My name is John Thompson and I live at an address which known to inquiry team. I am employed as a process labourer.
2. I am the son of Mrs Pearl Thompson who died on the 8<sup>th</sup> of November 2008 at Whiteabbey Hospital.

Pre-existing medical history

3. My mother was in and out of hospital on numerous occasions during a period of about five years before she died. I think that she must have been in Antrim Area Hospital at least twelve times and she was also in Whiteabbey Hospital at least twelve times during that period.

She suffered from angina, urinary tract infection (which caused hallucinations), a bacterial/fungal infection in her leg (known as EBSL), cellulitus, high blood pressure, diabetes, fluid on the lungs, shingles and she also broke her foot.

Home

4. She lived with my father in Greenisland. He died on the 13<sup>th</sup> of July 2006 and after his death she continued to live on her own at home but with more support from the family.

### Father

5. My father suffered with diabetes. He was blind and could hardly walk. He also had MRSA. He did not like hospitals but just before he died he was in Antrim Area Hospital, Abbeyland Nursing Home and Whiteabbey Hospital.

### Mother

6. After his death my mother continued to live in the house on her own. I only lived about two or three hundred yards away from her home and I would have called with her four or five times a day. My family looked after all her needs including her shopping, cooking and washing. My son also stayed in the house with her for several weeks after my father died.

### Operation

7. My mother was allergic to penicillin and so there was a problem with antibiotics.

She had to have an operation on her legs due to fluid retention. One of the legs became infected and it took her a long time to heal.

### Age

8. My mother was 65 years of age when she died on the 8<sup>th</sup> of November 2008.

### Wards

9. She was in virtually in every ward in Antrim Area Hospital including the surgical ward, A1, A2, C5 and others.

She was also in various wards in Whiteabbey Hospital.

10. At the time of her operation on her leg, this took place at Antrim Area Hospital but afterwards she was transferred to Whiteabbey Hospital for rehabilitation. In all she would have been in hospital for about two months on that occasion.
11. I am not sure of the dates that she was in hospital but on each occasion it would have been for weeks rather than days. On most of the occasions she was admitted because of fluid retention on her lungs and legs.
12. At the start of her admissions to hospital she would have been in an open ward but when the hospital discovered that she had MRSA she was then put into an isolation room. On most of her admissions she would have been in an isolation room.

#### Condition

13. Towards the end of her life she was becoming rather immobile and so she had to use a wheelchair. She also needed help going to and from the toilet.

#### Transfers

14. Whiteabbey was our local hospital and so it was much easier for the family to visit her there. The doctors and nurses would have discussed this with the family and they were very accommodating. She was transferred from Antrim to Whiteabbey during the Christmas period in order to accommodate the family with regard to the visits and this was much appreciated.

#### Visits

15. I personally visited my mother four or five times a day. The staff got to know me and let me call in to see her for ten minutes. They were all very accommodating.

Other members of my immediate family would call during regular visiting times.

My brother and two sisters would also have visited her while she was in hospital.

### C Difficile

16. I had never heard of this before. It was only when we started to enquire about my mother's health in or around late September 2008 in Antrim that one of the nurses there mentioned this word to us. I would have appreciated a much more detailed exploration at this time. A friend then looked it up on the internet and so that is where we got most of our information from.

We were told about eleven months before she died that she had C Difficile.

17. Although we had meetings with the doctors and nurses they discussed her other medical problems but C Difficile was not discussed with us as a major problem. They just said that it was a bug. They were more worried about her heart and her fluid retention. I do not recall a doctor ever talking to me about C Difficile.
18. My mother had been in the intensive care in Antrim Area Hospital on at least two occasions.
19. I never received any written information about C Difficile but I think that there might have been some leaflets in the hospital about it. I also noticed a notice on the doorway. I think it was stating that there was C Difficile in the hospital and that it was important to keep the wards clean and tidy.
20. It also mentioned personal hygiene and advised you to wash your hands and use the gels. We were all told that if any children had problems with their immune system or were suffering from vomiting or diarrhoea that we should keep them away from the hospital.

21. It was never explained why my mother was in isolation but we assumed that it was because of her health problems.
22. We were more concerned with heart problems and the fluid retention than we were about the C Difficile. We just thought that it was a bug and that you could catch this anywhere.
23. We knew that she was being tested for C Difficile but we were not told or kept informed about the results.
24. We were not really concerned until they started writing about the outbreak in the papers and it was also on television. Even then the hospital did not really discuss my mother's problems with the family and all we were told was to wash our hands and keep the children away.
25. We did worry about her but we put our trust in the care that she was receiving from the hospital. We now feel that my mother was denied the care she should have received.
26. My mother never complained about anything and all she told us was that she was having bad diarrhoea.

#### Care at Antrim Area Hospital

27. All the other nurses and other staff in both hospitals were very pleasant and we did not have any problems with any of them.

They treated her the best they could and our only problem would have been with the lack of communication or information that we received. We would like to have known more about her health problems and what was going on.

28. She was getting her medication and her insulin and temperature were always checked. My only concern was that they were giving her a sleeping tablet and

I thought that this was unnecessary as my mother was a good sleeper, so I spoke to the staff and they withdrew the tablet. This was the only time that I queried her medication.

29. The staff always did their best for my mother but perhaps there was not enough staff on duty. They were always busy and having to answer the call bells. I would like to have seen more staff on the wards and then the patients could have been given more personal attention as sometimes there was a delay in getting a nurse to deal with a particular situation. I would like to have seen them talking to the patients more and giving them more personal attention. They should also have been given more time to speak to the families.
30. The nurses were however very nice, pleasant and attentive but there were not enough of them. The doctors were also very nice but you had to make an appointment to see them. I rarely seen them.

#### Care in Whiteabbey Hospital

31. They were exactly the same as in Antrim Area Hospital in that the nurses were all very nice and pleasant. They all did their best but once again they needed more staff on the wards to deal with the patients especially when they all needed help with washing and going to the toilet.
32. The nurses were all very caring and I will always remember that one of them shed a tear with me after my mother died.
33. They also called her by her Christian name and gave her personal attention which I was very happy about.
34. My mother was very happy with the attention that she received and even left them a box of chocolates when she was being discharged as a token of her thanks for the way that she had been treated.

## Cleanliness at Antrim Area Hospital and Whiteabbey Hospital

35. I rarely saw any actual cleaning being done but I do remember on one occasion being surprised by the way in which an empty bed was being cleaned as they were just using ordinary wipes to clean it down. Looking back now, knowing that C Difficile was present, I would have expected much more intensive cleaning.
36. I also noticed that some of the bins in the toilets had not been emptied and were overflowing with used paper hand towels. Some of the sinks did not look particularly clean. I also noticed visitors using the patients' toilets.
37. My mother also pointed out to me that there were drops of blood on one of the curtains and I also noticed some drops of blood on the floor.
38. My family always washed their hands and used the gel dispensers but I did notice that on occasions some of them were empty. I also noticed that not all of the visitors were using the gel dispensers. I was never told which gels I was supposed to use. I now know that alcohol gels are ineffective against C Difficile.
39. My mother was always washed but we had to brush her hair. I also took her out of the hospital on occasions so that she could have her hair washed and set.
40. I cannot remember whether she was ever given a bath or shower but I do remember that her hands were always dry and I had to give her some cream for them.
41. The bed linens were clean but on several occasions I saw them cleaning and changing a bed for the next patient and I did not think that the bed was being properly cleaned. It was just being wiped down rather than properly washed. They did not clean the headboard, tailboard or underneath the frame.

42. I was never given any advice regarding the washing of the laundry but I already knew to wash them separately. Sometimes they were left in a linen bag and sometimes at the bottom of her locker. It was the same in both hospitals. I was never given any biodegradable bags.
43. When she first went into hospital she was able to get herself to and from the toilets but towards the end and after being in intensive care she required assistance. Towards the end of her life she also had to use a commode.
44. I do not know when she had C Difficile but I do know that she soiled herself on occasions and had to be changed.
45. The family never wore gloves, aprons or other protective clothing when they were visiting. We were never told whether we were to do this or not.
46. The nurses wore them but not all the time.
47. I do not think that there are enough chairs for visitors and some of the visitors would have to stand or sit on the bed. The policy of two visitors at any one time is not adhered to and I would sometimes see six visitors around a bed.
48. Both hospitals were the same in my eyes and neither one was better or worse than the other.
49. I thought that both hospitals were rather untidy with clothes and other items left lying on chairs rather than being put away in the locker.

#### Communication

50. I was never given any leaflets or other written information by the hospital about C Difficile although there were leaflets at the doorway as you come into the hospital. This contained some information about basic hygiene and to make sure that you washed your hands.

51. No one told us that we should not sit on the bed and as far as I am aware there were no checks on what the visitors were doing.
52. My main complaint would have been the lack of advice or communication from the hospital. We would have liked more information and on a regular basis. We would have liked doctors and nurses to have spoken to us more often and told us how my mother was doing, what was wrong with her and the treatment that she was getting.
53. I would certainly like to have been told more about C Difficile. I would like to have known that they were sending samples to the lab and the results of obtained. The staff were very good but we would have liked more information about the infection.
54. I would have liked more information about her condition, her diagnosis and the prognosis. I would also have liked to have been advised about what precautions the family should take because of the infection.

#### Death Certificate

55. The two causes of death on my mother's death certificate are congestive cardiac failure and aschaemic heart disease but if C Difficile played a part in her death then I think this should also have been mentioned on the death certificate. I think that C Difficile did play a part and that it should have been included as a cause of death.

#### Other concerns

During my mother's visits to hospital, I witnessed patients wandering from ward to ward. I always felt this was unhygienic especially when hospitals are struggling to control infections. I had hoped this would have stopped following the outbreak, however when I visited my wife recently, I witnessed another man walking about from ward to ward. This was in July 2010. I am concerned that standards appear not to have improved in this respect.

Food

56. I have no issue with the food. It was just hospital food and we also use to bring her up her favourite food from home.

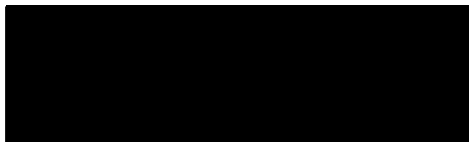
Document

57. I am attaching a three page document which I produced myself and which I have marked JT1.

I declare that this statement is true to the best of my knowledge and belief.

Dated 30 9.10

Signed



John Thompson

My Mother, Mrs Pearl Thompson, had been ill for several years and had been in regular attendance at several hospitals, in particular Whiteabbey and Antrim Area.

During my mother's illness I tended to her stays at these hospitals and looked after her personal affairs, we had lost my father to M.R.S.A./Heart failure on the 13/7/06.

While in Antrim Hospital my mother had been in intensive care on two occasions obviously this was very worrying and was made worse by the lack of information coming from the Doctors. I would have liked to have had the opportunity to have spoken to someone in authority with regard to hygiene issues which I had noticed during my visits. At the end of this statement I have highlighted these issues.

On her return home from hospitalisation it was apparent to my wife that my mother would be unable to look after herself properly. I then re-organised our own daily family schedule to accommodate looking after and caring for my mother.

As in most cases when there is a serious illness in a family it seems to overshadow normal family life. My mother who looked forward to and enjoyed the visits of her grand children and accommodated them regularly with a 'sleep over' would no longer be able to do this. In particular, my own son Samuel who called with his Nanny on a daily basis and stayed some week-ends could not understand why 'Nanny' could no longer look after him. To this day he still recalls her fondly but still does not understand why she died. His logic is, hospitals make you better, and why did Nanny when she was in hospital? I know this remark is purely down to childish innocence but when you think about it, you don't go in to hospital and think there's a possibility of picking up and infection that can kill you.

Our family were aware that my mother had contracted M.R.S.A. but it was by accident that we found out that she had been infected by C Diff also; this was through a casual conversation with a nurse at Antrim hospital. I did not know what C Diff was. No one explained the problems which this 'bug' is capable of. My family was concerned by this development and sought an explanation, but we were left in the dark'.

We felt we should be doing something to help my mother so we started to ask questions to find out more about her condition and perhaps we could have helped, but we received the same reply "you'll have to see the doctor". He wasn't available.

One of the lasting memories of my mother is seeing her coming out of 'Intensive Care' and thinking she looked so helpless and not being able to help her. Not knowing what this 'bug' was, not knowing where to turn to for advice, and feeling totally useless.

My mother's condition varied, one day we would see an improvement, the next day she would have deteriorated and this scenario continued until my mother passed away and I still wonder if something could have been done to alleviate my mother's illness.

I was with my Mother in her final moments, I held her hand as she slipped away in Whiteabbey Hospital on 8.11.2008

For my own peace of mind I have enquired about this C Diff and other 'super bugs' and while admitting that I don't come from a medical background I have looked at the issues which surround these bugs and one thing keeps reappearing hygiene or the lack of it.

Below I have listed a number of observations which I noticed on my visits to the Whiteabbey/Antrim Hospital which I consider could be rectified by paying more attention to detail.

- 1 Hygiene in Wards
- 2 Toilets – spillages in toilets, overfilled waste bins.
- 3 Staff attending patient to patient without washing hands.
- 4 Staff not wearing protective clothing- aprons
- 5 Hand sanitising dispensers empty – on occasions.
- 6 Patients used clothing not separated from new laundry just put in locker.
- 7 Vacated beds not thoroughly sanitised – just a quick rub with a cloth
- 8 Unidentified spillages both wet and dry on floors.

I would suggest the following:

Ward furniture to be cleaned on scheduled routines and colour coded (all contents of Wards to be included)

Suggestion forms.

Patients with lower immune systems to be isolated from visitors

Restrict the number of visitors per patient – strictly – wear appropriate gowns if necessary

Patients to remain in their own Wards – no roaming about – to avoid transferring germs

Nurse to be permitted to tell families of patient's full condition, if in possession of information.

Easier access to information.

More assistance to patients recovering from intensive care –

**BRING BACK MATRONS** These current day problems were far less prevalent and the hospitals seemed to run better when there were matrons. This is probably the easiest step to take towards bringing normality back to hospitals. Easily funded – how many Matrons could you hire if we got rid of non-producing workers.

**John Thompson**