

Tuesday, 21 April 2026

1
 2 (2.00 pm)
 3 **THE CHAIR:** Yes, Mr Moloney.
 4 **Questioned by MR MOLONEY**
 5 **MR MOLONEY:** Good afternoon, Dr Gandhi.
 6 May I ask you just a point of clarification to begin
 7 with. As somebody in your role carrying out a Mental
 8 Health Act Assessment in the police station, are you
 9 able to examine the custody record when you go, in order
 10 to check on what has happened to the person during the
 11 time?
 12 **A.** So yeah, the Liaison and Criminal Justice Team are there
 13 in the custody suite who are able to look at some of the
 14 records and able to give us that information, but also,
 15 in my normal practice, I normally go to the sergeant on
 16 desk, ask them what information are they able to share
 17 and are they able to give us, and share with us, and we
 18 form -- take those all in a risk assessment.
 19 **Q.** So you can look at the custody record when you speak to
 20 the sergeant and --
 21 **A.** I can't, no --
 22 **Q.** You can't look --
 23 **A.** To clarify that, I can't look at the custody record.
 24 **Q.** But they can just give you information.
 25 **A.** They can look at it and give us the information, what is

1

1 to ED, came back.
 2 **A.** As per the records that's what was available to me at
 3 that time, yes.
 4 **Q.** Absolutely. Can I just ask you very briefly, please,
 5 doctor about a document EMAS0000002 which is a record
 6 which you may not be aware of, of VC going to hospital
 7 the night before, in the very early hours, five minutes
 8 past midnight of 23 May, EMAS0000002. EMAS is short for
 9 East Midlands Ambulance Service and this is the record
 10 of him going to a hospital in an ambulance, five minutes
 11 past midnight on 23 May, you can see in the top
 12 left-hand corner. Then we see "Chest pain", "Developed
 13 L[eft] side... [of] chest ..."
 14 And then under "IMPRESSIONS" we see "Details":
 15 "acute behavioural disturbance ...mental health
 16 [question mark], c[omplaining]/o[f] chest pain and
 17 hearing mumbling."
 18 Then we go over to the second page and we see there,
 19 under the bottom, "PAST MEDICAL HISTORY":
 20 "P[atien]t admits to having mental health problems
 21 in the past but would not say what. Not currently
 22 medicated for anything on questioning."
 23 And you hadn't seen this?
 24 **A.** No.
 25 **Q.** You weren't aware of this on 24 May?

3

1 relevant, what we are asking.
 2 **Q.** Thank you very much, can we look at NHFT0000168, which
 3 is the RiO record. Just at the first page of it,
 4 really. So this is the RiO instance. And the first
 5 entry is 24 May 2020 at 9.54 am, and this concerns the
 6 referral that you had to deal with, doesn't it, on that
 7 day?
 8 **A.** Yes, it seems correct.
 9 **Q.** Absolutely. And the entry's at 9.54 am, and do you see
 10 the word "Note" in the left-hand column?
 11 **A.** (No audible answer given).
 12 **Q.** Just next to that, it says:
 13 "Prior [to] ... referral [to this referral] he was
 14 seen by Custody Healthcare and following this was sent
 15 to ED ..."
 16 Which is short for emergency department, is it?
 17 **A.** Yes, you're right.
 18 **Q.** "... in order to rule out organic causes to his
 19 presentation, I understand that he had bloods taken
 20 there which came back clear of substances."
 21 And this is Dominic Lloyd who makes the entry:
 22 "... I understand that he had bloods taken there
 23 which came back clear of substances."
 24 So far as you are concerned, VC only went to ED once
 25 that night, didn't he? He was in custody, he went off

2

1 **A.** No. I wasn't aware of --
 2 **Q.** If you had been aware of it on 24 May, would you have
 3 asked questions about this and maybe sought to have
 4 contacted the doctors who dealt with him on the previous
 5 day?
 6 **A.** So if you look at my notes, I did ask him whether he had
 7 any past mental health history, and I also asked the
 8 family, in terms of the mother, and someone -- one of
 9 the team had asked the mother whether there was any past
 10 medical history or psychiatric history, which was "no"
 11 to that answer.
 12 **Q.** Just for reference, that's at page 6 of this RiO record,
 13 but there's no need to go there. I don't think that's
 14 in dispute that you did ask him, but that's not -- if
 15 you'll forgive me, Dr Gandhi, that's not really my
 16 point. I'm not suggesting that, in relation to that,
 17 that you didn't ask; I'm only suggesting that if you'd
 18 known about this, might you have sought further details
 19 about his admission on --
 20 **A.** I'm sorry, maybe I've -- (overspeaking) -- your question
 21 wrong.
 22 **Q.** No, it's me, it is my fault.
 23 **A.** Yes, if any information is passed on to us, that will be
 24 included, and looked into detail. So definitely -- and
 25 I can say that the document wasn't available on the day

4

1 when we saw VC.

2 **Q.** Absolutely. Okay. And you might want to have known

3 more about the chest pains, for example, before

4 prescribing Olanzapine?

5 **A.** *(The witness nodded).*

6 **Q.** Yes, I see you're nodding, doctor.

7 **THE CHAIR:** Yes, we can't pick up on the record, so say

8 "yes" or "no".

9 **A.** Yes, I will, instead of nodding my head, sorry.

10 **MR MOLONEY:** Not at all. May I just ask you about one final

11 document, please, Dr Gandhi. It's a document you've

12 been referred to, but I'd just like to ask you a few

13 more questions about it, if I may, and it's NHFT0004927.

14 This is the record of your interview with Dr Hiley;

15 you remember you were taken to this?

16 **A.** Yes.

17 **Q.** I'd just like to ask you a few more questions about it

18 if I may, and if we can go to page 2 of that, please,

19 Dr Gandhi. We see that the start of the paragraph,

20 "Summary of events that occurred during the MHA

21 assessment", in addition to the RiO entry, you would add

22 that:

23 "Having reviewed the patient, [your] view was

24 leaning towards admission under section 2 of the [MHA]

25 ..."

5

1 the Crisis Team.

2 **Q.** Sorry, Dr Gandhi, please can --

3 **A.** Sorry.

4 **Q.** No, did you have anything else to say or ...

5 **A.** No, because my notes doesn't indicate that. That's what

6 I'm trying to get to the point.

7 **Q.** Right. If we then go on to the paragraph after next, it

8 says:

9 "RG states that the team of professionals considered

10 the research evidence that shows over representation of

11 young black males in detention and recalls that

12 [Annette] Palmer was able to persuade us that CRT

13 [that's the Crisis Team, isn't it] could provide a safe

14 and reasonable alternative of supervised medication and

15 2 two visits [a] day. With the option to admit if the

16 community ... plan failed."

17 Did that conversation happen?

18 **A.** In my notes, on the RiO? It doesn't say any sort of

19 that.

20 **Q.** Did you say this to Dr Hiley though?

21 **A.** Obviously I said this is not verbatim, this is what she

22 has typed after the meeting and, as I said before, I was

23 reflecting a lot and I was hypothesising, there was

24 a real situation, the document I had from my notes, and

25 I was trying to fill the gaps of my thinking on that day

7

1 Although you acknowledge that's not explicitly

2 stated in your notes.

3 Is that what your view was?

4 **A.** I think from my notes I can see that we had considered

5 all the aspects, considering everything, we decided to

6 go for the least restrictive option.

7 **Q.** No, of course. Were you leaning towards admission in --

8 and it goes on, and you recall that you thought

9 admission was indicated:

10 "... as this was a first presentation of psychosis

11 with many 'Blind spots'/unknowns, lack of information on

12 risk history and that VC had forced entry into a flat."

13 Were those factors, as this says, factors that were

14 making you lean towards Section 2?

15 **A.** So can I come back again, kind of correction to that.

16 So if you look at the incident which happened, my

17 contact with VC was 2020, and this interview is in 2025.

18 **Q.** Yes.

19 **A.** In between that, I have updated within media, the

20 investigation going on within Nottingham because I live

21 within that area, so I'm very much aware of what has

22 happened followed up. So how much was there a cognitive

23 biases at that time, but going back and reflecting back

24 on my notes, quite clearly we have decided that we're

25 going to send him with the least restrictive option with

6

1 of what was happening or what did we think about this?

2 Did we do this? Because some of the scenarios do play

3 up in real life and sometimes the brain tends to look

4 for patterns, and I was trying to create a pattern over

5 the years, you know, in terms of working with the Crisis

6 Team, sometimes they do kind of ask you "Oh, why don't

7 you consider this?" and I don't think it's the right

8 word to say because, as I said before, I'm a section 12

9 approved doctor, and Annette Palmer can't persuade me.

10 Do you get the point? I make my independent decision;

11 that's what I'm trying to get to.

12 **Q.** Of course, and of course you said to Ms Langdale King's

13 Counsel, when she asked you that, in fact it's your

14 decision, it's not hers.

15 **A.** Yeah.

16 **Q.** And absolutely right. But I was just really asking you

17 whether or not there was a process where you were

18 leaning towards Section 2 for the reasons that you've

19 set out, and then you considered research evidence, and

20 did you discuss research evidence?

21 **A.** I made it quite clear from -- because the problem is in

22 this document, Chair, is it's missing --

23 **THE CHAIR:** I think if you just answer counsel's question:

24 did you consider research at the time?

25 **A.** This is hypothesis again. I don't remember on that day

8

1 or that time. That's what I'm saying and it doesn't
2 indicate in my RiO notes, and that's what I'm trying to
3 build and that's why I wanted to go back to the
4 questions which were posed to me at that time of what
5 was asked. And if you look that questions and look at
6 the conversation, there is no correlation between that.

7 **MR MOLONEY:** Right. So are you essentially saying, and just
8 if you don't mind me clarifying this, Dr Gandhi, are you
9 essentially saying that you didn't say to Dr Hiley that
10 you -- that you, that the team considered the research
11 evidence?

12 **A.** No, I am saying that this was a reflection. That's what
13 I'm trying to say.

14 **MR MOLONEY:** Right. All right, I'll leave that then,
15 Dr Gandhi. Thank you very much.

16 **THE CHAIR:** Yes.

17 **Questioned by MS BENYOUNES**

18 **MS BENYOUNES:** Dr Gandhi, I ask questions on behalf of the
19 survivors, and there's just one question in
20 clarification to begin, please.

21 In respect of the consideration of detention under
22 Section 2, can you clarify what your findings were in
23 respect of the first criteria, the nature of the mental
24 disorder, please?

25 **A.** Yeah. So at the time, we looked at that he was having

9

1 difficult to predict things, so I wouldn't say that
2 I can predict things correctly.

3 **Q.** But particularly in the absence of known history, you
4 had to take a cautious approach to balance the
5 management of risk to VC and to others, and also the
6 protection of the public; would you agree?

7 **A.** Yeah, yes.

8 **Q.** Now, the information you were aware of at the time of
9 the assessment, could I ask you to consider a document.
10 It's WITN0007001, and it's pages 4 and 5. So
11 WITN0007001.

12 Could we go, please, to page 4. This is a statement
13 of Inspector Katie Eustace, who was the officer that
14 attended and arrested VC after the first incident at
15 Brook Court.

16 So at paragraph 20 at the top of page 4 she states
17 that she "saw the suspect", VC, "outside flat 11 and
18 another member of the public within flat 11 preventing
19 him from entering."

20 At the end of that paragraph she states:

21 "The male continued to shout that his mother was
22 inside the flat and the male preventing his entry
23 identified him as responsible for the damage to flat
24 12."

25 So just pausing there, were you aware at the time,

11

1 some emerging psychotic episode, and that's what we had
2 concluded because he hasn't got any previous
3 presentation, this was a first presentation to services,
4 and there was nothing to indicate that there was any
5 diagnosis of any sort before. So he -- that is why the
6 reason why we needed further assessment with the Crisis
7 Team to understand the nature and the degree of his
8 illness.

9 **Q.** So first-episode psychosis, that was the conclusion?

10 **A.** It's not a diagnosis entire on its own; it's just
11 a coined reference to collective symptoms what patient
12 presents with.

13 **Q.** Thank you.

14 **A.** If that answers your question.

15 **Q.** Thank you. I've just got two topics to cover. The
16 first relates to the assessment of risk and the
17 knowledge of the team at the time of the assessment.

18 Now, given the lack of known history, do you agree
19 it was difficult to properly predict VC's risk and risk
20 profile?

21 **A.** I'm not sure I can comment on that. On that day, what
22 I had in front of me, and all the available information
23 we collected, it's -- we decided in terms of the plan to
24 go with, because sometimes, as I said, it's always
25 difficult -- even sometimes known patients it's

10

1 firstly that there'd been damage to one flat caused by
2 VC, but he was also attempting to enter another flat
3 with the same belief that he was shouting his mother was
4 inside? Were you aware at the time of your assessment?

5 **A.** No.

6 **Q.** It goes on to say at paragraph 21 that:

7 "[the officer] took hold of the male by the arm ...
8 he was still trying to push his way into number 11. He
9 continued to try to pull back so [she] handcuffed him to
10 the rear."

11 Were you aware that the officer had to take those
12 steps because VC was still actively trying to enter the
13 property?

14 **A.** No.

15 **Q.** That can come down. Thank you very much.

16 Were you also unaware that VC -- sorry, were you
17 also unaware that the occupants of flat 11 had raised
18 concerns with the police that VC may try and gain entry
19 or cause further issues for them if he was to be
20 released? Is that something that had been brought to
21 your attention?

22 **A.** No, not at all.

23 **Q.** Do you agree, all of that information was highly
24 relevant to the assessment of VC's risk to others,
25 specifically?

12

1 A. I think any information is available during the Mental
 2 Health Act Assessment is vital, and that will guide us
 3 in terms of making decision.

4 Q. When considering the second part of the criteria for
 5 detention, Section 2, the protection of other persons,
 6 which of course includes psychological as well as
 7 physical harm, you needed to have that information,
 8 didn't you, to make an informed risk judgement?

9 A. As I said before, any risk assessment is incomplete
 10 without any information that's not been given to us or
 11 withheld from us. So any information we get will be
 12 taken in light to make decisions and look at the
 13 criterias of Mental Health Act.

14 Q. Thank you. Could I ask you to look at one further
 15 document, please, and it's the document that Mr Moloney
 16 took you to. It's NHFT0004927 on page 2, please.

17 It's the very last part of the box that you were
 18 going through with Mr Moloney, and it's recorded there:

19 "RG reflected that the discussion around options
 20 felt open, clear conversation, and helped the team reach
 21 a shared decision not to detain, but to trial community
 22 treatment."

23 So it's without going through the questions you've
 24 already been asked, there it's reflecting that you were
 25 commenting that there had been a clear discussion around

13

1 Because I had the skeleton of my notes and I was just
 2 trying to kind of put in what kind of my memories were,
 3 what cognitions and what thought process was going on,
 4 and I was just trying to put in there. That's what
 5 I was trying to do, reflect and hypothesise the
 6 situation I was in.

7 Q. Thank you. One final point and it's in relation to
 8 incident reporting. The evidence given by your
 9 colleague Dr Malik was that he'd made the assumption
 10 that others would have made this report on Ulysses as
 11 a patient incident. Did you yourself make a report on
 12 Ulysses when you learned about the incident with Feven,
 13 after VC had been discharged into the care of the
 14 Community Team?

15 A. So my only contact with VC was on the day I did the
 16 Mental Health Act Assessment.

17 Q. Yes.

18 A. Following that, I had no contact or conversation with
 19 any of the people or members of the team.

20 Q. You didn't make a report yourself on Ulysses, as
 21 a patient safety incident; is that right?

22 A. Yeah.

23 Q. And do you agree that following such a report, and
 24 depending on the harm events, there would be different
 25 levels of investigation?

15

1 options in respect of not detaining but in looking at an
 2 alternative option. Was that in fact the case?

3 A. I was reflecting through looking at my notes, and if
 4 there was any disagreements within the Mental Health Act
 5 Assessment, that would reflect on the notes, stating
 6 that the Section 12 doctor has not agreed with the plan
 7 or the AMHP doesn't believe in the plan or the Crisis
 8 Team are unable to provide. So that would definitely
 9 reflect on the documentation.

10 So looking at the document, there wasn't any kind of
 11 disagreement within the team, and that's why kind of --
 12 I've kind of reflected that, you know, all the options
 13 were felt open, clear conversation, and helped to reach,
 14 kind of come to a decision.

15 Q. But do you understand the point? This document reads as
 16 if it was a reflection on what actually happened, not
 17 the hypothesis that you talked about in your evidence.
 18 Would you agree with that?

19 A. I think so.

20 Q. And you agree that that's the accurate discussion that
 21 you had as part of this interview, reflecting on what
 22 actually happened.

23 A. I think there are two parts to this document, in terms
 24 of somewhere I'm reflecting looking at my notes and
 25 somewhere I'm building hypotheses of what happened.

14

1 A. Yeah, I do agree.

2 Q. There could even be escalation to the CQC and to the ICB
 3 as well.

4 A. *(The witness nodded)*.

5 Q. There's also the duty of candour process that then
 6 follows as a regulatory process.

7 A. Yeah, there is a duty of candour process.

8 Q. Are you aware of any steps taken by the Trust even when
 9 preparing for this Inquiry in respect of those local and
 10 statutory obligations?

11 A. I can't comment because I don't know anything.

12 **MS BENYOUNES:** Thank you very much.

13 Thank you, Chair.

14 **THE CHAIR:** Thank you.

15 Yes, Mr Straw.

16 **Questioned by MR STRAW**

17 **MR STRAW:** Dr Gandhi, two very quick areas, please.

18 Firstly, race.

19 Did VC's race influence your decision not to detain,
 20 or was that decision based solely on whether he met the
 21 criteria under Section 2 of the Mental Health Act?

22 A. Okay, in my professional day-to-day practice,
 23 demographics don't make any change to my practice.
 24 Patients are admitted to hospital or discharged based on
 25 the severity, risk, and the need of the patient. The

16

1 colour doesn't come into the picture at all. I just
 2 want to make it quite clear.
 3 **Q.** Was that the case here?
 4 **A.** Yeah, that was the case here, and I go back to the
 5 reference when people are going back to this interview
 6 and I'm just -- what I was trying to do was fill
 7 a five-year memory of the event happening on 2020 to
 8 2025, I'm just trying to build a picture up and trying
 9 to kind of help the Trust to kind of understand, you
 10 know, what my thinking could have been, whether I ever
 11 thought about it, or stuff like that.
 12 **Q.** Okay. Then in your notes of the assessment you refer to
 13 VC as being "guarded" or "very guarded"; is that
 14 a common feature of psychosis?
 15 **A.** Yeah, I commonly, in my normal day-to-day practice when
 16 I've seen psychotic patients, they tend to be guarded
 17 and scared sometimes. So it was very much in keeping
 18 with psychosis.
 19 **Q.** Does that result from the paranoia which leads them to
 20 try to mask symptoms from medical staff, or what leads
 21 to that?
 22 **A.** I don't think that would be the case here, because he's
 23 never seen -- from my records, he's never been seen from
 24 any mental health professionals before. It could be
 25 because he was paranoid, there were other symptoms, and

17

1 officers involved in it, to your knowledge?
 2 **A.** In my professional knowledge and I've never had witness
 3 statement given before --
 4 **Q.** That was going to be my next question. Assuming that
 5 the officers had written them up by the time of you
 6 conducting the Mental Health Act Assessment, I don't
 7 think that was the case here, are you ever given access
 8 to the witness statements of police officers?
 9 **A.** In my career, I haven't ever had witness statement given
 10 to me.
 11 **Q.** Are you ever given access to witness statements about
 12 the incident that have been written up by members of the
 13 public, not police officers?
 14 **A.** No.
 15 **Q.** Are you ever given access to the police officers
 16 themselves who dealt with the incident?
 17 **A.** That's the problem, because, if you look at this case,
 18 he was arrested early hours of the morning, and the
 19 Mental Health Act was done around two o'clock from my
 20 notes, it appears like 14 hours, it was given. So it's
 21 rarely in my usual practice that I've met officers who
 22 have carried out arrest. Sometimes even when -- I'm
 23 sorry, I'm just taking it a bit further because when
 24 patients are placed on 136 and the officers bring them,
 25 sometimes it's the officers who have detained them or

19

1 there could be a lot of causes, but I can't give you an
 2 exact answer for that.
 3 **MR STRAW:** No problem.
 4 All right, thanks very much.
 5 **THE CHAIR:** Yes, Mr Beer.
 6 **Questioned by MR BEER**
 7 **MR BEER:** Just one topic, please. You were asked some
 8 questions on behalf of the survivors about information
 9 that you were aware of at the time of the first Mental
 10 Health Act Assessment.
 11 **A.** Yes.
 12 **Q.** You were shown, do you remember, part of the witness
 13 statement of now Inspector Eustace --
 14 **A.** Yes.
 15 **Q.** -- which was made, I think, in 2025 for the purposes of
 16 this Inquiry. Some other information was summarised to
 17 you by counsel about what VC had allegedly done and the
 18 circumstances of his arrest?
 19 **A.** Yes.
 20 **Q.** When you are conducting a Mental Health Act Assessment,
 21 are you reliant on what the custody sergeant tells you
 22 in terms of information from the police's perspective?
 23 **A.** Yes, that's right.
 24 **Q.** By the time you conduct a Mental Health Act Assessment,
 25 have witness statements been written up by the police

18

1 sometimes it's completely different officer or --
 2 **Q.** Never mind 136s where there might be more of a link
 3 between what's happened upon the execution of the
 4 136 power; I'm talking about here -- I think were you
 5 implying that quite often it's a different shift you're
 6 dealing with?
 7 **A.** Yes, yes.
 8 **Q.** So really, the Custody Sergeant is the funnel through
 9 which the information comes.
 10 **A.** Yes, you're right.
 11 **MR BEER:** Yes, thank you very much.
 12 **THE CHAIR:** Thank you.
 13 **Questioned by THE CHAIR**
 14 **THE CHAIR:** Yes, Doctor, I just want to be absolutely clear,
 15 the interview which you did in 2025, you have said you
 16 received five questions that you were to answer.
 17 **A.** Yes, Chair.
 18 **THE CHAIR:** So those were sent to you in advance, were they?
 19 In advance of the interview?
 20 **A.** No, I can't remember that.
 21 **THE CHAIR:** I see. Okay.
 22 **A.** I might have to go back and look at my emails, Chair, to
 23 see whether they had sent there, the questions in hand.
 24 Because I can remember looking at it, I got access only
 25 to the notes late in the evening that day, to have

20

1 a look. And that was only my progress notes, nothing
2 else.

3 **THE CHAIR:** Sorry, so can you just give me the process of
4 the interview. You were asked to have an interview; is
5 that right?

6 **A.** So I got an email from the Deputy Medical Director
7 asking whether I was the right person before she could
8 kind of make any -- divulge any information, and
9 I confirmed that, yes, it's me. And then she told me
10 about that she wanted to interview me regarding the
11 complaint which they have received --

12 **THE CHAIR:** Yes.

13 **A.** -- and wanting me to assist in that. I said I would be
14 happy to meet, and the meeting was arranged on MS Teams
15 for an hour.

16 I might have to look at the date and time when the
17 meeting happened.

18 **THE CHAIR:** Yes.

19 **A.** And I had asked, requested that can I get access to my
20 notes so that I can prepare myself? And that was what
21 this is about.

22 **THE CHAIR:** So you had access to the RiO notes.

23 **A.** My -- just my progress notes.

24 **THE CHAIR:** Just your progress notes?

25 **A.** Yes please.

21

1 you tend to reflect and kind of look at it, and that's
2 what was happening, Chair.

3 **THE CHAIR:** So if you were to say whether that conversation
4 did or didn't take place on the day when you were
5 discussing whether to detain VC, what would you say now?

6 **A.** I think, reflecting on it, it's nowhere on my notes that
7 we had that conversation. And, as I said before, a lot
8 of time these days, you know, when I see in clinics or
9 when I see people in the ward round, some of these
10 informations around MBRRACE reports, in terms of
11 suicide, in terms of demographics of people, that kind
12 of automatically comes in, and sometimes there are
13 cognitive biases for these things. And that's what
14 I was trying to reflect in that conversation, and it
15 doesn't mean that that conversation happened.

16 And, for me, in my professional judgement and my
17 day-to-day practice, that wouldn't have made any
18 difference, because the needs goes first, what does the
19 patient need?

20 **THE CHAIR:** Well, that's what I was going to ask you because
21 I think what you've said in your evidence is that
22 whether or not there was that conversation, which you've
23 said you don't now remember independently, it made no
24 difference as to the actual decision?

25 **A.** No, it didn't.

23

1 **THE CHAIR:** And then you had your Teams interview.

2 **A.** *(The witness nodded).*

3 **THE CHAIR:** And you were asked questions.

4 **A.** Yes.

5 **THE CHAIR:** Then what we've seen today emerged from that; is
6 that right?

7 **A.** Yeah.

8 **THE CHAIR:** Were you given an opportunity of reading through
9 that?

10 **A.** I believe so. I must have been given an opportunity to
11 read through that.

12 **THE CHAIR:** As I understand it, what you're saying is that
13 you can't recall, because you have no independent
14 recollection of the actual mental health assessment at
15 the time --

16 **A.** Yes.

17 **THE CHAIR:** -- whether this, the issue of young black males
18 being disproportionately detained was raised, but it's
19 something which you reflected on in the interview --

20 **A.** Yeah.

21 **THE CHAIR:** -- as a result of questions you were asked?

22 **A.** Yes, and I was also aware of the Inquiry going on, the
23 CQC Inquiry then, NHS-led Inquiry. So it was almost
24 a lot of information was available, and you tend to
25 follow a lot of times when serious incidents happen, and

22

1 **THE CHAIR:** Right. So I think I've got that clear now.

2 As far as -- there was one other aspect of it where
3 you were asked by Ms Benyounes about the Ulysses
4 process. Just to repeat what you have said so that I'm
5 clear, did you have any further dealings with VC, and
6 were you aware of the second incident?

7 **A.** Not at all, judge. I wasn't. And I only became aware
8 since I've been --

9 **THE CHAIR:** When were you first aware of that second
10 incident?

11 **A.** As far as I -- I can't remember --

12 **THE CHAIR:** The same day --

13 **A.** -- that, you know, anybody contacted me and informed me
14 about the incident, Chair.

15 **THE CHAIR:** So the --

16 **A.** Because I don't work in the Trust. I was doing a shift
17 on that day, and my shift would have started on morning,
18 9 o'clock, and I would have finished next day morning,
19 9 o'clock.

20 **THE CHAIR:** I see. So did you know about it before you had
21 the interview in 2025?

22 **A.** No.

23 **THE CHAIR:** No. All right, thank you.

24 Thank you. We'll just rise for five minutes now.

25 **MS LANGDALE:** One question arising.

24

1 **Further questioned by MS LANGDALE**
 2 **MS LANGDALE:** Dr Gandhi, your statement, paragraph 118, the
 3 questions were sent to you, you confirm there, via email
 4 on 12 June as well. Just as a matter of fact, can you
 5 see it at paragraph 118?
 6 **A.** Yeah.
 7 **Q.** You didn't write notes or responses, but the interviewer
 8 had sent you them the day before on the 12th.
 9 **A.** Okay, so yeah, thank you. Thank you for clarifying,
 10 because I didn't want to suggest I didn't look in -- so
 11 I just wanted to go back and look at my email to make
 12 sure I had received the questions.
 13 **MS LANGDALE:** Yeah, he did. Thank you.
 14 **THE CHAIR:** Thank you. We'll just rise for five minutes now
 15 while you change over.
 16 **(2.33 pm)**
 17 **(A short break)**
 18 **(2.36 pm)**
 19 **THE CHAIR:** Yes, Mr Carr.
 20 **MR CARR:** The next witness is Mr Williams.
 21 **THE CHAIR:** Yes, thank you.
 22 **BENJAMIN WILLIAMS (affirmed)**
 23 **Questioned by MR CARR**
 24 **MR CARR:** Can we have your full name, please?
 25 **A.** Mr Benjamin Williams.

25

1 **A.** Yes.
 2 **Q.** You started practising in that role in January 2020.
 3 **A.** Yes.
 4 **Q.** You were the Approved Mental Health Professional at VC's
 5 first Mental Health Act Assessment, 24 May 2020.
 6 **A.** Yes.
 7 **Q.** So at that stage, you had been qualified, or practising
 8 in the role for four months.
 9 **A.** Yes.
 10 **Q.** Still new to the role.
 11 **A.** Yes, yeah.
 12 **Q.** Do you recall how many assessments you had undertaken
 13 prior to VC's?
 14 **A.** Roughly 20, 20 to 25 assessments, I would say.
 15 **Q.** Had any of those been first-episode psychosis
 16 presentations?
 17 **A.** I can't recall specifics, but yes, we do see a lot of
 18 people with first episode so --
 19 **Q.** Can I ask you to keep your voice up.
 20 **A.** Sorry. Yes, we do see a lot of people with
 21 first-episode psychosis, so it stands to reason that
 22 there would have been some in that.
 23 **Q.** Had any assessments prior to VC's involved someone
 24 attacking neighbouring properties?
 25 **A.** I can't remember the specifics of those assessments,

27

1 **Q.** Mr Williams, you have prepared a statement for this
 2 Inquiry, haven't you --
 3 **A.** Yes.
 4 **Q.** -- dated 7 November 2025?
 5 **A.** *(The witness nodded).*
 6 **Q.** Are the contents of that statement true to the best of
 7 your knowledge and belief?
 8 **A.** Yes.
 9 **Q.** You set out in your statement your professional
 10 background. I'm going to summarise it. It's right,
 11 isn't it, you graduated with a degree in social work in
 12 2017?
 13 **A.** Yes.
 14 **Q.** In the same year you commenced work with Nottingham City
 15 Council.
 16 **A.** Yes.
 17 **Q.** And you continued working at Nottingham City Council for
 18 the time --
 19 **A.** Yes.
 20 **Q.** -- that we're concerned with and that you address in
 21 your statement.
 22 In 2018 you commenced training to become an Approved
 23 Mental Health Professional.
 24 **A.** Correct, yes.
 25 **Q.** You qualified in autumn 2019.

26

1 sorry.
 2 **Q.** At paragraph 14 of your statement you explain the
 3 purpose of a Mental Health Act Assessment and the role
 4 of the Approved Mental Health Professional, and it's
 5 your job, isn't it, to apply for detention when the
 6 statutory criteria is met?
 7 **A.** That's correct, yes, once we've received two medical
 8 recommendations.
 9 **Q.** Before you can make the application, there needs to be
 10 two --
 11 **A.** Yes, that's correct.
 12 **Q.** -- medical recommendations and support. And the Code of
 13 Practice, Mental Health Act Code of Practice, sets out,
 14 doesn't it, some of the duties and requirements of an
 15 Approved Mental Health Professional?
 16 **A.** Yes.
 17 **Q.** We'll look at some of those. If we can have on screen,
 18 please, NHSE0000312, and if we go to page 121, please,
 19 we can see at the bottom of this page at paragraph 14.49
 20 it's under the heading, isn't it, "Role of approved
 21 AMHPs"?
 22 **A.** Yes.
 23 **Q.** It sets out the steps required before you have the
 24 ability to apply for detention. One is you have to
 25 interview the patient?

28

1 A. Yes.

2 Q. You have to be satisfied the criteria are met?

3 A. Yes.

4 Q. Then the third bullet point, you have to be satisfied

5 that detention is the most appropriate way of providing

6 care?

7 A. Yes.

8 Q. If we go over to the next page, please, 122. 14.52, it

9 makes the point that although you act on behalf of

10 a local authority, you're employed by a local authority,

11 you have to exercise your own judgement when deciding to

12 apply.

13 A. Yes.

14 Q. The third sentence in that paragraph states that:

15 "The role ... is to provide an independent decision

16 about whether or not there are alternatives to detention

17 under the Act ..."

18 A. Correct, yes.

19 Q. Of course one of the principles is of least restriction?

20 A. Yes.

21 Q. So your role is to have that principle in mind?

22 A. Yes.

23 Q. Finally within the Code, if we go forward, please, to

24 page 124, at paragraph -- or section 14.64, with the

25 bullet points, that addresses, doesn't it, the

29

1 gatekeep all referrals for all Mental Health Act

2 Assessments before the decision is made to go ahead with

3 it, with an assessment.

4 Q. So does the gatekeeper have the ability to say no

5 assessment is required as you understand it?

6 A. Yes, as far as I understand it, yes.

7 Q. One of the policies referred to in your statement -- we

8 can put this up, please: it's WITN0117010. Thank you.

9 Titled "AMHP Guidelines when allocated a [Mental Health

10 Act Assessment]".

11 So these were guidance that applied to your role.

12 A. Yes.

13 Q. And the very first bullet point there says:

14 "Has gatekeeping been done by Crisis and entered on

15 RIO? If this is not done it causes a problem when

16 trying to get a bed."

17 A. Yes.

18 Q. Have you experienced difficulties in conducting Mental

19 Health Act Assessments where, because of the lack of

20 gatekeeping, you haven't been able to secure a bed for

21 a patient?

22 A. It's never prevented securing a bed, it may have

23 slightly delayed an assessment taking place because

24 you're trying to get those correct wheels in motion so

25 a gatekeeping assessment can be made by the Crisis Team

31

1 requirement on you to consult with and discuss with the

2 nearest relative --

3 A. Yes.

4 Q. -- of the patient.

5 A. That's correct.

6 Q. Thank you. We can take that down, please.

7 Now, I've already dealt with the fact that in order

8 for you to make an application, there needs to be two

9 medical recommendations, so a mental health assessment

10 is going to be AMHP plus two doctors.

11 A. That's correct, yes.

12 Q. For this assessment, it was you, Dr Malik and Dr Gandhi?

13 A. Yes.

14 Q. Also in attendance was Annette Palmer.

15 A. Correct, yes.

16 Q. And she is a nurse.

17 A. *(The witness nodded)*.

18 Q. She attended in the capacity of gatekeeper.

19 A. Yes.

20 Q. A gatekeeper isn't a compulsory part of a Mental Health

21 Act Assessment, is it?

22 A. No, it's not, no.

23 Q. What was your understanding of the gatekeeping role?

24 A. The gatekeeping role is something that the Crisis Team

25 and Notts Healthcare Trust undertake. They will

30

1 and then Bed Management Team will take a referral for

2 a bed.

3 Q. And the gatekeeping assessment, is that something that

4 is done prior to, or as part of, the Mental Health Act

5 Assessment?

6 A. It's done prior to. So we request that, for example, if

7 a Community Psychiatric Nurse from one of the Community

8 Mental Health Teams wants to request an assessment, we

9 ask that they are speaking to the Crisis Team as well,

10 so they can do their own gatekeeping assessment.

11 Sometimes it is just a phone call where the Crisis

12 Team will agree yes, it's appropriate to go ahead with

13 the Mental Health Act Assessment. Sometimes the Crisis

14 Team may wish to go and see the person themselves, because

15 they feel they could have a role which might prevent

16 admission.

17 Q. With VC's assessment, as I understand it, Annette Palmer

18 was part of the Mental Health Act Assessment.

19 A. She was, yes.

20 Q. And is that unusual for a gatekeeper to be part of the

21 assessment?

22 A. No, no, it's -- I'm lost in the terminology a little

23 bit -- she wasn't there necessarily as the gatekeeper

24 per se, the gatekeeper had already been done -- the

25 Crisis Team were already aware that the assessment for

32

1 VC was going to be taking place and had agreed it.
 2 Annette came along, and it's not unusual for myself
 3 and my colleagues to ask for a band 7 crisis nurse to
 4 attend the Mental Health Act Assessment, because it'll
 5 help us explore some of those ideas of can there be
 6 community treatment, and having someone there who can
 7 authorise that and agree that that can be a thing that
 8 the Crisis Team can do is beneficial for an assessment.
 9 **Q.** At paragraph 38 of your statement, and if we can also
 10 get up the report that you completed, it's reference
 11 NOCC0000044. Yes, this is the first page of the report
 12 that was completed by you of this assessment.
 13 **A.** Yes.
 14 **Q.** Just dealing with timings, and I understand the
 15 chronology, top right corner we can see time of
 16 referral, 9.15?
 17 **A.** Yes.
 18 **Q.** So that's the time that VC was referred to --
 19 **A.** Yeah.
 20 **Q.** -- the local authority for an assessment. Then under
 21 it, "Time of assessment", that's when the Mental Health
 22 Act Assessment was carried out 14:00?
 23 **A.** *(The witness nodded).*
 24 **Q.** Then at two boxes down, "Assessment Delay, waited for
 25 CRHT gatekeeping until 12:12", and that's Crisis

33

1 you typically seek to speak to the university?
 2 **A.** Yes.
 3 **Q.** Then you describe speaking to the police about the
 4 circumstances of the arrest. Do you remember who you
 5 spoke to?
 6 **A.** No, I don't recall, no. It would have been the Custody
 7 Sergeant, but the name I can't recall, sorry.
 8 **Q.** Do you rely, when getting background to an arrest,
 9 simply on that discussion, or do you have access to the
 10 police records?
 11 **A.** We rely on that discussion. We don't have access to the
 12 police records.
 13 **Q.** At paragraph 43, you summarise the discussion as being
 14 the police told you that:
 15 "... [VC] had broken into a flat which was
 16 aggressive behaviour. However, they were clear he had
 17 not been violent to anyone ..."
 18 **A.** Yes.
 19 **Q.** For the purposes of preparing to give evidence today,
 20 you have seen, haven't you -- we can put it on screen --
 21 an image of the damaged door --
 22 **A.** *(The witness nodded).*
 23 **Q.** -- at the entrance to the property in question? It's
 24 NGPF0000072. We can see there, can't we, the damage --
 25 **A.** Yes.

35

1 Resolution Home Team?
 2 **A.** Yes.
 3 **Q.** In light of your previous answer, are you saying that
 4 there was the gatekeeping assessment at ten past midday
 5 and then you progressed to the Mental Health Act
 6 Assessment at 2 with Ms Palmer?
 7 **A.** I don't know. I didn't come on shift until midday that
 8 day, so I wasn't sure what had been going on in the few
 9 hours previous to that. My understanding was we were
 10 waiting for Crisis to confirm gatekeeping. I don't
 11 recall that they went to see -- or I think it was just
 12 a matter of maybe getting it logged.
 13 **Q.** It's just an administrative --
 14 **A.** I think so, yes, as far as I understand it.
 15 **Q.** Okay. We can take this down for a moment. We will come
 16 back to it.
 17 Turning to the assessment itself, and part of your
 18 role is to coordinate, so you get the two medics --
 19 **A.** Yes.
 20 **Q.** -- for the assessment. Then, in respect of information
 21 gathering, at paragraph 42 of your statement you make
 22 the point you weren't able to speak to the University
 23 because it was a Sunday?
 24 **A.** Yes.
 25 **Q.** Where a patient is a university student, would

34

1 **Q.** -- that has been done to this door?
 2 At the time of your assessment, did you understand
 3 the level of force that had --
 4 **A.** No.
 5 **Q.** -- been used by --?
 6 **A.** No, I was not aware that this level of damage had been
 7 done and the level of force required to do that.
 8 **THE CHAIR:** Sorry, can you keep your voice up a bit and slow
 9 down a bit so we can hear what you're saying?
 10 **A.** No, I wasn't aware of that level of damage.
 11 **MR CARR:** Were you aware that the property in question was
 12 unoccupied?
 13 **A.** No.
 14 **Q.** Did you turn your mind to what might have occurred if
 15 that property had been occupied?
 16 **A.** It would -- we would have certainly factored that into
 17 our risk assessment.
 18 **Q.** You've also, for the purposes of preparing to give
 19 evidence today, you've seen the statement, haven't you,
 20 of Inspector Katie Eustace?
 21 **A.** Yes.
 22 **Q.** That's the arresting officer. She describes, doesn't
 23 she, in her statement, the damage to the property and VC
 24 attempting to enter another property with a member of
 25 the public stopping him. Were you aware of that at the

36

1 time of your --
 2 A. No.
 3 Q. -- assessment?
 4 A. No, I wasn't.
 5 Q. She goes on to describe, doesn't she, VC continuing to
 6 push his way even when the police officer took his arm
 7 and having to put him in handcuffs?
 8 A. Yes.
 9 Q. Were you aware that he'd been put in handcuffs?
 10 A. No.
 11 Q. Now, if you had been aware of those additional factors,
 12 of the level of force as depicted in the picture, would
 13 that have changed your approach to the assessment or
 14 your conclusions?
 15 A. Yes, yeah, it's additional evidence that we would have
 16 had to have considered when making a decision, and also
 17 when speaking with VC during the Mental Health Act
 18 Assessment itself, we'd have had more specific
 19 information we could put to him and try and explore with
 20 him if we would have had it, yeah.
 21 Q. Do you think it would have changed the outcome of the
 22 assessment?
 23 A. That's hard to say. It was -- all I can say is it would
 24 have been very much factored into the decision-making
 25 process.

37

1 A. Only if I feel there's information we need to make
 2 a decision.
 3 Q. Would the doctors have been able to hear your
 4 conversation with VC's mother?
 5 A. I don't remember. I doubt it. I think I would have
 6 taken it -- not on loudspeaker, but they would have been
 7 present with me.
 8 Q. Would you have told the doctors what you had discussed
 9 with VC's mother?
 10 A. Yes.
 11 Q. Would you have told them that she was on her way to
 12 Nottingham?
 13 A. Most likely, yes.
 14 Q. You have been given, haven't you, again for the purposes
 15 of giving evidence today, an extract from Celeste
 16 Calocane's witness statement, and you have seen her
 17 description of that telephone conversation with you, and
 18 she states that she told you it would take at least
 19 five hours for her to get to Nottingham.
 20 A. *(The witness nodded)*.
 21 Q. She was coming from Wales.
 22 A. Yeah.
 23 Q. And she asked you to keep VC at the police station until
 24 she could get there and collect him.
 25 Do you -- having seen that, do you recall that level

39

1 Q. Now, as part of the information gathering and in
 2 accordance with your duties in the Code of Practice that
 3 we've looked at, you had a discussion with VC's mother,
 4 didn't you, Celeste Calocane?
 5 A. Yes.
 6 Q. You describe that at paragraph 64 of your statement.
 7 A. Yes.
 8 Q. About halfway down that paragraph you say:
 9 "I do not recall the details of [the]
 10 conversation -- beyond what I have written. The only
 11 aspect that sticks in my mind is that she was on her way
 12 to Nottingham because she had been concerned about [VC]
 13 after his arrest."
 14 If you can just help us to understand the
 15 circumstances of that telephone call. When you took it,
 16 were you with the rest of your team?
 17 A. I don't remember but the way it's written in my AMHP
 18 report leads me to think that yes, we were together, and
 19 we were trying to gather as much information as we could
 20 at that point.
 21 Q. So although you make the call, the purpose of it is to
 22 gather information for the team.
 23 A. Yes.
 24 Q. Is it usually your practice to conduct calls with
 25 relatives with the doctors present?

38

1 of detail in your discussion with her?
 2 A. No, I don't recall that conversation. I'm sure it
 3 happened but I can't remember the specifics.
 4 Q. In terms of the assessment itself, and we've already
 5 heard evidence from the two doctors this morning, the
 6 decision ultimately was not to detain VC but instead for
 7 home treatment.
 8 When dealing with risk assessment, it's paragraph 30
 9 of your statement, you say:
 10 "A risk of violence and/or aggression towards others
 11 will be a significant factor when assessing that person.
 12 If it is felt that other people are at risk due to the
 13 violence and/or aggression that is associated with the
 14 person's mental illness, there will be a high likelihood
 15 that they will be detained under the [Mental Health
 16 Act]."
 17 A. Yes.
 18 Q. As that second statement is drafted in your statement,
 19 it appears to suggest that a risk of violence to others
 20 will suffice for detention.
 21 A. Yes.
 22 Q. If we can look, then, at the -- go back to the report
 23 please. It's NOCC0000044.
 24 I'm just going to go through some of the entries.
 25 I'm not going to go through everything but some of the

40

1 entries --

2 A. Of course.

3 Q. -- at the bottom of the page, "Medical/Psychiatric

4 History":

5 "No previous mental or physical health issues".

6 A. Yes.

7 Q. That was based on information gathered from what? Where

8 did you get that information from?

9 A. From our recording system which at that point had very

10 little, and the discussions I was able to have with VC's

11 mother.

12 Q. If we go forward, please, to page 3 of this document we

13 can see the penultimate paragraph, it states:

14 "It was agreed that [VC] is experiencing a psychotic

15 episode. What was unclear was what the risk factors

16 were."

17 Is the reason for that lack of clarity because

18 essentially you were dealing with somebody where there

19 was very little information --

20 A. *(The witness nodded)*.

21 Q. -- on their background and their condition?

22 A. Yes, yeah. That's correct.

23 Q. So when you say, it's "unclear ... what the risk factors

24 were", you're allowing for the risks potentially being

25 higher or higher than you could ascertain on the

41

1 "This is [VC's] first presentation to MH services.

2 There is no history of MH [mental health] issues in the

3 past. Risks deemed low enough for Home Treatment to be

4 explored."

5 But of course the previous page we looked at there

6 was a lack of clarity on risk, partly because of the

7 limited information?

8 A. Yes, which is -- just why I did seek that additional

9 information from the Custody Sergeant.

10 Q. If we go forward to the next page, page 5, and we have

11 a risk summary on this page. Is this a risk assessment

12 that was conducted by you or was this something that was

13 carried out by the entire team?

14 A. Me. That's my risk assessment.

15 Q. Risk to self is marked high "Likelihood: high - severity

16 ..."

17 A. Yeah.

18 Q. Aggression to neighbours is marked here medium

19 "Likelihood: med - severity high".

20 A. *(The witness nodded)*.

21 Q. But it's right, isn't it, that in your statement

22 reflecting on this, you take the view that actually it

23 should have been "high likelihood"?

24 A. Yes, that's correct, yeah.

25 Q. So in respect of each categorisation of risk here, all

43

1 information you had?

2 A. Yes, I do *(unclear)* but it's kind of also leading into

3 the next sentence. That's why I then spoke to the Duty

4 Sergeant, to try to understand that level of what we can

5 understand. That's why I asked him "Has he been

6 violent"? To which I was told no.

7 Q. Yes, and your recollection is that following that

8 discussion, you weren't aware, for instance -- we looked

9 at the photographs of the front door --

10 A. *(The witness nodded)*.

11 Q. -- you weren't aware of the level of force used?

12 A. *(The witness nodded)*.

13 Q. You weren't aware of the circumstances of the arrest as

14 set out --

15 A. That's correct.

16 Q. -- in the inspector's witness statement?

17 A. That's correct, yes.

18 Q. Then if we go forward to the next page, page 4, we've

19 got at the top the outcome of the assessment:

20 "... decided not to detain [VC]. [Crisis] are to

21 visit twice daily ..."

22 Prescription of Olanzapine.

23 But it is the box at the bottom I want to look at

24 "Reason for above decision ..." and four lines from the

25 bottom it states:

42

1 four should have been high, rather than three of four?

2 A. Yes.

3 Q. Yet on the previous page that we looked at, it states

4 risk deemed low enough for home treatment?

5 A. Yes.

6 Q. So how much higher would the risk need to be for home

7 treatment to be inappropriate?

8 A. I think it would have been the nature of the risk that

9 would have needed to be different. So as far as

10 I understood it, the information at that time, he wasn't

11 posing a risk to other people.

12 Q. Well, you've dealt with risk to others and you've put

13 severity high, and although likelihood here is marked

14 medium, your evidence is that should have been high, as

15 well?

16 A. *(The witness nodded)*.

17 Q. So high likelihood, high severity?

18 A. *(The witness nodded)*.

19 Q. In those circumstances, could it be right for it to be

20 said risk deemed low enough for home treatment to be

21 explored?

22 A. I still think at that stage home treatment was

23 appropriate, based on the information we had and I think

24 in my statement one of the clarities I wanted to make

25 about -- because it's the likelihood of that changing

44

1 from medium to high -- it's because it had happened, you
2 know, he had already been arrested for trying to break
3 into a flat, so ...

4 Q. Yes, so there's two things you're looking at, one is
5 likelihood --

6 A. Yes.

7 Q. -- so how likely is the risk to materialise?

8 A. Yes.

9 Q. Here you've put medium --

10 A. Yes.

11 Q. -- but you recognise that actually it should have been
12 high because it happened shortly before?

13 A. Yes.

14 Q. The severity, there you're marking what the potential
15 outcome could be if the risk materialised.

16 A. Yes.

17 Q. So that's the severity of harm, isn't it?

18 A. Yes, yeah.

19 Q. Then still on this page, there is a reference, middle of
20 the page:

21 "Does the citizen have capacity to make this
22 decision?"

23 That's been ticked "Yes", and again, you correct
24 that in your statement --

25 A. Yes.

45

1 Q. -- to a neighbour, as had been seen earlier that day?

2 A. I think I would have been more -- having said damage to
3 property more specifically because that was what had
4 happened was he had tried to break through a door, and,
5 like I said, as far as we understood it, there was no
6 aggression towards an actual -- interpersonal violence
7 or aggression; it was damage to property.

8 Q. Upon being released from custody following the decision
9 of your team not to detain, there had been nothing, had
10 there, which would change the risks that VC presented
11 with?

12 A. No.

13 Q. He was not being provided with medication whilst still
14 in custody?

15 A. No.

16 Q. So there was, firstly, going to be a period between
17 release from custody and VC being seen by the Crisis
18 Team.

19 A. Yes.

20 Q. Did you understand that the Crisis Team were going to be
21 visiting at some point that evening?

22 A. Yes.

23 Q. Did you have any indication of when in the evening?

24 A. No.

25 Q. Even once medication was given, would the response to

47

1 Q. -- don't you, because the view of yourself and the team
2 was that VC lacked capacity --

3 A. Yes.

4 Q. -- (*overspeaking*) -- an assessment?

5 A. That's correct.

6 Q. Now, in terms of the risk -- both risk to self,
7 likelihood: high, severity: high, and risk to others,
8 likelihood: high, severity: high, I want to understand
9 what thought the team gave to controlling those risks on
10 VC's release from custody. What you have said in your
11 statement, it's paragraph 55, you state:

12 "Clearly, the risks for further deterioration in his
13 condition and aggression to others."

14 But it's right to say, isn't it, that those are two
15 different risks? So the risk of aggression to others
16 wasn't dependent on deterioration in condition.

17 A. No, that's correct.

18 Q. That was a present risk --

19 A. (*The witness nodded*).

20 Q. -- and that's the whole reason why there had been the
21 assessment.

22 A. Yes.

23 Q. So the risk was, as you've identified, aggression
24 again --

25 A. (*The witness nodded*).

46

1 oral antipsychotic medications be immediate?

2 A. Um --

3 Q. In your understanding?

4 A. In my understanding as a non-medic, the antipsychotic
5 can take some time to have effect but I think he was
6 also -- which I have missed on my AMHP report --
7 prescribed some sleeping medication too, which was --
8 would have had an immediate effect.

9 Q. So upon release, and at least until he received some
10 medication, which was going to be at an unknown time
11 later that day, the risk would be unchanged from what
12 you've identified in your report.

13 A. Yes.

14 Q. Was any thought given by you or your team to the fact
15 that, upon release, he would be returning to the same
16 place, his flat --

17 A. Mm-hm.

18 Q. -- where the earlier incident had occurred?

19 A. Yes.

20 Q. Did you appreciate, therefore, that there was a risk of
21 a repeat incident, given nothing had been done to change
22 the risk?

23 A. I mean, yeah, it was, I guess, a calculated risk from us
24 but it's difficult to predict that such a thing would
25 have happened so quickly after.

48

- 1 Q. Did you and the team consider there to be only two
2 options: one, detention; and two, home treatment? Was
3 consideration given to admission on a voluntary basis?
- 4 A. I don't recall the discussion specifically but from my
5 own notes, VC would have lacked capacity to have
6 consented to an informal admission so it wouldn't have
7 been appropriate, and we'd have explored that.
- 8 Q. Given that you have spoken to Celeste Calocane and, as
9 you said in your statement, what stuck out is that she
10 was on her way to Nottingham, even if you don't recall
11 whether she said it was five hours away or not, did you
12 not consider or discuss with the team delaying VC's
13 release until his mum got to Nottingham?
- 14 A. I mean, as far as I understand it, we wouldn't have had
15 any legal ground to have held him any longer, after we'd
16 made the detention not to detain him under the Mental
17 Health Act.
- 18 Q. Even if his release from custody wasn't delayed, did you
19 give any consideration to taking steps to ensure that he
20 didn't return to his flat until his mum was in
21 Nottingham?
- 22 A. No.
- 23 Q. But that would have been a method of reducing risk,
24 wouldn't it?
- 25 A. Yeah, yes.

49

- 1 A. No, I don't recall any such discussion. I can't
2 remember a lot of what we -- the specifics we spoke
3 about, but that's never been a factor for me when
4 assessing an individual.
- 5 Q. Then it goes on to say:
6 "... [Annette] Palmer was able to persuade us that
7 CRT could provide a safe and reasonable alternative of
8 ... medication ..."
- 9 Do you remember if it was Nurse Palmer who, as it
10 were, swayed the team away from detention?
- 11 A. No, I don't. Again, apologies, I can't recall the exact
12 conversations, but -- and I'm thinking about how other
13 assessments have been conducted, and it would have been
14 more about maybe me or us asking the Crisis nurse
15 whether they felt they could offer home treatment in the
16 circumstances, and she would have said yes, in this
17 instance.
- 18 Q. Finally this, moving away from your assessment, a point
19 that you address in your statement is an email that you
20 sent to a colleague in January 2022, and it was an email
21 to warn your colleague about VC, wasn't it?
- 22 A. Yes.
- 23 Q. It said:
24 "Just wanted to make sure you are aware that he [VC]
25 has been very violent during last [Mental Health Act

51

- 1 Q. Do you remember whether, during the discussions on the
2 assessment -- we can take this down -- either of the
3 doctors were -- if either of the doctors were leaning
4 towards admission, detention?
- 5 A. I don't remember specific discussion we had, but we
6 would have spoken about both those options, detention or
7 home treatment.
- 8 Q. If we can put on screen, please, NHFT0004927, and this
9 is a note of an interview given by Dr Gandhi in 2025.
10 You've seen this note, haven't you?
- 11 A. Yes.
- 12 Q. If we can turn to page 2, please. The third paragraph
13 from the bottom: "RG" -- that's Dr Gandhi, isn't it?
- 14 A. Yes.
- 15 Q. "... states that the team of professionals considered
16 the research evidence that shows over representation of
17 young black males in detention ..."
- 18 I'm just going to pause there. I don't know if you
19 were sitting in the hearing room for any of Dr Gandhi's
20 evidence, but he said just before you got into the
21 witness box that he couldn't remember if there was
22 a conversation on race during your assessment, and race
23 made no difference to his decision.
- 24 Do you recall having any discussion on race during
25 this assessment?

50

- 1 Assessment]."
- 2 A. Yes.
- 3 Q. The point you make in your statement is you're not
4 referring to a Mental Health Act Assessment you were at.
- 5 A. No.
- 6 Q. But it's right to say, isn't it, that the AMHP you
7 contact is Samantha Dooley, she responded to say she was
8 aware of that -- (*overspeaking*) --
- 9 A. Yes.
- 10 Q. -- violence. So by this period, early 2022, appears to
11 have been common knowledge amongst AMHPs that VC was
12 violent.
- 13 A. Yes, that's -- yeah, those patterns we could see much
14 clearer then.
- 15 **MR CARR:** Thank you, Chair. I have no further questions but
16 there are others.
- 17 **THE CHAIR:** Yes, thank you, Mr Moloney.
- 18 **Questioned by MR MOLONEY**
- 19 **MR MOLONEY:** Not many, Mr Williams, thank you.
20 You would accept that risk assessment forms a core
21 part of any Mental Health Act Assessment --
- 22 A. (*The witness nodded*).
- 23 Q. -- given the detention criteria for Sections 2 and 3?
- 24 A. Yes.
- 25 Q. You've been taken to the risk summary at NOCC0000044 by

52

1 Mr Carr, and you have said to him that the likelihood of
2 aggression to others should have been recorded as high,
3 and you've given some explanation of that to Mr Carr:
4 essentially because it had already happened.

5 **A.** Yes.

6 **Q.** You added a little bit more detail as to why you went
7 for "medium" instead of "high" in your statement. Can
8 I take you to it and see if it assists, and whether or
9 not it is consistent with your recollection. It's
10 paragraph 58 of your statement and the statement is
11 WITN0115001, and to page 19 of that, if we may,
12 paragraph 58.

13 If you see there paragraph 58 "Neighbours", and this
14 is the risk of harm to others:

15 "On reflection, I think this should perhaps have
16 been graded as high as it had already happened.
17 I suspect my approach at the time (and I am having to
18 think back five years) was that the likelihood of
19 further problems was low if VC was treated. That is why
20 I think I recorded [it] ... as medium."

21 **A.** Yes.

22 **Q.** Just if I can, VC was not treated at the police station,
23 was he?

24 **A.** No.

25 **Q.** He was being released without any antipsychotic

53

1 neighbours -- broke into neighbour's flat".

2 **A.** *(The witness nodded).*

3 **Q.** Kicked the door down?

4 **A.** *(The witness nodded).*

5 **Q.** That should read, in reality, in the circumstances,
6 "Likelihood high, severity high".

7 **A.** Yes.

8 **Q.** And so he was -- and he was displaying psychotic
9 symptoms when you assessed him.

10 **A.** Yes.

11 **Q.** Isn't the reality that the combination of his history
12 and that level of risk clearly indicated he should have
13 been detained under Section 2?

14 **A.** I think the understanding we had on that day of what had
15 happened, we didn't think he would be violent to other
16 people. We didn't think he would physically harm other
17 people. We weren't aware of the more specific
18 circumstances of his arrest and we were led to believe
19 that he hadn't been violent. I had asked the sergeant,
20 I think it says somewhere in my AMHP report that I did
21 speak to the sergeant and he confirmed that there had
22 been no violence towards other people, which led us to
23 believe that maybe we could try community treatment in
24 the first instance.

25 **Q.** Right. Just on that, then, if I may, do you recollect

55

1 medication in his possession, the plan was that CRT
2 would come round later.

3 **A.** Yes.

4 **Q.** And you had given him sleeping medication, which is
5 zopiclone, isn't it?

6 **A.** That's right.

7 **Q.** So he could be asleep, but it's a matter for him as to
8 whether or not he takes it.

9 **A.** *(The witness nodded).*

10 **Q.** So in the absence of treatment, that being the, as it
11 were, underlying factor that moved you to "medium",
12 because you'd thought he'd be "low" with treatment --

13 **A.** *(The witness nodded).*

14 **Q.** -- then the risk was high, wasn't it?

15 **A.** Yes.

16 **Q.** So if we could please just go back to the risk summary
17 at page 5 of that risk summary, and that's NOCC0000044,
18 please, and just go to that risk summary. Page 5,
19 please. Thank you. And there we see -- yes. Top of
20 the page "Risk to Self: Further MH deterioration";
21 that's mental health deterioration.

22 **A.** Yes.

23 **Q.** And that is high likelihood, high severity.

24 **A.** Yes.

25 **Q.** And then "Risk to Others: Aggression towards

54

1 that there was exploration with VC of what he would have
2 done if he'd got into the flat, for example, and he'd
3 found a person in there? That type of questioning about
4 potential violence implications.

5 **A.** I can't recollect the specifics -- *(overspeaking)* --

6 **Q.** If that type of important question had been asked, then
7 you would expect to find it in somebody's notes in terms
8 of the assessment of VC --

9 **A.** *(The witness nodded).*

10 **Q.** -- because that would be critical to the conclusion that
11 you've just elucidated --

12 **A.** *(The witness nodded).*

13 **Q.** -- about, as it were, not appreciating the risk to
14 others.

15 **A.** Okay.

16 **Q.** Yeah. Would you agree?

17 **A.** Like I say, I cannot recall if we did talk about that or
18 not with him.

19 **Q.** No, the question I asked, and forgive me if it's not
20 been clear, if you had asked about it, and he'd said
21 "No, definitely wouldn't be violent to anybody else," et
22 cetera, et cetera, would you have recorded that,
23 somebody have recorded that in a note in order that
24 there was clarity about that --

25 **A.** *(The witness nodded).*

56

1 Q. -- in terms of to your ultimate conclusion that return
2 to home was something which was viable?
3 A. Yes, yeah.
4 MR MOLONEY: Thank you very much, Mr Williams.
5 THE CHAIR: Thank you. Yes, Ms Cartwright.
6 **Questioned by MS CARTWRIGHT**
7 MS CARTWRIGHT: Thank you, Ma'am.
8 Good afternoon, Mr Williams.
9 A. Good afternoon.
10 Q. I ask questions on behalf of the survivors. Just
11 picking up on the questions that you were just asked
12 then by Mr Moloney, you had certainly heard and elicited
13 that VC had said he'd heard auditory hallucinations such
14 that he believed that his mother was being raped in
15 a property near to where he was living.
16 A. Yes.
17 Q. Would you agree with that?
18 A. Yes.
19 Q. So on a range of reasonable things that might happen,
20 would you agree someone that is delusional and
21 psychotic --
22 A. *(The witness nodded).*
23 Q. -- who thinks that their mother is being raped in
24 an adjacent property, really does raise the indices for
25 risk of violence to occupants of properties; would you

57

1 Q. So would you also agree, had you known that, risk of
2 harm to the public from a psychological impact would
3 have been certainly engaged because any member of the
4 public, peacefully in their home at night, who would
5 suddenly have a psychotic man in their home, that raises
6 completely a risk of psychological harm to the member of
7 the public; would you agree?
8 A. Yes.
9 Q. Now, you've referenced in your AMHP report that we
10 have -- and I think you've been taken to it --
11 essentially you've referenced that the sergeant said
12 there'd been no risk of violence, and I think we see
13 that documented, and there were two places you record
14 that.
15 A. Yes.
16 Q. Then can I ask you, from your perspective as the AMHP
17 whose responsibility is to convene that Mental Health
18 Act Assessment, but you also have the ability to input
19 the decision and challenge the decision which is made;
20 would you agree --
21 A. Yes.
22 Q. -- when the assessment takes place by the two
23 Section 12?
24 A. That's right.
25 Q. So from your perspective, had you had shared a view from

59

1 agree?
2 A. Yeah, and we were told there was no violence to other
3 people.
4 Q. But certainly you're aware that the auditory
5 hallucinations that VC is hearing to him have caused him
6 to physically break down a door to get inside.
7 A. Yeah.
8 Q. So would you agree that it doesn't take much to follow
9 that on with a delusional man suffering from psychosis
10 and auditory hallucinations, that there is a very real
11 risk to members of the public he comes into contact
12 with?
13 A. Yes, and if we would maybe have understood more of that,
14 the arrest that was made, we had more detail about that,
15 we would have certainly factored it in to our
16 questioning and decision-making.
17 Q. You'd agree -- and I think this is completely
18 non-contentious -- under the Mental Health Act, risk of
19 harm to others is not just of physical violence, but
20 it's also psychological impact; would you agree?
21 A. Yes, yeah.
22 Q. So again, can I just be clear, you had not had
23 information that VC had essentially forced his way into
24 another property?
25 A. No, that's correct.

58

1 the police that VC had managed to get entry to property
2 and had caused psychological harm -- or enter
3 properties -- would that have tipped the balance, in
4 your view, that this was a male that actually needed to
5 be in detention for his own safety but also that of the
6 public?
7 A. It certainly would have featured highly in our
8 discussions and would have -- we'd have taken due
9 consideration of that information if we'd have had it.
10 Q. Can we look briefly at your paragraph 48, please,
11 WITN0015001, at page 14, because in fact you do have
12 a recollection of how VC was presenting when you went to
13 assess him. Thank you.
14 If we look at that, because what I'm going to
15 suggest to you is your description just shows how very
16 unwell VC was, and if we look at your recollection:
17 "[You] recall that VC was very cowed, hunched up and
18 childlike, almost like a naughty child. His head was
19 down; he was quiet and afraid - especially of the voices
20 that he had been hearing."
21 Pausing there, I think, as you accepted to
22 Mr Moloney a moment ago, you actually thought you were
23 visibly seeing VC whilst he was almost experiencing the
24 auditory hallucinations because you're referencing he
25 looked "frightened".

60

1 A. I think what I'm most likely referring -- well, what I'm
 2 referring to in the statement is, from what I can
 3 remember and what I read in my notes, that he was
 4 scared. I can't recall if we thought he was
 5 experiencing voices at that very moment in time, but he
 6 was certainly scared about what had been happening: that
 7 he had been hearing voices and had been having paranoid
 8 thoughts and that was scaring him and obviously led to
 9 his arrest.

10 Q. "He was confused and frightened. He spoke to us in
 11 a quiet monotone. He did not say much. He spoke in
 12 short sentences and gave short answers. He sat very
 13 still and barely moved. [You] believe[d] his behaviour
 14 ... was genuine."

15 So would you agree, again these are classic features
 16 on a visual mental health assessment of a patient with
 17 a blunted affect?

18 A. It certainly fed into our assessment that he was
 19 experiencing a mental illness at that stage, yes.

20 Q. Thank you. Now, one of the things that you have
 21 referenced in (*unclear*) is the least restrictive
 22 principle, but would you agree -- and I don't think
 23 there's any dispute -- that you make no reference to the
 24 least restrictive principle in your AMHP referral --
 25 sorry, your AMHP record of the assessment --

61

1 it wasn't in your pack and we'll deal with it with
 2 Dominic Lloyd -- there's a suggestion that's a call log
 3 from 16:29 on 24 May which, for your reference, Ma'am,
 4 is NOCC0000098.

5 Do you recall this later conversation with Dominic
 6 Lloyd after the Mental Health Act Assessment had taken
 7 place?

8 A. No, I can't remember speaking specifically with Dominic
 9 Lloyd. It stands to reason that I would have spoken to
 10 someone from his team to have come to the decision of
 11 the assessment.

12 Q. Thank you. Can you assist with the disconnect of
 13 a patient that you say cannot consent to voluntary
 14 admission to hospital, but then, that -- and lacks
 15 capacity to consent to treatment, but the plan that was
 16 arrived at was that VC was going to be under home
 17 treatment, but lacks capacity in respect of that
 18 treatment?

19 A. Yeah, we believed it at that time with the information
 20 we had that it was in his best interest. We agreed that
 21 he lacked capacity, but it was in his best interest not
 22 to detain him at that point.

23 Q. So can I ask you, then, in terms of was there a liaison,
 24 then, that took place by you, or any of the team, to
 25 ensure that in terms of a safe plan for when VC was

63

1 A. (*The witness nodded*).

2 Q. -- and particularly where you give the reasons for not
 3 detaining?

4 A. Yeah.

5 Q. Neither do they exist in your notes that you did make on
 6 the Nottingham system, which just for speed they're
 7 NOCC0000034 at page 13; would you agree with that?

8 A. Yes.

9 Q. Then can I ask you in terms of we know that Dominic
 10 Lloyd had involvement, and we can see in the notes that
 11 he had recorded his view that VC did not have capacity
 12 to consent to care.

13 A. (*The witness nodded*).

14 Q. I think he goes further in his statement to say he
 15 didn't believe VC had capacity to consent to care and
 16 treatment in the community. Had you been made aware of
 17 that before you undertook your -- you were part of the
 18 convened Mental Health Act Assessment?

19 A. I can't recall. I can't recall if I was aware of that
 20 information.

21 Q. The reason why I ask that is because we don't have the
 22 time that you completed your AMHP note. I know you say
 23 the time of the assessment is 2.00 --

24 A. Yes.

25 Q. -- but certainly with other records -- and I apologise

62

1 going to be released from custody, that he was to be met
 2 by the Crisis Team as soon as he arrived home to
 3 immediately put in place an execution of that plan and
 4 provision of the necessary antipsychotic?

5 A. We would have spoken. Annette Palmer, who was part of
 6 the assessing team, would have agreed to a plan. I
 7 can't remember the specifics of -- (*overspeaking*) --

8 Q. You see the point that's been put to you: you're
 9 discharging a mentally unwell man who's psychotic, not
 10 just in respect of what he's revealed on the auditory
 11 hallucinations, but he's also shared he is believing
 12 that he's being bugged and monitored.

13 A. (*The witness nodded*).

14 Q. So multi-layer aspects of delusions, who is then going
 15 back to his home address where the offending occurred
 16 with no effective plan all ready essentially to hand
 17 over straight to him.

18 So can you assist us as to what two times a day
 19 Crisis Team actually meant? Is it simply handing over
 20 his medication or was there a discussion about what
 21 practically that meant for VC?

22 A. So it would have been to monitor medication use,
 23 certainly in the first instance, but also to start
 24 a more longitudinal assessment of his mental illness and
 25 which would enable the Crisis Team and any other

64

1 subsequent teams from that point to refine the treatment
 2 plan.
 3 **Q.** Do you know if the decision had gone the other way, was
 4 there a bed available for VC to go to?
 5 **A.** I can't remember. I can't remember that detail.
 6 **Q.** Would you agree that treatment is not just medication,
 7 it's the wider matters --
 8 **A.** *(The witness nodded).*
 9 **Q.** -- and also hospital has the ability to monitor the
 10 patient, subject to observations --
 11 **A.** Yeah.
 12 **Q.** -- be they constant, arm's length, four times an hour,
 13 that's another advantage of the therapeutic role of
 14 a hospital; would you agree?
 15 **A.** Yes, yeah.
 16 **MS CARTWRIGHT:** Thank you.
 17 **THE CHAIR:** Yes, Mr Straw. Thank you.
 18 **Questioned by MR STRAW**
 19 **MR STRAW:** Mr Williams, I represent VC's family.
 20 Could we have up on screen, please, NOCC0000044,
 21 page 3. So this is going back to your report.
 22 **A.** Okay.
 23 **Q.** You've already been referred to this. Two paragraphs
 24 down you note:
 25 "[VC] explained the situation that led to him being
 65

1 **A.** I don't know. I think -- I can't remember. Obviously
 2 I've written it in my reports, but I can't remember the
 3 specifics of that conversation or what I was thinking
 4 about his response, specifically, whether he became
 5 suspicious of us or was more sort of generally
 6 suspicious of what he thought was going on.
 7 **Q.** Okay. Thank you.
 8 Could that come down, please, and could you please
 9 put up a different document which is Mr Williams's
 10 witness statement WITN0115001, and then page 21.
 11 This is moving on to the topic of your discussion
 12 with Celeste Calocane.
 13 **A.** Okay.
 14 **Q.** In paragraph 64, towards the bottom of the page, you say
 15 this about your conversation with her:
 16 "I do not recall the details of that conversation -
 17 beyond what I have written. The only aspect that sticks
 18 in my mind is that she was on her way to Nottingham
 19 because she had been concerned about him [VC] after his
 20 arrest. That would have influenced our decision that
 21 community treatment was appropriate because a mother was
 22 on her way to provide support to VC."
 23 When you say "our decision", was that you and the
 24 rest of the assessing team?
 25 **A.** Yes.
 67

1 at Bridewell. He said that he could hear screaming and
 2 that he could hear voices telling him that it was his
 3 mother and she was being raped. This is why he broke
 4 into the flat."
 5 Then towards the bottom of the page, there's a note:
 6 "We asked [VC] whether he had any more questions -
 7 he asked us whether his mother is ok, at which point he
 8 became tearful."
 9 Do you see that?
 10 **A.** Yes.
 11 **Q.** Was it your opinion that he genuinely believed his
 12 experiences?
 13 **A.** Yes.
 14 **Q.** So he genuinely believed his mother was in the flat, she
 15 was being raped.
 16 **A.** Yes.
 17 **Q.** A little bit further up the page, there's a paragraph
 18 that says this:
 19 "Dr Gandhi asked whether [VC] feels he is being
 20 watched in his apartment - whether he feels there may be
 21 cameras or microphones listening and watching him. [VC]
 22 asked how we know this in a defensive manner. He then
 23 became guarded and suspicious of us."
 24 Was it your impression that he became suspicious
 25 that you were involved in the conspiracy?
 66

1 **Q.** So is it your evidence, then, that the remainder of the
 2 assessing team would have been aware that she was on her
 3 way to Nottingham to come to get him?
 4 **A.** Yes.
 5 **Q.** Now, you didn't take steps to wait for her or put
 6 anything in place to ensure that he stayed there. And
 7 you were asked earlier: could you have done anything to
 8 keep him there until she arrived?
 9 **A.** Yeah.
 10 **Q.** I'm going to suggest there were two possibilities, one
 11 very simple one: you could have just asked him, couldn't
 12 you? You could have said to him "Your mum is on the
 13 way, can you wait in the station for a couple of hours?"
 14 **A.** Yeah, yeah. I don't know how practical that would have
 15 been with the police, but I guess they would have had to
 16 have decided whether that was possible or not, but yeah.
 17 **Q.** Second possibility I'd like to ask you about. Could you
 18 have delayed the outcome of the Mental Health Act
 19 Assessment? So the consideration here is: "Well, there
 20 are concerns about him in the community, sending him
 21 back to his flat. His mum is on the way." As you say in
 22 your statement here, she's part of the support plan in
 23 the community. "We don't think it's safe to release him
 24 if she's not here, so we'll delay the outcome of the
 25 Mental Health Act Assessment until she is?"
 68

1 Was that an option?

2 **A.** Do you mean to delay it and him remain in the police
3 station until we make a decision, as it were?

4 **Q.** Yeah, just for a couple of hours until she's there. So
5 at that point you can say, "Well, she's here to provide
6 support."

7 **A.** Mm. I mean, it's possible, it's something we possibly
8 could have explored. In my experience, I don't think
9 the police would have been too pleased to have delayed
10 it any longer. So, yeah, I guess it's possible we could
11 have explored that, but ...

12 **Q.** Then if you're saying to the police "Well, we don't
13 think it's safe to release him at this point, we just
14 want him here for a couple of hours until the mum is
15 here"?

16 **A.** Sure.

17 **Q.** That's at least a possibility, isn't it?

18 **A.** Yes, yeah.

19 **Q.** Thank you.

20 Race is the third topic, and the question is whether
21 race influenced your decision not to detain him.
22 I think you mentioned earlier "That has never been
23 a factor for me"; is that right?

24 **A.** That's correct.

25 **Q.** Can you specifically remember whether it was a factor in
69

1 inadequate?

2 **A.** Yes.

3 **Q.** Does that impact on the care and management of people
4 like VC?

5 **A.** It must do, yes. I think.

6 **MR STRAW:** Thanks very much.

7 **THE CHAIR:** Thank you.

8 Mr Beggs.

9 **Questioned by MR BEGGS**

10 **MR BEGGS:** Mr Williams, just one topic. Could you be shown,
11 please, paragraph 12 of your statement, WITN0115001.
12 It's page 3. If you look at the second half of that
13 starting "The AMHP will gather as much ... information
14 that is available", and then you cite the various
15 sources; do you see that?

16 **A.** Yes.

17 **Q.** You don't mention the police there, do you?

18 **A.** No.

19 **Q.** To save time, I won't repeat it, but you do the same at
20 paragraph 20. Why don't you mention the police,
21 particularly in the context of this case, which was
22 an arrest?

23 **A.** Yeah, I can't explain why I didn't say the police,
24 because I clearly would factor in -- (*overspeaking*) --

25 **Q.** So can we take it that actually you should have included
71

1 this case?

2 **A.** I can't specifically remember, but I can say with some
3 degree of confidence that it wouldn't have been, because
4 just it doesn't come into my thinking for an individual
5 person. We assess the person that's in front of us, not
6 nothing -- not their race, not their gen -- anything
7 like that, really.

8 **Q.** So is this right: you make the decision as to whether to
9 detain them on the basis of whether they meet the
10 criteria for Section 2 or Section 3 of the Mental Health
11 Act?

12 **A.** Correct.

13 **Q.** It's never a factor for you -- the race of the
14 individual is never a factor for you?

15 **A.** No.

16 **Q.** Because of that you're confident in this case it
17 wouldn't have been.

18 **A.** That's right.

19 **Q.** Thank you.

20 Then finally, please, just very briefly,
21 recommendations in your statement, in paragraph 80. You
22 indicate that it's your view that the "mental health
23 services require more resources", an Assertive Outreach
24 team. Is it your view at the moment that the resources
25 that mental health services in the community have is
70

1 the police in the --

2 **A.** Yes, yeah. And I would have, yeah, and I do.

3 **Q.** That's for the obvious reason that they're a vital
4 source of information --

5 **A.** Yes.

6 **Q.** -- if there's been arrest.

7 **A.** Yes.

8 **Q.** But I want to go a little further: might it require you
9 as the AMHP to be a little intrusive in your questioning
10 of the police? Let me explain why. Because, for
11 example, the arresting officer will not necessarily be
12 at the police station by the time you arrive; do you see
13 that?

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

15 **Q.** So therefore you might have to probe via the Custody
16 Officer, and, for example, get the telephone number of
17 the arresting officer; do you see?

18 **A.** Sure, okay.

19 **Q.** Because won't that enable you to get the best possible
20 picture of what actually happened at and before the
21 arrest?

22 **A.** I mean yeah, I would agree that speaking with the
23 arresting officer would --

24 **Q.** I'll just give that as one example, there may be other
25 examples, but do you see that's going to maximise your
72

1 prospects of the best understanding of what actually
 2 happened?
 3 **A.** Yeah, yeah.
 4 **Q.** And that's going to give you the best assessment.
 5 **A.** Yeah, I would agree with that, yes.
 6 **Q.** You'd agree?
 7 **A.** Yes.
 8 **MR BEGGS:** Thank you.
 9 **THE CHAIR:** Yes.
 10 **Questioned by MR MCNAMARA**
 11 **MR MCNAMARA:** Just a few questions, please, Mr Williams.
 12 You were asked some questions about gatekeeping by
 13 Counsel to the Inquiry. Can I just clarify what you
 14 were actually talking about? So I think there may have
 15 been some confusion in your answer. Are you talking
 16 about bed management provision prior to the assessment?
 17 **A.** The gatekeeping from Crisis feeds into the bed
 18 management process, so the Bed Management Team will not
 19 take a referral for a bed and, to explain that, the
 20 referral for a bed is made before we do an assessment,
 21 so those things can be lined up. So Bed Management
 22 won't take a referral for a bed until the Crisis Team
 23 have done a gatekeeping.
 24 **Q.** So essentially there are two elements to gatekeeping
 25 aspect now?

73

1 **A.** So --
 2 **Q.** To what extent is are the contents of that document
 3 communicated to you or your colleagues, because it might
 4 be triaged first before it's passed to you, mightn't it?
 5 **A.** Yes, that's right. I think the -- from what I can
 6 remember seeing in the bundle, the notes that we were
 7 given was Dominic's view of what had been happening --
 8 I can't say if that matches up to what's in this
 9 document. I believe it would do, but if not
 10 specifically, would have been handed this document, he
 11 would have phoned up and said, "This is the situation.
 12 Can we please call a Mental Health Act Assessment?"
 13 **Q.** Did you speak to him directly?
 14 **A.** I can't remember, I don't ...
 15 **Q.** You were asked some questions also about the fact that,
 16 part and parcel of you're thinking about him being
 17 discharged home was that he was in police custody. Does
 18 that mean you were thinking also about him being
 19 potentially processed by the Criminal Justice System?
 20 **A.** Yeah, that's a crime that's been committed, and --
 21 **Q.** You were also asked some questions about the decision on
 22 whether you were influenced by Ms Palmer. Had you any
 23 reason to doubt her suggestion that he could be
 24 successfully treated in the community?
 25 **A.** No. Ms Palmer is an experienced -- experienced crisis

75

1 **A.** Yes.
 2 **Q.** Thank you. So at the time that you carried out your
 3 assessment, had you seen any witness statements or the
 4 like from the police officers? You were just asked some
 5 questions from Mr Beggs about, for example, telephoning
 6 the arresting officer. Had anything yet been made
 7 available to you in witness form?
 8 **A.** No.
 9 **Q.** Can I ask you please to have a look at the document
 10 NGPF0003440. That's the front sheet of the document
 11 prepared by the Liaison and Diversion team.
 12 **A.** Okay.
 13 **Q.** And you've been asked some questions essentially and
 14 directly about this by other counsel. Did you have that
 15 physical document with you at the time you undertook the
 16 Mental Health Act Assessment?
 17 **A.** No.
 18 **Q.** How is the referral made to your department?
 19 **A.** On this occasion, because it was an out-of-hours
 20 assessment, it was a bank holiday Sunday, if I've got
 21 that right, the referral was put in to our Emergency
 22 Duty Team, out of hours team, I believe, by Dominic.
 23 **Q.** Dominic Lloyd?
 24 **A.** Dominic Lloyd. Did he write that document, sorry.
 25 **Q.** -- (overspeaking) --

74

1 practitioner and I trusted her, her view.
 2 **Q.** Thank you. Mr Moloney on behalf of the deceased
 3 families -- the deceased victims -- asked you some
 4 questions about the medication.
 5 **A.** (*The witness nodded*).
 6 **Q.** So obviously he was prescribed an anti-psychotic --
 7 **A.** Yeah.
 8 **Q.** -- but that had not yet been administered, and there was
 9 a suggestion also that you might have given him some
 10 zopiclone; would it have been you?
 11 **A.** No, no. I think that would have come from the Crisis
 12 Team also.
 13 **Q.** You were asked some questions by Ms Cartwright KC which
 14 weren't strictly foreshadowed. The document was NOCC --
 15 it was quoted but NOCC0000098. I apologise if I've got
 16 the numbering incorrect.
 17 I think this may have to be something that's picked
 18 up later on, but I think that's the way Ms Cartwright
 19 left it (*unclear*). Thank you. We'll pass on.
 20 You were asked some questions latterly by Mr Straw
 21 on behalf of the Calocane family about whether you could
 22 have essentially delayed the Mental Health Act
 23 Assessment or essentially somehow prolonged his stay in
 24 police -- or at the police station. Was he actually
 25 remanded in custody or was he in custody pending

76

1 interview; do you know?
 2 **A.** I don't recall whether he'd been interviewed or not by
 3 that stage. So I don't know.
 4 **Q.** Bearing in mind the delay from the actions that had
 5 resulted in his arrest in your Mental Health Act
 6 Assessment, what basis would there have been to delay
 7 that even further?
 8 **A.** There would have been no legal basis on which we could
 9 have.
 10 **Q.** Do you recall or did you make a note of how long in
 11 hours it would have taken the Calocane family to reach
 12 Nottingham after you'd spoken to them?
 13 **A.** No, I don't think I did.
 14 **MR McNAMARA:** Thank you very much, Chair, those are my
 15 questions.
 16 **THE CHAIR:** Thank you, Mr McNamara, I didn't have you on my
 17 list as asking any questions; were you in touch about
 18 the Rule 10 process or not?
 19 **MR McNAMARA:** Forgive me, I did explain to Counsel to the
 20 Inquiry earlier, I would like the opportunity --
 21 **THE CHAIR:** Well, I think it would be useful to have notice
 22 simply because of the timing issues.
 23 **MR McNAMARA:** I apologise.
 24 **THE CHAIR:** Thank you.
 25 Yes, anybody else?

77

1 **ANNETTE PALMER (sworn)**
 2 **Questioned by MR CARR**
 3 **THE CHAIR:** Yes, Mr Carr.
 4 **MR CARR:** Thank you, Chair.
 5 Ms Palmer, can we have your full name, please?
 6 **A.** Annette Palmer.
 7 **Q.** Ms Palmer, you have prepared a statement for this
 8 Inquiry, haven't you, dated 21 November 2025?
 9 **A.** Yes.
 10 **Q.** Is that statement true to your best knowledge and
 11 belief?
 12 **A.** Yes.
 13 **Q.** You set out at the beginning of that statement your
 14 qualifications and background, don't you?
 15 **A.** Yes.
 16 **Q.** You are a mental health nurse employed by
 17 Nottinghamshire Healthcare NHS Foundation Trust.
 18 **A.** Yes.
 19 **Q.** You qualified in April 2006.
 20 **A.** Yes.
 21 **Q.** You have been a band 7, that's a Clinical Lead Nurse,
 22 since 2019.
 23 **A.** Yes.
 24 **Q.** In 2019 and from 2019 you were working in the Crisis
 25 Team.

79

1 Right. Thank you.
 2 **Questioned by THE CHAIR**
 3 **THE CHAIR:** Just one issue. Just in relation to the risk
 4 assessment that you did and high likelihood and high
 5 severity in relation to the -- perhaps we can just get
 6 that up very briefly, it's your risk assessment. So
 7 it's NOCC0000044, and it's on page 5 of that.
 8 Just a question: why was a further mental health
 9 deterioration not something which was also included in
 10 risk to others?
 11 **A.** It's a good point. It should be, I think, yeah, you're
 12 right. The impact of his deterioration potentially
 13 impacted other people.
 14 **THE CHAIR:** Yes, thank you.
 15 Thank you.
 16 **THE WITNESS:** Thank you.
 17 **THE CHAIR:** Right, we'll take a very short break, we'll
 18 start again at 4.00. Thank you.
 19 **(3.47 pm)**
 20 **(A short break)**
 21 **(4.00 pm)**
 22 **MR CARR:** The next witness is Ms Palmer.
 23 **THE CHAIR:** Yes.
 24
 25

78

1 **A.** Yes.
 2 **Q.** You have had experience of working both in community
 3 settings and in inpatient settings.
 4 **A.** Yes.
 5 **Q.** Your first and main involvement with VC was at his first
 6 Mental Health Act Assessment on 21 May 2020.
 7 **A.** Yes.
 8 **Q.** You attended that in the role of a gatekeeper?
 9 **A.** That's right.
 10 **Q.** I want to spend a few moments just understanding and
 11 exploring what that role involves. At paragraph 14 of
 12 your statement, you describe the role as involving
 13 supporting -- do you have it?
 14 **A.** Yes.
 15 **Q.** As s:
 16 "... supporting discussions in relation to deciding
 17 whether a person requires hospital admission, or whether
 18 they can be supported at home by the Crisis Team.
 19 I also advocate for the least restrictive practice that
 20 is suitable for each patient."
 21 **A.** Yes, I did.
 22 **Q.** You describe having attended numerous Mental Health Act
 23 Assessments both prior to and since May 2020?
 24 **A.** Yes.
 25 **Q.** Is that always as a gatekeeper?

80

1 A. Yes, when attending a Mental Health Act Assessment, it
 2 would be as -- in the gatekeeping role, yeah.
 3 Q. The gatekeeping role is not one that's required by
 4 either the Act, the Mental Health Act, or the Code of
 5 Practice, is it?
 6 A. That's right. It's not.
 7 Q. Trying to understand the role a bit better, if we can
 8 have on screen, please, NHFT000072. We have a policy
 9 here from the Trust -- it'll be up in a moment -- on the
 10 gatekeeping process.
 11 Now you can see on the front page broadly in the
 12 middle of the page it says:
 13 "DATE OF LATEST RATIFICATION: JUNE 2020.
 14 "IMPLEMENTATION DATE: JUNE 2018."
 15 So this appears potentially, this version
 16 potentially post-dates the period we're looking at,
 17 May 2020 --
 18 A. Mm-hm.
 19 Q. -- but does this policy set out, in broad terms, the
 20 approach that was taken in May 2020 to gatekeeping?
 21 A. Yes, it does.
 22 Q. If we can go to page 3 please.
 23 Paragraph 1.1, under the heading "INTRODUCTION", six
 24 lines down it makes a point that:
 25 "... admission to an acute inpatient ward should be

81

1 So that's making the point even where somebody does
 2 meet the criteria for care in the hospital, again try to
 3 encourage treatment outside of hospital.
 4 A. Yes, that's right.
 5 Q. And if we turn to page 7 of this document, this is
 6 an appendix to the policy admission criteria. It sets
 7 out the principles that are applied on a gatekeeping
 8 assessment as I read it; is that right?
 9 A. Yes.
 10 Q. We can see right at the bottom of the page, under the
 11 heading "Risk", item 2 asks whether the patient is "at
 12 risk of harming others and cannot be managed through
 13 home treatment of Haven Crisis House?"
 14 A. Yes.
 15 Q. So is that indicating that there are circumstances where
 16 the risk of harm is such that the gatekeeping approach
 17 of trying to keep somebody out of hospital won't be
 18 appropriate?
 19 A. Yes. There are occasions where that might be the case.
 20 Q. And under the heading "Assessment", item 7 or
 21 paragraph 7, it says:
 22 "The main exception overriding these criteria will
 23 be admission under the [Mental Health Act]."
 24 A. Yes. So if somebody is going to be admitted under the
 25 Mental Health Act Assessment, then we wouldn't be doing

83

1 a last resort, when all other options to provide care
 2 and treatment have been explored and ruled out."
 3 A. That's right.
 4 Q. If we go to the next page, page 4, at paragraph 3.1,
 5 under the heading "DUTIES", second sentence:
 6 "The CRHT" -- that's the Crisis and Home Team, isn't
 7 it?
 8 A. It is, yes.
 9 Q. "... CRHT are responsible for ensuring every patient is
 10 seen face to face, before accepting the patient for
 11 admission, taking every effort to manage that patient in
 12 the community."
 13 So really the role of the gatekeeper is to try to
 14 keep people out of hospital.
 15 A. I wouldn't say it's necessarily to keep people out of
 16 hospital; I think it's more to explore whether hospital
 17 admission is required and whether home treatment could
 18 safely be considered.
 19 Q. That point is made on the same page again, 4.2, where it
 20 says:
 21 "If it is indicated that the patient may need acute
 22 admission care, there still may be scope, depending on
 23 the clinical picture and associated risks, or a further
 24 period of assessment and intensive home treatment with
 25 CRHT."

82

1 home treatment because, you know, a decision's been made
 2 to admit them into hospital for that care and treatment,
 3 and nor would they be suitable to go to Haven House
 4 because we can't send people who are under a Section of
 5 the Mental Health Act to Haven House.
 6 Q. What I'm trying to clarify is how the role of
 7 gatekeeping, how your role of gatekeeping, how that
 8 interacts, if indeed it does, with the Mental Health Act
 9 Assessment.
 10 A. Yeah. So the role of the gatekeeper is as you've
 11 already stated, but also it's to help the assessing team
 12 to explore whether home treatment is suitable and to
 13 have an idea of what home treatment would look like for
 14 that person that we're assessing.
 15 It's also a good way to introduce ourselves as the
 16 Crisis Team to the person that is being assessed, and so
 17 that we're there to be able to explain the service that
 18 we work for, what we do, what we're looking to achieve.
 19 And it's just, you know, in order for a patient to make
 20 a decision about whether they want to come into hospital
 21 or would prefer home treatment, they need to understand
 22 what they're being asked.
 23 Q. That's so far as the patient is concerned --
 24 A. Yes.
 25 Q. -- but of course for a Mental Health Act the doctors are

84

- 1 considering whether or not compulsory powers are
2 required.
- 3 **A.** Mm-hm.
- 4 **Q.** Is it your view or experience that doctors undertaking
5 Mental Health Act Assessments are not sufficiently aware
6 of the services provided by the Crisis Team?
- 7 **A.** Doctors are aware of the services that we provide. They
8 might not be aware at the time of how, you know, about
9 in terms of the intensity of it. So for example if
10 you've got a patient that's quite unwell, they may need
11 quite a few visits a week -- sorry, quite a few visits
12 in the day to be able to make home treatment a safe
13 option. And it's good for them to have that reassurance
14 at the assessment rather than delaying any
15 decision-making whilst they're doing the mental health
16 assessment, so there's that added benefit there.
- 17 **Q.** If a Mental Health Act Assessment were to conclude that
18 there were to be an admission or detention, can the
19 gatekeeper refuse or stop that?
- 20 **A.** No.
- 21 **Q.** It's right, isn't it, those undertaking the Mental
22 Health Act Assessment, both the doctors and the AMHP,
23 they're already required to consider the least
24 restrictive option?
- 25 **A.** Yes, they should do that, yes.

85

- 1 influence them into a particular decision.
- 2 **Q.** So far as where the gatekeeping fits in with the Mental
3 Health Act Assessment, does it occur prior to or
4 alongside the Mental Health Act Assessment, usually?
- 5 **A.** So usually, so for a Mental Health Act Assessment,
6 usually gatekeeping can be done at the same time as the
7 Mental Health Act Assessment, hence why we're there.
- 8 There are occasions where the Crisis Team will see
9 somebody in the community, carry out an assessment,
10 because there are signs that they're becoming unwell, so
11 we will do what we call a gatekeeping assessment at that
12 point, and it could be that the gatekeeper decides that,
13 with the patient, that a hospital admission is required.
- 14 We would, as a gatekeeper we don't have any powers
15 under the Mental Health Act, so what we would do is kind
16 of have a conversation with them and ask if they would
17 be willing to be admitted informally, so of their own
18 free will, into hospital for care and treatment.
- 19 We would have to be satisfied that they understand
20 what they are consenting to, what their expectation
21 would be of that admission, and what we would be hoping
22 to achieve in terms of their mental health. So that
23 would be another occasion where a gatekeeping assessment
24 would take place.
- 25 **Q.** If we turn, please, to VC's assessment, paragraph 22 of

87

- 1 **Q.** So what is it that you can tell the doctors in the AMHP
2 that they should and already know and already take into
3 account?
- 4 **A.** As I've stated before, it's more about what the Crisis
5 Team can offer in terms of home treatment. So in order
6 for them to make a decision, they would want reassurance
7 from the Crisis Team that we would be able to deliver
8 that care and support at home if they chose not to admit
9 to hospital.
- 10 **Q.** Paragraph 28 of your statement, it's page 8, you
11 describe gatekeeping as:
12 "... the critical role crisis teams play in
13 assessing and managing access to inpatient mental health
14 services. The goal is to ensure that hospital
15 admissions are appropriate, necessary, and the least
16 restrictive option available."
- 17 **A.** Mm-hm.
- 18 **Q.** Is the reality that you are there at the assessment to
19 steer the doctors away from and to limit hospital
20 admission?
- 21 **A.** No, that's not how I see the role as the gatekeeper.
22 I think it's more to give an opinion in terms of, you
23 know, making sure that they have fully explored whether
24 home treatment is a viable option or not, but it's not
25 to actually make the decision for them or to kind of

86

- 1 your statement you describe having a brief conversation
2 with Mr Williams, that's the AMHP, but you can't recall
3 what was said?
- 4 **A.** Yes, so, I mean, normally the -- I can't recall exactly
5 what was said in VC's case, but normally the
6 conversation would be: "we have somebody who needs
7 a Mental Health Act Assessment, these are the
8 circumstances".
- 9 They would normally talk about any history that we
10 know of. They would talk about any risks that they are
11 aware of at that time, and they would either confirm the
12 time for the assessment during that call or we would
13 wait for another call to confirm the time for
14 assessment.
- 15 **Q.** Then you arrive for the assessment and you have further
16 discussions both with the AMHP and with the doctors?
- 17 **A.** Yes.
- 18 **Q.** Did you speak to any police officer about the
19 circumstances of VC's arrest?
- 20 **A.** No, I did not, and I think that was partly due to the
21 fact that I was late to that assessment. Because
22 normally we would have done as a team, we would have
23 spoken to the officers.
- 24 **Q.** Although you were late, had they already started with
25 the assessment or did they await your arrival?

88

1 A. No, they waited for my arrival.
 2 Q. But was there a sense of time pressure, having to get on
 3 with it because you'd arrived late?
 4 A. I didn't get a sense that there was any pressure.
 5 I mean, by all means they could have done ahead with the
 6 assessment and that would have been fine, but I think
 7 they just chose to wait, you know, to see if I'd come.
 8 So, yeah.
 9 Q. Did you or do you usually consider police records?
 10 A. So when it -- when -- so my experience of going into the
 11 police stations is we would normally speak with them and
 12 ascertain the circumstances as to their arrest. We
 13 would ask as many questions as we can, so for example,
 14 you know, if they've caused harm to anybody, if they've
 15 caused any damage, if there's a history of them being
 16 arrested before. Anything that will help us to kind of
 17 get an understanding of that person. Ask them about
 18 their presentation, how they've been whilst in custody.
 19 Any concerns that they've raised. So that sort of
 20 thing. We'd have a meaningful conversation.
 21 Q. If you'd usually have that conversation, and on this
 22 occasion with VC's assessment, you didn't feel under
 23 pressure of time despite running late, why didn't you
 24 have the conversation then?
 25 A. Because when I arrived, they explained to me that they'd

89

1 of, no risk to others or himself that she was aware of
 2 at the time. And I don't know if it's at that point
 3 where he told me that she would be coming to see VC.
 4 I can't remember if it was then or later.
 5 Q. But you recall having a sense that VC's mother was
 6 travelling to see him?
 7 A. Yes.
 8 Q. Did you have any sense as to when she would be arriving?
 9 A. Not at the point where I was told that she would be
 10 travelling. I think later on in the evening I did call
 11 VC's mum and I think I called her and I was just making
 12 her aware that I was intending to go out and deliver
 13 some medication to VC.
 14 Q. But at the time of the assessment you had a sense that
 15 VC's mother was coming.
 16 A. Yeah.
 17 Q. Did you appreciate whether it was going to be
 18 imminently, that day, the following days?
 19 A. I was given the impression it would be at some point
 20 that evening, because I knew Wales is quite a few hours
 21 away so, you know, I thought it may be likely to be in
 22 the evening.
 23 Q. And as to the background that you gathered from your
 24 discussion with the AMHP and the doctors, the
 25 circumstances of the arrest, were you aware for instance

91

1 already had those conversations. So they gave me
 2 a brief summary of what they'd talked about. That's
 3 why.
 4 Q. You didn't speak to VC's mother, Celeste Calocane.
 5 A. Not before the Mental Health Act Assessment, no.
 6 Q. Not until that evening, so not at any point during the
 7 assessment or --
 8 A. No.
 9 Q. -- immediately following it.
 10 A. No.
 11 Q. And of course it's part of the role and the AMHPs has
 12 a duty, don't they, to speak to the nearest relative?
 13 A. Yes.
 14 Q. Were you aware that Mr Williams had spoken to VC's
 15 mother by telephone?
 16 A. Yes, he did tell me that.
 17 Q. Were you present --
 18 A. No.
 19 Q. -- for that phone call?
 20 A. No.
 21 Q. Do you recall what he told you about his discussion with
 22 Celeste Calocane?
 23 A. I couldn't -- I can only remember brief things that he
 24 said. I think he'd just -- he told me that his mum
 25 confirmed that there was no history that we were aware

90

1 that VC had kicked the door of the neighbouring property
 2 office hinges in order -- in an attempt to gain access?
 3 A. Yes.
 4 Q. But for the purposes of giving your evidence today
 5 you've seen, haven't you, and we can put it on screen,
 6 a photograph of the damaged door. It's NGPF0000072. We
 7 can see the extent of the damage to the door.
 8 Were you aware, at the time of the assessment, the
 9 degree of force VC had used in trying to access that
 10 property?
 11 A. No.
 12 Q. Thank you. We can take that down.
 13 You've now also seen, haven't you, for the purposes
 14 of your evidence today, the statement of Inspector Katie
 15 Eustace, the arresting officer.
 16 A. Mm.
 17 Q. And she describes how, when she arrived, VC was trying
 18 to enter another property, was having to be stopped by
 19 a member of the public. Were you aware of that at the
 20 time of your assessment?
 21 A. I can't recall whether I was aware of the officer
 22 witnessing him trying to go into another property.
 23 I can't recall.
 24 Q. And she describes, doesn't she, that she had to arrest
 25 him --

92

1 A. Mm.

2 Q. -- put handcuffs on him, because he continued to push
3 even when she put her arm on him.

4 A. I don't recall having that information.

5 Q. Are those factors -- so the degree of force used on the
6 door, trying to gain access to another property, having
7 to be put in handcuffs, are those factors which would
8 have been relevant to your assessment of risk?

9 A. Yeah, they would have been relevant, yes.

10 Q. Would it have changed your approach to the assessment?

11 A. I think, yes, it would have changed my approach in terms
12 of we would have probably asked more questions
13 specifically around that and what he was thinking at the
14 time, you know, when the officer was trying to arrest
15 him. We would have asked for a bit more context from
16 him.

17 Q. Do you think it would have changed the outcome of the
18 assessment?

19 A. I'd probably say "possibly".

20 Q. If we can have on screen, please, NHFT0000168. If we
21 turn, please, to page 17. This is a "Ward Review". So
22 if we can go to the previous page, you can see the date
23 at the bottom there, 2 June 2020. So it post-dates your
24 assessment. Thank you. We can go back to page 17.

And if you go down in the middle of the page to
93

1 A. Quite likely, yes.

2 Q. How so?

3 A. So when we're doing the assessment we look at risks, so
4 we look at the risk of him potentially repeating this
5 behaviour, and we would base that on his answer, how
6 he's feeling about the experiences that he's having.
7 Certainly in our Mental Health Act Assessment, he -- he
8 was questioned about his view about accessing the
9 property next door. He admitted that, you know, he no
10 longer felt that his mum was at harm because we
11 challenged him on that view.

12 We did ask him if he had any intention of doing that
13 again, breaking into a door -- breaking into another
14 flat, sorry -- and he replied "No". But obviously if we
15 were aware that this was a, you know, a persistent
16 thought that he had, the likelihood of him reacting
17 again in this way would be a lot higher.

18 Q. We can take that down. So far as the impression that
19 you formed of VC at the assessment, you considered him
20 psychotic --

21 A. Yes.

22 Q. -- or to be suffering symptoms of psychosis. Did you
23 interact with him during the assessment or were you
24 there simply observing the doctors taking a history
25 and --

95

1 "Patient comments" in bold; do you have that?

2 A. Yes.

3 Q. And this is a note of what VC said during the ward
4 review:

5 "Thinks people have been following him/watching him
6 probably since last October

7 "So much so he moved house to a different area

8 "Had hoped he would have got away from the people
9 who were following him but he realised this did not
10 happen, instead they followed him

11 "Did not feel fear but became angry about this

12 "This is why he went to the neighbouring flat to try
13 to get to the people he thought were invading his mind".

14 A. Yes.

15 Q. Now that's different, isn't it, to the information that
16 was gathered during your assessment which was that VC
17 was going next door because he thought he could hear
18 screaming and that his mother was being raped?

19 A. Yes, this is different.

20 Q. If the history you had obtained was that in fact he was
21 angry and was going to neighbouring properties to
22 confront those he thought were invading his mind, would
23 that have changed your view of risk?

24 A. Yes.

25 Q. Would it have changed the outcome of the assessment?

94

1 A. Yes, I think towards the end of the assessment I asked
2 him couple of questions and that was more about his
3 willingness to engage with the Crisis Team, and
4 I explained a bit about what the Crisis Team is and what
5 we do. And I also, again, checked his willingness to
6 start treatment as well, to which he agreed that he
7 would be willing to have treatment.

8 Q. He'd indicated a willingness to have treatment --

9 A. Yeah, yeah.

10 Q. -- at home. But you agree that he lacked capacity to
11 make a decision as to treatment?

12 A. I think he had the capacity at the time to agree to home
13 treatment and agree to starting treatment. I think the
14 difference here for him was that he wasn't keen on the
15 idea that he had a mental illness when we put that to
16 him as part of the assessing team, although he
17 acknowledged that something wasn't right, and he
18 acknowledged that he needed help, and for those are the
19 reasons that he gave for being willing to see the Crisis
20 Team and actually have treatment.

21 Q. Now as to the decision not to detain, you, in your
22 statement, paragraph 34, you quote from an interview
23 that one of the psychiatrists, Dr Gandhi, gave in 2025,
24 and we can put that on screen. It's NHFT0004927.

25 If we go to page 2 of that document, please. And

96

1 it's the third paragraph up from the bottom. It states:
 2 "RG [Dr Gandhi] states that the team of
 3 professionals considered the research evidence that
 4 shows over representation of young black males in
 5 detention ..."
 6 I'm just going to stop there before I move on to the
 7 other section. Dr Gandhi gave evidence today and his
 8 evidence was that he couldn't remember if there was
 9 a conversation on race at this assessment and that race
 10 made no difference to his decision as to whether or not
 11 to detain.
 12 Do you recall there being any discussion as to VC's
 13 race when determining whether or not to detain?
 14 A. I don't recall any conversation.
 15 Q. Do you recall any consideration of research evidence?
 16 A. No.
 17 Q. So far as you are concerned, and at the time, was race
 18 a factor in deciding whether or not to decide whether or
 19 not to detain a patient?
 20 A. No.
 21 Q. The second part of that quote says:
 22 "... [Annette] Palmer was able to persuade us that
 23 [Crisis Team] could provide a safe and reasonable
 24 alternative of supervised medication and 2 visits/[a]
 25 day."

97

1 what would have happened if, having gained access to
 2 this property, someone was inside?
 3 A. So at the time of the assessment, I wasn't aware that
 4 the property was unoccupied. It's only, I think,
 5 towards the end of the assessment it became clear that
 6 the property was unoccupied for me because, as I say,
 7 I was there late and still trying to kind of think
 8 through everything that I'd been told.
 9 Q. But when you say damage to property not damage to a
 10 person, the property was empty, so did the team
 11 consider: well, had there been somebody inside the
 12 property or if VC was to gain access to a property with
 13 an occupant, what the risks then to an individual was?
 14 A. Yes. That was considered and spoken about, yes.
 15 Q. That risk existed, didn't it?
 16 A. Yes, yes.
 17 Q. Now, whilst you talk about treatment going some way to
 18 mitigating the risk, upon release from custody, well
 19 treatment hadn't commenced, had it?
 20 A. No. So he -- I believe he was released from custody
 21 later on that evening, and I asked to be informed when
 22 he'd been released so that I could leave out to start
 23 treatment with medication.
 24 Q. At the point of release, therefore, the risk was the
 25 same as it was prior to the assessment?

99

1 Now, was it that the position that the doctors were
 2 considering or leaning towards detention, and you, in
 3 the role of gatekeeper, persuaded them actually to keep
 4 VC out of hospital?
 5 A. No. Again it's not my role to persuade anybody of
 6 anything; more my role to identify what home treatment
 7 could look like if somebody wasn't to go into hospital.
 8 Q. Thank you. We can take that down.
 9 You say at your paragraph 36:
 10 "I felt that if VC was agreeable to having home
 11 treatment, and medication was started following his
 12 assessment, then this would go some way to mitigate the
 13 risks pertaining to VC ..."
 14 Now, the risks pertaining to VC included or extended
 15 to a risk of aggression or violence to others, didn't
 16 it, given the circumstances of the assessment?
 17 A. Mm-hm, yes.
 18 Q. The sort of aggression that had been seen earlier that
 19 day.
 20 A. Yeah, so that was aggression towards property. I wasn't
 21 aware of any aggression towards people at that time.
 22 Q. Were you aware, at the time of your assessment, that the
 23 property was unoccupied?
 24 A. No.
 25 Q. So there was no discussion amongst the team as to: well,

98

1 A. Yeah, yeah.
 2 Q. Your intention was to provide medication. You say you
 3 asked to be informed. Was your plan always to go to
 4 VC's property to give him the medication?
 5 A. Yeah, so the plan was not necessarily for me, but for
 6 the Crisis Team to go out and start medication with him,
 7 yeah.
 8 Q. Was any consideration given to, for instance, the Crisis
 9 Team meeting VC at the station and then travelling with
 10 him to his home?
 11 A. No consideration was given for that. That's not
 12 something we would normally do, because following the
 13 Mental Health Act Assessment, I left to go back to the
 14 office so that I could do the associated assessment and
 15 paperwork that we needed to do, but also I needed to
 16 make sure I could get the medication as well.
 17 Q. So far as medication and treatment, as it were,
 18 mitigating the risks, to quote your witness statement,
 19 there was obviously going to be a delay or period of
 20 time between the release and you seeing VC and giving
 21 him medication. But once he's given medication, is the
 22 response to it immediate?
 23 A. No, not necessarily. Sometimes people might have what
 24 we call a sedative effect that we might get initially
 25 but, you know, we wouldn't expect, you know, a full

100

1 response just from having one tablet.

2 **Q.** So that mitigation of the risk would not be immediate?

3 **A.** Not necessarily. It's hard to say. We wouldn't know

4 how he would respond to it initially.

5 **Q.** What thought was given, if any, by the assessment team

6 to the fact that upon release without medication, VC was

7 going back to his flat, the same place where the risk

8 had materialised earlier in the day?

9 **A.** Sorry, can you just repeat the question?

10 **Q.** Yes. Upon release from custody, VC would be returning

11 home --

12 **A.** Yes.

13 **Q.** -- to Brook Court. And of course, that's where he had

14 tried to gain access to a neighbouring property?

15 **A.** Yes.

16 **Q.** And that risk remained?

17 **A.** Yes.

18 **Q.** Upon release from custody, he would be going back to

19 exactly the same place?

20 **A.** Yes.

21 **Q.** My question is: what thought, if any, did you as an

22 assessment team give to: well, when he's released from

23 custody he's going to be going back to exactly the same

24 place where this incident occurred?

25 **A.** So I think, as I say, when we were speaking to him as

101

1 discharge somebody from the custody suite once relevant

2 assessments and things have been taken place.

3 **Q.** If there had been steps taken to delay VC's return home

4 until his mum was in Nottingham, then that is a method,

5 isn't it, of reducing his risk?

6 **A.** Yes, yeah, definitely. If that was an option, then

7 yeah, it would.

8 **Q.** Now, following the assessment and prior to you

9 travelling to VC's home to provide medication, you

10 completed a mental health clustering tool --

11 **A.** Yes.

12 **Q.** -- and a risk assessment on VC. The clustering tool is

13 at NHFT0002579.

14 We see at the bottom of the page there is a rating

15 or ranking, isn't there, of problems which follow? So

16 effectively you have to fill out this clustering tool

17 and rank certain issues by zero: no problem; up to four:

18 severe to very severe problem.

19 **A.** Yes.

20 **Q.** If we go over the page to page 2, you have ranked item

21 1: "Overactive, aggressive, disruptive or agitated

22 behaviour 2 = [as a] mild problem but definitely

23 present".

24 Why have you graded that 2?

25 **A.** I think it's because I identified that -- sorry, for

103

1 part of the Mental Health Act Assessment, we did, you

2 know, talk to him about what his intentions are when he

3 does go back home. We kind of asked him questions

4 about, you know: "should these thoughts come back, what,

5 you know, what would you do? Do you feel that you'll be

6 able to call the Crisis Team or call somebody to let

7 them know that you're, you know, you're struggling?"

8 He didn't disclose any intention to repeat the same

9 behaviour. He seemed reassured, as I say, that his mum

10 wasn't in danger at that point at that time when we were

11 assessing him.

12 **Q.** His psychosis would remain untreated and --

13 **A.** Yes.

14 **Q.** -- for --

15 **A.** -- it would.

16 **Q.** -- (*unclear*) following his release.

17 Given that you were aware that VC's mum, Celeste

18 Calocane, was travelling from Wales and was due to

19 arrive that evening, why wasn't any consideration given

20 to delaying VC's return to Brook Court until his mum was

21 in Nottingham?

22 **A.** To be honest with you, I don't know. I don't know if

23 that would have actually been an option, to be honest,

24 because we wouldn't have known what time his mum would

25 come and the police are often very keen to, you know,

102

1 the -- are we talking about the first one, the

2 overactive one first?

3 **Q.** Yes.

4 **A.** Yeah, so again that was more in line with the damage to

5 the door. Although I hadn't seen the photograph, I was

6 just given sort of like a verbal description of the

7 damage caused to the door. So that was my initial

8 rating. Just to point out that this tool can -- is

9 designed for you to be able to redo this assessment at

10 any time, so you can change the ratings on this.

11 **Q.** It's a living document and -- (*overspeaking*) --

12 **A.** Yeah, yeah.

13 **Q.** You've made that point that 2 was based on the

14 information you had at the time.

15 **A.** Yes.

16 **Q.** Given what you now know about events prior to your

17 assessment, would you change that 2 to a different

18 number?

19 **A.** So -- sorry, what do you mean by that question? Because

20 this is rated based on the Mental Health Act

21 Assessment --

22 **Q.** Yes.

23 **A.** -- and the information that I've had, so I've rated it

24 based on that information alone.

25 **Q.** Yes, and you said you hadn't seen the photo of the

104

1 damage to the door.
 2 **A.** No.
 3 **Q.** I asked you questions before about the circumstances of
 4 the arrest as set out in the Inspector's witness
 5 statement.
 6 **A.** Mm-hm.
 7 **Q.** So my question is, had you known the extent of the
 8 damage to the door, the force that was used, had you
 9 known about the circumstances described by the arresting
 10 officer, would it still be a 2 or would it be different?
 11 **A.** I might have possibly put a 3, possibly, yeah, for that.
 12 **Q.** Then number 4, please, "Cognitive problems ... Minor
 13 problem requiring no action."
 14 What's the reference to cognitive problem? Is that
 15 different to psychosis?
 16 **A.** Yeah. I think he -- he was saying that he was quite
 17 tired, and he said that it was affecting his studies.
 18 It's just something that he mentioned during the
 19 assessment. So that's why I've put it as a 1. It might
 20 be something that's easily resolvable with good sleeping
 21 pattern being established.
 22 **Q.** Number 6, "Problems associated with hallucinations and
 23 delusions". That's been described, again: "2 -- mild
 24 problem ..."
 25 In circumstances where somebody is reporting hearing

105

1 left, "Alert", and the first alert -- yes, if we zoom in
 2 the first alert you can see at 24 May, "Violence and
 3 Aggression", and it's entered by you, and it contains
 4 similar information to what's in your risk assessment.
 5 What is the purpose of these alerts?
 6 **A.** So it's to draw people to the attention of any risks
 7 that are significant when you first enter the patient's
 8 records.
 9 **Q.** And draw the attention of whom, of colleagues?
 10 **A.** Yes.
 11 **Q.** And so in respect of your colleagues they needed to be
 12 alerted to the fact there was a significant risk of
 13 violence and aggression.
 14 **A.** Yes.
 15 **Q.** Thank you. We can take that down.
 16 Now, the two documents we just looked at, the
 17 clustering tool and the risk assessment tool, they were
 18 completed, weren't they, following the Mental Health Act
 19 Assessment, but before you attempted to visit VC?
 20 **A.** Yes.
 21 **Q.** We know from your statement that you went to visit VC
 22 that evening to provide medication, but by the time you
 23 got there, events had overtaken, he'd already been
 24 arrested by the police?
 25 **A.** That's right.

107

1 screaming of the nature that VC did and it causes them
 2 to kick down a door and cause the damage that we saw, is
 3 that realistically a 2 or should that be higher?
 4 **A.** It could be higher, yes.
 5 **Q.** Should it be higher?
 6 **A.** Yes.
 7 **Q.** Should it be higher?
 8 **A.** Yeah.
 9 **Q.** What number should it be?
 10 **A.** 3, I would probably say now, yeah.
 11 **Q.** Then the risk assessment is NHFT0003815. At page 2, you
 12 have ticked and identified a risk to others. It's at
 13 the top of the page.
 14 **A.** Mm-hm.
 15 **Q.** And the details there you've set out:
 16 "Arrested for damaging a neighbouring flat door..."
 17 Was the reason for completing a risk assessment here
 18 because of the arrest and that risk to others, or is
 19 this something that would typically be done with every
 20 new patient?
 21 **A.** Yeah, it's something that we do. So every new contact
 22 with a patient, we would aim to do a risk assessment and
 23 a HoNOS with the Crisis Team, yeah.
 24 **Q.** We can take that down. Next document is NHFT0003401.
 25 It's difficult to read, but it's the section on the

106

1 **Q.** Now, you arrived at his flat some two and a half hours
 2 after his release from custody. You described before
 3 wanting to be kept abreast of when he was being
 4 released. Why was there such a delay in you going to
 5 his property to give him medication?
 6 **A.** So when I was informed that he'd been released,
 7 obviously I had to allow time for him to actually get to
 8 the property because I didn't know how he was getting
 9 home, normally the police take from custody. They would
 10 normally escort them home. And then also, as I said,
 11 I'd have to get medication. So it requires me to get it
 12 from the medication room.
 13 My -- when I got back to the office, it wasn't my
 14 intention to actually go out myself to give the
 15 medication to VC. It was actually something that I
 16 asked the rest of my team to allocate two members of
 17 staff to actually go and do that. But because they
 18 didn't have any staff members available to do that,
 19 I decided to go myself and do it.
 20 **MR CARR:** Thank you, Chair. Those are my questions. Again,
 21 there are other questions.
 22 **THE CHAIR:** Yes, thank you.
 23 **Questioned by MR MOLONEY**
 24 **MR MOLONEY:** Only one topic, Ms Palmer, please.
 25 You told Mr Carr that as a group, if I could refer

108

1 to you or Mr Williams and Dr Gandhi and Dr Malik in that
 2 way, that you considered the risk as to what would have
 3 happened if VC had gained -- got into the flat and found
 4 somebody there?
 5 **A.** Yes.
 6 **Q.** Yeah. Can you remember at what stage it was that you,
 7 as you group, considered that?
 8 **A.** I think it may have been towards the end of the Mental
 9 Health Act Assessment, where we were just checking about
 10 his thoughts, about the reason for him kicking the door
 11 down and entering the flat.
 12 **Q.** So if I could just seek to clarify, forgive me, I just
 13 want to try to move things on, but would that be after
 14 you'd interviewed VC and you sat down together as a
 15 group and then discussed what would be the appropriate
 16 way forward?
 17 **A.** So it's two parts. So towards the end when we're just
 18 checking with him about whether he is clear about the
 19 fact that his mum wasn't actually there, and also, you
 20 know, we said to him, you know, "What would you have
 21 done if somebody was in the flat?" And he says, "Well,
 22 you know, I wouldn't have done anything."
 23 And then obviously when we did come away to have
 24 a discussion, we did discuss that as well again, but
 25 I can't recall exactly what was said in that discussion,

109

1 of a risk assessment in these circumstances, wouldn't
 2 it?
 3 **A.** Yes.
 4 **Q.** Because it would be a really important indicator of
 5 future risk and the suitability of home treatment?
 6 **A.** Yes.
 7 **Q.** Do you remember, do you have it recorded anywhere in
 8 your notes about that particular aspect of the
 9 conversation?
 10 **A.** I don't. So for our process, normally, when it's
 11 a Mental Health Act Assessment, normally the doctors
 12 will write an entry about the assessment as a whole,
 13 yeah? And from the Crisis Team perspective, we would
 14 write about what role we're going to do, what actions
 15 we're going to take.
 16 **Q.** Yeah.
 17 **A.** Now, in circumstances, if for example I disagreed with
 18 the decision for him not to -- if I -- sorry, if
 19 I disagreed that ... I'm trying to make it make sense.
 20 Okay, if the decision was that he was to go into
 21 hospital, yeah, let's say, and I disagreed with that,
 22 I would put something -- I would make my own entry and
 23 say, you know --
 24 **Q.** "I consider -- (*overspeaking*) --
 25 **A.** Yes, I would write that and my rationale for it --

111

1 sorry.
 2 **Q.** Okay. Just on that, in terms of you just mentioned then
 3 about his -- him being clear that his mum wasn't
 4 there --
 5 **A.** Yeah.
 6 **Q.** -- he became quite tearful, did he, when he found out
 7 his mum was okay?
 8 **A.** Yes. I think -- I got the sense that he -- when we put
 9 to him that, you know, you know, we said to him
 10 something to the effect of, you know, "Your mum wasn't
 11 there", and "when you realised that, what did you
 12 think?" I think he then became tearful at that point
 13 because I think he just appeared like he was shocked by
 14 what he had done, if that makes sense. Just the
 15 impression that I'm getting from him at that time.
 16 Yeah.
 17 **Q.** Okay, as -- I don't want to labour this, but as an
 18 alternative, could it be that he was -- he had actually
 19 believed what had happened was true and he was so
 20 relieved that his mum was okay?
 21 **A.** Yes, I think that could be true, yes.
 22 **Q.** Thank you. And did -- you say that he was asked about
 23 what he would have done if he'd found somebody in there,
 24 and that he'd perceived them to be attacking his mum,
 25 what he'd heard, that would be an absolutely core part

110

1 **Q.** -- just to make sure your position clear --
 2 **A.** Yes.
 3 **Q.** So you had the opportunity to do that.
 4 **A.** That's right, and vice versa, it would go the other way
 5 as well. If there was something that I didn't agree
 6 with, I would make my own entry, is what I'm trying to
 7 say, yeah.
 8 **Q.** And essentially, the doctors would set down everything
 9 that was core to their assessment and why it was that
 10 they made that decision --
 11 **A.** (*The witness nodded*).
 12 **Q.** -- and then you would add anything that you wanted to
 13 upon disagreement.
 14 **A.** That's right, yes.
 15 **MR MOLONEY:** Thank you very much, Ms Palmer, that's all I
 16 ask.
 17 **THE CHAIR:** Yes.
 18 **Questioned by MS CARTWRIGHT**
 19 **MS CARTWRIGHT:** Good afternoon, Ms Palmer. Can we briefly
 20 look at your entry in the medical records, please, and
 21 the plan, NHFT0000168, and I may have missed a zero out.
 22 So four zeros 168 at page 1, please.
 23 Thank you. It's the entry at the bottom of the
 24 page, please, we can see at 4.32 pm, we have:
 25 "Crisis Team Gatekeeping Plan:

112

1 "Crisis Team to support twice daily visits and
 2 medication concordance. Evening visit with medication
 3 today with two staff members".
 4 We've seen from the record from the AMHP that
 5 essentially the sergeant is indicating that they wanted
 6 to get VC out of custody. Can you help us, then, you've
 7 told us effectively that no one from the Crisis Team
 8 could go out to deliver VC's medication. So we can see
 9 later in a minute, you make an entry at 9.50 in the
 10 evening where you have gone out yourself to deliver the
 11 medication. So can you confirm, first of all, did you
 12 attend VC's property alone?
 13 **A.** So yes, so I am part of the Crisis Team, so --
 14 **Q.** I appreciate that.
 15 **A.** Yeah, so I --
 16 **Q.** It wasn't meant to be you that went to take the
 17 medication?
 18 **A.** So I went back to my office and my plan was to allocate
 19 two members of staff to actually go out and do the
 20 medication concordance. There wasn't two members of
 21 staff available and actually there was nobody available
 22 in the office to go because they were all out on visits.
 23 So that's when I made the decision to go myself.
 24 **Q.** That's what I want to understand because when was it
 25 identified that no one else was available because VC has

113

1 **A.** Yes, yes.
 2 **Q.** So did that raise any issues about lone working?
 3 **A.** So in the Crisis Team we have lone worker devices, and
 4 we carry mobile phones as well.
 5 **Q.** But can you see, though, that the plan was for two
 6 people --
 7 **A.** Yes.
 8 **Q.** -- to attend and deliver VC's medication?
 9 **A.** Yes.
 10 **Q.** So essentially already, within a couple of hours of VC
 11 being released, the plan has already broken down that
 12 had been made with your involvement; would you agree,
 13 because there just wasn't the staff available.
 14 **A.** No, I don't agree. So the plan was made by myself. I'm
 15 the one who documented two staff because I was thinking
 16 that's two members of staff that haven't met VC. Okay?
 17 And normally, when Crisis Teams do assessments, they
 18 would normally do it in twos, but this was different;
 19 this was a Mental Health Act Assessment that I attended.
 20 I'd met him, so I felt it was safe enough for me to go
 21 alone at that point. I know I could ask for support
 22 from the police if I needed to, if I felt there was some
 23 concern there, but also I had no intention of going into
 24 his flat or anything, I could do medication concordance
 25 on the doorstep, so --

115

1 been in custody from just before one in the morning,
 2 he's very mentally unwell --
 3 **A.** Mm-hm.
 4 **Q.** -- and so your entry will carry on to page 3, we've got
 5 you attending then at nine -- making an entry at 9.50,
 6 looking at it there, that you went to deliver his
 7 medication.
 8 **A.** Yeah. So I would have made that entry when I actually
 9 got back from going.
 10 **Q.** So can you help us at what time that it actually was
 11 that you physically got to VC's accommodation to deliver
 12 him the antipsychotic?
 13 **A.** I can't, to be honest. I can't. I can't give you an
 14 exact time.
 15 **Q.** But certainly it's after VC has been taken back into
 16 custody and rearrested? I think we see in your notes,
 17 you --
 18 **A.** Yeah, so I -- I'll tell you what I can recall. Maybe
 19 that will be easier. So I can recall being informed
 20 that he was about to be released from custody, and I'd
 21 estimate within an hour-and-a-half, that I'd started
 22 making my way. Again, I don't know what time that's
 23 going to be, but, yeah. In my mind, that makes sense to
 24 me, that -- within that time.
 25 **Q.** All right. But did you go alone?

114

1 **Q.** That's what I'm trying to understand. What,
 2 practically, the plan you've made for the Crisis Team to
 3 go two times a day --
 4 **A.** Yes.
 5 **Q.** -- is it simply because we're in lockdown at this stage
 6 in Covid, is it simply to hand VC his antipsychotic
 7 medication through the door?
 8 **A.** No. No. So what we would normally do is we would speak
 9 to VC, because this will be the first medication that
 10 he's having from us, so I took -- I had with me the
 11 patient information for medications. I would have spent
 12 the time talking to him about the medication, talked to
 13 him about the side effects, reassessed his willingness
 14 to continue to work with the Crisis Team, okay, and set
 15 out contact for the following -- for the following
 16 morning. So it wouldn't -- it's not just simply
 17 medication concordance, it would be to actually go back
 18 over the plan.
 19 **Q.** Just so I'm clear, because we're in May 2020, Covid
 20 time, were the Crisis Team then physically going into
 21 patients' homes?
 22 **A.** Yes, we were.
 23 **Q.** You were.
 24 **A.** Yes.
 25 **Q.** All right. Then can I ask you another topic, because

116

1 plainly you identify on 24 May that there has been
 2 a further issue, VC has broken into premises.
 3 **A.** Yes.
 4 **Q.** Did you become aware that night that VC had caused
 5 a harm event?
 6 **A.** So whilst I was at the property, I had a phone call from
 7 a gentleman in the Street Triage Team. He told me that
 8 VC had broken into another flat and he'd told me that
 9 a lady had jumped in order to try to escape from him and
 10 sustained some injuries. He didn't have any further
 11 information to give me at that point. And he told me
 12 that he could see from my entry of my intention to go,
 13 so that's why he called me.
 14 **Q.** So certainly you're aware, that night --
 15 **A.** Yes.
 16 **Q.** -- another person has jumped out of a first floor window
 17 and has sustained injuries --
 18 **A.** Yes.
 19 **Q.** -- at a time when there has been a decision not to
 20 detain VC, and he is subject to the Crisis Team. You
 21 are a clinical lead band 7 nurse.
 22 **A.** Yes.
 23 **Q.** An individual has now suffered a harm event at the hand
 24 of a Mental Health Act Assessment that's plainly raised
 25 issues.

117

1 **Q.** So you're a clinical lead.
 2 **A.** Yes.
 3 **Q.** You have your duty of candour.
 4 **A.** Yes.
 5 **Q.** What did you do to Datix incident this?
 6 **A.** I didn't make -- so basically I -- when you say "data
 7 index" (*sic*) this, do you mean like an alert or
 8 something? I don't understand what you mean.
 9 **Q.** There's a harm event that's occurred --
 10 **A.** Yes.
 11 **Q.** -- that requires incident reporting.
 12 **A.** Yes.
 13 **Q.** Now the level of that can change as to whether it's
 14 minor injuries or serious or catastrophic.
 15 **A.** Yes.
 16 **Q.** But you had an obligation to incident report this.
 17 **A.** Yes. So --
 18 **Q.** Why didn't you do that?
 19 **A.** So -- (*overspeaking*) -- so -- so yes, I was informed of
 20 this, but it's everybody's -- anyone who comes into
 21 contact, it's everyone's responsibility.
 22 **Q.** Appreciate that, you're the clinical lead.
 23 **A.** Yes.
 24 **Q.** You've been present at the Mental Health Act Assessment.
 25 **A.** Yes.

119

1 **A.** Yes.
 2 **Q.** What did you do, in accordance with your professional
 3 duty of candour, to Datix incident this?
 4 **A.** So based on the information I had, I didn't have enough
 5 information to put on because what I didn't know is
 6 whether VC had directly caused this incident or
 7 anything. I didn't know enough to be able to put
 8 an alert on or to write an entry on it.
 9 **Q.** Pause there. This is a patient who is now under the
 10 care of the Crisis Team, following a Mental Health Act
 11 Assessment that has not been pursued --
 12 **A.** Mm-hm.
 13 **Q.** -- with the Crisis Team package of care being the
 14 alternative --
 15 **A.** Mm-hm.
 16 **Q.** -- with a psychotic man who is having delusions and
 17 hallucinations, and you're aware that something has
 18 happened involving VC --
 19 **A.** Yes.
 20 **Q.** -- that's caused a member of the public to jump out of
 21 a first floor window.
 22 **A.** Yes.
 23 **Q.** Let's agree first of all that is a harm event; do you
 24 agree?
 25 **A.** It is, it is a harm event, yes.

118

1 **Q.** You've physically taken the medication from the
 2 medication cabinet at Highbury Hospital.
 3 **A.** Yes.
 4 **Q.** You've gone to deliver it, and you've been told first
 5 hand a member of the public has jumped out of a
 6 window --
 7 **A.** Mm-hm.
 8 **Q.** -- and she's sustained an injury --
 9 **A.** Yes.
 10 **Q.** -- within a short period of VC being released from
 11 custody.
 12 **A.** Yes, yes.
 13 **Q.** You would understand the duty of candour, as a clinical
 14 lead I think you would agree that's non-contentious.
 15 **A.** Yes, I agree.
 16 **Q.** You would be aware of the Trust responsibility for
 17 incident reporting.
 18 **A.** Yes.
 19 **Q.** You would be aware of the need under candour and
 20 Regulation 20 --
 21 **A.** Yes.
 22 **Q.** -- for the Trust to apologise to the victim.
 23 **A.** Yes, I'm aware. But also, the person that told me of
 24 this incident, who would have more knowledge than me, is
 25 also in a position to update and make an incident

120

1 report.

2 **Q.** I appreciate that, but candour is everyone's

3 responsibility.

4 **A.** Yeah, it is, it is.

5 **Q.** But you're the clinical lead.

6 **A.** Yes.

7 **Q.** And that's what I want to understand, because it's not

8 just a technical piece of paper filled in.

9 **A.** No.

10 **Q.** This triggers incident reporting, investigation.

11 **A.** Yes.

12 **Q.** It would have enabled an opportunity for the Trust to

13 have interrogated what records the police had.

14 **A.** Mm.

15 **Q.** What the failings were in the assessment.

16 **A.** Yeah.

17 **Q.** And it could have enabled, in May of 2020, the most

18 robust assessment of what went wrong that night.

19 **A.** Yes, I agree.

20 **Q.** So it's not just a technical form filling; this goes to

21 understanding failures in systems, processes, failures

22 in training --

23 **A.** Mm (*The witness nodded*).

24 **Q.** -- failures in competency and knowledge.

25 **A.** Yes.

121

1 **Q.** But a Datix incident can be done --

2 **A.** Yes.

3 **Q.** -- on what's known at the time --

4 **A.** Yes.

5 **Q.** -- and then regraded once the knowledge of the level of

6 injury?

7 **A.** Yeah.

8 **Q.** Would you agree, even if an incident report went in that

9 night to suggest some injury, once it was known that

10 Feven had fractured her back, this should have been

11 escalated to the most serious level to reflect and get

12 every last bit of learning as to what went wrong here?

13 **A.** Yeah, I totally agree. I totally agree. But, like

14 I said, I wasn't privy to the information in its

15 fullness. As I said, I didn't know whether VC had

16 pushed her or whether she'd -- you know, obviously, you

17 know, fearful of her life and jumped. I didn't know.

18 So as again, factually, I would need to be clear about

19 what I am putting there.

20 **Q.** So then what did you do after 24 May to find out the

21 information you didn't have?

22 **A.** So after 24 May, so he'd been arrested again, and my

23 understanding was that he had a further Mental Health

24 Act Assessment. I didn't have any further involvement

25 after that with VC because he would then -- then went

123

1 **Q.** What factors Covid played, what other factors, whether

2 there was a bed availability issue --

3 **THE CHAIR:** Ms Cartwright, are you asking a question or

4 making a speech?

5 **MS CARTWRIGHT:** Yes, I was going to say: would you agree all

6 of those factors would have been investigated?

7 **A.** Yes, I do agree. I do agree, yes.

8 **Q.** Do you agree that you personally had a role and you

9 failed in your personal obligations under candour and

10 for Datix incident. There may be other people issues as

11 well, but you personally, with the first-hand knowledge

12 you had, failed?

13 **A.** Yeah, I admit that I could have tried to put something

14 on, but to be fair, I wasn't in -- I wasn't -- I didn't

15 have all the facts and I think when you're putting an

16 entry onto someone's notes, you need to be clear about

17 what has happened here.

18 **Q.** So an --

19 **A.** And I wasn't clear, because I'd been told that

20 information, I returned back to the office, and put the

21 medications back. But my colleague who told me of the

22 incident is also in a position to be able to update

23 those records --

24 **Q.** I appreciate that --

25 **A.** -- with the information.

122

1 into what we call hospital --

2 **Q.** And as clinical lead --

3 **A.** -- hospital admission.

4 **Q.** -- what did you do to say to another individual "I don't

5 have the full information tonight, but someone needs to

6 get this tomorrow, the next day"?

7 **A.** I believe there's -- I think the RiO records reflect

8 that, that there has been an incident, and we just don't

9 have any further information.

10 **Q.** Then, finally, can I ask, because we've got this extra

11 layer of gatekeeping that's been spoken to, but what

12 acute beds were available to Nottingham Trust in area at

13 that time. We know there are, I think, 16 beds at

14 Highbury --

15 **A.** Mm.

16 **Q.** -- was there a contract already in existence with the

17 Priory to provide acute beds at the Priory Arnold?

18 **A.** Yes, I believe there was. We did have some contracted

19 beds in other hospital zones.

20 **Q.** So beyond those beds and the 16 at Highbury Hospital,

21 were there any acute beds available to Nottingham Trust?

22 **A.** I can't answer that at the time.

23 **Q.** Did Nottingham Trust have a PICU bed in area other than

24 private provision?

25 **A.** I don't know at the time of the assessment.

124

1 **MS CARTWRIGHT:** Thank you for answering my questions.

2 **THE CHAIR:** Thank you.

3 Mr Straw.

4 **Questioned by MR STRAW**

5 **MR STRAW:** Ms Palmer, just one issue. Could we have the
6 NHFT document back up on screen that we just that before
7 now, so it's NHFT0000168, thank you, and page 129 of
8 that, please.

9 Ms Palmer, can you see at the bottom of the page
10 there's an entry that you made on 14 August.

11 **A.** Yes.

12 **Q.** You say there:

13 "Two recent admissions ... one in June 2020 ...
14 (discharged on 16 [June]) ... [and] VC was admitted on
15 15th July..."

16 The next paragraph:

17 "[VC] had decided to stop taking his medication 2
18 weeks after he was discharged from his last admission.
19 He believed that he was well and that he did not have
20 mental health problems ... after stopping his medication
21 he had started to hear voices."

22 Are you saying there that two weeks after his
23 discharge on 16 June, he decided to stop taking
24 medication.

25 **A.** What I'm actually doing here is reading several entries

125

1 **A.** Yeah.

2 **Q.** -- 2020, and again, that's all based on the notes your
3 reading.

4 **A.** Yes, just based -- just purely based on the notes and
5 what clinicians have documented.

6 **MR STRAW:** Great. Okay, thank you very much.

7 **THE CHAIR:** Thank you. I'll assume, Mr Beggs, although you
8 are listed, do you want to say anything? No? All
9 right.

10 Mr Beer. Thank you.

11 **Questioned by MR BEER**

12 **MR BEER:** Just a small number of topics, if I may.

13 Firstly, I want to ask you questions about your role
14 as a band 7 nurse in the Crisis Team when you're
15 attending a Mental Health Act Assessment.

16 **A.** Yes.

17 **Q.** We've heard that the range of occupations from which the
18 Section 12 doctors, in particular the second Section 12
19 doctor, is drawn varies considerably. Is that your
20 experience?

21 **A.** Yes.

22 **Q.** From GPs, to SpRs, to private providers doing this on an
23 *ad hoc* basis to make up their earnings.

24 **A.** Yes.

25 **Q.** Is that your experience?

127

1 from this -- from the start of the -- his contact with
2 the Crisis Team, and summarising the findings from my
3 other colleagues, and this is what they'd kind of
4 implied: that he'd stopped taking his medications
5 two weeks after discharge, so that's why I've put that
6 there.

7 **Q.** So it's the two weeks after the first discharge, around
8 about 1 July he stops taking his medication.

9 **A.** Yeah.

10 **Q.** I was going to ask, do you get that information from the
11 notes rather than from speaking to VC; is that right?

12 **A.** Yes, that's right, yes.

13 **Q.** Thank you, then the next paragraph, you note:

14 "Significant improvement noted."

15 When was that? Was that on the date you're making
16 this note, 14 August 2020?

17 **A.** No, so that's the statement I've wrote in terms of as
18 I say looking through. So looking at what the symptoms
19 have been reported or the concerns that clinicians have
20 made in the notes, and then looking at how -- looking at
21 what they're saying about him now.

22 **Q.** So the time of the significant improvement noted, was
23 that around the time you're making that note?

24 **A.** Yes.

25 **Q.** 14 August --

126

1 **A.** Yes.

2 **Q.** Does the knowledge of the two attending Section 12
3 doctors about the facilities and services that can at
4 that time be offered by the Crisis Team, to any
5 particular person, vary considerably?

6 **A.** Yes.

7 **Q.** Is that one reason why you are there, namely to provide
8 information about the facilities and services that the
9 Crisis Team can offer at that time this patient?

10 **A.** Yes.

11 **Q.** Is another reason for you being there to ensure, so far
12 as possible, a smooth transition to care in the
13 community? Again, so far as is possible. So a member
14 of the Crisis Team is in the room when an assessment is
15 made.

16 **A.** Yes.

17 **Q.** And can therefore brief others or, as in this case, take
18 some direct action themselves. You took some medication
19 out.

20 **A.** Yes.

21 **Q.** Those two things I've highlighted, to your knowledge,
22 are they the reasons for having Crisis in the room, as
23 it were?

24 **A.** Yes.

25 **Q.** Is there anything else that I've missed out?

128

- 1 A. No, I don't think -- I don't think so, no.
- 2 Q. On this occasion, the absence of two people being
3 available to take medication out, is that a very
4 practical example of the pressure on the mental health
5 resources?
- 6 A. No. I think what you have to understand is, as I said,
7 when we were notified that VC was released, obviously
8 it's in that moment. So therefore you would look at
9 what staff you've got available at that time. Normally,
10 crisis work is pre-planned. We plan appointments and
11 plan visits, et cetera, and contacts. So we try to be
12 responsive as a Crisis Team and, as I say, I decided to
13 take the medications out myself because one, I didn't
14 want to delay treatment at all, and two, you know, he'd
15 just been released and I wanted to get there as soon as
16 I could.
- 17 Q. Okay. Secondly, can I ask you about the information
18 available from the police, indirectly in your case,
19 because you told us that you weren't there when the
20 other three were briefed --
- 21 A. Yes.
- 22 Q. -- about what had led to VC being detained?
23 Now, I think you were told that they had been
24 informed that he had kicked the door off the hinges?
- 25 A. Yes.

129

- 1 Now, you were not one of the decision makers in this
2 regard, were you?
- 3 A. No.
- 4 Q. But that fell to doctors Gandhi and Malik and
5 Mr Williams, the AMHP.
- 6 A. Yes.
- 7 Q. So are you therefore saying what effect you think those
8 three pieces of knowledge would have had on their
9 decision making?
- 10 A. I don't think, even if I thought differently with the
11 additional information that you've just suggested, it
12 may have influenced my thoughts on whether I felt home
13 treatment was feasible or not. And I would have been
14 able to put that to the rest of the assessing team. So
15 that's the difference that it would have made in terms
16 of that.
- 17 Q. So in terms of the services that Crisis may have been
18 able to offer?
- 19 A. Yes.
- 20 Q. Thank you. Third, you were asked about some of the
21 information that emerged in the course of VC's
22 subsequent detention after the second incident,
23 something that had emerged from VC himself, as a matter
24 of fact, about his intentions and his reasons for
25 seeking to get entry to the property?

131

- 1 Q. But you told us that you weren't told the level of force
2 said to have been shown by the photograph that you were
3 shown today?
- 4 A. That's right.
- 5 Q. Can you help us, what was the difference between what
6 you knew, a door had been kicked off the hinges, and
7 what is shown in the photograph?
- 8 A. I guess, for me, I guess, seeing the damage, you get to
9 kind of have an idea of the amount of force. So to me
10 in the picture, it looks like a very heavy fire door
11 which, just looking at it, it would take significant
12 strength to cause that kind of damage to the door.
- 13 Q. So it's the type of door?
- 14 A. Yes.
- 15 Q. Thank you. You were not told that he had tried to enter
16 an adjacent property?
- 17 A. I don't recall that bit of information -- (*overspeaking*)
18 --
- 19 Q. You've told us that you were not told or the police had
20 not said that he had been handcuffed on arrest?
- 21 A. No.
- 22 Q. You said that if you had been told those three pieces of
23 information, the outcome of the assessment would -- and
24 I'm using your words from earlier -- probably have
25 possibly been different.

130

- 1 A. Mm-hm.
- 2 Q. Was the mental state examination and the interview of VC
3 conducted by Dr Gandhi and by the AMHP full and
4 detailed?
- 5 A. I believe it was.
- 6 Q. Can we look, please, at NHFT0000168, and page 2, please.
7 If we can look about a third of the way down, we see "On
8 Review". Then if we scroll down, that's where this part
9 starts, which is essentially what VC is saying.
10 Then if we look about ten lines up from the bottom
11 of that page it says:
12 "When I questioned him [that's VC] about thought
13 insertion, broadcasting or withdrawal he kept asking
14 what I meant."
15 Then if we scroll back up, please, if you can make
16 that slightly larger for my eyes. Thank you very much.
17 You see above "Note" on the left-hand side it says:
18 "When questioned about what happened last night. He
19 initially was confused but then told us he heard someone
20 screaming and went to investigate. On further
21 questioning he revealed he hear[d] his mother screaming
22 and people were screaming telling him that his mother
23 was being raped and she was in pain."
24 A. Mm-hm, yeah.
- 25 Q. So it's clear from this record, would you agree, that --

132

1 and I think Dr Gandhi had questioned VC directly about
2 his intentions or the reason for entering the flat.

3 **A.** Yes.

4 **Q.** So it wasn't a lack of questioning about the issue; it's
5 that subsequently VC said something a little different
6 on a subsequent occasion.

7 **A.** Yes.

8 **Q.** Lastly, to your knowledge, is there a power to detain
9 a person in police custody to await the arrival of their
10 mother?

11 **A.** No.

12 **Q.** To your knowledge, is there a power under the Mental
13 Health Act 1983 to detain a person in police custody to
14 await the arrival of their mother?

15 **A.** Not as far as I'm aware.

16 **Q.** To your knowledge, is there a power to conduct a Mental
17 Health Act Assessment and then delay announcing the
18 outcome of it for, say, five hours as a synthetic device
19 to keep someone in police custody to await the arrival
20 of their mother?

21 **A.** No.

22 **MR BEER:** Thank you very much indeed, Ms Palmer.

23 **THE CHAIR:** Thank you.

24 **Questioned by THE CHAIR**

25 **THE CHAIR:** Just a couple of questions. I think in fact you
133

1 heard about the second incident?

2 **A.** As I said, no I didn't, because I didn't know enough of
3 what had happened to be able to put something on and, as
4 I said, my colleague that told me was in a position to
5 be able to put that on with the relevant information.

6 **THE CHAIR:** But having put on there the alert that you did,
7 which just refers to the door --

8 **A.** Yes.

9 **THE CHAIR:** -- and knowing that something else that
10 happened --

11 **A.** Yeah.

12 **THE CHAIR:** -- did you not think about finding out more and
13 making sure that your entry was correct?

14 **A.** Yeah. So I personally didn't think of that at the time,
15 but as a Crisis Team, we are a team and we constantly
16 review patient's notes, so yes, in time it would have
17 been updated.

18 **THE CHAIR:** Except this alert wasn't updated, was it.

19 **A.** That initial alert -- that particular alert doesn't
20 necessarily need to be updated. You can put a fresh
21 alert on so it's a separate alert, although it would sit
22 with that.

23 **THE CHAIR:** Well, it's obvious that nothing else was added
24 to it, was it, until --

25 **A.** Not on here, but I think there's reference to it in the
135

1 said that you did call Mrs Calocane, making her aware
2 that you were going to deliver some medication?

3 **A.** Yes.

4 **THE CHAIR:** Did you ask her at that stage where she was and
5 how long she would be taking to get there?

6 **A.** I can't recall if I asked her that question, no.

7 **THE CHAIR:** It would have been useful to know that,
8 wouldn't it?

9 **A.** Yeah.

10 **THE CHAIR:** Do you remember whether that was before or after
11 he was released from custody?

12 **A.** So I believe the time that I called her was, it was in
13 the evening, and I'm so sorry, I can't recall what
14 I said in the conversation but it certainly was in the
15 evening and I think she just, you know, she indicated
16 that she was on her way but I can't say that she told me
17 a time. I don't think she knew what time she'd be
18 coming, I don't think. So --

19 **THE CHAIR:** Right. Just in relation to the reporting of
20 this, what you were told by somebody else that happened,
21 that's to say jumping out of the window. If we just go
22 to NHFT0003401, this is your alert that you've put on
23 the system, and you put that on on 24 May.

24 **A.** Yes.

25 **THE CHAIR:** Did you think about adding to that once you'd
134

1 notes, I believe, that I've seen before.

2 **THE CHAIR:** Because these alerts are --

3 **A.** Yeah. (*The witness nodded*).

4 **THE CHAIR:** -- because staff would be going to visit him --

5 **A.** Yes.

6 **THE CHAIR:** -- or dealing with him, and that's something
7 they need to know, isn't it?

8 **A.** Yes.

9 **THE CHAIR:** And as far as the report is concerned, again,
10 you know, you said you were very surprised to hear about
11 the second incident so soon after he had been
12 discharged.

13 **A.** Mm.

14 **THE CHAIR:** It must have come, having made the decision that
15 you did, as a surprise to you when you heard that
16 there'd been a second incident in the same place of the
17 same kind?

18 **A.** I think it was -- yeah, it was a surprise about the
19 second incident, but also that somebody was harmed, as
20 well. I think that's -- that that's --

21 **THE CHAIR:** Exactly. So did you not want to follow that up?

22 **A.** So normally we would have done but, as I say, he was
23 then rearrested so another Mental Health Act Assessment
24 would take place and therefore he was admitted, so
25 therefore the ward team would then take over. Somebody
136

1 still wouldn't remain open to the Crisis Team once
 2 they're admitted to a ward.
 3 **THE CHAIR:** But I think the point that was being made is
 4 that that's rather different from actually reporting an
 5 incident --
 6 **A.** Yes.
 7 **THE CHAIR:** -- where something has happened --
 8 **A.** Yeah.
 9 **THE CHAIR:** -- immediately after a discharge and a decision
 10 is made so that some investigation can be made.
 11 **A.** Yeah.
 12 **THE CHAIR:** Would you agree with that?
 13 **A.** Yeah, I do agree with that, yeah.
 14 **THE CHAIR:** Thank you. All right. Well, we'll stop there.
 15 Thank you. We'll continue tomorrow at 10.00. Thank
 16 you.
 17 **(5.19 pm)**
 18 **(The hearing adjourned until the following day at 10.00 am)**
 19
 20
 21
 22
 23
 24
 25

I N D E X		Page
1		
2		
3	Questioned by MR MOLONEY	1
4	Questioned by MS BENYOUNES	9
5	Questioned by MR STRAW	16
6	Questioned by MR BEER	18
7	Questioned by THE CHAIR	20
8	Further questioned by MS LANGDALE	25
9		
10	BENJAMIN WILLIAMS (affirmed)	25
11	Questioned by MR CARR	25
12	Questioned by MR MOLONEY	52
13	Questioned by MS CARTWRIGHT	57
14	Questioned by MR STRAW	65
15	Questioned by MR BEGGS	71
16	Questioned by MR MCNAMARA	73
17	Questioned by THE CHAIR	78
18		
19	ANNETTE PALMER (sworn)	79
20	Questioned by MR CARR	79
21	Questioned by MR MOLONEY	108
22	Questioned by MS CARTWRIGHT	112
23	Questioned by MR STRAW	125
24	Questioned by MR BEER	127
25	Questioned by THE CHAIR	133

<p>MR BEER: [4] 18/7 20/11 127/12 133/22</p> <p>MR BEGGS: [2] 71/10 73/8</p> <p>MR CARR: [7] 25/20 25/24 36/11 52/15 78/23 79/4 108/20</p> <p>MR MCNAMARA: [4] 73/11 77/14 77/19 77/23</p> <p>MR MOLONEY: [8] 1/5 5/10 9/7 9/14 52/19 57/4 108/24 112/15</p> <p>MR STRAW: [6] 16/17 18/3 65/19 71/6 125/5 127/6</p> <p>MS BENYOUNES: [2] 9/18 16/12</p> <p>MS CARTWRIGHT: [5] 57/7 65/16 112/19 122/5 125/1</p> <p>MS LANGDALE: [3] 24/25 25/2 25/13</p> <p>THE CHAIR: [75] 1/3 5/7 8/23 9/16 16/14 18/5 20/12 20/14 20/18 20/21 21/3 21/12 21/18 21/22 21/24 22/1 22/3 22/5 22/8 22/12 22/17 22/21 23/3 23/20 24/1 24/9 24/12 24/15 24/20 24/23 25/14 25/19 25/21 36/8 52/17 57/5 65/17 71/7 73/9 77/16 77/21 77/24 78/3 78/14 78/17 78/24 79/3 108/22 112/17 122/3 125/2 127/7 133/23 133/25 134/4 134/7 134/10 134/19 134/25 135/6 135/9 135/12 135/18 135/23 136/2 136/4 136/6 136/9 136/14 136/21 137/3 137/7 137/9 137/12 137/14</p> <p>THE WITNESS: [1] 78/16</p>	<p>10.00 [2] 137/15 137/18</p> <p>11 [4] 11/17 11/18 12/8 12/17</p> <p>118 [2] 25/2 25/5</p> <p>12 [9] 8/8 11/24 14/6 25/4 59/23 71/11 127/18 127/18 128/2</p> <p>121 [1] 28/18</p> <p>122 [1] 29/8</p> <p>124 [1] 29/24</p> <p>129 [1] 125/7</p> <p>12:12 [1] 33/25</p> <p>12th [1] 25/8</p> <p>13 [1] 62/7</p> <p>136 [1] 19/24</p> <p>136 power [1] 20/4</p> <p>136s [1] 20/2</p> <p>14 [5] 28/2 60/11 80/11 126/16 126/25</p> <p>14 August [1] 125/10</p> <p>14 hours [1] 19/20</p> <p>14.49 [1] 28/19</p> <p>14.52 [1] 29/8</p> <p>14.64 [1] 29/24</p> <p>14:00 [1] 33/22</p> <p>15th [1] 125/15</p> <p>16 [3] 124/13 124/20 125/14</p> <p>16 June [1] 125/23</p> <p>168 [1] 112/22</p> <p>16:29 [1] 63/3</p> <p>17 [2] 93/21 93/24</p> <p>19 [1] 53/11</p> <p>1983 [1] 133/13</p>	<p>123/20 123/22 134/23</p> <p>24 May 2020 [2] 2/5 27/5</p> <p>25 [1] 27/14</p> <p>28 [1] 86/10</p> <p>3</p> <p>3.1 [1] 82/4</p> <p>3.47 [1] 78/19</p> <p>30 [1] 40/8</p> <p>34 [1] 96/22</p> <p>36 [1] 98/9</p> <p>38 [1] 33/9</p> <p>4</p> <p>4.00 [2] 78/18 78/22</p> <p>4.2 [1] 82/19</p> <p>4.32 [1] 112/24</p> <p>42 [1] 34/21</p> <p>43 [1] 35/13</p> <p>48 [1] 60/10</p> <p>5</p> <p>5.19 pm [1] 137/17</p> <p>55 [1] 46/11</p> <p>58 [3] 53/10 53/12 53/13</p> <p>6</p> <p>64 [2] 38/6 67/14</p> <p>8</p> <p>80 [1] 70/21</p> <p>9</p> <p>9 o'clock [2] 24/18 24/19</p> <p>9.15 [1] 33/16</p> <p>9.50 [2] 113/9 114/5</p> <p>9.54 [2] 2/5 2/9</p> <p>A</p> <p>ability [4] 28/24 31/4 59/18 65/9</p> <p>able [23] 1/9 1/13 1/14 1/16 1/17 7/12 31/20 34/22 39/3 41/10 51/6 84/17 85/12 86/7 97/22 102/6 104/9 118/7 122/22 131/14 131/18 135/3 135/5</p> <p>about [114] 3/5 4/3 4/18 4/19 5/3 5/10 5/13 5/17 8/1 14/17 15/12 17/11 18/8 18/17 19/11 20/4 21/10 21/21 24/3 24/14 24/20 29/16 35/3 38/8 38/12 44/25 50/6 51/3 51/12 51/14 51/21 56/3 56/13 56/17 56/20 56/24 58/14 61/6 64/20 67/4 67/15 67/19 68/17 68/20 73/12 73/14</p>	<p>73/16 74/5 74/14 75/15 75/16 75/18 75/21 76/4 76/21 77/17 84/20 85/8 86/4 88/9 88/10 88/18 89/17 90/2 90/21 94/11 95/6 95/8 95/8 96/2 96/4 99/14 99/17 102/2 102/4 104/1 104/16 105/3 105/9 109/9 109/10 109/18 109/18 110/3 110/22 111/8 111/12 111/14 114/20 115/2 116/12 116/13 122/16 123/18 126/8 126/21 127/13 128/3 128/8 129/17 129/22 131/20 131/24 132/7 132/10 132/12 132/18 133/1 133/4 134/25 135/1 135/12 136/10 136/18</p> <p>above [2] 42/24 132/17</p> <p>abreast [1] 108/3</p> <p>absence [3] 11/3 54/10 129/2</p> <p>absolutely [6] 2/9 3/4 5/2 8/16 20/14 110/25</p> <p>accept [1] 52/20</p> <p>accepted [1] 60/21</p> <p>accepting [1] 82/10</p> <p>access [15] 19/7 19/11 19/15 20/24 21/19 21/22 35/9 35/11 86/13 92/2 92/9 93/6 99/1 99/12 101/14</p> <p>accessing [1] 95/8</p> <p>accommodation [1] 114/11</p> <p>accordance [2] 38/2 118/2</p> <p>account [1] 86/3</p> <p>accurate [1] 14/20</p> <p>achieve [2] 84/18 87/22</p> <p>acknowledge [1] 6/1</p> <p>acknowledged [2] 96/17 96/18</p> <p>act [79] 1/8 13/2 13/13 14/4 15/16 16/21 18/10 18/20 18/24 19/6 19/19 27/5 28/3 28/13 29/9 29/17 30/21 31/1 31/10 31/19 32/4 32/13 32/18 33/4 33/22 34/5 37/17 40/16 49/17 51/25 52/4 52/21 58/18 59/18 62/18 63/6 68/18 68/25 70/11 74/16 75/12 76/22 77/5 80/6 80/22 81/1 81/4 81/4 83/23 83/25 84/5 84/8 84/25</p>	<p>85/5 85/17 85/22 87/3 87/4 87/5 87/7 87/15 88/7 90/5 95/7 100/13 102/1 104/20 107/18 109/9 111/11 115/19 117/24 118/10 119/24 123/24 127/15 133/13 133/17 136/23</p> <p>action [2] 105/13 128/18</p> <p>actions [2] 77/4 111/14</p> <p>actively [1] 12/12</p> <p>actual [3] 22/14 23/24 47/6</p> <p>actually [29] 14/16 14/22 43/22 45/11 60/4 60/22 64/19 71/25 72/20 73/1 73/14 76/24 86/25 96/20 98/3 102/23 108/7 108/14 108/15 108/17 109/19 110/18 113/19 113/21 114/8 114/10 116/17 125/25 137/4</p> <p>acute [6] 3/15 81/25 82/21 124/12 124/17 124/21</p> <p>ad [1] 127/23</p> <p>ad hoc [1] 127/23</p> <p>add [2] 5/21 112/12</p> <p>added [3] 53/6 85/16 135/23</p> <p>adding [1] 134/25</p> <p>addition [1] 5/21</p> <p>additional [4] 37/11 37/15 43/8 131/11</p> <p>address [3] 26/20 51/19 64/15</p> <p>addresses [1] 29/25</p> <p>adjacent [2] 57/24 130/16</p> <p>adjourned [1] 137/18</p> <p>administered [1] 76/8</p> <p>administrative [1] 34/13</p> <p>admission [22] 4/19 5/24 6/7 6/9 32/16 49/3 49/6 50/4 63/14 80/17 81/25 82/11 82/17 82/22 83/6 83/23 85/18 86/20 87/13 87/21 124/3 125/18</p> <p>admissions [2] 86/15 125/13</p> <p>admit [4] 7/15 84/2 86/8 122/13</p> <p>admits [1] 3/20</p> <p>admitted [7] 16/24 83/24 87/17 95/9 125/14 136/24 137/2</p> <p>advance [2] 20/18 20/19</p>
<p>'Blind [1] 6/11</p> <p>...mental [1] 3/15</p> <p>/</p> <p>/o [1] 3/16</p> <p>1</p> <p>1 July [1] 126/8</p> <p>1.1 [1] 81/23</p> <p>10 [1] 77/18</p> <p>2022 [2] 51/20 52/10</p> <p>2025 [9] 6/17 17/8 18/15 20/15 24/21 26/4 50/9 79/8 96/23</p> <p>2026 [1] 1/1</p> <p>21 [3] 1/1 12/6 67/10</p> <p>21 May 2020 [1] 80/6</p> <p>21 November 2025 [1] 79/8</p> <p>22 [1] 87/25</p> <p>23 May [2] 3/8 3/11</p> <p>24 May [8] 3/25 4/2 63/3 107/2 117/1</p>				

<p>A</p> <p>advantage [1] 65/13</p> <p>advocate [1] 80/19</p> <p>affect [1] 61/17</p> <p>affecting [1] 105/17</p> <p>affirmed [2] 25/22 138/10</p> <p>afraid [1] 60/19</p> <p>after [25] 7/7 7/22 11/14 15/13 38/13 48/25 49/15 63/6 67/19 77/12 108/2 109/13 114/15 123/20 123/22 123/25 125/18 125/20 125/22 126/5 126/7 131/22 134/10 136/11 137/9</p> <p>afternoon [4] 1/5 57/8 57/9 112/19</p> <p>again [25] 6/15 8/25 39/14 45/23 46/24 51/11 58/22 61/15 78/18 82/19 83/2 95/13 95/17 96/5 98/5 104/4 105/23 108/20 109/24 114/22 123/18 123/22 127/2 128/13 136/9</p> <p>aggression [16] 40/10 40/13 43/18 46/13 46/15 46/23 47/6 47/7 53/2 54/25 98/15 98/18 98/20 98/21 107/3 107/13</p> <p>aggressive [2] 35/16 103/21</p> <p>agitated [1] 103/21</p> <p>ago [1] 60/22</p> <p>agree [48] 10/18 11/6 12/23 14/18 14/20 15/23 16/1 32/12 33/7 56/16 57/17 57/20 58/1 58/8 58/17 58/20 59/1 59/7 59/20 61/15 61/22 62/7 65/6 65/14 72/22 73/5 73/6 96/10 96/12 96/13 112/5 115/12 115/14 118/23 118/24 120/14 120/15 121/19 122/5 122/7 122/7 122/8 123/8 123/13 123/13 132/25 137/12 137/13</p> <p>agreeable [1] 98/10</p> <p>agreed [6] 14/6 33/1 41/14 63/20 64/6 96/6</p> <p>ahead [3] 31/2 32/12 89/5</p> <p>aim [1] 106/22</p> <p>alert [12] 107/1 107/1 107/2 118/8 119/7 134/22 135/6 135/18 135/19 135/19 135/21 135/21</p> <p>alerted [1] 107/12</p>	<p>alerts [2] 107/5 136/2</p> <p>all [31] 1/18 5/10 6/5 9/14 10/22 12/22 12/23 14/12 17/1 18/4 24/7 24/23 31/1 31/1 37/23 43/25 64/16 82/1 89/5 112/15 113/11 113/22 114/25 116/25 118/23 122/5 122/15 127/2 127/8 129/14 137/14</p> <p>allegedly [1] 18/17</p> <p>allocate [2] 108/16 113/18</p> <p>allocated [1] 31/9</p> <p>allow [1] 108/7</p> <p>allowing [1] 41/24</p> <p>almost [3] 22/23 60/18 60/23</p> <p>alone [4] 104/24 113/12 114/25 115/21</p> <p>along [1] 33/2</p> <p>alongside [1] 87/4</p> <p>already [19] 13/24 30/7 32/24 32/25 40/4 45/2 53/4 53/16 65/23 84/11 85/23 86/2 86/2 88/24 90/1 107/23 115/10 115/11 124/16</p> <p>also [40] 1/14 4/7 11/5 12/2 12/16 12/17 16/5 22/22 30/14 33/9 36/18 37/16 42/2 48/6 58/20 59/1 59/18 60/5 64/11 64/23 65/9 75/15 75/18 75/21 76/9 76/12 78/9 80/19 84/11 84/15 92/13 96/5 100/15 108/10 109/19 115/23 120/23 120/25 122/22 136/19</p> <p>alternative [6] 7/14 14/2 51/7 97/24 110/18 118/14</p> <p>alternatives [1] 29/16</p> <p>although [9] 6/1 29/9 38/21 44/13 88/24 96/16 104/5 127/7 135/21</p> <p>always [3] 10/24 80/25 100/3</p> <p>am [7] 2/5 2/9 9/12 53/17 113/13 123/19 137/18</p> <p>ambulance [2] 3/9 3/10</p> <p>AMHP [22] 14/7 30/10 31/9 38/17 48/6 52/6 55/20 59/9 59/16 61/24 61/25 62/22 71/13 72/9 85/22 86/1 88/2 88/16 91/24 113/4 131/5 132/3</p> <p>AMHPs [3] 28/21 52/11 90/11</p>	<p>amongst [2] 52/11 98/25</p> <p>amount [1] 130/9</p> <p>angry [2] 94/11 94/21</p> <p>Annette [11] 7/12 8/9 30/14 32/17 33/2 51/6 64/5 78/25 79/6 97/22 138/19</p> <p>announcing [1] 133/17</p> <p>another [17] 11/18 12/2 36/24 58/24 65/13 87/23 88/13 92/18 92/22 93/6 95/13 116/25 117/8 117/16 124/4 128/11 136/23</p> <p>answer [9] 2/11 4/11 8/23 18/2 20/16 34/3 73/15 95/5 124/22</p> <p>answering [1] 125/1</p> <p>answers [2] 10/14 61/12</p> <p>anti [1] 76/6</p> <p>anti-psychotic [1] 76/6</p> <p>antipsychotic [6] 48/1 48/4 53/25 64/4 114/12 116/6</p> <p>any [71] 4/7 4/9 4/23 7/18 10/2 10/4 10/5 13/1 13/9 13/10 13/11 14/4 14/10 15/19 16/8 16/23 17/24 21/8 21/8 23/17 24/5 27/15 27/23 47/23 48/14 49/15 49/15 49/19 50/19 50/24 51/1 52/21 53/25 59/3 61/23 63/24 64/25 66/6 69/10 74/3 75/22 77/17 85/14 87/14 88/9 88/10 88/18 89/4 89/15 89/19 90/6 91/8 95/12 97/12 97/14 97/15 98/21 100/8 101/5 101/21 102/8 102/19 104/10 107/6 108/18 115/2 117/10 123/24 124/9 124/21 128/4</p> <p>anybody [5] 24/13 56/21 77/25 89/14 98/5</p> <p>anyone [2] 35/17 119/20</p> <p>anything [15] 3/22 7/4 16/11 68/6 68/7 70/6 74/6 89/16 98/6 109/22 112/12 115/24 118/7 127/8 128/25</p> <p>anywhere [1] 111/7</p> <p>apartment [1] 66/20</p> <p>apologies [1] 51/11</p> <p>apologise [4] 62/25 76/15 77/23 120/22</p>	<p>appeared [1] 110/13</p> <p>appears [4] 19/20 40/19 52/10 81/15</p> <p>appendix [1] 83/6</p> <p>application [2] 28/9 30/8</p> <p>applied [2] 31/11 83/7</p> <p>apply [3] 28/5 28/24 29/12</p> <p>appointments [1] 129/10</p> <p>appreciate [6] 48/20 91/17 113/14 119/22 121/2 122/24</p> <p>appreciating [1] 56/13</p> <p>approach [7] 11/4 37/13 53/17 81/20 83/16 93/10 93/11</p> <p>appropriate [8] 29/5 32/12 44/23 49/7 67/21 83/18 86/15 109/15</p> <p>approved [6] 8/9 26/22 27/4 28/4 28/15 28/20</p> <p>April [2] 1/1 79/19</p> <p>April 2006 [1] 79/19</p> <p>are [74] 1/8 1/12 1/13 1/16 1/17 2/1 2/24 9/7 9/8 14/8 14/23 16/8 16/24 17/5 18/20 18/21 19/7 19/11 19/15 19/24 23/12 26/6 29/2 29/16 32/9 34/3 40/12 42/20 46/14 51/24 52/16 61/15 68/20 73/15 73/24 75/2 77/14 79/16 82/9 83/7 83/15 83/19 84/4 84/25 85/1 85/5 85/7 86/15 86/18 87/8 87/10 87/20 88/7 88/10 93/5 93/7 96/18 97/17 102/2 102/25 104/1 107/7 108/20 108/21 117/21 122/3 124/13 125/22 127/8 128/7 128/22 131/7 135/15 136/2</p> <p>area [4] 6/21 94/7 124/12 124/23</p> <p>areas [1] 16/17</p> <p>arising [1] 24/25</p> <p>arm [3] 12/7 37/6 93/3</p> <p>arm's [1] 65/12</p> <p>arm's length [1] 65/12</p> <p>Arnold [1] 124/17</p> <p>around [7] 13/19 13/25 19/19 23/10 93/13 126/7 126/23</p> <p>arranged [1] 21/14</p> <p>arrest [22] 18/18</p>	<p>19/22 35/4 35/8 38/13 42/13 55/18 58/14 61/9 67/20 71/22 72/6 72/21 77/5 88/19 89/12 91/25 92/24 93/14 105/4 106/18 130/20</p> <p>arrested [7] 11/14 19/18 45/2 89/16 106/16 107/24 123/22</p> <p>arresting [7] 36/22 72/11 72/17 72/23 74/6 92/15 105/9</p> <p>arrival [5] 88/25 89/1 133/9 133/14 133/19</p> <p>arrive [3] 72/12 88/15 102/19</p> <p>arrived [7] 63/16 64/2 68/8 89/3 89/25 92/17 108/1</p> <p>arriving [1] 91/8</p> <p>as [159]</p> <p>as clinical [1] 124/2</p> <p>ascertain [2] 41/25 89/12</p> <p>ask [36] 1/6 1/16 3/4 4/6 4/14 4/17 5/10 5/12 5/17 8/6 9/18 11/9 13/14 23/20 27/19 32/9 33/3 57/10 59/16 62/9 62/21 63/23 68/17 74/9 87/16 89/13 89/17 95/12 112/16 115/21 116/25 124/10 126/10 127/13 129/17 134/4</p> <p>asked [45] 4/3 4/7 4/9 8/13 9/5 13/24 18/7 21/4 21/19 22/3 22/21 24/3 39/23 42/5 55/19 56/6 56/19 56/20 57/11 66/6 66/7 66/19 66/22 68/7 68/11 73/12 74/4 74/13 75/15 75/21 76/3 76/13 76/20 84/22 93/12 93/15 96/1 99/21 100/3 102/3 105/3 108/16 110/22 131/20 134/6</p> <p>asking [7] 2/1 8/16 21/7 51/14 77/17 122/3 132/13</p> <p>asks [1] 83/11</p> <p>asleep [1] 54/7</p> <p>aspect [5] 24/2 38/11 67/17 73/25 111/8</p> <p>aspects [2] 6/5 64/14</p> <p>Assertive [1] 70/23</p> <p>assess [2] 60/13 70/5</p> <p>assessed [2] 55/9 84/16</p> <p>assessing [11] 40/11 51/4 64/6 67/24 68/2 84/11 84/14 86/13</p>
---	---	---	--	--

<p>A</p> <p>assessing... [3] 96/16 102/11 131/14</p> <p>assessment [180]</p> <p>assessments [11] 27/12 27/14 27/23 27/25 31/2 31/19 51/13 80/23 85/5 103/2 115/17</p> <p>assist [3] 21/13 63/12 64/18</p> <p>assists [1] 53/8</p> <p>associated [4] 40/13 82/23 100/14 105/22</p> <p>assume [1] 127/7</p> <p>Assuming [1] 19/4</p> <p>assumption [1] 15/9 at [207]</p> <p>at page 13 [1] 62/7</p> <p>at page 6 [1] 4/12</p> <p>atien [1] 3/20</p> <p>attacking [2] 27/24 110/24</p> <p>attempt [1] 92/2</p> <p>attempted [1] 107/19</p> <p>attempting [2] 12/2 36/24</p> <p>attend [3] 33/4 113/12 115/8</p> <p>attendance [1] 30/14</p> <p>attended [5] 11/14 30/18 80/8 80/22 115/19</p> <p>attending [4] 81/1 114/5 127/15 128/2</p> <p>attention [3] 12/21 107/6 107/9</p> <p>audible [1] 2/11</p> <p>auditory [5] 57/13 58/4 58/10 60/24 64/10</p> <p>August [3] 125/10 126/16 126/25</p> <p>August 2020 [1] 126/16</p> <p>authorise [1] 33/7</p> <p>authority [3] 29/10 29/10 33/20</p> <p>automatically [1] 23/12</p> <p>autumn [1] 26/25</p> <p>availability [1] 122/2</p> <p>available [19] 3/2 4/25 10/22 13/1 22/24 65/4 71/14 74/7 86/16 108/18 113/21 113/21 113/25 115/13 124/12 124/21 129/3 129/9 129/18</p> <p>await [4] 88/25 133/9 133/14 133/19</p> <p>aware [57] 3/6 3/25 4/1 4/2 6/21 11/8 11/25 12/4 12/11 16/8 18/9 22/22 24/6 24/7</p>	<p>24/9 32/25 36/6 36/10 36/11 36/25 37/9 37/11 42/8 42/11 42/13 51/24 52/8 55/17 58/4 62/16 62/19 68/2 85/5 85/7 85/8 88/11 90/14 90/25 91/1 91/12 91/25 92/8 92/19 92/21 95/15 98/21 98/22 99/3 102/17 117/4 117/14 118/17 120/16 120/19 120/23 133/15 134/1</p> <p>away [7] 49/11 51/10 51/18 86/19 91/21 94/8 109/23</p> <p>B</p> <p>back [36] 2/20 2/23 3/1 6/15 6/23 6/23 9/3 12/9 17/4 17/5 20/22 25/11 34/16 40/22 53/18 54/16 64/15 65/21 68/21 93/24 100/13 101/7 101/18 101/23 102/3 102/4 108/13 113/18 114/9 114/15 116/17 122/20 122/21 123/10 125/6 132/15</p> <p>background [5] 26/10 35/8 41/21 79/14 91/23</p> <p>balance [2] 11/4 60/3</p> <p>band [4] 33/3 79/21 117/21 127/14</p> <p>band 7 [1] 117/21</p> <p>bank [1] 74/20</p> <p>barely [1] 61/13</p> <p>base [1] 95/5</p> <p>based [11] 16/20 16/24 41/7 44/23 104/13 104/20 104/24 118/4 127/2 127/4 127/4</p> <p>basically [1] 119/6</p> <p>basis [5] 49/3 70/9 77/6 77/8 127/23</p> <p>be [157]</p> <p>Bearing [1] 77/4</p> <p>became [9] 24/7 66/8 66/23 66/24 67/4 94/11 99/5 110/6 110/12</p> <p>because [90] 6/20 7/5 8/2 8/8 8/21 10/2 10/24 12/12 15/1 16/11 17/22 17/25 19/17 19/23 20/24 22/13 23/18 23/20 24/16 25/10 31/19 31/23 32/14 33/4 34/23 38/12 41/17 43/6 44/25 45/1 45/12 46/1 47/3 53/4 54/12</p>	<p>56/10 59/3 60/11 60/14 60/24 62/21 67/19 67/21 70/3 70/16 71/24 72/10 72/19 74/19 75/3 77/22 84/1 84/4 87/10 88/21 89/3 89/25 91/20 93/2 94/17 95/10 99/6 100/12 102/24 103/25 104/19 106/18 108/8 108/17 110/13 111/4 113/22 113/24 113/25 115/13 115/15 116/5 116/9 116/19 116/25 118/5 121/7 122/19 123/25 124/10 129/13 129/19 135/2 136/2 136/4</p> <p>become [2] 26/22 117/4</p> <p>becoming [1] 87/10</p> <p>bed [15] 31/16 31/20 31/22 32/1 32/2 65/4 73/16 73/17 73/18 73/19 73/20 73/21 73/22 122/2 124/23</p> <p>beds [6] 124/12 124/13 124/17 124/19 124/20 124/21</p> <p>been [139]</p> <p>Beer [6] 18/5 18/6 127/10 127/11 138/6 138/24</p> <p>before [33] 3/7 5/3 7/22 8/8 10/5 13/9 17/24 19/3 21/7 23/7 24/20 25/8 28/9 28/23 31/2 45/12 50/20 62/17 72/20 73/20 75/4 82/10 86/4 89/16 90/5 97/6 105/3 107/19 108/2 114/1 125/6 134/10 136/1</p> <p>Beggs [5] 71/8 71/9 74/5 127/7 138/15</p> <p>begin [2] 1/6 9/20</p> <p>beginning [1] 79/13</p> <p>behalf [6] 9/18 18/8 29/9 57/10 76/2 76/21</p> <p>behaviour [5] 35/16 61/13 95/5 102/9 103/22</p> <p>behavioural [1] 3/15</p> <p>being [36] 17/13 22/18 35/13 41/24 47/8 47/13 47/17 53/25 54/10 57/14 57/23 64/12 65/25 66/3 66/15 66/19 75/16 75/18 84/16 84/22 89/15 94/18 96/19 97/12 105/21 108/3 110/3 114/19 115/11 118/13 120/10 128/11 129/2 129/22 132/23 137/3</p>	<p>belief [3] 12/3 26/7 79/11</p> <p>believe [14] 14/7 22/10 55/18 55/23 61/13 62/15 74/22 75/9 99/20 124/7 124/18 132/5 134/12 136/1</p> <p>believed [6] 57/14 63/19 66/11 66/14 110/19 125/19</p> <p>believing [1] 64/11</p> <p>beneficial [1] 33/8</p> <p>benefit [1] 85/16</p> <p>BENJAMIN [3] 25/22 25/25 138/10</p> <p>BENYOUNES [3] 9/17 24/3 138/4</p> <p>best [7] 26/6 63/20 63/21 72/19 73/1 73/4 79/10</p> <p>better [1] 81/7</p> <p>between [6] 6/19 9/6 20/3 47/16 100/20 130/5</p> <p>beyond [3] 38/10 67/17 124/20</p> <p>biases [2] 6/23 23/13</p> <p>bit [11] 19/23 32/23 36/8 36/9 53/6 66/17 81/7 93/15 96/4 123/12 130/17</p> <p>black [4] 7/11 22/17 50/17 97/4</p> <p>bloods [2] 2/19 2/22</p> <p>blunted [1] 61/17</p> <p>bold [1] 94/1</p> <p>both [6] 46/6 50/6 80/2 80/23 85/22 88/16</p> <p>bottom [15] 3/19 28/19 41/3 42/23 42/25 50/13 66/5 67/14 83/10 93/23 97/1 103/14 112/23 125/9 132/10</p> <p>box [3] 13/17 42/23 50/21</p> <p>boxes [1] 33/24</p> <p>brain [1] 8/3</p> <p>break [6] 25/17 45/2 47/4 58/6 78/17 78/20</p> <p>breaking [2] 95/13 95/13</p> <p>Bridewell [1] 66/1</p> <p>brief [4] 88/1 90/2 90/23 128/17</p> <p>briefed [1] 129/20</p> <p>briefly [5] 3/4 60/10 70/20 78/6 112/19</p> <p>bring [1] 19/24</p> <p>broad [1] 81/19</p> <p>broadcasting [1] 132/13</p> <p>broadly [1] 81/11</p> <p>broke [2] 55/1 66/3</p>	<p>broken [4] 35/15 115/11 117/2 117/8</p> <p>Brook [3] 11/15 101/13 102/20</p> <p>brought [1] 12/20</p> <p>bugged [1] 64/12</p> <p>build [2] 9/3 17/8</p> <p>building [1] 14/25</p> <p>bullet [3] 29/4 29/25 31/13</p> <p>bundle [1] 75/6</p> <p>but [122] 1/14 1/24 3/21 4/13 4/14 5/12 6/23 8/16 11/3 12/2 13/21 14/1 14/15 18/1 22/18 25/7 27/17 35/7 38/17 39/6 40/3 40/6 40/25 42/2 42/23 43/5 43/21 45/11 46/14 48/5 48/24 49/4 49/23 50/5 50/20 51/3 51/12 52/6 52/15 54/7 58/4 58/19 59/18 60/5 61/5 61/22 62/25 63/14 63/15 63/17 63/21 64/11 64/23 67/2 68/15 68/16 69/11 70/2 71/19 72/8 72/25 75/9 76/8 76/15 76/18 81/19 84/11 84/25 86/24 88/2 88/5 89/2 89/6 91/5 91/14 92/4 94/9 94/11 95/14 96/10 99/9 100/5 100/15 100/21 100/25 103/22 106/25 107/19 107/22 108/17 109/13 109/24 110/17 114/15 114/23 114/25 115/5 115/18 115/23 119/16 119/20 120/23 121/2 121/5 122/11 122/14 122/21 123/1 123/13 124/5 124/11 130/1 131/4 132/19 134/14 134/16 135/6 135/15 135/25 136/19 136/22 137/3</p> <p>C</p> <p>cabinet [1] 120/2</p> <p>calculated [1] 48/23</p> <p>call [16] 32/11 38/15 38/21 63/2 75/12 87/11 88/12 88/13 90/19 91/10 100/24 102/6 102/6 117/6 124/1 134/1</p> <p>called [3] 91/11 117/13 134/12</p> <p>calls [1] 38/24</p> <p>Calocane [9] 38/4 49/8 67/12 76/21 77/11 90/4 90/22 102/18 134/1</p> <p>Calocane's [1] 39/16</p>
---	---	---	--	--

<p>C</p> <p>came [4] 2/20 2/23 3/1 33/2</p> <p>cameras [1] 66/21</p> <p>can [124] 1/19 1/24 1/25 2/2 3/4 3/11 4/25 5/18 6/4 6/15 7/2 9/22 10/21 11/2 12/15 20/24 21/3 21/19 21/20 25/4 25/24 27/19 28/9 28/17 28/19 30/6 31/8 31/25 32/10 33/5 33/6 33/7 33/8 33/9 33/15 34/15 35/20 35/24 36/8 36/9 37/23 38/14 40/22 41/13 42/4 48/5 50/2 50/8 50/12 53/7 53/22 58/22 59/16 60/10 61/2 62/9 62/10 63/12 63/23 64/18 68/13 69/5 69/25 70/2 71/25 73/13 73/21 74/9 75/5 75/12 78/5 79/5 80/18 81/7 81/11 81/22 83/10 85/18 86/1 86/5 87/6 89/13 90/23 92/5 92/7 92/12 93/20 93/22 93/22 93/24 95/18 96/24 98/8 101/9 104/8 104/10 106/24 107/2 107/15 109/6 112/19 112/24 113/6 113/8 113/11 114/10 114/18 114/19 115/5 116/25 119/13 123/1 124/10 125/9 128/3 128/9 128/17 129/17 130/5 132/6 132/7 132/15 135/20 137/10</p> <p>can't [45] 1/21 1/22 1/23 5/7 8/9 16/11 18/1 20/20 22/13 24/11 27/17 27/25 35/7 35/24 40/3 51/1 51/11 56/5 61/4 62/19 62/19 63/8 64/7 65/5 65/5 67/1 67/2 70/2 71/23 75/8 75/14 84/4 88/2 88/4 91/4 92/21 92/23 109/25 114/13 114/13 114/13 124/22 134/6 134/13 134/16</p> <p>candour [8] 16/5 16/7 118/3 119/3 120/13 120/19 121/2 122/9</p> <p>cannot [3] 56/17 63/13 83/12</p> <p>capacity [11] 30/18 45/21 46/2 49/5 62/11 62/15 63/15 63/17 63/21 96/10 96/12</p> <p>care [14] 15/13 29/6</p>	<p>62/12 62/15 71/3 82/1 82/22 83/2 84/2 86/8 87/18 118/10 118/13 128/12</p> <p>career [1] 19/9</p> <p>Carr [9] 25/19 25/23 53/1 53/3 79/2 79/3 108/25 138/11 138/20</p> <p>carried [4] 19/22 33/22 43/13 74/2</p> <p>carry [3] 87/9 114/4 115/4</p> <p>carrying [1] 1/7</p> <p>Cartwright [8] 57/5 57/6 76/13 76/18 112/18 122/3 138/13 138/22</p> <p>case [13] 14/2 17/3 17/4 17/22 19/7 19/17 70/1 70/16 71/21 83/19 88/5 128/17 129/18</p> <p>catastrophic [1] 119/14</p> <p>categorisation [1] 43/25</p> <p>cause [3] 12/19 106/2 130/12</p> <p>caused [9] 12/1 58/5 60/2 89/14 89/15 104/7 117/4 118/6 118/20</p> <p>causes [4] 2/18 18/1 31/15 106/1</p> <p>cautious [1] 11/4</p> <p>Celeste [7] 38/4 39/15 49/8 67/12 90/4 90/22 102/17</p> <p>certain [1] 103/17</p> <p>certainly [14] 36/16 57/12 58/4 58/15 59/3 60/7 61/6 61/18 62/25 64/23 95/7 114/15 117/14 134/14</p> <p>cetera [3] 56/22 56/22 129/11</p> <p>Chair [16] 8/22 16/13 20/13 20/17 20/22 23/2 24/14 52/15 77/14 78/2 79/4 108/20 133/24 138/7 138/17 138/25</p> <p>challenge [1] 59/19</p> <p>challenged [1] 95/11</p> <p>change [7] 16/23 25/15 47/10 48/21 104/10 104/17 119/13</p> <p>changed [7] 37/13 37/21 93/10 93/11 93/17 94/23 94/25</p> <p>changing [1] 44/25</p> <p>check [1] 1/10</p> <p>checked [1] 96/5</p> <p>checking [2] 109/9 109/18</p> <p>chest [4] 3/12 3/13</p>	<p>3/16 5/3</p> <p>child [1] 60/18</p> <p>childlike [1] 60/18</p> <p>chose [2] 86/8 89/7</p> <p>chronology [1] 33/15</p> <p>circumstances [19] 18/18 35/4 38/15 42/13 44/19 51/16 55/5 55/18 83/15 88/8 88/19 89/12 91/25 98/16 105/3 105/9 105/25 111/1 111/17</p> <p>cite [1] 71/14</p> <p>citizen [1] 45/21</p> <p>City [2] 26/14 26/17</p> <p>clarification [2] 1/6 9/20</p> <p>clarify [5] 1/23 9/22 73/13 84/6 109/12</p> <p>clarifying [2] 9/8 25/9</p> <p>clarities [1] 44/24</p> <p>clarity [3] 41/17 43/6 56/24</p> <p>classic [1] 61/15</p> <p>clear [22] 2/20 2/23 8/21 13/20 13/25 14/13 17/2 20/14 24/1 24/5 35/16 56/20 58/22 99/5 109/18 110/3 112/1 116/19 122/16 122/19 123/18 132/25</p> <p>clearer [1] 52/14</p> <p>clearly [4] 6/24 46/12 55/12 71/24</p> <p>clinical [8] 79/21 82/23 117/21 119/1 119/22 120/13 121/5 124/2</p> <p>clinicians [2] 126/19 127/5</p> <p>clinics [1] 23/8</p> <p>clustering [4] 103/10 103/12 103/16 107/17</p> <p>Code [5] 28/12 28/13 29/23 38/2 81/4</p> <p>cognitions [1] 15/3</p> <p>cognitive [4] 6/22 23/13 105/12 105/14</p> <p>coined [1] 10/11</p> <p>colleague [5] 15/9 51/20 51/21 122/21 135/4</p> <p>colleagues [5] 33/3 75/3 107/9 107/11 126/3</p> <p>collect [1] 39/24</p> <p>collected [1] 10/23</p> <p>collective [1] 10/11</p> <p>colour [1] 17/1</p> <p>column [1] 2/10</p> <p>combination [1] 55/11</p> <p>come [18] 6/15 12/15 14/14 17/1 34/7 34/15 54/2 63/10 67/8 68/3</p>	<p>70/4 76/11 84/20 89/7 102/4 102/25 109/23 136/14</p> <p>comes [4] 20/9 23/12 58/11 119/20</p> <p>coming [4] 39/21 91/3 91/15 134/18</p> <p>commenced [3] 26/14 26/22 99/19</p> <p>comment [2] 10/21 16/11</p> <p>commenting [1] 13/25</p> <p>comments [1] 94/1</p> <p>committed [1] 75/20</p> <p>common [2] 17/14 52/11</p> <p>commonly [1] 17/15</p> <p>communicated [1] 75/3</p> <p>community [17] 7/16 13/21 15/14 32/7 32/7 33/6 55/23 62/16 67/21 68/20 68/23 70/25 75/24 80/2 82/12 87/9 128/13</p> <p>competency [1] 121/24</p> <p>complaint [1] 21/11</p> <p>completed [5] 33/10 33/12 62/22 103/10 107/18</p> <p>completely [3] 20/1 58/17 59/6</p> <p>completing [1] 106/17</p> <p>compulsory [2] 30/20 85/1</p> <p>concern [1] 115/23</p> <p>concerned [7] 2/24 26/20 38/12 67/19 84/23 97/17 136/9</p> <p>concerns [5] 2/5 12/18 68/20 89/19 126/19</p> <p>conclude [1] 85/17</p> <p>concluded [1] 10/2</p> <p>conclusion [3] 10/9 56/10 57/1</p> <p>conclusions [1] 37/14</p> <p>concordance [4] 113/2 113/20 115/24 116/17</p> <p>condition [3] 41/21 46/13 46/16</p> <p>conduct [3] 18/24 38/24 133/16</p> <p>conducted [3] 43/12 51/13 132/3</p> <p>conducting [3] 18/20 19/6 31/18</p> <p>confidence [1] 70/3</p> <p>confident [1] 70/16</p> <p>confirm [5] 25/3 34/10 88/11 88/13</p>	<p>113/11</p> <p>confirmed [3] 21/9 55/21 90/25</p> <p>confront [1] 94/22</p> <p>confused [2] 61/10 132/19</p> <p>confusion [1] 73/15</p> <p>consent [4] 62/12 62/15 63/13 63/15</p> <p>consented [1] 49/6</p> <p>consenting [1] 87/20</p> <p>consider [9] 8/7 8/24 11/9 49/1 49/12 85/23 89/9 99/11 111/24</p> <p>considerably [2] 127/19 128/5</p> <p>consideration [9] 9/21 49/3 49/19 60/9 68/19 97/15 100/8 100/11 102/19</p> <p>considered [12] 6/4 7/9 8/19 9/10 37/16 50/15 82/18 95/19 97/3 99/14 109/2 109/7</p> <p>considering [4] 6/5 13/4 85/1 98/2</p> <p>consistent [1] 53/9</p> <p>conspiracy [1] 66/25</p> <p>constant [1] 65/12</p> <p>constantly [1] 135/15</p> <p>consult [1] 30/1</p> <p>contact [9] 6/17 15/15 15/18 52/7 58/11 106/21 116/15 119/21 126/1</p> <p>contacted [2] 4/4 24/13</p> <p>contacts [1] 129/11</p> <p>contains [1] 107/3</p> <p>contentious [2] 58/18 120/14</p> <p>contents [2] 26/6 75/2</p> <p>context [2] 71/21 93/15</p> <p>continue [2] 116/14 137/15</p> <p>continued [4] 11/21 12/9 26/17 93/2</p> <p>continuing [1] 37/5</p> <p>contract [1] 124/16</p> <p>contracted [1] 124/18</p> <p>controlling [1] 46/9</p> <p>convene [1] 59/17</p> <p>convened [1] 62/18</p> <p>conversation [29] 7/17 9/6 13/20 14/13 15/18 23/3 23/7 23/14 23/15 23/22 38/10 39/4 39/17 40/2 50/22 63/5 67/3 67/15 67/16 87/16 88/1 88/6 89/20 89/21 89/24 97/9 97/14 111/9 134/14</p>
--	--	---	--	---

<p>C</p> <p>conversations [2] 51/12 90/1</p> <p>coordinate [1] 34/18</p> <p>core [3] 52/20 110/25 112/9</p> <p>corner [2] 3/12 33/15</p> <p>correct [21] 2/8 26/24 28/7 28/11 29/18 30/5 30/11 30/15 31/24 41/22 42/15 42/17 43/24 45/23 46/5 46/17 58/25 69/24 70/12 72/14 135/13</p> <p>correction [1] 6/15</p> <p>correctly [1] 11/2</p> <p>correlation [1] 9/6</p> <p>could [59] 7/13 11/9 11/12 13/14 16/2 17/10 17/24 18/1 21/7 32/15 37/19 38/19 39/24 41/25 44/19 45/15 51/7 51/15 52/13 54/7 54/16 55/23 65/20 66/1 66/2 67/8 67/8 68/7 68/11 68/12 68/17 69/8 69/10 71/10 75/23 76/21 77/8 82/17 87/12 89/5 94/17 97/23 98/7 99/22 100/14 100/16 106/4 108/25 109/12 110/18 110/21 113/8 115/21 115/24 117/12 121/17 122/13 125/5 129/16</p> <p>couldn't [4] 50/21 68/11 90/23 97/8</p> <p>Council [2] 26/15 26/17</p> <p>counsel [5] 8/13 18/17 73/13 74/14 77/19</p> <p>counsel's [1] 8/23</p> <p>couple [6] 68/13 69/4 69/14 96/2 115/10 133/25</p> <p>course [11] 6/7 8/12 8/12 13/6 29/19 41/2 43/5 84/25 90/11 101/13 131/21</p> <p>Court [3] 11/15 101/13 102/20</p> <p>cover [1] 10/15</p> <p>Covid [3] 116/6 116/19 122/1</p> <p>cowed [1] 60/17</p> <p>CQC [2] 16/2 22/23</p> <p>create [1] 8/4</p> <p>CRHT [4] 33/25 82/6 82/9 82/25</p> <p>crime [1] 75/20</p> <p>Criminal [2] 1/12 75/19</p>	<p>crisis [69] 7/1 7/13 8/5 10/6 14/7 30/24 31/14 31/25 32/9 32/11 32/13 32/25 33/3 33/8 33/25 34/10 42/20 47/17 47/20 51/14 64/2 64/19 64/25 73/17 73/22 75/25 76/11 79/24 80/18 82/6 83/13 84/16 85/6 86/4 86/7 86/12 87/8 96/3 96/4 96/19 97/23 100/6 100/8 102/6 106/23 111/13 112/25 113/1 113/7 113/13 115/3 115/17 116/2 116/14 116/20 117/20 118/10 118/13 126/2 127/14 128/4 128/9 128/14 128/22 129/10 129/12 131/17 135/15 137/1</p> <p>criteria [10] 9/23 13/4 16/21 28/6 29/2 52/23 70/10 83/2 83/6 83/22</p> <p>critierias [1] 13/13</p> <p>critical [2] 56/10 86/12</p> <p>CRT [3] 7/12 51/7 54/1</p> <p>currently [1] 3/21</p> <p>custody [38] 1/9 1/13 1/19 1/23 2/14 2/25 18/21 20/8 35/6 43/9 46/10 47/8 47/14 47/17 49/18 64/1 72/15 75/17 76/25 76/25 89/18 99/18 99/20 101/10 101/18 101/23 103/1 108/2 108/9 113/6 114/1 114/16 114/20 120/11 133/9 133/13 133/19 134/11</p>	<p>day [33] 2/7 4/5 4/25 7/15 7/25 8/25 10/21 15/15 16/22 16/22 17/15 17/15 20/25 23/4 23/17 23/17 24/12 24/17 24/18 25/8 34/8 47/1 48/11 55/14 64/18 85/12 91/18 97/25 98/19 101/8 116/3 124/6 137/18</p> <p>days [1] 91/18</p> <p>deal [2] 2/6 63/1</p> <p>dealing [5] 20/6 33/14 40/8 41/18 136/6</p> <p>dealings [1] 24/5</p> <p>dealt [4] 4/4 19/16 30/7 44/12</p> <p>deceased [2] 76/2 76/3</p> <p>decide [1] 97/18</p> <p>decided [9] 6/5 6/24 10/23 42/20 68/16 108/19 125/17 125/23 129/12</p> <p>decides [1] 87/12</p> <p>deciding [3] 29/11 80/16 97/18</p> <p>decision [46] 8/10 8/14 13/3 13/21 14/14 16/19 16/20 23/24 29/15 31/2 37/16 37/24 39/2 40/6 42/24 45/22 47/8 50/23 58/16 59/19 59/19 63/10 65/3 67/20 67/23 69/3 69/21 70/8 75/21 84/20 85/15 86/6 86/25 87/1 96/11 96/21 97/10 111/18 111/20 112/10 113/23 117/19 131/1 131/9 136/14 137/9</p> <p>decision's [1] 84/1</p> <p>decision-making [3] 37/24 58/16 85/15</p> <p>decisions [1] 13/12</p> <p>deemed [3] 43/3 44/4 44/20</p> <p>defensive [1] 66/22</p> <p>definitely [5] 4/24 14/8 56/21 103/6 103/22</p> <p>degree [5] 10/7 26/11 70/3 92/9 93/5</p> <p>delay [10] 33/24 68/24 69/2 77/4 77/6 100/19 103/3 108/4 129/14 133/17</p> <p>delayed [5] 31/23 49/18 68/18 69/9 76/22</p> <p>delaying [3] 49/12 85/14 102/20</p> <p>deliver [9] 86/7 91/12</p>	<p>113/8 113/10 114/6 114/11 115/8 120/4 134/2</p> <p>delusional [2] 57/20 58/9</p> <p>delusions [3] 64/14 105/23 118/16</p> <p>demographics [2] 16/23 23/11</p> <p>department [2] 2/16 74/18</p> <p>dependent [1] 46/16</p> <p>depending [2] 15/24 82/22</p> <p>depicted [1] 37/12</p> <p>Deputy [1] 21/6</p> <p>Deputy Medical [1] 21/6</p> <p>describe [7] 35/3 37/5 38/6 80/12 80/22 86/11 88/1</p> <p>described [3] 105/9 105/23 108/2</p> <p>describes [3] 36/22 92/17 92/24</p> <p>description [3] 39/17 60/15 104/6</p> <p>designed [1] 104/9</p> <p>desk [1] 1/16</p> <p>despite [1] 89/23</p> <p>detail [5] 4/24 40/1 53/6 58/14 65/5</p> <p>detailed [1] 132/4</p> <p>details [5] 3/14 4/18 38/9 67/16 106/15</p> <p>detain [17] 13/21 16/19 23/5 40/6 42/20 47/9 49/16 63/22 69/21 70/9 96/21 97/11 97/13 97/19 117/20 133/8 133/13</p> <p>detained [5] 19/25 22/18 40/15 55/13 129/22</p> <p>detaining [2] 14/1 62/3</p> <p>detention [20] 7/11 9/21 13/5 28/5 28/24 29/5 29/16 40/20 49/2 49/16 50/4 50/6 50/17 51/10 52/23 60/5 85/18 97/5 98/2 131/22</p> <p>deterioration [6] 46/12 46/16 54/20 54/21 78/9 78/12</p> <p>determining [1] 97/13</p> <p>Developed [1] 3/12</p> <p>device [1] 133/18</p> <p>devices [1] 115/3</p> <p>diagnosis [2] 10/5 10/10</p> <p>did [79] 4/6 4/14 7/4 7/17 7/20 8/1 8/2 8/20 8/24 15/11 15/15</p>	<p>16/19 20/15 23/4 24/5 24/20 25/13 36/2 36/14 41/8 43/8 47/20 47/23 48/20 49/1 49/11 49/18 55/20 56/17 61/11 62/5 62/11 74/14 74/24 75/13 77/10 77/13 77/19 78/4 80/21 88/18 88/20 88/25 89/9 90/16 91/8 91/10 91/17 94/9 94/11 95/12 95/22 99/10 101/21 102/1 106/1 109/23 109/24 110/6 110/11 110/22 113/11 114/25 115/2 117/4 118/2 119/5 123/20 124/4 124/18 124/23 125/19 134/1 134/4 134/25 135/6 135/12 136/15 136/21</p> <p>didn't [44] 2/25 4/17 9/9 13/8 15/20 23/4 23/25 25/7 25/10 25/10 34/7 38/4 49/20 55/15 55/16 62/15 68/5 71/23 77/16 89/4 89/22 89/23 90/4 98/15 99/15 102/8 108/8 108/18 112/5 117/10 118/4 118/5 118/7 119/6 119/18 122/14 123/15 123/17 123/21 123/24 129/13 135/2 135/2 135/14</p> <p>difference [7] 23/18 23/24 50/23 96/14 97/10 130/5 131/15</p> <p>different [16] 15/24 20/1 20/5 44/9 46/15 67/9 94/7 94/15 94/19 104/17 105/10 105/15 115/18 130/25 133/5 137/4</p> <p>differently [1] 131/10</p> <p>difficult [5] 10/19 10/25 11/1 48/24 106/25</p> <p>difficulties [1] 31/18</p> <p>direct [1] 128/18</p> <p>directly [4] 74/14 75/13 118/6 133/1</p> <p>Director [1] 21/6</p> <p>disagreed [3] 111/17 111/19 111/21</p> <p>disagreement [2] 14/11 112/13</p> <p>disagreements [1] 14/4</p> <p>discharge [5] 103/1 125/23 126/5 126/7 137/9</p> <p>discharged [6] 15/13 16/24 75/17 125/14 125/18 136/12</p>
(40) conversations - discharged				

<p>D</p> <p>discharging [1] 64/9 disclose [1] 102/8 disconnect [1] 63/12 discuss [4] 8/20 30/1 49/12 109/24 discussed [2] 39/8 109/15 discussing [1] 23/5 discussion [21] 13/19 13/25 14/20 35/9 35/11 35/13 38/3 40/1 42/8 49/4 50/5 50/24 51/1 64/20 67/11 90/21 91/24 97/12 98/25 109/24 109/25 discussions [5] 41/10 50/1 60/8 80/16 88/16 disorder [1] 9/24 displaying [1] 55/8 disproportionately [1] 22/18 dispute [2] 4/14 61/23 disruptive [1] 103/21 disturbance [1] 3/15 Diversion [1] 74/11 divulge [1] 21/8 do [96] 2/9 8/2 8/2 8/6 8/10 10/18 12/23 14/15 15/5 15/23 16/1 17/6 18/12 27/12 27/17 27/20 32/10 33/8 35/4 35/8 35/9 36/7 37/21 38/9 39/25 39/25 42/2 50/1 50/24 51/9 55/25 60/11 62/5 63/5 65/3 66/9 67/16 69/2 71/5 71/15 71/17 71/19 72/2 72/12 72/17 72/25 73/20 75/9 77/1 77/10 80/13 84/18 85/25 87/11 87/15 89/9 90/21 93/17 94/1 96/5 97/12 97/15 100/12 100/14 100/15 102/5 102/5 104/19 106/21 106/22 108/17 108/18 108/19 111/7 111/7 111/14 112/3 113/19 115/17 115/18 115/24 116/8 118/2 118/23 119/5 119/7 119/18 122/7 122/7 122/8 123/20 124/4 126/10 127/8 134/10 137/13 doctor [6] 3/5 5/6 8/9 14/6 20/14 127/19 doctors [23] 4/4 30/10 38/25 39/3 39/8 40/5 50/3 50/3 84/25 85/4 85/7 85/22 86/1</p>	<p>86/19 88/16 91/24 95/24 98/1 111/11 112/8 127/18 128/3 131/4 document [27] 3/5 4/25 5/11 5/11 7/24 8/22 11/9 13/15 13/15 14/10 14/15 14/23 41/12 67/9 74/9 74/10 74/15 74/24 75/2 75/9 75/10 76/14 83/5 96/25 104/11 106/24 125/6 documentation [1] 14/9 documented [3] 59/13 115/15 127/5 documents [1] 107/16 does [14] 17/19 23/18 31/4 45/21 57/24 71/3 75/17 81/19 81/21 83/1 84/8 87/3 102/3 128/2 does it [1] 87/3 doesn't [15] 2/6 7/5 7/18 9/1 14/7 17/1 23/15 28/14 29/25 36/22 37/5 58/8 70/4 92/24 135/19 doing [7] 24/16 83/25 85/15 95/3 95/12 125/25 127/22 Dominic [8] 2/21 62/9 63/2 63/5 63/8 74/22 74/23 74/24 Dominic's [1] 75/7 don't [60] 4/13 8/6 8/7 8/25 9/8 16/11 16/23 17/22 19/6 23/23 24/16 34/7 34/10 35/6 35/11 38/17 39/5 40/2 46/1 49/4 49/10 50/5 50/18 51/1 51/11 61/22 62/21 67/1 68/14 68/23 69/8 69/12 71/17 71/20 75/14 77/2 77/3 77/13 79/14 87/14 90/12 91/2 93/4 97/14 102/22 102/22 110/17 111/10 114/22 115/14 119/8 124/4 124/8 124/25 129/1 129/1 130/17 131/10 134/17 134/18 done [23] 18/17 19/19 31/14 31/15 32/4 32/6 32/24 36/1 36/7 48/21 56/2 68/7 73/23 87/6 88/22 89/5 106/19 109/21 109/22 110/14 110/23 123/1 136/22 Dooley [1] 52/7 door [27] 35/21 36/1</p>	<p>42/9 47/4 55/3 58/6 92/1 92/6 92/7 93/6 94/17 95/9 95/13 104/5 104/7 105/1 105/8 106/2 106/16 109/10 116/7 129/24 130/6 130/10 130/12 130/13 135/7 doorstep [1] 115/25 doubt [2] 39/5 75/23 down [26] 12/15 30/6 33/24 34/15 36/9 38/8 50/2 55/3 58/6 60/19 65/24 67/8 81/24 92/12 93/25 95/18 98/8 106/2 106/24 107/15 109/11 109/14 112/8 115/11 132/7 132/8 Dr [27] 1/5 4/15 5/11 5/14 5/19 7/2 7/20 9/8 9/9 9/15 9/18 15/9 16/17 25/2 30/12 30/12 50/9 50/13 50/19 66/19 96/23 97/2 97/7 109/1 109/1 132/3 133/1 Dr Gandhi [20] 1/5 4/15 5/11 5/19 7/2 9/8 9/15 9/18 16/17 25/2 30/12 50/9 50/13 66/19 96/23 97/2 97/7 109/1 132/3 133/1 Dr Gandhi's [1] 50/19 Dr Hiley [3] 5/14 7/20 9/9 Dr Malik [3] 15/9 30/12 109/1 drafted [1] 40/18 draw [2] 107/6 107/9 drawn [1] 127/19 due [4] 40/12 60/8 88/20 102/18 during [14] 1/10 5/20 13/1 37/17 50/1 50/22 50/24 51/25 88/12 90/6 94/3 94/16 95/23 105/18 duties [3] 28/14 38/2 82/5 duty [8] 16/5 16/7 42/3 74/22 90/12 118/3 119/3 120/13</p>	<p>East Midlands [1] 3/9 ED [3] 2/15 2/24 3/1 effect [5] 48/5 48/8 100/24 110/10 131/7 effective [1] 64/16 effectively [2] 103/16 113/7 effects [1] 116/13 effort [1] 82/11 eft [1] 3/13 either [4] 50/2 50/3 81/4 88/11 elements [1] 73/24 elicited [1] 57/12 else [9] 7/4 21/2 56/21 77/25 113/25 128/25 134/20 135/9 135/23 elucidated [1] 56/11 email [5] 21/6 25/3 25/11 51/19 51/20 emails [1] 20/22 EMAS [1] 3/8 EMAS000002 [2] 3/5 3/8 emerged [3] 22/5 131/21 131/23 emergency [2] 2/16 74/21 emerging [1] 10/1 employed [2] 29/10 79/16 empty [1] 99/10 enable [2] 64/25 72/19 enabled [2] 121/12 121/17 encourage [1] 83/3 end [5] 11/20 96/1 99/5 109/8 109/17 engage [1] 96/3 engaged [1] 59/3 enough [7] 43/3 44/4 44/20 115/20 118/4 118/7 135/2 ensure [5] 49/19 63/25 68/6 86/14 128/11 ensuring [1] 82/9 enter [7] 12/2 12/12 36/24 60/2 92/18 107/7 130/15 entered [2] 31/14 107/3 entering [3] 11/19 109/11 133/2 entire [2] 10/10 43/13 entrance [1] 35/23 entries [3] 40/24 41/1 125/25 entry [22] 2/5 2/21 5/21 6/12 11/22 12/18 60/1 111/12 111/22 112/6 112/20 112/23 113/9 114/4 114/5</p>	<p>114/8 117/12 118/8 122/16 125/10 131/25 135/13 entry's [1] 2/9 episode [6] 10/1 10/9 27/15 27/18 27/21 41/15 escalated [1] 123/11 escalation [1] 16/2 escape [1] 117/9 escort [1] 108/10 especially [1] 60/19 essentially [15] 9/7 9/9 41/18 53/4 58/23 59/11 64/16 73/24 74/13 76/22 76/23 112/8 113/5 115/10 132/9 established [1] 105/21 estimate [1] 114/21 et [3] 56/21 56/22 129/11 et cetera [1] 129/11 Eustace [4] 11/13 18/13 36/20 92/15 even [13] 10/25 16/2 16/8 19/22 37/6 47/25 49/10 49/18 77/7 83/1 93/3 123/8 131/10 evening [14] 20/25 47/21 47/23 90/6 91/10 91/20 91/22 99/21 102/19 107/22 113/2 113/10 134/13 134/15 event [6] 17/7 117/5 117/23 118/23 118/25 119/9 events [4] 5/20 15/24 104/16 107/23 ever [5] 17/10 19/7 19/9 19/11 19/15 every [5] 82/9 82/11 106/19 106/21 123/12 everybody's [1] 119/20 everyone's [2] 119/21 121/2 everything [4] 6/5 40/25 99/8 112/8 evidence [22] 7/10 8/19 8/20 9/11 14/17 15/8 23/21 35/19 36/19 37/15 39/15 40/5 44/14 50/16 50/20 68/1 92/4 92/14 97/3 97/7 97/8 97/15 exact [3] 18/2 51/11 114/14 exactly [5] 88/4 101/19 101/23 109/25 136/21 examination [1] 132/2 examine [1] 1/9</p>
---	--	---	---	---

<p>E</p> <p>example [11] 5/3 32/6 56/2 72/11 72/16 72/24 74/5 85/9 89/13 111/17 129/4</p> <p>examples [1] 72/25</p> <p>Except [1] 135/18</p> <p>exception [1] 83/22</p> <p>execution [2] 20/3 64/3</p> <p>exercise [1] 29/11</p> <p>exist [1] 62/5</p> <p>existed [1] 99/15</p> <p>existence [1] 124/16</p> <p>expect [2] 56/7 100/25</p> <p>expectation [1] 87/20</p> <p>experience [6] 69/8 80/2 85/4 89/10 127/20 127/25</p> <p>experienced [3] 31/18 75/25 75/25</p> <p>experiences [2] 66/12 95/6</p> <p>experiencing [4] 41/14 60/23 61/5 61/19</p> <p>explain [6] 28/2 71/23 72/10 73/19 77/19 84/17</p> <p>explained [3] 65/25 89/25 96/4</p> <p>explanation [1] 53/3</p> <p>explicitly [1] 6/1</p> <p>exploration [1] 56/1</p> <p>explore [4] 33/5 37/19 82/16 84/12</p> <p>explored [7] 43/4 44/21 49/7 69/8 69/11 82/2 86/23</p> <p>exploring [1] 80/11</p> <p>extended [1] 98/14</p> <p>extent [3] 75/2 92/7 105/7</p> <p>extra [1] 124/10</p> <p>extract [1] 39/15</p> <p>eyes [1] 132/16</p>	<p>6/13 37/11 41/15 41/23 93/5 93/7 122/1 122/1 122/6</p> <p>facts [1] 122/15</p> <p>factually [1] 123/18</p> <p>failed [3] 7/16 122/9 122/12</p> <p>failings [1] 121/15</p> <p>failures [3] 121/21 121/21 121/24</p> <p>fair [1] 122/14</p> <p>families [1] 76/3</p> <p>family [4] 4/8 65/19 76/21 77/11</p> <p>far [17] 2/24 24/2 24/11 31/6 34/14 44/9 47/5 49/14 84/23 87/2 95/18 97/17 100/17 128/11 128/13 133/15 136/9</p> <p>fault [1] 4/22</p> <p>fear [1] 94/11</p> <p>fearful [1] 123/17</p> <p>feasible [1] 131/13</p> <p>feature [1] 17/14</p> <p>featured [1] 60/7</p> <p>features [1] 61/15</p> <p>fed [1] 61/18</p> <p>feeds [1] 73/17</p> <p>feel [5] 32/15 39/1 89/22 94/11 102/5</p> <p>feeling [1] 95/6</p> <p>feels [2] 66/19 66/20</p> <p>fell [1] 131/4</p> <p>felt [9] 13/20 14/13 40/12 51/15 95/10 98/10 115/20 115/22 131/12</p> <p>Feven [2] 15/12 123/10</p> <p>few [8] 5/12 5/17 34/8 73/11 80/10 85/11 85/11 91/20</p> <p>fill [3] 7/25 17/6 103/16</p> <p>filled [1] 121/8</p> <p>filling [1] 121/20</p> <p>final [2] 5/10 15/7</p> <p>finally [4] 29/23 51/18 70/20 124/10</p> <p>find [2] 56/7 123/20</p> <p>finding [1] 135/12</p> <p>findings [2] 9/22 126/2</p> <p>fine [1] 89/6</p> <p>finished [1] 24/18</p> <p>fire [1] 130/10</p> <p>first [36] 2/3 2/4 6/10 9/23 10/3 10/9 10/16 11/14 18/9 23/18 24/9 27/5 27/15 27/18 27/21 31/13 33/11 43/1 55/24 64/23 75/4 80/5 80/5 104/1 104/2 107/1 107/2 107/7 113/11 116/9 117/16</p>	<p>118/21 118/23 120/4 122/11 126/7</p> <p>first-episode [3] 10/9 27/15 27/21</p> <p>first-hand [1] 122/11</p> <p>firstly [4] 12/1 16/18 47/16 127/13</p> <p>fits [1] 87/2</p> <p>five [10] 3/7 3/10 17/7 20/16 24/24 25/14 39/19 49/11 53/18 133/18</p> <p>five hours [3] 39/19 49/11 133/18</p> <p>five minutes [4] 3/7 3/10 24/24 25/14</p> <p>five years [1] 53/18</p> <p>flat [28] 6/12 11/17 11/18 11/22 11/23 12/1 12/2 12/17 35/15 45/3 48/16 49/20 55/1 56/2 66/4 66/14 68/21 94/12 95/14 101/7 106/16 108/1 109/3 109/11 109/21 115/24 117/8 133/2</p> <p>floor [2] 117/16 118/21</p> <p>follow [4] 22/25 58/8 103/15 136/21</p> <p>followed [2] 6/22 94/10</p> <p>following [18] 2/14 15/18 15/23 42/7 47/8 90/9 91/18 94/5 94/9 98/11 100/12 102/16 103/8 107/18 116/15 116/15 118/10 137/18</p> <p>follows [1] 16/6</p> <p>force [9] 36/3 36/7 37/12 42/11 92/9 93/5 105/8 130/1 130/9</p> <p>forced [2] 6/12 58/23</p> <p>foreshadowed [1] 76/14</p> <p>forgive [4] 4/15 56/19 77/19 109/12</p> <p>form [3] 1/18 74/7 121/20</p> <p>formed [1] 95/19</p> <p>forms [1] 52/20</p> <p>forward [5] 29/23 41/12 42/18 43/10 109/16</p> <p>found [4] 56/3 109/3 110/6 110/23</p> <p>Foundation [1] 79/17</p> <p>four [7] 27/8 42/24 44/1 44/1 65/12 103/17 112/22</p> <p>four months [1] 27/8</p> <p>fractured [1] 123/10</p> <p>free [1] 87/18</p> <p>fresh [1] 135/20</p> <p>frightened [2] 60/25 61/10</p>	<p>front [5] 10/22 42/9 70/5 74/10 81/11</p> <p>full [5] 25/24 79/5 100/25 124/5 132/3</p> <p>fullness [1] 123/15</p> <p>fully [1] 86/23</p> <p>funnel [1] 20/8</p> <p>further [25] 4/18 10/6 12/19 13/14 19/23 24/5 25/1 46/12 52/15 53/19 54/20 62/14 66/17 72/8 77/7 78/8 82/23 88/15 117/2 117/10 123/23 123/24 124/9 132/20 138/8</p> <p>future [1] 111/5</p>	<p>94/13 100/16 100/24 108/7 108/11 108/11 113/6 123/11 124/6 126/10 129/15 130/8 131/25 134/5</p> <p>getting [4] 34/12 35/8 108/8 110/15</p> <p>give [19] 1/14 1/17 1/24 1/25 18/1 21/3 35/19 36/18 49/19 62/2 72/24 73/4 86/22 100/4 101/22 108/5 108/14 114/13 117/11</p> <p>given [34] 2/11 10/18 13/10 15/8 19/3 19/7 19/9 19/11 19/15 19/20 22/8 22/10 39/14 47/25 48/14 48/21 49/3 49/8 50/9 52/23 53/3 54/4 75/7 76/9 91/19 98/16 100/8 100/11 100/21 101/5 102/17 102/19 104/6 104/16</p> <p>giving [3] 39/15 92/4 100/20</p> <p>go [60] 1/9 1/15 3/18 4/13 5/18 6/6 7/7 9/3 10/24 11/12 17/4 20/22 25/11 28/18 29/8 29/23 31/2 32/12 32/14 40/22 40/24 40/25 41/12 42/18 43/10 54/16 54/18 65/4 72/8 81/22 82/4 84/3 91/12 92/22 93/22 93/24 93/25 96/25 98/7 98/12 100/3 100/6 100/13 102/3 103/20 108/14 108/17 108/19 111/20 112/4 113/8 113/19 113/22 113/23 114/25 115/20 116/3 116/17 117/12 134/21</p> <p>goal [1] 86/14</p> <p>goes [7] 6/8 12/6 23/18 37/5 51/5 62/14 121/20</p> <p>going [54] 3/6 3/10 6/20 6/23 6/25 13/18 13/23 15/3 17/5 19/4 22/22 23/20 26/10 30/10 33/1 34/8 40/24 40/25 47/16 47/20 48/10 50/18 60/14 63/16 64/1 64/14 65/21 67/6 68/10 72/25 73/4 83/24 89/10 91/17 94/17 94/21 97/6 99/17 100/19 101/7 101/18 101/23 101/23 108/4 111/14 111/15 114/9 114/23 115/23 116/20 122/5 126/10 134/2</p>
---	--	---	---	--

<p>G</p> <p>going... [1] 136/4</p> <p>gone [3] 65/3 113/10 120/4</p> <p>good [8] 1/5 57/8 57/9 78/11 84/15 85/13 105/20 112/19</p> <p>got [22] 10/2 10/15 20/24 21/6 24/1 42/19 49/13 50/20 56/2 74/20 76/15 85/10 94/8 107/23 108/13 109/3 110/8 114/4 114/9 114/11 124/10 129/9</p> <p>GPs [1] 127/22</p> <p>graded [2] 53/16 103/24</p> <p>graduated [1] 26/11</p> <p>Great [1] 127/6</p> <p>ground [1] 49/15</p> <p>group [3] 108/25 109/7 109/15</p> <p>guarded [4] 17/13 17/13 17/16 66/23</p> <p>guess [5] 48/23 68/15 69/10 130/8 130/8</p> <p>guidance [1] 31/11</p> <p>guide [1] 13/2</p> <p>Guidelines [1] 31/9</p>	<p>17/7 23/2 61/6 75/7</p> <p>happy [1] 21/14</p> <p>hard [2] 37/23 101/3</p> <p>harm [17] 13/7 15/24 45/17 53/14 55/16 58/19 59/2 59/6 60/2 83/16 89/14 95/10 117/5 117/23 118/23 118/25 119/9</p> <p>harmed [1] 136/19</p> <p>harming [1] 83/12</p> <p>has [26] 1/10 6/21 7/22 14/6 31/14 36/1 42/5 51/25 65/9 69/22 90/11 113/25 114/15 115/11 117/1 117/2 117/16 117/17 117/19 117/23 118/11 118/17 120/5 122/17 124/8 137/7</p> <p>hasn't [1] 10/2</p> <p>have [258]</p> <p>Haven [3] 83/13 84/3 84/5</p> <p>haven't [11] 19/9 26/2 31/20 35/20 36/19 39/14 50/10 79/8 92/5 92/13 115/16</p> <p>having [26] 3/20 5/23 9/25 33/6 37/7 39/25 47/2 50/24 53/17 61/7 80/22 88/1 89/2 91/5 92/18 93/4 93/6 95/6 98/10 99/1 101/1 116/10 118/16 128/22 135/6 136/14</p> <p>he [184]</p> <p>he'd [20] 15/9 37/9 54/12 56/2 56/2 56/20 57/13 77/2 90/24 96/8 99/22 107/23 108/6 110/23 110/24 110/25 117/8 123/22 126/4 129/14</p> <p>he's [12] 17/22 17/23 64/10 64/11 64/12 95/6 95/6 100/21 101/22 101/23 114/2 116/10</p> <p>head [2] 5/9 60/18</p> <p>heading [5] 28/20 81/23 82/5 83/11 83/20</p> <p>health [101] 1/8 3/15 3/20 4/7 13/2 13/13 14/4 15/16 16/21 17/24 18/10 18/20 18/24 19/6 19/19 22/14 26/23 27/4 27/5 28/3 28/4 28/13 28/15 30/9 30/20 31/1 31/9 31/19 32/4 32/8 32/13 32/18 33/4 33/21 34/5 37/17 40/15 41/5 43/2 49/17 51/25 52/4</p>	<p>52/21 54/21 58/18 59/17 61/16 62/18 63/6 68/18 68/25 70/10 70/22 70/25 74/16 75/12 76/22 77/5 78/8 79/16 80/6 80/22 81/1 81/4 83/23 83/25 84/5 84/8 84/25 85/5 85/15 85/17 85/22 86/13 87/3 87/4 87/5 87/7 87/15 87/22 88/7 90/5 95/7 100/13 102/1 103/10 104/20 107/18 109/9 111/11 115/19 117/24 118/10 119/24 123/23 125/20 127/15 129/4 133/13 133/17 136/23</p> <p>Healthcare [3] 2/14 30/25 79/17</p> <p>hear [8] 36/9 39/3 66/1 66/2 94/17 125/21 132/21 136/10</p> <p>heard [8] 40/5 57/12 57/13 110/25 127/17 132/19 135/1 136/15</p> <p>hearing [7] 3/17 50/19 58/5 60/20 61/7 105/25 137/18</p> <p>heavy [1] 130/10</p> <p>held [1] 49/15</p> <p>help [9] 17/9 33/5 38/14 84/11 89/16 96/18 113/6 114/10 130/5</p> <p>helped [2] 13/20 14/13</p> <p>hence [1] 87/7</p> <p>her [26] 36/23 38/11 39/11 39/16 39/19 40/1 49/10 67/15 67/18 67/22 68/2 68/5 75/23 76/1 76/1 91/11 91/12 93/3 123/10 123/16 123/17 134/1 134/4 134/6 134/12 134/16</p> <p>here [22] 17/3 17/4 17/22 19/7 20/4 43/18 43/25 44/13 45/9 68/19 68/22 68/24 69/5 69/14 69/15 81/9 96/14 106/17 122/17 123/12 125/25 135/25</p> <p>hers [1] 8/14</p> <p>high [26] 40/14 43/15 43/15 43/19 43/23 44/1 44/13 44/14 44/17 44/17 45/1 45/12 46/7 46/7 46/8 46/8 53/2 53/7 53/16 54/14 54/23 54/23 55/6 55/6 78/4 78/4</p> <p>Highbury [3] 120/2 124/14 124/20</p> <p>higher [8] 41/25</p>	<p>41/25 44/6 95/17 106/3 106/4 106/5 106/7</p> <p>highlighted [1] 128/21</p> <p>highly [2] 12/23 60/7</p> <p>Hiley [3] 5/14 7/20 9/9</p> <p>him [94] 3/10 4/4 4/6 4/14 6/25 11/19 11/23 12/9 36/25 37/7 37/19 37/20 39/24 42/5 49/15 49/16 53/1 54/4 54/7 55/9 56/18 58/5 58/5 60/13 61/8 63/22 64/17 65/25 66/2 66/21 67/19 68/3 68/8 68/11 68/12 68/20 68/20 68/23 69/2 69/13 69/14 69/21 75/13 75/16 75/18 76/9 91/6 92/22 92/25 93/2 93/3 93/15 93/16 94/5 94/5 94/9 94/10 95/4 95/11 95/12 95/16 95/19 95/23 96/2 96/14 96/16 100/4 100/6 100/10 100/21 101/25 102/2 102/3 102/11 108/5 108/7 109/10 109/18 109/20 110/3 110/9 110/9 110/15 111/18 114/12 115/20 116/12 116/13 117/9 126/21 132/12 132/22 136/4 136/6</p> <p>him/watching [1] 94/5</p> <p>himself [2] 91/1 131/23</p> <p>hinges [3] 92/2 129/24 130/6</p> <p>his [98] 2/18 4/19 10/7 11/21 11/22 12/3 12/8 18/18 37/6 37/6 38/13 46/12 48/16 49/13 49/18 49/20 49/20 50/23 54/1 55/11 55/18 57/14 58/23 60/5 60/18 61/9 61/13 62/11 62/14 63/10 63/20 63/21 64/15 64/20 64/24 66/2 66/7 66/11 66/14 66/20 67/4 67/19 68/21 68/21 76/23 77/5 78/12 80/5 90/21 90/24 94/13 94/18 94/22 95/5 95/8 95/10 96/2 96/5 97/7 97/10 98/11 100/10 101/7 102/2 102/9 102/12 102/16 102/20 102/24 103/4 103/5 105/17 108/1 108/2 108/5</p>	<p>109/10 109/19 110/3 110/3 110/7 110/20 110/24 114/6 115/24 116/6 116/13 125/17 125/18 125/20 125/22 126/1 126/4 126/8 131/24 131/24 132/21 132/22 133/2</p> <p>history [15] 3/19 4/7 4/10 4/10 6/12 10/18 11/3 41/4 43/2 55/11 88/9 89/15 90/25 94/20 95/24</p> <p>hm [13] 48/17 81/18 85/3 86/17 98/17 105/6 106/14 114/3 118/12 118/15 120/7 132/1 132/24</p> <p>hoc [1] 127/23</p> <p>hold [1] 12/7</p> <p>holiday [1] 74/20</p> <p>home [43] 34/1 40/7 43/3 44/4 44/6 44/20 44/22 49/2 50/7 51/15 57/2 59/4 59/5 63/16 64/2 64/15 75/17 80/18 82/6 82/17 82/24 83/13 84/1 84/12 84/13 84/21 85/12 86/5 86/8 86/24 96/10 96/12 98/6 98/10 100/10 101/11 102/3 103/3 103/9 108/9 108/10 111/5 131/12</p> <p>homes [1] 116/21</p> <p>honest [3] 102/22 102/23 114/13</p> <p>HoNOS [1] 106/23</p> <p>hoped [1] 94/8</p> <p>hoping [1] 87/21</p> <p>hospital [28] 3/6 3/10 16/24 63/14 65/9 65/14 80/17 82/14 82/16 82/16 83/2 83/3 83/17 84/2 84/20 86/9 86/14 86/19 87/13 87/18 98/4 98/7 111/21 120/2 124/1 124/3 124/19 124/20</p> <p>hour [3] 21/15 65/12 114/21</p> <p>hours [16] 3/7 19/18 19/20 34/9 39/19 49/11 68/13 69/4 69/14 74/19 74/22 77/11 91/20 108/1 115/10 133/18</p> <p>house [4] 83/13 84/3 84/5 94/7</p> <p>how [24] 6/22 27/12 44/6 45/7 51/12 60/12 60/15 66/22 68/14 74/18 77/10 84/6 84/7 84/7 85/8 86/21 89/18 92/17 95/2 95/5 101/4</p>
--	--	---	---	--

<p>H</p> <p>how... [3] 108/8 126/20 134/5</p> <p>However [1] 35/16</p> <p>hunched [1] 60/17</p> <p>hypotheses [1] 14/25</p> <p>hypothesis [2] 8/25 14/17</p> <p>hypothesise [1] 15/5</p> <p>hypothesising [1] 7/23</p> <hr/> <p>I</p> <p>I actually [1] 114/8</p> <p>I admit [1] 122/13</p> <p>I agree [2] 120/15 121/19</p> <p>I also [3] 4/7 80/19 96/5</p> <p>I am [4] 9/12 53/17 113/13 123/19</p> <p>I apologise [2] 76/15 77/23</p> <p>I appreciate [3] 113/14 121/2 122/24</p> <p>I arrived [1] 89/25</p> <p>I ask [10] 1/6 9/18 11/9 13/14 57/10 59/16 62/21 63/23 116/25 124/10</p> <p>I asked [6] 42/5 56/19 96/1 99/21 105/3 134/6</p> <p>I believe [3] 22/10 75/9 136/1</p> <p>I called [1] 91/11</p> <p>I can [8] 10/21 11/2 21/20 53/22 70/2 90/23 114/18 114/19</p> <p>I can't [28] 1/21 1/23 16/11 18/1 20/20 24/11 27/17 35/7 40/3 51/11 56/5 62/19 62/19 67/1 70/2 75/8 88/4 91/4 92/21 92/23 109/25 114/13 114/13 114/13 124/22 134/6 134/13 134/16</p> <p>I cannot [1] 56/17</p> <p>I clearly [1] 71/24</p> <p>I come [1] 6/15</p> <p>I commonly [1] 17/15</p> <p>I confirmed [1] 21/9</p> <p>I consider [1] 111/24</p> <p>I could [6] 100/16 108/25 109/12 115/21 115/24 129/16</p> <p>I couldn't [1] 90/23</p> <p>I decided [2] 108/19 129/12</p> <p>I did [8] 4/6 15/15 43/8 77/13 77/19 80/21 88/20 91/10</p> <p>I didn't [14] 34/7 71/23 89/4 108/8</p>	<p>118/4 118/5 118/7 122/14 123/15 123/17 123/24 129/13 135/2 135/2</p> <p>I disagreed [3] 111/17 111/19 111/21</p> <p>I do [8] 16/1 38/9 42/2 67/16 72/2 122/7 122/7 137/13</p> <p>I don't [36] 4/13 8/7 8/25 16/11 17/22 19/6 24/16 34/7 34/10 38/17 39/5 50/5 50/18 51/1 61/22 67/1 68/14 69/8 77/2 77/3 77/13 91/2 97/14 102/22 102/22 110/17 114/22 115/14 119/8 124/4 124/25 129/1 129/1 131/10 134/17 134/18</p> <p>I doubt [1] 39/5</p> <p>I ever [1] 17/10</p> <p>I explained [1] 96/4</p> <p>I feel [1] 39/1</p> <p>I felt [4] 98/10 115/20 115/22 131/12</p> <p>I get [1] 21/19</p> <p>I go [1] 17/4</p> <p>I got [4] 20/24 21/6 108/13 110/8</p> <p>I guess [5] 48/23 68/15 69/10 130/8 130/8</p> <p>I had [11] 7/24 10/22 15/1 15/18 21/19 55/19 108/7 115/23 116/10 117/6 118/4</p> <p>I hadn't [1] 104/5</p> <p>I have [5] 6/19 38/10 48/6 52/15 67/17</p> <p>I haven't [1] 19/9</p> <p>I identified [1] 103/25</p> <p>I just [5] 5/10 17/1 25/11 58/22 73/13</p> <p>I knew [1] 91/20</p> <p>I know [2] 62/22 115/21</p> <p>I left [1] 100/13</p> <p>I live [1] 6/20</p> <p>I made [2] 8/21 113/23</p> <p>I may [5] 5/13 5/18 55/25 112/21 127/12</p> <p>I mean [6] 48/23 49/14 69/7 72/22 88/4 89/5</p> <p>I meant [1] 132/14</p> <p>I might [2] 20/22 21/16</p> <p>I move [1] 97/6</p> <p>I must [1] 22/10</p> <p>I needed [2] 100/15 115/22</p> <p>I normally [1] 1/15</p> <p>I only [1] 24/7</p> <p>I personally [1]</p>	<p>135/14</p> <p>I questioned [1] 132/12</p> <p>I read [1] 83/8</p> <p>I recorded [1] 53/20</p> <p>I represent [1] 65/19</p> <p>I returned [1] 122/20</p> <p>I said [15] 7/21 7/22 8/8 10/24 13/9 21/13 23/7 47/5 108/10 123/14 123/15 129/6 134/14 135/2 135/4</p> <p>I say [6] 99/6 101/25 102/9 126/18 129/12 136/22</p> <p>I see [6] 5/6 20/21 23/8 23/9 24/20 86/21</p> <p>I still [1] 44/22</p> <p>I suspect [1] 53/17</p> <p>I take [1] 53/8</p> <p>I then [1] 42/3</p> <p>I think [67] 6/4 8/23 13/1 14/19 14/23 20/4 23/6 23/21 24/1 34/11 34/14 39/5 44/8 44/23 47/2 48/5 53/15 53/20 55/14 55/20 58/17 59/10 59/12 60/21 61/1 62/14 67/1 69/22 71/5 73/14 75/5 76/11 76/17 76/18 77/21 78/11 82/16 86/22 88/20 89/6 91/10 91/11 93/11 96/1 96/12 96/13 101/25 103/25 105/16 109/8 110/8 110/12 110/13 110/21 114/16 122/15 124/7 124/13 129/6 129/23 133/1 133/25 134/15 135/25 136/18 136/20 137/3</p> <p>I thought [2] 91/21 131/10</p> <p>I took [1] 116/10</p> <p>I totally [2] 123/13 123/13</p> <p>I trusted [1] 76/1</p> <p>I understand [4] 2/19 31/6 33/14 34/14</p> <p>I understand it [1] 49/14</p> <p>I understood [1] 44/10</p> <p>I want [6] 42/23 46/8 80/10 113/24 121/7 127/13</p> <p>I wanted [3] 9/3 44/24 129/15</p> <p>I was [30] 7/22 8/4 8/16 14/3 15/1 15/4 15/5 15/6 17/6 21/7 22/22 23/14 23/20 24/16 36/6 41/10 42/6 62/19 67/3 91/9 91/11 91/19 92/21 99/7</p>	<p>104/5 108/6 115/15 117/6 119/19 126/10</p> <p>I wasn't [9] 24/7 34/8 36/10 37/4 98/20 99/3 122/14 122/19 123/14</p> <p>I went [1] 113/18</p> <p>I will [1] 5/9</p> <p>I would [15] 21/13 24/18 39/5 47/2 72/22 73/5 77/20 106/10 111/22 111/22 112/6 114/8 116/11 123/18 131/13</p> <p>I wouldn't [3] 11/1 82/15 109/22</p> <p>I'd [11] 5/12 5/17 68/17 89/7 93/19 99/8 108/11 114/20 114/21 115/20 122/19</p> <p>I'll [4] 9/14 72/24 114/18 127/7</p> <p>I'm [43] 4/16 4/17 4/20 6/21 7/6 8/8 8/11 9/1 9/2 9/13 10/21 14/24 14/25 17/6 17/8 19/22 19/23 20/4 24/4 26/10 32/22 40/2 40/24 40/25 50/18 51/12 60/14 61/1 61/1 68/10 84/6 97/6 110/15 111/19 112/6 115/14 116/1 116/19 120/23 125/25 130/24 133/15 134/13</p> <p>I've [21] 4/20 10/15 14/12 17/16 19/2 19/21 24/1 24/8 30/7 67/2 74/20 76/15 86/4 104/23 104/23 105/19 126/5 126/17 128/21 128/25 136/1</p> <p>I've wrote [1] 126/17</p> <p>ICB [1] 16/2</p> <p>idea [3] 84/13 96/15 130/9</p> <p>ideas [1] 33/5</p> <p>identified [6] 11/23 46/23 48/12 103/25 106/12 113/25</p> <p>identify [2] 98/6 117/1</p> <p>if [136] 4/2 4/6 4/14 4/17 4/23 5/13 5/18 5/18 6/16 7/7 7/15 8/23 9/5 9/8 10/14 12/19 14/3 14/16 19/17 23/3 28/17 28/18 29/8 29/23 31/15 32/6 33/9 36/14 37/11 37/20 38/14 39/1 40/12 40/22 41/12 42/18 43/10 45/15 49/10 49/18 50/3 50/8 50/12 50/18 50/21 51/9 53/8 53/11 53/13 53/19 53/22</p>	<p>54/16 55/25 56/2 56/6 56/17 56/19 56/20 58/13 60/9 60/14 60/16 61/4 62/19 65/3 68/24 69/12 71/12 72/6 74/20 75/8 75/9 76/15 81/7 81/22 82/4 82/21 83/5 83/24 84/8 85/9 85/17 86/8 87/16 87/25 89/7 89/14 89/14 89/15 89/21 91/2 91/4 93/20 93/20 93/22 93/25 94/20 95/12 95/14 96/25 97/8 98/7 98/10 99/1 99/12 101/5 101/21 102/22 103/3 103/6 103/20 107/1 108/25 109/3 109/12 109/21 110/14 110/23 111/17 111/18 111/18 111/20 112/5 115/22 115/22 123/8 127/12 130/22 131/10 132/7 132/8 132/10 132/15 132/15 134/6 134/21</p> <p>illness [5] 10/8 40/14 61/19 64/24 96/15</p> <p>image [1] 35/21</p> <p>immediate [4] 48/1 48/8 100/22 101/2</p> <p>immediately [3] 64/3 90/9 137/9</p> <p>imminently [1] 91/18</p> <p>impact [4] 58/20 59/2 71/3 78/12</p> <p>impacted [1] 78/13</p> <p>IMPLEMENTATION [1] 81/14</p> <p>implications [1] 56/4</p> <p>implied [1] 126/4</p> <p>implying [1] 20/5</p> <p>important [2] 56/6 111/4</p> <p>impression [4] 66/24 91/19 95/18 110/15</p> <p>IMPRESSIONS [1] 3/14</p> <p>improvement [2] 126/14 126/22</p> <p>inadequate [1] 71/1</p> <p>inappropriate [1] 44/7</p> <p>incident [34] 6/16 11/14 15/8 15/11 15/12 15/21 19/12 19/16 24/6 24/10 24/14 48/18 48/21 101/24 118/3 118/6 119/5 119/11 119/16 120/17 120/24 120/25 121/10 122/10 122/22 123/1 123/8 124/8 131/22 135/1 136/11 136/16 136/19 137/5</p> <p>incidents [1] 22/25</p>
--	--	--	---	---

<p>I</p> <p>included [4] 4/24 71/25 78/9 98/14</p> <p>includes [1] 13/6</p> <p>incomplete [1] 13/9</p> <p>incorrect [1] 76/16</p> <p>indeed [2] 84/8 133/22</p> <p>independent [3] 8/10 22/13 29/15</p> <p>independently [1] 23/23</p> <p>index [1] 119/7</p> <p>indicate [4] 7/5 9/2 10/4 70/22</p> <p>indicated [5] 6/9 55/12 82/21 96/8 134/15</p> <p>indicating [2] 83/15 113/5</p> <p>indication [1] 47/23</p> <p>indicator [1] 111/4</p> <p>indices [1] 57/24</p> <p>indirectly [1] 129/18</p> <p>individual [6] 51/4 70/4 70/14 99/13 117/23 124/4</p> <p>influence [2] 16/19 87/1</p> <p>influenced [4] 67/20 69/21 75/22 131/12</p> <p>informal [1] 49/6</p> <p>informally [1] 87/17</p> <p>information [63] 1/14 1/16 1/24 1/25 4/23 6/11 10/22 11/8 12/23 13/1 13/7 13/10 13/11 18/8 18/16 18/22 20/9 21/8 22/24 34/20 37/19 38/1 38/19 38/22 39/1 41/7 41/8 41/19 42/1 43/7 43/9 44/10 44/23 58/23 60/9 62/20 63/19 71/13 72/4 93/4 94/15 104/14 104/23 104/24 107/4 116/11 117/11 118/4 118/5 122/20 122/25 123/14 123/21 124/5 124/9 126/10 128/8 129/17 130/17 130/23 131/11 131/21 135/5</p> <p>informations [1] 23/10</p> <p>informed [8] 13/8 24/13 99/21 100/3 108/6 114/19 119/19 129/24</p> <p>initial [2] 104/7 135/19</p> <p>initially [3] 100/24 101/4 132/19</p> <p>injuries [3] 117/10 117/17 119/14</p>	<p>injury [3] 120/8 123/6 123/9</p> <p>inpatient [3] 80/3 81/25 86/13</p> <p>input [1] 59/18</p> <p>Inquiry [9] 16/9 18/16 22/22 22/23 22/23 26/2 73/13 77/20 79/8</p> <p>insertion [1] 132/13</p> <p>inside [5] 11/22 12/4 58/6 99/2 99/11</p> <p>Inspector [4] 11/13 18/13 36/20 92/14</p> <p>inspector's [2] 42/16 105/4</p> <p>instance [7] 2/4 42/8 51/17 55/24 64/23 91/25 100/8</p> <p>instead [4] 5/9 40/6 53/7 94/10</p> <p>intending [1] 91/12</p> <p>intensity [1] 85/9</p> <p>intensive [1] 82/24</p> <p>intention [6] 95/12 100/2 102/8 108/14 115/23 117/12</p> <p>intentions [3] 102/2 131/24 133/2</p> <p>interact [1] 95/23</p> <p>interacts [1] 84/8</p> <p>interest [2] 63/20 63/21</p> <p>interpersonal [1] 47/6</p> <p>interrogated [1] 121/13</p> <p>interview [17] 5/14 6/17 14/21 17/5 20/15 20/19 21/4 21/4 21/10 22/1 22/19 24/21 28/25 50/9 77/1 96/22 132/2</p> <p>interviewed [2] 77/2 109/14</p> <p>interviewer [1] 25/7</p> <p>into [38] 4/24 6/12 12/8 15/13 17/1 35/15 36/16 37/24 42/2 45/3 50/20 55/1 56/2 58/11 58/23 61/18 66/4 70/4 73/17 84/2 84/20 86/2 87/1 87/18 89/10 92/22 95/13 95/13 98/7 109/3 111/20 114/15 115/23 116/20 117/2 117/8 119/20 124/1</p> <p>introduce [1] 84/15</p> <p>INTRODUCTION [1] 81/23</p> <p>intrusive [1] 72/9</p> <p>invading [2] 94/13 94/22</p> <p>investigate [1] 132/20</p> <p>investigated [1]</p>	<p>122/6</p> <p>investigation [4] 6/20 15/25 121/10 137/10</p> <p>involved [3] 19/1 27/23 66/25</p> <p>involvement [4] 62/10 80/5 115/12 123/24</p> <p>involves [1] 80/11</p> <p>involving [2] 80/12 118/18</p> <p>is [231]</p> <p>isn't [19] 7/13 26/11 28/5 28/20 30/20 43/21 45/17 46/14 50/13 52/6 54/5 55/11 69/17 82/6 85/21 94/15 103/5 103/15 136/7</p> <p>issue [6] 22/17 78/3 117/2 122/2 125/5 133/4</p> <p>issues [8] 12/19 41/5 43/2 77/22 103/17 115/2 117/25 122/10</p> <p>it [286]</p> <p>it'll [2] 33/4 81/9</p> <p>it's [119] 4/22 5/11 5/13 8/7 8/13 8/14 8/22 10/10 10/10 10/23 10/24 10/25 11/10 11/10 13/15 13/16 13/17 13/18 13/23 13/24 15/7 19/20 19/25 20/1 20/5 21/9 22/18 23/6 26/10 28/4 28/20 30/22 31/8 31/22 32/6 32/12 32/22 33/2 33/10 34/13 35/23 37/15 38/17 40/8 40/23 41/23 42/2 43/21 44/25 45/1 46/11 46/14 48/24 52/6 53/9 54/7 56/19 58/20 65/7 68/23 69/7 69/7 69/10 69/13 70/13 70/22 71/12 75/4 78/6 78/7 78/7 78/11 81/6 82/15 82/16 84/11 84/15 84/19 85/13 85/21 86/4 86/10 86/22 86/24 90/11 91/2 92/6 96/24 97/1 98/5 99/4 101/3 103/25 104/11 105/18 106/12 106/21 106/25 106/25 107/3 107/6 109/17 111/10 112/23 114/15 116/16 119/13 119/20 119/21 121/7 121/20 125/7 126/7 129/8 130/13 132/25 133/4 135/21 135/23</p> <p>item [3] 83/11 83/20</p>	<p>103/20</p> <p>its [2] 10/10 123/14</p> <p>itself [3] 34/17 37/18 40/4</p> <p>J</p> <p>January [2] 27/2 51/20</p> <p>January 2020 [1] 27/2</p> <p>January 2022 [1] 51/20</p> <p>job [1] 28/5</p> <p>judge [1] 24/7</p> <p>judgement [3] 13/8 23/16 29/11</p> <p>July [2] 125/15 126/8</p> <p>jump [1] 118/20</p> <p>jumped [4] 117/9 117/16 120/5 123/17</p> <p>jumping [1] 134/21</p> <p>June [7] 25/4 81/13 81/14 93/23 125/13 125/14 125/23</p> <p>JUNE 2018 [1] 81/14</p> <p>June 2020 [2] 93/23 125/13</p> <p>just [110] 1/6 1/24 2/3 2/12 3/4 4/12 5/10 5/12 5/17 8/16 8/23 9/7 9/19 10/10 10/15 11/25 15/1 15/4 17/1 17/6 17/8 18/7 19/23 20/14 21/3 21/23 21/24 24/4 24/24 25/4 25/11 25/14 32/11 33/14 34/11 34/13 38/14 40/24 43/8 50/18 50/20 51/24 53/22 54/16 54/18 55/25 56/11 57/10 57/11 58/19 58/22 60/15 62/6 64/10 65/6 68/11 69/4 69/13 70/4 70/20 71/10 72/24 73/11 73/13 74/4 78/3 78/3 78/5 78/8 80/10 84/19 89/7 90/24 91/11 97/6 101/1 101/9 104/6 104/8 105/18 107/16 109/9 109/12 109/12 109/17 110/2 110/2 110/13 110/14 112/1 114/1 115/13 116/16 116/19 121/8 121/20 124/8 125/5 125/6 127/4 127/4 127/12 129/15 130/11 131/11 133/25 134/15 134/19 134/21 135/7</p> <p>Justice [2] 1/12 75/19</p> <p>K</p> <p>Katie [3] 11/13 36/20</p>	<p>92/14</p> <p>KC [1] 76/13</p> <p>keen [2] 96/14 102/25</p> <p>keep [9] 27/19 36/8 39/23 68/8 82/14 82/15 83/17 98/3 133/19</p> <p>keeping [1] 17/17</p> <p>kept [2] 108/3 132/13</p> <p>kick [1] 106/2</p> <p>kicked [4] 55/3 92/1 129/24 130/6</p> <p>kicking [1] 109/10</p> <p>kind [23] 6/15 8/6 14/10 14/11 14/12 14/14 15/2 15/2 17/9 17/9 21/8 23/1 23/11 42/2 86/25 87/15 89/16 99/7 102/3 126/3 130/9 130/12 136/17</p> <p>King's [1] 8/12</p> <p>knew [3] 91/20 130/6 134/17</p> <p>know [68] 8/5 14/12 16/11 17/10 23/8 24/13 24/20 34/7 45/2 50/18 62/9 62/22 65/3 66/22 67/1 68/14 77/1 77/3 84/1 84/19 85/8 86/2 86/23 88/10 89/7 89/14 91/2 91/21 93/14 95/9 95/15 100/25 100/25 101/3 102/2 102/4 102/5 102/7 102/7 102/22 102/22 102/25 104/16 107/21 108/8 109/20 109/20 109/22 110/9 110/9 110/10 111/23 114/22 115/21 118/5 118/7 123/15 123/16 123/17 123/17 124/13 124/25 129/14 134/7 134/15 135/2 136/7 136/10</p> <p>knowing [1] 135/9</p> <p>knowledge [16] 10/17 19/1 19/2 26/7 52/11 79/10 120/24 121/24 122/11 123/5 128/2 128/21 131/8 133/8 133/12 133/16</p> <p>known [11] 4/18 5/2 10/18 10/25 11/3 59/1 102/24 105/7 105/9 123/3 123/9</p> <p>L</p> <p>labour [1] 110/17</p> <p>lack [6] 6/11 10/18 31/19 41/17 43/6 133/4</p> <p>lacked [4] 46/2 49/5 63/21 96/10</p>
---	---	---	--	---

L	130/10	low [5] 43/3 44/4 44/20 53/19 54/12	45/15 101/8	103/9 107/22 108/5
lacks [2] 63/14 63/17	likelihood [16] 40/14 43/15 43/19 43/23 44/13 44/17 44/25 45/5 46/7 46/8 53/1 53/18 54/23 55/6 78/4 95/16	Ma'am [2] 57/7 63/3	matter [4] 25/4 34/12 54/7 131/23	108/11 108/12 108/15 113/2 113/2 113/8 113/11 113/17 113/20 114/7 115/8 115/24 116/7 116/9 116/12 116/17 120/1 120/2 125/17 125/20 125/24 126/8 128/18 129/3 134/2
lady [1] 117/9	likely [5] 39/13 45/7 61/1 91/21 95/1	made [34] 8/21 15/9 15/10 18/15 23/17 23/23 31/2 31/25 49/16 50/23 58/14 59/19 62/16 73/20 74/6 74/18 82/19 84/1 97/10 104/13 112/10 113/23 114/8 115/12 115/14 116/2 125/10 126/20 128/15 131/15 136/14 137/3 137/10 137/10	matters [1] 65/7	116/11 122/21 126/4 129/13
Langdale [3] 8/12 25/1 138/8	limit [1] 86/19	main [2] 80/5 83/22	maximise [1] 72/25	medications [5] 48/1 116/11 122/21 126/4 129/13
larger [1] 132/16	limited [1] 43/7	make [39] 8/10 13/8 13/12 15/11 15/20 16/23 17/2 21/8 25/11 28/9 30/8 34/21 38/21 39/1 44/24 45/21 51/24 52/3 61/23 62/5 69/3 70/8 77/10 84/19 85/12 86/6 86/25 96/11 100/16 111/19 111/19 111/22 112/1 112/6 113/9 119/6 120/25 127/23 132/15	may [42] 1/6 2/5 3/6 3/8 3/11 3/25 4/2 5/10 5/13 5/18 12/18 27/5 31/22 32/14 53/11 55/25 63/3 66/20 72/24 73/14 76/17 80/6 80/23 81/17 81/20 82/21 82/22 85/10 91/21 107/2 109/8 112/21 116/19 117/1 121/17 122/10 123/20 123/22 127/12 131/12 131/17 134/23	medics [1] 34/18
last [7] 13/17 51/25 82/1 94/6 123/12 125/18 132/18	line [1] 104/4	male [4] 11/21 11/22 12/7 60/4	May 2020 [4] 80/23 81/17 81/20 116/19	medium [7] 43/18 44/14 45/1 45/9 53/7 53/20 54/11
Lastly [1] 133/8	lined [1] 73/21	males [4] 7/11 22/17 50/17 97/4	maybe [7] 4/3 4/20 34/12 51/14 55/23 58/13 114/18	meet [3] 21/14 70/9 83/2
late [6] 20/25 88/21 88/24 89/3 89/23 99/7	lines [3] 42/24 81/24 132/10	Malik [4] 15/9 30/12 109/1 131/4	MBRRACE [1] 23/10	meeting [4] 7/22 21/14 21/17 100/9
later [8] 48/11 54/2 63/5 76/18 91/4 91/10 99/21 113/9	link [1] 20/2	making [17] 6/14 13/3 37/16 37/24 58/16 83/1 85/15 86/23 91/11 114/5 114/22 122/4 126/15 126/23 131/9 134/1 135/13	MCNAMARA [3] 73/10 77/16 138/16	member [8] 11/18 36/24 59/3 59/6 92/19 118/20 120/5 128/13
LATEST [1] 81/13	list [1] 77/17	makes [1] 131/1	me [49] 3/2 4/15 4/22 8/9 9/4 9/8 10/22 19/10 21/3 21/9 21/9 21/10 21/13 23/16 24/13 24/13 38/18 39/7 43/14 51/3 51/14 56/19 69/23 72/10 77/19 89/25 90/1 90/16 90/24 91/3 99/6 100/5 108/11 109/12 114/24 115/20 116/10 117/7 117/8 117/11 117/11 117/13 120/23 120/24 122/21 130/8 130/9 134/16 135/4	members [9] 15/19 19/12 58/11 108/16 108/18 113/3 113/19 113/20 115/16
latterly [1] 76/20	listed [1] 127/8	makers [5] 2/21 29/9 81/24 110/14 114/23	mean [12] 23/15 48/23 49/14 69/2 69/7 72/22 75/18 88/4 89/5 104/19 119/7 119/8	memories [1] 15/2
layer [2] 64/14 124/11	listening [1] 66/21	making [17] 6/14 13/3 37/16 37/24 58/16 83/1 85/15 86/23 91/11 114/5 114/22 122/4 126/15 126/23 131/9 134/1 135/13	mental [106] 1/7 3/20 4/7 9/23 13/1 13/13 14/4 15/16 16/21 17/24 18/9 18/20 18/24 19/6 19/19 22/14 26/23 27/4 27/5 28/3 28/4 28/13 28/15 30/9 30/20 31/1 31/9 31/18 32/4 32/8 32/13 32/18 33/4 33/21 34/5 37/17 40/14 40/15 41/5 43/2 49/16 51/25 52/4 52/21 54/21 58/18 59/17 61/16 61/19 62/18 63/6 64/24 68/18 68/25 70/10 70/22 70/25 74/16 75/12 76/22 77/5 78/8 79/16 80/6 80/22 81/1 81/4 83/23 83/25 84/5 84/8 84/25 85/5 85/15 85/17 85/21 86/13 87/2 87/4 87/5 87/7 87/15 87/22 88/7 90/5 95/7 96/15 100/13 102/1 103/10 104/20 107/18 109/8 111/11 115/19 117/24 118/10 119/24 123/23 125/20 127/15 129/4 132/2 133/12 133/16 136/23	memory [1] 17/7
lead [7] 79/21 117/21 119/1 119/22 120/14 121/5 124/2	little [8] 32/22 41/10 41/19 53/6 66/17 72/8 72/9 133/5	man [4] 58/9 59/5 64/9 118/16	med [1] 43/19	mentally [2] 64/9 114/2
leading [1] 42/2	live [1] 6/20	manage [1] 82/11	media [1] 6/19	mention [2] 71/17 71/20
leads [3] 17/19 17/20 38/18	living [2] 57/15 104/11	managed [2] 60/1 83/12	medic [1] 48/4	
lean [1] 6/14	Lloyd [7] 2/21 62/10 63/2 63/6 63/9 74/23 74/24	management [7] 11/5 32/1 71/3 73/16 73/18 73/18 73/21	medical [9] 3/19 4/10 17/20 21/6 28/7 28/12 30/9 41/3 112/20	
leaning [5] 5/24 6/7 8/18 50/3 98/2	local [4] 16/9 29/10 29/10 33/20	managing [1] 86/13	Medical/Psychiatric [1] 41/3	
learned [1] 15/12	lockdown [1] 116/5	manner [1] 66/22	medicated [1] 3/22	
learning [1] 123/12	log [1] 63/2	many [4] 6/11 27/12 52/19 89/13	medication [52] 7/14 47/13 47/25 48/7 48/10 51/8 54/1 54/4 64/20 64/22 65/6 76/4 91/13 97/24 98/11 99/23 100/2 100/4 100/6 100/16 100/17 100/21 100/21 101/6	
least [11] 6/6 6/25 29/19 39/18 48/9 61/21 61/24 69/17 80/19 85/23 86/15	logged [1] 34/12	mark [1] 3/16		
leave [2] 9/14 99/22	lone [2] 115/2 115/3	marked [3] 43/15 43/18 44/13		
led [6] 22/23 55/18 55/22 61/8 65/25 129/22	long [2] 77/10 134/5	marking [1] 45/14		
left [5] 2/10 76/19 100/13 107/1 132/17	longer [3] 49/15 69/10 95/10	mask [1] 17/20		
left-hand [2] 2/10 132/17	longitudinal [1] 64/24	matches [1] 75/8		
legal [2] 49/15 77/8	look [37] 1/13 1/19 1/22 1/23 1/25 2/2 4/6 6/16 8/3 9/5 9/5 13/12 13/14 19/17 20/22 21/1 21/16 23/1 25/10 25/11 28/17 40/22 42/23 60/10 60/14 60/16 71/12 74/9 84/13 95/3 95/4 98/7 112/20 129/8 132/6 132/7 132/10	materialise [1] 45/7		
lend [1] 3/12	looked [8] 4/24 9/25 38/3 42/8 43/5 44/3 60/25 107/16	materialised [2]		
lend-hand [1] 3/12	looking [14] 14/1 14/3 14/10 14/24 20/24 45/4 81/16 84/18 114/6 126/18 126/18 126/20 126/20 130/11			
length [1] 65/12	looks [1] 130/10			
let [2] 72/10 102/6	lost [1] 32/22			
let's [2] 111/21 118/23	lot [9] 7/23 18/1 22/24 22/25 23/7 27/17 27/20 51/2 95/17			
level [13] 36/3 36/6 36/7 36/10 37/12 39/25 42/4 42/11 55/12 119/13 123/5 123/11 130/1	loudspeaker [1] 39/6			
levels [1] 15/25				
liaison [3] 1/12 63/23 74/11				
life [2] 8/3 123/17				
light [2] 13/12 34/3				
like [19] 5/12 5/17 17/11 19/20 47/5 56/17 60/18 68/17 70/7 71/4 74/4 77/20 84/13 98/7 104/6 110/13 119/7 123/13				

<p>M</p> <p>mentioned [3] 69/22 105/18 110/2</p> <p>met [7] 16/20 19/21 28/6 29/2 64/1 115/16 115/20</p> <p>method [2] 49/23 103/4</p> <p>MH [3] 43/1 43/2 54/20</p> <p>MHA [2] 5/20 5/24</p> <p>microphones [1] 66/21</p> <p>midday [2] 34/4 34/7</p> <p>middle [3] 45/19 81/12 93/25</p> <p>Midlands [1] 3/9</p> <p>midnight [2] 3/8 3/11</p> <p>might [18] 4/18 5/2 20/2 20/22 21/16 32/15 36/14 57/19 72/8 72/15 75/3 76/9 83/19 85/8 100/23 100/24 105/11 105/19</p> <p>mightn't [1] 75/4</p> <p>mild [2] 103/22 105/23</p> <p>mind [10] 9/8 20/2 29/21 36/14 38/11 67/18 77/4 94/13 94/22 114/23</p> <p>minor [2] 105/12 119/14</p> <p>minute [1] 113/9</p> <p>minutes [4] 3/7 3/10 24/24 25/14</p> <p>missed [3] 48/6 112/21 128/25</p> <p>missing [1] 8/22</p> <p>mitigate [1] 98/12</p> <p>mitigating [2] 99/18 100/18</p> <p>mitigation [1] 101/2</p> <p>Mm [20] 48/17 69/7 81/18 85/3 86/17 92/16 93/1 98/17 105/6 106/14 114/3 118/12 118/15 120/7 121/14 121/23 124/15 132/1 132/24 136/13</p> <p>Mm-hm [13] 48/17 81/18 85/3 86/17 98/17 105/6 106/14 114/3 118/12 118/15 120/7 132/1 132/24</p> <p>mobile [1] 115/4</p> <p>Moloney [13] 1/3 1/4 13/15 13/18 52/17 52/18 57/12 60/22 76/2 108/23 138/3 138/12 138/21</p> <p>moment [6] 34/15 60/22 61/5 70/24 81/9 129/8</p> <p>moments [1] 80/10</p>	<p>monitor [2] 64/22 65/9</p> <p>monitored [1] 64/12</p> <p>monotone [1] 61/11</p> <p>months [1] 27/8</p> <p>more [26] 5/3 5/13 5/17 20/2 37/18 47/2 47/3 51/14 53/6 55/17 58/13 58/14 64/24 66/6 67/5 70/23 82/16 86/4 86/22 93/12 93/15 96/2 98/6 104/4 120/24 135/12</p> <p>morning [6] 19/18 24/17 24/18 40/5 114/1 116/16</p> <p>most [5] 29/5 39/13 61/1 121/17 123/11</p> <p>mother [24] 4/8 4/9 11/21 12/3 38/3 39/4 39/9 41/11 57/14 57/23 66/3 66/7 66/14 67/21 90/4 90/15 91/5 91/15 94/18 132/21 132/22 133/10 133/14 133/20</p> <p>motion [1] 31/24</p> <p>move [2] 97/6 109/13</p> <p>moved [3] 54/11 61/13 94/7</p> <p>moving [2] 51/18 67/11</p> <p>Mr [60] 1/3 1/4 13/15 13/18 16/15 16/16 18/5 18/6 25/19 25/20 25/23 25/25 26/1 52/17 52/18 52/19 53/1 53/3 57/4 57/8 57/12 60/22 65/17 65/18 65/19 67/9 71/8 71/9 71/10 73/10 73/11 74/5 76/2 76/20 77/16 79/2 79/3 88/2 90/14 108/23 108/25 109/1 125/3 125/4 127/7 127/10 127/11 131/5 138/3 138/5 138/6 138/11 138/12 138/14 138/15 138/16 138/20 138/21 138/23 138/24</p> <p>Mr Beer [6] 18/5 18/6 127/10 127/11 138/6 138/24</p> <p>Mr Beggs [5] 71/8 71/9 74/5 127/7 138/15</p> <p>Mr Benjamin [1] 25/25</p> <p>Mr Carr [9] 25/19 25/23 53/1 53/3 79/2 79/3 108/25 138/11 138/20</p> <p>MR MCNAMARA [3] 73/10 77/16 138/16</p> <p>Mr Moloney [11] 1/3</p>	<p>1/4 13/15 13/18 52/17 57/12 60/22 76/2 108/23 138/3 138/21</p> <p>Mr Straw [10] 16/15 16/16 65/17 65/18 76/20 125/3 125/4 138/5 138/14 138/23</p> <p>Mr Williams [11] 25/20 26/1 52/19 57/4 57/8 65/19 71/10 88/2 90/14 109/1 131/5</p> <p>Mr Williams's [1] 67/9</p> <p>Mrs [1] 134/1</p> <p>Mrs Calocane [1] 134/1</p> <p>Ms [27] 8/12 9/17 21/14 24/3 25/1 34/6 57/5 57/6 75/22 75/25 76/13 76/18 78/23 79/5 79/7 108/24 112/15 112/18 112/19 122/3 125/5 125/9 133/22 138/4 138/8 138/13 138/22</p> <p>MS BENYOUNES [3] 9/17 24/3 138/4</p> <p>MS CARTWRIGHT [7] 57/6 76/13 76/18 112/18 122/3 138/13 138/22</p> <p>Ms Langdale [1] 8/12</p> <p>Ms Palmer [12] 34/6 75/22 75/25 78/23 79/5 79/7 108/24 112/15 112/19 125/5 125/9 133/22</p> <p>much [24] 2/2 6/21 6/22 9/15 12/15 16/12 17/17 18/4 20/11 37/24 38/19 44/6 52/13 57/4 58/8 61/11 71/6 71/13 77/14 94/7 112/15 127/6 132/16 133/22</p> <p>multi [1] 64/14</p> <p>multi-layer [1] 64/14</p> <p>mum [19] 49/13 49/20 68/12 68/21 69/14 90/24 91/11 95/10 102/9 102/17 102/20 102/24 103/4 109/19 110/3 110/7 110/10 110/20 110/24</p> <p> mumbling [1] 3/17</p> <p>must [3] 22/10 71/5 136/14</p> <p>my [85] 1/15 4/6 4/15 4/22 5/9 6/4 6/16 6/24 7/5 7/18 7/24 7/25 8/10 9/2 14/3 14/24 15/1 15/2 15/15 16/22 16/23 17/10 17/15 17/23 19/2 19/4 19/9 19/19 19/21 20/22 21/1 21/19 21/23</p>	<p>21/23 23/6 23/16 23/16 24/17 25/11 33/3 34/9 38/11 38/17 43/14 44/24 48/4 48/6 49/4 53/17 55/20 61/3 67/2 67/18 69/8 70/4 77/14 77/16 89/1 89/10 93/11 98/5 98/6 101/21 104/7 105/7 108/13 108/13 108/16 108/20 111/22 111/25 112/6 113/18 113/18 114/22 114/23 117/12 117/12 122/21 123/22 125/1 126/2 131/12 132/16 135/4</p> <p>myself [7] 21/20 33/2 108/14 108/19 113/23 115/14 129/13</p>	<p>N</p> <p>name [3] 25/24 35/7 79/5</p> <p>namely [1] 128/7</p> <p>nature [4] 9/23 10/7 44/8 106/1</p> <p>naughty [1] 60/18</p> <p>near [1] 57/15</p> <p>nearest [2] 30/2 90/12</p> <p>necessarily [7] 32/23 72/11 82/15 100/5 100/23 101/3 135/20</p> <p>necessary [2] 64/4 86/15</p> <p>need [13] 4/13 16/25 23/19 39/1 44/6 82/21 84/21 85/10 120/19 122/16 123/18 135/20 136/7</p> <p>needed [9] 10/6 13/7 44/9 60/4 96/18 100/15 100/15 107/11 115/22</p> <p>needs [5] 23/18 28/9 30/8 88/6 124/5</p> <p>neighbour [1] 47/1</p> <p>neighbour's [1] 55/1</p> <p>neighbouring [6] 27/24 92/1 94/12 94/21 101/14 106/16</p> <p>neighbours [3] 43/18 53/13 55/1</p> <p>Neither [1] 62/5</p> <p>never [9] 17/23 17/23 19/2 20/2 31/22 51/3 69/22 70/13 70/14</p> <p>new [3] 27/10 106/20 106/21</p> <p>next [17] 2/12 7/7 19/4 24/18 25/20 29/8 42/3 42/18 43/10 78/23 82/4 94/17 95/9 106/24 124/6 125/16 126/13</p> <p>NGPF000072 [2]</p>	<p>35/24 92/6</p> <p>NGPF0003440 [1] 74/10</p> <p>NHFT [1] 125/6</p> <p>NHFT0000072 [1] 81/8</p> <p>NHFT0000168 [5] 2/2 93/20 112/21 125/7 132/6</p> <p>NHFT0002579 [1] 103/13</p> <p>NHFT0003401 [2] 106/24 134/22</p> <p>NHFT0003815 [1] 106/11</p> <p>NHFT0004927 [4] 5/13 13/16 50/8 96/24</p> <p>NHS [2] 22/23 79/17</p> <p>NHS-led [1] 22/23</p> <p>NHSE0000312 [1] 28/18</p> <p>night [8] 2/25 3/7 59/4 117/4 117/14 121/18 123/9 132/18</p> <p>nine [1] 114/5</p> <p>no [117] 1/21 2/11 3/24 4/1 4/10 4/13 4/22 5/8 6/7 7/4 7/5 9/6 9/12 12/5 12/14 12/22 15/18 18/3 19/14 20/20 22/13 23/23 23/25 24/22 24/23 30/22 30/22 31/4 32/22 32/22 35/6 35/6 36/4 36/6 36/10 36/13 37/2 37/4 37/10 40/2 41/5 42/6 43/2 46/17 47/5 47/12 47/15 47/24 49/22 50/23 51/1 51/11 52/5 52/15 53/24 55/22 56/19 56/21 58/2 58/25 59/12 61/23 63/8 64/16 70/15 71/18 74/8 74/17 75/25 76/11 76/11 77/8 77/13 85/20 86/21 88/20 89/1 90/5 90/8 90/10 90/18 90/20 90/25 91/1 92/11 95/9 95/14 97/10 97/16 97/20 98/5 98/24 98/25 99/20 100/11 100/23 103/17 105/2 105/13 113/7 113/25 115/14 115/23 116/8 116/8 121/9 126/17 127/8 129/1 129/1 129/6 130/21 131/3 133/11 133/21 134/6 135/2</p> <p>nobody [1] 113/21</p> <p>NOCC [1] 76/14</p> <p>NOCC0000034 [1] 62/7</p> <p>NOCC0000044 [6]</p>
--	--	--	---	---	---

<p>N NOCC000044... [6] 33/11 40/23 52/25 54/17 65/20 78/7 NOCC000098 [2] 63/4 76/15 nodded [33] 5/5 16/4 22/2 26/5 30/17 33/23 35/22 39/20 41/20 42/10 42/12 43/20 44/16 44/18 46/19 46/25 52/22 54/9 54/13 55/2 55/4 56/9 56/12 56/25 57/22 62/1 62/13 64/13 65/8 76/5 112/11 121/23 136/3 nodding [2] 5/6 5/9 non [3] 48/4 58/18 120/14 non-contentious [2] 58/18 120/14 nor [1] 84/3 normal [2] 1/15 17/15 normally [16] 1/15 88/4 88/5 88/9 88/22 89/11 100/12 108/9 108/10 111/10 111/11 115/17 115/18 116/8 129/9 136/22 not [113] 3/6 3/21 3/21 4/14 4/15 4/16 5/10 6/1 7/21 8/14 8/17 10/10 10/21 12/22 13/10 13/21 14/1 14/6 14/16 16/19 19/13 23/22 24/7 29/16 30/22 31/15 33/2 35/17 36/6 38/9 39/6 40/6 40/25 42/20 47/9 47/13 49/11 49/12 49/16 52/3 52/19 53/9 53/22 54/8 56/13 56/18 56/19 58/19 58/22 61/11 62/2 62/11 63/21 64/9 65/6 67/16 68/16 68/24 69/21 70/5 70/6 70/6 72/11 73/18 75/9 76/8 77/2 77/18 78/9 81/3 81/6 85/1 85/5 85/8 86/8 86/21 86/24 86/24 88/20 90/5 90/6 90/6 91/9 94/9 94/11 96/21 97/10 97/13 97/18 97/19 98/5 99/9 100/5 100/11 100/23 101/2 101/3 111/18 116/16 117/19 118/11 121/7 121/20 125/19 130/15 130/19 130/20 131/1 131/13 133/15 135/12 135/25 136/21 note [13] 2/10 50/9</p>	<p>50/10 56/23 62/22 65/24 66/5 77/10 94/3 126/13 126/16 126/23 132/17 noted [2] 126/14 126/22 notes [37] 4/6 6/2 6/4 6/24 7/5 7/18 7/24 9/2 14/3 14/5 14/24 15/1 17/12 19/20 20/25 21/1 21/20 21/22 21/23 21/24 23/6 25/7 49/5 56/7 61/3 62/5 62/10 75/6 111/8 114/16 122/16 126/11 126/20 127/2 127/4 135/16 136/1 nothing [6] 10/4 21/1 47/9 48/21 70/6 135/23 notice [1] 77/21 notified [1] 129/7 Nottingham [18] 6/20 26/14 26/17 38/12 39/12 39/19 49/10 49/13 49/21 62/6 67/18 68/3 77/12 102/21 103/4 124/12 124/21 124/23 Nottinghamshire [1] 79/17 Notts [1] 30/25 November [2] 26/4 79/8 November 2025 [1] 26/4 now [36] 10/18 11/8 18/13 23/5 23/23 24/1 24/24 25/14 30/7 37/11 38/1 46/6 59/9 61/20 68/5 73/25 81/11 92/13 94/15 96/21 98/1 98/14 99/17 103/8 104/16 106/10 107/16 108/1 111/17 117/23 118/9 119/13 125/7 126/21 129/23 131/1 nowhere [1] 23/6 number [7] 12/8 72/16 104/18 105/12 105/22 106/9 127/12 number 11 [1] 12/8 number 4 [1] 105/12 Number 6 [1] 105/22 numbering [1] 76/16 numerous [1] 80/22 nurse [9] 30/16 32/7 33/3 51/9 51/14 79/16 79/21 117/21 127/14</p>	<p>122/9 observations [1] 65/10 observing [1] 95/24 obtained [1] 94/20 obvious [2] 72/3 135/23 obviously [10] 7/21 61/8 67/1 76/6 95/14 100/19 108/7 109/23 123/16 129/7 occasion [5] 74/19 87/23 89/22 129/2 133/6 occasions [2] 83/19 87/8 occupant [1] 99/13 occupants [2] 12/17 57/25 occupations [1] 127/17 occupied [1] 36/15 occur [1] 87/3 occurred [6] 5/20 36/14 48/18 64/15 101/24 119/9 October [1] 94/6 off [3] 2/25 129/24 130/6 offending [1] 64/15 offer [4] 51/15 86/5 128/9 131/18 offered [1] 128/4 office [6] 92/2 100/14 108/13 113/18 113/22 122/20 officer [16] 11/13 12/7 12/11 20/1 36/22 37/6 72/11 72/16 72/17 72/23 74/6 88/18 92/15 92/21 93/14 105/10 officers [10] 19/1 19/5 19/8 19/13 19/15 19/21 19/24 19/25 74/4 88/23 often [2] 20/5 102/25 Oh [1] 8/6 ok [1] 66/7 okay [21] 5/2 16/22 17/12 20/21 25/9 34/15 56/15 65/22 67/7 67/13 72/18 74/12 110/2 110/7 110/17 110/20 111/20 115/16 116/14 127/6 129/17 Olanzapine [2] 5/4 42/22 omplaining [1] 3/16 on [181] on on [1] 134/23 once [9] 2/24 28/7 47/25 100/21 103/1 123/5 123/9 134/25 137/1</p>	<p>one [37] 4/8 5/10 9/19 12/1 13/14 15/7 18/7 24/2 24/25 28/24 29/19 31/7 32/7 44/24 45/4 49/2 61/20 68/10 68/11 71/10 72/24 78/3 81/3 96/23 101/1 104/1 104/2 108/24 113/7 113/25 114/1 115/15 125/5 125/13 128/7 129/13 131/1 only [13] 2/24 4/17 15/15 20/24 21/1 24/7 38/10 39/1 49/1 67/17 90/23 99/4 108/24 onto [1] 122/16 open [3] 13/20 14/13 137/1 opinion [2] 66/11 86/22 opportunity [5] 22/8 22/10 77/20 112/3 121/12 option [11] 6/6 6/25 7/15 14/2 69/1 85/13 85/24 86/16 86/24 102/23 103/6 options [6] 13/19 14/1 14/12 49/2 50/6 82/1 or [113] 4/10 5/8 7/4 8/1 8/17 9/1 12/19 13/10 14/7 14/7 15/18 15/19 16/20 16/24 17/11 17/13 17/20 19/25 20/1 23/4 23/8 23/22 25/7 27/7 29/16 29/24 32/4 34/11 35/9 37/13 40/10 40/13 41/5 41/25 43/12 47/7 48/14 49/11 49/12 50/6 51/14 53/8 54/8 56/17 60/2 63/24 64/20 66/21 67/3 67/5 68/5 68/16 70/10 74/3 75/3 76/23 76/24 76/25 77/2 77/10 77/18 80/17 81/4 82/23 83/20 84/21 85/1 85/4 85/18 85/19 86/24 86/25 87/3 88/12 88/25 89/9 90/7 91/1 91/4 95/22 95/23 97/10 97/13 97/18 97/18 98/2 98/14 98/15 99/12 100/19 102/6 103/15 103/21 105/10 106/3 106/18 109/1 115/24 118/6 118/8 119/7 119/14 119/14 122/3 123/16 126/19 128/17 130/19 131/13 132/13 133/2 134/10 136/6 oral [1] 48/1 order [8] 1/9 2/18</p>	<p>30/7 56/23 84/19 86/5 92/2 117/9 organic [1] 2/18 other [27] 13/5 17/25 18/16 24/2 40/12 44/11 51/12 55/15 55/16 55/22 58/2 62/25 64/25 65/3 72/24 74/14 78/13 82/1 97/7 108/21 112/4 122/1 122/10 124/19 124/23 126/3 129/20 others [22] 11/5 12/24 15/10 40/10 40/19 44/12 46/7 46/13 46/15 52/16 53/2 53/14 54/25 56/14 58/19 78/10 83/12 91/1 98/15 106/12 106/18 128/17 our [10] 36/17 41/9 58/15 60/7 61/18 67/20 67/23 74/21 95/7 111/10 ourselves [1] 84/15 out [49] 1/7 2/18 8/19 19/22 26/9 28/13 28/23 33/22 42/14 43/13 49/9 74/2 74/19 74/22 79/13 81/19 82/2 82/14 82/15 83/7 83/17 87/9 91/12 98/4 99/22 100/6 103/16 104/8 105/4 106/15 108/14 110/6 112/21 113/6 113/8 113/10 113/19 113/22 116/15 117/16 118/20 120/5 123/20 128/19 128/25 129/3 129/13 134/21 135/12 outcome [9] 37/21 42/19 45/15 68/18 68/24 93/17 94/25 130/23 133/18 Outreach [1] 70/23 outside [2] 11/17 83/3 over [12] 3/18 7/10 8/4 25/15 29/8 50/16 64/17 64/19 97/4 103/20 116/18 136/25 overactive [2] 103/21 104/2 overriding [1] 83/22 overspeaking [11] 4/20 46/4 52/8 56/5 64/7 71/24 74/25 104/11 111/24 119/19 130/17 overtaken [1] 107/23 own [8] 10/10 29/11 32/10 49/5 60/5 87/17 111/22 112/6</p>
--	--	---	---	--

<p>P</p> <p>package [1] 118/13</p> <p>page [64] 2/3 3/18 4/12 5/18 11/12 11/16 13/16 28/18 28/19 29/8 29/24 33/11 41/3 41/12 42/18 42/18 43/5 43/10 43/10 43/11 44/3 45/19 45/20 50/12 53/11 54/17 54/18 54/20 60/11 62/7 65/21 66/5 66/17 67/10 67/14 71/12 78/7 81/11 81/12 81/22 82/4 82/4 82/19 83/5 83/10 86/10 93/21 93/22 93/24 93/25 96/25 103/14 103/20 103/20 106/11 106/13 112/22 112/24 114/4 125/7 125/9 132/6 132/11 138/2</p> <p>page 1 [1] 112/22</p> <p>page 121 [1] 28/18</p> <p>page 124 [1] 29/24</p> <p>page 129 [1] 125/7</p> <p>page 14 [1] 60/11</p> <p>page 17 [2] 93/21 93/24</p> <p>page 19 [1] 53/11</p> <p>page 2 [6] 5/18 13/16 50/12 96/25 103/20 132/6</p> <p>page 21 [1] 67/10</p> <p>page 3 [5] 41/12 65/21 71/12 81/22 114/4</p> <p>page 4 [4] 11/12 11/16 42/18 82/4</p> <p>page 5 [4] 43/10 54/17 54/18 78/7</p> <p>page 7 [1] 83/5</p> <p>page 8 [1] 86/10</p> <p>pages [1] 11/10</p> <p>pages 4 [1] 11/10</p> <p>pain [3] 3/12 3/16 132/23</p> <p>pains [1] 5/3</p> <p>Palmer [23] 7/12 8/9 30/14 32/17 34/6 51/6 51/9 64/5 75/22 75/25 78/23 79/1 79/5 79/6 79/7 97/22 108/24 112/15 112/19 125/5 125/9 133/22 138/19</p> <p>paper [1] 121/8</p> <p>paperwork [1] 100/15</p> <p>paragraph [40] 5/19 7/7 11/16 11/20 12/6 25/2 25/5 28/2 28/19 29/14 29/24 33/9 34/21 35/13 38/6 38/8 40/8 41/13 46/11</p>	<p>50/12 53/10 53/12 53/13 60/10 66/17 67/14 70/21 71/11 71/20 80/11 81/23 82/4 83/21 86/10 87/25 96/22 97/1 98/9 125/16 126/13</p> <p>Paragraph 1.1 [1] 81/23</p> <p>paragraph 118 [2] 25/2 25/5</p> <p>paragraph 12 [1] 71/11</p> <p>paragraph 14 [2] 28/2 80/11</p> <p>paragraph 14.49 [1] 28/19</p> <p>paragraph 20 [2] 11/16 71/20</p> <p>paragraph 21 [1] 12/6</p> <p>paragraph 22 [1] 87/25</p> <p>Paragraph 28 [1] 86/10</p> <p>paragraph 3.1 [1] 82/4</p> <p>paragraph 30 [1] 40/8</p> <p>paragraph 34 [1] 96/22</p> <p>paragraph 36 [1] 98/9</p> <p>paragraph 38 [1] 33/9</p> <p>paragraph 42 [1] 34/21</p> <p>paragraph 43 [1] 35/13</p> <p>paragraph 48 [1] 60/10</p> <p>paragraph 55 [1] 46/11</p> <p>paragraph 58 [3] 53/10 53/12 53/13</p> <p>paragraph 64 [2] 38/6 67/14</p> <p>paragraph 7 [1] 83/21</p> <p>paragraph 80 [1] 70/21</p> <p>paragraphs [1] 65/23</p> <p>paranoia [1] 17/19</p> <p>paranoid [2] 17/25 61/7</p> <p>parcel [1] 75/16</p> <p>part [22] 13/4 13/17 14/21 18/12 30/20 32/4 32/18 32/20 34/17 38/1 52/21 62/17 64/5 68/22 75/16 90/11 96/16 97/21 102/1 110/25 113/13 132/8</p> <p>particular [5] 87/1 111/8 127/18 128/5</p>	<p>135/19</p> <p>particularly [3] 11/3 62/2 71/21</p> <p>partly [2] 43/6 88/20</p> <p>parts [2] 14/23 109/17</p> <p>pass [1] 76/19</p> <p>passed [2] 4/23 75/4</p> <p>past [8] 3/8 3/11 3/19 3/21 4/7 4/9 34/4 43/3</p> <p>patient [30] 5/23 10/11 15/11 15/21 16/25 23/19 28/25 30/4 31/21 34/25 61/16 63/13 65/10 80/20 82/9 82/10 82/11 82/21 83/11 84/19 84/23 85/10 87/13 94/1 97/19 106/20 106/22 116/11 118/9 128/9</p> <p>patient's [2] 107/7 135/16</p> <p>patients [4] 10/25 16/24 17/16 19/24</p> <p>patients' [1] 116/21</p> <p>pattern [2] 8/4 105/21</p> <p>patterns [2] 8/4 52/13</p> <p>pause [2] 50/18 118/9</p> <p>pausing [2] 11/25 60/21</p> <p>peacefully [1] 59/4</p> <p>pending [1] 76/25</p> <p>penultimate [1] 41/13</p> <p>people [27] 15/19 17/5 23/9 23/11 27/18 27/20 40/12 44/11 55/16 55/17 55/22 58/3 71/3 78/13 82/14 82/15 84/4 94/5 94/8 94/13 98/21 100/23 107/6 115/6 122/10 129/2 132/22</p> <p>per [2] 3/2 32/24</p> <p>per se [1] 32/24</p> <p>perceived [1] 110/24</p> <p>perhaps [2] 53/15 78/5</p> <p>period [6] 47/16 52/10 81/16 82/24 100/19 120/10</p> <p>persistent [1] 95/15</p> <p>person [17] 1/10 21/7 32/14 40/11 56/3 70/5 70/5 80/17 84/14 84/16 89/17 99/10 117/16 120/23 128/5 133/9 133/13</p> <p>person's [1] 40/14</p> <p>personal [1] 122/9</p> <p>personally [3] 122/8 122/11 135/14</p>	<p>persons [1] 13/5</p> <p>perspective [4] 18/22 59/16 59/25 111/13</p> <p>persuade [5] 7/12 8/9 51/6 97/22 98/5</p> <p>persuaded [1] 98/3</p> <p>pertaining [2] 98/13 98/14</p> <p>phone [3] 32/11 90/19 117/6</p> <p>phoned [1] 75/11</p> <p>phones [1] 115/4</p> <p>photo [1] 104/25</p> <p>photograph [4] 92/6 104/5 130/2 130/7</p> <p>photographs [1] 42/9</p> <p>physical [4] 13/7 41/5 58/19 74/15</p> <p>physically [5] 55/16 58/6 114/11 116/20 120/1</p> <p>pick [1] 5/7</p> <p>picked [1] 76/17</p> <p>picking [1] 57/11</p> <p>picture [6] 17/1 17/8 37/12 72/20 82/23 130/10</p> <p>PICU [1] 124/23</p> <p>piece [1] 121/8</p> <p>pieces [2] 130/22 131/8</p> <p>place [16] 23/4 31/23 33/1 48/16 59/22 63/7 63/24 64/3 68/6 87/24 101/7 101/19 101/24 103/2 136/16 136/24</p> <p>placed [1] 19/24</p> <p>places [1] 59/13</p> <p>plainly [2] 117/1 117/24</p> <p>plan [24] 7/16 10/23 14/6 14/7 54/1 63/15 63/25 64/3 64/6 64/16 65/2 68/22 100/3 100/5 112/21 112/25 113/18 115/5 115/11 115/14 116/2 116/18 129/10 129/11</p> <p>planned [1] 129/10</p> <p>play [2] 8/2 86/12</p> <p>played [1] 122/1</p> <p>please [50] 3/4 5/11 5/18 7/2 9/20 9/24 11/12 13/15 13/16 16/17 18/7 21/25 25/24 28/18 28/18 29/8 29/23 30/6 40/23 41/12 50/8 50/12 54/16 54/18 54/19 60/10 65/20 67/8 67/8 70/20 71/11 73/11 74/9 75/12 79/5 81/8 81/22 87/25 93/20 93/21 96/25 105/12 108/24 112/20 112/22</p>	<p>112/24 125/8 132/6 132/6 132/15</p> <p>please: [1] 31/8</p> <p>please: it's [1] 31/8</p> <p>pleased [1] 69/9</p> <p>plus [1] 30/10</p> <p>pm [7] 1/2 25/16 25/18 78/19 78/22 112/24 137/17</p> <p>point [38] 1/6 4/16 7/6 8/10 14/15 15/7 29/4 29/9 31/13 34/22 38/20 41/9 47/21 51/18 52/3 63/22 64/8 65/1 66/7 69/5 69/13 78/11 81/24 82/19 83/1 87/12 90/6 91/2 91/9 91/19 99/24 102/10 104/8 104/13 110/12 115/21 117/11 137/3</p> <p>points [1] 29/25</p> <p>police [41] 1/8 12/18 18/25 19/8 19/13 19/15 35/3 35/10 35/12 35/14 37/6 39/23 53/22 60/1 68/15 69/2 69/9 69/12 71/17 71/20 71/23 72/1 72/10 72/12 74/4 75/17 76/24 76/24 88/18 89/9 89/11 102/25 107/24 108/9 115/22 121/13 129/18 130/19 133/9 133/13 133/19</p> <p>police's [1] 18/22</p> <p>policies [1] 31/7</p> <p>policy [3] 81/8 81/19 83/6</p> <p>posed [1] 9/4</p> <p>posing [1] 44/11</p> <p>position [5] 98/1 112/1 120/25 122/22 135/4</p> <p>possession [1] 54/1</p> <p>possibilities [1] 68/10</p> <p>possibility [2] 68/17 69/17</p> <p>possible [6] 68/16 69/7 69/10 72/19 128/12 128/13</p> <p>possibly [5] 69/7 93/19 105/11 105/11 130/25</p> <p>post [2] 81/16 93/23</p> <p>post-dates [2] 81/16 93/23</p> <p>potential [2] 45/14 56/4</p> <p>potentially [6] 41/24 75/19 78/12 81/15 81/16 95/4</p> <p>power [4] 20/4 133/8 133/12 133/16</p>
--	---	--	---	--

<p>P</p> <p>powers [2] 85/1 87/14</p> <p>practical [2] 68/14 129/4</p> <p>practically [2] 64/21 116/2</p> <p>practice [12] 1/15 16/22 16/23 17/15 19/21 23/17 28/13 28/13 38/2 38/24 80/19 81/5</p> <p>practising [2] 27/2 27/7</p> <p>practitioner [1] 76/1</p> <p>pre [1] 129/10</p> <p>pre-planned [1] 129/10</p> <p>predict [4] 10/19 11/1 11/2 48/24</p> <p>prefer [1] 84/21</p> <p>premises [1] 117/2</p> <p>prepare [1] 21/20</p> <p>prepared [3] 26/1 74/11 79/7</p> <p>preparing [3] 16/9 35/19 36/18</p> <p>prescribed [2] 48/7 76/6</p> <p>prescribing [1] 5/4</p> <p>Prescription [1] 42/22</p> <p>present [6] 38/25 39/7 46/18 90/17 103/23 119/24</p> <p>presentation [6] 2/19 6/10 10/3 10/3 43/1 89/18</p> <p>presentations [1] 27/16</p> <p>presented [1] 47/10</p> <p>presenting [1] 60/12</p> <p>presents [1] 10/12</p> <p>pressure [4] 89/2 89/4 89/23 129/4</p> <p>prevent [1] 32/15</p> <p>prevented [1] 31/22</p> <p>preventing [2] 11/18 11/22</p> <p>previous [8] 4/4 10/2 34/3 34/9 41/5 43/5 44/3 93/22</p> <p>principle [3] 29/21 61/22 61/24</p> <p>principles [2] 29/19 83/7</p> <p>prior [11] 2/13 27/13 27/23 32/4 32/6 73/16 80/23 87/3 99/25 103/8 104/16</p> <p>Priory [2] 124/17 124/17</p> <p>private [2] 124/24 127/22</p> <p>privy [1] 123/14</p>	<p>probably [5] 93/12 93/19 94/6 106/10 130/24</p> <p>probe [1] 72/15</p> <p>problem [10] 8/21 18/3 19/17 31/15 103/17 103/18 103/22 105/13 105/14 105/24</p> <p>problems [6] 3/20 53/19 103/15 105/12 105/22 125/20</p> <p>process [12] 8/17 15/3 16/5 16/6 16/7 21/3 24/4 37/25 73/18 77/18 81/10 111/10</p> <p>processed [1] 75/19</p> <p>processes [1] 121/21</p> <p>professional [9] 16/22 19/2 23/16 26/9 26/23 27/4 28/4 28/15 118/2</p> <p>professionals [4] 7/9 17/24 50/15 97/3</p> <p>profile [1] 10/20</p> <p>progress [3] 21/1 21/23 21/24</p> <p>progressed [1] 34/5</p> <p>prolonged [1] 76/23</p> <p>properly [1] 10/19</p> <p>properties [4] 27/24 57/25 60/3 94/21</p> <p>property [35] 12/13 35/23 36/11 36/15 36/23 36/24 47/3 47/7 57/15 57/24 58/24 60/1 92/1 92/10 92/18 92/22 93/6 95/9 98/20 98/23 99/2 99/4 99/6 99/9 99/10 99/12 99/12 100/4 101/14 108/5 108/8 113/12 117/6 130/16 131/25</p> <p>prospects [1] 73/1</p> <p>protection [2] 11/6 13/5</p> <p>provide [14] 7/13 14/8 29/15 51/7 67/22 69/5 82/1 85/7 97/23 100/2 103/9 107/22 124/17 128/7</p> <p>provided [2] 47/13 85/6</p> <p>providers [1] 127/22</p> <p>providing [1] 29/5</p> <p>provision [3] 64/4 73/16 124/24</p> <p>psychiatric [3] 4/10 32/7 41/3</p> <p>psychiatrists [1] 96/23</p> <p>psychological [5] 13/6 58/20 59/2 59/6 60/2</p> <p>psychosis [10] 6/10 10/9 17/14 17/18 27/15 27/21 58/9</p>	<p>95/22 102/12 105/15</p> <p>psychotic [10] 10/1 17/16 41/14 55/8 57/21 59/5 64/9 76/6 95/20 118/16</p> <p>public [12] 11/6 11/18 19/13 36/25 58/11 59/2 59/4 59/7 60/6 92/19 118/20 120/5</p> <p>pull [1] 12/9</p> <p>purely [1] 127/4</p> <p>purpose [3] 28/3 38/21 107/5</p> <p>purposes [6] 18/15 35/19 36/18 39/14 92/4 92/13</p> <p>pursued [1] 118/11</p> <p>push [3] 12/8 37/6 93/2</p> <p>pushed [1] 123/16</p> <p>put [37] 15/2 15/4 31/8 35/20 37/7 37/9 37/19 44/12 45/9 50/8 64/3 64/8 67/9 68/5 74/21 92/5 93/2 93/3 93/7 96/15 96/24 105/11 105/19 110/8 111/22 118/5 118/7 122/13 122/20 126/5 131/14 134/22 134/23 135/3 135/5 135/6 135/20</p> <p>putting [2] 122/15 123/19</p>	<p>5/13 5/17 9/4 9/5 9/18 13/23 18/8 20/16 20/23 22/3 22/21 25/3 25/12 52/15 57/10 57/11 66/6 73/11 73/12 74/5 74/13 75/15 75/21 76/4 76/13 76/20 77/15 77/17 89/13 93/12 96/2 102/3 105/3 108/20 108/21 125/1 127/13 133/25</p> <p>quick [1] 16/17</p> <p>quickly [1] 48/25</p> <p>quiet [2] 60/19 61/11</p> <p>quite [11] 6/24 8/21 17/2 20/5 85/10 85/11 85/11 91/20 95/1 105/16 110/6</p> <p>quote [3] 96/22 97/21 100/18</p> <p>quoted [1] 76/15</p>	<p>110/11</p> <p>realistically [1] 106/3</p> <p>reality [3] 55/5 55/11 86/18</p> <p>really [8] 2/4 4/15 8/16 20/8 57/24 70/7 82/13 111/4</p> <p>rear [1] 12/10</p> <p>rearrested [2] 114/16 136/23</p> <p>reason [14] 10/6 27/21 41/17 42/24 46/20 62/21 63/9 72/3 75/23 106/17 109/10 128/7 128/11 133/2</p> <p>reasonable [4] 7/14 51/7 57/19 97/23</p> <p>reasons [5] 8/18 62/2 96/19 128/22 131/24</p> <p>reassessed [1] 116/13</p> <p>reassurance [2] 85/13 86/6</p> <p>reassured [1] 102/9</p> <p>recall [40] 6/8 22/13 27/12 27/17 34/11 35/6 35/7 38/9 39/25 40/2 49/4 49/10 50/24 51/1 51/11 56/17 60/17 61/4 62/19 62/19 63/5 67/16 77/2 77/10 88/2 88/4 90/21 91/5 92/21 92/23 93/4 97/12 97/14 97/15 109/25 114/18 114/19 130/17 134/6 134/13</p> <p>recalls [1] 7/11</p> <p>received [5] 20/16 21/11 25/12 28/7 48/9</p> <p>recent [1] 125/13</p> <p>recognise [1] 45/11</p> <p>recollect [2] 55/25 56/5</p> <p>recollection [5] 22/14 42/7 53/9 60/12 60/16</p> <p>recommendations [4] 28/8 28/12 30/9 70/21</p> <p>record [13] 1/9 1/19 1/23 2/3 3/5 3/9 4/12 5/7 5/14 59/13 61/25 113/4 132/25</p> <p>recorded [7] 13/18 53/2 53/20 56/22 56/23 62/11 111/7</p> <p>recording [1] 41/9</p> <p>records [12] 1/14 3/2 17/23 35/10 35/12 62/25 89/9 107/8 112/20 121/13 122/23 124/7</p> <p>redo [1] 104/9</p> <p>reducing [2] 49/23 103/5</p> <p>refer [2] 17/12</p>
R				
	<p>race [13] 16/18 16/19 50/22 50/22 50/24 69/20 69/21 70/6 70/13 97/9 97/9 97/13 97/17</p> <p>raise [2] 57/24 115/2</p> <p>raised [4] 12/17 22/18 89/19 117/24</p> <p>raises [1] 59/5</p> <p>range [2] 57/19 127/17</p> <p>rank [1] 103/17</p> <p>ranked [1] 103/20</p> <p>ranking [1] 103/15</p> <p>raped [6] 57/14 57/23 66/3 66/15 94/18 132/23</p> <p>rarely [1] 19/21</p> <p>rated [2] 104/20 104/23</p> <p>rather [4] 44/1 85/14 126/11 137/4</p> <p>RATIFICATION: [1] 81/13</p> <p>RATIFICATION: JUNE 2020 [1] 81/13</p> <p>rating [2] 103/14 104/8</p> <p>ratings [1] 104/10</p> <p>rationale [1] 111/25</p> <p>reach [3] 13/20 14/13 77/11</p> <p>reacting [1] 95/16</p> <p>read [5] 22/11 55/5 61/3 83/8 106/25</p> <p>reading [3] 22/8 125/25 127/3</p> <p>reads [1] 14/15</p> <p>ready [1] 64/16</p> <p>real [3] 7/24 8/3 58/10</p> <p>realised [2] 94/9</p>	<p>Q</p> <p>qualifications [1] 79/14</p> <p>qualified [3] 26/25 27/7 79/19</p> <p>question [19] 3/16 4/20 8/23 9/19 10/14 19/4 24/25 35/23 36/11 56/6 56/19 69/20 78/8 101/9 101/21 104/19 105/7 122/3 134/6</p> <p>questioned [42] 1/4 9/17 16/16 18/6 20/13 25/1 25/23 52/18 57/6 65/18 71/9 73/10 78/2 79/2 95/8 108/23 112/18 125/4 127/11 132/12 132/18 133/1 133/24 138/3 138/4 138/5 138/6 138/7 138/8 138/11 138/12 138/13 138/14 138/15 138/16 138/17 138/20 138/21 138/22 138/23 138/24 138/25</p> <p>questioning [6] 3/22 56/3 58/16 72/9 132/21 133/4</p> <p>questions [39] 4/3</p>		

<p>R</p> <p>refer... [1] 108/25</p> <p>reference [9] 4/12 10/11 17/5 33/10 45/19 61/23 63/3 105/14 135/25</p> <p>referenced [3] 59/9 59/11 61/21</p> <p>referencing [1] 60/24</p> <p>referral [11] 2/6 2/13 2/13 32/1 33/16 61/24 73/19 73/20 73/22 74/18 74/21</p> <p>referrals [1] 31/1</p> <p>referred [4] 5/12 31/7 33/18 65/23</p> <p>referring [3] 52/4 61/1 61/2</p> <p>refers [1] 135/7</p> <p>refine [1] 65/1</p> <p>reflect [7] 14/5 14/9 15/5 23/1 23/14 123/11 124/7</p> <p>reflected [3] 13/19 14/12 22/19</p> <p>reflecting [8] 6/23 7/23 13/24 14/3 14/21 14/24 23/6 43/22</p> <p>reflection [3] 9/12 14/16 53/15</p> <p>refuse [1] 85/19</p> <p>regard [1] 131/2</p> <p>regarding [1] 21/10</p> <p>reggraded [1] 123/5</p> <p>Regulation [1] 120/20</p> <p>Regulation 20 [1] 120/20</p> <p>regulatory [1] 16/6</p> <p>relates [1] 10/16</p> <p>relation [6] 4/16 15/7 78/3 78/5 80/16 134/19</p> <p>relative [2] 30/2 90/12</p> <p>relatives [1] 38/25</p> <p>release [16] 46/10 47/17 48/9 48/15 49/13 49/18 68/23 69/13 99/18 99/24 100/20 101/6 101/10 101/18 102/16 108/2</p> <p>released [15] 12/20 47/8 53/25 64/1 99/20 99/22 101/22 108/4 108/6 114/20 115/11 120/10 129/7 129/15 134/11</p> <p>relevant [6] 2/1 12/24 93/8 93/9 103/1 135/5</p> <p>reliant [1] 18/21</p> <p>relieved [1] 110/20</p> <p>rely [2] 35/8 35/11</p> <p>remain [3] 69/2 102/12 137/1</p>	<p>remainder [1] 68/1</p> <p>remained [1] 101/16</p> <p>remanded [1] 76/25</p> <p>remember [34] 5/15 8/25 18/12 20/20 20/24 23/23 24/11 27/25 35/4 38/17 39/5 40/3 50/1 50/5 50/21 51/2 51/9 61/3 63/8 64/7 65/5 65/5 67/1 67/2 69/25 70/2 75/6 75/14 90/23 91/4 97/8 109/6 111/7 134/10</p> <p>repeat [5] 24/4 48/21 71/19 101/9 102/8</p> <p>repeating [1] 95/4</p> <p>replied [1] 95/14</p> <p>report [17] 15/10 15/11 15/20 15/23 33/10 33/11 38/18 40/22 48/6 48/12 55/20 59/9 65/21 119/16 121/1 123/8 136/9</p> <p>reported [1] 126/19</p> <p>reporting [7] 15/8 105/25 119/11 120/17 121/10 134/19 137/4</p> <p>reports [2] 23/10 67/2</p> <p>represent [1] 65/19</p> <p>representation [3] 7/10 50/16 97/4</p> <p>request [2] 32/6 32/8</p> <p>requested [1] 21/19</p> <p>require [2] 70/23 72/8</p> <p>required [8] 28/23 31/5 36/7 81/3 82/17 85/2 85/23 87/13</p> <p>requirement [1] 30/1</p> <p>requirements [1] 28/14</p> <p>requires [3] 80/17 108/11 119/11</p> <p>requiring [1] 105/13</p> <p>research [8] 7/10 8/19 8/20 8/24 9/10 50/16 97/3 97/15</p> <p>Resolution [1] 34/1</p> <p>resolvable [1] 105/20</p> <p>resort [1] 82/1</p> <p>resources [3] 70/23 70/24 129/5</p> <p>respect [9] 9/21 9/23 14/1 16/9 34/20 43/25 63/17 64/10 107/11</p> <p>respond [1] 101/4</p> <p>responded [1] 52/7</p> <p>response [4] 47/25 67/4 100/22 101/1</p> <p>responses [1] 25/7</p> <p>responsibility [4] 59/17 119/21 120/16 121/3</p> <p>responsible [2]</p>	<p>11/23 82/9</p> <p>responsive [1] 129/12</p> <p>rest [4] 38/16 67/24 108/16 131/14</p> <p>restriction [1] 29/19</p> <p>restrictive [7] 6/6 6/25 61/21 61/24 80/19 85/24 86/16</p> <p>result [2] 17/19 22/21</p> <p>resulted [1] 77/5</p> <p>return [4] 49/20 57/1 102/20 103/3</p> <p>returned [1] 122/20</p> <p>returning [2] 48/15 101/10</p> <p>revealed [2] 64/10 132/21</p> <p>review [4] 93/21 94/4 132/8 135/16</p> <p>reviewed [1] 5/23</p> <p>RG [4] 7/9 13/19 50/13 97/2</p> <p>right [52] 2/17 7/7 8/7 8/16 9/7 9/14 9/14 15/21 18/4 18/23 20/10 21/5 21/7 22/6 24/1 24/23 26/10 33/15 43/21 44/19 46/14 52/6 54/6 55/25 59/24 69/23 70/8 70/18 74/21 75/5 78/1 78/12 78/17 80/9 81/6 82/3 83/4 83/8 83/10 85/21 96/17 107/25 112/4 112/14 114/25 116/25 126/11 126/12 127/9 130/4 134/19 137/14</p> <p>RiO [9] 2/3 2/4 4/12 5/21 7/18 9/2 21/22 31/15 124/7</p> <p>rise [2] 24/24 25/14</p> <p>risk [89] 1/18 6/12 10/16 10/19 10/19 11/5 12/24 13/8 13/9 16/25 36/17 40/8 40/10 40/12 40/19 41/15 41/23 43/6 43/11 43/11 43/14 43/15 43/25 44/4 44/6 44/8 44/11 44/12 44/20 45/7 45/15 46/6 46/6 46/7 46/15 46/18 46/23 48/11 48/20 48/22 48/23 49/23 52/20 52/25 53/14 54/14 54/16 54/17 54/18 54/20 54/25 55/12 56/13 57/25 58/11 58/18 59/1 59/6 59/12 78/3 78/6 78/10 83/11 83/12 83/16 91/1 93/8 94/23 95/4 98/15 99/15 99/18 99/24 101/2 101/7</p>	<p>101/16 103/5 103/12 106/11 106/12 106/17 106/18 106/22 107/4 107/12 107/17 109/2 111/1 111/5</p> <p>risk factors [1] 41/23</p> <p>risks [14] 41/24 43/3 46/9 46/12 46/15 47/10 82/23 88/10 95/3 98/13 98/14 99/13 100/18 107/6</p> <p>robust [1] 121/18</p> <p>role [33] 1/7 27/2 27/8 27/10 28/3 28/20 29/15 29/21 30/23 30/24 31/11 32/15 34/18 65/13 80/8 80/11 80/12 81/2 81/3 81/7 82/13 84/6 84/7 84/10 86/12 86/21 90/11 98/3 98/5 98/6 111/14 122/8 127/13</p> <p>room [4] 50/19 108/12 128/14 128/22</p> <p>Roughly [1] 27/14</p> <p>round [2] 23/9 54/2</p> <p>rule [2] 2/18 77/18</p> <p>ruled [1] 82/2</p> <p>running [1] 89/23</p>	<p>9/13 11/1 12/6 23/3 23/5 27/14 31/4 37/23 37/23 38/8 40/9 41/23 46/14 51/5 52/6 52/7 56/17 61/11 62/14 62/22 63/13 67/14 67/23 68/21 69/5 70/2 71/23 75/8 82/15 93/19 98/9 99/6 99/9 100/2 101/3 101/25 102/9 106/10 110/22 111/21 111/23 112/7 119/6 122/5 124/4 125/12 126/18 127/8 129/12 133/18 134/16 134/21 136/22</p> <p>saying [13] 9/1 9/7 9/9 9/12 22/12 34/3 36/9 69/12 105/16 125/22 126/21 131/7 132/9</p> <p>says [13] 2/12 6/13 7/8 31/13 55/20 66/18 81/12 82/20 83/21 97/21 109/21 132/11 132/17</p> <p>scared [3] 17/17 61/4 61/6</p> <p>scaring [1] 61/8</p> <p>scenarios [1] 8/2</p> <p>scope [1] 82/22</p> <p>screaming [6] 66/1 94/18 106/1 132/20 132/21 132/22</p> <p>screen [9] 28/17 35/20 50/8 65/20 81/8 92/5 93/20 96/24 125/6</p> <p>scroll [2] 132/8 132/15</p> <p>se [1] 32/24</p> <p>second [15] 3/18 13/4 24/6 24/9 40/18 68/17 71/12 82/5 97/21 127/18 131/22 135/1 136/11 136/16 136/19</p> <p>Secondly [1] 129/17</p> <p>section [19] 5/24 6/14 8/8 8/18 9/22 13/5 14/6 16/21 29/24 55/13 59/23 70/10 70/10 84/4 97/7 106/25 127/18 127/18 128/2</p> <p>Section 12 [5] 14/6 59/23 127/18 127/18 128/2</p> <p>section 14.64 [1] 29/24</p> <p>section 2 [4] 5/24 9/22 13/5 55/13</p> <p>Section 3 [1] 70/10</p> <p>Sections [1] 52/23</p> <p>secure [1] 31/20</p> <p>securing [1] 31/22</p>
--	--	--	--	---

<p>S</p> <p>sedative [1] 100/24</p> <p>see [54] 2/9 3/11 3/12 3/14 3/18 5/6 5/19 6/4 20/21 20/23 23/8 23/9 24/20 25/5 27/17 27/20 28/19 32/14 33/15 34/11 35/24 41/13 52/13 53/8 53/13 54/19 59/12 62/10 64/8 66/9 71/15 72/12 72/17 72/25 81/11 83/10 86/21 87/8 89/7 91/3 91/6 92/7 93/22 96/19 103/14 107/2 112/24 113/8 114/16 115/5 117/12 125/9 132/7 132/17</p> <p>seeing [4] 60/23 75/6 100/20 130/8</p> <p>seek [3] 35/1 43/8 109/12</p> <p>seeking [1] 131/25</p> <p>seemed [1] 102/9</p> <p>seems [1] 2/8</p> <p>seen [22] 2/14 3/23 17/16 17/23 17/23 22/5 35/20 36/19 39/16 39/25 47/1 47/17 50/10 74/3 82/10 92/5 92/13 98/18 104/5 104/25 113/4 136/1</p> <p>self [3] 43/15 46/6 54/20</p> <p>send [2] 6/25 84/4</p> <p>sending [1] 68/20</p> <p>sense [9] 89/2 89/4 91/5 91/8 91/14 110/8 110/14 111/19 114/23</p> <p>sent [6] 2/14 20/18 20/23 25/3 25/8 51/20</p> <p>sentence [3] 29/14 42/3 82/5</p> <p>sentences [1] 61/12</p> <p>separate [1] 135/21</p> <p>sergeant [11] 1/15 1/20 18/21 20/8 35/7 42/4 43/9 55/19 55/21 59/11 113/5</p> <p>serious [3] 22/25 119/14 123/11</p> <p>service [2] 3/9 84/17</p> <p>services [10] 10/3 43/1 70/23 70/25 85/6 85/7 86/14 128/3 128/8 131/17</p> <p>set [9] 8/19 26/9 42/14 79/13 81/19 105/4 106/15 112/8 116/14</p> <p>sets [3] 28/13 28/23 83/6</p> <p>settings [2] 80/3 80/3</p>	<p>several [1] 125/25</p> <p>severe [2] 103/18 103/18</p> <p>severity [12] 16/25 43/15 43/19 44/13 44/17 45/14 45/17 46/7 46/8 54/23 55/6 78/5</p> <p>share [2] 1/16 1/17</p> <p>shared [3] 13/21 59/25 64/11</p> <p>she [55] 7/21 8/13 11/16 11/17 11/20 12/9 21/7 21/9 21/10 30/16 30/18 32/19 32/23 36/22 36/23 37/5 37/5 38/11 38/12 39/11 39/18 39/18 39/21 39/23 39/24 49/9 49/11 51/16 52/7 52/7 66/3 66/14 67/18 67/19 68/2 68/8 68/25 91/1 91/3 91/8 91/9 92/17 92/17 92/24 92/24 92/24 93/3 132/23 134/4 134/5 134/15 134/15 134/16 134/16 134/17</p> <p>she'd [2] 123/16 134/17</p> <p>she'd -- you [1] 123/16</p> <p>she's [5] 68/22 68/24 69/4 69/5 120/8</p> <p>sheet [1] 74/10</p> <p>shift [4] 20/5 24/16 24/17 34/7</p> <p>shocked [1] 110/13</p> <p>short [8] 2/16 3/8 25/17 61/12 61/12 78/17 78/20 120/10</p> <p>shortly [1] 45/12</p> <p>should [19] 43/23 44/1 44/14 45/11 53/2 53/15 55/5 55/12 71/25 78/11 81/25 85/25 86/2 102/4 106/3 106/5 106/7 106/9 123/10</p> <p>shout [1] 11/21</p> <p>shouting [1] 12/3</p> <p>shown [5] 18/12 71/10 130/2 130/3 130/7</p> <p>shows [4] 7/10 50/16 60/15 97/4</p> <p>sic [1] 119/7</p> <p>side [3] 3/13 116/13 132/17</p> <p>significant [6] 40/11 107/7 107/12 126/14 126/22 130/11</p> <p>signs [1] 87/10</p> <p>similar [1] 107/4</p> <p>simple [1] 68/11</p> <p>simply [7] 35/9 64/19</p>	<p>77/22 95/24 116/5 116/6 116/16</p> <p>since [4] 24/8 79/22 80/23 94/6</p> <p>sit [1] 135/21</p> <p>sitting [1] 50/19</p> <p>situation [4] 7/24 15/6 65/25 75/11</p> <p>six [1] 81/23</p> <p>skeleton [1] 15/1</p> <p>sleeping [3] 48/7 54/4 105/20</p> <p>slightly [2] 31/23 132/16</p> <p>slow [1] 36/8</p> <p>small [1] 127/12</p> <p>smooth [1] 128/12</p> <p>so [249]</p> <p>social [1] 26/11</p> <p>solely [1] 16/20</p> <p>some [42] 1/13 8/2 10/1 18/7 18/16 23/9 27/22 28/14 28/17 33/5 40/24 40/25 47/21 48/5 48/7 48/9 53/3 70/2 73/12 73/15 74/4 74/13 75/15 75/21 76/3 76/9 76/13 76/20 91/13 91/19 98/12 99/17 108/1 115/22 117/10 123/9 124/18 128/18 128/18 131/20 134/2 137/10</p> <p>somebody [19] 1/7 41/18 56/23 83/1 83/17 83/24 87/9 88/6 98/7 99/11 102/6 103/1 105/25 109/4 109/21 110/23 134/20 136/19 136/25</p> <p>somebody's [1] 56/7</p> <p>somehow [1] 76/23</p> <p>someone [9] 4/8 27/23 33/6 57/20 63/10 99/2 124/5 132/19 133/19</p> <p>someone's [1] 122/16</p> <p>something [28] 12/20 22/19 30/24 32/3 43/12 57/2 69/7 76/17 78/9 96/17 100/12 105/18 105/20 106/19 106/21 108/15 110/10 111/22 112/5 118/17 119/8 122/13 131/23 133/5 135/3 135/9 136/6 137/7</p> <p>sometimes [12] 8/3 8/6 10/24 10/25 17/17 19/22 19/25 20/1 23/12 32/11 32/13 100/23</p> <p>somewhere [3] 14/24 14/25 55/20</p> <p>soon [3] 64/2 129/15</p>	<p>136/11</p> <p>sorry [21] 4/20 5/9 7/2 7/3 12/16 19/23 21/3 27/20 28/1 35/7 36/8 61/25 74/24 85/11 95/14 101/9 103/25 104/19 110/1 111/18 134/13</p> <p>sort [6] 7/18 10/5 67/5 89/19 98/18 104/6</p> <p>sought [2] 4/3 4/18</p> <p>source [1] 72/4</p> <p>sources [1] 71/15</p> <p>speak [10] 1/19 34/22 35/1 55/21 75/13 88/18 89/11 90/4 90/12 116/8</p> <p>speaking [7] 32/9 35/3 37/17 63/8 72/22 101/25 126/11</p> <p>specific [3] 37/18 50/5 55/17</p> <p>specifically [9] 12/25 47/3 49/4 63/8 67/4 69/25 70/2 75/10 93/13</p> <p>specifics [7] 27/17 27/25 40/3 51/2 56/5 64/7 67/3</p> <p>speech [1] 122/4</p> <p>speed [1] 62/6</p> <p>spend [1] 80/10</p> <p>spent [1] 116/11</p> <p>spoke [5] 35/5 42/3 51/2 61/10 61/11 63/9 64/5 77/12 88/23 90/14 99/14 124/11</p> <p>spots' [1] 6/11</p> <p>spots'/unknowns [1] 6/11</p> <p>SpRs [1] 127/22</p> <p>staff [11] 17/20 108/17 108/18 113/3 113/19 113/21 115/13 115/15 115/16 129/9 136/4</p> <p>stage [7] 27/7 44/22 61/19 77/3 109/6 116/5 134/4</p> <p>stands [2] 27/21 63/9</p> <p>start [7] 5/19 64/23 78/18 96/6 99/22 100/6 126/1</p> <p>started [6] 24/17 27/2 88/24 98/11 114/21 125/21</p> <p>starting [2] 71/13 96/13</p> <p>starts [1] 132/9</p> <p>state [2] 46/11 132/2</p> <p>stated [3] 6/2 84/11 86/4</p> <p>statement [49] 11/12 18/13 19/3 19/9 25/2</p>	<p>26/1 26/6 26/9 26/21 28/2 31/7 33/9 34/21 36/19 36/23 38/6 39/16 40/9 40/18 40/18 42/16 43/21 44/24 45/24 46/11 49/9 51/19 52/3 53/7 53/10 53/10 61/2 62/14 67/10 68/22 70/21 71/11 79/7 79/10 79/13 80/12 86/10 88/1 92/14 96/22 100/18 105/5 107/21 126/17</p> <p>statements [4] 18/25 19/8 19/11 74/3</p> <p>states [11] 7/9 11/16 11/20 29/14 39/18 41/13 42/25 44/3 50/15 97/1 97/2</p> <p>stating [1] 14/5</p> <p>station [8] 1/8 39/23 53/22 68/13 69/3 72/12 76/24 100/9</p> <p>stations [1] 89/11</p> <p>statutory [2] 16/10 28/6</p> <p>stay [1] 76/23</p> <p>stayed [1] 68/6</p> <p>steer [1] 86/19</p> <p>steps [6] 12/12 16/8 28/23 49/19 68/5 103/3</p> <p>sticks [2] 38/11 67/17</p> <p>still [11] 12/8 12/12 27/10 44/22 45/19 47/13 61/13 82/22 99/7 105/10 137/1</p> <p>stop [5] 85/19 97/6 125/17 125/23 137/14</p> <p>stopped [2] 92/18 126/4</p> <p>stopping [2] 36/25 125/20</p> <p>stops [1] 126/8</p> <p>straight [1] 64/17</p> <p>Straw [10] 16/15 16/16 65/17 65/18 76/20 125/3 125/4 138/5 138/14 138/23</p> <p>Street [1] 117/7</p> <p>strength [1] 130/12</p> <p>strictly [1] 76/14</p> <p>struggling [1] 102/7</p> <p>stuck [1] 49/9</p> <p>student [1] 34/25</p> <p>studies [1] 105/17</p> <p>stuff [1] 17/11</p> <p>subject [2] 65/10 117/20</p> <p>subsequent [3] 65/1 131/22 133/6</p> <p>subsequently [1] 133/5</p> <p>substances [2] 2/20</p>
--	--	---	---	--

S	symptoms [6] 10/11 17/20 17/25 55/9 95/22 126/18	128/14 129/12 131/14 135/15 135/15 136/25 137/1	19/17 23/1 23/13 23/20 28/7 28/11 30/5 30/11 33/18 33/21 33/25 36/22 37/23 41/22 42/3 42/5 42/15 42/17 43/14 43/24 45/17 45/23 46/5 46/17 46/20 50/13 51/3 52/13 54/6 54/17 54/21 58/25 59/24 63/2 64/8 65/13 69/17 69/24 70/5 70/18 72/3 72/14 72/25 73/4 74/10 75/5 75/20 75/20 76/17 76/18 79/21 80/9 81/3 81/6 82/3 82/6 83/1 83/4 84/23 85/10 86/21 88/2 90/2 94/15 100/11 101/13 105/19 105/20 105/23 107/25 112/4 112/14 112/15 113/23 113/24 114/22 115/16 116/1 117/13 117/24 118/20 119/9 120/14 121/7 124/11 126/5 126/12 126/17 127/2 130/4 131/15 132/8 132/12 134/21 136/6 136/20 136/20 137/4	110/12 112/12 113/6 114/5 116/20 116/25 123/5 123/20 123/25 123/25 124/10 126/13 126/20 132/8 132/10 132/15 132/19 133/17 136/23 136/25 therapeutic [1] 65/13 there [151] there'd [3] 12/1 59/12 136/16 there's [16] 4/13 9/19 16/5 39/1 45/4 61/23 63/2 66/5 66/17 72/6 85/16 89/15 119/9 124/7 125/10 135/25 therefore [8] 48/20 72/15 99/24 128/17 129/8 131/7 136/24 136/25 these [11] 23/8 23/9 23/13 31/11 61/15 83/22 88/7 102/4 107/5 111/1 136/2 they [64] 1/16 1/17 1/24 1/25 8/6 17/16 20/18 20/23 21/11 30/25 32/9 32/10 32/15 32/15 34/11 35/16 39/6 40/15 51/15 51/15 62/5 65/12 68/15 70/9 80/18 84/3 84/20 84/21 85/7 85/10 85/25 86/2 86/6 86/8 86/23 87/16 87/19 87/20 88/9 88/10 88/10 88/11 88/24 88/25 89/1 89/5 89/7 89/25 90/1 90/12 93/9 94/10 107/11 107/17 107/18 108/9 108/17 112/10 113/5 113/22 115/17 128/22 129/23 136/7 they'd [3] 89/25 90/2 126/3 they're [8] 62/6 72/3 84/22 85/15 85/23 87/10 126/21 137/2 they've [4] 89/14 89/14 89/18 89/19 thing [3] 33/7 48/24 89/20 things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21 think [99] 4/13 6/4 8/1 8/7 8/23 13/1 14/19 14/23 17/22 18/15 19/7 20/4 23/6 23/21 24/1 34/11 34/14 37/21 38/18 39/5 44/8 44/22 44/23 47/2 48/5 53/15 53/18
substances... [1] 2/23	synthetic [1] 133/18	teams [6] 21/14 22/1 32/8 65/1 86/12 115/17	tearful [3] 66/8 110/6 110/12	therapeutic [1] 65/13
successfully [1] 75/24	system [4] 41/9 62/6 75/19 134/23	ten [2] 34/4 132/10	technical [2] 121/8 121/20	there'd [3] 12/1 59/12 136/16
such [6] 15/23 48/24 51/1 57/13 83/16 108/4	systems [1] 121/21	tend [3] 17/16 22/24 23/1	telephone [4] 38/15 39/17 72/16 90/15	there's [16] 4/13 9/19 16/5 39/1 45/4 61/23 63/2 66/5 66/17 72/6 85/16 89/15 119/9 124/7 125/10 135/25
suddenly [1] 59/5	T	tells [1] 18/21	telephoning [1] 74/5	therefore [8] 48/20 72/15 99/24 128/17 129/8 131/7 136/24 136/25
suffered [1] 117/23	tablet [1] 101/1	ten [2] 34/4 132/10	tell [3] 86/1 90/16 114/18	these [11] 23/8 23/9 23/13 31/11 61/15 83/22 88/7 102/4 107/5 111/1 136/2
suffering [2] 58/9 95/22	take [34] 1/18 11/4 12/11 23/4 30/6 32/1 34/15 39/18 43/22 48/5 50/2 53/8 58/8 68/5 71/25 73/19 73/22 78/17 86/2 87/24 92/12 95/18 98/8 106/24 107/15 108/9 111/15 113/16 128/17 129/3 129/13 130/11 136/24 136/25	tend [3] 17/16 22/24 23/1	telling [2] 66/2 132/22	they [64] 1/16 1/17 1/24 1/25 8/6 17/16 20/18 20/23 21/11 30/25 32/9 32/10 32/15 32/15 34/11 35/16 39/6 40/15 51/15 51/15 62/5 65/12 68/15 70/9 80/18 84/3 84/20 84/21 85/7 85/10 85/25 86/2 86/6 86/8 86/23 87/16 87/19 87/20 88/9 88/10 88/10 88/11 88/24 88/25 89/1 89/5 89/7 89/25 90/1 90/12 93/9 94/10 107/11 107/17 107/18 108/9 108/17 112/10 113/5 113/22 115/17 128/22 129/23 136/7
suffice [1] 40/20	taken [16] 2/19 2/22 5/15 13/12 16/8 39/6 52/25 59/10 60/8 63/6 77/11 81/20 103/2 103/3 114/15 120/1	tends [1] 8/3	tells [1] 18/21	they'd [3] 89/25 90/2 126/3
sufficiently [1] 85/5	takes [2] 54/8 59/22	terminology [1] 32/22	tell [3] 86/1 90/16 114/18	they're [8] 62/6 72/3 84/22 85/15 85/23 87/10 126/21 137/2
suggest [5] 25/10 40/19 60/15 68/10 123/9	taking [11] 19/23 31/23 33/1 49/19 82/11 95/24 125/17 125/23 126/4 126/8 134/5	terms [25] 4/8 8/5 10/23 13/3 14/23 18/22 23/10 23/11 40/4 46/6 56/7 57/1 62/9 63/23 63/25 81/19 85/9 86/5 86/22 87/22 93/11 110/2 126/17 131/15 131/17	telling [2] 66/2 132/22	they've [4] 89/14 89/14 89/18 89/19
suggested [1] 131/11	talk [5] 56/17 88/9 88/10 99/17 102/2	than [6] 41/25 44/1 85/14 120/24 124/23 126/11	tells [1] 18/21	thing [3] 33/7 48/24 89/20
suggesting [2] 4/16 4/17	talked [3] 14/17 90/2 116/12	thank [74] 2/2 9/15 10/13 10/15 12/15 13/14 15/7 16/12 16/13 16/14 20/11 20/12 24/23 24/24 25/9 25/9 25/13 25/14 25/21 30/6 31/8 52/15 52/17 52/19 54/19 57/4 57/5 57/7 60/13 61/20 63/12 65/16 65/17 67/7 69/19 70/19 71/7 73/8 74/2 76/2 76/19 77/14 77/16 77/24 78/1 78/14 78/15 78/16 78/18 79/4 92/12 93/24 98/8 107/15 108/20 108/22 110/22 112/15 112/23 125/1 125/2 125/7 126/13 127/6 127/7 127/10 130/15 131/20 132/16 133/22 133/23 137/14 137/15 137/15	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
suggestion [3] 63/2 75/23 76/9	talking [5] 20/4 73/14 73/15 104/1 116/12	that [791]	tells [1] 18/21	think [99] 4/13 6/4 8/1 8/7 8/23 13/1 14/19 14/23 17/22 18/15 19/7 20/4 23/6 23/21 24/1 34/11 34/14 37/21 38/18 39/5 44/8 44/22 44/23 47/2 48/5 53/15 53/18
suicide [1] 23/11	team [100] 1/12 4/9 7/1 7/9 7/13 8/6 9/10 10/7 10/17 13/20 14/8 14/11 15/14 15/19 30/24 31/25 32/1 32/9 32/12 32/14 32/25 33/8 34/1 38/16 38/22 43/13 46/1 46/9 47/9 47/18 47/20 48/14 49/1 49/12 50/15 51/10 63/10 63/24 64/2 64/6 64/19 64/25 67/24 68/2 70/24 73/18 73/22 74/11 74/22 74/22 76/12 79/25 80/18 82/6 84/11 84/16 85/6 86/5 86/7 87/8 88/22 96/3 96/4 96/16 96/20 97/2 97/23 98/25 99/10 100/6 100/9 101/5 101/22 102/6 106/23 108/16 111/13 112/25 113/1 113/7 113/13 115/3 116/2 116/14 116/20 117/7 117/20 118/10 118/13 126/2 127/14 128/4 128/9	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	tells [1] 18/21	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
suitability [1] 111/5	takes [2] 54/8 59/22	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	think [99] 4/13 6/4 8/1 8/7 8/23 13/1 14/19 14/23 17/22 18/15 19/7 20/4 23/6 23/21 24/1 34/11 34/14 37/21 38/18 39/5 44/8 44/22 44/23 47/2 48/5 53/15 53/18
suitable [3] 80/20 84/3 84/12	taking [11] 19/23 31/23 33/1 49/19 82/11 95/24 125/17 125/23 126/4 126/8 134/5	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
suite [2] 1/13 103/1	talk [5] 56/17 88/9 88/10 99/17 102/2	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
summarise [2] 26/10 35/13	talked [3] 14/17 90/2 116/12	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
summarised [1] 18/16	talking [5] 20/4 73/14 73/15 104/1 116/12	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
summarising [1] 126/2	team [100] 1/12 4/9 7/1 7/9 7/13 8/6 9/10 10/7 10/17 13/20 14/8 14/11 15/14 15/19 30/24 31/25 32/1 32/9 32/12 32/14 32/25 33/8 34/1 38/16 38/22 43/13 46/1 46/9 47/9 47/18 47/20 48/14 49/1 49/12 50/15 51/10 63/10 63/24 64/2 64/6 64/19 64/25 67/24 68/2 70/24 73/18 73/22 74/11 74/22 74/22 76/12 79/25 80/18 82/6 84/11 84/16 85/6 86/5 86/7 87/8 88/22 96/3 96/4 96/16 96/20 97/2 97/23 98/25 99/10 100/6 100/9 101/5 101/22 102/6 106/23 108/16 111/13 112/25 113/1 113/7 113/13 115/3 116/2 116/14 116/20 117/7 117/20 118/10 118/13 126/2 127/14 128/4 128/9	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
summary [7] 5/20 43/11 52/25 54/16 54/17 54/18 90/2	talk [5] 56/17 88/9 88/10 99/17 102/2	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
Sunday [2] 34/23 74/20	talked [3] 14/17 90/2 116/12	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
supervised [2] 7/14 97/24	talking [5] 20/4 73/14 73/15 104/1 116/12	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
support [7] 28/12 67/22 68/22 69/6 86/8 113/1 115/21	team [100] 1/12 4/9 7/1 7/9 7/13 8/6 9/10 10/7 10/17 13/20 14/8 14/11 15/14 15/19 30/24 31/25 32/1 32/9 32/12 32/14 32/25 33/8 34/1 38/16 38/22 43/13 46/1 46/9 47/9 47/18 47/20 48/14 49/1 49/12 50/15 51/10 63/10 63/24 64/2 64/6 64/19 64/25 67/24 68/2 70/24 73/18 73/22 74/11 74/22 74/22 76/12 79/25 80/18 82/6 84/11 84/16 85/6 86/5 86/7 87/8 88/22 96/3 96/4 96/16 96/20 97/2 97/23 98/25 99/10 100/6 100/9 101/5 101/22 102/6 106/23 108/16 111/13 112/25 113/1 113/7 113/13 115/3 116/2 116/14 116/20 117/7 117/20 118/10 118/13 126/2 127/14 128/4 128/9	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
supported [1] 80/18	talk [5] 56/17 88/9 88/10 99/17 102/2	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
supporting [2] 80/13 80/16	talked [3] 14/17 90/2 116/12	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
sure [11] 10/21 25/12 34/8 40/2 51/24 69/16 72/18 86/23 100/16 112/1 135/13	talking [5] 20/4 73/14 73/15 104/1 116/12	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21
surprise [2] 136/15 136/18	team [100] 1/12 4/9 7/1 7/9 7/13 8/6 9/10 10/7 10/17 13/20 14/8 14/11 15/14 15/19 30/24 31/25 32/1 32/9 32/12 32/14 32/25 33/8 34/1 38/16 38/22 43/13 46/1 46/9 47/9 47/18 47/20 48/14 49/1 49/12 50/15 51/10 63/10 63/24 64/2 64/6 64/19 64/25 67/24 68/2 70/24 73/18 73/22 74/11 74/22 74/22 76/12 79/25 80/18 82/6 84/11 84/16 85/6 86/5 86/7 87/8 88/22 96/3 96/4 96/16 96/20 97/2 97/23 98/25 99/10 100/6 100/9 101/5 101/22 102/6 106/23 108/16 111/13 112/25 113/1 113/7 113/13 115/3 116/2 116/14 116/20 117/7 117/20 118/10 118/13 126/2 127/14 128/4 128/9	that's [117] 3/2 4/12 4/13 4/14 4/15 6/1 7/5 7/13 8/11 9/1 9/2 9/3 9/12 10/1 13/10 14/11 14/20 15/4 18/23	telling [2] 66/2 132/22	things [11] 11/1 11/2 23/13 45/4 57/19 61/20 73/21 90/23 103/2 109/13 128/21

<p>T</p> <p>think... [72] 53/20 55/14 55/15 55/16 55/20 58/17 59/10 59/12 60/21 61/1 61/22 62/14 67/1 68/23 69/8 69/13 69/22 71/5 73/14 75/5 76/11 76/17 76/18 77/13 77/21 78/11 82/16 86/22 88/20 89/6 90/24 91/10 91/11 93/11 93/17 96/1 96/12 96/13 99/4 99/7 101/25 103/25 105/16 109/8 110/8 110/12 110/12 110/13 110/21 114/16 120/14 122/15 124/7 124/13 129/1 129/1 129/6 129/23 131/7 131/10 133/1 133/25 134/15 134/17 134/18 134/25 135/12 135/14 135/25 136/18 136/20 137/3</p> <p>thinking [9] 7/25 17/10 51/12 67/3 70/4 75/16 75/18 93/13 115/15</p> <p>thinks [2] 57/23 94/5</p> <p>third [7] 29/4 29/14 50/12 69/20 97/1 131/20 132/7</p> <p>this [144]</p> <p>those [31] 1/18 6/13 12/11 16/9 20/18 27/15 27/25 28/17 31/24 33/5 37/11 44/19 46/9 46/14 50/6 52/13 73/21 77/14 85/21 90/1 93/5 93/7 94/22 96/18 108/20 122/6 122/23 124/20 128/21 130/22 131/7</p> <p>though [2] 7/20 115/5</p> <p>thought [18] 6/8 15/3 17/11 46/9 48/14 54/12 60/22 61/4 67/6 91/21 94/13 94/17 94/22 95/16 101/5 101/21 131/10 132/12</p> <p>thoughts [4] 61/8 102/4 109/10 131/12</p> <p>three [4] 44/1 129/20 130/22 131/8</p> <p>through [13] 13/18 13/23 14/3 20/8 22/8 22/11 40/24 40/25 47/4 83/12 99/8 116/7 126/18</p> <p>ticked [2] 45/23 106/12</p> <p>time [81] 1/11 3/3 6/23 8/24 9/1 9/4 9/25</p>	<p>10/17 11/8 11/25 12/4 18/9 18/24 19/5 21/16 22/15 23/8 26/18 33/15 33/18 33/21 36/2 37/1 44/10 48/5 48/10 53/17 61/5 62/22 62/23 63/19 71/19 72/12 74/2 74/15 85/8 87/6 88/11 88/12 88/13 89/2 89/23 91/2 91/14 92/8 92/20 93/14 96/12 97/17 98/21 98/22 99/3 100/20 102/10 102/24 104/10 104/14 107/22 108/7 110/15 114/10 114/14 114/22 114/24 116/12 116/20 117/19 123/3 124/13 124/22 124/25 126/22 126/23 128/4 128/9 129/9 134/12 134/17 134/17 135/14 135/16</p> <p>times [4] 22/25 64/18 65/12 116/3</p> <p>timing [1] 77/22</p> <p>timings [1] 33/14</p> <p>tipped [1] 60/3</p> <p>tired [1] 105/17</p> <p>Titled [1] 31/9</p> <p>today [9] 22/5 35/19 36/19 39/15 92/4 92/14 97/7 113/3 130/3</p> <p>together [2] 38/18 109/14</p> <p>told [33] 21/9 35/14 39/8 39/11 39/18 42/6 58/2 90/21 90/24 91/3 91/9 99/8 108/25 113/7 117/7 117/8 117/11 120/4 120/23 122/19 122/21 129/19 129/23 130/1 130/1 130/15 130/19 130/19 130/22 132/19 134/16 134/20 135/4</p> <p>tomorrow [2] 124/6 137/15</p> <p>tonight [1] 124/5</p> <p>too [2] 48/7 69/9</p> <p>took [7] 12/7 13/16 37/6 38/15 63/24 116/10 128/18</p> <p>tool [6] 103/10 103/12 103/16 104/8 107/17 107/17</p> <p>top [6] 3/11 11/16 33/15 42/19 54/19 106/13</p> <p>topic [6] 18/7 67/11 69/20 71/10 108/24 116/25</p> <p>topics [2] 10/15 127/12</p> <p>totally [2] 123/13</p>	<p>123/13</p> <p>touch [1] 77/17</p> <p>towards [18] 5/24 6/7 6/14 8/18 40/10 47/6 50/4 54/25 55/22 66/5 67/14 96/1 98/2 98/20 98/21 99/5 109/8 109/17</p> <p>training [2] 26/22 121/22</p> <p>transition [1] 128/12</p> <p>travelling [5] 91/6 91/10 100/9 102/18 103/9</p> <p>treated [3] 53/19 53/22 75/24</p> <p>treatment [51] 13/22 33/6 40/7 43/3 44/4 44/7 44/20 44/22 49/2 50/7 51/15 54/10 54/12 55/23 62/16 63/15 63/17 63/18 65/1 65/6 67/21 82/2 82/17 82/24 83/3 83/13 84/1 84/2 84/12 84/13 84/21 85/12 86/5 86/24 87/18 96/6 96/7 96/8 96/11 96/13 96/13 96/20 98/6 98/11 99/17 99/19 99/23 100/17 111/5 129/14 131/13</p> <p>Triage [1] 117/7</p> <p>triaged [1] 75/4</p> <p>trial [1] 13/21</p> <p>tried [4] 47/4 101/14 122/13 130/15</p> <p>triggers [1] 121/10</p> <p>true [4] 26/6 79/10 110/19 110/21</p> <p>Trust [12] 16/8 17/9 24/16 30/25 79/17 81/9 120/16 120/22 121/12 124/12 124/21 124/23</p> <p>trusted [1] 76/1</p> <p>try [12] 12/9 12/18 17/20 37/19 42/4 55/23 82/13 83/2 94/12 109/13 117/9 129/11</p> <p>trying [31] 7/6 7/25 8/4 8/11 9/2 9/13 12/8 12/12 15/2 15/4 15/5 17/6 17/8 17/8 23/14 31/16 31/24 38/19 45/2 81/7 83/17 84/6 92/9 92/17 92/22 93/6 93/14 99/7 111/19 112/6 116/1</p> <p>Tuesday [1] 1/1</p> <p>turn [5] 36/14 50/12 83/5 87/25 93/21</p> <p>Turning [1] 34/17</p> <p>twice [2] 42/21 113/1</p> <p>two [41] 7/15 10/15</p>	<p>14/23 16/17 19/19 28/7 28/10 30/8 30/10 33/24 34/18 40/5 45/4 46/14 49/1 49/2 59/13 59/22 64/18 65/23 68/10 73/24 107/16 108/1 108/16 109/17 113/3 113/19 113/20 115/5 115/15 115/16 116/3 125/13 125/22 126/5 126/7 128/2 128/21 129/2 129/14</p> <p>two o'clock [1] 19/19</p> <p>Two paragraphs [1] 65/23</p> <p>two weeks [2] 126/5 126/7</p> <p>twos [1] 115/18</p> <p>type [3] 56/3 56/6 130/13</p> <p>typed [1] 7/22</p> <p>typically [2] 35/1 106/19</p> <hr/> <p>U</p> <p>ultimate [1] 57/1</p> <p>ultimately [1] 40/6</p> <p>Ulysses [4] 15/10 15/12 15/20 24/3</p> <p>Um [1] 48/2</p> <p>unable [1] 14/8</p> <p>unaware [2] 12/16 12/17</p> <p>unchanged [1] 48/11</p> <p>unclear [6] 41/15 41/23 42/2 61/21 76/19 102/16</p> <p>under [26] 3/14 3/19 5/24 9/21 16/21 28/20 29/17 33/20 40/15 49/16 55/13 58/18 63/16 81/23 82/5 83/10 83/20 83/23 83/24 84/4 87/15 89/22 118/9 120/19 122/9 133/12</p> <p>underlying [1] 54/11</p> <p>understand [27] 2/19 2/22 10/7 14/15 17/9 22/12 31/5 31/6 32/17 33/14 34/14 36/2 38/14 42/4 42/5 46/8 47/20 49/14 81/7 84/21 87/19 113/24 116/1 119/8 120/13 121/7 129/6</p> <p>understanding [10] 30/23 34/9 48/3 48/4 55/14 73/1 80/10 89/17 121/21 123/23</p> <p>understood [3] 44/10 47/5 58/13</p> <p>undertake [1] 30/25</p> <p>undertaken [1] 27/12</p> <p>undertaking [2] 85/4 85/21</p>	<p>undertook [2] 62/17 74/15</p> <p>university [3] 34/22 34/25 35/1</p> <p>unknown [1] 48/10</p> <p>unknowns [1] 6/11</p> <p>unoccupied [4] 36/12 98/23 99/4 99/6</p> <p>until [17] 33/25 34/7 39/23 48/9 49/13 49/20 68/8 68/25 69/3 69/4 69/14 73/22 90/6 102/20 103/4 135/24 137/18</p> <p>untreated [1] 102/12</p> <p>unusual [2] 32/20 33/2</p> <p>unwell [5] 60/16 64/9 85/10 87/10 114/2</p> <p>up [29] 5/7 6/22 8/3 17/8 18/25 19/5 19/12 27/19 31/8 33/10 36/8 57/11 60/17 65/20 66/17 67/9 73/21 75/8 75/11 76/18 78/6 81/9 97/1 103/17 125/6 127/23 132/10 132/15 136/21</p> <p>update [2] 120/25 122/22</p> <p>updated [4] 6/19 135/17 135/18 135/20</p> <p>upon [9] 20/3 47/8 48/9 48/15 99/18 101/6 101/10 101/18 112/13</p> <p>us [32] 1/14 1/17 1/17 1/25 4/23 7/12 13/2 13/10 13/11 33/5 38/14 48/23 51/6 51/14 55/22 61/10 64/18 66/7 66/23 67/5 70/5 89/16 97/22 113/6 113/7 114/10 116/10 129/19 130/1 130/5 130/19 132/19</p> <p>use [1] 64/22</p> <p>used [5] 36/5 42/11 92/9 93/5 105/8</p> <p>useful [2] 77/21 134/7</p> <p>using [1] 130/24</p> <p>usual [1] 19/21</p> <p>usually [6] 38/24 87/4 87/5 87/6 89/9 89/21</p> <hr/> <p>V</p> <p>varies [1] 127/19</p> <p>various [1] 71/14</p> <p>vary [1] 128/5</p> <p>VC [113] 2/24 3/6 5/1 6/12 6/17 11/5 11/14 11/17 12/2 12/12 12/16 12/18 15/13 15/15 17/13 18/17</p>
---	---	---	--	---

<p>V</p> <p>VC... [97] 23/5 24/5 33/1 33/18 35/15 36/23 37/5 37/17 38/12 39/23 40/6 41/14 42/20 46/2 47/10 47/17 49/5 51/21 51/24 52/11 53/19 53/22 56/1 56/8 57/13 58/5 58/23 60/1 60/12 60/16 60/17 60/23 62/11 62/15 63/16 63/25 64/21 65/4 65/25 66/6 66/19 66/21 67/19 67/22 71/4 80/5 91/3 91/13 92/1 92/9 92/17 94/3 94/16 95/19 98/4 98/10 98/13 98/14 99/12 100/9 100/20 101/6 101/10 103/12 106/1 107/19 107/21 108/15 109/3 109/14 113/6 113/25 114/15 115/10 115/16 116/6 116/9 117/2 117/4 117/8 117/20 118/6 118/18 120/10 123/15 123/25 125/14 125/17 126/11 129/7 129/22 131/23 132/2 132/9 132/12 133/1 133/5</p> <p>VC's [35] 10/19 12/24 16/19 27/4 27/13 27/23 32/17 38/3 39/4 39/9 41/10 43/1 46/10 49/12 65/19 87/25 88/5 88/19 89/22 90/4 90/14 91/5 91/11 91/15 97/12 100/4 102/17 102/20 103/3 103/9 113/8 113/12 114/11 115/8 131/21</p> <p>verbal [1] 104/6 verbatim [1] 7/21 versa [1] 112/4 version [1] 81/15 very [40] 2/2 3/4 3/7 6/21 9/15 12/15 13/17 16/12 16/17 17/13 17/17 18/4 20/11 31/13 37/24 41/9 41/19 51/25 57/4 58/10 60/15 60/17 61/5 61/12 68/11 70/20 71/6 77/14 78/6 78/17 102/25 103/18 112/15 114/2 127/6 129/3 130/10 132/16 133/22 136/10</p> <p>via [2] 25/3 72/15 viable [2] 57/2 86/24 vice [1] 112/4 victim [1] 120/22 victims [1] 76/3</p>	<p>view [15] 5/23 6/3 43/22 46/1 59/25 60/4 62/11 70/22 70/24 75/7 76/1 85/4 94/23 95/8 95/11</p> <p>violence [14] 40/10 40/13 40/19 47/6 52/10 55/22 56/4 57/25 58/2 58/19 59/12 98/15 107/2 107/13</p> <p>violent [7] 35/17 42/6 51/25 52/12 55/15 55/19 56/21</p> <p>visibly [1] 60/23 visit [5] 42/21 107/19 107/21 113/2 136/4</p> <p>visiting [1] 47/21 visits [7] 7/15 85/11 85/11 97/24 113/1 113/22 129/11</p> <p>visual [1] 61/16 vital [2] 13/2 72/3 voice [2] 27/19 36/8 voice up [2] 27/19 36/8</p> <p>voices [5] 60/19 61/5 61/7 66/2 125/21</p> <p>voluntary [2] 49/3 63/13</p>	<p>123/14 133/4 135/18 watched [1] 66/20 watching [2] 66/21 94/5</p> <p>way [25] 12/8 29/5 37/6 38/11 38/17 39/11 49/10 58/23 65/3 67/18 67/22 68/3 68/13 68/21 76/18 84/15 95/17 98/12 99/17 109/2 109/16 112/4 114/22 132/7 134/16</p> <p>way to [1] 67/18 we [229] we'd [6] 37/18 49/7 49/15 60/8 60/9 89/20</p> <p>we'll [10] 24/24 25/14 28/17 63/1 68/24 76/19 78/17 78/17 137/14 137/15</p> <p>we're [13] 6/24 26/20 81/16 84/14 84/17 84/18 87/7 95/3 109/17 111/14 111/15 116/5 116/19</p> <p>we've [9] 22/5 28/7 38/3 40/4 42/18 113/4 114/4 124/10 127/17</p> <p>week [1] 85/11 weeks [4] 125/18 125/22 126/5 126/7</p> <p>well [27] 13/6 16/3 23/20 25/4 32/9 44/12 44/15 61/1 68/19 69/5 69/12 77/21 96/6 98/25 99/11 99/18 100/16 101/22 109/21 109/24 112/5 115/4 122/11 125/19 135/23 136/20 137/14</p> <p>went [15] 2/24 2/25 34/11 53/6 60/12 94/12 107/21 113/16 113/18 114/6 121/18 123/8 123/12 123/25 132/20</p> <p>were [122] 5/15 6/7 6/13 6/13 8/17 9/4 9/22 11/8 11/25 12/4 12/11 12/16 12/16 13/17 13/24 14/13 15/2 17/25 18/7 18/9 18/12 20/4 20/16 20/18 20/18 21/4 22/3 22/8 22/21 23/3 23/4 24/3 24/6 24/9 25/3 27/4 31/11 32/25 34/9 35/16 36/11 36/25 37/9 38/16 38/18 38/19 41/16 41/18 41/24 47/20 50/3 50/3 50/19 51/10 52/4 54/11 55/18 56/13 57/11 58/2 59/13 60/22 62/17 66/25</p>	<p>68/7 68/10 69/3 73/12 73/14 74/4 75/6 75/15 75/18 75/21 75/22 76/13 76/20 77/17 79/24 85/17 85/18 88/24 90/14 90/17 90/25 91/25 92/8 92/19 94/9 94/13 94/22 95/15 95/23 98/1 98/22 100/17 101/25 102/10 102/17 107/17 109/9 113/22 116/20 116/22 116/23 121/15 124/12 124/21 128/23 129/7 129/20 129/23 130/2 130/15 130/19 131/1 131/2 131/20 132/22 134/2 134/20 136/10</p> <p>weren't [10] 3/25 34/22 42/8 42/11 42/13 55/17 76/14 107/18 129/19 130/1</p> <p>what [173] what's [5] 20/3 75/8 105/14 107/4 123/3</p> <p>wheels [1] 31/24 when [81] 1/9 1/19 5/1 8/13 13/4 15/12 16/8 17/5 17/15 18/20 19/22 19/23 21/16 22/25 23/4 23/8 23/9 24/9 28/5 29/11 31/9 31/15 33/21 35/8 37/6 37/16 37/17 38/15 40/8 40/11 41/23 47/23 51/3 55/9 59/22 60/12 63/25 67/23 81/1 82/1 89/10 89/10 89/25 91/8 92/17 93/3 93/14 95/3 96/15 97/13 99/9 99/21 101/22 101/25 102/2 102/10 107/7 108/3 108/6 108/13 109/17 109/23 110/6 110/8 110/11 111/10 113/23 113/24 114/8 115/17 117/19 119/6 122/15 126/15 127/14 128/14 129/7 129/19 132/12 132/18 136/15</p> <p>where [30] 8/17 20/2 24/2 31/19 32/11 34/25 41/7 41/18 48/18 57/15 62/2 64/15 82/19 83/1 83/15 83/19 87/2 87/8 87/23 91/3 91/9 101/7 101/13 101/24 105/25 109/9 113/10 132/8 134/4 137/7</p> <p>whether [53] 4/6 4/9 8/17 16/20 17/10 20/23 21/7 22/17 23/3 23/5 23/22 29/16</p>	<p>49/11 50/1 51/15 53/8 54/8 66/6 66/7 66/19 66/20 67/4 68/16 69/20 69/25 70/8 70/9 75/22 76/21 77/2 80/17 80/17 82/16 82/17 83/11 84/12 84/20 85/1 86/23 91/17 92/21 97/10 97/13 97/18 97/18 109/18 118/6 119/13 122/1 123/15 123/16 131/12 134/10</p> <p>which [47] 2/2 2/16 2/20 2/23 3/5 3/6 4/10 6/16 9/4 13/6 17/19 18/15 20/9 20/15 21/11 22/19 23/22 32/15 35/15 41/9 42/6 43/8 47/10 48/6 48/7 48/10 54/4 55/22 57/2 59/19 62/6 63/3 64/25 66/7 67/9 71/21 76/13 77/8 78/9 93/7 94/16 96/6 103/15 127/17 130/11 132/9 135/7</p> <p>while [1] 25/15 whilst [6] 47/13 60/23 85/15 89/18 99/17 117/6</p> <p>who [23] 1/13 2/21 4/4 11/13 19/16 19/21 19/25 33/6 35/4 51/9 57/23 59/4 64/5 64/14 84/4 88/6 94/9 115/15 118/9 118/16 119/20 120/24 122/21</p> <p>who's [1] 64/9 whole [2] 46/20 111/12</p> <p>whom [1] 107/9 whose [1] 59/17 why [30] 8/6 9/3 10/5 10/6 14/11 42/3 42/5 43/8 46/20 53/6 53/19 62/21 66/3 71/20 71/23 72/10 78/8 87/7 89/23 90/3 94/12 102/19 103/24 105/19 108/4 112/9 117/13 119/18 126/5 128/7</p> <p>wider [1] 65/7 will [24] 4/23 5/9 13/2 13/11 30/25 32/1 32/12 34/15 40/11 40/14 40/15 40/20 71/13 72/11 73/18 83/22 87/8 87/11 87/18 89/16 111/12 114/4 114/19 116/9</p> <p>Williams [15] 25/20 25/22 25/25 26/1 52/19 57/4 57/8 65/19 71/10 73/11 88/2 90/14 109/1 131/5 138/10</p>
--	---	---	---	---

<p>W</p> <p>Williams's [1] 67/9</p> <p>willing [3] 87/17 96/7 96/19</p> <p>willingness [4] 96/3 96/5 96/8 116/13</p> <p>window [4] 117/16 118/21 120/6 134/21</p> <p>wish [1] 32/14</p> <p>withdrawal [1] 132/13</p> <p>withheld [1] 13/11</p> <p>within [11] 6/19 6/20 6/21 11/18 14/4 14/11 29/23 114/21 114/24 115/10 120/10</p> <p>without [4] 13/10 13/23 53/25 101/6</p> <p>WITN0007001 [2] 11/10 11/11</p> <p>WITN0015001 [1] 60/11</p> <p>WITN0115001 [3] 53/11 67/10 71/11</p> <p>WITN0117010 [1] 31/8</p> <p>witness [49] 5/5 16/4 18/12 18/25 19/2 19/8 19/9 19/11 22/2 25/20 26/5 30/17 33/23 35/22 39/16 39/20 41/20 42/10 42/12 42/16 43/20 44/16 44/18 46/19 46/25 50/21 52/22 54/9 54/13 55/2 55/4 56/9 56/12 56/25 57/22 62/1 62/13 64/13 65/8 67/10 74/3 74/7 76/5 78/23 100/18 105/4 112/11 121/23 136/3</p> <p>witnessing [1] 92/22</p> <p>won't [4] 71/19 72/19 73/22 83/17</p> <p>word [2] 2/10 8/8</p> <p>words [1] 130/24</p> <p>work [6] 24/16 26/11 26/14 84/18 116/14 129/10</p> <p>worker [1] 115/3</p> <p>working [5] 8/5 26/17 79/24 80/2 115/2</p> <p>would [210]</p> <p>wouldn't [18] 11/1 23/17 49/6 49/14 49/24 56/21 70/3 70/17 82/15 83/25 100/25 101/3 102/24 109/22 111/1 116/16 134/8 137/1</p> <p>wouldn't it [1] 134/8</p> <p>write [6] 25/7 74/24 111/12 111/14 111/25 118/8</p> <p>written [7] 18/25 19/5</p>	<p>19/12 38/10 38/17 67/2 67/17</p> <p>wrong [3] 4/21 121/18 123/12</p> <p>wrote [1] 126/17</p> <hr/> <p>Y</p> <p>yeah [104] 1/12 8/15 9/25 11/7 15/22 16/1 16/7 17/4 17/15 22/7 22/20 25/6 25/9 25/13 27/11 33/19 37/15 37/20 39/22 41/22 43/17 43/24 45/18 48/23 49/25 52/13 56/16 57/3 58/2 58/7 58/21 62/4 63/19 65/11 65/15 68/9 68/14 68/14 68/16 69/4 69/10 69/18 71/23 72/2 72/2 72/14 72/22 73/3 73/3 73/5 75/20 76/7 78/11 81/2 84/10 89/8 91/16 93/9 96/9 96/9 98/20 100/1 100/1 100/5 100/7 103/6 103/7 104/4 104/12 104/12 105/11 105/16 106/8 106/10 106/21 106/23 109/6 110/5 110/16 111/13 111/16 111/21 112/7 113/15 114/8 114/18 114/23 121/4 121/16 122/13 123/7 123/13 126/9 127/1 132/24 134/9 135/11 135/14 136/3 136/18 137/8 137/11 137/13 137/13</p> <p>year [2] 17/7 26/14</p> <p>years [2] 8/5 53/18</p> <p>yes [313]</p> <p>yet [3] 44/3 74/6 76/8</p> <p>you [704]</p> <p>you typically [1] 35/1</p> <p>you'd [9] 4/17 54/12 58/17 73/6 77/12 89/3 89/21 109/14 134/25</p> <p>you'll [2] 4/15 102/5</p> <p>you're [30] 2/17 5/6 20/5 20/10 22/12 29/10 31/24 36/9 41/24 45/4 45/14 52/3 58/4 60/24 64/8 69/12 70/16 75/16 78/11 102/7 102/7 117/14 118/17 119/1 119/22 121/5 122/15 126/15 126/23 127/14</p> <p>you've [37] 5/11 8/18 13/23 23/21 23/22 36/18 36/19 44/12 44/12 45/9 46/23 48/12 50/10 52/25 53/3 56/11 59/9 59/10 59/11 65/23 74/13</p>	<p>84/10 85/10 92/5 92/13 104/13 106/15 113/6 116/2 119/24 120/1 120/4 120/4 129/9 130/19 131/11 134/22</p> <p>young [4] 7/11 22/17 50/17 97/4</p> <p>your [156]</p> <p>yourself [4] 15/11 15/20 46/1 113/10</p> <hr/> <p>Z</p> <p>zero [2] 103/17 112/21</p> <p>zeros [1] 112/22</p> <p>zones [1] 124/19</p> <p>zoom [1] 107/1</p> <p>zopiclone [2] 54/5 76/10</p>		
---	---	--	--	--