

# INDEPENDENT NEUROLOGY INQUIRY

## CHAIRMAN'S STATEMENT

As the Inquiry has now been converted from a non-statutory public inquiry to an Inquiry under the Inquiries Act 2005, I consider that it is appropriate and opportune to say something about what that means for the workings of the Inquiry and for those affected by our work.

By way of background, the Inquiry was established in May 2018 as a non-statutory public inquiry at a time when there was no Minister for Health in Northern Ireland.

At the outset of our work, I decided with Professor Mascie-Taylor, my Co-panellist, that the Terms of Reference would be fulfilled in a manner, which ensured that the voice of patients was heard. To date, we have interviewed 205 witnesses and anticipate finishing almost all of the oral evidence by the end of January 2021. There are approximately 12 further witnesses who are due to give evidence, of whom only 3 have not given evidence previously to the Inquiry. Evidence to date has been unsworn, but the Inquiry had adopted a rigorous and discursive approach to interviewing witnesses.

On 11<sup>th</sup> December 2020, the Minister for Health Robin Swann MLA, converted the Independent Neurology Inquiry from a non statutory public inquiry to a statutory public inquiry. If the conversion had taken place at a much earlier stage of the Inquiry then I might have considered the merits of receiving sworn evidence. Having regard, however, to the advanced stage now reached by the Inquiry, I consider that it would be unreasonable and unfair for the remaining small number of witnesses to be asked to give their testimony in a different manner to those who have previously attended. Nor do I think it would be reasonable or fair to require witnesses who have given their evidence to begin the process again. This would inevitably cause extensive delay to the conclusion of the Inquiry without, in my view, altering the final Report.

It is, therefore, my intention that the Inquiry will continue with its current methodology. The approach to date can be summarised as follows:-

# INDEPENDENT NEUROLOGY INQUIRY

- (i) Patients (or their relatives or carers) can provide evidence to the Inquiry in writing by completing the Inquiry questionnaire. Thereafter if any matter referred to requires further explanation or investigation the relevant individual may be invited to give oral evidence.
- (ii) All witnesses are invited to attend the Inquiry on specific dates and times as communicated by the Inquiry Secretary.
- (iii) All witnesses are provided with relevant documentation touching upon areas, which the Inquiry wishes to explore. Witnesses are requested to provide any documentation under their control and likely to relate to the work of the Inquiry.
- (iv) Where a specific document is required by the Inquiry this will be requested in writing.
- (v) Extracts from the evidence of other witnesses, which is relevant to the testimony of the witness appearing is provided prior to the date for hearing.
- (vi) Witnesses are entitled, but not required, to make a written statement in advance of their attendance.
- (vii) Witnesses may be legally represented when they attend for hearing should they so wish, however this is not required. If a witness is unable to afford representation and in my view fairness dictates that he should have the benefit of legal advice, I will consider making an award for reasonable costs.
- (viii) The questioning of witnesses is to be conducted by myself and Professor Mascie-Taylor.

# INDEPENDENT NEUROLOGY INQUIRY

- (ix) A transcript of the evidence given to the Inquiry is provided to the witness at the conclusion of their evidence and opportunity is given to the witnesses for any corrections to be made before the transcript is finalised.
- (x) Hearings take place in private.
- (xi) Transcripts and documentary evidence will be used by the Inquiry in writing the report. I will restrict, by Order the publication of any evidence gathered by the Inquiry.
- (xii) Individuals named in the report and subject to criticism will be given an opportunity to comment prior to finalisation of the Report.
- (xiii) No patient will be named in the report without their prior consent.

As a consequence of the conversion of the Inquiry to a statutory Inquiry, I can now utilise powers contained in the Inquiries Act 2005. Most significantly:

- a. If necessary, I now have the power to compel witnesses to attend to give evidence to the Inquiry;
- b. I can compel production of relevant documentation.

Further to the conversion, I have also decided to allow witnesses the opportunity to provide the Inquiry with a written closing statement.

In reaching my decisions with regard to restricting attendance at the Inquiry hearings and not to allow publication of evidence at this late stage of our work, I have had particular regard to the matters set out in Section 19(4) of the Inquiries Act 2005 and concluded that were I not to make such restrictions at this stage of our work, the impact on those who have given their evidence to date; the delay caused to the Inquiry's work and the additional work that a retrospective publication would entail would be entirely disproportionate.

# INDEPENDENT NEUROLOGY INQUIRY

The Terms of Reference refer to a preliminary report and a final report. For the avoidance of doubt, the preliminary report will be the substantive report and will include the Panel recommendations. The reference to a final report in the original Terms of Reference was in the event that other related processes and reviews had not concluded their work by the time the preliminary report by the Panel was completed. It is not anticipated that any of the other reviews, which address matters largely outside the Inquiry's Terms of Reference, will in any way change or alter the Inquiry's preliminary report. Nevertheless, and out of an abundance of caution, the Terms of Reference have reserved to the Inquiry the ability to finally comment on any of the other processes, should they touch upon the Inquiry's Terms of Reference.

This Inquiry will make recommendations, which I believe, when implemented will improve patient safety. I have taken the decisions above with a view to ensuring the work of the Inquiry is not delayed and those recommendations can be considered promptly by those with the responsibility for healthcare in Northern Ireland.



Brett Lockhart QC

Chairperson

Independent Neurology Inquiry

11 January 2021