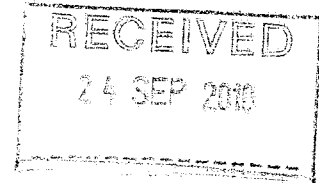


**WITNESS STATEMENT TO THE PUBLIC INQUIRY INTO THE OUTBREAK OF
CLOSTRIDIUM DIFFICILE IN NORTHERN TRUST HOSPITALS**

WITNESS NAME: MABEL ROBIN

STATEMENT OF EVIDENCE



I, Mabel Robin, say as follows:

1. My name is Mabel Robin and I live at an address which is known to Inquiry Team.

I am the sister of the late Anne Margaret Robin who died on the 30th of November 2007 at Whiteabbey Hospital aged 62.

2. I work as a review and assessment officer for a domiciliary care company in Liverpool and that entails assessing and reviewing clients who receive care in the community. I also have a nursing background.
3. My sister had a support worker whose name I have made known to the Inquiry who had worked with and supported her for many years before she died.

Sister's pre-existing medical history

4. Anne was born deaf and had a mild learning disability. She was very independent but she did need support. She needed someone to look after her finances and attend to the daily living tasks.
5. She lived Ellis Court in Carrickfergus but also went to Jordanstown workshop on the train every day. This is a workshop for people with disabilities where they would give her a job to do every day which was suited to her needs.

6. In or about May 2007 she started to complain of having headaches. She had been to see her general practitioner and then one day she was physically sick and so her doctor sent her to hospital to be checked out. Then in June 2007 they discovered that she had a massive brain tumour.

Admission to Hospital

7. She was admitted to Antrim Area Hospital and Whiteabbey Hospital on a number of occasions between June 2007 and up until her death on the 30th of November 2007.
8. I think that her first admission was in June 2007 to Antrim Area Hospital when they did a biopsy through her nose in order to ascertain if the tumour was operable or inoperable. Unfortunately the diagnosis was that her tumour was not treatable and because of her disability and the severity of the radiotherapy treatment they decided not to operate and rather keep her pain free and comfortable. They also told us that time that she only had between six to twelve months to live.
9. Her mobility deteriorated and she became very bloated. Her leg also became ulcerated and she developed MRSA.
10. I am uncertain of the exact dates on which she was admitted or discharged from hospital but I would refer to a letter written on the 12th of May 2008 by the then Chief Executive of the Northern Trust, Norma Evans, to my cousin Mrs Iris Robinson which sets out the dates of her admissions to Antrim Area Hospital and Whiteabbey Hospital. A copy of this letter is attached and upon which I have marked my initials MR1. I also attach copies of my letter to Iris Robinson dated the 11th of December 2007, her letter to Chief Executive of the Northern Board dated the 20th of March 2008 and the acknowledgement from Norma Evans dated the 1st of April 2008 upon which I have marked my initials MR2, MR3 and MR4 respectively.

11. In particular it would appear that she was readmitted to Antrim Area Hospital on the 27th of August 2007 because of poor balance and problems with falls. Her legs were also very swollen at that time.
12. Then on the 26th of September 2007 she was apparently transferred to Whiteabbey Hospital and it was then that she was diagnosed positive for MRSA. On that occasion she was apparently discharged from hospital on the 4th of October 2007.
13. On the 7th of November 2007 it appears she was readmitted to Whiteabbey Hospital for treatment and within 24 hours of admission she was diagnosed as having C Difficile.
14. She stayed in Whiteabbey Hospital up until her death on the 30th of November 2007.
15. My understanding is that she was given antibiotics during her stay in Whiteabbey Hospital.

Wards

16. According to the letter from Norma Evans she was admitted to Ward 2 in Whiteabbey Hospital on the 7th of November 2007. My understanding is that once she was diagnosed as having C Difficile that she was then transferred to a single isolation room.

C Difficile

17. According to a document I have seen, she was diagnosed as having C Difficile on the 8th of November 2007 and it also states in that document that she was in Ward 2, Whiteabbey Hospital at that time.

Visits

18. Unfortunately due to work commitments I was only able to come over to visit her in Northern Ireland on two or three occasions and I was not able to come over when she was admitted on the last occasion to Antrim Area Hospital.

My evidence is therefore sometimes based on what I have been told by the doctors and nurses at the hospitals and also by her support worker, Kathleen McKnight.

19. My brother and his partner and my nephew also visited her on several occasions but I am not certain of the dates on which they visited.
20. My sister had difficulty communicating but she did write things down. However unfortunately as her illness progressed her writing became illegible and so she had more difficulty in communicating with everyone. The tumour could also have affected her eyesight. She had actually sent me a birthday card in September 2007 and I could not even read her signature on it at that time.

Mobility

21. By the time that she was admitted to Whiteabbey Hospital in November 2007 she was no longer mobile. In fact I recall visiting her in Antrim Area Hospital at the time of her second admission and even by that stage I remember that there was also a sling beside the bed. Anne was quite a heavy person and they had even moved her to a downstairs bedroom in Ellis Court as it was necessary to use a hoist at that time.

I think that she was mobile up until about August and then she became gradually more immobile.

Care

22. I cannot really comment on the care that she received in hospital. Nor do I feel that I can comment on the attention given to her or the attitude of staff.
23. Communication was however a big problem and I think that the staff sometimes had to wait for a member of staff to come from Ellis House before they could communicate with her.
24. She also had difficulty swallowing and I remember that on one occasion they had to use suction and she would not tolerate it. I was told that they had to wait for someone to come and explain it to her before they could use it on her. She sometimes became distressed because of this communication difficulty as she did not always understand what was happening or what they were doing.
25. Anne had C Difficile, MRSA, e-coli and other infections but apparently the carers from Ellis Court who came to visit her in hospital considered they were not informed quickly enough about the Cdifficile. They were apparently annoyed that they had not been informed sooner so that they could have taken appropriate precautions. They were horrified that they had not been informed about her C Difficile as they were not using the gloves, gowns or masks when they were dealing with her and that this put their other clients at risk of infection. I cannot remember when she was first diagnosed with MRSA.
26. I remember on one occasion in Whiteabbey Hospital when I was not pleased because they had promised that they would have a care package in place and that she was being discharged but then phoned me on one occasion to say that she had had a fall and on another occasion they phoned to say that she had been attacked with a stick by a dementia patient. I was very annoyed and phoned the social worker who confirmed that the care package was in place and so I insisted on her being taken out of the hospital and returned to her own home.

Communication

27. Although I was not able to physically visit my sister very much while she was in hospital, I did phone the hospital practically every day for an update. I was told that she had had a good or a bad day but I was not told that she had C Difficile.

I was contacted by the consultant on at least two occasions regarding the tests that she was being given, her condition and treatment. They spoke to me about the tumour and we also discussed resuscitation. I am uncertain now as to which hospital the consultant was from although I am fairly sure that I spoke to a consultant at Whiteabbey Hospital at the time of her last admission.

29. Although I spoke to the doctors and nurses at Whiteabbey Hospital no one made me aware that she had proved positive for C Difficile and I was only aware of this when I read it on the death certificate.
30. I had also given a handwritten letter to the hospital saying that I gave Mrs Kathleen McKnight permission to act on my behalf but despite this she also had not been told that my sister had contracted C Difficile and so this information was not given to either Kathleen McKnight or myself despite the fact that she had been proved positive for C Difficile on the 8th of November 2007 which was three weeks before she died.

Cleanliness

31. I cannot comment on the cleanliness of Whiteabbey Hospital but Antrim Area Hospital seemed fine. The ward looked clean and the surfaces seemed fine.

There were four beds in the ward and plenty of space between them. It all looked clean.

Letter to Iris Robinson

32. I was so upset with the contents of the death certificate that I wrote to my cousin Mrs Iris Robinson and copies of the correspondence are attached.

Conclusion

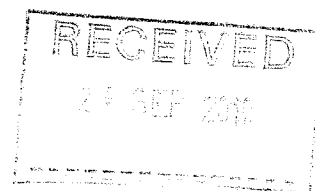
33. My main complaint would be with the lack of communication both with myself, Mrs Kathleen McKnight and my sister. My sister was always hungry but could not communicate properly. She also did not understand what was happening or the treatment that she was getting. The hospital did not tell me or Mrs Kathleen McKnight about her C Difficile and the nurses who were looking after her were also unaware of her condition.
34. I also feel that the nursing staff should always change out of their uniforms before leaving the hospital for home so that any infections are not carried in and out of the hospital on their clothing.

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

Dated

Signed


Mabel Robin





Northern Health
and Social Care Trust

MR 1

13813

STRICTLY PERSONAL

Mrs Iris Robinson
Member of Parliament for Strangford
House of Commons
London
SW1A 0AA

12 May 2008

Our ref: Comp Your ref:

Dear Mrs Robinson

Ann Robin

Further to Mr S MacDonnell's letter to you dated 28 March 2008. I would wish to offer you my sympathy on the death of your cousin, Ann Robin.

The issues which you raised in your letter of 20 March 2008 concerning the infections which are recorded on Ann's death certificate, have now been investigated by Dr J Gilmore, Consultant Physician, Whiteabbey Hospital, and Dr D Rooney, Consultant Physician, Antrim Area Hospital.

It is my understanding that Dr Gilmore spoke to Mrs Mabel Robinson on the telephone, on one occasion, to discuss the nature and the course of Ann's illness and I am sorry if issues relating to infection were not discussed in more detail. I fully appreciate that this has been a difficult time for the family and I would be happy to arrange a meeting, if this would be helpful, for you and Mrs M Robin with Dr Gilmore, and the Trust's Medical Director, Dr P Flanagan, to discuss this issue in more detail.

Ann was admitted under the care of Dr Rooney, Antrim Area Hospital, because of persistent vomiting and headache. A large cerebral tumour was eventually diagnosed. Ann was assessed and investigated by the Oncology and Neurosurgery Medical Teams, however, due to the poor prognosis, the treatment plan was essentially palliative. Ann was discharged back to the care of Ellis Court Hostel on 3 August 2007. Dr Rooney further advises that during this admission a stool sample was negative for Clostridium Difficile and skin swabs were negative for routine testing of MRSA.

Trust Headquarters, The Cottage, 5 Greenmount Avenue, BALLYMENA, BT43 6DA
Telephone: 0845 6012333 Fax: 028 2563 3711



INVESTING PEOPLE

On 27 August 2007 Ann was readmitted to Antrim Area Hospital because of poor balance and problems with falls. At this time, her legs were very oedematous (swollen) with some blisters and cellulitis. Skin swabs were taken which showed haemolytic streptococcal infection and she received intensive local treatment and was prescribed penicillin. Swabs from the affected area of Ann's legs did not show MRSA and there was no episode of diarrhoea recorded.

On 26 September 2007, Ann was transferred to Whiteabbey Hospital and following routine screening, on 27 September 2007, Ann was confirmed to be MRSA positive and she was discharged back to Ellis Court on 4 October 2007.

On 7 November 2007, Ann was readmitted to Ward 2, Whiteabbey Hospital with a diagnosis of chest infection and dehydration in addition to a large infected right leg ulcer, sacral pressure sore and left hip sore. Prior to admission Ann had received two courses of antibiotics in the community. There is no reference to previous diarrhoea. Dr Gilmore advises that Ann was on large doses of opiate analgesics for pain control and she was also on regular lactulose to counter the drug-induced constipation.

Within 24 hours of her admission, Ann had diarrhoea and, in keeping with the Trust's Infection Control Policy, samples were sent, which confirmed the presence of Clostridium Difficile infection and she was then commenced on a course of the antibiotic, Metronidazole.

In keeping with the Trust's isolation policy, Ann was nursed in a side room throughout her illness and she required penicillin and flucloxacillin, again in keeping with guidelines, for her right leg cellulitis. Later in her illness Ann required antibiotic treatment for aspiration, bronchopneumonia and a urinary tract infection (e-coli).

Dr Gilmore advises that after almost two weeks, because of an inadequate clinical response to Metronidazole, Ann was commenced on Vancomycin to treat the Clostridium Difficile infection.

Dr Gilmore advises that during the course of her stay Ann received regular and intensive treatment and care from the Ward Medical and Nursing staff and also from the Tissue Viability Nurse, Palliative Care Nurses and Infection Control Staff as well as the Speech and Language Therapist and the Physiotherapist.

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INVESTOR IN PEOPLE

Dr Gilmore further advises that the staff from Ellis Court regularly visited Ann and they were particularly helpful in communicating with her. However her condition progressively deteriorated throughout the stay and she sadly died on 30 November 2007 at 8.45pm.

In summary, Dr Gilmore has explained that Ann had progressive inoperable brain cancer and required high doses of cortico-steroid medication and this combination rendered her vulnerable to recurrent infections during the months prior to her death, including chest infections, urinary tract infection and infected pressure sores and leg ulcers. Each of these infections required the use of antibiotics, but as a result of multiple antibiotic usage, inevitably she became colonised by antibiotic resistant organisms, so called 'superbug' including MRSA and C Difficile.


Unless a decision had been taken earlier in Ann's illness not to prescribe antibiotics for each intercurrent infection it is difficult to prevent such colonisation even with the best infection control measures. It must be understood that the decision not to give antibiotics would have undoubtedly shortened her life and led to significant discomfort and reduced quality of life.

Dr Gilmore advises that while it is most unfortunate that Ann acquired these infections, it must be clearly understood that the ultimate cause of her final decline and death was the underlying brain tumour with its resultant general debility, immobility and impaired immune defences rather than the opportunistic infections including the 'superbugs' which often target such vulnerable patients.

Thank you for bringing this matter to my attention. As I have previously indicated I am sorry that issues regarding infection control were not fully explained to Mrs Mabel Robin.

If you require further assistance with this matter, or if you wish to avail of the meeting suggested, please contact me.

Yours sincerely


Norma Evans (Ms)
Chief Executive

Trust Headquarters, The Cottage, 5 Greenmount Avenue, BALLYMENA, BT43 6DA
Telephone: 0845 6012333 Fax: 028 2563 3711



INVENTOR IN PEOPLE

MRZ

Mabel Robin
[REDACTED]
[REDACTED]

X 11th December 2007

Dear Iris

[REDACTED]
[REDACTED]
I don't know if you are aware that Ann passed away on the 30th November. Ann was diagnosed with a Brain Tumour in June of this year. Unfortunately it was so advanced and so large it was untreatable. The doctors gave her 6 months to 1 year she lost her fight with in 5 months.
[REDACTED]
[REDACTED]
[REDACTED]

My reason for writing to you is really to let off steam and to ask for your help.

When I read Ann's death certificate it was stated that Ann had died of Pneumonia, plus she had contracted E Coli, C Diff, and M.R.S.A. I was very shocked and horrified to say the least.

Ann was hospitalised in Antrim Area hospital on three Occasions and latterly in Whiteabbey, (where she passed away) I am convinced that Ann picked up the bugs in Antrim hospital.

I was going to write to the minister of health to complain but to be honest I felt it would be a waste of time.

I went on to the council web site and discovered you are the chair for health and social and public services for your constituency.

I am so angry and very disappointed with the health services Ann suffered quite a bit with the Tumour in the end her mobility had gone and she did not really have any real quality of life. It makes me sad to think Ann had to deal with all of these other conditions as well as the Tumour. **It is totally unacceptable.**

I hope you don't mind me writing to you? I just did not know what else to do or who else to write to. I do appreciate that the hospitals in mention are not in your area or your constituency, but if you can some how get a message of concerns across to the powers that be I would be happy. I do realise that nothing can be done for Ann now. All I want is to draw attention to this ever increasing problem of **Super Bugs** with in the health service, and try and get the cleanliness of our hospitals improved to prevent other patients falling victim to these horrible Super Bugs.

[REDACTED]

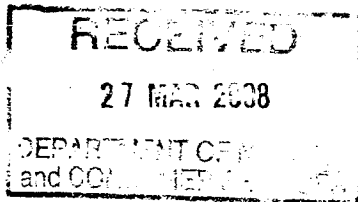
Love and God Bless

[REDACTED]

Mabel

MR3

08-027-135



138/11

HOUSE OF COMMONS
LONDON SW1A 0AA

NIHSS (CENTRAL REGISTRY)
26 MAR 2008
File Ref: 67/147/3
To: Chief Executive
For info / action as appro.
Comment: File with Chief Executive

20th March 2008
Our Ref: IR/AS/6783

Mr. Stuart MacDonnell
Chief Executive
Northern Health & Social Services Board
County Hall
182 Galgorm Road
Ballymena
BT42 1QB

Dear Stuart

Please find attached a letter which I received from my cousin Mrs Mabel Robin concerning her sister and my cousin Ann Robin who unfortunately was both deaf and dumb from childhood and who passed away on the 30th of November 2007 with a brain tumour. Unfortunately on her death certificate along side pneumonia she had contracted E Coli, C Diff and M.R.S.A. She has been hospitalized in Antrim Area Hospital on three occasions and latterly in Whiteabbey where she sadly passed away. I would like these issues added as to how she managed to contract not just one but all three of these super bugs. I'm requesting an investigation surrounding her death. As a member of the family I would also seek disclosure on any records and files relating to her. In closing your help on this matter will be greatly appreciated and I look forward to hearing from you when you have investigated on this matter fully.

Yours sincerely,

MRS IRIS ROBINSON MP MLA
Member of Parliament for Strangford

→ Miss for appropriate action



MR4

Posted 1 Apr 08

+ YRTBH

+ GATYHK

Patient Liaison Office

LA

STRICTLY PRIVATE & CONFIDENTIAL

Mrs I Robinson
Member of Parliament for Strangford
House of Commons
London
SW1A 0AA

135112

1 April 2008

Dear Mrs Robinson

Re: Ann Robin

I acknowledge receipt of your letter of 20 March 2008, which was forwarded to me by Mr Stuart MacDonnell, Chief Executive, Northern Health and Social Services Board, and I received on 1 April 2008.

I shall arrange to have the issues which you raised investigated and will be in contact with you again as soon as possible.

May I take this opportunity to express my sincere condolences to you and your family on the death of your cousin.

I enclose a copy of the leaflet "Your Right To Be Heard", which advises on the Trust's Complaints Procedure, for your information.

I also enclose the leaflet "Gaining Access To Your Hospital Records", which advises on how to request your cousin's medical records.

Yours sincerely

for Norma Evans
Chief Executive

Enc

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Telephone 028 25633700 facsimile 028 25633733



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