

# THE MORECAMBE BAY INVESTIGATION

Chaired by Dr Bill Kirkup CBE

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6<sup>th</sup> January 2014

Dear Mr Selbie,

## DOCUMENTS AND EVIDENCE REQUIRED BY THE MORECAMBE BAY INVESTIGATION

The Chairman of the Morecambe Bay Investigation, Dr Bill Kirkup's letter of 17<sup>th</sup> October 2013 refers.

The Investigation is now collecting evidence in respect of its terms of reference.

This letter sets out the evidence required from the Public Health England (PHE), as the co-ordinator for public health services. Further requests may be made at a later date.

The Investigation's Documents and Evidence Manager (DEM), Paul Roberts, or the Assistant Documents and Evidence Manager (ADEM) [REDACTED] will be your principle points of contact in relation to evidence management.

The Investigation would appreciate receiving evidence electronically in one of the following formats:

- Searchable PDF
- Word
- Excel

Should this not be possible, please contact Paul or [REDACTED] to discuss alternative ways in which the evidence can be made available to the Investigation.

### Management of evidence by the Investigation

The Investigation recognises that PHE will be concerned to know how material it is being asked to provide to the Investigation will be managed. It will therefore be

helpful for you to know that material sought by and supplied to the Morecambe Bay Investigation from interested organisations and the families of those involved will be viewed and accessed by Investigation staff and the Investigation Panel only.

All Investigation staff, including the Panel, will view the material via a secure internet based database to which access will be controlled by the Investigation's Documents and Evidence Management Team and all Investigation personnel, including Panel members, are required to sign and adhere to the terms of a confidentiality undertaking.

Material and/or documents supplied to the Investigation will be collected from, or derived from, official files that are the property of interested organisations and/or individuals and will be considered by the Investigation as "working papers".

Working papers will be either returned to the relevant interested organisation/family at the end of the Investigation or destroyed by the Investigation and a record of all document destruction will be retained.

The Investigation has applied to the Information Commissioner for Data Protection Act Registration and fully understands its responsibilities holding evidence supplied by interested organisations.

Material and/or documents supplied to and considered by the Investigation will not be provided or shown to any witness in advance of their attendance, by the Investigation. Witnesses will be advised in advance of their attendance what specific topics or areas the Panel wish to ask them about and which of the Investigations specific term(s) of reference they are being invited to provide evidence in respect of.

Should any witness wish to be reacquainted with any material and/or document(s) prior to attending the Investigation for an interview or to give evidence, they will be advised by the Investigation to liaise with their employer, or former employer, to make any necessary arrangements for them to undertake any such preparation.

I trust that being made aware at this early stage of the protocol the Investigation has adopted regarding document management, it will assist PHE in providing material as swiftly as possible.

The evidence required for the Investigation by PHE is set out at Annex A, and should be submitted to the Investigation **within 21 working days** of the date of this letter.

The evidence being sought covers the period before PHE came into being, and you are being asked to source information from the predecessor organisations – (including the Health Protection Unit of the Health Protection Agency and the Public Health Observatory). It may also find it necessary to liaise with the relevant Local Authorities in respect of the transfer of responsibilities of Regional Directors of Public Health.

Once the evidence has been examined, the Chairman will decide who oral evidence should be heard from. Can I remind you that it would be helpful, even at this early stage, if you would advise your staff accordingly and if you would also make contact

with any staff member who has retired or left your organisation. To ensure the smooth running of the Investigation it will be important to ensure we have up to date contact details for those who may be asked to give oral evidence.

If you have any further queries regarding the evidence being requested, please contact:

Paul Roberts: T: 01772 536401 E: [paul.roberts@mbinvestigation.org](mailto:paul.roberts@mbinvestigation.org)

[REDACTED] T: 01772 536390 E: [REDACTED]@mbinvestigation.org

Yours sincerely,

**OONAGH McINTOSH**  
**SECRETARY TO THE INVESTIGATION**

cc. JANE ROSSINI

## Annex A

Evidence sought from PHE should be taken to include information from any predecessor organisations responsible for the delivery of public health functions pertinent and relevant to the Investigation's terms of reference.

1. The PHE policies on improving maternity care.
2. Available data on measuring how well the NHS looks after parents who have miscarried or suffered a stillbirth or cot death. This should include information in response to patients rating how they have been treated, so that improvements to services can be made. This information should be provided for both national and local figures by Strategic Health Authority (up to 31 March 2013). Any additional information for the period 1<sup>st</sup> April to 30<sup>th</sup> June 2013 should also be provided.
3. The Investigation is seeking all relevant documents from the Department of Health that were pertinent to the Strategic Health Authority and the Primary Care Trusts up to and including the 31 March 2013. This will include all correspondence from the Regional Directors of Public Health sent and/or received, regarding maternity and neonatal services at the Trust. PHE are asked to provide the Investigation with all relevant historical documents that were retained by those public health organisations that formed PHE. In particular the Public Health Observatory and the local Health Protection Unit of the Health Protection Agency. In the event that correspondence may have been transferred to the Local Authority Public Health Team on 1 April 2013, that too should be located and provided to the Investigation, and PHE's assistance would be appreciated in securing this.

**From:** Richard Gleave [REDACTED]  
**Sent:** 27 February 2014 07:16  
**To:** Correspondence MB  
**Cc:** Consultations; Duncan Selbie; [REDACTED] Jane Rossini  
**Subject:** CONFIDENTIAL PHE Response on Morecombe Bay Investigation

Dear Oonagh

Further to your letter of 6 January, I enclose the results of the work that we have undertaken on the two legacy areas that came into PHE in response to your request. I wrote to you in January explaining that we would need until 24 February to complete our work and so apologies for the delay in getting these to you.

Attached are reports containing:

- a) The analysis of the local Health Protection services
- b) The analysis of the former North West Public Health Observatory

As we have discussed, the other information from the PCT and SHA is in documents held by DH.

Please let me know if you require any further help with these or further analysis from us.

With best wishes

Richard Gleave  
Chief Operating Officer  
Public Health England

[REDACTED]  
Mobile [REDACTED]

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