

Tuesday, 3 March 2026

1
2 (10.00 am)
3 **MS BLACKWELL:** Good morning, my Lady. We're going to begin
4 today's evidence by calling Sam Smith-Higgins. May she
5 be sworn, please.
6 **MS SAM SMITH-HIGGINS (affirmed)**
7 **Questions from LEAD COUNSEL TO THE INQUIRY for MODULE 10**
8 **LADY HALLETT:** Hello again.
9 **THE WITNESS:** Hello.
10 **MS BLACKWELL:** Welcome back to the Inquiry. You gave
11 evidence in Module 4 about the experience of your
12 father, Phil Smith, and you're here today representing
13 Covid-19 Bereaved Families for Justice Cymru.
14 You should have before you two witness statements:
15 the statement that you have provided on behalf of the
16 organisation, which is at INQ000659784, and also
17 a personal impact statement, which is at INQ000659950.
18 Can you confirm, please, that those are the
19 statements that you have provided for Module 10.
20 **A.** They are.
21 **Q.** And that they are true to the best of your knowledge and
22 belief.
23 **A.** They are.
24 **Q.** Thank you very much.
25 I'm going to concentrate, if I may, on the evidence

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1 by mutual grief and the inability to get answers"?
2 **A.** That's correct.
3 **Q.** And you tell us that, from time to time, representing
4 the Welsh bereaved has been gruelling, and that --
5 I know from the change in the -- the way in which the
6 group has now become formulated, that you have been
7 reduced from five founding members and leaders down to
8 two, so yourself and one other; is that right?
9 **A.** That's correct, yes.
10 **Q.** Thank you. But you go on to say:
11 "It is a privilege to represent the Covid bereaved
12 in Wales ..."
13 Because you feel that you are representing many of
14 those who don't feel able to speak for themselves,
15 because going through the bereaved evidence that you
16 have looked at throughout the course of your
17 representation has at times been retraumatising in
18 itself; is that right?
19 **A.** That's correct.
20 **Q.** Thank you.
21 During the course of your evidence, we're going to
22 touch upon limitations on physical contact, on the
23 uncertainty about the treatment of loved ones, and about
24 restrictions on communication with loved ones. And
25 we're going to look, from time to time, at some of the

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1 that you've given on behalf of the organisation,
2 although, from time to time, I know that you may want to
3 provide examples from your own experience of being
4 bereaved.
5 The organisation, you tell us in your witness
6 statement, is a collection of people who are all
7 personally bereaved who have been left shocked and
8 scared by their experience with Covid. And you say:
9 "At first we thought we were just unlucky. Then we
10 discovered so many others in Wales had [also] lost loved
11 ones in hospitals and care homes in [similar]
12 devastating circumstances ..."
13 You say that:
14 "[Your] experience of bereavement has been shaped by
15 Wales-specific circumstances."
16 And that the members of your group have decided to
17 use your grief in a positive way.
18 **A. (No audible answer)**
19 **Q.** I can see that you're nodding. If you agree with what
20 I'm saying, could you say, "Yes", please, for the
21 record.
22 **A.** Yes.
23 **Q.** Thank you very much.
24 And you go on to say that you are, or have been,
25 reluctant campaigners, but you've been "brought together

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1 evidence that's been provided to the Every Story Matters
2 exercise, both by Welsh people and by people across
3 the UK.
4 At paragraph 14 of your statement, you tell us about
5 the first wave of Covid and how the speed at which the
6 pandemic hit shocked people and they felt that they were
7 uninformed by what was happening.
8 Did your members tell you that they were affected by
9 the lack of communication that they felt at the
10 beginning of the Covid pandemic?
11 **A.** Yeah, well, at the beginning, you know, families kind of
12 expected a certain amount of chaos. It was something,
13 sort of, new. But the actual level of chaos I don't
14 think was expected. You speak to families who lost
15 loved ones in that first wave, and it was -- you know,
16 people have used the words "kidnapped", that's how they
17 felt: their loved ones were kidnapped going into
18 hospital or a care home.
19 And I was talking to a family, a new family who came
20 forward a few weeks ago, and they said to me on the
21 phone, she said, "Listen, I feel embarrassed telling
22 people this story, but I feel like as though my dad was
23 in a soft hostage situation."
24 And that really struck a chord with me, those words
25 "soft hostage" because yeah, that's exactly how I felt

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1 about my dad. And that -- her saying that brought up so
2 many memories of stupid things that I did while we
3 couldn't get to see him. My daughter's a criminal
4 barrister and we had a photo of her with her wig and
5 gown. I sent that into the hospital and sent it up to
6 my dad and I told my dad, "You tell everyone she's
7 a medical negligence barrister" --

8 **Q.** Is she?

9 **A.** She's not, no, she's criminal. And the stupid things
10 that you thought of at the time, for me to do that, you
11 know, he really felt like as though he was in that
12 hostage situation and it's --

13 **Q.** So the lack of contact was something that was felt
14 really keenly, and also you tell us that the lack of
15 information. So you describe the silence from the
16 hospitals and care homes was deafening.

17 **A.** Yeah.

18 **Q.** So a lack of communication, as well?

19 **A.** Absolutely. My dad was the type of bloke who actually
20 enjoyed going into hospital. He enjoyed the camaraderie
21 and chatting to people, and he was the one on the ward
22 who made sure that everybody on there was able to feel
23 communicated with. He added their family and friends to
24 his Facebook profile so that he could ring them and
25 contact them.

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1 different at first, but in fact it became worse because
2 there were a number of decisions which you say
3 exacerbated and prolonged bereavement that had taken
4 place already, and you go on to say this, that:

5 "Covid bereavement often begins before death."

6 What do you mean by that?

7 **A.** A lot of people were petrified when their loved ones
8 were going into hospital. Myself, I kind of knew when
9 my dad went in to hospital that the chances were he was
10 going to catch it. He was scheduled to go in for two
11 weeks of treatment. On the final day that he was
12 supposed to be released, he had that.

13 So when you are diagnosed with Covid, nobody
14 explains to you what is going to happen. Nobody
15 explains to you that, actually, it's a really horrible
16 death that can take three to four days to happen.
17 You're not there, you're not having those conversations.
18 And so the impact -- and then, afterwards, when they
19 have died, the impact is totally different to a normal
20 bereavement because they've actually caught that Covid
21 in the hospital, so the people you're looking for
22 explanations and sympathy, you're actually angry with.

23 **Q.** Yes.

24 **A.** So, you know, one of the recommendations we make is that
25 more training needs to happen on bereavement, but one of

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1 **Q.** Yes.

2 **A.** He was doing what -- stepping in for what a family or
3 staff should be doing for their patients.

4 **Q.** And you tell us that many of your members facing that
5 situation of their loved one going into hospital and not
6 understanding what was happening felt too scared to ask
7 questions.

8 **A.** Well, yeah, again, it goes back to this soft hostage
9 situation whereby, you know, do you kick off or do
10 you -- are you going to get better results by being
11 compliant and nice about it? And that's totally how you
12 felt. You were ringing to get answers, you weren't
13 getting them. And, you know, I'm a 'kick-off' kind of
14 girl and I did that and went through all the channels,
15 and I ended up having the Director of Nursing as
16 a personal contact on my phone. And so for me, I was
17 able to get things done prompt, pronto, and quickly.
18 But other families weren't that kick-off sort of person.

19 And it also was a real disadvantage to patients or
20 people in care homes who physically weren't able to get
21 around themselves. If you were fit and able, you could
22 go out and meet your family. If you couldn't, you were
23 totally reliant -- it really was a soft hostage
24 situation.

25 **Q.** Moving through into wave 2, you tell us that wave 2 felt

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1 the specific things is that that training needs to look
2 at nosocomial infection because it is a totally --
3 somebody bereaved from nosocomial, it's totally
4 different. You do feel angry.

5 **Q.** Yeah, and that's -- I'm so sorry, but that's Covid
6 caught in a hospital setting, isn't it?

7 **A.** Yeah, or a care home. Any healthcare setting. You have
8 a total different set of emotions. You're not there
9 hugging the staff and thanking them for all their help;
10 you're feeling angry and you walk away in the
11 circumstances of Covid with a bag of stuff you've got to
12 destroy, or open up a few weeks later. And that's it.

13 **Q.** Well, let's look at the Every Story Matters record,
14 please. We can see it at INQ000659894. Just to look at
15 some examples of what you've described. Thank you.

16 Let's go to page 8 and highlight, please,
17 paragraph 3, if we can. Thank you very much.

18 "Pandemic restrictions meant many people were unable
19 to be with their loved ones at the end of their life.
20 In some cases, this meant that the last time they saw
21 their loved one was when they were taken away in an
22 ambulance or before they were taken into a hospital or
23 a care setting. Many bereaved people experience ongoing
24 and profound feelings of anger, sadness, and guilt that
25 they could not be with or comfort their loved ones at

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1 the end of their life. The pandemic impacted the
2 ability of families and friends to conduct funerals,
3 burials and end-of-life ceremonies in line with their
4 wishes, including cultural and religious practices.
5 Contributors told us about the uncertainty about what
6 happened to loved ones in their final days was
7 heartbreaking, often leaving them with many questions
8 about their death."

9 And we can see that a bereaved daughter from Wales
10 said:

11 "The pain and stress we are all going through ...
12 I can't live life not knowing how our mum died or
13 knowing how we can find out those answers. It's hell
14 not knowing why she died ... It's frustrating and soul
15 destroying not knowing answers to questions we have, and
16 we can't even grieve properly for her."

17 Were those the sentiments that your members were
18 telling you about as well?

19 **A.** Yeah, absolutely. There's a lot to break down there.

20 **Q.** Yes.

21 **A.** You know, the fact that funerals were impacted was just
22 ridiculous, absolutely ridiculous.

23 You know, they're important, funerals, and those
24 rituals you go through. And, you know, we've heard from
25 our families that children were having to decide amongst

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1 brother-in-law's dad. And you know, that's awkward in
2 itself. What do you do?

3 We went upstairs and sat quietly in a room and
4 pressed play and started watching it. And halfway
5 through we realised that this was -- why are they
6 singing You'll Never Walk Alone? What's this?
7 Liverpool. He's got nothing to do with Liverpool.

8 They'd sent us completely the wrong link. We were
9 watching some poor chap in Liverpool. And I burst out
10 laughing, but my husband felt duty bound to sit through
11 the whole service, to watch it.

12 So there's so many things that went wrong with
13 funerals --

14 **Q.** And I think also that was compounded, you tell us in
15 your statement, because of a lack of ability to see your
16 loved one before the funeral --

17 **A.** Yeah.

18 **Q.** -- and the inability to choose what they would wear,
19 when they were buried, cremated?

20 And can we just have a look again, please, at Every
21 Story Matters, because there's another example of this.

22 At page 40, please. Thank you. If we can highlight
23 the fifth paragraph. Thank you.

24 "We also heard how some people could not see their
25 loved one's body ahead of the funeral, burial cremation

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1 themselves who could visit and what have you.

2 But there's so many other things that you don't hear
3 about. I'm sure you've heard many stories about
4 funerals and no contact and no hugging and everything,
5 but, you know, for my own circumstances, my dad chose
6 a direct cremation, and that was absolutely -- so having
7 not seen him for a month before he died, then, because
8 he had chosen that route, he was stored in a freezer for
9 three weeks, before I kicked off, until they could
10 gather enough bodies in that area to take them off to
11 Kent to cremate them. You don't know what day he was
12 being cremated or what time or anything. And then
13 three weeks later a van pulls up with the cremation
14 company's name on it, a chap gets out in a black polo
15 shirt and hands me a shopping bag with, like,
16 a cornflake packet in it almost, hands me a shopping
17 bag, and asks me to have a photo taken for proof of
18 delivery.

19 And I was kind of -- I think in this photo I am
20 laughing my head off, because I thought: this is just so
21 my dad. So that photo exists somewhere.

22 There's also, sort of, like, you know, they went to
23 watching funerals online.

24 **Q.** Yes.

25 **A.** And we wanted to attend the funeral of my

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1 or other end of life ceremony. When loved ones had died
2 alone or with only a few visitors, not being able to see
3 the body meant some people were left in disbelief or
4 denial about the death, making it even harder to accept
5 what had happened."

6 Then a bereaved wife from Wales told the exercise:

7 "They told me that I couldn't see [my husband] in
8 the hospital. He was going into a body bag, straight to
9 the undertaker. I asked the undertaker and, in
10 fairness, with the undertaker I said to him, 'Oh, what
11 do you need like, dress-wise?' And he said 'Well, he's
12 got to stay in the gown that he died in. We're not
13 allowed to open up the body bag so his body bag's gone
14 straight in the coffin.' So I wasn't allowed to see him,
15 and to be honest with you, even now sometimes it's like,
16 I know this might actually sound absolutely crazy, 'Have
17 they kidnapped him? Has he really gone? Because I've
18 not gone through the process of seeing the body.'"

19 And was that something that your members were
20 expressing to you, almost the disbelief that the person
21 had gone?

22 **A.** Absolutely, absolutely. You know, I was talking to
23 a chap I've just met here this morning, and he lost his
24 wife at home through Covid, and, you know, no inquest,
25 no postmortem, even. And even just writing out the tags

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1 to put on her in front of him, you know, and ... all of
2 this with funerals -- funerals are so important that
3 actually the same as visiting in hospital, you know, we
4 were told, "You can't visit in hospital." Well, why
5 not? Because actually, if you'd had the right
6 ventilation and you'd had the right masks, there was no
7 issue whatsoever. When we all finally got into
8 a hospital, the air in there was just, you know, if
9 anybody's ever been on a hospital ward at mealtimes,
10 it's disgusting.

11 You know, they need to be ventilated. You need to
12 bring regulations for air quality inside hospitals, a
13 hundred per cent. That needs to be backed up by law.
14 And the same with funerals. Public buildings need to be
15 safe places for people to go. You cannot change the
16 behaviours of people when you can quite easily change
17 the behaviours of the public spaces. You can change
18 those. It costs a lot of money. Until people start
19 suing for hospital acquired Covid or care home acquired
20 Covid or catching Covid in public buildings, nothing
21 will probably happen. That's why it needs to be made
22 into law.

23 **Q.** Thank you. That's certainly one of the recommendations
24 that you put in your statement.

25 I'd like to ask you some questions now about the

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1 ones and the impact of their loss had not been
2 acknowledged or recognised by their government as
3 a public tragedy. Campaign leads described how many of
4 their members to this day cannot accept what has
5 happened, and process their emotions, given their lack
6 of closure, and postponement or suppression of their
7 grief during the pandemic."

8 Now, I'm going to ask you some questions about
9 memorialisation a little bit later but concentrating on
10 the complex grief or prolonged grief that your members
11 have felt, what have they explained to you that they
12 think has led to that, and how has that exacerbated the
13 feelings of grief that one might expect to feel outside
14 of the pandemic experience?

15 **A.** We're all -- as a group, we all feel we're strong
16 people.

17 **Q.** Yes.

18 **A.** And we've all been bereaved before. And I think what --
19 the message that's coming across is the lack of
20 information that we received. There's so many questions
21 that remain unanswered.

22 You know, it's five years on for me personally, and
23 I've questioned, why aren't I just walking away and
24 moving on with my life? I've even questioned, have
25 I got Daddy issues? You know? And it's, sort of, like,

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1 evidence in your witness statement on prolonged grief
2 and long-term emotional consequences. And let's look,
3 please, at the roundtable summary report on funerals,
4 burials and bereavement. Thank you.

5 Turn, please, to page 12. And can we highlight,
6 please, the first half of this page:

7 "Bereavement support organisations said these
8 experiences have led to an increase in cases of complex
9 grief where people continue to experience intense,
10 lasting symptoms of grief for a long time after their
11 loved one has died. This is often accompanied by
12 persistent sadness and rumination about the loss.
13 Bereaved families campaign groups spoke about how many
14 of their members have been diagnosed with post-traumatic
15 stress disorder, with some experiencing suicidal
16 thoughts following pandemic bereavement and its
17 associated isolation.

18 "Bereaved families campaign groups agreed that they
19 felt ignored by the governments of the UK during and
20 following the pandemic, and that this had contributed to
21 their sense of isolation by making them feel
22 unimportant. The representative from Covid-19 Bereaved
23 Families for Justice Cymru highlighted the lack of an
24 official Covid-19 memorial, a minute's silence or event
25 in Wales. This meant that members felt that their loved

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1 no, I really haven't. It's just a fight to find out
2 what went wrong. And now I kind of know what went wrong
3 and I still haven't got answers or any reassurance that
4 things have been changed. And I think, for a lot of our
5 families, that is what drives them on.

6 And looking at that triangle that public health
7 bodies used, where it was -- was it 60% of people would
8 get over their grief, and then 30% will need help, and
9 then 10% will get this post-traumatic grief disorder,
10 you know, why that model was used during a pandemic is
11 nonsense.

12 I would say that the 40% who are -- sorry, 30% who
13 need the help never had it. We certainly never had it.
14 I've sought help. In about -- about a month after my
15 father died I couldn't even open my mouth. I carry
16 stress in my shoulders and my jaw, and I had lockjaw
17 completely. Couldn't eat, couldn't drink, couldn't move
18 my jaw. Went to the doctor's and they referred me to
19 the counselling service within the health board. After
20 about six weeks I had a phone call and they said, "Oh,
21 I can understand why you're upset." It was -- I was in
22 the hospital ward at that time. It was chaos. Absolute
23 chaos. The things I saw! Anyway, "You don't need
24 counselling from us, you need grief counselling."

25 So you contact a grief counsellor and they say,

16

1 "Well, it's too soon, you need to wait a good few
2 months. You're going through the normal stages of
3 grief."

4 And there was nobody who would help with bereavement
5 support, at all.

6 And as I say, you know, we've worked as a group to
7 get bereavement support put into hospitals in Wales, but
8 actually, if you've had somebody die from a nosocomial
9 infection, that's the last place you want to go to for
10 help. So I really think that that needs to be
11 acknowledged as -- as a factor, you know. I'm not --
12 I'm no longer angry with the health board, but at the
13 time I was furious.

14 **Q.** Yes. And is one of the other experiences that your
15 members have spoken to you about the guilt that they
16 felt about the death of their loved one --

17 **A.** Oh, absolutely --

18 **Q.** -- and how they've carried that throughout the --

19 **A.** Absolutely, yeah.

20 **Q.** -- period of grieving?

21 **A.** And that's -- that's -- yeah, that's -- I can totally --
22 that's what keeps me awake at night. That's what makes
23 me grind my teeth. Because I genuinely feel I -- you
24 know, I did do enough for my dad, I know that deep down,
25 but I wasn't there. I didn't see him. I don't know

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1 And we can see there a bereaved daughter from Wales
2 said:

3 "My sister and I will always have to live with the
4 guilt ... that a vulnerable elderly person should be
5 allowed to die alone, to be deprived of her daughters,
6 the only people that she still recognised and that she
7 relied so heavily on for her daily care ... we thought
8 the hospital was the safest place for her but it
9 wasn't ... we still struggle with the [guilt and grief]
10 every day. I am so sorry that we let her down."

11 Then if we can go, please, to page 26 and have
12 a look at Cara's story. Thank you.

13 "Cara's mum and dad both contracted Covid-19 and
14 were taken to separate hospitals where their health
15 rapidly declined. Cara was unable to visit either of
16 her parents and received very little communication from
17 the hospitals. She told us how helpless she felt.

18 "Not being able to be there, it was the
19 helplessness of not being able to do anything. The loss
20 of control and power, which was really awful'.

21 "Cara's mum died within a week of being in hospital,
22 and her dad died just five days later. The sudden death
23 of both her parents felt 'surreal'.

24 "It's sudden, completely unexpected -- if it's
25 caught in hospital, you thought your loved one would be

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1 what happened. I didn't ask, when -- when he was
2 diagnosed with prostate cancer in the April, the first
3 week of lockdown, and they wrote it on his notes but
4 didn't tell him, I wasn't there for that appointment.
5 There's so many things that actually we have no answers
6 to. There is no apology. There is no -- and this is
7 where Welsh Government have really annoyed us as well.
8 And I know this is not -- but it is an impact, because,
9 instead of being open, there's been a very defensive
10 sort of culture.

11 **Q.** Reaction, yeah. Well, we will come back to look at
12 that.

13 **A.** Yeah.

14 **Q.** But before we do, let's just look at another couple of
15 examples of people feeling guilt.

16 Every Story Matters, please, and page 8 and on to
17 page 9. We can see that:

18 "Many contributors said they felt like they had let
19 their loved one down because they could not speak up for
20 them and support them in the way they normally would.
21 They described replaying decisions in their mind and
22 asking themselves whether they could have done something
23 differently at the end of their loved one's life. This
24 guilt and regret has made it incredibly difficult for
25 many bereaved people to process their grief."

18

1 safe, obviously. So, it feels like it was completely
2 avoidable. You're angry, it's unjust. And surreal,
3 completely surreal. One minute my parents were fine,
4 living their own life. And the next minute, less than
5 a month later, they're both dead.'

6 "Cara told us how she'd been left with an
7 overwhelming sense of guilt, constantly replaying the
8 decisions she made and unanswered questions about what
9 happened.

10 "These "what-ifs" play on your mind. Yes. Did you
11 do the right thing by saying, "You've got to contact the
12 hospital"? Would they have been better off if they'd
13 just died at home? They suffered in hospital alone, so
14 all these things play on your mind. You ruminate over
15 this. There's just so many unanswered questions. You
16 didn't know what happened in the hospital.'

17 "She was left with an intense fear that she might
18 also catch the virus and die. Her feelings were
19 overwhelming and led to thoughts of self-harm and
20 suicide.

21 "The sense of overwhelm that I felt with all of
22 these factors going on, and I was shielding as well. So
23 I was like, obviously my parents died from Covid and I'm
24 terrified of catching anything. I did have thoughts of
25 suicide and self-harm. I'd never in my life experienced

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1 thoughts of self-harm, it was incredibly scary.'
2 "Cara told us how she has felt unable to process her
3 grief.

4 "It feels like my parents could still just be
5 living out there somewhere. I'm just stuck in, like,
6 a long state of bereavement. I mean, I can get on with
7 day-to-day life but when I think about everything that's
8 happened and trying to find out what went on, going
9 thorough hospital complaints, getting records, reading
10 medical notes, I was all caught up in that for maybe
11 2 years. And when they went, did I grieve? I don't
12 know. Have I? I'm not sure."

13 Again, several parts of that to unpick, perhaps.
14 **A.** It really is, and it just sums it up, this guilt. And
15 you, you know, now you feel guilty for feeling guilty,
16 for still grieving. You know, it's like time has passed
17 now, we should all be moved on from this. But if -- it
18 just felt like a constant battle at the time and I keep
19 going back to that soft hostage situation which just
20 sums it up for me. That's exactly how I felt. My mum
21 had a stroke in the November 2020, and, you know, we
22 couldn't get an ambulance so we ended up wheeling her
23 down to a different hospital because I wouldn't go to
24 the hospital within our normal health board because of
25 what had happened to my dad, distrust, yada yada. So

21

1 **A.** Yeah.
2 **Q.** -- and feeling suicidal. And is that level of grief and
3 guilt and overwhelm something which your members have
4 told you about?
5 **A.** Absolutely. Absolutely. I'd say there's very few of us
6 who aren't medicated for anxiety. Myself included. You
7 know, I think it's better to be open and honest and say
8 that.

9 At the time, during a six-month period, my mum had
10 two strokes, my dad died of Covid, my husband was
11 diagnosed with Covid, and we built an extension. So, it
12 was like --

13 **Q.** Quite an -- (overspeaking) --
14 **A.** No wonder I had lockjaw. And it took me about a year to
15 return to the normal, sort of, world. And as I say, you
16 kind of -- our grief has changed over the years, so
17 we've had, sort of, periods of "Right, we want to fight
18 the good fight, we want a Wales Covid inquiry, right,
19 we're going for it" to "Oh, god, what's going on? I've
20 got to walk away from this, I can't handle it any more."

21 **Q.** Exhaustion?

22 **A.** Yeah. It's been gruelling. And the reason we all keep
23 going now is to make sure that our voices are heard and
24 that we do get a bit of accountability.

25 **Q.** Thank you.

23

1 I drove to a different health board, pulled up outside,
2 I'd had to ring ahead, they were expecting her. My mum
3 was, like, collapsed in a chair, and they wheeled her
4 off, and they said "You can't go in" and I said, "Well,
5 I'm her carer, of course I can go in."

6 To cut a long story short, security were called,
7 then the police were called, I refused to leave and an
8 hour-and-a-half later I got into the room and she was
9 still just sloped in the thing and I think if I hadn't
10 gone in there -- and this what I mean about people who
11 were prepared to fight, I was a fighter, and I fought
12 for everything I could do, but then other people
13 wouldn't have had that in them at that time. And
14 I carry enough guilt even though I did fight very hard.
15 So I can only imagine how the families who were more
16 sort of compliant and quieter about it all are feeling
17 now. It is horrendous.

18 And as I say, you feel a bit ridiculous, because as
19 a group now we're really careful about who we talk to
20 because you kind of feel a bit embarrassed, you know,
21 for me it's five years down the line. For my dad,
22 I shouldn't be -- and I'm a pretty strong person,
23 I shouldn't still be having this gnawing away at me.

24 **Q.** Cara told Every Story Matters about feeling
25 overwhelmed --

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1 I want to talk about a different topic now. And
2 I know that you have worked as a filmmaker, haven't you?

3 **A.** Yeah, I have, yes. That's my job.

4 **Q.** You tell us about the discovery of filming and
5 photographs of people in hospital settings. How did
6 that first come to your attention?

7 **A.** So ... ooh, I've got to get through this next section
8 without swearing. This really annoys me.

9 But, basically, a week after my dad died, there was
10 a post on as was Twitter then from an employee of the
11 health board with a photo of a body bag, there was
12 obviously somebody in the body bag, with "Bad day at the
13 office" as the tag. And it was the day that my dad had
14 died. Further investigation then, we now discovered
15 that the health board had allowed staff, five members of
16 staff, to take photographs throughout the pandemic. Two
17 members of staff in particular were aware of the photos
18 that they did, and one in particular released a book,
19 which -- the first book was absolutely fine, photos of
20 recovered Covid patients, photos of staff. Absolutely
21 fine.

22 The second book that came out was absolutely
23 harrowing.

24 **Q.** Photos of people on the ward, patients?

25 **A.** People dead, dying, and in the morgue. Patients -- it

24

1 really is, it's horrific -- patients, prone patients
2 intubate -- patients who clearly could not have given
3 consent for their photographs to be taken.

4 And this was in the second book.

5 We then found out that photos such as the body bag
6 was in a gallery for sale for £125, a print of that.

7 Really horrific photographs.

8 We obviously contacted the health board. They've
9 said the photographer was doing this in his -- in his
10 own time, before and after work. We've assigned data
11 control to him.

12 As a filmmaker, who's filmed in that very health
13 board, I know all the media policies, I know all the --
14 and it went against every media policy. I know enough
15 about copyright to know that the health board would've
16 had to have assigned that copyright over to the
17 photographer, because automatically it would go to them.

18 So, as the state we're in at the moment, this
19 photographer has at least 17,000 images on a hard drive
20 of dead, dying, people. The health board have said
21 they're not easily identifiable. Well, they are. If we
22 see them and we know what date, they absolutely are.

23 And that's not even the point. The fact of, if your
24 parent was in hospital, dying or dead, and somebody who
25 had access to that hospital, access all areas, felt that

25

1 that, and somebody like that [indicates], if you've been
2 married to somebody for 30 years, you're going to know
3 their ear. The hospital may say that's not easily
4 identifiable, but the fact that they felt they could do
5 that without consent, and the fact that these images are
6 still there, is just ... pffff.

7 **Q.** You also mention about one of your members' loved ones
8 being filmed by a news channel whilst they were being
9 treated with CPAP oxygen, and that person's family
10 seeing them for the first time on a news report?

11 **A.** That's it, that's it. And it's just -- because we
12 weren't allowed to go there, it fills in all the blanks,
13 if you like, it fills in all the blanks of what their
14 treatment was like, what they looked like, what sort
15 of -- and the fact that you're having to fill this in
16 from a member of staff who was going round taking
17 photographs is just -- everybody knows it's horrendous.
18 Everybody knows human rights have been breached here.
19 Everyone knows that their media policy has been
20 breached. Nobody is putting their hands up and saying,
21 "We will destroy those photos" and that's what we want.

22 Learn a lesson from it. Learn a lesson from it,
23 that that is not acceptable, which their own media
24 policy says it's not. But please, please, please
25 destroy those 17,000 images that are currently on a hard

27

1 they could go up with a camera and point it at a head,
2 an ear, anything of your parent, it's just -- the
3 thought of my dad -- me not being able to be there and
4 some theatre technician being able to go right round the
5 hospital taking photographs of dead and dying patients,
6 it just infuriates me.

7 And the fact that the health board have not put
8 their hands up and said, "We will destroy those images"
9 has infuriated me. We have gone to the Welsh Government
10 to ask for their help. They will offer none.

11 And I know what will happen. In ten years' time,
12 the anniversary, another book will come out, and all
13 these images will be shown, and there's probably my dad
14 in there.

15 **Q.** And it's not just you who has been affected by this, is
16 it?

17 **A.** No.

18 **Q.** Members of your organisation as well have told you of
19 examples of them seeing images which they think may be
20 their loved one?

21 **A.** Yeah.

22 **Q.** And even arguments within families as to whether or not
23 a particular image is their loved one or not?

24 **A.** One lady is absolutely convinced it's her husband. You
25 know, if you've got a picture of an ear and a mask, like

26

1 drive in somebody's home, in Abergavenny. They need to
2 be destroyed. I don't know how we make that happen.
3 Everybody we tell this story to, we've gone to human
4 rights lawyers, we've done everything we can short of
5 breaking in and destroying it ourselves.

6 **Q.** Yes.

7 **A.** It's just harrowing. I cannot begin to tell you how
8 awful that was seeing that Tweet "Bad day at the office"
9 and the man -- or the person in the body bag on the day
10 my dad died. I cannot begin to tell you how just that
11 soft hostage situation, the dignity being stripped from
12 them, and that's how it felt every time you visited
13 a hospital. It felt as though you were visiting
14 a prison and that all rights were stripped. That's
15 exactly how it felt.

16 **LADY HALLETT:** There are two aspects to what you're saying,
17 Ms Smith-Higgins. One is the taking of the photographs
18 at all, or the filming at all. The second is the "Bad
19 day at the office" caption. Did the health board do
20 anything about the member of staff who thought it was
21 appropriate to put that kind of --

22 **A.** We never heard. We never heard. I'm sure things did
23 because we kicked off a huge stink with the health board
24 but we never had -- the things we asked for, which was
25 for all images to be deleted, that never happened. They

28

1 simply said that "He is the data controller, not us."

2 And, you know, as I say, they didn't mention
3 copyright. They own the copyright, unless they've
4 assigned it. It's all ... it's horrendous.

5 **MS BLACKWELL:** Thank you.

6 I want to turn to burials, religious practices and
7 memorialisation, please.

8 Let's begin this topic, please, by looking again at
9 Every Story Matters and to page 10, and can we highlight
10 the final paragraph, please, on page 10:

11 "Friends and family members said they lost the
12 opportunity for gatherings to honour their loved ones
13 and to celebrate their life, even after restrictions had
14 begun to ease. They reflected on the pain they felt
15 because they would never get these opportunities back.
16 For some people from different religious and cultural
17 backgrounds, not being able to conduct their traditional
18 ceremonies left many feeling anxious about their loved
19 one's spiritual journey."

20 Is that something which resonates with information
21 you've received from your members?

22 **A.** Yes, absolutely. As we say, funerals are important.
23 There's a reason we have funerals. You know, they
24 always used to fascinate me as a kid, "Why do they have
25 a party afterwards?" And then you go to one and you

29

1 record and have a look at Jane's story. Thank you.

2 "Jane's husband had cancer and caught Covid-19
3 during the pandemic. The last time she saw him in
4 person was when he was taken away in an ambulance. She
5 was not able to visit him in the hospice where he died.

6 "My memory is an image, and it's the look on my
7 husband's face as he was taken away in an ambulance.
8 Because I think he knew, by the look on my face, it was
9 probably the last time we'd see each other.'

10 "Jane spoke about the difficulties she faced trying
11 to organise her husband's funeral because many more
12 funerals than usual were taking place.

13 "We struggled to actually get a vicar because they
14 were so busy, so we struggled to get the vicar we
15 actually wanted for his service which I ended up doing
16 by more like pleading and bribing.'

17 "The lack of choice around what could happen during
18 the funeral added to her grief and sadness.

19 "There was no singing. My husband loved singing in
20 church and everything like that but none of us were
21 allowed to sing. We had to listen to music.'

22 "The restrictions on the number of people who could
23 attend funerals meant that some family members were not
24 able to come.

25 "My family, I don't live anywhere near my family.

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1 realise why you have a wake afterwards, you know,
2 there's a reason for it.

3 So yeah, it all ties in to not being able to see
4 someone and as I say, this soft hostage, they're just
5 taken away and then taken away further.

6 **Q.** Yes, thank you. And let's move to page 35, please, and
7 look at what one bereaved daughter from Wales told Every
8 Story Matters:

9 "Because my parents had pre-arranged funeral plans
10 and they assumed they were going at different times,
11 they'd said, 'Right we want 1 hearse and a car to
12 follow.' But, of course, we just needed 3 cars
13 2 hearses and 1 car to follow. So, the funeral
14 directors said 'We'll refund you the car'. They were so
15 caring and when you're at the most vulnerable, they
16 weren't trying to sort of take advantage. They were
17 trying to help and support."

18 So people who had plans, those plans had to be
19 changed because of the circumstances in which they died?

20 **A.** Yeah. I can't add a lot to that because of my dad's
21 bonkers experience that he picked with the direct
22 cremation. But certainly the impact from our families
23 of not having a proper funeral is, you know, cannot be
24 overstated.

25 **Q.** Thank you. Let's move to page 36, please, of this

30

1 They are scattered from, you know, Yorkshire down to
2 Plymouth so none of those could come to the funeral
3 because we were so restricted on numbers.'

4 "Changing restrictions also meant that she had to
5 struggle to find flowers for the funeral at the last
6 minute.

7 "The day before the funeral we were not allowed
8 flowers and then the day of the funeral they said we
9 could get flowers, so I scabbled all morning of the
10 funeral trying to get some flowers organised for my
11 husband's funeral."

12 The lack of singing allowed, and the fact that there
13 had to be a choice, often, of which family members were
14 allowed to attend, are those both details that resonate
15 with you from stories that you've heard from your
16 members?

17 **A.** Yeah, absolutely. And it's ridiculous. It's
18 ridiculous, looking back on it now. It's just
19 absolutely mind blown. As I say, we've just focused on
20 changing people's behaviours rather than changing the
21 environment that these events happen in. And I think
22 the emphasis was just totally wrong. Just totally
23 wrong. And the impact of just focusing on changing
24 people's behaviours will carry on forever, for our
25 lifetimes anyway. You know, there could have been

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1 things done to change the environment that these
2 funerals were happening in, and to make them as normal
3 as possible. It's just, looking back, ridiculous.

4 **Q.** The Inquiry heard yesterday from Dr Sam Royston from the
5 Commission on Bereavement, and he told the Inquiry how
6 important memorialisation is for people. You tell us at
7 paragraph 42 of your statement that:

8 "The Covid-19 pandemic was a mass tragedy causing
9 more than 13,000 deaths in Wales, a tsunami of grief,
10 and it requires a healing process."

11 And you tell us about the efforts that your
12 organisation has made in order to try and ensure that
13 there is appropriate memorialisation of those who died
14 during the pandemic. Tell us about that, please.

15 **A.** Yeah, well, it's been a bit flat in Wales. We haven't
16 had much at all. We were -- we have two woodlands now
17 which the government sorted out, there's mixed feelings
18 on it. I quite like the one woodland that I've been to.

19 **Q.** So that's in north Wales?

20 **A.** And one in south Wales.

21 **Q.** And one in south Wales?

22 **A.** Yeah, there's supposed to be one in west Wales as well,
23 but we haven't heard anything about that, but the one in
24 south Wales I quite like, it's quite a nice place. Not
25 easily accessible but it's quite a nice place.

33

1 about designing restrictions and guidelines for a future
2 civil emergency that touch upon ceremonies and funerals
3 and what needs to be taken into consideration, let's
4 please look at Every Story Matters and turn to page 13
5 at the bottom, and highlight the paragraph that goes on
6 to the next page, thank you.

7 "Many contributors would also like to see a greater
8 focus on care and compassion when designing restrictions
9 and guidelines around funerals, burials and end of life
10 ceremonies. They felt restrictions should be more
11 compassionate, allowing larger numbers of families and
12 friends to attend so people do not feel so alone. When
13 looking to the future, contributors also highlighted the
14 importance of remembrance and commemoration for their
15 loved ones.

16 "[Our loved ones] didn't have dignity in death so we
17 must make sure that they have dignity now in
18 remembering ... we need to look at ways in which it can
19 be remembered, you know, in a beautiful way for us, for
20 them, and make sure they're not forgotten and what they
21 went through."

22 Does that reflect what you've just told the Inquiry?

23 **A.** Yeah, absolutely. The impact of not having funerals in
24 a normal way is just -- as I say, it just lives with
25 you. They're there for a reason; and when you take that

35

1 But, you know, throughout this process the
2 government started trying to buy land off farmers to
3 make in our name, and the farmers were, like, come on,
4 you've been after this land for ages and now you're
5 just -- so we backed the NFU then, and went with them
6 and said, "Don't be buying stuff, forcing stuff for us
7 to have a woodland." We don't even want a woodland, to
8 be honest. What we want as a group is a big old
9 memorial outside the Senedd, and not as a political sort
10 of thing but as a reminder to everybody who serves in
11 there that their decisions that they make have an impact
12 on people.

13 There's already a memorial outside there for the
14 seamen in World War I and that's what we want as a group
15 and that's what we'll be working towards because no,
16 there has been nothing. Our government hasn't even
17 Tweeted about Covid memorial day, Scottish Government
18 do, we're so jealous of the Scottish families and the
19 relationship they have. But, you know, we know what we
20 want now. We want a nice big memorial outside the
21 Senedd, not political, there as something that we can
22 flock to on National Day of Reflection and any other
23 day.

24 **Q.** Thank you. Bringing that together with other
25 suggestions that you make in your witness statement

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1 away, there's an obvious impact.

2 The same as with visiting hospitals. Until you can
3 get the environment right in a hospital, I think it's
4 ridiculous to expect people to change their behaviours.
5 You know, looking back now, with ventilation and with
6 proper masks, we could have visited and there would have
7 been no problem. Same with funerals.

8 So, for us, as a group, our position is: no, you
9 know, there should be no, sort of, restrictions on
10 funerals. And there shouldn't really be restrictions on
11 visiting hospitals or care homes either, because the
12 impact on everybody is ridiculous.

13 And the impact ... the impact is there because
14 money's not being spent. Money's not being spent on
15 making those environments safe places to be. You know,
16 why is a hospital no longer the sterile, healthy
17 hygienic place we expect it to be? Why is it a -- in
18 Wales, over 120 people catch Covid on a hospital ward in
19 Wales every week. That is a ridiculous figure. Every
20 week!

21 And, you know, there's only 3 million people in
22 Wales -- there's 9 million in London, Wales is not
23 a massive place -- and that's over 100 people every week
24 catching Covid in hospital. Now. This is last week's
25 figures.

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1 So, forget behaviour changes, forget, "Oh, you're
2 not visiting." No. Sort out your environment. Sort
3 out your hospitals. Get them to be clean places where
4 patients can go in and feel safe.

5 And I heard Clinically Vulnerable Families saying
6 the same thing. Well, it's not just clinically
7 vulnerable families, it's everybody has that right to be
8 in a safe place with clean air, in a hospital or a care
9 home. And the same for funerals. Everybody has that
10 right.

11 I don't think, if another pandemic comes, when
12 another pandemic comes, people will so quickly adhere to
13 these restrictions. I know I certainly wouldn't.
14 Because I'm annoyed now. I'm annoyed that actually
15 I wasn't allowed to visit my dad. And he was in the
16 most unhealthy place, with the dirtiest air, in Wales,
17 and I wasn't allowed to visit him. Why? It's
18 ridiculous.

19 So, you know, for me, it's: no, sort out your own --
20 sort out your own homes and then we'll all change our
21 behaviour. But until then, no.

22 And I really hope that somebody sues a couple of
23 these health boards, because unless legal & risk get on
24 it and start saying, "Hey, come on, we need to sort this
25 out now because we're getting sued over this", nothing

37

1 **LADY HALLETT:** Oh, yes, I totally accept -- that's
2 a different point. It's a point that Mr Wagner has been
3 making to me every since I started this Inquiry.

4 **A.** There we go. Fabulous!

5 **LADY HALLETT:** So I understand that point.

6 **MS BLACKWELL:** Thank you.

7 I was just about to move on and to say that there
8 were three remaining topics: bereavement support,
9 bereavement administration, and the complaints process.

10 You've told us about your own experience of
11 bereavement support and counselling. Have you heard
12 from your members that some of them experienced a total
13 absence of bereavement support?

14 **A.** Absolutely. Every single one of our families, nothing.
15 And even to this day I'm pretty sure that we've all got
16 elements of PTSD. There's things that we've seen and
17 done and -- and -- that we still need that help, even
18 now, five years on. Well, six years on.

19 But, yeah, nothing. There is nobody in our group
20 who was given a positive or any -- received any sort of
21 help, other than medication.

22 **Q.** And have they also told you of difficulties that they
23 experienced in relation to administration after death?
24 Closing down bank accounts for their loved ones and
25 having to go through the traumatic experience of dealing

39

1 will happen, unless you can make a recommendation and
2 get them to change the law.

3 But honestly, clean air, we've got it -- you know,
4 I came to London, I haven't been to London for a while,
5 the air is cleaner in the city outdoors. I don't know
6 what it's like in your hospitals in London, but in Wales
7 it's absolutely bogging. We've got old hospitals,
8 stuffy, no ventilation, no HEPA filters, no nothing.

9 And it's wrong. We've got to get that regulated and
10 we've got to get it into law.

11 **LADY HALLETT:** I'm not going to give you legal advice, you
12 can get that from your daughter, but to sue, I wouldn't
13 hold your breath, because you've got to prove
14 a causative link.

15 **A.** I know, I know. I know.

16 **MS BLACKWELL:** Three remaining topics please --

17 **A.** Can I come back?

18 **LADY HALLETT:** Of course.

19 **A.** But we could have the air monitored, so that there's
20 a quality. The same -- the same way that I used to work
21 in an old office in London, and come the winter we'd be
22 watching that temperature to see if we could go home,
23 and come the summer we would be watching it to see if we
24 could get out. There was regulations over that. There
25 is nothing with the air in -- on a hospital ward.

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1 with all of that administration whilst feeling
2 incredibly grief stricken?

3 **A.** Yeah. The system where you can sign up once is very
4 good.

5 **Q.** That we heard about yesterday --

6 **A.** Yeah. I heard that yesterday, and, you know, about
7 expanding that. But, to be honest, the biggest barrier
8 that we've had is in communication within the health
9 board or with a care home, trying to get access to
10 notes, trying to get any sense of -- you know, I'm still
11 waiting for a response, five years on.

12 **Q.** So, that brings me on to the final topic, which is the
13 complaints process.

14 **A.** Yeah.

15 **Q.** Is your experience of a lack of response to requests for
16 information something that's also been reflected in what
17 you've heard from other members?

18 **A.** Absolutely, hundred -- I can speak for other members
19 completely on this, that the frustration we have -- and
20 actually what we're trying to do is run our own little
21 cheap sort of inquest. That's what we're trying to do.

22 There should have been inquests for where there was
23 a care home, you know, big cluster of deaths, and the
24 same with the health board. There should have been.

25 And it's really difficult to, sort of, rationalise that

40

1 actually our relatives were in this soft hostage
 2 situation, it felt like a prison where you couldn't
 3 visit, but had they been prisoners and caught Covid and
 4 died, they would have had an inquest.

5 **Q.** Because --

6 **A.** Because they were --

7 **Q.** -- people who die in those circumstances in prison --

8 **A.** In prison, would have had an inquest --

9 **Q.** -- would have had an inquest.

10 **A.** Whereas my dad on a hospital ward, you know, 30 people
 11 caught Covid. If one of them was, sadly, a nurse, she's
 12 the only one who would have had an inquest. And this
 13 just seems fundamentally unfair that your rights are
 14 somehow diminished by where you are. You know, if you
 15 catch something nosocomially, whether it's in a prison
 16 or a hospital, they're still public buildings -- well,
 17 prison isn't really a public building but you know what
 18 I mean. They're still government, sort of, buildings
 19 and it just feels incredibly wrong that especially with
 20 cluster outbreaks, where we've got a care home in west
 21 Wales where there was 52 residents and 26 of them died
 22 within a two-week period. Now, if that were to happen
 23 this week, the police would be all over it. There would
 24 be something tragically wrong. But at the time, it's
 25 just written off as, "Oh, it's Covid." Well, that's

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1 were infactual, sometimes incorrect. Mine referred to
 2 my dad as "Mrs" throughout.

3 The lack of an inquest, and I understand that, you
 4 know, you can't have inquests -- although, having looked
 5 at the number of inquests that they hold every year,
 6 they didn't go up particularly, I am surprised how few
 7 there were, actually, 200,000 a year, it's not that
 8 many, is it? They could have probably done inquests on
 9 people. They would only have to have doubled their
 10 output.

11 **Q.** I think the Inquiry has heard evidence from the Chief
 12 Coroner that because of the Covid restrictions within
 13 which the coronial service and its members were working,
 14 it was extremely difficult to --

15 **A.** But there again, that's talking about the buildings,
 16 isn't it? It's talking about the buildings that are
 17 inappropriate to carry on these sort of --

18 **Q.** But the buildings and members of the service who
 19 themselves were either suffering from Covid or were
 20 having to isolate, the system was not capable of dealing
 21 with as many inquests as it would have been normally,
 22 had the system not changed. And how the government
 23 brought in changes to relax the circumstances in which
 24 inquests needed to be held so that the system didn't go
 25 under with -- or be overwhelmed by the numbers.

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1 a heck of a lot, and, you know, health boards, we know
 2 from speaking to our families that there is a specific
 3 ward within a specific hospital where we've got a number
 4 of families who caught Covid and died.

5 Now, is there a specific problem with that? We'll
 6 never know. We'll never know because there were no
 7 inquests done.

8 **Q.** And the lack of an inquest means that questions remain
 9 unanswered --

10 **A.** Exactly.

11 **Q.** -- in terms of the circumstances in which a loved one
 12 has died?

13 **A.** Exactly. You kind of feel guilty for feeling like this,
 14 because if you lose somebody unexpectedly, you know,
 15 it's not a competition of grief. If I was to lose
 16 somebody in a car accident, it's not a -- it's not
 17 a sort of comparison of grief, but at least you would
 18 have some answers. Whereas this way, you've sent
 19 somebody into hospital, they've caught Covid, they've
 20 died, they've gone. Boom. That's the end of it. And
 21 we've had, you know, I call it a Primark version of an
 22 inquest with the nosocomial inquiry which Welsh
 23 Government did. And it was appalling. We haven't got
 24 one single member of our group who found any benefit in
 25 that. The results were -- the report that we had back

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1 **A.** And I think that was an oversight. I think that was
 2 wrong. Having read the coroner's -- the report that
 3 they did, all they were saying basically was "We were
 4 underfunded" as we are, which, yes, I get it, and "We
 5 need more money" but actually, I'd have given them
 6 a bigger thumbs-up if they'd said, "And actually there
 7 was a lot of these cases that we should have been having
 8 inquests for", because, you know, this poor chap who
 9 I met this morning, his wife died at home of Covid. No
 10 postmortem, no autopsy, no inquest. Just they --
 11 because she tested positive five days before for Covid,
 12 she was just put down "Covid", that's it. Well, who
 13 knows?

14 **Q.** But it wasn't just the lack of inquests which you've
 15 described that had an effect on people's inability to
 16 have their questions answered; it was also, which you
 17 have described from your own experience, that the lack
 18 of response from organisations --

19 **A.** Exactly.

20 **Q.** -- from whom you're seeking answers --

21 **A.** Yeah.

22 **Q.** -- or documentation in order to help you find the
 23 answers.

24 **A.** Yes, sorry. So -- how I got into inquests was by saying
 25 that that's basically what we're fundamentally trying to

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1 do ourselves.

2 **Q.** Yes.

3 **A.** And trying to get answers. And we're very lucky now,
4 Brian and Deirdre, our legal counsel are helping, just
5 simply writing a letter to a health board saying,
6 "You've had five years now to provide this response,
7 please will you help our client?" Is really helpful.

8 **Q.** And it's not just you, is it?

9 **A.** It's everyone. It's all of us. All of us.

10 **Q.** You tell us at paragraph 26:
11 "Many members have had to engage in complex and
12 lengthy complaints procedures following the deaths of
13 their loved ones. Complaints went unanswered or were
14 massively delayed. When responses did come, they were
15 incomplete, inconsistent and inaccurate."

16 **A.** Yeah.

17 **Q.** Yeah.

18 **A.** Well, they actually, on the report that they sent me
19 from the nosocomial report they completely changed the
20 cause of death. My dad had three things on his cause of
21 death, which was Covid, heart, and prostate cancer.
22 They then came back and said, "No, it's a blood
23 infection." And I was like: well, he's had a blood
24 infection for 9 years and he's stable, he just takes ...
25 it's fine.

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1 you know, we started off with five angry daughters
2 running this, there's now two angry daughters co-leading
3 it, and yeah, it's gruelling. You know, it really is.
4 I never thought I would still be here at this point on.
5 It's always the flakiest, loudest and, you know, the --
6 who keeps going. But, trust me, it's gruelling.

7 And, you know, reading -- the Inquiry has obviously
8 helped with all the information that we've got to read
9 and what have you, but, yeah, it's gruelling. You know,
10 I think I had to read six documents for this today.
11 I think I managed to get through three. Because you
12 start reading them and you are just taken back there.

13 But we have to keep going because, actually, nothing
14 has changed in Wales yet. Nothing.

15 As I say, I had -- while there's still 79% of people
16 in inpatients in Welsh hospitals caught it there. You
17 know, that's wrong. I think it was 120 last week. And
18 this is -- until that changes, we have to keep going.

19 **MS BLACKWELL:** Ms Smith-Higgins, thank you very much.

20 **THE WITNESS:** Thank you for having me.

21 **LADY HALLETT:** Talking of keeping going, I think you were
22 with me at the very first meeting I had.

23 **THE WITNESS:** I was. I have a few more grey hairs and a few
24 more brow lines now.

25 **LADY HALLETT:** Well, I'm not going to admit to any of those!

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1 And they said, "No, no, that's what it is. We're
2 sure of it."

3 Twenty-six people had looked at his notes, looked at
4 him in the 48 hours before he died. Twenty-six people
5 had written down that he was being treated for Covid
6 pneumonia. I asked the health board -- I contacted the
7 coroner myself, I said, "Can they do this? Can they
8 just say?" And they said, "Well, they'd have to contact
9 us to change the cause of death and they haven't done
10 that."

11 It's like that's an added sort of -- you know, it's
12 just, it just adds to the grief all of the time, the
13 impact of it, to just not have any answers. And then
14 just to be lied to, as well. You know, it's just wrong.
15 It's wrong.

16 **Q.** Well, I'd like to conclude my questioning where I began,
17 really, and to go back to the organisation that you
18 represent, because I know that you and other members of
19 the group feel that you've been a lone voice, really, as
20 a non-government organisation. Do you feel that the
21 aims and ambitions that you set out to achieve when the
22 group was formed back in July of 2021 have been
23 realised?

24 **A.** Well, we didn't get a Wales Covid Inquiry. But we might
25 be getting one this summer. So, for us, it's been --

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1 Anyway, thank you. It's really appropriate that you
2 should be here in the last week of evidence. I can see
3 where your daughter got her aptitude for advocacy from.
4 You've been extraordinarily helpful.

5 I'm a bit concerned you haven't shown the signs of
6 the -- and I know -- well, I'm not a professional
7 psychologist, but you're going to probably have
8 a reaction. So have you got someone with you? I know
9 you've got Mr Stanton, who I know will look after you
10 extremely well.

11 **THE WITNESS:** I've got the -- I carry it all in my
12 shoulders, so I've got the chiropractor booked for
13 Friday. I'll be okay.

14 **LADY HALLETT:** Make sure that you are cosseted --

15 **THE WITNESS:** Thank you.

16 **LADY HALLETT:** -- when you leave the hearing room.

17 **THE WITNESS:** Thank you very much.

18 **LADY HALLETT:** So thank you very much for all your help.
19 I'm sorry your daughter didn't specialise in medical
20 negligence, she might have been able to help you.

21 **THE WITNESS:** That will stick with you, that story.

22 **LADY HALLETT:** Thank you very much, I'll take a break now
23 and I shall return at -- have a little longer -- half
24 past.

25 **MS BLACKWELL:** Thank you.

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1 (11.11 am)
 2 (A short break)
 3 (11.30 am)
 4 **LADY HALLETT:** Mr Jackson.
 5 **MR JACKSON:** My Lady, the next witness is Julie Thomas.
 6 **MS JULIE THOMAS (affirmed)**
 7 **Questions from COUNSEL TO THE INQUIRY**
 8 **LADY HALLETT:** I hope it hasn't been too awful waiting.
 9 **THE WITNESS:** No, it's been fine.
 10 **MR JACKSON:** Now, you are Julie Thomas; is that right?
 11 **A.** I am, yes.
 12 **Q.** And you've already told me you'd rather me call you
 13 Julie rather than Ms Thomas in your evidence.
 14 **A.** Yes, please.
 15 **LADY HALLETT:** I'm really sorry, but do you mind if we call
 16 you by your surname?
 17 **THE WITNESS:** That's fine.
 18 **MR JACKSON:** Ms Thomas, you've provided a witness statement
 19 to the Module 10 of the Inquiry, the reference number is
 20 INQ000660031, and you have that witness statement before
 21 you.
 22 **A.** I do, yeah.
 23 **Q.** And you've signed that witness statement?
 24 **A.** I have.
 25 **Q.** And you're able to confirm that it's contents are true

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1 unwell?
 2 **A.** Yes.
 3 **Q.** And the following day you were both in Pembrokeshire,
 4 his health hadn't improved, so three days later, on
 5 16 December, you both went to get tested?
 6 **A.** That's right, yes, in Haverfordwest, yes, we did.
 7 **Q.** And your results came back two days later, on
 8 18 December: you were positive for Covid-19 and his
 9 results were inconclusive?
 10 **A.** That's correct.
 11 **Q.** But it was his condition that was worsening?
 12 **A.** Much worse than mine, yeah.
 13 **Q.** So you called 111, and you were told to take him into
 14 hospital?
 15 **A.** That's right, yeah.
 16 **Q.** So, you did that, you drove to the hospital car park --
 17 **A.** Yes, I drove him. I drove him to the hospital car park,
 18 where they knew we were going to arrive, and they were
 19 waiting for my husband.
 20 **Q.** And when you say "they"?
 21 **A.** I'm presuming it was a porter and a nurse. I'm not
 22 sure, really. But, yeah, they had a wheelchair.
 23 **Q.** So, what did they do with him?
 24 **A.** They -- my husband was helped to the wheelchair and he
 25 was wheeled into the hospital. And that -- I couldn't

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1 to the best of your knowledge and belief?
 2 **A.** Absolutely.
 3 **Q.** Ms Thomas, the statement you've provided is to explain
 4 the circumstances around the passing of your husband,
 5 Huw Thomas, aged 61, on 29 December 2020, after being
 6 infected with Covid-19. And your statement discusses,
 7 doesn't it, your experiences around his passing and the
 8 difficulties that your family have had with the process
 9 of bereavement?
 10 **A.** That's correct.
 11 **Q.** And it was following the various difficulties that you
 12 had after your husband's death that you found and became
 13 a member of Covid-19 Bereaved Families for
 14 Justice Cymru, who were able to discuss bereavement
 15 services with you?
 16 **A.** That's right.
 17 **Q.** I just want to start by asking, Ms Thomas, about your
 18 husband, and when he became infected with Covid-19.
 19 Firstly, you say that he was a physically fit man?
 20 **A.** He was very fit.
 21 **Q.** And it was on 12 December 2020 that you were in
 22 Pembrokeshire -- that's where your family lived at the
 23 time?
 24 **A.** That's right, yes.
 25 **Q.** And he called you from Swansea to say that he was

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1 go with him. I had to stay in the car park.
 2 I mean, I accepted that because I was positive with
 3 Covid myself. So, you know, I accepted their decision
 4 there.
 5 **Q.** Did you manage to speak to him before he left?
 6 **A.** My husband was very breathless, so it was just a case of
 7 him raising his hand and he was wheeled off.
 8 **Q.** He was taken into hospital?
 9 **A.** He was taken into the -- you know, we met -- we were met
 10 in the car park. They had like a Portakabin in the car
 11 park for people, so we were met at the Portakabin and
 12 then he was wheeled across through the double doors into
 13 the hospital.
 14 **Q.** And then you went home?
 15 **A.** I drove back home, then.
 16 **Q.** And so I'll move on now to your initial experiences
 17 whilst he was at hospital.
 18 **A.** Mm-hm.
 19 **Q.** What was the extent of your contact with him?
 20 **A.** He had his mobile phone with him, and he was
 21 communicating with me via the mobile phone for the first
 22 three days he was in hospital. He was in a CPAP mask
 23 for 72 hours, and obviously it was taken off for him to
 24 be able to have food or whatever, but I would ring the
 25 hospital morning and evening, because at the time you

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1 saw on the media that the hospitals were overrun.
 2 I mean, I work for the NHS, I know how busy it is in
 3 a hospital. I didn't want to be that nuisance to them.
 4 So I used to ring every morning and every evening for an
 5 update on my husband to where he was. I used to
 6 have -- I had communication with him personally via his
 7 mobile phone.
 8 **Q.** And it was in the early hours of 21 December that he had
 9 told you --
 10 **A.** Yes.
 11 **Q.** -- that his doctor was considering ventilating him --
 12 **A.** That's correct.
 13 **Q.** -- to rest his organs, but you say that he didn't
 14 actually want to be ventilated?
 15 **A.** No. In fact, my husband -- being my husband, he was
 16 quite a vibrant personality. He wrote a piece on his
 17 Facebook group to his friends warning people that
 18 basically to be careful, you know, to be aware of Covid,
 19 to wash your -- your shopping when you go shopping,
 20 et cetera. Just warning people that it could happen to
 21 anyone and he put a piece on that about ventilation, and
 22 how he'd avoided being ventilated up to that point. And
 23 it's all there for our friends and family to read.
 24 And at that point I think we both felt that -- he
 25 himself felt, and I felt, that he had turned a corner,

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1 informing me that Huw had indeed been ventilated, and
 2 that was the first time the ward had ever actually rung
 3 me. I'd always had to ring them, you know. They'd
 4 never contacted me before directly.
 5 **Q.** And how were they with you on that call?
 6 **A.** Straight to the point, that he'd been ventilated ... to
 7 rest his organs. And I truly believed that was the
 8 case. I didn't know at that point enough about the
 9 ventilation process. I should have been told about the
 10 ventilation process. I believe before anybody is
 11 ventilated the next of kin should be informed about
 12 ventilation. I mean, I'm not medically trained. I feel
 13 that I should have been told what it entailed, how they
 14 were going to do ... you know, the whole process,
 15 really.
 16 **Q.** You kept calling the hospital twice a day for updates --
 17 **A.** Twice a day, yes.
 18 **Q.** -- on his condition?
 19 **A.** Yes.
 20 **Q.** And that was through Christmas, through Boxing Day?
 21 **A.** Yes.
 22 **Q.** And you were told that you couldn't visit him in
 23 hospital for Christmas?
 24 **A.** No.
 25 **Q.** Were you still Covid positive at that time?

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1 perhaps, and was going to get the -- he was going to get
 2 better. That's what we felt at that point. I think
 3 that was 20 December, he wrote that. And then of course
 4 things changed on 21 December.
 5 **Q.** You in fact reposted that Facebook post --
 6 **A.** I did.
 7 **Q.** -- praising the staff who you said were working flat
 8 out --
 9 **A.** I did, yes.
 10 **Q.** -- and adding further warnings to his post?
 11 **A.** Yes.
 12 **Q.** But the contact about the possible ventilation was
 13 coming from --
 14 **A.** From my husband.
 15 **Q.** And not the hospital?
 16 **A.** Yeah. From my husband, yeah.
 17 **Q.** And that was on 21 December. When did you next hear
 18 from him?
 19 **A.** I heard in the early hours of the morning on the 21st,
 20 he texted me and said: "Ju, there are people coming into
 21 the ward now. I'm probably going to have to stop
 22 texting" and then it all went quiet. So I was aware
 23 what had happened.
 24 And then at 8 o'clock the following morning, which
 25 would be 22 December, I had a call from the ward

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1 **A.** I was Covid positive on the 16th. I didn't have another
 2 test. I just presumed that, you know, after seven to
 3 ten days I would probably -- I felt okay. I wasn't like
 4 my husband, in -- I was okay. I was functioning.
 5 **Q.** How did it make you feel that you couldn't go in on
 6 Christmas?
 7 **A.** It was devastating. Absolutely devastated.
 8 **Q.** And your family?
 9 **A.** The same. We were all devastated.
 10 **Q.** When were you first allowed to visit Huw?
 11 **A.** I had a phone call from them on December 28, around the
 12 teatime mark, to say that they had agreed that I could
 13 go in to see Huw for ten minutes that evening. They'd
 14 given me a time to go down to the hospital. My younger
 15 son was living with me in Pembrokeshire so we both went
 16 to the hospital together. My eldest son lived in
 17 Swansea so I rang him, obviously, as soon as I got the
 18 phone call. There were -- Covid restrictions were in.
 19 But we were at the point that he was driving to Swansea
 20 and he had a legitimate reason, if he had been stopped,
 21 to come to the hospital to see his father.
 22 So when we got to the car park, the three of us met
 23 up. But only my younger son and I were allowed to go
 24 into the hospital on to the ward where we were gownned
 25 up. My elder son was turned away at the ward entrance.

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1 **LADY HALLETT:** Do you know why?
 2 **A.** Yes, they said there was only two of us allowed to
 3 go in.
 4 **LADY HALLETT:** Oh, I see.
 5 **A.** And basically they said that my -- my son was
 6 devastated, my elder son, and he begged, and they said,
 7 "Yes, you can come back at 10 o'clock." This was at
 8 7 o'clock. So he went back to his car in the car park
 9 and waited until he was able to go in at 10 o'clock.
 10 **MR JACKSON:** And this was 28 December?
 11 **A.** This was 28 December, yes.
 12 **Q.** So you'd not seen your husband for ten days?
 13 **A.** No.
 14 **Q.** And you went into the hospital with your youngest?
 15 **A.** Yes.
 16 **Q.** And what happened just before you went to see your
 17 husband?
 18 **A.** Well, as we walked through the -- it was
 19 a high-dependency unit door, there were probably about
 20 six or seven beds with people ventilated in there. I'd
 21 never been in the high-dependency unit before, but all
 22 I had eyes for was my husband, obviously. And I could
 23 see him as I walked through the door, but we were
 24 stopped as we walked into the ward by two people in
 25 full -- full cover. You know, they were a -- PPE. They

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1 **A.** After ten minutes we were asked to leave.
 2 **Q.** Your eldest son went up and --
 3 **A.** No, no. He was three hours later. We went back down to
 4 the car park and my eldest son was still in the car
 5 park, and he was allowed to go up three hours later.
 6 I presumed at the time the three-hour gap was
 7 because they were doing the kidney function tests on my
 8 husband. I was never really told why, and neither was
 9 my son. He just waited and went in to see his dad at
 10 10 o'clock, and he was there for about ten minutes, ten,
 11 fifteen minutes with his dad.
 12 **Q.** And we'll hear more about his experiences of bereavement
 13 towards the end of your evidence.
 14 **A.** Yeah.
 15 **Q.** You were then told in the early hours of the morning on
 16 29 December that your husband was failing and likely to
 17 pass away?
 18 **A.** That's right.
 19 **Q.** You were at home?
 20 **A.** (Witness nodded)
 21 **Q.** Your sons were at their respective homes?
 22 **A.** My youngest son was living with me and my other son had
 23 gone back to Swansea.
 24 **Q.** So, that left your husband alone at hospital?
 25 **A.** (Witness nodded)

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1 even had oxygen cylinders on their back. And they were
 2 in -- it was quite shocking, actually. And they stopped
 3 us and they said that a DNR had been applied to my
 4 husband, and that he wasn't -- he wasn't well, he was
 5 gravely ill, but they were going to keep fighting for
 6 him, and that they were going to do a kidney function
 7 test after we had stayed with him for the ten minutes.
 8 So, even at that point, I still felt that, oh, once
 9 they sort his kidneys out, you know, we'll have crossed
 10 another bridge, basically. I didn't think for one
 11 moment that that was going to be the last time I ever
 12 saw my husband alive.
 13 **Q.** So, you hadn't realised that at the time?
 14 **A.** Not for one moment.
 15 **Q.** That meant, presumably, that you didn't know that that
 16 was your chance to say goodbye to him?
 17 **A.** No.
 18 **Q.** And you weren't able to see him together as a family?
 19 **A.** No.
 20 **Q.** And how long did you have with him?
 21 **A.** It was exactly ten minutes. We were -- we -- I was able
 22 to stand by his bed. We weren't offered seats. We were
 23 standing next to him. Held his hand, my son held his
 24 hand, his other hand, and it was horrendous.
 25 **Q.** And then you, after ten minutes, left?

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1 **Q.** Did you expect to be given the opportunity to say
 2 goodbye to him?
 3 **A.** Yes, yeah. Yes, I did. I thought that ... yes.
 4 You know, we were in shock. I didn't expect to have
 5 that phone call at 2 o'clock in the morning. Just -- it
 6 was six hours after I'd been with him. I just felt that
 7 they must have known at 10 o'clock when my elder son was
 8 with him, that he was as gravely ill as he was because
 9 within four hours of my elder son leaving, my husband
 10 had passed away. I just felt that maybe a bit of
 11 empathy could have been given to us as a family and we
 12 could have been with him for those last four hours.
 13 That was never an option. You know, that was never
 14 portrayed to us. We were never allowed that option.
 15 **Q.** And you were called very soon after that initial call --
 16 **A.** Ten minutes.
 17 **Q.** -- to be told that your husband had passed away?
 18 **A.** Yes.
 19 **Q.** And you later learnt that his ventilator had been
 20 switched off --
 21 **A.** I did.
 22 **Q.** -- but you weren't told this at the time?
 23 **A.** No, I didn't know that until I had -- I'd sent for his
 24 medical records and reading his medical records, it was
 25 then that we were aware that his ventilator had been

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1 changed from mechanical to manual, and that he had in
 2 actual fact been switched off.

3 **Q.** You were told that you could come and collect the
 4 property?

5 **A.** I was.

6 **Q.** I think you say in your statement that your youngest,
 7 Alex went --

8 **A. (Witness nodded)**

9 **Q.** -- and he was told not to open the bag of items for
 10 72 hours.

11 **A.** To put them in the boot of our car and leave them there
 12 for 72 hours which was a bit daunting, to say the least.
 13 You know, we did as we were told. We left them in the
 14 boot of the car, and after 72 hours, probably to the
 15 dot, we took them out and opened them up. Yeah. Awful,
 16 awful period.

17 **Q.** And what did you do with his items?

18 **A.** His clothing? I was so concerned, I burnt his clothing.
 19 His mobile phone, et cetera, et cetera was dead at that
 20 point. We clinically wiped them all down as everybody
 21 was doing, I suppose, with everything. And I turned his
 22 mobile phone on, and that's when I had a photograph,
 23 he'd taken a photograph, this is my husband, he'd taken
 24 a photograph of himself in his mask for me, and it was
 25 only after he'd passed away and I put his mobile phone

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1 I met somebody in the summer last year who said to me,
 2 you know, gave me his condolences five years after my
 3 husband had passed, and my son said, "Oh, I'd love to
 4 have spoken to him about Dad in his rugby days, or Dad
 5 here", and they, as two sons, never got that, they never
 6 got that closure or that side of their father that they
 7 never knew, you know. They knew Dad as Dad but if
 8 they'd gone to a wake they'd have heard about Dad as
 9 a single man growing up, you know, the rugby-playing
 10 dad. They never got that.

11 **Q.** You mentioned already that you obtained your husband's
 12 medical records months later, but it's right you weren't
 13 able to actually look at them?

14 **A.** I couldn't open them, no. They came.

15 **Q.** Does that mean that you weren't able to properly start
 16 grieving -- (overspeaking) --

17 **A.** I wasn't in the right state of mind to open --
 18 I couldn't actually open the plastic packaging of them.
 19 They -- it was a big, thick package and I thought: what
 20 am I going to read in here now? Do I really want to --
 21 I wasn't sure I wanted to know. There was this doubt in
 22 me, even then, that perhaps there were things in those
 23 records that I didn't want to know, but -- I had to --
 24 I had to build myself up to do it, basically. And I did
 25 eventually open them. And by opening them, that's when

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1 on that the photograph popped up on my phone. A bit
 2 ironic, really, but if you'd known Huw, that was
 3 typical.

4 **Q.** His funeral, then, was on 9 January --

5 **A.** The 7th, I think it was.

6 **Q.** On the 7th?

7 **A.** The 7th.

8 **Q.** We'll hear more in one of your son's accounts of how
 9 that funeral went, in terms of the practices and rituals
 10 that were disrupted?

11 **A.** Yeah, fine.

12 **Q.** But there were various things that you weren't able
 13 to do?

14 **A.** Yes, there were.

15 **Q.** And how did that leave you feeling about the funeral?

16 **A.** To be honest, I think I went through the funeral myself
 17 still in shock. You are. Afterwards, on reflection,
 18 I realised how cold it was, how empty it was. Total
 19 lack of any empathy from anybody, really. It was just
 20 dreadful. There was no rite of passage for my husband.
 21 Nothing was done as he would have wanted, as I would
 22 have wanted, as my sons deserved. You know, every
 23 funeral has a wake. It's where you sit and you, you
 24 know, my sons missed out on hearing about their dad in
 25 his younger days from his friends, and in actual fact

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1 it really hit.

2 **Q.** I'm just going to list off some of the things that you
 3 detail in your statement --

4 **A.** Okay.

5 **Q.** -- about what you found in the notes, which you say
 6 seemed inconsistent with what you'd been told by
 7 hospital staff.

8 So, firstly, that when your husband was first
 9 ventilated, you asked staff if he could hear you, and
 10 you were told that he couldn't. But then the notes said
 11 that he was lightly sedated, so you suppose that he
 12 might have been able to hear you?

13 **A.** Yes, he was lightly sedated, and it actually said in the
 14 notes that he had physically tried to remove the pipe
 15 himself from his throat, which would be typically --
 16 that would typically be my husband. He would have been
 17 fighting. He wouldn't have liked that. So, being
 18 lightly sedated, if he was capable of doing that,
 19 I truly believe he would have been able to know we were
 20 next to his bed.

21 **Q.** There was an entry from the date of the ventilation
 22 which suggested that you'd been updated of the plan to
 23 ventilate him, but in fact you never were updated?

24 **A.** I wasn't.

25 **Q.** There was a -- the do not resuscitate notice appeared to

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1 have been applied for retrospectively?
 2 **A.** There was a lot of retrospective writing in the notes.
 3 Lots of things were retrospectively put in.
 4 **Q.** And you say your recognition of that comes from your
 5 work in the National Health Service?
 6 **A.** Yeah, yeah.
 7 **Q.** You managed to secure a meeting with staff at the
 8 hospital eventually, in July 2024. That was only after
 9 some outside help?
 10 **A.** Yes, I had to engage an advocate to help me, because
 11 I was being put off by the hospital complaints service.
 12 They sent me a very generic letter saying that, as it
 13 was 12 months after my husband had passed, they couldn't
 14 meet with me. Basically I'd left it too late. Yet when
 15 you read down on the generic letter it said "in
 16 mitigating circumstances" you could push for it, so
 17 I did. And in the end I had to engage an advocate, an
 18 independent person who also spoke to the hospital on my
 19 behalf. And after much toing and froing, eventually
 20 I did get my meeting with the health board.
 21 **Q.** And you acknowledge in your statement that you know this
 22 isn't a forum for determining concerns about your
 23 husband's --
 24 **A.** Absolutely not, yeah.
 25 **Q.** -- treatment or the delivery of his care?

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1 he was, how fit he was. They knew none of that. And
 2 nobody asked. And probably, if I'd been able to go into
 3 the hospital, I would have been able to relay these
 4 points to -- to whoever was in charge, to a doctor. But
 5 that was never an opportunity open to me.
 6 **Q.** So, it's the lack of communication or explanation --
 7 **A.** Absolutely. One hundred per cent, yeah. No
 8 communication, really. It was dire.
 9 **Q.** And that's prolonged, then, any answers --
 10 **A.** Yes.
 11 **Q.** -- being obtained for you?
 12 **A.** Yes.
 13 **Q.** And how has that affected your grieving process?
 14 **A.** I would say for the first three years after he passed
 15 I spent three years -- I felt as if I'd spent the
 16 three years fighting to be noticed, to be communicated
 17 with.
 18 So, as a mother, you put your children first. I put
 19 my boys first. I wanted them -- to make sure they were
 20 okay. So, yes, I probably prolonged my own grieving
 21 process until I actually went to the hospital and met
 22 with the hospital board. I wouldn't allow myself to go
 23 down that route of grieving, I suppose. I suppose
 24 that's the correct way of putting it.
 25 **Q.** Now, you've appended to the end of your statement some

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1 **A.** No. No, I understand that.
 2 **Q.** But it might well be important and faithful to the
 3 detail of your statement and your experience for me to
 4 just list those --
 5 **A.** Yes, absolutely.
 6 **Q.** -- for you.
 7 **A.** Yeah.
 8 **Q.** You were angry at the ventilator being switched off
 9 before he died and not being told about that. You felt
 10 it was too soon, particularly given your husband was
 11 always very fit. There's some record of his heart
 12 rhythm showing abnormalities but no action being taken.
 13 When it came to the notice, you didn't understand the
 14 basis for this, given the prior good health and his
 15 relative young age.
 16 This goes with a pattern that you'd identified from
 17 the notes that there were decisions being made on his
 18 behalf or at least without your --
 19 **A.** Absolutely. There was no communication with me at all.
 20 I felt that Huw was just another -- this sounds a bit
 21 corny, but I just felt that he was like another number
 22 on a hospital bed. They didn't know the person that he
 23 was. And they give me the impression, looking back,
 24 they didn't want to know. Maybe they didn't have enough
 25 time. Maybe they were busy. But they didn't know who

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1 accounts given by your sons --
 2 **A.** That's right, yes.
 3 **Q.** -- Alex and Oliver Thomas.
 4 **A.** Yes.
 5 **Q.** And I'll just read those.
 6 **A.** Yes.
 7 **Q.** Firstly, your youngest Alex Thomas:
 8 "As a family we have had concerns about the level of
 9 care my father received.
 10 "The hospital has provided next to no bereavement
 11 support, and what was offered was sub-par at best.
 12 "The day after my father passed away I went to the
 13 hospital to collect his belongings, I was met by an ICU
 14 nurse holding my father's items in a sealed bag. There
 15 was no mention of condolences, just the advice that
 16 I was not to 'open the bag for 72 hours'.
 17 "This was just one example of the lack of aftercare
 18 we received as a family.
 19 "It has caused my mother and I great distress that
 20 it was stated in the notes that we, as a family, turned
 21 down the chance to be with my father when he passed
 22 away.
 23 "It has haunted us that my father had to die alone,
 24 let alone have the medical record state that we had the
 25 option to be there with him when this is simply not

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1 true.

2 "How is it appropriate that when we reached out

3 a few years later, simply asking for some professional

4 advice to clarify some of the notes, staff advised that

5 too much time had passed to receive support.

6 "This is when alarm bells began to ring with regards

7 to the care provided.

8 "I am hoping my father's death will not be in vain.

9 I am praying that this pandemic does not get swept under

10 the rug & I hope these answers prevent traditional

11 trauma being caused in future pandemics."

12 And then from your eldest, Oliver Thomas. Oliver

13 says:

14 "On the evening my father passed away, I took

15 a phone call from my mother at around 5pm to say that

16 the hospital had invited her down to visit my father for

17 10 minutes.

18 "I was living in Swansea.

19 "I drove to the hospital, which was 1 [hour] away,

20 and met my mother and younger brother in the carpark of

21 the mostly deserted hospital between 6.30-7pm.

22 "They went to see my father at 7pm. I was turned

23 away as only two were allowed at a time.

24 "I practically had to beg to be allowed to see my

25 father and was told to return at 10pm and that I could

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1 masks to give our eulogies, the service was being

2 recorded for people to watch from their homes.

3 "Nobody could hear our eulogies as we were muffled

4 behind the masks.

5 "We did not know the vicar and he had no idea who we

6 were or my father was other than what my mother had

7 written about my father. He spoke and prayed within the

8 crematorium without a mask.

9 "We were rushed out of the crematorium halfway

10 through the last song (Midnight Train to Georgia, my

11 father's favourite) ... The service was around

12 15 minutes long. We were told we could not put roses on

13 my father's coffin as is customary. There was no wake

14 (due to [the] guidelines) and I travelled straight back

15 to Swansea, straight from the funeral alone.

16 "The funeral was cold, empty and inhumane. The

17 treatment of my family and I was terrible."

18 Now, Ms Thomas, I understand you've brought with you

19 a further small passage that you would like to read for

20 the Inquiry; is that right?

21 A. Yes, if that's okay.

22 The impact of Covid on those left to grieve the loss

23 of their loved ones is significant. It has devastated

24 so many families. Many of those who have survived are

25 suffering with Long Covid and are likely to suffer for

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1 see him then for a brief time. I waited on my own in

2 the carpark until 10pm when I was gowned/masked up to

3 enter the unit. I spent between 10-15 minutes with my

4 father.

5 "I was told he was gravely unwell and asked to leave

6 but wasn't made aware that this was my time to say

7 goodbye. Even at this point I thought he would pull

8 through.

9 "I drove back to Swansea that evening as lockdown

10 rules meant I could not visit my mother's house in

11 Pembrokeshire.

12 "My father passed away in the early hours of

13 29th December.

14 "The funeral was held on January 7th 2021. I was

15 not allowed to accompany my mother and brother in the

16 funeral car.

17 "I had to meet them at the crematorium having driven

18 there alone on the day. Inside the seats were

19 separated, and we could not sit together due to the

20 guidelines.

21 "We for once, ignored the rules and pulled our seats

22 together.

23 "There were only ten people allowed at the funeral

24 plus the vicar and funeral directors. No hymns allowed

25 no singing. My brother and I were told we had to wear

70

1 the rest of their lives. The strain on people's mental

2 health has been huge. For every Covid death it is

3 estimated that up to nine more people are affected by

4 the bereavement, from the shock of the sudden,

5 unexpected death of a loved one, accepting the reality

6 of their death, the inability to say a proper goodbye or

7 be with them -- be with a loved one is painful and

8 traumatic. Worries about the care their loved one

9 received before they died, this can lead to feelings of

10 anger, guilt, and a prolonged bereavement. The fact

11 that you could not protect them when they needed you the

12 most, the chronic isolation of losing someone during

13 lockdown, the inability of friends and family to support

14 you, the bereaved, during this, the hardest time of your

15 life, is so impactful in itself.

16 Funeral restrictions, that feeling of being unable

17 to give your loved one the send-off they so deserved.

18 Bereavement care was scarce during Covid. I would like

19 to think this has already improved and will continue to

20 improve via education, resources and skills, along with

21 adequate funding of primary care services in the future.

22 I personally have received -- I've reached the

23 acceptance stage of my husband's death. He passed away

24 over five years ago now, and due to the lack of

25 bereavement care offered, I have suffered from an

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1 unhealthy grief. My mind was preoccupied by thoughts of
2 his death, my lack of presence at this time at the
3 hospital for him, the lack of empathy from the health
4 authority during this time in the hospital, his passing,
5 the lack of response from the health authority regarding
6 his care. But I'm not alone. I'm not the only one this
7 has happened to. Thousands and thousands of people who
8 lost loved ones to Covid are suffering in different
9 ways.

10 The impact of Covid-19 is felt everywhere, and my
11 hope is that this Inquiry will lead to a better handling
12 of any future pandemics and that those responsible for
13 the bad decisions during the pandemic are made
14 accountable at last.

15 I want to thank you for listening to my personal
16 account, and thank everybody here for listening and
17 giving me respect in my account in general.

18 **MR JACKSON:** Thank you very much, Ms Thomas, and my Lady,
19 those are my questions.

20 **THE WITNESS:** Thank you.

21 **LADY HALLETT:** Thank you very much indeed, Ms Thomas.
22 I know how tough it must have been for you, I can't
23 imagine how tough it must have been for you but I'm
24 extremely grateful to you. I'm sure your sons are very
25 proud of you.

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1 **A. (Witness nodded)**

2 **Q.** -- and your bereavement following that?

3 **A.** Mm-hm.

4 **Q.** Your mother died in hospital on 16 February of 2021 from
5 a Covid-19 infection acquired by her following her
6 admission into hospital on 23 January of 2021; is that
7 right?

8 **A.** Yes, that's right.

9 **Q.** And at her time of death, she was 71 years old?

10 **A.** Yeah.

11 **Q.** You tell us that she had been in reasonable health in
12 the few years prior to the pandemic?

13 **A.** Yes.

14 **Q.** She had lost her own mother in 2018, and she had also
15 lost her pet dog, Scruffy, in the following year, in
16 2019?

17 **A.** Yes, and I mean, she treated Scruffy like a human being,
18 like one of her children.

19 **LADY HALLETT:** I know that feeling.

20 **MS BLACKWELL:** And both of those events had hit her hard,
21 really.

22 **A.** Yes.

23 **Q.** And had led to her slowing down?

24 **A.** Yeah.

25 **Q.** For example, before those two events, you and your mum

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1 **THE WITNESS:** Yes, and thank you for listening.

2 **LADY HALLETT:** Not at all. And it's very important
3 that I do. I do hope that gradually your grief and the
4 grief of your sons will gradually ease. It will never
5 get better totally, but ease.

6 **THE WITNESS:** No. I'm hoping, yes, thank you.

7 **LADY HALLETT:** Thank you very much.

8 Mr Stanton, is it all right if we carry on with the
9 next witness?

10 **MR STANTON:** (inaudible).

11 **LADY HALLETT:** Thank you.

12 **MS BLACKWELL:** My Lady, the next witness is Therasa
13 O'Hanlon. May she be sworn, please?

14 **MS THERASA O'HANLON (affirmed)**

15 **Questions from LEAD COUNSEL TO THE INQUIRY for MODULE 10**

16 **LADY HALLETT:** I'm sorry you've had to wait.

17 **THE WITNESS:** That's okay.

18 **MS BLACKWELL:** Will you give us your full name, please.

19 **A.** Yes, it's Therasa Ann O'Hanlon.

20 **Q.** Thank you very much.

21 Ms O'Hanlon, you're going to give evidence to the
22 Inquiry today about your mother, Patricia O'Hanlon --

23 **A.** Yes.

24 **Q.** -- and your experience of her being taken into hospital
25 and her passing away --

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1 would go shopping together often and take Scruffy with
2 you, wouldn't you.

3 **A.** Yeah.

4 **Q.** But after that, she wanted to stay at home much more.

5 **A.** Yeah, she used to love our shopping trips because I'd
6 hide behind boxes and jump out on her and make it fun,
7 like a fun day out.

8 **Q.** She lived with pain from rheumatoid arthritis, didn't
9 she?

10 **A.** Yes.

11 **Q.** And she had suffered a number of falls and broken some
12 bones in the years leading up to Covid?

13 **A.** Yeah.

14 **Q.** But you lived very close to her --

15 **A.** Yes.

16 **Q.** -- and you had a lot of contact with her on a daily
17 basis, and you'd see her many, many times --

18 **A.** Yeah.

19 **Q.** -- during the course of a week.

20 When the pandemic hit, was there a further
21 deterioration in your mum's health and wellbeing?

22 **A.** Yeah, she seemed -- she felt isolated, because obviously
23 because of her issues, she had a letter stating that she
24 had to shield --

25 **Q.** Because she was clinically vulnerable --

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1 A. -- because she was -- yeah, clinically vulnerable, so
 2 I couldn't go down and visit and stuff like that, but
 3 I'd be on the phone to her six, seven times a day to try
 4 to keep her entertained and so she knew somebody was
 5 there.
 6 Q. Yes. And you would do her shopping for her, wouldn't
 7 you --
 8 A. Yeah.
 9 Q. -- and drop that off?
 10 A. Yes.
 11 Q. But there was no deterioration in her cognitive
 12 function?
 13 A. No, no. Nothing at all.
 14 Q. Although you tell us that she suffered from low mood
 15 during the pandemic because she was on her own?
 16 A. Yeah, yeah.
 17 Q. After the first wave, did her wellbeing begin to
 18 improve, although she continued to be in physical pain
 19 from her underlying health conditions?
 20 A. Yeah, as soon as we were allowed to get together in
 21 a bubble and so she was part of my little bubble, as you
 22 want to call it, she seemed a lot more cheerful and
 23 happier. She was coming -- getting to her old self
 24 again.
 25 Q. Right. But then, in the approach to Christmas, there

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1 should go to hospital?
 2 A. She said, "I don't need to."
 3 I said, "Mum, I can't do no more. I can't."
 4 So she said, "You do know, if I go, I won't be
 5 coming back."
 6 And I said, "Don't be so silly. You will. It's
 7 safe."
 8 And she just looked at me as if, like: you don't
 9 know -- you know what you're talking about. You know
 10 that I'm telling you the truth. I will not be coming
 11 back.
 12 So, the ambulance men came and she said, "You sure
 13 you're going to make me do this?"
 14 And I said, "Mum, it's best for you."
 15 So ...
 16 Q. And you were unable to accompany her to the hospital?
 17 A. Yes.
 18 Q. And the following day the doctor called you to say that
 19 she'd been admitted to Ward A1 --
 20 A. Yeah.
 21 Q. -- to treat her burns and her fracture?
 22 A. Yes.
 23 Q. And I think that was when you found out that she had
 24 fractured her pelvis, wasn't it?
 25 A. Yes.

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1 seemed to be another downturn and she didn't come to
 2 your house for Christmas dinner, did she?
 3 A. No, because they said that there was going to be another
 4 firebreak, and Covid was rife again, and I think she
 5 just got fed up of the not knowing when she'd be
 6 allowed -- like, allowed to see her daughter, when --
 7 and stuff like that.
 8 So I think -- I think especially after my nan and
 9 her dog died, I think deep down now, she did suffer with
 10 a bit of depression as well. So, it didn't help. It
 11 added to the situation.
 12 Q. And then shortly after Christmas, on 11 January of 2021,
 13 your mum spilled hot water on herself whilst making
 14 a cup of tea, didn't she?
 15 A. Yeah.
 16 Q. And she suffered from burns and blistering. And
 17 although it wasn't known at the time, the shock from
 18 those burns had also caused a fracture to her pelvis?
 19 A. Yeah.
 20 Q. And so her condition, whilst you tried to deal with it
 21 the best you could, deteriorated, and you phoned the
 22 out-of-hours service and was told that she needed to go
 23 to hospital?
 24 A. Yes.
 25 Q. What was your mum's reaction to being told that she

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1 Q. Yes. Did your mum tell you on the phone that she wanted
 2 to come home?
 3 A. Yes, numerous times. And I said, "You can't come home
 4 yet, because they said that they're going to try to fix
 5 your fracture through doing physio, and, like, the
 6 physio is on site, so you need to stay in."
 7 So, I said, "Because you can't go back and forth to
 8 the toilet on your own and stuff like that."
 9 So, she said, "Okay."
 10 So, she said, "Well, I need stuff", she said.
 11 So I took stuff up to her then and gave it to -- we
 12 weren't allowed up to the ward, we had to give it to the
 13 Salvation Army in the concourse.
 14 Q. So, you visited the hospital in the following weeks
 15 many, many times?
 16 A. Yeah.
 17 Q. But you weren't allowed to see her?
 18 A. No.
 19 Q. And the only contact that you had with her was by
 20 telephone?
 21 A. Yeah, on her mobile.
 22 Q. Were other people who were being treated in hospital
 23 able to meet up with their relatives? Were you
 24 conscious of that when you were going to and fro from
 25 the hospital?

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1 A. Well, one day I was stood there because I was waiting
 2 for them to bring any dirty laundry back from my
 3 mother's ward, and I said to them, I said, "There's an
 4 awful lot of people, like, around."
 5 So, they said, "Yeah." They said, "We don't
 6 understand it ourselves."
 7 So, I said, "Well" --
 8 Q. This was the Salvation Army people that you were talking
 9 to?
 10 A. Yeah.
 11 So, I said, "Well, who are they?"
 12 I said, "I thought they had stopped clinics because
 13 of Covid."
 14 And they said, "No, if they could come down from the
 15 wards, if your loved ones could come down from the wards
 16 to visit you, they could."
 17 So, I said, "So, all these, like, patients visiting
 18 people? Visiting, like, people from the outside?"
 19 And they said, "Yeah."
 20 I said, "But" -- I went, "I just don't understand
 21 that."
 22 I said, "I don't just understand why we can't go to
 23 the wards, then, if they're allowing people, patients,
 24 to come down to the concourse."
 25 Q. In the second week of February you became aware, through

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1 and she said, "But there's obviously something wrong
 2 with my patient."
 3 Q. Yes.
 4 A. So, she said, "I tell you what," she said, "I'll tell
 5 them that the family member has phoned up and have asked
 6 for one done."
 7 So, I said, "Okay, then, thank you."
 8 Which then they did. And a couple of hours later
 9 then the doctor phoned up and said that they needed to
 10 see us at the hospital.
 11 Q. Because she'd tested positive?
 12 A. Yeah.
 13 Q. So, you went up to the hospital?
 14 A. Yeah.
 15 Q. And were you told almost straight away that nothing
 16 could be done for your mum?
 17 A. Yes. They said that she wasn't presenting any white
 18 blood cells, or some -- and I said, "Can you just tell
 19 me, like, in normal terms? Is there anything you can do
 20 for her?"
 21 And they said, "Unfortunately, no."
 22 Q. And did you find out then or after your mum died how she
 23 had come to catch Covid?
 24 A. Afterwards.
 25 Q. Right.

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1 the telephone calls with your mum, that she was becoming
 2 quite lethargic, which was unlike her.
 3 A. Yeah. And then it came to a stage where I couldn't get
 4 hold of her. And I had said to my sister: "We won't --
 5 don't go phoning the hospital. If need be, I'll phone
 6 the hospital."
 7 Because I knew how inundated hospitals were at that
 8 time. So, I said, "I'll phone the hospital. Any news,
 9 I'll pass on to you."
 10 So, she said, "Okay, no problem."
 11 So, I'm trying my mother's mobile. No answer.
 12 In the end I phoned the hospital and I said -- there
 13 was this lovely little nurse, my mother loved her, she
 14 always mentioned this one nurse when I was on the phone
 15 to her, and she said, "I've noticed a change in your
 16 mother."
 17 And she said, "I've asked them if she could have
 18 picked some -- picked up Covid", or, "She needs some
 19 sort of tests -- the tests doing because", she said,
 20 "She's been sleeping a lot."
 21 So, I said, "Oh, can you ask them if they can do
 22 a Covid test, then?"
 23 So, she said, "Well, I did mention it to one -- to
 24 my head nurse this morning, and she said, 'Oh, she only
 25 had one done last week', she said, 'She don't need'" --

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1 A. Because I put in a complaint.
 2 Q. All right, well, we'll deal with that in a moment, then.
 3 But you were then able to spend some time with your mum
 4 between the time you found out that she'd got Covid and
 5 her death?
 6 A. Yes, I was allowed on the ward, on the four-bedded bay
 7 where she had been for the past two weeks, which
 8 I wasn't allowed up there before, to see her. And then
 9 I was allowed up to the ICU ward where she was at
 10 end-of-life. And she was --
 11 Q. And she was given a side room, wasn't she?
 12 A. Yes.
 13 Q. Which you say you were very grateful for that --
 14 A. Yes.
 15 Q. -- and the time you were able to spend with her. And
 16 did your sister also visit during those last days?
 17 A. She -- yeah, she did.
 18 Q. Once your mother had passed away you then found out that
 19 when she had been on ward A1, when she had originally
 20 been admitted to hospital, she was placed in a bay that
 21 was very close to a Covid ward.
 22 A. Yeah.
 23 Q. Separated only by --
 24 A. A wall.
 25 Q. -- a set of doors and a ward. And you also described

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1 that the standard of cleanliness and sanitation in the
 2 hospital was terrible, in your words.
 3 **A.** Yeah, it was horrendous. It was really horrendous.
 4 I ... I just couldn't believe what I saw, because when
 5 I had been going to the Salvation Army, there was Coke
 6 stain on the floor, in the concourse. That Coke stain
 7 was there for two weeks while I was going back and forth
 8 that concourse.
 9 **Q.** And were you told that there hadn't been cleaners there
 10 for --
 11 **A.** Yeah, for two weeks.
 12 **Q.** -- for two weeks?
 13 **A.** They tried to make out that I must have missed them.
 14 And I went -- I was up there a lot over, like, four
 15 days. I'm sure I would have seen one cleaner at least.
 16 Because I said, "I know of another hospital, there's
 17 a cleaner going back and fore, back and fore the wards,
 18 constant." So I said, "I didn't see one cleaner."
 19 And when they -- when I'd done the complaint then
 20 they found out that there hadn't been no cleaners for
 21 two weeks.
 22 **Q.** Prior to your mum testing positive for Covid and whilst
 23 she had been in hospital, had she become eligible for
 24 a vaccination?
 25 **A.** Yes.

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1 **Q.** Whilst you were in hospital, in the last few days of
 2 your mum's life, she told you she wanted a simple
 3 afterdeath process through Pure Cremations, didn't she?
 4 **A.** Yes.
 5 **Q.** Without a ceremony.
 6 **A.** Yeah.
 7 **Q.** And she wanted her ashes to be scattered in the sea so
 8 that no matter where you were in the world a little
 9 piece of her would always be with you?
 10 **A.** Yeah.
 11 **Q.** And were you able to honour her wishes?
 12 **A.** Yes.
 13 **Q.** You say at the end of your witness statement,
 14 Ms O'Hanlon, that having to deal with the processes of
 15 your mum dying, you felt that you were just going
 16 through the motions and you were often confronted with
 17 a standard response when you questioned what was
 18 happening, such as it's in line with the national
 19 guidance, without being given any proper consideration
 20 by those to whom you were -- from whom you were
 21 attempting to get information.
 22 You say that you continue to experience bereavement
 23 daily and you know that that will continue.
 24 And finally, you say the circumstances in which your
 25 mum was infected with Covid-19 and died have really

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1 **Q.** And did you receive that appointment letter?
 2 **A.** Yes, I opened the letter whilst she was in hospital,
 3 because it was from a hospital -- a hospital letter, and
 4 knowing that she was in hospital, I just wanted to see
 5 what it was.
 6 **Q.** And that had been her appointment letter?
 7 **A.** Yeah.
 8 **Q.** Following your mum's death, were you offered any
 9 bereavement support or counselling?
 10 **A.** No, nothing at all. I suffer with depression, and the
 11 only counselling I had was because I went to my own GP
 12 in -- about two years after my mother's death because
 13 I said, "I need help."
 14 And they put me on to one of the NHS counsellors.
 15 I had about eight things of that, and it seems like
 16 it -- you're telling them -- by the time you've told
 17 them everything, it stops. And it's like you're on your
 18 own again -- (overspeaking) --
 19 **Q.** Sorry to interrupt you. Have you found support from the
 20 Welsh Covid Bereaved Group?
 21 **A.** Yes.
 22 **Q.** How has that supported you?
 23 **A.** Because we can tell each other how we feel, and we can
 24 relate more to each other, and if it wasn't for the
 25 group and to get in, there wouldn't be nobody.

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1 impacted your bereavement, and have made it very
 2 difficult for you to move on.
 3 **A.** Yes, because of what I saw -- what I witnessed. Like,
 4 my mother was left in urinated bedding overnight,
 5 because they didn't have no bedding for her. She was
 6 screamed at by a nurse because she didn't want to drink
 7 any more water.
 8 **Q.** And do you carry with you what you describe as guilt
 9 because you encouraged her to go into hospital and
 10 that's where she died?
 11 **A.** Yeah, and I should have gone up that one night, and
 12 I should have been there to help her, but I wasn't.
 13 **Q.** No, because you weren't allowed to go into the hospital.
 14 **A.** And I knew if I had gone up there, I'd have ended up
 15 either being banned from the hospital or whatever. They
 16 wouldn't have allowed me in there. So ...
 17 **Q.** No.
 18 **A.** I thought I needed to keep my calm, keep composed. And
 19 seeing those two girls running round with the headgear
 20 on, up on the ICU unit --
 21 **Q.** Those were the nurses, yeah?
 22 **A.** Chasing each other when people were dying.
 23 **Q.** Mrs O'Hanlon, thank you very much for giving us your
 24 story.
 25 That concludes my questions, my Lady.

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1 **LADY HALLETT:** Ms O'Hanlon, I'm so sorry you've had to go
 2 through this. I don't know whether you're going to find
 3 it in any way cathartic or whether it's just
 4 retraumatising you. I do hope it's not. But it's
 5 obviously very important that we hear from people who
 6 have lost parents or loved ones, other loved ones, in
 7 the situation.
 8 I expect your life is full of what-ifs now, isn't
 9 it, especially after that letter about the vaccination?
 10 **THE WITNESS:** Yeah. Well, it is, really, because she wasn't
 11 just my mother, she was my best friend as well.
 12 **LADY HALLETT:** I can't imagine how popular you were with the
 13 local shopkeepers when you were popping out.
 14 **THE WITNESS:** I used to shout at her down the aisles, "Mum,
 15 do you want your vodka?" And she never drunk.
 16 **LADY HALLETT:** Well, at least you've got happy memories.
 17 **THE WITNESS:** Yeah.
 18 **LADY HALLETT:** And I know that in your rational moments you
 19 know that you're not to blame and you shouldn't feel
 20 guilty, but that doesn't help because rational moments
 21 aren't always there for us, are they?
 22 So, thank you indeed for coming along to help us.
 23 I'm really grateful to you. And I know that there will
 24 be people who can help you when you leave the hearing
 25 room.

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1 **THE WITNESS:** Thank you.
 2 **MS BLACKWELL:** Now, I hope you have before you a copy of the
 3 witness statement to which you have --
 4 **A.** I do.
 5 **Q.** You do, thank you -- which you and Fiona Humphries have
 6 jointly prepared on behalf of Northern Ireland Covid
 7 Bereaved Families for Justice; is that right?
 8 **A.** It is, yes.
 9 **Q.** Thank you.
 10 For our records, it's INQ000657842. And I know that
 11 you are keen to give the evidence that's contained
 12 within that statement about your mother and the
 13 circumstances of her death and your bereavement that
 14 followed, and I will come to that, but if I may, I'd
 15 like to begin by asking some questions about the
 16 organisation, and going through some of the topics that
 17 you have knowledge of, in accordance with the members of
 18 that organisation.
 19 So, Northern Ireland Covid Bereaved Families for
 20 Justice is a branch of the UK-wide group. It was
 21 established in September 2021 as both a support and an
 22 action group, with the purpose of coordinating activity
 23 in Northern Ireland, in particular into the handling of
 24 the pandemic and leading calls for a separate Northern
 25 Ireland public inquiry; is that right?

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1 **THE WITNESS:** Thank you.
 2 **LADY HALLETT:** Very well, last one?
 3 I shall return at 1.30.
 4 **MS BLACKWELL:** Thank you.
 5 **(12.25 pm)**
 6 **(The Short Adjournment)**
 7 **(1.30 pm)**
 8 **LADY HALLETT:** Ms Blackwell.
 9 **MS BLACKWELL:** Good afternoon, my Lady. We're going to
 10 begin this session with the evidence of Dr Glen Grundle,
 11 who is appearing remotely from Belfast. May he be
 12 sworn, please.
 13 **DR GLEN GRUNDLE (sworn)**
 14 **Questions from LEAD COUNSEL TO THE INQUIRY for MODULE 10**
 15 **MS BLACKWELL:** Dr Grundle, I know you would have liked to
 16 have been here in person, but for health reasons you
 17 weren't able to travel. Nevertheless, we're very
 18 grateful for you making yourself available to give your
 19 evidence today.
 20 **A.** Yeah, apologies, I really wanted to be there, but it
 21 was -- to guarantee giving evidence, it was safer to do
 22 it remotely. But at least you get the Northern Ireland
 23 evidence from Northern Ireland, so ...
 24 **Q.** Yes.
 25 **LADY HALLETT:** No apologies are necessary.

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1 **A.** It is, yes.
 2 **Q.** Yes. And in your work with the group, there have been
 3 calls made for changes to be made in certain matters
 4 that the government and public bodies need, in the
 5 group's opinion, to be called to account for, in
 6 relation to the circumstances leading to the deaths of
 7 the members of the group during the Covid pandemic; is
 8 that right?
 9 **A.** It is, yes.
 10 **Q.** All right. It is made up of members who have lost loved
 11 ones, both young and old, to Covid-19, in a variety of
 12 circumstances, including in care homes, in hospitals,
 13 and in the community; is that right?
 14 **A.** It is, yes.
 15 **Q.** Thank you.
 16 Now, the Inquiry has already received evidence from
 17 members of your group which in part addressed some of
 18 the issues which we are looking into in Module 10, that
 19 is the impact of the Covid pandemic, and the
 20 restrictions that followed, on members of society. And
 21 I'm just going to mention some of the statements that
 22 have been provided in previous modules because you set
 23 these out in your statement.
 24 Module 1, Brenda Doherty; Module 2, Catriona Myles;
 25 Module 2C, Marion Reynolds; Module 3, Catherine Todd;

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1 Module 4, Tom Black, Martina Ferguson, Agnes McCusker
2 and Gregory McQuitty; and Module 7, Hazel Gray.

3 And I know that my Lady will takes into account the
4 parts of those statements that relate to the issues in
5 this module.

6 I want to now deal with several topics that I know
7 you have covered within your statement served on behalf
8 of the group. And in taking you through these,
9 Dr Grundle, I want to also put up on screen some
10 excerpts from Northern Ireland contributors to the Every
11 Story Matters campaign.

12 Now, I know that you personally have expressed your
13 opinion that you would have preferred the quotes of
14 respondents to the campaign to have remained
15 identifiable and not to have been anonymised but
16 nevertheless you agree that the contributions which
17 we're going to deal with remain valid?

18 **A.** Oh very much so, yes.

19 **Q.** Thank you. So could we begin, please, in relation to
20 restrictions on contact during the pandemic period to
21 look at the Every Story Matters record.

22 It's INQ000659894 -- thank you -- and can we go to
23 page 22 and to highlight the two paragraphs at the
24 bottom of the page and on to the next page, please.

25 Thank you.

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1 **A.** Yes, very much so. I mean, my own personal experience,
2 my mum left in an ambulance and I never saw her again.
3 The doors shut, and that was it. I never even saw her
4 (unclear). I have no acceptance, I have no closure,
5 I have no peace over it. I go to her grave at least
6 twice a week and I could conceivably turn around and she
7 would be there because I have no acceptance of what
8 actually happened to her. The last I saw, was the doors
9 being shut in an ambulance, and as you're aware -- well,
10 we'll probably be discussing in a little while, these
11 circumstances were particularly traumatic at the end.

12 **Q.** Yes, thank you very much.

13 Could we go down to page 23, please, of the record,
14 and scroll down and highlight that passage. Thank you
15 very much.

16 "The uncertainty about what happened to their loved
17 ones in final days has left many family members
18 heartbroken. These unanswered questions about the death
19 of their loved one have often had a detrimental impact
20 on mental health and complicated their grieving
21 process."

22 A bereaved person from Northern Ireland said:

23 "We lost our Daddy early in January 2021. He was
24 68. Life and soul of the party. It was the most
25 surreal experience and over three years on I have

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1 We can see that:

2 "The pandemic restrictions [that were imposed] meant
3 that many family members and friends were unable to be
4 with their loved ones at the end of their life. This
5 meant that the last time they saw their loved one was
6 when they were taken away in an ambulance or before they
7 went into a hospital or care setting. Many bereaved
8 people said they felt completely unprepared and shocked
9 when their loved one died.

10 "You never prepare yourself for somebody passing
11 on, especially if you see them today and then they're
12 coughing tomorrow. The next day, they can't breathe.
13 Do you know what I mean? It was so, so quick.
14 I remember, we didn't have a chance to even say goodbye,
15 because the moment that she left the house, and went to
16 the hospital, we couldn't visit her. I think, from the
17 day that she knew, she passed on within five days."

18 And then a bereaved daughter from Northern Ireland:

19 "I begged for me and my sister to be with Daddy when
20 he died. We weren't even given that. Different trusts
21 had different rules, some were allowed [to see] them and
22 we weren't, it was absolutely horrendous."

23 Now, are those sentiments also reflected,
24 Dr Grundle, in the evidence that you have collected on
25 behalf of your group?

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1 nightmares. Did he suffer? Was it him in the coffin?
2 Did we cremate the right person? Amongst a dozen more
3 questions we will never get the answers to."

4 And then a bereaved niece from England:

5 "I think the most heartbreaking thing for us was
6 that he passed away on his own, alone, and we don't know
7 if he was in pain, if he wasn't in pain, or what was
8 happening. I mean, it just feels unknown, and it has
9 affected us a lot, to be honest. My mum, especially.
10 She went through depression after."

11 Thank you.

12 So not having contact with your loved one, not
13 knowing what happened to them in their final days and
14 hours, how does that affect the bereaved, Dr Grundle,
15 and how does it prevent them from being able to move on?

16 **A.** Well, the isolation and separation, it leads you to
17 believe that you weren't there for someone. It also
18 causes doubt over what actually happened. My own
19 experience, I was told certain things by staff that
20 weren't true. They were our eyes and ears at the time,
21 and they unfortunately didn't act in the way that they
22 should have done.

23 **Q.** Yeah.

24 **A.** That separation, I was the person who sort of looked out
25 for my mum in every aspect. I knew everything, every

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1 little sign with her, and I wasn't there to see
 2 everything. So you're left with the feeling that you
 3 could have helped if you'd actually been there.
 4 **Q.** Yes.
 5 **A.** But the main overriding sentiment I think is probably at
 6 the end for everyone, where we know our loved ones died
 7 on their own, and we weren't there. That separation
 8 tears us apart. It's things that I found out after, the
 9 state my mum had been in, and I wasn't there. I wonder
 10 if she felt let down, if she wondered why I wasn't
 11 there. That separation is something that cannot ever
 12 happen again.
 13 **Q.** Thank you. I want to move on to look at some parts of
 14 your witness statement that deal with communication or a
 15 lack of communication, and it's at INQ000657842. If we
 16 could go to page 11, please, and highlight
 17 paragraphs 37, 38 and 39. We can see the impact on
 18 mental health and wellbeing on these three people.
 19 "Paula Creighton lost her mother, May, on
 20 12 November 2020. After her death, she describes trying
 21 to get in touch with mental health organisations but
 22 says, 'There was never anybody there.'
 23 "Lauren O'Neill lost her father John Joseph O'Neill
 24 on 13 December 2002" -- I think that should be 2020.
 25 "Following his death she states: 'I'm in terrible

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1 Many of us, and I include myself in this, because of
 2 our experience with hospitals, we don't want to see
 3 healthcare professionals. We put things off because of
 4 how we were treated in the aftermath of our loved ones'
 5 deaths. We don't want to deal with them.
 6 **Q.** Yes, the Inquiry has also heard of a dismissive attitude
 7 by some of what happened during Covid and I'd like to
 8 just look at the roundtable summary report, please.
 9 Which is INQ000588201, thank you.
 10 Funerals, burials and bereavement support.
 11 Then turn to page 13, and highlight the passage of
 12 information that was provided by your organisation,
 13 Dr Grundle. Thank you.
 14 "Covid-19 Bereaved Families for Justice Northern
 15 Ireland also shared how many of their group members felt
 16 throughout the pandemic that they had to justify how
 17 their loved one died. This was because everyone was
 18 hearing about Covid-19 and forming opinions about
 19 Covid-19 deaths. They described how having to answer to
 20 people about their loved one's death became an
 21 additional burden that intensified their feelings of
 22 isolation and alienation from others in their lives.
 23 They reflected on how questions they received about
 24 their loved one's death, such as asking how old they
 25 were, or whether Covid-19 was real, belittled the losses

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1 will and mental shape. It never goes away. It stays
 2 with you forever."
 3 And Annetta Milliken, whose father's death has
 4 already been described in the statement, describes how
 5 she and her mother were significantly affected by her
 6 father's death, noting that her mother's illness was
 7 significantly affected, and that it had caused ongoing
 8 mental health issues.
 9 She had attended cognitive behaviour therapy weekly
 10 in hospital as a result, but says that there was no
 11 further assistance. And she says, "Our lives are
 12 shattered."
 13 And are those sentiments reflected in a lot of the
 14 information that your organisation gathered about the
 15 effects of grief during the pandemic period?
 16 **A.** We're all damaged, and damaged beyond repair. This is
 17 about impact, and probably the greatest demonstration
 18 that I can give you of that impact is that I go to bed
 19 every night and I don't sleep very well, but when I do,
 20 I really don't care if I wake up in the morning. In
 21 fact it would be a blessing if I didn't. And that is
 22 the impact of what has happened, of how we have been
 23 damaged. That is the mental impact of that, and that
 24 also goes into the physical side of things because we
 25 are suffering with physical health problems as well.

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1 they and their members had experienced, leaving them
 2 feeling angry and dismissed."
 3 And are those sentiments that you acknowledge and --
 4 **A.** Yeah --
 5 **Q.** -- reflect --
 6 **A.** -- very much so. Again, I was questioned constantly
 7 about -- even before my mum died, while she was in the
 8 hospital, people on the street would shout over to me
 9 asking me questions. It was a new virus, everyone
 10 wanted to know everything about it, how it affected you.
 11 There are so many things about Covid bereavement that
 12 are unique, that you will not experience with any other
 13 type. All those questions, some of the people were
 14 genuinely concerned, others were just wanting to get
 15 information.
 16 But we were also faced with, especially early on in
 17 the pandemic -- and my mum died in April 2020 -- we were
 18 faced with every second word was "Covid", everywhere.
 19 The source of your loved one's death pounded you from
 20 everywhere. And we also had to deal with the daily
 21 counts, the people who were in hospital, the people
 22 who'd died, knowing our loved ones were part of that
 23 statistic.
 24 The interest in the virus on the streets, really,
 25 and from everyone, was so intense. And you're right

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1 with the -- sorry, the quote is right, about lives sort
2 of being dismissed, "Oh, she was old", or, in my mum's
3 case, "She had MS", or there were certain -- this is
4 something that we can look at with the health
5 authorities as well. My mum, the first thing they did
6 on arrival in A&E was tried to get her to agree to
7 a DNACPR, simply because she was 73 and she had MS.

8 Two categories -- and I emphasise categories, not
9 human beings -- that were deemed jetsam to the health
10 authorities in an already sinking health service. And
11 the same, I think, could be said for the loved ones
12 who -- sorry, the members who had lost their loved ones
13 when they were jettisoned into the care homes.
14 **Q.** Yes, thank you, and let's look at the experiences of
15 some others living in Northern Ireland who were bereaved
16 and let's go back to the Every Story Matters record,
17 please, and down to page 47, and can we highlight the
18 contributions from those in Northern Ireland. Thank
19 you.

20 "We heard from contributors in Northern Ireland who
21 were unable to hold traditional wakes in their homes
22 before the funeral. Friends and family not being able
23 to come together to mourn and share memories about their
24 loved one made it difficult for people to process their
25 grief.

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1 And:

2 "My mother spent five weeks in hospital and
3 I decided there was nothing stopping me from getting her
4 home [after she died]. I got her home for three nights
5 and I argued with them, yes, her coffin was closed, but
6 nothing was stopping me from bringing her home, she was
7 a lady and deserved to come home. A lot of people were
8 against it and didn't come to pay their respects, that's
9 fine, but it's not their mother. If I didn't do that,
10 I'd be a lot worse today. I was proud [of bringing] her
11 home."

12 Having a wake and the whole process around funerals
13 is very important to many, but particularly to those in
14 Northern Ireland, isn't it?

15 **A.** It is, very much so, again. Personally, my mum's
16 funeral was restricted to ten people, a short graveside
17 service. There was nothing that was able to be done
18 before. I, slightly selfishly, I think, I didn't mind
19 the restriction on the funeral as such because I had to
20 speak and I'm not actually that comfortable with public
21 speaking. But I felt guilty that I wasn't able to give
22 her a proper send-off and a few months later I did have
23 a memorial service with a piper for her. But that's
24 only my own sort of personal experience.

25 As regards others, it is extremely important.

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1 "We have a three-day wake, the body would have been
2 brought home to us there and people, friends, family,
3 cousins, acquaintances, whatever, all would have been
4 allowed to come along and have some soup 24/7,
5 basically. So, that didn't happen. [My brother's
6 coffin] went straight from the undertakers to the church
7 [too], there was a ceremony with family and friends
8 social distancing, and whatnot and, then internment at
9 the adjoining graveyard."

10 And then another:

11 "It was still difficult, it took us a lot longer,
12 I think, to, kind of, heal or to move on and accept
13 things than what it would've normally have done.
14 Because, like, what you would've done is you would've
15 had your wake, and you would have had everybody round,
16 a lot of families and friends, and everybody would've
17 told stories, and you would've reminisced and all that
18 sort of stuff, and that always helps with the grieving
19 process. Whereas, this time, we didn't have that same
20 kind of support network."

21 "[My husband] died alone [at] hospital, we had 25 at
22 a very small funeral, we had no wake and that's
23 important here, it's where we tell stories and get
24 together and grieve, I don't know whether I've grieved
25 properly."

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1 I have a friend who I don't think he'll mind me saying,
2 who lost his mum a couple of years ago, and they had
3 a wake. I think it was something slightly stronger than
4 soup that they had, but it was a great occasion -- well,
5 not a great occasion, but it was a -- it really helped
6 them all come together as a family and share memories
7 and really support each other and come to terms with
8 what had happened. And that is very much part of the
9 culture here.

10 I would like to sort of separate certain elements of
11 that immediate process after a death where, with the
12 wake, and the wake is part of that process where it
13 helps you to come to terms with the death. I can give
14 a contrasting example. The other person who's the most
15 important person in my life was my -- my mum and
16 I always said that we were best friends, and we were,
17 and mum and son were best friends as well, but I had
18 a best mate from the age of 3 years old, a guy called
19 Martin. We grew up just the next street from each
20 other. He died suddenly in 2018. Thanks to his wife
21 got it to go into the funeral parlour on two different
22 days. I sat with him, I know he wasn't there but I got
23 to tell him things I wanted to. I told him I loved him.
24 I got to give him a kiss on the forehead. He was
25 someone I loved deeply. As kids, we were inseparable,

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1 like twins. And I miss him every day but I accept his
2 death because I saw him. I was able to sort of say
3 goodbye in a certain way.

4 It hurts, but with my mum there is no acceptance of
5 her death. I wasn't allowed to view her body which
6 I can't understand because it could have been done from
7 behind a screen. I wasn't even allowed to identify her
8 body and I was her requested next of kin and her
9 nominated first contact. And that was all part of that
10 post-death process of coming to terms -- the wake comes
11 into that as well. The wake is the support aspect of
12 that.

13 You can also add in the physical contact here, where
14 it was the extreme social distancing at the time, and
15 I had so many people coming up to me and saying, "I wish
16 I could give you a hug, but I can't."

17 That went on so long that -- I hugged my mum just
18 before she went in the ambulance, and ... and ... she's
19 still the last person I hugged properly, until just
20 before Christmas, I hadn't, this -- this past Christmas,
21 I hadn't hugged anyone in any way whatsoever. The
22 longer it went on, the more significance it took that my
23 mum was the last person I'd hugged.

24 **Q.** Yes.

25 **A.** A dear friend and my brother and his wife, I gave sort
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1 be buried with her beads and we pleaded with the
2 undertaker how important this was to her. Only one
3 person was allowed to go to the funeral. We could not
4 pick out one of the five siblings to go. The Cremation
5 was booked for Monday 30th March 2021; however, this
6 could not go ahead because the doctors had not certified
7 the death and released the certificate. She was
8 cremated on 1st April 2020. The fact that we had to opt
9 for a cremation was against everything Mum believed in,
10 but we were not allowed any other option at that time.

11 "We all met at 12 noon on the 1st April 2020 and
12 said a decade of the Rosary. We were able to video her
13 going into the Crematorium as far as we could."

14 And have you heard many stories from your members
15 about how their usual and important religious procedures
16 could not be followed or were curtailed significantly in
17 line with pandemic restrictions?

18 **A.** Yeah, I think everyone, certainly in the early days of
19 the pandemic, you know, faced restrictions in -- in that
20 way. And it -- you know, again, it's that feeling that
21 you haven't done enough. And when it -- certainly when
22 it's someone religious, and when it's the case that
23 maybe someone -- the faith has been extremely important
24 to them, then you feel you're letting them down.

25 If I could just lead on with the comments that are
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1 of half hugs to just before Christmas and that's the
2 closest I've got. I know that's not normal. And that's
3 a good demonstration of pandemic grief. There are so
4 many things that the trauma causes, and that is --
5 a major part of it was the restrictions for so many on
6 the funerals and that chance to say goodbye properly.

7 **Q.** Thank you. We're just going to look at one other
8 example of this that comes from your witness statement,
9 please, and it's at paragraph 25, at page 9.

10 If we could put that on screen. Thank you very
11 much.

12 Frances Doherty's mother Mary Magdalene Mitchell
13 passed away on 25 March 2020. They were left waiting
14 all day before the funeral parlour could tell them what
15 was permitted for her funeral. She had been deeply
16 religious and a member of the legion of Mary. She says:
17 'My mother was a deeply religion lady and was a member
18 of the Legion of Mary Catholic group. As such, it was
19 her wish to be dressed in a blue and white gown as she
20 lay in the coffin. The undertakers tried to place her
21 body in the gown, however, her body had been sealed in
22 a body bag and could not be opened. They were able to
23 drape the shroud over the body bag as a mark of respect.
24 My mother's rosary beads were taken off her and
25 disinfected due to potential contamination. She had to
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1 about the handling of the body there?

2 **Q.** Yes, certainly.

3 **A.** Because this is something that many of us are concerned
4 with. We are left with questions that we shouldn't
5 have. My mum couldn't go through the embalming process.
6 I have conflicting accounts from the hospital and the
7 funeral directors, and I have no reason to disbelieve
8 the -- to doubt anything to do with the funeral
9 directors. The hospital told me it was a sealed bag
10 that could not be opened. The funeral directors told me
11 that they were able to do a little bit of preparation.
12 It also involves -- it's something very important to the
13 group, it's left an awful lot of people traumatised, is
14 the belongings that are to go into the coffin or that
15 are to be given back.

16 **Q.** Yes.

17 **A.** Many are left with unanswered questions. I was given my
18 mum's phone. She spoke to me on that less than 24 hours
19 before she died. But I wasn't allowed to have her
20 jewellery. Apparently she had to be buried with
21 everything that she had on, but she would not have had
22 that amount of jewellery on, and the funeral directors
23 agree. Also, a necklace would have been taken off for
24 the chest X-ray. And so that there is no reason to give
25 back a phone which -- apparently the reason is a source
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1 of contamination, yet there would have been more chance
2 of contamination from the phone than jewellery that she
3 wasn't wearing. And also, that mentions cremation in
4 there.

5 **Q.** Yes.

6 **A.** Immediately after my mum's death, a nurse tried to
7 convince me to choose cremation, which is not in
8 a nurse's remit. And it is suspicious as well.

9 **Q.** All right. Well, we're going to come very shortly to
10 your mother's story. But before we do that, I just want
11 to touch upon one final topic of concern that you
12 express within the statement, and that relates to
13 bereavement support or the lack of bereavement support.

14 You say at paragraph 32 that:

15 "One related issue raised by [your] members is
16 a concern about a lack of post-bereavement support,
17 either financial support or by way of periods of leave
18 from employment."

19 And you give the example of Anne Marie O'Neill, who
20 worked in a care home in the dementia unit. She
21 contracted Covid-19. Her father died after contracting
22 Covid-19. Her mental health suffered following both of
23 those episodes and she was found not to be mentally fit
24 to work, but she was given very limited bereavement
25 leave pay, and she is now reliant on benefits. She

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1 something -- I'm not sure, maybe someone with experience
2 of doing it by video link, maybe it works better, but
3 you're already suffering from isolation, and it's not
4 something that I think can be done by telephone.
5 It's -- you need contact. You need, you know, a human
6 being with you.

7 So, I don't think there was any support system set
8 up for people to deal with, first of all, losing a loved
9 one and, secondly, all that came with that, all the
10 financial implications and things, and the total impact
11 on the -- every aspect of their lives.

12 **Q.** Thank you. Turning now, then, to the experience of your
13 mother, Milda Grundle, and of your experience of trying
14 to help her both in life and then trying to discover in
15 death what had happened to her in hospital. Would you
16 like to take us through her story and the concerns that
17 you have, please?

18 **A.** Yes. Certainly, I'll try to go through as many details
19 as possible. You can interrupt if you think I'm getting
20 bogged down.

21 So my mum was taken to hospital on 3 April 2020.
22 She was immediately put under pressure to agree to a
23 DNACPR. No one was allowed to go with her. I spent
24 much of that first evening trying to get in touch with
25 her. I finally spoke to her and she was terrified. She

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1 continues to have difficulty with her mental health.

2 And you say this at paragraph 35, that:

3 "Her overall treatment supports the conclusion that
4 there was and remains a lack of provision for
5 bereavement leave, and tends to highlight the
6 difficulties this can cause for those who have been
7 bereaved. [Her] case also raises questions about
8 whether longer periods of bereavement leave, and greater
9 financial support for the bereaved, would not only be
10 acts of humanity, but would also make financial sense,
11 in order to avoid losing people such as Anne Marie to
12 long term unemployment."

13 And although Anne Marie's example there is given to
14 underline the concerns that you have, is hers not
15 a unique case, and is her story similar to that received
16 by your organisation from other people too?

17 **A.** Yes, I don't think there was any support in any way for
18 anyone. Again, especially early on in the pandemic.
19 But it didn't really improve. There was no real
20 understanding of what people were experiencing at the
21 time. I was sort of palmed off a couple of times by the
22 hospital towards bereavement counselling, but it was
23 totally inadequate. I think someone sent me a PDF file
24 at one point. My GP put me on to bereavement
25 counselling but it was by telephone. And that's not

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1 was alone, very ill, vulnerable. And she was really
2 scared about the DNACPR. And to give you an idea of
3 what that was like, I can give you a contrasting
4 example.

5 She had primary progressive MS and she had suffered
6 from aspiration pneumonia on two occasions in 2019. She
7 was in hospital for a period of about four weeks, and
8 then a period of about six weeks, which was broken up by
9 a failed discharge, which I argued against. I was told
10 on I think at least two occasions that she was seriously
11 ill, and to possibly prepare myself for the worst.

12 There were two consultants involved in her treatment
13 at that time. The same two consultants were involved in
14 her treatment in 2020. A DNACPR was never mentioned at
15 all in 2019, yet it was the first thing they tried to do
16 in 2020 on arrival at A&E. I started -- the next day,
17 I spent trying to get in touch with the consultant. He
18 apparently had the wrong phone number for me, but I did
19 finally speak to him in the evening, and he told me that
20 in his opinion my mum should have a DNACPR because she,
21 in his opinion again, she had no quality of life, as she
22 used a hoist and had carers, which is a definition that
23 fits so many disabled people.

24 I was absolutely shocked. I argued with him on the
25 telephone. I told him that there would be repercussions

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1 if anything ever happened to my mum. I couldn't believe
2 that someone was playing god which can never be allowed
3 to happen. Quality of life is something that only that
4 person knows. I'm the only person who knows what the
5 quality of my life is like, and it can never ever be
6 defined in that way.

7 I hung up and immediately that was -- my mum was
8 taken in on the Friday, that was the Saturday evening.
9 I started emailing politicians and I'd had some contact
10 with the media, Victoria Derbyshire, and BBC over
11 a surgical mesh campaign. I got in touch with them.
12 I contacted friends, my old thesis supervisor, started
13 trying to rally people. I was so shocked about it.

14 I then did a couple of interviews on the Tuesday,
15 I think. I got that consultant removed. I was given
16 assurances that the fact that my mum had MS and she used
17 a hoist and had carers would never be a factor in
18 anything to do with her treatment. We got the
19 consultant who had successfully treated her in 2019
20 involved, and both of us were delighted because we both
21 trusted and really liked her.

22 It was a shock, then, to find in my mum's medical
23 records, a DNACPR mentioning MS and hoisted, and also
24 frailty on it. I managed to keep my mum out of hospital
25 for about seven months before that, so there was no need

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1 the -- (overspeaking) --

2 **Q.** Sorry, of course.

3 **A.** No, no, it's my fault.

4 The DNACPR has room for three signatures on it, and
5 only one consultant signed it. There were supposed to
6 be three different people involved in the assessment,
7 and I don't consider it valid because one was the
8 consultant I had removed from my mum's care. Another
9 was the anaesthetist who didn't actually go and examine
10 my mum. He didn't see her, and I think there was
11 supposed to be an actual examination. He took the word
12 of the consultant that I'd had moved from my mum's care
13 and I would like to point out, as well, that that
14 anaesthetist described my mum as an "indefensible risk
15 to staff with CPR".

16 I had said that to a nurse in the hospital, and she
17 was absolutely appalled. She actually finished my
18 sentence when I said, "If they were prepared to try,
19 they should have ..." and she said, "Let you" and
20 I said, "Yes", but of course I couldn't get access to
21 the hospital so I didn't know what was to going on.

22 Yeah, her deterioration. She was treated -- well,
23 first of all, to get to that, the testing was done at
24 the time and it was chaos. She had the test taken in
25 A&E and I got different excuses for the delay that one

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1 to mention anything about frailty. She was doing well.

2 We were happy with the fact that the consultant had
3 taken over, but they continued to try to persuade her to
4 agree to a DNACPR. She didn't agree. She accepted what
5 they told her was that she wouldn't survive, and they
6 weren't going to do anything else. They would not allow
7 her the chance of a ventilator in ICU. They set the
8 ceiling of care at CPAP on the ward.

9 **Q.** Yes.

10 **A.** And she accepted that to a certain extent because she
11 was told nothing would work. However, at the same time,
12 Dr Tom Black of the -- the chair of the Northern Ireland
13 BMA at the time, was on air telling people that in
14 relation to their resources, hard decisions would have
15 to be made. So there was an obvious link there to the
16 resources and I said in an interview at the time that
17 they were terrified at the anticipated tsunami of
18 patients, which there were. They were watching things
19 going on in other countries.

20 So it's my personal belief that my mum was denied
21 a chance at survival. The DNACPR -- sorry --

22 **Q.** No, I was just going to ask you about your mum's
23 deterioration and I thought that you were going to go on
24 to deal with that.

25 **A.** I'll just finish the explanation of

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1 machine in Antrim, I think, had broken down, and there
2 were samples sent to Belfast, that they needed a certain
3 number of samples for a test to be run. And during that
4 time she was treated by staff not wearing PPE, because
5 they were told that it was believed that she had
6 only flu.

7 I have undeniable evidence of that. The hospital
8 still tried to deny it, but it happened. So it is
9 conceivable that my mum was infected in the hospital.
10 But she had a period of improvement, and then
11 deteriorated again, and if the infection did happen,
12 because there are three possible sources, she had
13 domiciliary carers, different carers at different times
14 of the day coming from one house, going to her, going on
15 to another. A huge source of infection. But there were
16 also some reckless family members and there was a PPE
17 incident. So those are the three possible sources.

18 If she was infected before going into hospital, then
19 the day 10, which is what they were all worried about
20 was approaching that weekend, the consultant, even
21 though I have issues with her, I do believe she worked
22 hard to try to get my mum stable before she went on
23 leave for the weekend. It was the Easter weekend.

24 **Q.** Yes.

25 **A.** On Good Friday she went on leave. I was terrified

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1 because I knew what the hospital was like. It's pretty
2 much a training hospital. You don't see any doctors
3 during the weekend; there's junior doctors if you're
4 lucky. The staff is reduced. The general feeling
5 amongst patients is that you try to survive from
6 a Friday afternoon until a Monday morning. And I knew
7 that this is the worst time for my mum, and the staff is
8 not going to be adequate in there.

9 It got to the Saturday, Saturday the 11th, and
10 I spoke to my mum on the phone on that afternoon, and it
11 was the last time I spoke to her. There are certain
12 things that I've never told anybody about what happened
13 to my mum, and that's one I never will, and -- but it
14 devours me every single day.

15 **Q.** And was one of the results of you not being told in time
16 of her fatal deterioration, as it turned out, that you
17 didn't have the chance to go and see her and say
18 goodbye?

19 **A.** No. Well, first of all, I wasn't allowed in the
20 hospital. I was told that I wouldn't have access to the
21 hospital. That was the Saturday afternoon that I'd
22 spoken to her. I knew that it was day 10. I was
23 terrified. I left it. I said to her that it was
24 getting too difficult for her to speak. I sent her some
25 texts and I just hoped and prayed that she would be

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1 looked into it. They never reprimanded anybody. They
2 never provided any sort of explanation for it. They --

3 **Q.** Well, can I ask you, please, about subsequent lack of
4 information as well, because I know that, following your
5 mother's death, you have sought answers to questions
6 about her care in hospital in those final days. And you
7 have also not received the answers that you wanted.

8 I know that you have made those requests of the
9 coroner and also, I think, of the -- for the ombudsman.
10 What was the question that you invited them to answer,
11 and which, in your view, Dr Grundle, remains unanswered?

12 **A.** Well, at the end of both processes, I put reasonable
13 questions to them, which -- they just stonewall you.
14 And that's a major part of the problem for us.

15 One thing was the hospital claimed that my mum was
16 in a fit state for a DNACPR conversation.

17 **Q.** Yes.

18 **A.** That's fine, because she was adamant that she wanted
19 treatment. It was in her care plan before that. Her
20 hospital notes detail how determined she was. But they
21 also listed her symptoms at the time as "sleepy,
22 temperature, and intermittent confusion". And I said to
23 them: how could someone be in a fit state for a DNACPR
24 conversation when those are the symptoms? And they
25 refused to answer.

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1 okay. And I went to bed, I wasn't sleeping, but the
2 next morning, the Sunday morning, I phoned the hospital
3 about 8 o'clock and I was told that she had had a great
4 night, they hadn't had to turn the machine up, she had
5 no temperature, and they were trying to get breakfast in
6 her.

7 And I was ecstatic. I started sending her texts
8 saying, "Mum, you've got past day 10, I'll see you
9 soon", and I got a call back about 9 o'clock to say that
10 she'd had a fatal -- she'd had a sudden deterioration,
11 and that it wouldn't be days or weeks, it would be hours
12 or minutes, and I got a call back a few minutes later to
13 say that she'd passed away.

14 I then found out later that she'd actually suffered
15 a serious deterioration overnight, and I was her
16 nominated next of -- first contact in her requested
17 first next of kin, and no one got in touch that night to
18 tell me. They didn't get in touch. They gave me that
19 false report an hour before she died.

20 I -- there had been friction with staff in the
21 hospital in 2019 over the failed discharge. I don't
22 know if that played a part. But they certainly kept me
23 away from her.

24 They apologised, in the end, for not telling me
25 about the overnight deterioration, but they never ever

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1 This is a major problem for all of us in trying to
2 get answers. There are issues on all levels for me in
3 my mum's care, from individual staff members through
4 hospital trust, the local health authorities, local
5 government up to Westminster, and there needs to be
6 accountability and justice on all those levels, and we
7 have no avenue to get answers and information.

8 I read one other member talking about worrying
9 about, I think, the decomposition of the body. Those
10 are questions we're asking ourselves, and they shouldn't
11 be questions that are in our heads. But we're trying to
12 find out what actually happened.

13 There was no scrutiny. The serious adverse
14 investigations -- incident investigations were suspended
15 at the time. We -- I was directed to the hospital
16 complaint process. They wasted a few months on that.
17 Their evasive tactics were just appalling. They
18 eventually offered an independent review with someone in
19 respiratory in Northern Ireland, basically a colleague.
20 So I went to the ombudsman. Two years, in my opinion,
21 were wasted on that.

22 **Q.** And still no answers?

23 **A.** Still no answers.

24 **Q.** And what's the impact, Dr Grundle, of repeatedly asking
25 the same question of different organisations and still

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1 not getting an answer? How does that affect you?

2 **A.** Well, I can't actually grieve in a way. I really

3 haven't started to grieve. But much of this impact is

4 about the prolonged grief.

5 **Q.** Yes.

6 **A.** If we can't even get information to accept what has

7 happened, to understand, there's no possibility of

8 starting to grieve. And this is happening not just to

9 us. You see this with Hillsborough as well. You know,

10 the families are -- the pain is prolonged. We are

11 dragged down this path. And it is through

12 self-preservation for others.

13 **Q.** Yes.

14 **A.** And that's why an awful lot of the work at the minute on

15 the duty of candour at Hillsborough and things is so

16 important, the Hillsborough Law. We need to have access

17 to this information. And then, maybe we can -- I'm

18 never going to accept -- I'm never going to have closure

19 or peace about what happened to my mum, but I at least

20 need that information to know what happened.

21 **Q.** Yes.

22 **A.** And then to be able to go on and get some

23 accountability. Well, the answers, the truth,

24 accountability, and justice for my mum. And that's what

25 we want.

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1 politicians who are apparently supporting us. I spoke

2 to Gregory Campbell recently, local, who has voiced his

3 support for that and also local inquiry, but we need

4 to -- to guarantee a future we need to deal with the

5 past, first of all.

6 And that future at the minute is not going to happen

7 because there are people who -- there's no deterrent.

8 There are people who will feel free and be free to act

9 in the exact same way, and what has happened during the

10 pandemic will happen again. This is something that will

11 guarantee the future that we all want, by helping us to

12 get that justice for our loved ones.

13 **MS BLACKWELL:** Thank you, Dr Grundle.

14 My Lady, those are all of my questions.

15 **LADY HALLETT:** Thank you very much indeed, Dr Grundle.

16 A number of things, points you've made, have been very

17 important ones, obviously.

18 As far as wakes are concerned, you don't have to

19 persuade me about the importance of wakes. I came from

20 my -- my mother was a cockney, and they had wakes, and

21 they laughed, they cried, they told stories and, as you

22 say, probably had something stronger than soup to drink,

23 but they said goodbye, so I do understand how important

24 it is.

25 **THE WITNESS:** Yeah, that's the importance of it.

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1 **Q.** Yes. And I know that you set out in your witness

2 statement that that's what everybody connected to your

3 group wants. And in terms of recommendations, at

4 paragraph 234, you say:

5 "Our group will make recommendations for the future

6 in our submissions to the Inquiry. There is however one

7 thing we do consider to be of overriding importance, and

8 that is that there is a need to make sure that any

9 recommendations from the Inquiry are in fact

10 implemented."

11 **A.** Yes. And I note that a lot of people draw comparisons

12 with a natural disaster. I used the tsunami of 2020

13 myself. I'd heard it. And people say about an

14 earthquake and things. There is a lot of focus on the

15 future and we are all concerned -- none of us wants this

16 to happen to anyone else ever again. But if this was an

17 earthquake, you cannot build a future on the site of an

18 earthquake. The past and the present need to be sorted

19 first before that can happen.

20 Our loved ones weren't simply sacrifices to create

21 a better future for those fortunate enough to have

22 survived the pandemic. They were real people, and we

23 need to get justice for them.

24 And that can only happen if we are allowed to get

25 inquests and DNACPR reviews, and I know there are

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1 **LADY HALLETT:** Yes, it is, it's saying goodbye properly, and

2 I appreciate that that's really what is probably fueling

3 your prolonged grief is the sense that your mother

4 wasn't -- you weren't with her and you didn't get the

5 chance to say goodbye.

6 **THE WITNESS:** Yeah, that separation particularly at the end

7 when I know the circumstances and how she suffered on

8 her own and she died with a nurse and a trainee nurse

9 with her, and I often ask myself if she thought that she

10 had been abandoned when she needed me the most. And the

11 fact that if I -- something I haven't told anyone was

12 when I got her phone back, I found a draft of a text on

13 it that she'd tried to send me, and I actually

14 accidentally sent it to myself the day after, when I was

15 looking through the phone. I had to look through her

16 phone again recently to find some information, and it

17 wasn't -- she hadn't been able to write it properly, and

18 I don't know why I didn't understand at the time,

19 because it wasn't exactly code breaking, but I realised

20 what she'd been trying to say to me, and she didn't

21 manage to send the message. And if I'd got that message

22 there's not a force in this world that would have

23 stopped me from getting into that ward. But I didn't

24 get it, and that's the separation, that's the damage

25 caused, and some of us, we -- I mentioned an earthquake.

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1 There is an aftermath, to -- hopefully I'm not taking
2 that analogy that seems too far, many of us are trapped
3 in the rubble of that. Some of us, and I include myself
4 in that, won't come out of it. But there are barriers
5 and obstacles in the rubble that can be removed to allow
6 us to get inquests and investigations, and those
7 reviews, and the coroner's service is another service
8 that is in need of overhaul. It has -- it needs
9 funding, and I think they're frightened of the
10 floodgates being opened to Covid inquests by not giving
11 what we need.

12 I'm conscious that I've taken up far too much of
13 your time.

14 **LADY HALLETT:** No, no, you have not, Dr Grundle. I do
15 understand. And I very much hope that you will, and
16 others like you will, come out of the rubble some time.
17 So, thank you very much indeed for the help that you've
18 given.

19 **THE WITNESS:** Could I just say thank you to a couple of
20 people before I go?

21 **LADY HALLETT:** You may.

22 **THE WITNESS:** First of all, thank you to you and the
23 Inquiry. This is something that I've been trying to do
24 for six years, to get to this information out in the
25 right environment, and the Inquiry is the right

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1 **LADY HALLETT:** 2.50. Thank you.

2 (2.32 pm)

3 (A short break)

4 (2.50 pm)

5 **LADY HALLETT:** Ms Blackwell.

6 **MS BLACKWELL:** My Lady, the next witness is
7 Mrs Marie McArdle. May she be sworn, please.

8 **MRS MARIE MCARDLE (sworn)**

9 **Questions from LEAD COUNSEL TO THE INQUIRY for MODULE 10**

10 **LADY HALLETT:** Sorry, if we've kept you waiting all day.

11 **THE WITNESS:** No, no. It's okay.

12 **MS BLACKWELL:** Will you begin by giving us your full name,
13 please.

14 **A.** My name is Marie McArdle.

15 **Q.** Thank you very much, Mrs McArdle, I know that you've got
16 before you a witness statement that you provided to this
17 Inquiry. It's INQ000659979. And you have also
18 subsequently provided a second statement which sets out
19 the evidence and sentiments of your brother, Roddy
20 McIvor; is that right?

21 **A.** That's correct, yes.

22 **Q.** And for the record, that's at INQ000660155.

23 Mrs McArdle, you're attending the Inquiry today to
24 tell us about your mother, Ann McIvor, and about your
25 experience with her and her death, and what followed

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1 environment.

2 And also, I have seen the worst of humanity over the
3 last few years. I ended up -- there was a point I had
4 nowhere to go, and I can't -- I found the UK group, and
5 they put me on to the local group, and Brodie Jackson
6 Canter and PA Duffy, and those people, Pete, and Nicola
7 and Claire, and Peter and Enda especially, and
8 everybody, those solicitors. Everyone from the
9 paralegals and the caseworkers, right up, have been
10 absolutely outstanding to me. They are exceptions, they
11 are exceptional individuals, professionally excellent,
12 and just genuine caring human beings. It is more than
13 work to them. And from the bottom of my heart, I thank
14 them.

15 **LADY HALLETT:** Thank you very much indeed. Several of them
16 are here, Dr Grundle, and I can see them looking very
17 moved, if I may say so, so thank you very much for those
18 kind words.

19 We shall break now, I think, Ms Blackwell?

20 **MS BLACKWELL:** Yes, certainly.

21 **LADY HALLETT:** And I shall return at 25 to --

22 **MS BLACKWELL:** Ten to? 2.50?

23 **LADY HALLETT:** Sorry, I'm losing the plot --

24 **MS BLACKWELL:** I don't think you can see the clock from
25 there, my Lady.

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1 thereafter.

2 Your mother was born on 1 September of 1939, and she
3 passed away on 20 May 2020; is that right?

4 **A.** That's right.

5 **Q.** You describe her in your witness statement as "a strong
6 person and a very private, independent lady". Is that
7 right?

8 **A.** That's correct, yeah.

9 **Q.** Your father had passed away on 10 June of 2008, and
10 since that time, your mother was on her own, but you are
11 a very close family, you describe, of four siblings?

12 **A.** Yeah.

13 **Q.** And I know that you're accompanied today to the Inquiry
14 by your sister Úna?

15 **A.** Yes.

16 **Q.** And you say that you all took it in turns to look after
17 your mum --

18 **A.** Yes.

19 **Q.** -- once your dad had passed away, and she became frail
20 and she had poor mobility; is that right?

21 **A.** Yeah, yeah.

22 **Q.** You paid for her care, and she had a package where
23 carers would come in four times a day --

24 **A.** Uh-huh.

25 **Q.** -- and they would assist her with getting washed and

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1 dressed, but mentally, she was very good?
 2 **A.** Yeah, yeah.
 3 **Q.** You also took responsibility for your mum's care. You
 4 would organise the care packages and you would organise
 5 her food and her medication, and you had a rota amongst
 6 the siblings of looking after her, didn't you?
 7 **A.** (No audible answer)
 8 **Q.** You worked part-time as a social worker up to 2016, when
 9 you gave up work, and then your role was really looking
 10 after your mum?
 11 **A.** Yeah.
 12 **Q.** You love to shop, and so did your mum?
 13 **A.** Mm-hm.
 14 **Q.** And you would often go out together?
 15 **A.** Mm-hm.
 16 **Q.** Is that right?
 17 **A.** That's right, yes.
 18 **Q.** She had 11 grandchildren.
 19 **A.** Mm-hm.
 20 **Q.** And they would often go round and see her, and there was
 21 a lot of contact between your mum and her grandchildren?
 22 **A.** Mm-hm.
 23 **Q.** When lockdown happened, your brother Tom, who lived with
 24 her from time to time, his role as a coach tour driver
 25 stopped, so he was with her more of the time than not;

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1 told me there was a swelling on Mum's leg that they were
 2 concerned about and she was a bit breathless.
 3 Now, when Mum got anxious, she would be breathless,
 4 so we just weren't sure, so we made contact with the GP.
 5 Under normal circumstances, they would have come out and
 6 had a look at Mum, examined Mum, but because of Covid,
 7 they refused to come out. So they said, with the
 8 swelling on the leg, it could be a clot or heart
 9 failure, and it was best that she was seen at
 10 a hospital, so ...
 11 **Q.** How did your mum feel about going to hospital?
 12 **A.** She was very frightened about going to -- she was very
 13 frightened about the whole Covid scenario.
 14 **Q.** Yes.
 15 **A.** And I had never seen my mother afraid of anything in her
 16 life. She was a formidable character, very strong
 17 character. And I didn't actually see her that morning
 18 because we weren't obviously allowed to travel between
 19 the two distance, but my brother was there and he said
 20 she had a lot of fear in her, he'd never forget the fear
 21 in her eyes.
 22 So whenever we told her the ambulance, I told her
 23 the ambulance was coming to take her, and that not to be
 24 frightened, that they'd be wearing their hazmat suits
 25 and they'd be protected, and her response was "They'd

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1 is that right?
 2 **A.** Yes.
 3 **Q.** And the care package that was in place was then
 4 reduced --
 5 **A.** Yes.
 6 **Q.** -- from four times a day to once a day?
 7 **A.** Yes.
 8 **Q.** Is that right? So what happened with the rest of your
 9 mum's care?
 10 **A.** Well, Tom really took over the role. I mean, Mum was
 11 mobile and she was able to get about with a framework.
 12 **Q.** Yes.
 13 **A.** Which was more for safety than anything else, in case
 14 she'd fall over. She was able to make a cup of tea and
 15 she was able to use the bathroom. So she was able --
 16 she was mobile, you know, but frail. But able to get
 17 about. So we decided just to cut down the care package
 18 to once a day, to try to protect her, that there were
 19 less people coming into the house.
 20 **Q.** Right. On 4 April 2020 did carers come round to your
 21 mum's house and did they say that they were concerned
 22 about a swelling on her leg?
 23 **A.** Yeah, so there's a considerable distance between where
 24 I live and where my mother lived, so it's like about an
 25 hour and 15 minutes' drive, okay? So they called me and

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1 better be. I don't want to catch anything from them."
 2 So, that was her attitude.
 3 **Q.** Thank you. And you mention your brother. Is that
 4 Roddy, who was there?
 5 **A.** Yes, that's Rod.
 6 **Q.** And I will read into the record some of his reflections
 7 at the end of your evidence if I may.
 8 **A.** Thank you.
 9 **Q.** You were not able to go to hospital with her?
 10 **A.** No. None of us were allowed to go.
 11 **Q.** And then you called the hospital later on that day to
 12 find out what was happening with her care, didn't you?
 13 **A.** Yes.
 14 **Q.** What were you told?
 15 **A.** Well, it was the start of a nightmare, basically. Each
 16 time you rang you got a different story. Mum had
 17 numerous movements from one unit, from one bed to
 18 another bed during those first 24 hours, and basically
 19 they admitted her then. You know ...
 20 **Q.** Right. And were you able to speak to her?
 21 **A.** Not to my recollection, no. No.
 22 **Q.** Right. Did you understand what was going on and when
 23 she was going to be discharged?
 24 **A.** No, there was no sort of -- the communication was -- one
 25 of my major issues I have with what happened during

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1 Covid, you just were guess -- it was guesswork, and one
2 person would tell you something else and somebody -- the
3 next person would tell you the opposite and it was just
4 guesswork. It was a complete nightmare, and then I was
5 trying to relay this to my siblings, you know, so that
6 they would know. But, you know, initially we felt that
7 Mummy was going in for them to say sort of maybe it was
8 flu, and give her water tablets. We had no idea at that
9 stage for the length of time she was going to be there
10 or that she would lose her life while she was there. It
11 never entered our heads at that stage.

12 **Q.** In fact she was there from 24 April until 13 May --

13 **A.** Mm-hm.

14 **Q.** -- when she was discharged to a care home, is that
15 right?

16 **A.** That's right.

17 **Q.** But then she was back in hospital by 15 May?

18 **A.** Yes. During that period, from the 24th to the 13th,
19 when we would call the hospital, you know, I kept
20 hearing that she's sleeping, that she refused
21 physiotherapy, that she was sleepy, sleepy. My mum
22 never slept. She was walking night and day. If we were
23 staying at night you didn't get sleep because Mum was up
24 and down and you were obviously afraid of her falling.
25 So I do believe Mummy had Covid before she was

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1 On a couple of occasions when I rang they would start to
2 read me out Mum's notes and then I would realise, this
3 doesn't sound like Mum, and then they would say, "Oh,
4 they're the notes of another person, they're not your
5 mum's, hold on a wee minute while we get someone else".

6 So it was so difficult to get information, and ...
7 sorry, I've lost my --

8 **Q.** No, no, not at all. I was asking you about video calls
9 and whether you were able to see her.

10 **A.** Yes, so I -- on I think on two occasions I had a video
11 call before she was discharged. And they were --
12 I mean, it was very foggy, the picture, and very hard to
13 see Mummy and very hard to make out what she was saying.
14 And I found it very frustrating. Yeah. I'm sure it was
15 frustrating for Mummy too, do you know?

16 **Q.** Yes, yes. I think one of your brothers at least or
17 perhaps both of your brothers were allowed up to the
18 hospital to have what's described as a "window visit"?

19 **A.** No, not -- what actually happened was they would have
20 been travelling up and down with clothes to the
21 hospital, you know, with changes of clothes and things.

22 **Q.** Yes.

23 **A.** And on one occasion my -- there wasn't really a system
24 where you could arrange that, but one of my brothers did
25 go round the hospital on the ground floor, but, you

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1 discharged. On the morning that she was due to be
2 discharged to the home, she had a Covid test.

3 **Q.** So that was on 13 May?

4 **A.** Yes, yes. That was on 13 May. And I spoke to one nurse
5 who said there was discrepancy over the test and they
6 weren't sure if she was going to be discharged or not --

7 **Q.** Yes.

8 **A.** -- and to leave it a couple of hours and call back. So
9 I called back in a couple of hours and was spoken to by
10 a senior person whose said no, that Mum's test was
11 positive, she doesn't know what the other nurse was
12 referring to and that of course she would be going to
13 the home, but I believe Mummy had Covid when she was
14 discharged to that home.

15 **Q.** Right. Throughout the period of time we are talking
16 about and up until 13 May, were you able to go to the
17 hospital and visit your mum?

18 **A.** No, we were never allowed near the hospital, no.

19 **Q.** Did you see her at all on a video call?

20 **A.** There were a couple of video calls -- now, I mean, I was
21 constantly -- I mean, it's hard to describe, I was
22 constantly on the phone trying to get updates, trying to
23 find out what was happening with her care, what her
24 condition was, what her treatment was, was she eating,
25 was she sleeping? You know, it was constantly trying.

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1 know, there was no arranged contact. And -- plus, there
2 was -- we weren't allowed to travel to the hospital.
3 The hospital is 30 minutes away from our home, so they
4 only --

5 **Q.** So that was against the rules.

6 **A.** -- went when they had to do -- when they had to bring
7 clothes and nightdresses and things like that.

8 **Q.** Right. So she was discharged into the care home, she
9 went back into the hospital on 15 May?

10 **A.** Yes.

11 **Q.** And did you get a phone call to say that her
12 sat readings weren't good?

13 **A.** Yes. So, Mum was discharged on that 13th night, okay?
14 And I got a phone call and I was delighted, because
15 I could hear her, and I was chatting away to her for the
16 first time, really, I hadn't really got talking to her
17 like that in the hospital. And she said, "Marie, would
18 you get off the phone? I'm seeing Coronation Street for
19 the first time in, you know, three weeks", or whatever
20 it was. And she -- you know, she sounded happy enough
21 to be out of the hospital and nearer home. She would
22 have known some of the staff, she would have known --
23 you know, they were in isolation, obviously, there, but
24 she was at home, home area, if you know what I mean. It
25 was only 4 mile from where she lived.

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1 But the next -- the staff were saying now that, you
2 know, that they were quite annoyed with her appearance
3 when she came from the hospital, you know, with her --
4 she was quite dishevelled, her hair -- she wasn't -- she
5 didn't look like she'd been looked after really that
6 well. And I was -- you know, these were the sort of
7 things where, when you're going in and out of
8 hospital -- outside of Covid -- that I would have taken
9 care of, you know.

10 **Q.** Yes.

11 **A.** But anyway -- yeah, so that was on the Thursday.

12 Friday morning, I got a call from the home to say
13 that her sats -- and that if the family wanted to come
14 up to see her, they were going to call for an ambulance.
15 So I called all my siblings and told them that, "You can
16 go up to the home, you'll see Mummy be transferred out
17 of the home and into an ambulance."

18 **Q.** Yes.

19 **A.** So at least you would have a sight of her.

20 We all started to make our way, various -- I say
21 I was an hour and 15 minutes away, my sister was an hour
22 away, you know. And we started to make our way up
23 there.

24 Then I got a phone call as I arrived there to say --
25 no, I got a phone call a wee bit earlier than that just

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1 **Q.** So she was then taken back to the hospital?

2 **A.** She was taken back to the hospital. And this
3 experience, a second admission to the hospital, was
4 completely different. We had more -- the doctor rang me
5 that evening, the nurse rang me that evening, the doctor
6 rang me the next morning. There was a lot more
7 communication and a lot more, could I say, professional
8 approach to how really I thought Mummy should have been
9 treated prior to the first discharge.

10 **Q.** Yes. On 20 May, did you have a final video call with
11 your mum?

12 **A.** Yes, yes.

13 **Q.** And that was organised through the hospital just before
14 she died?

15 **A.** Yes. Well, prior to this, when the doctor rang me,
16 the -- you know, he said, "We're going to fight very
17 hard for your mum", and even though she had tested
18 positive, we still didn't think she was going to die,
19 because she was a very, very strong woman, you know.
20 But anyway, on the morning, they rang me, it was maybe
21 around 11, and they said that she wasn't going to make
22 it, and that -- I presume it was morphine or -- I don't
23 know, whatever it was going to, but she would be
24 unconscious and if we wanted to speak to her they would
25 arrange a video call.

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1 to say that the doctor was going to prescribe another
2 antibiotic and not -- you needn't bother coming up
3 because she wouldn't be going. And I said, "Well, I'm
4 halfway there and I'll just continue on", because
5 obviously it was over three weeks at this stage and
6 I hadn't seen Mummy, and I thought maybe I'll walk round
7 and see if I can peep in the window.

8 However, when I arrived at the car park, the phone
9 rang again. It was the home to say that she'd crashed
10 and that the ambulance would be there in three minutes.
11 So we were all in the car park, socially distanced from
12 each other, the ambulance arrived, and Mummy was wheeled
13 out of the home.

14 And when she saw me, she said, "A lot of good your
15 praying is doing for me", she said -- my mum was a woman
16 of great faith, as our family is, and she saw my two
17 brothers and she broke down when she saw my sister, Úna,
18 who's here, because Úna is the youngest, the baby.

19 **Q.** So, she saw you all there?

20 **A.** Yeah. And I've nightmares of why did I not hug her
21 then? That was the last time I saw her. Why didn't
22 I approach her and hug her? Why didn't I just, you
23 know, do what so many were doing and forget about the
24 rules and just hug her? I mean, we weren't even able to
25 hug each other, never mind Mum, you know. So ...

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1 So I rang round my siblings and it was arranged that
2 Úna would go first, and then Roddy, and then myself.
3 The quality of that, whether there was someone there
4 holding the camera, Mummy really had her -- she had her
5 eyes closed throughout the call. She couldn't really
6 speak. Completely different than the call I'd had the
7 previous Thursday, as I was saying, the whole -- you
8 know.

9 **Q.** Yes.

10 **A.** And, you know, she was trying to speak but couldn't
11 speak, and, you know, again, you often wonder it was
12 what she was trying to say and -- I mean, you just ...
13 those are the things that you dwell upon, you know?

14 **Q.** Yes. And I think, after that video call had ended, the
15 four of you had a video call together; is that right?

16 **A.** Yes, yes.

17 **Q.** The four siblings?

18 **A.** Yes.

19 **Q.** And you were praying together?

20 **A.** Yes. Well, that was we -- I sort of kept in contact
21 with the hospital during the day, and it was later on
22 that day then, when they didn't think she had much time
23 left, we said -- there's a prayer that we can say when
24 people are dying, the Divine Mercy prayer. So we were
25 saying it in each of our four homes. And we had just

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1 finished when I got the phone call to say that she had
2 passed -- maybe about ten minutes later -- to say that
3 Mummy had passed away. I do believe our lord was with
4 her then, but I wasn't there, and my sister and my two
5 brothers.

6 **Q.** I want to ask you about administrative processes,
7 please --

8 **A.** Yes.

9 **Q.** -- after your mum had passed away. You tell us that you
10 weren't able to dress her for the coffin?

11 **A.** No.

12 **Q.** That your mum was always in a coat?

13 **A.** Yeah.

14 **Q.** That she loved a coat. And you asked, if you sent it
15 down, that they would put it, on top of her, in the
16 coffin?

17 **A.** Yeah, in the coffin.

18 **Q.** And you hope that that happened but you don't know for
19 certain whether it did?

20 **A.** **(Witness nodded)**

21 **Q.** You then describe as an awful confusion the arrangements
22 for the funeral.

23 **A.** Yeah.

24 **Q.** Tell us about that. What it was confusing about them?

25 **A.** Well, like the time my mum was in hospital, I seemed to
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1 shopping, coffee, scone, and now she'd disappeared,
2 she'd gone. Completely disappeared. It's just: where
3 was she? You know, is she really in there? We hadn't
4 seen her.

5 You know, to think that -- I mean she was always so
6 particular about her appearance -- that she was in
7 body bags in there, allegedly. It was just so
8 difficult, you know, and so painful and traumatic.

9 **Q.** And you weren't able to hold a wake for her?

10 **A.** No, no wake. And like I said in my statement it was so
11 different from Daddy. Daddy had died in 2008 and
12 because the wake was like a celebration. Dad was a big
13 character. He was a total extrovert and Mum was a total
14 introvert. And, you know, all his old friends came,
15 family came, we were there, the stories, the craic, the
16 soup, you know, it was just a completely different
17 experience, a loving experience. I look back and
18 I remember Daddy fondly, warmly. With Mum, I can't bear
19 to think about it, it's horrific -- no wake. I mean, we
20 weren't with her, obviously. We weren't with her when
21 she died. She was on her own without her family and
22 family was everything to Mummy. Mummy didn't have
23 a social life, she didn't, you know, her social life was
24 going out with us for a scone or something. She didn't
25 go out with other friends or anything. It was just
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1 spend the whole time on the telephone, you know. And my
2 two brothers went socially distant to speak to the
3 undertaker. And I actually spoke to the undertaker
4 prior to coming over here, and he said anything that was
5 left down was put in the coffin. So I am assured that
6 that has happened.

7 But we were, the whole time: where would Mummy --
8 what was the process? What was to happen? Where would
9 she be buried? You know, our own priest, our mum's own
10 priest, at that stage was not allowing people into the
11 chapel. So, the chapel, it was not possible for her --
12 the coffin to be taken into the chapel.

13 **Q.** Yes.

14 **A.** So the funeral home agreed that she would be in the
15 funeral home and they had a large television and so the
16 priest stood in the chapel four miles away alone, and
17 said the funeral mass, the requiem mass, while we sat
18 socially distanced in a funeral home watching him
19 deliver the mass on TV. So that is how it happened.
20 And as I say, we were socially distanced, we couldn't
21 hug each other, hold each other's hands, the coffin was
22 there in front, and I remember sitting there looking at
23 that coffin going: is Mummy in there? Where ... you
24 know? Like, four weeks prior to the -- or sorry, prior
25 to this, Mum and I had been at Marks & Spencers
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1 family, with Mum.

2 And I think that is why it would have been most
3 important for her to have a wake. Plus she had brothers
4 alive and her sister who lives in Toronto in Canada who
5 called her every day, who came home for two to three
6 months every summer, and stayed with Mum. And that's
7 what -- those are the things that were important to her
8 and those, you know, like my aunt, I was speaking to my
9 aunt before I come over here. She is 90. She is
10 totally compos mentis, fit, a great woman, and she
11 misses Mum so much. It's just a large part of her life
12 that's gone.

13 **Q.** I'd like to touch on some personal impact with you if,
14 I might --

15 **A.** Yeah.

16 **Q.** -- do so, Mrs McArdle. You say that the pandemic has
17 had a terrible impact on your wellbeing including both
18 your physical and your mental health.

19 **A.** Mm-hm.

20 **Q.** You describe yourself as having been depressed and
21 taking antidepressants --

22 **A.** That's right.

23 **Q.** -- because of the impact of losing your mum in the way
24 that you did.

25 **A.** That's right.
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1 Q. And you also say this:
 2 "I ... wish to say one thing in particular that is
 3 very important to me ... I was very close with my
 4 mother, but my mother and I had unresolved issues. I
 5 worked very hard during her life to resolve [them], but
 6 I always believed I would have the chance to say what
 7 I needed to before she passed away. The pandemic robbed
 8 me of that chance."
 9 A. That's right. I'm the eldest, as I say, and my brother
 10 refers to me as the sheriff. And I took on this role
 11 of, as I say, looking after Mum's complete care and, you
 12 know, I would always arrange the social gatherings along
 13 with all of the rest of them, but I did that to prove my
 14 worth to my mother. There are other issues which I'm
 15 not going to go into here today --
 16 Q. No, of course.
 17 A. -- but, you know, and I tried all my life very hard to
 18 do that. And I know she loved me and I loved her. You
 19 know, just that's the way it was. But I always wanted
 20 to have that conversation about the things that were not
 21 right between us. And as I say, at no time did we think
 22 Mum was going to die. And it didn't happen, and it's
 23 ... and I mean, the guilt, the guilt of not seeing her
 24 in the hospital. I took the phone call from the GP the
 25 very first -- sorry, from the carers the very first --

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1 have pushed harder for this with the GP?"
 2 He goes on to say:
 3 "The last time I saw my mother alive was through
 4 a video call facilitated by hospital staff. My wife and
 5 I sat together at home as we tried to communicate with
 6 Mum through a very unclear iPad connection.
 7 "...
 8 "Later that same evening we were informed that her
 9 condition had deteriorated significantly. She passed
 10 away without any of her children present."
 11 He then talks about the nursing home ...
 12 "Passing the nursing home near my home triggers
 13 distressing recollections. I think about my mother
 14 every day. There remains a persistent sense of guilt
 15 within, a feeling that I/we failed her, despite knowing
 16 intellectually that the restrictions were beyond our
 17 control.
 18 "The inability to provide comfort in her final days
 19 has left a deep psychological wound. This has had
 20 a detrimental effect on my mental health and overall
 21 wellbeing."
 22 A. Yeah.
 23 Q. Mrs McArdle, thank you very much. Is there something
 24 else that you'd like to say?
 25 A. Yes, can I just say that the support, you know, there's

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1 on 24 April, and it was me that agreed she should go to
 2 hospital.
 3 Q. Yes.
 4 A. Didn't see her, wasn't with her, you know, I just feel
 5 so much that let her down. And like I say, I didn't get
 6 to have that conversation that I always felt that her
 7 and I could have.
 8 Q. Yes. And Mrs McArdle, in the moments that remain,
 9 I would just like to read into the record some of the
 10 reflections from your brother, Roddy McIvor, that you've
 11 very kindly provided in your additional witness
 12 statement.
 13 A. Okay.
 14 Q. He says:
 15 "My mother became unwell at home. Despite efforts,
 16 a GP did not attend to assess her", and she was admitted
 17 to hospital.
 18 "I clearly remember the fear in my mother's eyes as
 19 she left her home. She did not want to go to hospital.
 20 She was frightened. However, she believed it was her
 21 best chance of recovery.
 22 "The image of her leaving her home in distress
 23 remains fixed in my memory. I continue to question
 24 whether earlier medical assessment in the community
 25 might have altered the course of events and should we

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1 been no support for us. I am a member of the Northern
 2 Ireland Bereaved Group, as you know --
 3 Q. Yes.
 4 A. -- and we have support through each other, and we --
 5 although this is obviously the end of the modules, we
 6 hope to see the recommendations that our Lady will
 7 hopefully recommend, seen through. And on that, then,
 8 my mother died the night that Boris Johnson was partying
 9 on Downing Street. You know, Michelle O'Neill had
 10 a funeral a couple of weeks after Mummy -- allowed for
 11 a funeral to be held a couple of weeks after Mummy had
 12 died. Well, we weren't allowed any of that. So I think
 13 there's a big emphasis on our politicians to listen to
 14 the recommendations. Michelle O'Neill apologised,
 15 I accept that apology, but it's how she will work
 16 towards implementing the recommendations that are made,
 17 and like one of them is like a care partner so that if
 18 anyone ever goes into hospital, there's a partner there
 19 with them, a person who will accompany them. Things
 20 like that. That's where we want the apologies of the
 21 politicians to be seen.
 22 MS BLACKWELL: Thank you.
 23 LADY HALLETT: Thank you very much, Ms McArdle.
 24 I will need your help and the help of people like
 25 you to get the recommendations implemented, because it's

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1 going to take pressure.

2 **THE WITNESS:** Thank you so much.

3 **LADY HALLETT:** So thank you very much for giving evidence.

4 I think we may have given a whole new meaning to the

5 word "soup", have we?

6 **THE WITNESS:** I think so.

7 **LADY HALLETT:** Thank you very much. It can't have been easy

8 for you, I'm delighted that you've got your sister with

9 you.

10 **THE WITNESS:** Okay.

11 **LADY HALLETT:** And I'm sure that all your siblings would

12 have said much the same as you and your brother did

13 about the impact on you.

14 **THE WITNESS:** Yes, well, I'm sure you are getting the same

15 themes coming -- (overspeaking) --

16 **LADY HALLETT:** I am and I have since the very first time

17 I met the bereaved. It's extraordinary just how many

18 stories are so similar. Different aspects, obviously.

19 **THE WITNESS:** Yeah, yeah.

20 **LADY HALLETT:** Thank you.

21 **THE WITNESS:** Thank you.

22 **LADY HALLETT:** Safe journey back to Northern Ireland.

23 **THE WITNESS:** Thank you. God bless.

24 **LADY HALLETT:** Thank you.

25 **MS BLACKWELL:** My Lady, I think we're ready to go straight

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1 when he was 16 and you have two children together, isn't

2 that right?

3 **A.** That's right, yes.

4 **Q.** Are you able to tell me their names?

5 **A.** Linsey and Robin, yes.

6 **Q.** Are you able to tell me a little bit about his

7 personality? How was he as a husband and a father?

8 **A.** Yeah, well, Robert I met, as I say, I was very young,

9 just 16. He worked in the bank in our local town and he

10 was immensely popular there.

11 We actually met when I was playing football, and he

12 was the referee, so ...

13 **Q.** Okay.

14 **A.** But he had a very successful career. He was

15 particularly keen on banking with the farming community,

16 and in fact, that became his -- a large part of -- the

17 biggest part of his career, working with farmers, and he

18 worked with agricultural advisers, and before he retired

19 he worked directly with the Northern Ireland regional

20 director. So, very successful career. And very strong

21 character.

22 He was strong in his career, he was strong with the

23 family. Nothing was ever going to go wrong. You know,

24 Robert just said, "It'll be okay", you know. Everything

25 would be okay with him. He was steadfast.

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1 on to the final witness of the day, Julie McMurray.

2 **LADY HALLETT:** Thank you. Ms Kassamali.

3 You really have been kept waiting until the end, I'm

4 so sorry.

5 **THE WITNESS:** That's okay. Thank you.

6 **MS KASSAMALI:** Please can the witness be sworn.

7 **MS JULIE MCMURRAY (sworn)**

8 **Questions from COUNSEL TO THE INQUIRY**

9 **MS KASSAMALI:** Ms McMurray, thank you so much for attending

10 the Inquiry today. You've already provided a witness

11 statement for this module.

12 **A.** Yes.

13 **Q.** And that's dated 22 December 2025. It should be in

14 front of you. And just for the record, the reference

15 number is INQ000659980.

16 Ms McMurray, you're attending today to tell the

17 Inquiry about the experience of losing your husband

18 Robert during the pandemic.

19 **A.** Yes.

20 **Q.** He passed away on 30 January 2021 in hospital, after

21 contracting Covid-19. And he was 64 at the time of this

22 death.

23 **A.** That's right.

24 **Q.** I'd like to start by asking you a few questions about

25 Robert as you knew him during his life. You met Robert

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1 **Q.** You say he was reassuring, he was strong, considerate,

2 and he actually volunteered?

3 **A.** Yes, he did volunteer. Actually, we both became youth

4 leaders in the town at that time, when we were very

5 young, and he later went on to do other volunteering,

6 and mostly -- if you ever work in the bank, everybody

7 will look for you to be the treasurer, you know.

8 **Q.** Ms McMurray, he actually had another diagnosis a few

9 years before he passed away. Are you able to tell me

10 about that, please?

11 **A.** Yes, in December -- well, just before December 2020,

12 Robert was diagnosed with a cancerous tumour on his

13 bowel, so that meant he had to go into hospital to have

14 that removed. He went into hospital on 29 December.

15 Prior to that, the rules at the time were that I was

16 able to visit, but we would both have to be tested for

17 Covid, and we would have to isolate for a period first.

18 So, my son moved out, he slept on a camp bed at his

19 sister's house, and we were very careful to keep all the

20 rules and to ensure that we isolated as we were required

21 to do.

22 Robert went into hospital. He was in a side ward in

23 the first ward he was in, and he was well cared for in

24 that ward. He had his operation, and he -- that was

25 a success. So the cancerous tumour was removed.

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1 However, I should have said that when he was in his
2 fifties, Robert had been diagnosed with dementia. And
3 although that was a horrible diagnosis, he dealt with it
4 with his usual strength. And, you know, he said, "It is
5 what it is", and I promised that I would look after him
6 in that respect.

7 So his strength remained, and his good humour
8 remained. He was always very humorous. And in fact we
9 had an appointment with a consultant at one stage who
10 wanted to speak to me separately -- spoke to Robert
11 first, and then spoke to me, I assume to see if we were
12 both saying how he was on the same page -- and whenever
13 I came out, Robert said to the consultant, "Well, how
14 did she do?"

15 **Q.** This is before he went into the hospital on --
16 **A.** He was in his fifties when he had his dementia
17 diagnosis. So when he went into hospital, we knew that
18 that would be a huge challenge.

19 At home, before his hospital admission, Robert was
20 still -- well, I was still working full time, so he was
21 safe at home and very happy at home. He was able to
22 walk around the block with the dog, he chatted to
23 neighbours, he was still a key holder for people when
24 they went on holiday. So he was leading a reasonably
25 normal life, and was very, very happy.

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1 out of, and that anybody who was in had been tested.
2 And there were no more admissions at that stage.
3 Admissions to hospital had been stopped. And in fact
4 when we got to 9 January, Robert was the only remaining
5 patient, appropriately, on a side ward, being cared for,
6 but his recovery was quite slow.

7 **Q.** Then he actually moved -- sorry, I just should just
8 clarify, tested for Covid; yes?

9 **A.** Um --

10 **Q.** So, if a ward is on the green pathway, it means that --

11 **A.** Oh, yes, yes, you're tested for Covid before you're
12 allowed into it --

13 **Q.** -- it's Covid negative?

14 **A.** -- and it was -- and the green pathway was really spick
15 and span. There were fewer risks there than anywhere
16 else in the hospital.

17 **Q.** And you say he was there until 9 January?

18 **A.** He actually was there until the 10th. He was the last
19 patient there. And suddenly, at half seven in the
20 evening, a nurse approached me and said, "The ward's
21 closing, Robert has to be moved. You just have to go."

22 And I asked her to please reconsider, because I had
23 seen how insecure he had become in hospital. And I knew
24 it would upset him to be moved again.

25 So, we ran through -- I ran behind the bed being

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1 **Q.** And he went into hospital, then, in December 2020, and
2 on 29 December, you say, for his surgery?

3 **A.** That's right.

4 **Q.** And you said the surgery was successful, but what was
5 the experience like for him in terms of being in
6 hospital with dementia?

7 **A.** Well, initially I was able to be there, and every day,
8 and I was able to comfort him. At times, the staff
9 phoned me to say, "He's a bit unsettled, could you
10 come?" You know, at times when I wasn't there. I was
11 able, really, to be helpful and keep him settled.

12 However, as time went on, he just became more and
13 more confused. That had been the pattern. Although he
14 was very happy at home before he went to hospital, if
15 you'd taken him out of familiar surroundings, he became
16 confused and insecure. So that escalated when he went
17 in a hospital, and my presence was important.

18 **Q.** And he was initially in the elective surgery ward,
19 wasn't he?

20 **A.** That's right, yes.

21 **Q.** So that's the postoperative ward. And you say in your
22 statement that that ward was on the "Green Pathway".
23 Are you able to tell me what the green pathway was?

24 **A.** The green pathway was the term used for the areas that
25 were most protected: there were very few people in and

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1 pushed round all of these corridors, and I had an awful
2 feeling about it, which came to pass, because that was
3 the beginning of the nightmare for him.

4 He was put into a ward which I'd only just recently
5 been told by the hospital was an amber ward, which meant
6 there was a risk of Covid. He was put into a very noisy
7 ward. The patient opposite him was very disruptive.
8 And Robert -- and his notes constantly say that he was
9 expected to have one-to-one care, which he never had,
10 until the end.

11 **Q.** And then after he was moved to that amber ward, he was
12 in fact moved a further three times, wasn't he?

13 **A.** Yes, he was.

14 **Q.** Are you able to tell the Inquiry why he was moved?

15 **A.** Well, it was chaotic. At times I was told because there
16 were -- there was Covid on the ward, so they were moving
17 the healthy patients out, and at times I was told that
18 the healthy patients were staying and the Covid -- so
19 I never actually really knew. And sadly, on 14 January,
20 then, that was the last time I got to speak to Robert
21 face to face.

22 **Q.** And if we could focus on that date for a moment, so in
23 fact the day before, on 13 January, you received
24 a notification -- or rather you were told by the
25 hospital that he may be discharged; is that right?

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1 A. I was told by the hospital that they were looking for
2 a care package for him. He'd -- his operation had
3 resulted in a stoma. I had no experience of how to deal
4 with that, and Robert couldn't deal with it. Apparently
5 there were stoma clinics that, in normal times, had run
6 to help people with that when -- on discharge, but those
7 had all been suspended. So the hospital was looking for
8 a care package for him.

9 Then, on 14 January, visiting was suspended. And
10 I couldn't believe that I wasn't allowed in to him. He
11 wasn't ... he was terrified. You know, he didn't want
12 to be left. For the next period we had video calls --
13 sorry did I interrupt you?

14 Q. No, not at all. I was about to rudely interrupt you.
15 Please carry on.

16 A. For the next period we had video calls when we could
17 have them. But as a dementia patient, unlike other
18 people, Robert had lost the ability to text or to phone
19 us.

20 Q. He needed help, didn't he, in terms of setting up the
21 video calls?

22 A. Yeah, he needed help. And the hospital did try to
23 provide that, but it wasn't consistent, and it was
24 haphazard.

25 Q. So the last time that you were able to visit him was on
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1 discharged on the 20th?

2 A. That's right.

3 Q. But then on 19 January he contracted Covid, didn't he?

4 A. He was diagnosed with Covid.

5 Q. So he remained in hospital then?

6 A. He was too unwell.

7 Q. I'd like to move us a few days forward, please, if
8 that's okay.

9 You describe a fall that Robert suffered in hospital
10 on 23 January. So at this point he's already contracted
11 Covid?

12 A. Yes.

13 Q. You're still communicating with him solely by way of
14 video call, as I understand it?

15 A. Solely by way of video calls. And it was very difficult
16 to get through to the hospital to find out how he was.
17 Ever.

18 Q. And how did you learn about the fall on 23 January?

19 A. I got a telephone call on the evening of 23 January to
20 say that Robert had fallen. He apparently had been
21 checked over and I was told that he was physically okay.

22 After the call, I was obviously very worried about
23 him, and I rang and I rang and I rang all night, and
24 nobody picked up. And I was in desperation.
25 I considered ringing the police and then I thought -- my

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1 14 January?

2 A. That was 14 January, yes.

3 Q. And then lockdown was announced on 14 January?

4 A. Yeah, so I just wasn't allowed in any more.

5 When I saw Robert on the calls, he was distraught.

6 Confusion had really escalated by that stage. He told
7 me that he would rather be dead, which was completely
8 out of character, even after his dementia diagnosis. He
9 asked why we'd left him, the family had left him. By
10 that stage, Linsey and Robin had moved back into my
11 bubble, so we were watching him on a video call. He
12 thought that he must have done something wrong.

13 Q. And you say in your statement that he would plead to be
14 allowed to come home at that point, over the video
15 calls?

16 A. He thought he was going to be getting home. But in the
17 event, the hospital couldn't get a care package for him,
18 because -- they went to the memory services team, who
19 wouldn't accept him because he was under 65, apparently.
20 They referred his case to the physical disability team,
21 who had it over the weekend, and they wouldn't accept
22 him because they don't deal with dementia patients.
23 It went back to the memory team, who sourced
24 a package on 20 January.

25 Q. And I understand the intention was that he would be
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1 rational side said: well, what are they going to do?

2 You know? Anyway, the next morning I finally found out
3 that he'd been moved to another ward.

4 Q. And that ward was the respiratory ward, wasn't it?

5 A. At that stage, yes. And I mean, his notes later showed
6 that he had -- at that stage he was visibly
7 hyperventilating and exacerbation of Covid and anxiety.
8 He may have been physically okay but I really believe
9 that fall affected his mental health and his notes show
10 that he hadn't been seen for some time before he was
11 found on the floor.

12 Q. You didn't actually find out about him moving to the
13 ward at the time, did you?

14 A. No, not until the next day.

15 Q. And it was one of Robert's doctors who contacted you
16 when he was in the ward, so one of the doctors contacted
17 you to tell you that he had been moved to the ward and
18 then to provide you with some updates thereafter?

19 A. Yes, I did get some updates at that stage. However, it
20 was after that and a few days before Robert died that
21 a doctor phoned me and said "I've examined your husband,
22 he's not a candidate for ventilation."

23 Q. And that was one of the doctors on the respiratory ward,
24 wasn't it?

25 A. That was one of the doctors on the respiratory ward.

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1 Q. And are you able to tell the Inquiry, please, what you
2 said in response to that?
3 A. I said to him that I want everything possible done for
4 my husband. And I asked why he wouldn't be ventilated.
5 The reason I was given was that he had dementia, and
6 that the level of anaesthesia required for ventilation
7 wouldn't sit with him. Now, I have to say, you know, if
8 that was a reason not to ventilate Robert, if there
9 was -- if there were fewer routes to recovery for
10 a dementia patient, why didn't they protect him before
11 they moved him out of a green pathway ward?
12 You know, I'll never understand that. So he wasn't
13 ventilated. And the day before Robert died --
14 Q. That's 29 January, isn't it?
15 A. Yes, that's right.
16 Q. You receive a call from the hospital on that date, don't
17 you?
18 A. Yes, I received a call from the hospital to say that I
19 could visit.
20 Q. And that was --
21 A. Finally.
22 Q. Apologies.
23 A. So I rushed over to the hospital, got gowned and
24 everything, and Robert was unconscious and completely
25 unresponsive.

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1 30 January 2021. And you in fact contracted Covid
2 yourself the following day, on 31 January 2021.
3 A. Yeah.
4 Q. Do you know how you contracted Covid?
5 A. Well, I'm convinced that I got Covid going in and out of
6 the hospital to collect and leave in his laundry,
7 because that's what you had to do. So I was literally
8 feet away from Robert every day and I couldn't go in to
9 see him. That's the only place I was.
10 Actually, where the laundry collection point was,
11 was right at the exit. So you couldn't have
12 missed -- you know, staff were coming past you on the
13 way out. I'm convinced that's where I caught Covid.
14 And actually, as far as laundry goes, Robert died on
15 30 January and I got a call the following August, '21,
16 to say that there were some belongings had been found.
17 When I went to get them, they weren't there. So the
18 ward assured me that they'd sent them down, and the
19 people at the laundry collection point couldn't find
20 them. And they never turned up.
21 Q. So those are items that are now missing.
22 Ms McMurray, I'd like to turn next to Robert's
23 funeral, if I may.
24 A. Yeah.
25 Q. You say -- well, his funeral took place a little while

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1 Q. And this was an end-of-life visit, wasn't it?
2 A. Yes.
3 Q. So it was the last time you were able to see him?
4 A. This was the last time that I saw him. He wasn't --
5 I know that Robert would have squeezed my hand or
6 responded in some way if he'd been able. But he was
7 completely unresponsive. And I found that visit really
8 futile, you know. Why, when he was pleading with us,
9 when he just needed a bit of comfort, were we not
10 allowed in before then? And my son and daughter didn't
11 see Robert from something like 20 December. He
12 disappeared, to them.
13 Q. And they joined you for the end-of-life visit, didn't
14 they?
15 A. Sorry?
16 Q. Sorry, they joined you for that visit on 29 January,
17 didn't they?
18 A. Yes, they were --
19 Q. They were able to --
20 A. They didn't get in on 29 January, it was just me, just
21 me. But the notes following the visit say that Robert
22 moaned and lamented for some time. So somewhere I think
23 he must have known I was there but he couldn't
24 communicate.
25 Q. And then Robert sadly passed away the next day on

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1 after his death. On what date did his funeral take
2 place?
3 A. 11 February.
4 Q. And what was the reason for the gap in between --
5 A. That was because I had Covid and, thankfully, it was
6 delayed but at the time we weren't allowed to have
7 a wake or a funeral either, and I know there's been
8 evidence already today but it was devastating that we
9 couldn't have had a wake for Robert, devastating that
10 Linsey and Robin couldn't see people and hear stories
11 about him.
12 Q. And just before we come to the funeral as it happened,
13 and the fact that there wasn't -- that it wasn't
14 possible to have a wake, can I ask, please, where
15 Robert's body was kept between his death and the
16 funeral?
17 A. Robert's body was kept in the funeral home. He wasn't
18 allowed to be brought home.
19 Q. And you wanted him to be brought home?
20 A. Of course, yeah, in Northern Ireland, particularly in
21 country areas, that's what you do. It's very important
22 to have the body home. Very important. And for family
23 to get together. And, you know, it's -- the number of
24 times that we say, in Northern Ireland, "Oh, I only ever
25 see you at a funeral", life is busy. That is where you

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1 see people. That is where your family and friends come
2 together. And that being missed is horrible. It's just
3 horrible.

4 **Q.** And you say, in fact, that that was a point that the two
5 of you had discussed during your treatment. So you've
6 said in your statement that:

7 "It was a promise I had made to him throughout his
8 treatment -- that I would get him home as he so
9 desperately wished. Home, where he felt safe and loved.
10 Sadly, I was not even able to give him that after he
11 died."

12 **A.** Yeah, he spent the period when we should have been
13 having a wake at home, he spent that period in a funeral
14 parlour.

15 **Q.** I'd like to turn to the experience of the funeral
16 itself, if I may.

17 **A.** Yeah.

18 **Q.** So, we've heard that it was delayed due to the pandemic
19 and your own -- your own Covid diagnosis. I understand
20 that the numbers at the funeral -- whilst the funeral
21 took place, the numbers were restricted?

22 **A.** At the time we were allowed 25 people. That included
23 the minister and the undertakers and the singers. I had
24 a husband and wife who were able to sing some songs,
25 because the rest of us couldn't sing. That's also very

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1 **A.** Yeah, really just I'm shocked. I was shocked at
2 Robert's treatment as a dementia sufferer.

3 You know, one in three of us will get the disease,
4 and that he wasn't better cared for was absolutely
5 shocking. If Covid ever happens again, you know, it's
6 got to be different.

7 I felt completely powerless. When you promise to
8 look after somebody in sickness and in health, or
9 promise to look after them in the hospital, you don't do
10 that with the caveat that "Unless somebody decides
11 you're not allowed to do that." You know, you promise.
12 I feel that I failed him. It doesn't matter how many
13 people say, "You've done your best", you know, you make
14 a promise, you intend to keep it.

15 I'll never forget particular scenes of -- in my
16 head -- Robert lying on the floor. I will never forget
17 his video calls, you know, feeling he'd done something
18 wrong. For somebody so upright and honest, that was
19 a terrible way to feel. And he was terrified. And
20 I really think nobody should die alone.

21 And I have to say, and I know you've heard it so
22 many times, my Lady, but I feel completely betrayed by
23 the authorities breaking the rules, whenever I wasn't
24 even allowed to hold Robert's hand when he was terrified
25 and sick and confused. That is just appalling.

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1 important to me.

2 Anyway, so we had 25 there. I waved at my friends
3 and my family across the church. I wasn't allowed to
4 hug them.

5 **Q.** Because they were social distancing within the funeral
6 itself?

7 **A.** Social distancing. Actually, I had to make choices.
8 There were some couples that Robert and I were friendly
9 with, and I had to make a choice between whether the
10 husband or the wife could be present. That was
11 incredibly difficult. And they all wanted to be there.
12 Robert was highly respected. They all wanted to be
13 there to mark that.

14 **Q.** And in fact, as you've said in your statement, that he
15 was such an upstanding, kind and valuable member of the
16 community --

17 **A.** Yes.

18 **Q.** -- he truly deserved a proper funeral and wake, which
19 would have been, as you say, very well attended?

20 **A.** Absolutely, yes. Absolutely.

21 **Q.** Ms McMurray, thank you so much for providing your story
22 to the Inquiry today.

23 **A.** Yes.

24 **Q.** Can I ask if there is anything further that you would
25 like to add?

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1 The only other thing I would like to say is that I'm
2 passionate now about trying to see how things can be
3 done, and I will pursue your recommendations, my Lady.
4 And with Brenda, who you know --

5 **LADY HALLETT:** I do.

6 **A.** -- in the Northern Ireland bereaved group, and Martina,
7 and we will be pursuing those. The group has been
8 a great support, as has PA Duffy, and the legal team.
9 Apart from me pursuing that, I'm very proud of Linsey
10 and Robin and how they have supported me and carried on
11 with their lives and worked. You know, afterwards,
12 Linsey has, with her friend, opened up
13 a dementia-friendly café, and her dad would be so proud.

14 **LADY HALLETT:** What a wonderful idea.

15 **A.** Oh, I'm so sorry he won't be here to see how it's going.
16 You know, so the staff are trained in recognising the
17 signs and how to deal with people. So, yes, it is.
18 It's a great idea.

19 **MS KASSAMALI:** That's wonderful.

20 **THE WITNESS:** Anyway, thank you so much for hearing me.

21 **LADY HALLETT:** No, not at all. Thank you very much. Did
22 you come over today?

23 **THE WITNESS:** Last night, actually.

24 **LADY HALLETT:** Last night. When are you going back?

25 **THE WITNESS:** Tomorrow at lunchtime.

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1 **LADY HALLETT:** So you've got a bit of time to get through.
 2 Have you got somebody with you?
 3 **THE WITNESS:** Yes, I have. I have a colleague from the
 4 bereaved group, Sean.
 5 **LADY HALLETT:** Welcome, sir. I think I've seen you before
 6 too, haven't I?
 7 **THE WITNESS:** Yes, we're not going away.
 8 **LADY HALLETT:** Quite right. I'm delighted.
 9 Well, thank you so much for giving what must have
 10 been a very distressing account for you. I mean,
 11 I can't imagine you -- you'd have to pluck your courage.
 12 **THE WITNESS:** Well, you know, it's just I don't want to feel
 13 powerless any more, you know. And to watch somebody on
 14 their own like that is, it's shocking. It shouldn't
 15 happen. But anyway. Thank you.
 16 **LADY HALLETT:** Well, maybe, together, we can try to make
 17 sure that other people don't have to suffer as you and
 18 your colleagues have suffered. So I'm really grateful
 19 to you. Thank you for coming all the way over and for
 20 all the help that you've given to the Inquiry.
 21 **THE WITNESS:** Thank you, my Lady.
 22 **LADY HALLETT:** Thank you.
 23 I think that completes the evidence for today.
 24 **MS KASSAMALI:** That does, my Lady.
 25 **LADY HALLETT:** Very well, 10 o'clock tomorrow, please.

1 (3.48 pm)
 2 (The hearing adjourned until 10.00 am the following day)

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