

Tuesday, 28 April 2026

1  
 2 (1.59 pm)  
 3 **THE CHAIR:** Mr Carr.  
 4 **MR CARR:** Chair, the next witness is Dr Burri.  
 5 **THE CHAIR:** Yes.  
 6 **DR BILAL AHMAD BURRI (affirmed)**  
 7 **Questioned by MR CARR**  
 8 **THE CHAIR:** Yes, Mr Carr.  
 9 **MR CARR:** Can we have your full name, please.  
 10 **A.** Sorry?  
 11 **Q.** Your full name, please.  
 12 **A.** Yes, my name is Bilal Ahmad Burri.  
 13 **Q.** You have prepared a witness statement for this Inquiry,  
 14 haven't you, dated 28 November 2015 -- sorry, 2025.  
 15 **A.** That's right.  
 16 **Q.** Before confirming the contents of that statement, there  
 17 are some corrections you wish to make.  
 18 **A.** That's right.  
 19 **Q.** The first is page 12 at paragraph 26.  
 20 **A.** Yes, that's right.  
 21 **Q.** The correction you wish to make is what?  
 22 **A.** It's the third line, where there is a capital word say,  
 23 "AND" I wanted to put it "or and", but it was, like,  
 24 a typo, and "or" was missing.  
 25 **THE CHAIR:** Sorry, so it's "and/or" or just "or"?

1

1 those events?  
 2 **A.** Yes, please.  
 3 **THE CHAIR:** Thank you.  
 4 **MR CARR:** Then the final correction, as I understand it,  
 5 it's your paragraph 141 at page 57.  
 6 **A.** Yes.  
 7 **Q.** The correction you wish to make is what?  
 8 **A.** I want to make correction of the last line in paragraph  
 9 where it says:  
 10 "I was aware of the discussion CCO had with VC's  
 11 mother about the concern..."  
 12 So here I want to add "I was not aware". So I was  
 13 intending to write "not" but it was typo or whatever, so  
 14 "I was not aware".  
 15 And may I say there was one more as well?  
 16 **Q.** Yes, where is that?  
 17 **A.** Paragraph 113.  
 18 **Q.** Page 46?  
 19 **A.** Yes. And the line I want to change is the second line  
 20 where I'm saying:  
 21 "There were now new suggestions made by the voices  
 22 to him".  
 23 It's actually, I was intending to say: "There were  
 24 no new suggestions". So somehow a 'W' added in makes it  
 25 "now". So "No new suggestions".

3

1 **A.** Yes. "Or" and "and", both.  
 2 **THE CHAIR:** All right, thank you.  
 3 **MR CARR:** The second correction, as I understand it, you  
 4 wish to make is at paragraph 75 which is on page 30.  
 5 **A.** Yeah. That's right.  
 6 **Q.** What's the correction you wish to make here?  
 7 **A.** So the correction I want to make is when I was writing  
 8 the statement with the first arrest on 23 May and the  
 9 second arrest, in the first arrest, I basically -- the  
 10 two events, I mixed them up. So basically the first  
 11 arrest by the police after he damaged the front door and  
 12 tried to enter the property, the resident of that  
 13 property had to flee. So this was the second -- this  
 14 was the second arrest, but I put the chronology of  
 15 events in the first arrest instead of in the second one.  
 16 **Q.** So if we look, Dr Burri, at the first bullet point under  
 17 paragraph 75, that second sentence, are you saying that  
 18 shouldn't be there, it should be elsewhere?  
 19 **A.** Yes.  
 20 **Q.** It should be where?  
 21 **A.** In the second arrest. But when it goes to the second  
 22 arrest where I am talking, I put event of the first  
 23 arrest as the basis for second arrest. So these two  
 24 events got mixed up.  
 25 **THE CHAIR:** So shall I just simply reverse the order of

2

1 **Q.** Is that the last of your corrections?  
 2 **A.** That's right.  
 3 **Q.** Subject to those corrections, is this statement true to  
 4 your best knowledge and belief?  
 5 **A.** Yes, it is.  
 6 **Q.** If we can move on, then, please, to your evidence.  
 7 Professionally you're a Consultant Psychiatrist, aren't  
 8 you?  
 9 **A.** Yes.  
 10 **Q.** But between August 2019 and August 2022, you were  
 11 a junior doctor working at the Nottinghamshire  
 12 Healthcare NHS Foundation Trust?  
 13 **A.** That's right.  
 14 **Q.** You were undertaking specialty training?  
 15 **A.** That's right.  
 16 **Q.** Your placement for specialty training year five was at  
 17 the Stonebridge Centre?  
 18 **A.** That's right.  
 19 **Q.** You were working as part of the EIP team for that year?  
 20 **A.** That's right.  
 21 **Q.** You worked from 5 August 2020 to 8 July 2021.  
 22 **A.** That's right.  
 23 **Q.** I said the EIP team, the EIP team is the Early  
 24 Intervention in Psychosis team?  
 25 **A.** That's right.

4

1 Q. In that period, you saw VC on five occasions?  
 2 A. That's right.  
 3 Q. September 2020?  
 4 A. That's right.  
 5 Q. November 2020?  
 6 A. That's right.  
 7 Q. December 2020?  
 8 A. That's right.  
 9 Q. February 2021 and March 2021?  
 10 A. That's right.  
 11 Q. We will come on to today's appointments in due course.  
 12 If we start, please, with an explanation of what the EIP  
 13 team does and the work there. If we can look at that  
 14 document NHFT0000460, and this is the "Operational  
 15 Policy", isn't it for the EIP team?  
 16 A. That's right.  
 17 Q. Page 7 of that document sets out the core features of  
 18 the service model.  
 19 A. Yes.  
 20 Q. And if you can summarise, referring to this document as  
 21 necessary, the main aims of the work of the EIP team.  
 22 A. Yeah. So the main aim of EIP team as the name indicate,  
 23 Early Intervention Psychosis. It means that the main  
 24 aim is to provide early intervention in cases which are  
 25 suspected or proven cases of psychosis.

5

1 go to page 6, this is your paragraph 15. You set out in  
 2 your statement the different roles of members of the  
 3 team.  
 4 A. Yeah.  
 5 Q. The first bullet point there is "Community Consultant  
 6 Psychiatrist" and you describe the Consultant  
 7 Psychiatrist as "ultimately responsible for the care  
 8 provided to the patient."  
 9 What do you mean by that, "ultimately responsible"?  
 10 A. So that means that the consultant, being the most senior  
 11 medical clinician in the team, is ultimately responsible  
 12 for the oversight of the treatment which is provided to  
 13 the patients.  
 14 So it means that they are there to provide that  
 15 medical leadership, guidance, steer up(?) the treatment  
 16 and the management that overall the patient received.  
 17 Q. In VC's case, who was the Consultant Psychiatrist who  
 18 had ultimate responsibility?  
 19 A. It was Dr Tuhina Lloyd.  
 20 Q. The next bullet point on that page sets out the role of  
 21 junior doctors or trainee doctors, and that's the  
 22 paragraph that applies to what you were doing.  
 23 A. Yeah.  
 24 Q. And your role was to discuss patients with consultants  
 25 during weekly supervisions, at MDTs, and you could also

7

1 So that means -- so they receive, you know,  
 2 assessment and detection of their possible psychosis  
 3 within -- as early. They've been assessed and then they  
 4 start their treatment within two weeks of their  
 5 referral. It means that, so the model of EI stands on  
 6 the gold standard set by NICE Guidelines; it means that  
 7 they are put on a treatment pathway for psychosis that  
 8 includes provision of antipsychotic medication, then to  
 9 offer them therapy that includes cognitive behavioural  
 10 therapy and also the family therapy, and then provision  
 11 of a dedicated care coordinator.

12 That means that every patient in EI, they go on  
 13 a CPA pathway and then there is also support for their  
 14 vocational and social services needs and also the carer  
 15 assessment and, yeah.

16 So that's in, like, in brief the kind of work that  
 17 EIP team done with the patients.

18 Q. And in terms of forms of treatment you've touched upon  
 19 it, but it will include medication?

20 A. That's right.

21 Q. Therapy?

22 A. That's right.

23 Q. And then social support?

24 A. That's right.

25 Q. If we look at your witness statement, WITN0337001, and

6

1 talk informally to consultants.

2 A. Yes, that's right.

3 Q. If we go to page 7, the second bullet point "Nurses",  
 4 you describe that:

5 "[They] Act as care coordinators and provide regular  
 6 nursing reviews ..."

7 At the time that you were working at EIP, who was  
 8 VC's care coordinator?

9 A. At the time when I was working, it was Ms Claudia  
 10 Birtles.

11 Q. If we go forward, please, to page 27 of your statement.  
 12 Paragraph 66, you describe meeting with Dr Lloyd, so  
 13 that's the consultant you've described with ultimate  
 14 responsibility --

15 A. Yeah.

16 Q. -- every week for one hour, so that was your dedicated  
 17 supervision time. And you refer to discussing VC from  
 18 time to time.

19 A. That's right.

20 Q. Now Dr Lloyd worked part time, didn't she, at EIP?

21 A. If I correctly remember, Dr Lloyd works there three and  
 22 a half days but I can't be absolutely sure, but yes.  
 23 She was not full time, but yeah, I think it's three and  
 24 a half days, if I correctly remember.

25 Q. Did the fact that she was not full time cause any

8

1 obstacles to your work and your ability to be  
 2 supervised?  
 3 **A.** No.  
 4 **Q.** When she was not working, who supervised you?  
 5 **A.** If I correctly remember, she would finish at 3.00 on  
 6 Thursday, so that means two hours on Thursday and the  
 7 whole day of Friday.  
 8 So there was another consultant who works in the  
 9 City South LMHT who we all share the same office space,  
 10 myself, Dr Tuhina Lloyd and another consultant who works  
 11 for the CMHT, there was -- he -- that consultant sat  
 12 there so I could reach to that consultant but whether  
 13 this was a formal arrangement between the Dr Lloyd and  
 14 that consultant, I'm not sure.  
 15 **Q.** Do you recall who that consultant was?  
 16 **A.** Sorry, I can't recall the name.  
 17 **Q.** Do you recall if you ever had to discuss VC with that  
 18 consultant?  
 19 **A.** Not that I can recall of.  
 20 **Q.** If we go back in this statement, please, to page 15,  
 21 it's paragraph 36. A few moments ago I took you to the  
 22 section describing the work of junior doctors. Here at  
 23 paragraph 36 you describe the role of outpatient  
 24 appointments, and in respect of VC it was you who was  
 25 conducting outpatient appointments while you were at  
 9

1 starts on -- forgive me, the sixth line, describes that:  
 2 "These appointments could be anything from a few  
 3 weeks to [a] few months."  
 4 How would you determine where, on that scale of  
 5 weeks to months, the interval in seeing a patient would  
 6 be?  
 7 **A.** Yeah, so it depends upon the very much individual  
 8 profile of the patients about their symptoms, about  
 9 their illness, what are their issues. So there is  
 10 a degree of flexibility and it's up to the medical  
 11 person who is seeing how often they want to see and  
 12 normally, when you see the patient at the end of that  
 13 review, you decide that when you next want to see so  
 14 that that patient can be booked. So there is a degree  
 15 of flexibility, you can decide to see them maybe after  
 16 four to six weeks, after couple of months, three months,  
 17 so that's why I put it.  
 18 **Q.** When you see patients at outpatient appointments, do you  
 19 ever, Dr Burri, give consideration of what that patient  
 20 is doing online, so the types of things that they are  
 21 looking at on their phone?  
 22 **A.** Not specifically we check with every patient what  
 23 they're doing online, but I think, unless there's  
 24 specific information comes to your light, you know, that  
 25 there is something that is happening, then you can  
 11

1 EIP, wasn't it?  
 2 **A.** That's right.  
 3 **Q.** You describe there the purpose of an outpatient  
 4 appointment. Can you summarise what the purpose of  
 5 those reviews was?  
 6 **A.** Yeah. So the main purpose of outpatient appointment is  
 7 to provide medical oversight and medical input for the  
 8 management of the patient.  
 9 So it means that if it's a new assessment, then you  
 10 see the patient's history, mental state examination, and  
 11 give your impression about, you know, what are the, you  
 12 know, illness and what are the issues. Give your input  
 13 for medication. Also, you know, provide a medical  
 14 leadership in terms of overall trajectory of the  
 15 management plan where we -- where things are heading or  
 16 where we want it to be, and that's basically, in  
 17 a nutshell, the idea of outpatient appointment.  
 18 **Q.** It's a medical review, so it's a time when the patient  
 19 sees the doctor.  
 20 **A.** Yes.  
 21 **Q.** And they're face-to-face meetings?  
 22 **A.** Yes, at that time, although it was -- the country was in  
 23 lockdown, but in, if we talk about VC, I always saw VC  
 24 face-to-face.  
 25 **Q.** The fifth line of this paragraph, that sentence which  
 10

1 specifically ask and make a bit of a digging with the  
 2 patient.  
 3 But since, in the new, like, social media time and  
 4 everything now, I normally ask my patients, you know,  
 5 "Do you use social media?" Because that is one way of  
 6 communicating with the outside world. So if the people  
 7 are using social media, although they are not going  
 8 outside to meet people and everything, that tells you  
 9 that they are in some sort of a -- yeah. But generally,  
 10 that is not something you ask as a standard question.  
 11 **Q.** So now you tend to check on whether a patient uses  
 12 social media. That's your current practice?  
 13 **A.** Yes, especially when, when I see patients with  
 14 depression, for example. So one feature of depression  
 15 is that there is a -- patients tend to isolate  
 16 themselves and they go in a bit of a withdrawn phase.  
 17 So one benefit of social media and the modern technology  
 18 is that despite maybe you don't need to go out and meet  
 19 with people, you can still be in communication.  
 20 So it just gives you a bit of an idea that although  
 21 they are not going outside but they are in a way of  
 22 communicating with their friends, their families, or --  
 23 so that is basically the reason now I ask patients this  
 24 question.  
 25 **Q.** So that's to check on whether a patient is keeping up  
 12

1 social contacts --  
 2 A. Yes.  
 3 Q. -- with people. My question is aimed more as to whether  
 4 you enquire what a patient might be looking at online.  
 5 There's lots of harmful content online. Is that  
 6 something you ever explore with patients?  
 7 A. Yeah. So if I have a particular risk in my mind that  
 8 that needs a bit of an enquiry, then I would ask the  
 9 patients.  
 10 Q. So it would need to be something that would be  
 11 flagged --  
 12 A. Yes.  
 13 Q. -- to you in order for you to explore it?  
 14 A. Yes.  
 15 Q. So summarising, then, your role as a doctor in this  
 16 team, your involvement is going to be seeing patients at  
 17 outpatient appointments, attending supervision meetings  
 18 where you discuss with your consultant your --  
 19 A. That's right.  
 20 Q. -- caseload, and attending right Multi-Disciplinary Team  
 21 meetings?  
 22 A. That's right.  
 23 Q. Now, in respect of your time at EIP, it's right, isn't  
 24 it, no records were kept of MDT meetings?  
 25 A. If I recall, regarding the -- if the question is about

13

1 A. If I recall that it was supposed to be the care  
 2 coordinator who bring the patient, that they were  
 3 supposed to write it down in the patient's progress  
 4 notes and then, equally, sometimes if I correctly  
 5 recall, the EI manager, she also take some notes on the  
 6 minutes in her laptop. So but I -- I'm not sure the  
 7 extent of, you know, recording the minutes of the MDT.  
 8 Q. For the purposes of preparing for this hearing you've  
 9 been given, haven't you, copies of VC's medical records?  
 10 A. Yes.  
 11 Q. In the time that you were at the EIP, do you see in  
 12 those records any notes of the MDT meetings you  
 13 attended?  
 14 A. No, I've not seen, except one entry.  
 15 Q. So far as your supervision with Dr Lloyd, your weekly  
 16 one hour of supervision, again, there'd be discussion of  
 17 patients, there was discussion of VC.  
 18 A. Yes.  
 19 Q. Decisions were made about VC.  
 20 A. Yes.  
 21 Q. No records were kept of those discussions or decisions?  
 22 A. Yes, so the discussion that I made during my dedicated  
 23 supervision, that supervision was a very dedicated  
 24 session for me, as part of my training. So the idea of  
 25 that supervisions minutes was not to basically discuss

15

1 recording the MDT meetings, so how it was done at that  
 2 time, because obviously when I joined the team in  
 3 August, so you gather for the MDT, and then there was  
 4 a board with all patients' names, their initials or  
 5 whatever, and under the names of the relevant CPNs and  
 6 the care coordinator, and then the care coordinator will  
 7 bring the case, discuss it, and yeah, that's how the  
 8 cases were discussed in MDT.  
 9 Q. Thank you. That explains the MDT process.  
 10 A. Yeah.  
 11 Q. Case coordinator would raise it?  
 12 A. Yes.  
 13 Q. You could give advice on the patients being raised?  
 14 A. Yes, that's right.  
 15 Q. The consultant could give advice?  
 16 A. That's right.  
 17 Q. Other nurses in the team could give advice?  
 18 A. Yes.  
 19 Q. Decisions could be made?  
 20 A. That's right.  
 21 Q. My question was about recording of those discussions and  
 22 decisions at MDT.  
 23 A. Yeah.  
 24 Q. At this time, at the EIP in Stonebridge Centre, no  
 25 written record was kept of MDT meetings, was it?

14

1 patients as such; it was whatever I want to bring it in  
 2 that supervision.  
 3 So during those supervisions we discuss lots of  
 4 issues, including patients as well and, essentially, if  
 5 there is anything different that I have already put it  
 6 in the patient's notes, then perhaps I would go back and  
 7 put it in the notes that, you know, like I put it  
 8 something, and then discuss with Dr Lloyd. Dr Lloyd  
 9 said "Do this in a different way" and then I would put  
 10 otherwise, that information, in terms of, like, for VC,  
 11 was already well documented in the notes -- until there  
 12 is a different plan or different thing that Dr Lloyd  
 13 propose, then I would go and put it in the patient  
 14 notes.  
 15 **THE CHAIR:** Dr Burri, just a moment. I think you let your  
 16 voice drop. We've got to hear what you say.  
 17 **THE WITNESS:** Oh sorry, sorry.  
 18 **THE CHAIR:** I know you've got microphones, but it's also  
 19 that the note takers have to hear what you say, all  
 20 right?  
 21 **MR CARR:** Is it a fair summary, Dr Burri, of what you've  
 22 just explained that where at supervision your  
 23 consultant, in this case Dr Lloyd, says something about  
 24 a patient which was different --  
 25 A. Yes.

16

1 Q. -- to the approach you were taking, you would put it in  
2 the notes.  
3 A. Yes.  
4 Q. But if she was in agreement with your approach, you  
5 wouldn't.  
6 A. That's right.  
7 Q. You confirmed a few moments ago that for the purposes of  
8 preparing for this hearing you've looked at VC's notes  
9 and, apart from one entry, you can't see in those notes  
10 records of the MDT meetings. Was it your belief and  
11 understanding at the time you were working at the EIP  
12 that records were being kept of the MDTs?  
13 A. Yes, that was my belief at that time.  
14 Q. Now, you first saw VC on 7 September.  
15 A. That's right.  
16 Q. A few days before you saw him, a Summary & Care Plan was  
17 completed by his care coordinator Claudia Birtles.  
18 A. *(The witness nodded)*.  
19 Q. It's on 1 September. We will get that document up.  
20 It's NHFT0000202. Would you have had any involvement in  
21 the preparation of this document?  
22 A. No, I was not involved.  
23 Q. This is the first page. In that first box titled or  
24 under the heading "Summary/Formulation", about six or  
25 seven lines up from the bottom it states:

17

1 and so there is a degree of flexibility between CPN and  
2 the patient that how often they want to see.  
3 Q. If we look at page 3 of this care plan. We might need  
4 to zoom out slightly. We can see there are a number of  
5 entries, the top two-thirds, roughly, of the page under  
6 the heading "Mental health", bottom of the page under  
7 the heading "Risks and safety". It is the sections  
8 dealing with the responsibility that I want to ask you  
9 about. So in both of these two mental health and risk  
10 and safety, listed as being responsible is Dr Lloyd.  
11 A. Yeah.  
12 Q. Now during the time that you were at EIP, it was only  
13 you seeing VC, wasn't it? Dr Lloyd didn't see --  
14 A. Yes, that's right.  
15 Q. And so is the position that it was your responsibility  
16 in this section, or did the responsibility remain with  
17 Dr Lloyd as the consultant?  
18 A. Yeah. So I think I would say, when this named person  
19 like CPN and Dr Lloyd, because it's ultimately  
20 consultant who is, you know, the ultimate medical leader  
21 in the team, and the trainees like me, when I joined the  
22 team. So trainees comes and goes, sometimes trainees  
23 are taken as supernumerary in the team itself, so they  
24 work under the consultant supervision and under their  
25 wings. So ultimately, as a responsible person who

19

1 "[VC] is currently meeting with his CCO [that's care  
2 coordinator] on a 1-2-week basis."  
3 Where a Summary & Care Plan indicates a frequency of  
4 contact with a care coordinator, who's responsible for  
5 ensuring that regularity of contact?  
6 A. So I think the frequency of contact by care coordinator  
7 with a particular patient is -- can be very varied. It  
8 depends on the individual patients, their issues. So it  
9 can be very varied. There is no, like, rigid rules  
10 around it. So it can be quite flexible. And so it is  
11 usually what I have observed at that time, it was  
12 usually decided between the care coordinator and the  
13 patient how often they both want to see each other,  
14 obviously.  
15 So from my side at that time, there was no, like,  
16 the idea of how often patients will be seen was  
17 discussed with me, or got my approval that whether this  
18 is to be seen every week or two weeks. So that is in  
19 general, I would say, how things were work at that time.  
20 Q. So is it for the nurse to determine how frequently care  
21 coordinator visits will be?  
22 A. Yes. Between the nurse and the patient, because  
23 sometimes the patients, they give their input as well at  
24 how often they want to be seen, because sometimes it can  
25 be overwhelming for one patient and not for the other,

18

1 oversee, maybe I can just guess that that is the reason  
2 that Dr Lloyd name was written, that it was ultimately  
3 Dr Lloyd but not myself who actually saw the patient.  
4 Now let me give you an example. So once I left the  
5 team and I was replaced by another trainee, to the best  
6 of my knowledge she was there for six months. So maybe  
7 that is something in the CPN's mind that the person  
8 responsible should be the consultant rather than the  
9 person who is seeing the patients and more sort of  
10 temporary basis because they comes and goes.  
11 Q. If we go back to your witness statement, please,  
12 WITN0337001, page 8. Paragraph 16, top paragraph on the  
13 page. You're describing there the process that occurs  
14 once somebody is referred to your team. You describe  
15 that:  
16 "... the team or the assessor would usually look at  
17 the referral letter to have the initial thoughts and  
18 concerns raised by the referrer. After this, one  
19 usually would go and take a good look and read at  
20 available records on our system ..."  
21 And you finished that paragraph referring to RiO.  
22 Now to be clear, did everybody at the EIP have full  
23 access all records on RiO?  
24 A. Yes, they should.  
25 Q. You, on 7 September, were undertaking the first medical

20

1 appointment that EIP had with VC.  
 2 **A.** That is right.  
 3 **Q.** So this need to go and look at the referral letter, look  
 4 at the concerns, have a good look and read of available  
 5 records, that was a job for you?  
 6 **A.** That's right.  
 7 **Q.** If we can look at some of the entries in the records,  
 8 please, it's NHFT0000168. We need to go forward to  
 9 page 119. We can see on this page, it's 1 August, so  
 10 it's just after VC has been discharged from the second  
 11 admission.  
 12 If we look in the middle of the entry on that page,  
 13 you can't see, the top line is on the previous page it's  
 14 1 August 2020, 3.35 pm, an entry by Clive Chimbi, but in  
 15 the middle of that page it refers to the Crisis Team  
 16 arriving that evening and when they arrive, VC still has  
 17 not taken his medication; do you see that entry?  
 18 **A.** Yes, I see.  
 19 **Q.** He had been prescribed aripiprazole.  
 20 **A.** That's right.  
 21 **Q.** He had, whilst he was an inpatient, been taking it in  
 22 the morning.  
 23 **A.** Sorry, what do you say?  
 24 **Q.** He had been taking his dose of aripiprazole in the  
 25 morning --

21

1 the 5 August entry, that does document, doesn't it, VC  
 2 taking his medication in front of the Crisis worker?  
 3 You can see it in the middle "Foods and fluids" and  
 4 medications.  
 5 **A.** Oral taken. Yes, I can see it.  
 6 **Q.** So a summary of those four Crisis visits, is that VC was  
 7 only seen taking his medication on one of the four?  
 8 You say in your statement, it's WITN0337001, 7001,  
 9 at page 33, paragraph 80, that you were not aware of  
 10 that 1 August -- so the Crisis visits we just looked at.  
 11 **A.** Yeah.  
 12 **Q.** About four lines down:  
 13 "I was not aware of this episode".  
 14 **A.** Sorry, I was?  
 15 **Q.** "Not aware of this episode."  
 16 **A.** Yes, I was not aware of this episode.  
 17 **Q.** You set out, I've already asked you about it, but it may  
 18 be an indication of reluctance with medication --  
 19 **A.** Yeah.  
 20 **Q.** -- straight after the second discharge.  
 21 At the bottom of the page, paragraph 82, you say  
 22 you:  
 23 "... do not recall that [you] have seen those  
 24 observations in the record made by [the Crisis Team]."  
 25 **A.** That's right.

23

1 **A.** Yeah.  
 2 **Q.** -- hadn't he, it was a morning dose?  
 3 **A.** Yes, that's right.  
 4 **Q.** So looking at this morning entry, is this a point of  
 5 concern, an early sign of non-compliance, that on the  
 6 first day, as it were, post-discharge, it's late  
 7 afternoon, potentially evening, and VC hasn't taken his  
 8 medication?  
 9 **A.** Yes, so I don't recall if I have seen that entry at that  
 10 time when I was reviewing the new record, but yes, this  
 11 is concerning.  
 12 **Q.** Then if we look at page 122, please, this is a visit on  
 13 3 August by the Crisis Team. They visit at 10.00 am.  
 14 Now, at this stage VC asserts that he has taken his  
 15 medication but he's not seen, is he, taking his  
 16 medication at this appointment?  
 17 **A.** Yeah.  
 18 **Q.** Then to the next page, page 123, 4 August, we see, third  
 19 line down, Crisis Team visit again in the morning and VC  
 20 says that he has already taken his medication.  
 21 The next couple of sentences set out that it's  
 22 explained to him the purpose of Crisis Team visits and  
 23 he says that he'll wait for the Crisis staff to arrive  
 24 the next day.

25 Then finally in this sequence at page 124, please

22

1 **Q.** Now, as you described a few moments ago, you were  
 2 undertaking the first medical appointment of the EIP  
 3 team with VC, there was an obligation on you to have  
 4 a good read of the records.  
 5 **A.** Yeah.  
 6 **Q.** These were important records because these were the  
 7 records following the second discharge shortly before  
 8 you were seeing VC.  
 9 **A.** Yeah.  
 10 **Q.** These are records that you should have looked at.  
 11 **A.** Yeah, they were all important records.  
 12 **Q.** Had you considered those records, and had you seen that  
 13 evidence, would it have impacted, do you think, your  
 14 assessment of VC and his medication compliance?  
 15 **A.** Yeah. So when -- as I put it in my written statement as  
 16 well, so when I saw VC on 7 September, that was my first  
 17 encounter. VC was already known to the team for the  
 18 last three months, so it was already a running  
 19 relationship with the team. I put it in my written  
 20 statement that the documents that I clearly remember  
 21 that I reviewed was the second discharge summary, and  
 22 MHA Assessments, and a summary of the care plan, the one  
 23 you show.  
 24 Other documents, whether I have seen it or not,  
 25 I don't recall. I might have seen, I might not have

24

1 seen. But when it comes to my understanding about VC's  
2 non-concordance and issues with the non-compliance,  
3 I know that after the first admission he stopped taking  
4 medication straight away, after two weeks that led to  
5 the second admission.

6 So I was already aware that there is a risk of  
7 non-compliance on VC's side, and that's what put it in  
8 my notes as well, when I was putting, you know, the  
9 7 September that there is -- and in fact the impression  
10 I'm putting there that there is a risk of non-compliance  
11 on the horizon. Because I was aware of this one.

12 So while I don't recall whether I have seen those  
13 entries, individual entries, made by Crisis, but as  
14 a whole I was aware of that there is a history of  
15 non-compliance and that non-compliance led to quick  
16 relapse and very quick admissions, so -- that was my  
17 understanding at that time about VC.

18 And sorry, one more thing if I may add. Obviously,  
19 as I said that VC was with the team for the last  
20 three months, I mean that he was referred at the end of  
21 first admission. So it was at the end of May, June. So  
22 June, July, August and then September.

23 So while, you know, one can see as much a record,  
24 you know, ideally, but how much I could have seen,  
25 perhaps I could read each and every entry, but that was

25

1 **Q.** For the purposes of preparing for your evidence, you  
2 have seen, haven't you, a picture, a photograph, of the  
3 damage VC caused to the door of that property?  
4 **A.** No, I have not seen that picture.  
5 **Q.** If we go, please, to NOCC0000045, this is an AMHP report  
6 of 25 May 2020. If we look at page 2, the top box,  
7 final paragraph, it describes, doesn't it, how a:  
8 "... terrified ... female occupant ... jumped out of  
9 the first-floor window."

10 After VC broke into her property.

11 **A.** Yeah.

12 **Q.** Were you aware of that incident at the time of your 7  
13 September appointment?

14 **A.** Yeah, so when I say that I read an MHA assessment, I was  
15 referring to four MHA assessments that were done. The  
16 first two was done by Dr Sadraei and Dr Malik, and the  
17 other two assessments that I read at that time was  
18 Dr Seedat and Dr Manzar. So I was referring to those  
19 four MHA assessments itself by the Section 12 approved  
20 doctor that I read, and I was aware of that incident  
21 that a female tried to flee the place.

22 **Q.** So rather than the EIP reports, you read the doctors'  
23 notes of the assessments?

24 **A.** Yes, the MHA assessments. So that's why I'm positive  
25 that I read those documents. I can recall from my

27

1 probably not something that is possible to do.

2 **Q.** Even if not reading each and every entry, wouldn't it be  
3 important to read the RiO entries since the most recent  
4 discharge, so since the discharge from the second  
5 admission, a little over a month before your  
6 appointment?

7 **A.** I saw him on 7 September. So you can see the whole  
8 month of August, and then there must be lots of entries  
9 in the individual patient record, you know, in terms of  
10 the progress notes. So I guess what I'm trying to say  
11 that it was not possible to read each and every line in  
12 those entries. So I reviewed the documents, so I got a,  
13 you know, quite an idea that what it looks like in VC's  
14 case, and then I saw him.

15 **Q.** You stated that you recall -- ahead of seeing VC on  
16 7 September, you do recall considering the mental health  
17 assessment reports?

18 **A.** Sorry, yes, I saw those MHA Assessments.

19 **Q.** If we look at the two of those, please, NOCC0000044.  
20 This is the assessment of 24 May 2020. If we go to  
21 page 2, the top box, second paragraph, it describes,  
22 doesn't it, VC being "arrested for burglary on the  
23 evening of 23rd May after breaking into the flat of  
24 another resident in his apartment block."

25 **A.** Yeah, I can see it.

26

1 memory.

2 **Q.** If we take that down and go back to the medical records  
3 please, NHFT0000168, and if we go to the appointment on  
4 7 September, it's page 133. The start of this entry is  
5 actually on the previous page, 132, right at the about  
6 of that page, confirming your appointment, 7 September,  
7 2.51, originator Dr Bilal Burri; do you see that?

8 **A.** Yes, I can see.

9 **Q.** If we go on to page 133 under the heading "Background",  
10 you set out there that:

11 "[VC] was arrested for criminal damage on  
12 a neighbour flat and was assessed under the [Mental  
13 Health Act] at the Bridewell Police Station in  
14 Nottingham."

15 You go on to say:

16 "[VC] .. expressed concern that the occupant of the  
17 flat was in danger. ... appeared to be presenting with  
18 acute psychotic symptoms ..."

19 **A.** Yeah.

20 **Q.** Now, the background is set out there, isn't it, it is  
21 incomplete, given the information that was available to  
22 you?

23 **A.** Yeah, I'll explain what I said, yeah. So in terms of  
24 background, I-- so when you put background for  
25 a patient, there are obviously loads of information that

28

1 could be there. So I was not writing a detailed  
2 psychiatric report; I was writing a progress notes or an  
3 assessment that I was doing.

4 So when I put the background, I made some, you know,  
5 reference to the events of it in a kind of way that, you  
6 know, give a picture of it, that what was VC's issue?  
7 Like, if you see that I said criminal damage,  
8 neighbour's flat, then I didn't say that actually on the  
9 first MHA he was referred to Crisis Team, he was started  
10 on olanzapine and zopiclone then one hour later what  
11 happened and then second arrest. And then, you know,  
12 how this occupant jump and then the first admission and  
13 then what happened in the first admission, and then  
14 discharge.

15 So basically, because I was writing an entry to --  
16 so I was trying to be as, you know, brief that convey  
17 the message, but equally, I was not putting everything  
18 while actually I was aware of it. That's my  
19 explanation.

20 And if you look at the timing of the entry that I  
21 made, it is 2.51. So it was in my clinic, in outpatient  
22 clinic, mean during a typical outpatient clinic I see  
23 one patient which is for one hour, and then there are  
24 three or four follow-up patients, 30 minutes each.

25 So I saw VC, I think, if I correctly remember,  
29

1 **Q.** What -- you don't need the benefit of hindsight. There  
2 are two points of significance, aren't there, for this  
3 entry. Firstly, this entry in the records forms the  
4 basis for the letter that you then send to the GP.

5 **A.** Yeah.

6 **Q.** The GP needs to know the important information relevant  
7 to the patient's background.

8 **A.** Yeah.

9 **Q.** So if it's missing from here it's going to be missing  
10 from the letter to the GP, isn't it?

11 **A.** Not necessarily, because yeah, this was important letter  
12 because it was coming from me, but there were other  
13 documents where, you know, this information was there.  
14 So there is a possibility that if we look at others,  
15 sometimes people write notes very differently, you know,  
16 some information is missing in one but you find it in  
17 another one.

18 So as far as whether GP was aware of it, whether GP  
19 was just solely relying on this letter, I can't say.  
20 But because the event itself was mentioned in previous  
21 MHAs, previous discharge summaries from the inpatient  
22 unit, and those events have happened in the past very  
23 well documented and this was another encounter in  
24 September which was a different encounter.

25 **Q.** Paragraph 73 of your witness statement, it's page 29 of  
31

1 two o'clock. So you finish patient, 30, 40 minutes,  
2 then you do your entry in the patient record and then  
3 three o'clock there is another patient.

4 So I guess what I'm trying to convey is that when it  
5 comes to the writing part, yes, I could have write, you  
6 know, lot more information, but I was aware of it so  
7 I just give a bit of a hint that what it is that VC's  
8 issues was, and then basically move on.

9 So that's the reason you will see that not all  
10 information is actually mentioned in the background.

11 **Q.** You've mentioned the criminal -- you've referred to  
12 criminal damage, but you've not referred to the fact  
13 that a neighbour jumped from a window and suffered  
14 injury. Wasn't that a more relevant factor to risk in  
15 particular that VC present to those around him?

16 **A.** Yes, I agree that I could have put that event as well,  
17 but I mention it there that the occupant of flat was in  
18 danger, but yes, I could have put that one.

19 **Q.** You say "could have"; should you have put it, reference  
20 to injury to the neighbour?

21 **A.** Again, as I said that, because it's about, you know,  
22 because of the time constraint that what you are putting  
23 there, so sometimes you choose what information you are  
24 putting, but with the benefit of hindsight, yes, perhaps  
25 I could have mentioned that line.  
30

1 the statement. You say, ahead of the appointment --  
2 thank you, page 29, paragraph 73 -- you say:

3 "Before the review on 7th September 2020, I spoke  
4 with VC's CCO ..."

5 But the next sentence you say:

6 "I did not seek any information from VC's nearest  
7 relatives, the police, university or any other third  
8 party because all the information that I needed at that  
9 time was present in the clinical record."

10 **A.** Yeah.

11 **Q.** I just wanted you to explain what you meant by that and  
12 in particular how did you know whether there might or  
13 might not be additional information available from those  
14 third-party sources?

15 **A.** Yeah. So when I saw VC at 7 September, as I said that,  
16 you know, I saw that second discharge summary from the  
17 Highbury. I saw those four MHA assessments and I saw  
18 that summary care plan, and maybe I saw a few others  
19 documents as well which I cannot recall.

20 So based on, at that time, I know that there was  
21 an incident, criminal damage to the door, led to MHA,  
22 not detained then second MHA, detained, stay in the  
23 hospital for two weeks, started on antipsychotic  
24 medication, discharged to Crisis Team and, after  
25 two weeks, stop the medication, got relapse, got  
32

1 admitted in July, stayed there for another two weeks,  
 2 and then discharged and then came to us.  
 3 So I have a, you know, a picture that what were the  
 4 issues preceding to this appointment. And so that's the  
 5 reason I said that at that time, that information was in  
 6 front of me and I already know. So that's why at that  
 7 time I did not felt the need that I should reach out to  
 8 the police or university, or, you know -- and in  
 9 addition to that as my standard practice, I would have  
 10 spoken with the CCO as well, before any review. I don't  
 11 recall that what me and CCO have discussed about in that  
 12 appointment, before that, but that was my standard  
 13 practice.

14 So that's why I said that I have sufficient enough  
 15 information to know what are the issues, what they are,  
 16 and yeah. So that's the reason I said it at that time.  
 17 **Q.** Can we look, please, at document NHFT0015099. This is  
 18 a document published by the Royal College of  
 19 Psychiatrists. It's a good practice guide for the  
 20 assessment of risk to others.

21 If we go to page 7 of this document, please, do you  
 22 see the first bullet point:

23 "Find out all you can to be prepared for the  
 24 assessment"?

25 **A.** Yeah.

33

1 I was -- I can just think of that I must have been  
 2 informed about, you know, whenever there was any contact  
 3 made from the family. So what -- I suppose what I'm  
 4 trying to say is that although on that 7 September I did  
 5 not reach out to the family then and there, because at  
 6 that time my thinking was that I had, you know,  
 7 sufficient enough information to make up my plan, but  
 8 the future reference, you know, families are part of,  
 9 you know, our --

10 **Q.** It was your -- was it your intention to approach the  
 11 family, approach the University, approach the police in  
 12 the future?

13 **A.** Yeah. You know, at that time, on 7 September, I didn't  
 14 reach out. But that option was there for the future.  
 15 If it's needed, then yes, why not. But at that time, on  
 16 7 September, I had, as I said, sufficient information to  
 17 understand what it is.

18 **Q.** If we take that down and go back to the medical records,  
 19 please, NHFT0000168. If we go to page 21, this is an  
 20 entry in the records by Dr Seedat, dated 3 June 2020.  
 21 So it's during VC's first admission. It summarises text  
 22 message conversations and it says at the top there  
 23 between VC and his brother that had been provided to  
 24 Dr Seedat.

25 Did you read this entry in the records, Dr Burri,

35

1 **Q.** Then turning to the next page, page 8, third bullet  
 2 point on that page:

3 "Preparation is crucial and clinicians should try to  
 4 gather information from as many reliable sources as  
 5 possible."

6 Now, in order to implement those principles set out  
 7 in that guide, it would -- and particularly the two bits  
 8 I've just read to you -- it would require you, wouldn't  
 9 it, to seek out information from third parties,  
 10 relatives, police, university.

11 **A.** So on 7 September appointment, it was arranged  
 12 appointment. So I reviewed the notes, as I said in my  
 13 previous answer, and then got a picture of what are the  
 14 issues, what are the possible risks.

15 And after that, because obviously this was a first  
 16 appointment, so as we go along with any new patient and  
 17 it's a new relationship with the team, so you know  
 18 families and the relatives, obviously they are very,  
 19 very important, and they are welcome to, you know, even  
 20 join our reviews as well. So I was open, I was  
 21 approachable if there is, you know, anyone from the  
 22 family or relative wants to reach out to me to speak  
 23 with me or convey something to me, I was there.

24 And then, throughout, the care coordinator and the  
 25 team was in touch with the patient's families and

34

1 ahead of seeing VC?

2 **A.** At that time, no, but I read it now when I was preparing  
 3 for the evidence.

4 **Q.** In addition, in terms of preparing for this hearing,  
 5 you've also been provided with a copy of the document,  
 6 haven't you, setting out the text messages?

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

8 **Q.** You will have seen there are references in those text  
 9 messages, aren't there, to VC saying that he knows he  
 10 can break the heads of the people who are watching him?

11 **A.** Yes, I have seen that.

12 **Q.** Wanting to hurt people permanently?

13 **A.** Yes, I have seen.

14 **Q.** And there's a reference to "thinking about red rum 120  
 15 minutes ago"?

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

17 **Q.** Now, the first question is this: you say you didn't read  
 18 this entry in the RiO records. Why was that?

19 **A.** As I said, that I saw VC for the first time after he was  
 20 already with the team for the last three month, and lots  
 21 of things have happened. You know, two admissions have  
 22 happened, lots of entries were there. So I could not  
 23 possibly read each and every thing in the RiO.

24 **Q.** It's too far to go back, essentially.

25 **A.** Yes, so that's the reason that I didn't see that.

36

- 1 Q. Had you read the summary, and the summary doesn't cover  
2 every text message, does it?
- 3 A. Yeah.
- 4 Q. But had you read this summary by Dr Seedat during the  
5 course that you were treating VC, would it have changed  
6 your management of VC?
- 7 A. I think, in terms of management, I would say, I would  
8 see management in two ways. One is about the management  
9 of their illness itself, I mean medication, therapy, and  
10 all those; and the second is about the risk management.  
11 So when we see any patient, obviously these both are  
12 in our mind. So if you ask me, based on, you know, this  
13 one, this conversation, whether -- you know that the  
14 management of illness itself will have any huge change?  
15 Probably not, because we would still provide the same  
16 management. But in terms of the risk management, where  
17 you are aware of about the risk, yes, that would add,  
18 you know, in the knowledge that he was having, you know,  
19 these quite concerning thoughts.
- 20 Q. Well, I'm just asking about the summary. So is that  
21 based on this summary by Dr Seedat, that would that have  
22 changed your risk management?
- 23 A. It would add our knowledge about the risk. But as far  
24 as the risk management itself is concerned, at that  
25 time, I was aware of the risks involved and I was

37

- 1 It's not on the screen at the moment, but it will  
2 come up in a moment -- yes.
- 3 A. Yes.
- 4 Q. What was that finding based upon? We've looked at the  
5 entries in the Crisis records following the second  
6 discharge when, of the four visits they did, he was only  
7 seen taking medication once.
- 8 A. Yes.
- 9 Q. What was the basis for that finding?
- 10 A. Yeah. So I -- so the positive recall that I can  
11 definitely say was obviously my direct questioning to  
12 the VC, how -- is he taking medication? Answer is yes.  
13 Any side effects? Answer is no. How do you feel about  
14 medication? If you can see this whole paragraph,  
15 because I was aware about that there is a risk of  
16 non-compliance in the recent past, so I spent quite some  
17 time and that's why the whole paragraph is dedicated  
18 around this discussion, because I discussed a lot of  
19 things with him.  
20 So my direct questioning also lead me that yes, he  
21 did not express any negative views about medication. He  
22 was open and in fact he expressed to me his wish for the  
23 future that he wants to have a medication-free trial in  
24 the future. So if a patient --
- 25 Q. I'm going to come on to that in a moment.

39

- 1 vigilant and I know that, you know, what I would be  
2 doing if I see this, this, this. Yeah.
- 3 So I was aware about the risk in terms of, you know,  
4 like risk of relapse and then leads to aggression and  
5 violence, and how that lady have jumped and, you know,  
6 so I was aware of the risks that -- what are the risks  
7 involved. But definitely, you know, any new information  
8 will add to your knowledge and your intelligence about  
9 the patient.
- 10 Q. What about the contents of the text messages themselves?  
11 So if you'd been provided with the document that you've  
12 now reviewed, with those entries that I've referred to,  
13 would that have impacted on your management of VC or  
14 VC's risk?
- 15 A. As I said that, you know, that would add the information  
16 that, you know, because these thoughts were really very  
17 concerning. So in terms of the risk management, that  
18 would add my knowledge.
- 19 Q. Is it something that you would seek to explore with VC  
20 at your appointments, for instance?
- 21 A. Oh yes.
- 22 Q. If we go forward in this document to page 133, and this  
23 is back to the appointment itself of 7 September.  
24 Four paragraphs up from the bottom, you describe VC as  
25 being "compliant with his medication".

38

- 1 A. Sorry.
- 2 Q. Is the answer to the question as to the basis for the  
3 compliance with medication, was it entirely VC's  
4 self-report?
- 5 A. It was one of the -- one of the source that I relied  
6 when I said he's compliant. It's about what patient is  
7 saying, that is "I can". And secondly, I cannot recall  
8 positively how much discussion I had with CCO before  
9 7 September where CCO have expressed any views, what she  
10 think about whether VC is good with medication or not  
11 good with medication, whether we discussed about those  
12 entries which were made by the Crisis colleagues as  
13 well. So I cannot recall that simply on the medication  
14 compliance, what information was conveyed to me.  
15 But when I wrote "he is compliant with the  
16 medication", positively I am relying what he is  
17 reporting, but there is also a possibility that I might  
18 have discussed or CCO told me about, you know, the  
19 compliance more sort of a -- maybe an immediate past but  
20 I can't be sure of it.  
21 And then, obviously the rest of the discussion, how  
22 VC talked about the medication in that appointment.
- 23 Q. Well, going on to the next sentence, where you record  
24 that VC mentioned he wanted to have a medication-free  
25 trial, wasn't that a significant comment as to his

40

1 insight, given the recent history?  
 2 **A.** Yes, this is significant, and that's why I spent some  
 3 time with him talking and do a bit of a dissection  
 4 around his views about medication because it was  
 5 significant. But equally, at the same time, it came  
 6 from him. It means that he was not giving me answers  
 7 like "Oh yeah, will you take medication?" And answer is  
 8 "Yes".

9 So here is someone who was openly expressing his  
 10 views, what he think about medication. So there is  
 11 an element of openness. I did not agree with what he  
 12 was thinking, and that's why I said it, but he expressed  
 13 his views about it. And then -- yeah, yeah.

14 **Q.** Forgive me, sorry --

15 **A.** And then obviously I discussed with him about, because  
 16 this was a risk, and this was actually the primary risk  
 17 in VC case: that he has a non-compliance history and  
 18 that leads to what happened. So that's why I spent  
 19 a lot of time because I took that, you know, seriously.

20 **Q.** That's the reason for my question and in particular when  
 21 I say it's a significant comment, I wonder whether it's  
 22 a -- it was a point of concern for you. You describe VC  
 23 as being open, I mean, he's openly saying or indicating  
 24 that he wants to stop taking medication?

25 **A.** Yes.

41

1 means that, you know, their risk will likely increase if  
 2 they do so. So there is a lot of clinical significance  
 3 on this one.

4 **Q.** At the end of this paragraph, the penultimate sentence,  
 5 you write that you provided VC with psychoeducation  
 6 around psychotic illness. What exactly are you  
 7 describing there, the reference to psychoeducation?

8 **A.** So psychoeducation is a broad term that we use, so that  
 9 means that you explain the illness in a lay term, in a,  
 10 you know, something that patients can understand, and  
 11 then you tell them what is psychosis, what is natural  
 12 course of psychosis, what are the possible causes behind  
 13 psychosis, how you treat psychosis. And yeah, so it's  
 14 about a general discussion so that their knowledge about  
 15 their illness is improved, and as a byproduct, you hope  
 16 that their insight get better. Because the psychosis  
 17 itself is quite, you know, it's quite a scary  
 18 experience. So you want to basically educate your  
 19 patients.

20 **Q.** Did you raise at this appointment CBT; CBT for  
 21 psychosis?

22 **A.** Did I --

23 **Q.** Raise or discuss with VC CBT for --

24 **A.** Yes, I must have, because when I discussed about the  
 25 whole management of psychosis, therapy is part of it.

43

1 **Q.** He'd done that a few months before and he'd ended up  
 2 back --

3 **A.** Yes.

4 **Q.** -- in hospital and here you are again and he's asking  
 5 again to stop taking medication?

6 **A.** Yes, so --

7 **Q.** So did that indicate an ongoing lack of insight?

8 **A.** Yes, it is ongoing lack of insight, but I also see it --

9 and I want to draw your attention to this -- is that  
 10 this tells you about a patient who is actually  
 11 expressing his views, and patients obviously does have  
 12 views. I was seeing a patient who is not under any  
 13 legal framework. This was his outpatient appointment.

14 He was using his rights to express his views about  
 15 medication. And he did it. I don't agree with that,  
 16 but that tells me that, you know, in terms of degree of  
 17 insight, that, you know, that was lacking. But he was  
 18 able to say what truly he believes about the medication.

19 **Q.** What's the clinical significance of the fact a patient  
 20 asks you, or offers their views on medication; why is  
 21 that significant?

22 **A.** So the clinical significance is that it means that it  
 23 tell us about their insight, number 1. Secondly, it  
 24 tells you that, yeah, there is a possibility that they  
 25 will end up to saying no to medication. And thirdly, it

42

1 **Q.** Is there a reference to that discussion in this record?

2 **A.** No, it's not referenced, but I, you know, as part of  
 3 psychoeducation I must have discussed it.

4 **Q.** Is that because it's something that should have been  
 5 discussed at this appointment, the first appointment?

6 **A.** Yes, this is part of the whole management plan, the  
 7 psychotic medication, and therapy. And then the  
 8 subsequent visits I did, and, in fact we discussed it  
 9 quite a few times with VC, I remember.

10 **Q.** The following paragraph refers to the DVLA guidelines  
 11 and it sets out that you advised, as per guidelines, VC  
 12 should not drive for at least three months from the date  
 13 of stability. So that took you to a date to October,  
 14 and then he should inform the DVLA?

15 **A.** Yeah.

16 **Q.** Did you ever hear from the DVLA in respect of VC?

17 **A.** No. No that I can recall of, I've not heard.

18 **Q.** Did you ever raise the issue of driving with VC again?

19 **A.** No that I can recall. I didn't.

20 **Q.** What was your understanding in the course of the time  
 21 that you were seeing VC as to whether or not he was  
 22 driving?

23 **A.** No, his -- I was not aware of whether he is driving.

24 **Q.** Would you have been surprised to learn that VC was  
 25 driving in the course of the time that you were treating

44

1 him?

2 **A.** Patients with psychosis, they do drive. There is no  
3 blanket ban on that they can't drive, but as you can  
4 see, that there is a DVLA guidelines about psychosis  
5 that we follow. Patients should not drive for the first  
6 three months after their episode and that's why  
7 I calculated. After that, there is a process. They  
8 need to inform DVLA and then DVLA will write to us.

9 So to answer your question, if it comes to my  
10 knowledge that one of my patient is driving and I have  
11 concerns that they should not drive, I would, you know,  
12 intervene in that sense that I'll speak with them.

13 **Q.** Well, it's why I asked you if you were surprised. It's  
14 not so much about the issue of driving. You've set out  
15 here, haven't you, a process where the patient informs  
16 the DVLA and the DVLA contacts you?

17 **A.** Yeah.

18 **Q.** You say in respect of VC, you received no contact from  
19 the DVLA?

20 **A.** Yeah.

21 **Q.** So in those circumstances, would you be surprised if VC  
22 was driving, because he'd be doing so without the  
23 process you've advised upon not being implemented?

24 **A.** Yes.

25 **Q.** If we go down, please, under the heading of "mental  
45

1 use to describe mood. So mood can be depressed, mood  
2 can be elated. So when the patients have mood symptoms,  
3 either depressed or very elated, during the course of  
4 their illness they can develop psychotic symptoms, and  
5 if they do then we use the word affective psychosis,  
6 meaning they were depressed and then at some stage they  
7 develop psychotic -- (*overspeaking*)

8 **Q.** The psychosis is the consequence of the --

9 **A.** Of their --

10 **Q.** -- affected mood.

11 **A.** Affected, yeah.

12 **Q.** The Crisis Team had suspected and reached a likely  
13 diagnosis of schizophrenia. Were you aware of that at  
14 this appointment?

15 **A.** I was aware of.

16 **Q.** Were you disagreeing with that?

17 **A.** No, I was not disagreeing with that. I was simply --  
18 because VC came to us after these two admission, this  
19 was very early days with our team, mean EI, where we  
20 obviously assess patients, understand their illness,  
21 develop a relationship, see them over a period of time,  
22 and then see how their illness go.

23 So I did not disagree with the diagnosis, which was  
24 in the second discharge somebody say "likely  
25 schizophrenia". So this was -- and that's why I put a  
47

1 state examination", you describe there:

2 "... insight [but a] (superficial one) ... [You're]  
3 not ... confident if he has a deeper grasp of his  
4 illness in the long term ... may be some element of  
5 minimisation."

6 "Superficial insight", what were the limits, as you  
7 saw them at this appointment, to his insight?

8 **A.** So the reason I put it superficial one mean that he --  
9 when it comes to insight, there is a broad range where  
10 patients fall, in terms of their insight.

11 So VC agreed that he was mentally unwell around the  
12 time of admissions. He -- and, you know, it was good  
13 that he went in and he got the treatment. But, you  
14 know, the deeper understanding of your illness, your  
15 symptoms, and the likely impact on yourself and others,  
16 that was something I found that probably VC was not  
17 aware of. That's why I said that it's more sort of  
18 superficial.

19 **Q.** Under the heading "Impression" on this page, you have:  
20 "First Episode Psychosis likely Affective  
21 psychosis?"

22 **A.** Yeah.

23 **Q.** Can you explain what affective psychosis is?

24 **A.** So affective psychosis is the presence of psychotic  
25 symptoms in a patient -- so basically word "affect" we  
46

1 question mark in it, right, it's not like I'm saying  
2 that this is affective psychosis. It means that I'm  
3 trying to understand that okay, this is a 28 year old  
4 man, he has this, you know, in the build-up of this one,  
5 lack of sleep, stress at uni, very quick admissions,  
6 quickly resolve, came out, and then he is sitting in EI  
7 and now we are seeing him for possibly for the next  
8 three years.

9 So this was just a start of it, just to basically  
10 understand what it could be, and then -- and then be  
11 ready that, you know, whatever that is.

12 **Q.** The final line of the page, the final sentence which  
13 starts on the penultimate line you describe not being  
14 sure about VC's long-term commitment to take  
15 antipsychotic medication, and you make the point that  
16 when you take into account the superficial insight, "may  
17 be compliance issues on the horizon."

18 **A.** Yeah.

19 **Q.** Now, we see the plan just underneath that. In light of  
20 the -- your prognosis or your concern about those  
21 compliance issues in the future, what were the measures  
22 that you put in place?

23 **A.** Yeah. So in this kind of a patient where, you know, we  
24 suspect that there might be compliance issue, so first  
25 of all is about you are being aware and vigilant that,  
48

1 you know, this could happen.

2 So in terms of the management-wise, I remember that  
3 we took over the prescribing from the GP to us, because  
4 at the point of discharge he was discharged and then it  
5 mean that the next supply of medication will come from  
6 the GP, so in an attempt to make sure that we have more  
7 likely kind of a direct eyes on his medication, you  
8 know, pick up and everything. So we took over the  
9 prescription from us, so that we can see it, we can  
10 supply the medication. That is number 1.

11 As then obviously being, as I said, aware of, it  
12 mean that CCO is aware there can be compliance issue, so  
13 make sure that we keep checking it, and keeping  
14 a threshold that, you know, this might happen.

15 **Q.** If we zoom out from this, and I want to consider, before  
16 we get to 5 November, and the communication from  
17 Dr Seedat, that final point you make. So the CCO  
18 keeping an eye, and try and support him in the  
19 community.

20 So if we're looking at page 134, but we just zoom  
21 out, so we can see the entire page. I'm not going to go  
22 through each one of these in great detail, but just to  
23 summarise, 15 September 2020, we can see there's an  
24 in-person visit to VC.

25 **A.** Mm-hm.

49

1 of, because there was a continuous weekly MDT discussion  
2 and these looks, you know, significant. So I can only  
3 guess that CCO might have mentioned it in the MDT, that  
4 these things are happening. But I cannot recall exactly  
5 that, whether.

6 **Q.** What are your reflections now, given that following the  
7 appointment on 7 September, you recognise the risk of  
8 compliance issues, you recognised limits on insight.  
9 Your plan was to keep an eye on VC and in the space of  
10 eight weeks, roughly eight weeks, there's two home  
11 visits and one telephone call and a brief exchange.

12 **A.** Mm-hm.

13 **Q.** So was your plan implemented in that period or not  
14 implemented?

15 **A.** I mean, which part of the plan you are referring? My  
16 plan?

17 **Q.** "Keep an eye and support him in the community."

18 **A.** Yeah, so this was a general comment on it that, you  
19 know, CCO will keep an eye on the progress in the  
20 community and means that they will appraise MDT, they  
21 will appraise myself as well, in a sort of like  
22 open-ended way. You know, as I said in the beginning,  
23 you know the frequency of the contact, weekly,  
24 two-weekly, so I did not, like, particularly give  
25 a particular plan that, you know, this patient needs to

51

1 **Q.** Do you have that? Yes?

2 **A.** Yes, please. Thank you.

3 **Q.** Then, 25 September, there's a telephone call and then  
4 the final entry on that at page, 1 October, another home  
5 visit.

6 **A.** Yeah.

7 **Q.** Then on to the next page, in that top box, and this is  
8 an entry from 9 October, we can see that there's  
9 a telephone call from VC's mum, raising concerns about  
10 VC following a discussion with him. Were you made aware  
11 of that telephone call?

12 **A.** I cannot recall whether I was made aware or not.

13 **Q.** One can see on the rest of that page there are a number  
14 of attempts to contact VC which are unsuccessful, up  
15 until right at the bottom, penultimate entry, at  
16 26 October, when Gary Carter goes and has a brief  
17 exchange with VC on --

18 **A.** Yeah.

19 **Q.** -- outside his property.

20 Now, whilst all this has been going on, those  
21 two pages run from your appointment on 7 September up  
22 until 26 October. What involvement have you had with  
23 these attempts to see VC or any attempt to monitor him?

24 **A.** Yeah. As I said, that I don't recall whether I was told  
25 about it, but I suspect that we might have been aware

50

1 be seen like weekly or so and so.

2 I'm not sure how to comment on this, these whole  
3 different episodes throughout the October, but I can see  
4 that yes, you know, there was, like, for example, call  
5 from the mum, and then, you know, these visits. So  
6 yeah, so whether there was some poor engagement or  
7 overall, so it's hard for me to comment that whether,  
8 you know, the -- whether the plan which we agreed was  
9 not implemented or implemented --

10 **Q.** The question is, it's a question, Dr Burri, is this:  
11 you've seen VC, you've identified the issues that we've  
12 gone through --

13 **A.** -- yeah.

14 **Q.** -- in this appointment on 7 September. You've come up  
15 with a plan. We've looked at the subsequent eight  
16 weeks --

17 **A.** Yeah.

18 **Q.** -- during which there are the two home visits, one  
19 telephone call?

20 **A.** Yeah.

21 **Q.** Then some difficulties contacting VC --

22 **A.** Yes.

23 **Q.** -- and the brief exchange. Does that amount to the type  
24 of support and the type of keeping an eye out that you  
25 had envisaged on 7 September?

52

1 A. It's difficult for me to comment now that what exactly  
2 goes through my mind on 7 September and what I want the  
3 CPN to do, in terms of, you know, the degree and  
4 assertiveness of their reviews, but overall I can see  
5 that there is an attempt made by CPN and the team to  
6 engage with him, but whether, you know, it was early  
7 days with the team or how ... so I would say that I  
8 would not necessarily say that no, the plan was not  
9 implemented, but how good was the implementation?  
10 Perhaps, you know, more could have been done, but as  
11 such, you know, there was an effort, and the team was  
12 engaging with him.

13 MR CARR: Chair, that's --

14 THE CHAIR: An appropriate time for a break?

15 MR CARR: Yes.

16 THE CHAIR: Right, we'll start again at 3.45, thank you.

17 (3.29 pm)

(A short break)

19 (3.44 pm)

20 MR CARR: Dr Burri, we were looking at the records in the  
21 run-up to 5 November. If we can go to NHFT0000168, and  
22 just go straight to page 136. The -- it's the top box  
23 the top entry on that page that I'm looking at. This is  
24 an entry by Dr Seedat, the inpatient consultant, and you  
25 can see from this summary that Dr Seedat is noting that

53

1 recall, and you can see it in the record as well, that  
2 I got the email from CPN on, I think on the 10th.  
3 Q. Dr Burri, sorry, I'm asking a slightly different  
4 question.  
5 A. Sorry.  
6 Q. I think you might be answering something that I'm not  
7 asking.  
8 A. Sorry.  
9 Q. Following contact from Dr Seedat on 5 November --  
10 A. Yes.  
11 Q. -- should VC have been seen sooner than 10 November, by  
12 a doctor?  
13 A. Yes. By the looks of it, that yes.  
14 Q. Then prior to you seeing VC on the 10th, we have the  
15 entry just below the one we're looking at, 6 November,  
16 Gary Carter. It is the third paragraph down where  
17 Mr Carter describes taking one month's supply of  
18 medication to VC because they were overdue.  
19 A. Yeah.  
20 Q. But VC "had about 10 left".  
21 A. Yes.  
22 Q. Now that indicates, doesn't it, non-concordance?  
23 A. Yes.  
24 Q. And that, given VC's history, ought to have been  
25 a matter of concern?

55

1 VC had tried to contact him.

2 A. Yeah.

3 Q. And in the penultimate line he is noting that he's  
4 urging the local mental health team -- so that included  
5 the EIP, didn't it?

6 A. Yes.

7 Q. Urging them to visit VC "face-to-face, assess his mental  
8 state and make sure he is okay. I feel based on [this]  
9 ... interaction that he needs more close monitoring ..."

10 Now following that contact you did not see VC until  
11 10 November, did you?

12 A. Yes, that's right.

13 Q. Which is some five days after this note. Why didn't  
14 this contact -- and there was an email from Dr Seedat as  
15 well -- why didn't that warrant an urgent medical  
16 review, given VC's history of relapse and deterioration  
17 when unwell?

18 A. Yeah. So when I was preparing for this evidence, I can  
19 see that there was an email came from Dr Seedat, but  
20 I was not in that email. So I was not aware about this  
21 telephone contact or at least I can't recall that when  
22 it came to my knowledge, that VC made this call to  
23 Dr Seedat.

24 So that's why I can't say that, you know, when was  
25 the first time it came to my knowledge, if I correctly

54

1 A. Yes.

2 Q. And it ought to have led to an appointment more urgently  
3 than 10 November?

4 A. Yes.

5 Q. As for that 10 November visit, it was by you and Claudia  
6 Birtles. We see the note of it at page 138. Now the  
7 conclusion of that appointment, we see at the top of the  
8 page, that aripiprazole was increased from 10mg to 15mg.

9 A. Yeah.

10 Q. If you go to the second paragraph, second sentence, he's  
11 describing his previous admission in hospital to you.

12 A. Yeah.

13 Q. What he sets out there is that whereas he told the ward  
14 doctor during his admission that he no longer was  
15 hearing voices, that was not the case and essentially  
16 he'd only said that to get out of hospital.

17 A. Yes.

18 Q. This was a significant disclosure, wasn't it?

19 A. It was.

20 Q. It was significant because it was VC admitting that he  
21 had been dishonest and misleading to those treating him.

22 A. Yes.

23 Q. It was a worrying development, wasn't it?

24 A. Yes, worrying in the sense that yes, it tells you that  
25 in the past this is what he said it and lied to the

56

1 inpatient doctor.

2 **Q.** And then if we look at the next sentence, so if we're  
3 still in that third paragraph, and four lines down, the  
4 bit in quotation marks, as in speech marks, rather:  
5 "... he said that because 'the voices I can hear can  
6 see other people as well and he don't want that other  
7 people to get into ... trouble.'"  
8 Was VC indicating there, or did you understand him  
9 to be indicating, that the voices that he heard put  
10 other people at risk?

11 **A.** No, this was his words, that he don't want to -- other  
12 people to get into trouble. And that was one of his  
13 reasons that he instigated this disclosure and he wants  
14 to tell this to me. Because he don't want other people  
15 to get into trouble.

16 **Q.** He goes on, it's a few lines down, when describing the  
17 auditory hallucinations he makes reference to "different  
18 departments, including MI6, Police, etc". And by  
19 "different departments", was that a reference to  
20 government departments?

21 **A.** Yes.

22 **Q.** He refers, doesn't he, to proving his power. Did you  
23 explore --

24 **A.** Yes.

25 **Q.** -- with VC what he meant by proving his power?

57

1 **Q.** -- as you understood it?

2 **A.** So when I challenge his experience as I put it, what do  
3 you mean by that? You know, what -- and then he said,  
4 you know, because I think at that time in November the  
5 second lockdown was started and then he said that  
6 "Because I -- because the voices are referring -- this  
7 act of mine, going out as crimes, so I should keep going  
8 out in the violation of lockdown to prove to them that  
9 I have that power to violate the lockdown rules."  
10 **Q.** So you understood it to be the same thing.

11 **A.** Yes.

12 **Q.** Or a repetition of -- (*overspeaking*) --

13 **A.** Repetition of --

14 **Q.** -- what had occurred before?

15 **A.** Yeah.

16 **Q.** You say in the paragraph that follows:  
17 "He said that he was taking his medication regularly  
18 apart from missing for couple of odd days ..."  
19 **A.** Yeah.

20 **Q.** You must have known that that couldn't be right, given  
21 what Gary Carter had noted of the ten surplus tablets.

22 **A.** So are you saying that I should have said that he may be  
23 right; is that what you're saying?

24 **Q.** No. You've noted here that VC said he was taking his  
25 medication regularly.

59

1 **A.** Yes, I did. So basically what VC said that while I was  
2 exploring the content of the voice involved, that these  
3 voices which he identify, you know, these different  
4 departments, man and woman, and so obviously I ask him  
5 about, you know, the command hallucination and those  
6 things, and he said that they say to him that he should  
7 be punished for the crimes that he did. And when I ask  
8 "What do you mean by the crimes?" And then he made  
9 reference that, you know, in the first lockdown he used  
10 to go out and violate the lockdown rules, and those  
11 were, you know, alleged crimes that the voices were  
12 referring to, and also because he -- he said something  
13 against one of the -- he threatened one of the group  
14 member.

15 And so it mean that -- so these were the crimes.  
16 You know, going out --

17 **Q.** Those were the crimes, yes.

18 **A.** Yes.

19 **Q.** And then he said now he should prove his powers.

20 **A.** Yes.

21 **Q.** So the proving the powers wasn't --

22 **A.** Yes.

23 **Q.** -- the crimes of lockdown, was it? What was the proving  
24 the powers --

25 **A.** Exactly, so --

58

1 **A.** Yeah.

2 **Q.** I'm asking you, did you scrutinise --

3 **A.** Yes.

4 **Q.** -- that?

5 **A.** Yes.

6 **Q.** You heard the evidence, didn't you, of Gary Carter  
7 having visited a few days earlier --

8 **A.** Yes, yes.

9 **Q.** -- with an overdue supply of medication --

10 **A.** Yes.

11 **Q.** -- and VC already being in possession of ten tablets.

12 **A.** Yes.

13 **Q.** Given he was overdue, that must mean that for more than  
14 ten days he'd not taken his medication?

15 **A.** That tells you that there were ten tablets, it means he  
16 has not taken all. So that's why I ask him his  
17 viewpoint that why these ten tablets left? And then he  
18 said that he forgot to take some days because of his  
19 concentration and everything, and that he give the  
20 reason that why he has these leftover of ten --

21 **Q.** Is it one tablet a day or is it more than one tablet  
22 a day?

23 **A.** Yeah, so it's one tablet -- so, I mean, because the dose  
24 was 10 milligrams, so I don't remember whether he was  
25 taking 10 milligrams one tablet or 5 milligrams two

60

1 tablets, when we said left over, it could be five  
2 tablets left over or ten tablets left over, it depends  
3 on the strength which was given to him.

4 But he admitted that he has missed few days, which  
5 could be, you know, anything and that's the reason he  
6 gave me: that that's the reason that, you know, there  
7 were ten leftover tablets. But I --

8 **Q.** If it was one tablet a day and there were ten tablets  
9 remaining at a point when he was overdue, it would not  
10 be accurate, would it, to say you've missed a couple of  
11 odd days?

12 **A.** Yes, couple -- it can't be couple of odd days, but  
13 again, whether these ten was in one go or was he  
14 missing, you know, after a few days, and so hard for me  
15 to say.

16 **Q.** In light of the developments at this appointment and the  
17 days leading up to it, was it your expectation that the  
18 risk assessment should be updated?

19 **A.** Perhaps yes.

20 **Q.** Did you direct the care coordinator to update the risk  
21 assessment in light of this information?

22 **A.** Not that I can recall of.

23 **Q.** The care plan, that requires an update, doesn't it, once  
24 there's a new clinical situation or the risk changes.

25 Did you expect the care plan to change given the

61

1 mind there should be once or twice per week?

2 **A.** So it is, you know, I cannot recall what exactly myself  
3 and the CCO discussed, you know, in terms of the  
4 frequency at that time. Did we discuss it did we not?  
5 I cannot recall. But close monitoring itself mean that  
6 it could be, you know, once or twice a week; it could be  
7 every other day. It is quite open-ended --  
8 *(overspeaking)* --

9 **Q.** Is it not important to specify in the record what it is  
10 you intend the frequency of monitoring to be?

11 **A.** Maybe, maybe I had the discussion with the CPN. I can  
12 just only guess that, you know, whether I did it or not.  
13 But because this was a very significant, you know,  
14 throughout my five encounter with VC, this was the only  
15 point which was very significant. That's why. So we  
16 put, you know, in terms of close monitoring that, you  
17 know, it must have been different than the usual  
18 monitoring that we were doing at that time with VC.

19 **Q.** I understand the significance, and I understand that  
20 close monitoring is different. Given the significance,  
21 would it not be important to specify, in the records,  
22 what was meant by close monitoring? How often you were  
23 going to see him? Or you wanted him to be seen?

24 **A.** Yeah, I might have done it, because if you look at the  
25 third one, because we discussed about the Crisis Team.

63

1 disclosure of misleading doctors, being dishonest to  
2 doctors?

3 **A.** Yes, when it comes to updating the care plan, care plan  
4 obviously, it is very formal document, lots of pages are  
5 there, so that tells you that the overall, what team is  
6 proposing, what team wants to do with the patient.

7 But whether minutes to minutes update on the care  
8 plan? I'm not sure whether this is something that, you  
9 know, team do, because the care plan is there. We are  
10 aware of that there is a risk of non-compliance, and  
11 this is what we are doing. So perhaps the -- you know,  
12 going back and do the update in the care plan itself,  
13 I'm not sure whether this is something CPN would do,  
14 but, you know, yes, that, you know, in terms of that we  
15 know that this risk is there and this is what we are  
16 doing.

17 **Q.** Under the heading "Plan" at the bottom of the page, the  
18 second entry is:

19 "Close monitoring in the community by the [Community  
20 Care Coordinator]."

21 **A.** Yes.

22 **Q.** The plan doesn't state, does it, how frequent that  
23 monitoring should be?

24 **A.** Yes.

25 **Q.** In your statement you said well, you think you had in

62

1 And so it mean that we have this discussion about that  
2 what we will be doing, what is the next step? But  
3 exactly the frequency, I don't recall that whether  
4 I told the CPN or CPN told me that, okay, we will do it  
5 every day or every other day.

6 **Q.** If we move to the next appointment, it's roughly  
7 four weeks later when you see him on 7 December, isn't  
8 it?

9 **A.** Yeah.

10 **Q.** It's NHFT0000168, this document, page 141, please.

11 You've described in your statement that you  
12 considered VC's presentation and engagement to be a lot  
13 better at this appointment.

14 **A.** Yes, I am writing here.

15 **Q.** You have, in the middle of this entry, the third  
16 paragraph, the fourth paragraph down, it describes VC as  
17 taking medication regularly. Again, was that based on  
18 self-report?

19 **A.** Although I did not specify it, but perhaps yes, that  
20 this is what he said that he's taking it.

21 **Q.** Now in the plan, it's the second entry, you've  
22 documented:

23 "Although he would benefit from CBT... [psychosis]  
24 psychotherapy ... he is not keen on it at the moment."

25 **A.** Yeah.

64

1 Q. To what extent at this appointment did you explain to  
2 him the benefits that he might receive from undergoing  
3 therapy?  
4 A. It's difficult for me to recall how much time I spent on  
5 the subject of CBT, but this was part of ongoing  
6 conversation with VC so I must have told him about, you  
7 know, the benefits of it, why we think that it is  
8 needed, and then he must have given his views about it.  
9 Q. At this appointment, VC reported, didn't he, ongoing  
10 auditory hallucinations?  
11 A. He reported it, yes.  
12 Q. Of course, you had increased the aripiprazole at the  
13 previous appointment to 15mg.  
14 A. That's right.  
15 Q. The history that you obtained was despite that increase,  
16 VC was still suffering symptoms of psychosis.  
17 A. So are you saying whether there was an effect on the  
18 voices in this appointment?  
19 Q. Sorry, it's a little bit further up the page.  
20 A. If I can see what I commented on the voices itself.  
21 Q. Yes, it's third paragraph, second line.  
22 A. Yes.  
23 Q. "Although he continue to experience the 2nd and 3rd  
24 person auditory hallucinations with suggestibility but  
25 he is now able to keep his calmness and carry on."

65

1 from 15mg to 20mg?  
2 A. Yes.  
3 Q. At this appointment, again the voices were still there  
4 "in terms of frequency", it's noted.  
5 A. Yeah.  
6 Q. Is the reason for increasing the dosage of medication  
7 because the voices hadn't completely been eradicated?  
8 A. Yes.  
9 Q. We can see in the third paragraph down, third sentence,  
10 a reference there to VC not thinking his condition was  
11 psychosis. Did that indicate a lack of insight, in your  
12 view?  
13 A. Yes, that tells you about the insight.  
14 Q. Then in the next paragraph we see VC raised, didn't he,  
15 difficulties, or reported difficulties with his  
16 short-term memory?  
17 A. Yes.  
18 Q. Your response to that was to arrange some memory tests.  
19 A. That's right.  
20 Q. Those memory tests were carried out on 15 March, we see  
21 at page 148.  
22 A. Yeah.  
23 Q. We can see the scores in the middle of the page, and  
24 they all look relatively high, don't they. What was the  
25 takeaway conclusion from those memory test scores?

67

1 A. Yes, so basically although he was still hearing the  
2 voices, but he was not distressed from the voices. He  
3 was not responding to unseen stimuli. He -- in terms of  
4 his general outlook, he was able to secure a job in the  
5 local warehouse, and then because of the risk to others  
6 I specifically enquired about, you know, because what  
7 sort of a job and whether the idea came from him or  
8 whether this was part of any command given by the  
9 voices. So he was able to tell me about, you know, the  
10 detail of his voices, how many -- the detail of the job,  
11 how many people are work there.  
12 So the idea was we checked his about, you know, so  
13 it means what I'm trying to say is there was, although  
14 the voices were there, but in terms of, you know, his  
15 feelings and thoughts and his behaviour in response to  
16 the voices, in a way that, you know, he was making, you  
17 know, you know, job application or got a job and, you  
18 know, his overall --  
19 Q. You're slightly getting away from my question, which was  
20 simply that despite the increase in medication, the  
21 voices still remained.  
22 A. Yes, the voices were --  
23 Q. If we can turn, please, to the next appointment. It's  
24 1 February 2021, and it's page 146 of this document. On  
25 this occasion the medication was increased, wasn't it,

66

1 A. Yes, so takeaway that overall because obviously any  
2 significant clinical core is cut off is 81, 80, and he  
3 scored 94, and he score, you know, little bit less score  
4 on memory, as you can see, and fluency, and which we see  
5 in patients with psychosis, that they do, you know, have  
6 an effect on their memory and concentration.  
7 So these, you know, 23 out of 26 tells you about  
8 that, yeah. But overall he did well on the score.  
9 Q. Then page 149, the entry in your name in the middle, 22  
10 March, 11.46, you're describing here a conversation you  
11 had with the police officer Gail Collins.  
12 A. That's right.  
13 Q. And she was in touch with you because one of VC's  
14 neighbours was making a compensation claim in respect of  
15 damage to his door, and your advice was that the  
16 information should be provided to VC in a controlled  
17 manner rather than abruptly. What was your concern in  
18 relation to providing the information abruptly?  
19 A. Yeah. So basically this email came and Ms Gail Collins  
20 was concerned that instead of they reported directly to  
21 VC, can the team help and disclose this information and  
22 so that he can receive it well? So -- and I agree with  
23 that notion, and I said that yeah, it's a good idea that  
24 we can actually give a bit of a, you know, in a way  
25 that, you know, he can take this information and not get

68

1 distressed unduly. And I agreed with him and then  
 2 I said that CCO will do that.  
 3 **Q.** Then you were due to see VC on 28 June, weren't you?  
 4 **A.** Yes.  
 5 **Q.** But that appointment didn't go ahead.  
 6 **A.** Yeah.  
 7 **Q.** It's page 155. It's the entry in the middle of the page  
 8 by Claudia Birtles, refers to:  
 9 "Care plan being discussed with Dr Burri.  
 10 "Plan;  
 11 "Update care plan/no change to current plan."  
 12 **A.** Yeah.  
 13 **Q.** Now, we looked at the care plan right at the beginning  
 14 of your evidence, it was the one that was prepared just  
 15 before you first saw VC in September. But is it right  
 16 that your view and the discussion you had with  
 17 Ms Birtles in June 2021 was that there was no change  
 18 needed to the current plan?  
 19 **A.** Yeah, I think -- I don't exactly recall about the length  
 20 of discussion that I had with the CPN, VC did not turn  
 21 up for the appointment. We waited for him and then  
 22 obviously we had a bit of -- normally is that you  
 23 discussed with the CPN, you know, overall progress and  
 24 overall what she think and, you know. And then it was  
 25 agreed that, you know, we will offer him another

69

1 it's an indication of him acting on delusional beliefs?  
 2 **A.** It is open for interpretation. I can't -- I can't say,  
 3 you know, he might have decided to go there, and yeah --  
 4 **Q.** Is it information that in your view ought to have been  
 5 shared with the EIP team by the police, or with the  
 6 Trust in general by the police?  
 7 **A.** Yes, this seems like an important information.  
 8 **Q.** My final question, Dr Burri, is this: in respect of  
 9 medication, we've gone through the records, we've seen  
 10 the increase from 10mg to 15mg on 10 November and then  
 11 from 15mg to 20mg on 1 February. In your statement,  
 12 paragraph 148 you state:  
 13 "... medication was optimised and reached  
 14 a therapeutic effective dose."  
 15 When do you say a therapeutic effective dose was  
 16 reached?  
 17 **A.** I suppose what I meant to say that I was trying to  
 18 optimise the dose of aripiprazole. We inherited him on  
 19 10 milligrams and the maximum dose is 30. So different  
 20 patients respond to different doses, but normally in my  
 21 practice that I have seen, that it's likely that 20  
 22 milligram is the dose, where, if they had not responded  
 23 then you would consider that perhaps, you know, you can  
 24 change it.  
 25 So what I'm trying to say, that, you know, we were

71

1 appointment, and I don't know exactly that, you know,  
 2 whether this whole care plan we discussed from line to  
 3 line with her, it's like overall that, you know, she put  
 4 it that she discussed care plan with me, and there was  
 5 no, as such, major change and offered him an  
 6 appointment.  
 7 **Q.** You didn't see VC again. So in fact when you saw him  
 8 for the memory test that was the final time that you saw  
 9 him, wasn't it?  
 10 **A.** Yes, face-to-face, that was the last time.  
 11 **Q.** I just have two more areas of questioning for you.  
 12 Firstly, you have been sent -- and the reference is  
 13 METF0000007, and this is a document from the police that  
 14 describes VC's attendance at Thames House, Millbank,  
 15 when he rang the buzzer. And this was 31 May 2021, so  
 16 it's before you left the EIP team on 8 July?  
 17 **A.** Yeah.  
 18 **Q.** Were you aware of VC's attendance in London whilst you  
 19 were at EIP?  
 20 **A.** No, I was not aware.  
 21 **Q.** Had you become aware of it, would it have changed your  
 22 assessment or management of VC?  
 23 **A.** If I'd been aware of it, the first thing I would do,  
 24 I would go and see VC.  
 25 **Q.** It's an indication, isn't it, him turning up at MI5,

70

1 still in that therapeutic range where we have the option  
 2 to increase the dose and see if that helps our patients.

3 **Q.** So to be clear, you don't think you reached the  
 4 therapeutic effective dose?

5 **A.** Not at this point.

6 **MR CARR:** Chair, those are my questions.

7 **THE CHAIR:** Yes, thank you. Mr Moloney.

8 **Questioned by MR MOLONEY**

9 **MR MOLONEY:** Good afternoon, Dr Burri. I just want to ask  
 10 you about one thing if I may, please, and that's your  
 11 meeting with VC on 10 November 2020.

12 **A.** Sure.

13 **Q.** If we could, just the one document I want to put up,  
 14 please, which is the RiO record, NHFT0000168, and whilst  
 15 that's coming up, Dr Burri, if I may just ask you,  
 16 Mr Carr has asked you about this meeting on  
 17 10 November 2020 and he's asked you about how there was  
 18 an email from Dr Seedat on 5 November 2020 and you  
 19 didn't go to see him until 10 November 2020. But if we  
 20 go to page 137, please, we will see that there's a bit  
 21 more to it than that, in this way. And perhaps if we  
 22 just go up to the bottom of page 136, we can put this in  
 23 context. I do apologise for that. So the very bottom,  
 24 yeah. 10 November, 11.13, Claudia Birtles's entry, you  
 25 see this? We go to the next page now, if we can scroll

72

1 down or scroll up:

2 "[Telephone call] ... to [VC] in response to text  
3 message he sent earlier in the day requesting an urgent  
4 appointment today."

5 So in fact VC has sent a text message to Claudia  
6 Birtles on 10 November asking for an urgent appointment,  
7 and it continues:

8 "[VC] politely requested a face to face appointment  
9 today rather than waiting for the scheduled appointment  
10 on Thursday. When I enquired as to why he may need  
11 a sooner appointment he said he had something very  
12 important to discuss. He appeared very hesitant to do  
13 this over the phone, initially stating that I 'was his  
14 nurse and he should be able to trust me' however  
15 appeared to back track stating it really had to be face  
16 to face."

17 **A.** Yes.

18 **Q.** "I asked if [VC] was concerned for his safety or felt at  
19 risk, he paused and didn't respond to the question just  
20 saying he had something important to tell the Doctor."

21 **A.** Yeah.

22 **Q.** "I explained it may be difficult for the Doctor to offer  
23 a home visit at such short notice but that I would  
24 enquire with his secretary."

25 Then an email was sent to you asking for a joint

73

1 Given what you said there about how he was pleasant  
2 and cooperative, can we take it that he, on that day,  
3 did not give you the impression that he thought you were  
4 in a conspiracy against him?

5 **A.** Sorry, I did not get it, your question.

6 **Q.** I'll try and break it down. You saw him. He was  
7 pleasant, cooperative, and you were able to build "easy  
8 rapport" with him, yeah? So it's a constructive  
9 conversation.

10 **A.** Yes.

11 **Q.** Yeah. On that day, given all of that, did you feel  
12 "This man thinks I'm in a conspiracy against him", or  
13 did you have a good relationship?

14 **A.** No, I had good relationship.

15 **Q.** He had a good relationship with you, and in fact he'd  
16 asked you to come round.

17 **A.** Yes.

18 **Q.** Absolutely. We see that -- and Mr Carr has already  
19 taken you to this -- that in the next large paragraph,  
20 about halfway through that, he says that essentially the  
21 voices, the people that were speaking to him:

22 "... from many different departments including MI6,  
23 Police, etc ..."

24 They're the ones that he's focusing on, yes?

25 **A.** Yes.

75

1 visit and, if not, then Claudia Birtles was going to  
2 visit with a number of -- and you've explained, in  
3 evidence to the Chair this afternoon, that what he  
4 wanted to tell you was about the voices that he'd  
5 reported that they'd stopped happening when in fact  
6 they'd carried on.

7 **A.** Yeah.

8 **Q.** And if we go over the page, please, to 138, and you've  
9 been taken to this entry before, but if we see there  
10 your summary in the first paragraph:

11 "... urgent home visit today after [VC] told  
12 [Claudia Birtles] ... that he 'has something to say  
13 [et cetera] ...' When we arrived at his shared  
14 accommodation he welcomed us on the door, look[ed] well  
15 and cleanly dressed. We sat in the kitchen area. He  
16 looks more engaging and was able to narrate about  
17 himself much better than what I saw him couple of months  
18 ago. There was nothing to suggest self neglect. He  
19 remains pleasant and cooperative throughout the  
20 assessment with easy rapport."

21 **A.** Yeah.

22 **Q.** Just so far as that is concerned, you'd actually made  
23 the effort to go and see him, he'd asked you to visit  
24 him, you'd described him as "pleasant and cooperative  
25 throughout the assessment with easy rapport."

74

1 **Q.** Did he ever say to you that -- I've asked you about  
2 whether or not he thought you were in a conspiracy  
3 against him, did he ever say to you that he thought  
4 other doctors were in a conspiracy against him?

5 **A.** No, not at that time, no.

6 **Q.** They weren't part of the "et cetera" that we have here?

7 **A.** No.

8 **Q.** No. Then may I just take you down to "Impression" to an  
9 entry that you weren't taken to, but if we just go  
10 further down the page "Impression"?

11 **A.** Yeah.

12 **Q.** "Came across psychotic with escalation of symptoms ..."

13 **A.** Yeah.

14 **Q.** Yeah. You've formed a firm view that the impression he  
15 gave to you was that he was psychotic at that time,  
16 that's how he felt about it --

17 **A.** Yeah.

18 **Q.** -- and so unwell, but he'd sought you out.

19 So if it was suggested that when he was unwell --  
20 suggested to you, if someone had said to you, when he  
21 was unwell --

22 **A.** Yeah.

23 **Q.** -- he thought all medical staff were in a conspiracy  
24 against him, you -- would you agree with that or not?

25 **A.** If they say that the --

76

1 Q. Sorry, it's my fault, doctor. I'll try and say it  
2 clearly.  
3 If somebody said to you, yeah, right, when "VC is  
4 unwell, he thinks all the doctors are against him",  
5 would you agree that that's what he thinks when he's  
6 unwell, given your experiences on this day?  
7 A. I mean, historically up to this point, historically,  
8 I was not aware that VC included, us, the doctors as  
9 part of conspiracy at that point.  
10 Q. Absolutely. And you didn't feel that on that day?  
11 A. No, I didn't feel it.  
12 **MR MOLONEY:** All right, thank you very much.  
13 **THE CHAIR:** Thank you. Yes, Ms Cartwright.  
14 **Questioned by MS CARTWRIGHT**  
15 **MS CARTWRIGHT:** Good afternoon, Dr Burri. I ask questions  
16 on behalf of the survivors.  
17 Can I first of all just clarify some detail as to  
18 current practice, because we miss a two-year period in  
19 your statement. You tell us that you worked at  
20 Nottingham Trust until August 2022, I think that's when  
21 you were added to the Specialist Register. But then you  
22 say there was a two-year period where you worked at  
23 other mental health trusts before your current position,  
24 from 2024, with the Crisis and Home Treatment Team in  
25 Sheffield.

77

1 he was thinking [about] buy[ing] a car and to start  
2 driving but I told him that as per guideline he should  
3 not drive for at least 3 month from the date of  
4 stability. Taking discharge date of 31st July so 3  
5 months will end on last day of October. So after that  
6 day he should inform DVLA and then rest of processes can  
7 start whereby DVLA will write to us about the report.  
8 He seems to understand it and agree to comply with."  
9 A. Yeah.  
10 Q. What we don't see there, Dr Burri, is what the DVLA  
11 guidance requires for someone who has got a psychotic  
12 disorder or had experienced the same, that VC needed to  
13 be told "He must not drive and he must notify DVLA about  
14 the fact he's had a psychotic illness"; would you agree?  
15 A. Yeah, and this is what I did.  
16 Q. But that's not what it seems to be saying. You seem to  
17 be suggesting that he should only inform DVLA after the  
18 last day of October.  
19 A. Yeah, let me explain. Because what we see in our  
20 practice is that patient comes out of the hospital, and  
21 they, if they immediately inform the DVLA, they can do,  
22 but the likely outcome will be that you cannot drive for  
23 three month, legally. So after three month, DVLA, you  
24 know -- so DVLA write to the consultant to issue  
25 a report. So if you do the report in the first three

79

1 A. Yeah.  
2 Q. So can you just tell us where you've worked in those  
3 two years between 2022 and 2024, please?  
4 A. So my first two years are higher training. The first  
5 two years I spent at Nottingham Health Trust and my last  
6 year I spent at Derbyshire Trust before I got my  
7 training completed in August 2022. And after that --  
8 Q. Yes, it's that two-year period where we have a gap.  
9 2022 to 2024, where did you work?  
10 A. 2022 to 2024?  
11 Q. Yes.  
12 A. Yes, I have worked in the various regional NHS Trusts  
13 that includes Sheffield, Leicestershire, yes, and, so  
14 these are the trusts that I work.  
15 Q. All right. Thank you. So the point I want to take up  
16 with you, please, is the advice you provided to VC about  
17 driving and you'll understand the significance for those  
18 I represent.  
19 A. Yeah.  
20 Q. Can we please display NHFT0000168, please, at 133, it's  
21 your consultation in September where you provide advice  
22 to VC about the requirements of DVLA.  
23 A. Yeah.  
24 Q. Thank you. So you say this, in the consultation:  
25 "I also told him about DVLA guidelines. He told me

78

1 month, there is no chance that, you know, you are  
2 allowed to drive. So basically, after three month  
3 a request comes, consultant or whoever doing the report  
4 assess the situation and then they write to the DVLA.  
5 So basically it is about you are telling the patient  
6 that for next three month you cannot drive. It's full  
7 stop, you cannot drive.  
8 Then what I'm trying to explain to VC that what will  
9 happen after three month, after three month it is now  
10 dependent -- if you can drive depends on a positive  
11 report by the consultant and then ultimate decision will  
12 lie with the DVLA whether to allow you driving or not.  
13 So basically I was explaining the process that what  
14 will happen after three month.  
15 Q. Well, Dr Burri, I'm going to suggest that the account  
16 you've just given doesn't seem to accurately reflect the  
17 guidelines, and bearing in mind the significance of  
18 telling a patient of their requirements, you've just  
19 referenced three months, but the time period completely  
20 varies, doesn't it, depending on class of vehicles.  
21 A. Yeah. So the first three months there is no doubt that  
22 patients with psychosis who went in into hospital, they  
23 cannot drive. So that's I told him in unclear terms  
24 (sic).  
25 Q. Just pause there, because that then places a requirement

80

1 on the patient to tell DVLA that they've had a psychotic  
2 episode.

3 **A.** Yes.

4 **Q.** So they must notify, not after the three months --

5 **A.** No, no --

6 **Q.** But they must notify.

7 **A.** They must notify.

8 **Q.** But that's not what your note says that you told VC.

9 **A.** What I was trying to say to VC is that if DVLA write to  
10 us now, like next week a letter arrive to me, for  
11 example, or to the consultant, to write a report, surely  
12 DVLA will not allow you to drive, because you cannot  
13 drive for first three months. He got the information.

14 Now, after three month, I was explaining the  
15 process. It doesn't mean I am telling him that "You can  
16 drive after three month".

17 **Q.** Well, certainly that's the impression you're giving him.

18 **A.** No.

19 **Q.** You're suggesting that three months after his discharge,  
20 so taking his discharge date of 31 July, that VC can  
21 then apply, on the last day of October, to be permitted  
22 to drive again.

23 **A.** No, he is -- it's not apply; it's about inform the DVLA  
24 and this is the usual process, the DVLA will write, and  
25 after three month it will be dependent how you are at

81

1 can't see here you asking VC what he was driving, and  
2 I ask that in the context of the later entry where VC  
3 was telling you he was doing deliveries in a warehouse.

4 Do you know that there was a different period --

5 **A.** No.

6 **Q.** -- for group 2 vehicles, so the necessity to know what  
7 VC was driving?

8 **A.** So now regarding whether I was aware of or whether he  
9 was driving a group 2 vehicle, no, I was not aware that  
10 he was driving a group 2 vehicle.

11 **Q.** Well, that's a different question. I asked: are you  
12 aware that DVLA guidance require a different period?

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

14 **Q.** What's that period?

15 **A.** I mean, I can't tell you on the top of my head, but this  
16 is something that we resort, because we have a DVLA  
17 guidelines, that we use it before we give any advice to  
18 the patients.

19 **Q.** But because, Dr Burri, what I'm suggested you should  
20 have been saying to VC is that he must now notify DVLA,  
21 so not waiting until the end of October, and that you  
22 could have said to VC on the second occasion "Have you  
23 notified DVLA? Because if you've not notified DVLA,  
24 I can now notify them."

25 And we don't see --

83

1 that time. Consultant will write the report and then  
2 DVLA will make the decision whether you can drive or  
3 not. So all what I was giving him: "The next three  
4 month you cannot drive and you have a legal  
5 responsibility to inform DVLA." This is what I was  
6 doing.

7 **Q.** I am going to suggest, Doctor, that that's not what the  
8 entry suggests about what you were saying to VC. And  
9 where were you canvassing what he would be driving?  
10 Because for group 2 vehicles, would you agree, that the  
11 period is different?

12 **A.** No, I mean -- the DVLA guideline that we check and  
13 resort and use as a guidance when we give advice is the  
14 patient in psychosis, if they go inpatient for the next  
15 three months from the point of discharge, they cannot  
16 drive. So I told him without any ambiguity. And after  
17 that, it now depends on the report, their symptoms, if  
18 their symptoms directly affect their ability to drive,  
19 and it's a big page, you know, 4 pages report, and then  
20 it goes to DVLA and then DVLA is final authority to  
21 decide whether somebody can drive it or not.

22 So this what I was explaining to him.

23 **Q.** Just pausing there, the question I was asking you about  
24 group 2 vehicles, there's a completely different period  
25 that applies to group 2 vehicles, isn't there? So we

82

1 **A.** Yeah, first of all there was no -- in my knowledge,  
2 there was no second occasion where the issue of driving  
3 came to my knowledge, throughout the time when I state.  
4 That was the only time when we talked about driving.  
5 I gave him the appropriate guidelines and there was  
6 no -- I don't have a knowledge about group 2 that he was  
7 actually driving it. So I was not aware of -- otherwise  
8 yes, you are right, I would have definitely tell him.

9 **Q.** So what we don't see in the notes is the guidance from  
10 DVLA is that a patient must remain well and stable for  
11 at least three months.

12 **A.** Yes.

13 **Q.** He must adhere to any agreed treatment plan. We don't  
14 see that in the notes, do we, Doctor?

15 **A.** No, but what I'm trying to say is that the issue of  
16 driving and DVLA, that is the only point when it comes  
17 to my attention, and then I appropriately discussed with  
18 VC. After that, it never came to my knowledge that VC  
19 is driving; if driving, which group he was driving, and  
20 that's why I never had a chance to actually discuss with  
21 him, because that was not in my knowledge.

22 **Q.** We don't see either, Dr Burri, you telling VC that  
23 a lack of insight which impacts upon his ability to  
24 drive would be a bar to licensing, do we?

25 **A.** I mean, you know, in this paragraph, I was not in

84

1 a discussion about how our ability to drive is affected  
 2 about symptoms, insight. I was purely telling him the  
 3 guidelines about DVLA that I am legally obliged to say  
 4 to my patients, which I did, to the best of my ability.  
 5 But I was not discussing about the ability of driving  
 6 and how different domains of mental health can affect  
 7 your ability. That was not.

8 **Q.** And we don't see either, in the advice you gave to VC,  
 9 telling him that if he had a history of instability or  
 10 poor engagement with treatment, then he would not be  
 11 able to drive for an even longer period before  
 12 relicensing, do we?

13 **A.** Again, I would say that this point of discussion about,  
 14 was it about the idea of driving in general. I was not  
 15 specifically discussing about the, you know, the  
 16 detailed DVLA guidelines, that how DVLA reach the  
 17 conclusion that if somebody, or how we do the report,  
 18 what are the things that we look at? You know,  
 19 compliance with the medication, symptoms, degree,  
 20 insight. There are loads of discussion, alcohol use,  
 21 drugs use. I was not doing it because that was the  
 22 purpose of this decision, it was only about DVLA  
 23 guideline and what to do for the process.

24 **Q.** Well, let's then just capture here before we move to the  
 25 next consultation. So you've told VC three months will

85

1 no associated distress of feeling, there was no fixation  
 2 about MI5, there was no resultant plan for behaviour for  
 3 something he's on, and that's what I -- that was my  
 4 finding.

5 **Q.** Now, we don't see any revisiting of the advice that you  
 6 provided in September, bearing in mind you've  
 7 effectively told VC "at the end of October you can apply  
 8 back to DVLA."

9 **A.** Yes.

10 **Q.** We now have a patient that is unstable, so in no way is  
 11 going to meet the stability of three months. We don't  
 12 see, first of all, you asking VC, we carry on to the  
 13 plan as well, asking VC, has he notified DVLA, and  
 14 perhaps that's not surprising because we don't actually  
 15 see that you told VC that.

16 **A.** Yeah.

17 **Q.** But why did you not revisit the issue of driving bearing  
 18 in mind VC now is plainly unwell, not stable, and that  
 19 that would completely impact advice that you should have  
 20 been given about the impact upon VC's ability to drive?

21 **A.** Yeah, I did not specifically discuss about his driving  
 22 at that time, because, first of all, he was not acutely  
 23 psychotic. He was not floridly psychotic. All what he  
 24 was telling me about the content of his voices, which is  
 25 part of his, you know, symptoms, illness and everything,

87

1 end on the last day of October. Can we move forward,  
 2 then, to the next time you see him in November, which is  
 3 page 138, please.

4 **A.** Yes.

5 **Q.** This is the entry you've been taken to about the period  
 6 of instability.

7 **A.** Yeah.

8 **Q.** Can I ask you first of all, we've heard some evidence  
 9 from Dr Farnham specifically about the entries here  
 10 about the auditory hallucinations --

11 **A.** Yeah.

12 **Q.** -- and about proving his power.

13 **A.** Yeah.

14 **Q.** Dr Farnham's evidence from the -- who provides advice at  
 15 the Fixated Threat Assessment Centre is that these  
 16 entries support someone who is a seriously disordered  
 17 individual who is clearly unwell. Would you agree that  
 18 that's what those entries reflect: that VC was  
 19 a seriously disordered individual when you saw him in  
 20 November?

21 **A.** No, I don't agree that he was severely disordered at  
 22 that time. There were -- he was -- he was able to tell  
 23 me about the content of the voices, which I explored,  
 24 and he was not thought disordered, he was not actively  
 25 responding, he was not floridly psychotic, and there was

86

1 and there was no -- at that time there was no evidence  
 2 to me that, you know, he came to a point when he was  
 3 driving or there was any third-party information shared  
 4 with me that actually VC is driving, and in that case  
 5 I would have definitely raised with him.

6 **Q.** Well, then let's look at page 140, please, where VC  
 7 tells you he's working in a warehouse.

8 **A.** Yeah.

9 **Q.** Thank you. We can move down, please. Or maybe it's  
 10 above. We can see that VC is referencing that he's  
 11 working in a warehouse and doing deliveries. So did it  
 12 not -- sorry, I think it's the next page, it would be 7  
 13 December. Sorry, I do apologise. Next page. So we can  
 14 see, VC is saying he's working, sorting out parcels and  
 15 deliveries. Was it not absolutely essential now for you  
 16 to discover and understand what doing deliveries in  
 17 a warehouse meant, because even more so that's raising  
 18 a higher class of vehicle that VC might be driving?

19 **A.** No, I mean, this parcel and deliveries, it's what I know  
 20 that, you know, he was -- I think in December time, or  
 21 even, that there was -- that he take a bus from the city  
 22 centre, he go to -- this job in Eastwood(?) or -- and  
 23 then basically his job was sorting out this, in a kind  
 24 of stationery place that he sort out parcels and  
 25 deliveries. It did not occur to me that delivery

88

1 actually means that driving -- do you know what I mean?  
 2 It's a place, you go, you sort out parcel and deliveries  
 3 which comes there, and you work with 50 other people.  
 4 It's not about that he was actually driving and doing  
 5 the delivery.  
 6 **Q.** Doctor, can I ask you, were you made aware at any point  
 7 that VC was captured speeding on 22 February 2021, the  
 8 27 April 2021, 5 May 2021, 8 May 2021, and 15 May 2021,  
 9 all of which VC pleaded guilty to by post on  
 10 22 February 2022 when he was detained in hospital on his  
 11 fourth admission. Were you aware of that?  
 12 **A.** No, I was not aware of that.  
 13 **MS CARTWRIGHT:** Thank you.  
 14 **THE CHAIR:** Thank you.  
 15 **Questioned by MR STRAW**  
 16 **MR STRAW:** Dr Burri, I represent VC's family.  
 17 **A.** Thank you.  
 18 **Q.** Do you remember Mr Moloney referred you to 10 November  
 19 2020 and he asked you whether VC considered that the  
 20 medical staff were part of the conspiracy against him?  
 21 And your response was:  
 22 "Answer: No, not at that point."  
 23 Do you remember that?  
 24 **A.** Yes.  
 25 **Q.** Was there another point at which VC believed medical

89

1 then whether there was any follow-up conversation with  
 2 VC's mum and then whether somebody have actually gone  
 3 there, yes.  
 4 **Q.** You were asked about what plan you gave to the Community  
 5 Team as to how often VC should be seen face-to-face, and  
 6 you said you didn't give a particular plan.  
 7 Now, again, given that history, so this was someone  
 8 who had serious relapses recently, gone into hospital,  
 9 would you agree that also was inadequate: that this --  
 10 there should have been a more concrete plan requiring  
 11 more frequent face-to-face contact with VC?  
 12 **A.** I would not say that it was inadequate because it  
 13 depends, as I said that, you know, generally, you -- you  
 14 have discussion with the CPN and then CPN and the  
 15 patient and then, because once CPN have got lots of  
 16 patients as well.  
 17 So it's down to CPN, the patient and also, you know,  
 18 the wider team discussion that how, you know, what will  
 19 be the frequency of these contacts. So there is a broad  
 20 range, and there isn't a thing that as such I was --  
 21 I was stopping something to happen, or, you know,  
 22 that -- but it's like, like most sort of -- open ended  
 23 that gives a bit of flexibility to that CPN as well as  
 24 the patients, because it depends on lots of personal  
 25 factors about, you know, patients, you know, they are

91

1 staff were part of a conspiracy against him?  
 2 **A.** Not that I have seen till the time I was involved.  
 3 I never got this impression that he was considering me  
 4 or as a part of conspiracy.  
 5 **Q.** You stopped being involved in his case in July 2021; is  
 6 that right?  
 7 **A.** Yes, the first week of July.  
 8 **Q.** Thank you. On 9 October, in response to questions from  
 9 Mr Carr, you saw the entry in the records where VC's mum  
 10 asked for someone from the team to go out and see him.  
 11 She was concerned about him. And the records show that  
 12 no one did actually see him until 26 October, when  
 13 there's a very brief entry from Mr Carter; do you recall  
 14 that?  
 15 **A.** Yes, I recall that conversation, yeah.  
 16 **Q.** Now, given that this was someone who'd been diagnosed  
 17 with schizophrenia, he'd had two relatively serious  
 18 recent relapses which led to him going to hospital, and  
 19 in one of them he caused serious injuries, so a woman  
 20 had to have surgery to her back.  
 21 **A.** Yeah.  
 22 **Q.** Would you agree that that long delay in anyone going out  
 23 to see him was inadequate?  
 24 **A.** Yes, it could be seen as inadequate, but I don't know --  
 25 remember that, you know, the content of the call and

92

1 doing some job, their availability, and you know as a --  
 2 so it's like a very collaborative open-ended kind of  
 3 a plan, so rather than a very rigid one without thinking  
 4 about, you know, there are so many other practical  
 5 factors into it before you agree for a specific plan.  
 6 But overall team agree, CPN agree, I agree, and we  
 7 were in a constant conversation about we were aware  
 8 about the risk and then we know how we will act, you  
 9 know, just in case if things go wrong.  
 10 **Q.** Okay. Final issue is about CBT and psychology. Now,  
 11 you're aware, aren't you, doctor, that the NICE quality  
 12 standards say that for someone like VC, first episode  
 13 psychosis, it's necessary to provide a full range of  
 14 evidence-based treatment, including CBT for psychosis,  
 15 psychological interventions as soon as possible and  
 16 within two weeks of the referral to the EIP team; you're  
 17 aware of that?  
 18 **A.** Yes.  
 19 **Q.** Now, the RiO records, we've been through most of them,  
 20 they show that on 7 September you have that entry about  
 21 psychoeducation which we went to earlier.  
 22 **A.** Yes.  
 23 **Q.** On 17 November, VC is asked about CBT and said he would  
 24 be open to it.  
 25 **A.** Yeah.

92

1 Q. 1 December, he said he'll think about it.  
 2 A. Yeah.  
 3 Q. Then for the first time, 7 December, he says he's not  
 4 keen at the moment on it.  
 5 A. Yeah.  
 6 Q. But between -- now between June and 7 December, it's  
 7 right, isn't it, that other than your entry, the  
 8 psychoeducation, CBT and psychology, there's no note of  
 9 that being made available to him in that whole period?  
 10 A. When I was preparing for the evidence, I can see that  
 11 care coordinator was continuously discussing with him  
 12 about the option. He said that he will think about it,  
 13 maybe relevant, you know, forms were given to him, maybe  
 14 how it worked, then he said okay. Then it was checked  
 15 on the follow-up visit as well, and then finally he said  
 16 that "No, I will not see."  
 17 So yes, there was efforts, there was awareness on  
 18 the team level that this is something that we want him  
 19 to consider and do, and then finally he said that "I'm  
 20 not interested."  
 21 Q. But would you accept that this should have been made  
 22 available within two weeks of the referral? So back in  
 23 June 2020, and although it was offered to him, there was  
 24 a far too long delay in it actually being made available  
 25 to him.

1 So obviously it was a new relationship, so you  
 2 develop over a period of time and team was making  
 3 efforts to basically convince him that he should  
 4 consider it, and then, you know, he decided, in  
 5 December, that he's not keen.  
 6 MR STRAW: Okay, thank you very much.  
 7 Thank you, Chair.  
 8 THE CHAIR: Mr Beer? No? Thank you.  
 9 I have no questions. Thank you. We'll finish there  
 10 for today. Thank you. 10.00.

11 (4.42 pm)  
 12 (The hearing adjourned until 10.00 am the following day)

1 A. Because I was involved with VC in September, so it's  
 2 difficult for me to comment the first three month when  
 3 he was -- whether at what point for the first time CPN  
 4 have actually introduced the word "CBT" with him and  
 5 what was his response.  
 6 But as per standard treatment, I would expect that  
 7 the therapy option must have been discussed with the  
 8 team. But because he came and very quickly he was  
 9 admitted again, so I don't know, you know, in terms of,  
 10 you know, collaborative plan, at what point the therapy  
 11 idea was discussed with him. So it's hard for me to  
 12 comment on it.  
 13 Q. Just the last point. Even in the periods you were  
 14 involved, there's a three-month period there where --  
 15 this is very important, wasn't it, the CBT?  
 16 A. Yeah.  
 17 Q. There was a three-month period there where I suggest you  
 18 should have done more to ensure that those therapies  
 19 were made available to him earlier on; would you accept  
 20 that?  
 21 A. Yeah, and that was my attempt when I said that  
 22 I provided psychoeducation. So part of psychoeducation,  
 23 I was putting my weight into it as well that how  
 24 important therapy is, and subsequently there are entries  
 25 that, you know, the CPN was also making an attempt.

1 INDEX

2		Page
3	DR BILAL AHMAD BURRI (affirmed) .....	1
4	Questioned by MR CARR .....	1
5	Questioned by MR MOLONEY .....	72
6	Questioned by MS CARTWRIGHT .....	77
7	Questioned by MR STRAW .....	89

<p><b>MR CARR: [9]</b> 1/4 1/9 2/3 3/4 16/21 53/13 53/15 53/20 72/6</p> <p><b>MR MOLONEY: [2]</b> 72/9 77/12</p> <p><b>MR STRAW: [2]</b> 89/16 95/6</p> <p><b>MS CARTWRIGHT: [2]</b> 77/15 89/13</p> <p><b>THE CHAIR: [15]</b> 1/3 1/5 1/8 1/25 2/2 2/25 3/3 16/15 16/18 53/14 53/16 72/7 77/13 89/14 95/8</p> <p><b>THE WITNESS: [1]</b> 16/17</p> <hr/> <p>'has [1] 74/12 'the [1] 57/5 'W' [1] 3/24 'was [1] 73/13</p> <hr/> <p>... [1] 74/13</p> <hr/> <p><b>1</b></p> <p><b>1 December [1]</b> 93/1 <b>1 February 2021 [1]</b> 66/24</p> <p><b>1.59 [1]</b> 1/2 <b>10 [1]</b> 55/20 <b>10 milligrams [3]</b> 60/24 60/25 71/19 <b>10 November [8]</b> 54/11 55/11 56/3 56/5 71/10 72/24 73/6 89/18 <b>10 November 2020 [3]</b> 72/11 72/17 72/19 <b>10.00 [3]</b> 22/13 95/10 95/12 <b>10mg [2]</b> 56/8 71/10 <b>10th [2]</b> 55/2 55/14 <b>11.13 [1]</b> 72/24 <b>11.46 [1]</b> 68/10 <b>113 [1]</b> 3/17 <b>119 [1]</b> 21/9 <b>12 [2]</b> 1/19 27/19 <b>120 [1]</b> 36/14 <b>122 [1]</b> 22/12 <b>123 [1]</b> 22/18 <b>124 [1]</b> 22/25 <b>132 [1]</b> 28/5 <b>133 [4]</b> 28/4 28/9 38/22 78/20 <b>134 [1]</b> 49/20 <b>136 [2]</b> 53/22 72/22 <b>137 [1]</b> 72/20 <b>138 [3]</b> 56/6 74/8 86/3 <b>140 [1]</b> 88/6 <b>141 [2]</b> 3/5 64/10</p>	<p><b>146 [1]</b> 66/24 <b>148 [2]</b> 67/21 71/12 <b>149 [1]</b> 68/9 <b>15 [2]</b> 7/1 9/20 <b>15 March [1]</b> 67/20 <b>15 May 2021 [1]</b> 89/8 <b>15 September 2020 [1]</b> 49/23 <b>155 [1]</b> 69/7 <b>15mg [5]</b> 56/8 65/13 67/1 71/10 71/11 <b>16 [1]</b> 20/12 <b>17 November [1]</b> 92/23</p> <hr/> <p><b>2</b></p> <p><b>2 vehicle [2]</b> 83/9 83/10 <b>2.51 [2]</b> 28/7 29/21 <b>20 [1]</b> 71/21 <b>2015 [1]</b> 1/14 <b>2019 [1]</b> 4/10 <b>2020 [16]</b> 4/21 5/3 5/5 5/7 21/14 26/20 27/6 32/3 35/20 49/23 72/11 72/17 72/18 72/19 89/19 93/23 <b>2021 [12]</b> 4/21 5/9 5/9 66/24 69/17 70/15 89/7 89/8 89/8 89/8 89/8 90/5 <b>2022 [7]</b> 4/10 77/20 78/3 78/7 78/9 78/10 89/10 <b>2024 [4]</b> 77/24 78/3 78/9 78/10 <b>2025 [1]</b> 1/14 <b>2026 [1]</b> 1/1 <b>20mg [2]</b> 67/1 71/11 <b>21 [1]</b> 35/19 <b>22 [1]</b> 68/9 <b>22 February 2021 [1]</b> 89/7 <b>22 February 2022 [1]</b> 89/10 <b>23 [1]</b> 68/7 <b>23 May [1]</b> 2/8 <b>23rd May [1]</b> 26/23 <b>24 May 2020 [1]</b> 26/20 <b>25 May 2020 [1]</b> 27/6 <b>25 September [1]</b> 50/3 <b>26 [2]</b> 1/19 68/7 <b>26 October [3]</b> 50/16 50/22 90/12 <b>27 [2]</b> 8/11 89/8 <b>28 [1]</b> 1/1 <b>28 June [1]</b> 69/3 <b>28 November 2015 [1]</b> 1/14 <b>29 [2]</b> 31/25 32/2 <b>2nd [1]</b> 65/23</p> <hr/> <p><b>3</b></p> <p><b>3.00 [1]</b> 9/5</p>	<p><b>3.29 [1]</b> 53/17 <b>3.35 [1]</b> 21/14 <b>3.44 [1]</b> 53/19 <b>3.45 [1]</b> 53/16 <b>30 [4]</b> 2/4 29/24 30/1 71/19 <b>31 July [1]</b> 81/20 <b>31 May 2021 [1]</b> 70/15 <b>31st July [1]</b> 79/4 <b>33 [1]</b> 23/9 <b>36 [2]</b> 9/21 9/23 <b>3rd [1]</b> 65/23</p> <hr/> <p><b>4</b></p> <p><b>4 pages [1]</b> 82/19 <b>4.42 [1]</b> 95/11 <b>40 [1]</b> 30/1 <b>46 [1]</b> 3/18</p> <hr/> <p><b>5</b></p> <p><b>5 milligrams [1]</b> 60/25 <b>5 November [3]</b> 49/16 53/21 55/9 <b>50 [1]</b> 89/3 <b>57 [1]</b> 3/5</p> <hr/> <p><b>6</b></p> <p><b>6 November [1]</b> 55/15 <b>66 [1]</b> 8/12</p> <hr/> <p><b>7</b></p> <p><b>7 December [1]</b> 64/7 <b>7 September [7]</b> 17/14 24/16 25/9 26/7 26/16 38/23 40/9 <b>7001 [1]</b> 23/8 <b>73 [2]</b> 31/25 32/2 <b>75 [2]</b> 2/4 2/17 <b>7th [1]</b> 32/3</p> <hr/> <p><b>8</b></p> <p><b>8 July [1]</b> 70/16 <b>8 May 2021 [1]</b> 89/8 <b>80 [2]</b> 23/9 68/2 <b>81 [1]</b> 68/2 <b>82 [1]</b> 23/21</p> <hr/> <p><b>9</b></p> <p><b>94 [1]</b> 68/3</p> <hr/> <p><b>A</b></p> <p><b>ability [8]</b> 9/1 82/18 84/23 85/1 85/4 85/5 85/7 87/20 <b>able [9]</b> 42/18 65/25 66/4 66/9 73/14 74/16 75/7 85/11 86/22 <b>about [118]</b> <b>above [1]</b> 88/10 <b>abruptly [2]</b> 68/17 68/18 <b>absolutely [4]</b> 8/22 75/18 77/10 88/15</p>	<p><b>accept [2]</b> 93/21 94/19 <b>access [1]</b> 20/23 <b>accommodation [1]</b> 74/14 <b>account [2]</b> 48/16 80/15 <b>accurate [1]</b> 61/10 <b>accurately [1]</b> 80/16 <b>across [1]</b> 76/12 <b>act [4]</b> 8/5 28/13 59/7 92/8 <b>acting [1]</b> 71/1 <b>actively [1]</b> 86/24 <b>actually [20]</b> 3/23 20/3 28/5 29/8 29/18 30/10 41/16 42/10 68/24 74/22 84/7 84/20 87/14 88/4 89/1 89/4 90/12 91/2 93/24 94/4 <b>acute [1]</b> 28/18 <b>acutely [1]</b> 87/22 <b>add [7]</b> 3/12 25/18 37/17 37/23 38/8 38/15 38/18 <b>added [2]</b> 3/24 77/21 <b>addition [2]</b> 33/9 36/4 <b>additional [1]</b> 32/13 <b>adhere [1]</b> 84/13 <b>adjourned [1]</b> 95/12 <b>admission [12]</b> 21/11 25/3 25/5 25/21 26/5 29/12 29/13 35/21 47/18 56/11 56/14 89/11 <b>admissions [4]</b> 25/16 36/21 46/12 48/5 <b>admitted [3]</b> 33/1 61/4 94/9 <b>admitting [1]</b> 56/20 <b>advice [12]</b> 14/13 14/15 14/17 68/15 78/16 78/21 82/13 83/17 85/8 86/14 87/5 87/19 <b>advised [2]</b> 44/11 45/23 <b>affect [3]</b> 46/25 82/18 85/6 <b>affected [3]</b> 47/10 47/11 85/1 <b>affective [5]</b> 46/20 46/23 46/24 47/5 48/2 <b>affirmed [2]</b> 1/6 96/3 <b>after [34]</b> 2/11 11/15 11/16 20/18 21/10 23/20 25/3 25/4 26/23 27/10 32/24 34/15 36/19 45/6 45/7 47/18 54/13 61/14 74/11 78/7 79/5 79/17 79/23 80/2 80/9 80/9 80/14 81/4 81/14 81/16 81/19 81/25 82/16 84/18</p>	<p><b>afternoon [4]</b> 22/7 72/9 74/3 77/15 <b>again [15]</b> 15/16 22/19 30/21 42/4 42/5 44/18 53/16 61/13 64/17 67/3 70/7 81/22 85/13 91/7 94/9 <b>against [9]</b> 58/13 75/4 75/12 76/3 76/4 76/24 77/4 89/20 90/1 <b>aggression [1]</b> 38/4 <b>ago [5]</b> 9/21 17/7 24/1 36/15 74/18 <b>agree [17]</b> 30/16 41/11 42/15 68/22 76/24 77/5 79/8 79/14 82/10 86/17 86/21 90/22 91/9 92/5 92/6 92/6 92/6 <b>agreed [5]</b> 46/11 52/8 69/1 69/25 84/13 <b>agreement [1]</b> 17/4 <b>ahead [4]</b> 26/15 32/1 36/1 69/5 <b>AHMAD [3]</b> 1/6 1/12 96/3 <b>aim [2]</b> 5/22 5/24 <b>aimed [1]</b> 13/3 <b>aims [1]</b> 5/21 <b>alcohol [1]</b> 85/20 <b>all [27]</b> 2/2 9/9 14/4 16/19 20/23 24/11 30/9 32/8 33/23 37/10 48/25 50/20 60/16 67/24 75/11 76/23 77/4 77/12 77/17 78/15 82/3 84/1 86/8 87/12 87/22 87/23 89/9 <b>alleged [1]</b> 58/11 <b>allow [2]</b> 80/12 81/12 <b>allowed [1]</b> 80/2 <b>along [1]</b> 34/16 <b>already [11]</b> 16/5 16/11 22/20 23/17 24/17 24/18 25/6 33/6 36/20 60/11 75/18 <b>also [16]</b> 6/10 6/13 6/14 7/25 10/13 15/5 16/18 36/5 39/20 40/17 42/8 58/12 78/25 91/9 91/17 94/25 <b>although [10]</b> 10/22 12/7 12/20 35/4 64/19 64/23 65/23 66/1 66/13 93/23 <b>always [1]</b> 10/23 <b>am [9]</b> 2/22 22/13 40/16 64/14 81/15 82/7 83/13 85/3 95/12 <b>ambiguity [1]</b> 82/16 <b>AMHP [1]</b> 27/5 <b>amount [1]</b> 52/23 <b>another [11]</b> 9/8 9/10 20/5 26/24 30/3 31/17</p>
--	--	--	--	---

<p><b>A</b></p> <p><b>another... [5]</b> 31/23 33/1 50/4 69/25 89/25</p> <p><b>answer [7]</b> 34/13 39/12 39/13 40/2 41/7 45/9 89/22</p> <p><b>answering [1]</b> 55/6</p> <p><b>answers [1]</b> 41/6</p> <p><b>antipsychotic [3]</b> 6/8 32/23 48/15</p> <p><b>any [25]</b> 8/25 15/12 17/20 32/6 32/7 33/10 34/16 35/2 37/11 37/14 38/7 39/13 39/21 40/9 42/12 50/23 66/8 68/1 82/16 83/17 84/13 87/5 88/3 89/6 91/1</p> <p><b>anyone [2]</b> 34/21 90/22</p> <p><b>anything [3]</b> 11/2 16/5 61/5</p> <p><b>apart [2]</b> 17/9 59/18</p> <p><b>apartment [1]</b> 26/24</p> <p><b>apologise [2]</b> 72/23 88/13</p> <p><b>appeared [3]</b> 28/17 73/12 73/15</p> <p><b>application [1]</b> 66/17</p> <p><b>applies [2]</b> 7/22 82/25</p> <p><b>apply [3]</b> 81/21 81/23 87/7</p> <p><b>appointment [47]</b> 10/4 10/6 10/17 21/1 22/16 24/2 26/6 27/13 28/3 28/6 32/1 33/4 33/12 34/11 34/12 34/16 38/23 40/22 42/13 43/20 44/5 44/5 46/7 47/14 50/21 51/7 52/14 56/2 56/7 61/16 64/6 64/13 65/1 65/9 65/13 65/18 66/23 67/3 69/5 69/21 70/1 70/6 73/4 73/6 73/8 73/9 73/11</p> <p><b>appointments [7]</b> 5/11 9/24 9/25 11/2 11/18 13/17 38/20</p> <p><b>appraise [2]</b> 51/20 51/21</p> <p><b>approach [5]</b> 17/1 17/4 35/10 35/11 35/11</p> <p><b>approachable [1]</b> 34/21</p> <p><b>appropriate [2]</b> 53/14 84/5</p> <p><b>appropriately [1]</b> 84/17</p> <p><b>approval [1]</b> 18/17</p> <p><b>approved [1]</b> 27/19</p> <p><b>April [2]</b> 1/1 89/8</p> <p><b>April 2021 [1]</b> 89/8</p>	<p><b>are [68]</b> 1/17 2/17 5/24 6/7 7/14 10/11 10/12 10/15 11/9 11/20 12/7 12/7 12/9 12/21 12/21 19/4 19/23 24/10 28/25 29/23 30/22 30/23 31/2 33/15 33/15 34/13 34/14 34/18 34/19 35/8 36/8 36/10 37/11 37/17 38/6 42/4 43/6 43/12 48/7 48/25 50/13 50/14 51/4 51/6 51/15 52/18 59/6 59/22 62/4 62/9 62/11 62/15 65/17 66/11 72/6 77/4 78/4 78/14 80/1 80/5 81/25 83/11 84/8 85/18 85/20 91/25 92/4 94/24</p> <p><b>area [1]</b> 74/15</p> <p><b>areas [1]</b> 70/11</p> <p><b>aren't [4]</b> 4/7 31/2 36/9 92/11</p> <p><b>aripiprazole [5]</b> 21/19 21/24 56/8 65/12 71/18</p> <p><b>around [6]</b> 18/10 30/15 39/18 41/4 43/6 46/11</p> <p><b>arrange [1]</b> 67/18</p> <p><b>arranged [1]</b> 34/11</p> <p><b>arrangement [1]</b> 9/13</p> <p><b>arrest [11]</b> 2/8 2/9 2/9 2/11 2/14 2/15 2/21 2/22 2/23 2/23 29/11</p> <p><b>arrested [2]</b> 26/22 28/11</p> <p><b>arrive [3]</b> 21/16 22/23 81/10</p> <p><b>arrived [1]</b> 74/13</p> <p><b>arriving [1]</b> 21/16</p> <p><b>as [99]</b></p> <p><b>ask [16]</b> 12/1 12/4 12/10 12/23 13/8 19/8 37/12 58/4 58/7 60/16 72/9 72/15 77/15 83/2 86/8 89/6</p> <p><b>asked [12]</b> 23/17 45/13 72/16 72/17 73/18 74/23 75/16 76/1 89/19 90/10 91/4 92/23</p> <p><b>asked: [1]</b> 83/11</p> <p><b>asking [11]</b> 37/20 42/4 55/3 55/7 60/2 73/6 73/25 82/23 83/1 87/12 87/13</p> <p><b>asks [1]</b> 42/20</p> <p><b>assertiveness [1]</b> 53/4</p> <p><b>asserts [1]</b> 22/14</p> <p><b>assess [3]</b> 47/20 54/7 80/4</p> <p><b>assessed [2]</b> 6/3</p>	<p>28/12</p> <p><b>assessment [16]</b> 6/2 6/15 10/9 24/14 26/17 26/20 27/14 29/3 33/20 33/24 61/18 61/21 70/22 74/20 74/25 86/15</p> <p><b>assessments [8]</b> 24/22 26/18 27/15 27/17 27/19 27/23 27/24 32/17</p> <p><b>assessor [1]</b> 20/16</p> <p><b>associated [1]</b> 87/1</p> <p><b>at [154]</b></p> <p><b>at page 57 [1]</b> 3/5</p> <p><b>attempt [5]</b> 49/6 50/23 53/5 94/21 94/25</p> <p><b>attempts [2]</b> 50/14 50/23</p> <p><b>attendance [2]</b> 70/14 70/18</p> <p><b>attended [1]</b> 15/13</p> <p><b>attending [2]</b> 13/17 13/20</p> <p><b>attention [2]</b> 42/9 84/17</p> <p><b>auditory [4]</b> 57/17 65/10 65/24 86/10</p> <p><b>August [14]</b> 4/10 4/10 4/21 14/3 21/9 21/14 22/13 22/18 23/1 23/10 25/22 26/8 77/20 78/7</p> <p><b>August 2019 [1]</b> 4/10</p> <p><b>August 2020 [1]</b> 4/21</p> <p><b>August 2022 [2]</b> 4/10 78/7</p> <p><b>authority [1]</b> 82/20</p> <p><b>availability [1]</b> 92/1</p> <p><b>available [8]</b> 20/20 21/4 28/21 32/13 93/9 93/22 93/24 94/19</p> <p><b>aware [47]</b> 3/10 3/12 3/14 23/9 23/13 23/15 23/16 25/6 25/11 25/14 27/12 27/20 29/18 30/6 31/18 37/17 37/25 38/3 38/6 39/15 44/23 46/17 47/13 47/15 48/25 49/11 49/12 50/10 50/12 50/25 54/20 62/10 70/18 70/20 70/21 70/23 77/8 83/8 83/9 83/12 84/7 89/6 89/11 89/12 92/7 92/11 92/17</p> <p><b>awareness [1]</b> 93/17</p> <p><b>away [2]</b> 25/4 66/19</p>	<p>90/20 93/22</p> <p><b>background [7]</b> 28/9 28/20 28/24 28/24 29/4 30/10 31/7</p> <p><b>ban [1]</b> 45/3</p> <p><b>bar [1]</b> 84/24</p> <p><b>based [7]</b> 32/20 37/12 37/21 39/4 54/8 64/17 92/14</p> <p><b>basically [18]</b> 2/9 2/10 10/16 12/23 15/25 29/15 30/8 43/18 46/25 48/9 58/1 66/1 68/19 80/2 80/5 80/13 88/23 95/3</p> <p><b>basis [6]</b> 2/23 18/2 20/10 31/4 39/9 40/2</p> <p><b>be [89]</b> 2/18 2/18 2/20 8/22 9/1 10/16 11/2 11/6 11/14 12/19 13/4 13/10 13/10 13/16 14/19 15/1 15/16 18/7 18/9 18/10 18/16 18/18 18/21 18/24 18/25 20/8 20/22 23/18 26/2 26/8 28/17 29/1 29/16 31/9 32/13 33/23 38/1 40/20 45/21 45/22 46/4 47/1 47/2 48/10 48/10 48/17 48/24 49/12 52/1 55/6 57/9 58/7 59/10 59/20 59/22 61/1 61/5 61/10 61/12 61/18 62/23 63/1 63/6 63/6 63/10 63/21 63/23 64/2 64/12 68/16 72/3 73/14 73/15 73/22 79/13 79/16 79/17 79/22 81/21 81/25 82/9 84/24 85/10 88/12 88/18 90/24 91/5 91/19 92/24</p> <p><b>bearing [3]</b> 80/17 87/6 87/17</p> <p><b>because [68]</b> 12/5 14/2 18/22 18/24 19/19 20/10 24/6 25/11 29/15 30/21 30/22 31/11 31/12 31/20 32/8 34/15 35/5 37/15 38/16 39/15 39/18 41/4 41/15 41/19 43/16 43/24 44/4 45/22 47/18 49/3 51/1 55/18 56/20 57/5 57/14 58/12 59/4 59/6 59/6 60/18 60/23 62/9 63/13 63/24 63/25 66/5 66/6 67/7 68/1 68/13 77/18 79/19 80/25 81/12 82/10 83/16 83/19 83/23 84/21 85/21 87/14 87/22 88/17 91/12</p>	<p>91/15 91/24 94/1 94/8</p> <p><b>become [1]</b> 70/21</p> <p><b>been [32]</b> 6/3 15/9 21/10 21/19 21/21 21/24 35/1 35/23 36/5 38/11 44/4 44/24 50/20 50/25 53/10 55/11 55/24 56/21 63/17 67/7 70/12 70/23 71/4 74/9 83/20 86/5 87/20 90/16 91/10 92/19 93/21 94/7</p> <p><b>Beer [1]</b> 95/8</p> <p><b>before [20]</b> 1/16 17/16 24/7 26/5 32/3 33/10 33/12 40/8 42/1 49/15 59/14 69/15 70/16 74/9 77/23 78/6 83/17 85/11 85/24 92/5</p> <p><b>beginning [2]</b> 51/22 69/13</p> <p><b>behalf [1]</b> 77/16</p> <p><b>behaviour [2]</b> 66/15 87/2</p> <p><b>behavioural [1]</b> 6/9</p> <p><b>behind [1]</b> 43/12</p> <p><b>being [17]</b> 7/10 14/13 17/12 19/10 26/22 38/25 41/23 45/23 48/13 48/25 49/11 60/11 62/1 69/9 90/5 93/9 93/24</p> <p><b>belief [3]</b> 4/4 17/10 17/13</p> <p><b>beliefs [1]</b> 71/1</p> <p><b>believed [1]</b> 89/25</p> <p><b>believes [1]</b> 42/18</p> <p><b>below [1]</b> 55/15</p> <p><b>benefit [4]</b> 12/17 30/24 31/1 64/23</p> <p><b>benefits [2]</b> 65/2 65/7</p> <p><b>best [3]</b> 4/4 20/5 85/4</p> <p><b>better [3]</b> 43/16 64/13 74/17</p> <p><b>between [9]</b> 4/10 9/13 18/12 18/22 19/1 35/23 78/3 93/6 93/6</p> <p><b>big [1]</b> 82/19</p> <p><b>BILAL [4]</b> 1/6 1/12 28/7 96/3</p> <p><b>Birtles [8]</b> 8/10 17/17 56/6 69/8 69/17 73/6 74/1 74/12</p> <p><b>Birtles's [1]</b> 72/24</p> <p><b>bit [13]</b> 12/1 12/16 12/20 13/8 30/7 41/3 57/4 65/19 68/3 68/24 69/22 72/20 91/23</p> <p><b>bits [1]</b> 34/7</p> <p><b>blanket [1]</b> 45/3</p> <p><b>block [1]</b> 26/24</p> <p><b>board [1]</b> 14/4</p> <p><b>booked [1]</b> 11/14</p> <p><b>both [4]</b> 2/1 18/13</p>
---	--	--	---	---

<p><b>B</b></p> <p><b>both... [2]</b> 19/9 37/11</p> <p><b>bottom [8]</b> 17/25 19/6 23/21 38/24 50/15 62/17 72/22 72/23</p> <p><b>box [5]</b> 17/23 26/21 27/6 50/7 53/22</p> <p><b>break [4]</b> 36/10 53/14 53/18 75/6</p> <p><b>breaking [1]</b> 26/23</p> <p><b>Bridewell [1]</b> 28/13</p> <p><b>brief [6]</b> 6/16 29/16 50/16 51/11 52/23 90/13</p> <p><b>bring [3]</b> 14/7 15/2 16/1</p> <p><b>broad [3]</b> 43/8 46/9 91/19</p> <p><b>broke [1]</b> 27/10</p> <p><b>brother [1]</b> 35/23</p> <p><b>build [2]</b> 48/4 75/7</p> <p><b>build-up [1]</b> 48/4</p> <p><b>bullet [6]</b> 2/16 7/5 7/20 8/3 33/22 34/1</p> <p><b>burglary [1]</b> 26/22</p> <p><b>Burri [23]</b> 1/4 1/6 1/12 2/16 11/19 16/15 16/21 28/7 35/25 52/10 53/20 55/3 69/9 71/8 72/9 72/15 77/15 79/10 80/15 83/19 84/22 89/16 96/3</p> <p><b>bus [1]</b> 88/21</p> <p><b>but [111]</b></p> <p><b>buy [1]</b> 79/1</p> <p><b>buzzer [1]</b> 70/15</p> <p><b>byproduct [1]</b> 43/15</p>	<p>50/8 50/13 51/2 52/3 53/4 53/21 53/25 54/18 55/1 57/5 57/5 61/22 63/11 65/20 66/23 67/9 67/23 68/4 68/21 68/22 68/24 68/25 71/23 72/22 72/25 75/2 77/17 78/2 78/20 79/6 79/21 80/10 81/15 81/20 82/2 82/21 83/24 85/6 86/1 86/8 87/7 88/9 88/10 88/13 89/6 93/10</p> <p><b>can't [14]</b> 8/22 9/16 17/9 21/13 31/19 40/20 45/3 54/21 54/24 61/12 71/2 71/2 83/1 83/15</p> <p><b>cannot [14]</b> 32/19 40/7 40/13 50/12 51/4 63/2 63/5 79/22 80/6 80/7 80/23 81/12 82/4 82/15</p> <p><b>canvassing [1]</b> 82/9</p> <p><b>capital [1]</b> 1/22</p> <p><b>capture [1]</b> 85/24</p> <p><b>captured [1]</b> 89/7</p> <p><b>car [1]</b> 79/1</p> <p><b>care [34]</b> 6/11 7/7 8/5 8/8 14/6 14/6 15/1 17/16 17/17 18/1 18/3 18/4 18/6 18/12 18/20 19/3 24/22 32/18 34/24 61/20 61/23 61/25 62/3 62/3 62/7 62/9 62/12 62/20 69/9 69/11 69/13 70/2 70/4 93/11</p> <p><b>carer [1]</b> 6/14</p> <p><b>Carr [7]</b> 1/3 1/7 1/8 72/16 75/18 90/9 96/4</p> <p><b>carried [2]</b> 67/20 74/6</p> <p><b>carry [2]</b> 65/25 87/12</p> <p><b>Carter [6]</b> 50/16 55/16 55/17 59/21 60/6 90/13</p> <p><b>Cartwright [3]</b> 77/13 77/14 96/6</p> <p><b>case [10]</b> 7/17 14/7 14/11 16/23 26/14 41/17 56/15 88/4 90/5 92/9</p> <p><b>caseload [1]</b> 13/20</p> <p><b>cases [3]</b> 5/24 5/25 14/8</p> <p><b>cause [1]</b> 8/25</p> <p><b>caused [2]</b> 27/3 90/19</p> <p><b>causes [1]</b> 43/12</p> <p><b>CBT [11]</b> 43/20 43/20 43/23 64/23 65/5 92/10 92/14 92/23 93/8 94/4 94/15</p> <p><b>CCO [14]</b> 3/10 18/1</p>	<p>32/4 33/10 33/11 40/8 40/9 40/18 49/12 49/17 51/3 51/19 63/3 69/2</p> <p><b>centre [4]</b> 4/17 14/24 86/15 88/22</p> <p><b>certainly [1]</b> 81/17</p> <p><b>cetera [2]</b> 74/13 76/6</p> <p><b>Chair [5]</b> 1/4 53/13 72/6 74/3 95/7</p> <p><b>challenge [1]</b> 59/2</p> <p><b>chance [2]</b> 80/1 84/20</p> <p><b>change [7]</b> 3/19 37/14 61/25 69/11 69/17 70/5 71/24</p> <p><b>changed [3]</b> 37/5 37/22 70/21</p> <p><b>changes [1]</b> 61/24</p> <p><b>check [4]</b> 11/22 12/11 12/25 82/12</p> <p><b>checked [2]</b> 66/12 93/14</p> <p><b>checking [1]</b> 49/13</p> <p><b>Chimbi [1]</b> 21/14</p> <p><b>choose [1]</b> 30/23</p> <p><b>chronology [1]</b> 2/14</p> <p><b>circumstances [1]</b> 45/21</p> <p><b>city [2]</b> 9/9 88/21</p> <p><b>claim [1]</b> 68/14</p> <p><b>clarify [1]</b> 77/17</p> <p><b>class [2]</b> 80/20 88/18</p> <p><b>Claudia [8]</b> 8/9 17/17 56/5 69/8 72/24 73/5 74/1 74/12</p> <p><b>cleanly [1]</b> 74/15</p> <p><b>clear [2]</b> 20/22 72/3</p> <p><b>clearly [3]</b> 24/20 77/2 86/17</p> <p><b>clinic [3]</b> 29/21 29/22 29/22</p> <p><b>clinical [6]</b> 32/9 42/19 42/22 43/2 61/24 68/2</p> <p><b>clinician [1]</b> 7/11</p> <p><b>clinicians [1]</b> 34/3</p> <p><b>Clive [1]</b> 21/14</p> <p><b>Clive Chimbi [1]</b> 21/14</p> <p><b>close [6]</b> 54/9 62/19 63/5 63/16 63/20 63/22</p> <p><b>CMHT [1]</b> 9/11</p> <p><b>cognitive [1]</b> 6/9</p> <p><b>collaborative [2]</b> 92/2 94/10</p> <p><b>colleagues [1]</b> 40/12</p> <p><b>College [1]</b> 33/18</p> <p><b>Collins [2]</b> 68/11 68/19</p> <p><b>come [6]</b> 5/11 39/2 39/25 49/5 52/14 75/16</p> <p><b>comes [11]</b> 11/24 19/22 20/10 25/1 30/5</p>	<p>45/9 46/9 62/3 79/20 80/3 89/3</p> <p><b>coming [2]</b> 31/12 72/15</p> <p><b>command [2]</b> 58/5 66/8</p> <p><b>comment [8]</b> 40/25 41/21 51/18 52/2 52/7 53/1 94/2 94/12</p> <p><b>commented [1]</b> 65/20</p> <p><b>commitment [1]</b> 48/14</p> <p><b>communicating [2]</b> 12/6 12/22</p> <p><b>communication [2]</b> 12/19 49/16</p> <p><b>community [7]</b> 7/5 49/19 51/17 51/20 62/19 62/19 91/4</p> <p><b>compensation [1]</b> 68/14</p> <p><b>completed [2]</b> 17/17 78/7</p> <p><b>completely [4]</b> 67/7 80/19 82/24 87/19</p> <p><b>compliance [19]</b> 22/5 24/14 25/2 25/7 25/10 25/15 25/15 39/16 40/3 40/14 40/19 41/17 48/17 48/21 48/24 49/12 51/8 62/10 85/19</p> <p><b>compliant [3]</b> 38/25 40/6 40/15</p> <p><b>comply [1]</b> 79/8</p> <p><b>concentration [2]</b> 60/19 68/6</p> <p><b>concern [7]</b> 3/11 22/5 28/16 41/22 48/20 55/25 68/17</p> <p><b>concerned [5]</b> 37/24 68/20 73/18 74/22 90/11</p> <p><b>concerning [3]</b> 22/11 37/19 38/17</p> <p><b>concerns [4]</b> 20/18 21/4 45/11 50/9</p> <p><b>conclusion [3]</b> 56/7 67/25 85/17</p> <p><b>concordance [2]</b> 25/2 55/22</p> <p><b>concrete [1]</b> 91/10</p> <p><b>condition [1]</b> 67/10</p> <p><b>conducting [1]</b> 9/25</p> <p><b>confident [1]</b> 46/3</p> <p><b>confirmed [1]</b> 17/7</p> <p><b>confirming [2]</b> 1/16 28/6</p> <p><b>consequence [1]</b> 47/8</p> <p><b>consider [4]</b> 49/15 71/23 93/19 95/4</p> <p><b>consideration [1]</b> 11/19</p> <p><b>considered [3]</b> 24/12</p>	<p>64/12 89/19</p> <p><b>considering [2]</b> 26/16 90/3</p> <p><b>conspiracy [9]</b> 75/4 75/12 76/2 76/4 76/23 77/9 89/20 90/1 90/4</p> <p><b>constant [1]</b> 92/7</p> <p><b>constraint [1]</b> 30/22</p> <p><b>constructive [1]</b> 75/8</p> <p><b>consultant [26]</b> 4/7 7/5 7/6 7/10 7/17 8/13 9/8 9/10 9/11 9/12 9/14 9/15 9/18 13/18 14/15 16/23 19/17 19/20 19/24 20/8 53/24 79/24 80/3 80/11 81/11 82/1</p> <p><b>consultants [2]</b> 7/24 8/1</p> <p><b>consultation [3]</b> 78/21 78/24 85/25</p> <p><b>contact [13]</b> 18/4 18/5 18/6 35/2 45/18 50/14 51/23 54/1 54/10 54/14 54/21 55/9 91/11</p> <p><b>contacting [1]</b> 52/21</p> <p><b>contacts [3]</b> 13/1 45/16 91/19</p> <p><b>content [5]</b> 13/5 58/2 86/23 87/24 90/25</p> <p><b>contents [2]</b> 1/16 38/10</p> <p><b>context [2]</b> 72/23 83/2</p> <p><b>continue [1]</b> 65/23</p> <p><b>continues [1]</b> 73/7</p> <p><b>continuous [1]</b> 51/1</p> <p><b>continuously [1]</b> 93/11</p> <p><b>controlled [1]</b> 68/16</p> <p><b>conversation [7]</b> 37/13 65/6 68/10 75/9 90/15 91/1 92/7</p> <p><b>conversations [1]</b> 35/22</p> <p><b>convey [3]</b> 29/16 30/4 34/23</p> <p><b>conveyed [1]</b> 40/14</p> <p><b>convince [1]</b> 95/3</p> <p><b>cooperative [4]</b> 74/19 74/24 75/2 75/7</p> <p><b>coordinator [16]</b> 6/11 8/8 14/6 14/6 14/11 15/2 17/17 18/2 18/4 18/6 18/12 18/21 34/24 61/20 62/20 93/11</p> <p><b>coordinators [1]</b> 8/5</p> <p><b>copies [1]</b> 15/9</p> <p><b>copy [1]</b> 36/5</p> <p><b>core [2]</b> 5/17 68/2</p> <p><b>correction [7]</b> 1/21 2/3 2/6 2/7 3/4 3/7 3/8</p> <p><b>corrections [3]</b> 1/17 4/1 4/3</p>
(27) both... - corrections				

<p><b>C</b></p> <p><b>correctly [6]</b> 8/21 8/24 9/5 15/4 29/25 54/25</p> <p><b>could [26]</b> 7/25 9/12 11/2 14/13 14/15 14/17 14/19 25/24 25/25 29/1 30/5 30/16 30/18 30/19 30/25 36/22 48/10 49/1 53/10 61/1 61/5 63/6 63/6 72/13 83/22 90/24</p> <p><b>couldn't [1]</b> 59/20</p> <p><b>country [1]</b> 10/22</p> <p><b>couple [7]</b> 11/16 22/21 59/18 61/10 61/12 61/12 74/17</p> <p><b>course [7]</b> 5/11 37/5 43/12 44/20 44/25 47/3 65/12</p> <p><b>cover [1]</b> 37/1</p> <p><b>CPA [1]</b> 6/13</p> <p><b>CPN [19]</b> 19/1 19/19 53/3 53/5 55/2 62/13 63/11 64/4 64/4 69/20 69/23 91/14 91/14 91/15 91/17 91/23 92/6 94/3 94/25</p> <p><b>CPN's [1]</b> 20/7</p> <p><b>CPNs [1]</b> 14/5</p> <p><b>crimes [7]</b> 58/7 58/8 58/11 58/15 58/17 58/23 59/7</p> <p><b>criminal [5]</b> 28/11 29/7 30/11 30/12 32/21</p> <p><b>Crisis [17]</b> 21/15 22/13 22/19 22/22 22/23 23/2 23/6 23/10 23/24 25/13 29/9 32/24 39/5 40/12 47/12 63/25 77/24</p> <p><b>crucial [1]</b> 34/3</p> <p><b>current [5]</b> 12/12 69/11 69/18 77/18 77/23</p> <p><b>currently [1]</b> 18/1</p> <p><b>cut [1]</b> 68/2</p>	<p>81/21 86/1 95/12</p> <p><b>days [15]</b> 8/22 8/24 17/16 47/19 53/7 54/13 59/18 60/7 60/14 60/18 61/4 61/11 61/12 61/14 61/17</p> <p><b>dealing [1]</b> 19/8</p> <p><b>December [8]</b> 5/7 64/7 88/13 88/20 93/1 93/3 93/6 95/5</p> <p><b>December 2020 [1]</b> 5/7</p> <p><b>decide [3]</b> 11/13 11/15 82/21</p> <p><b>decided [3]</b> 18/12 71/3 95/4</p> <p><b>decision [3]</b> 80/11 82/2 85/22</p> <p><b>decisions [4]</b> 14/19 14/22 15/19 15/21</p> <p><b>dedicated [5]</b> 6/11 8/16 15/22 15/23 39/17</p> <p><b>deeper [2]</b> 46/3 46/14</p> <p><b>definitely [4]</b> 38/7 39/11 84/8 88/5</p> <p><b>degree [6]</b> 11/10 11/14 19/1 42/16 53/3 85/19</p> <p><b>delay [2]</b> 90/22 93/24</p> <p><b>deliveries [7]</b> 83/3 88/11 88/15 88/16 88/19 88/25 89/2</p> <p><b>delivery [2]</b> 88/25 89/5</p> <p><b>delusional [1]</b> 71/1</p> <p><b>departments [5]</b> 57/18 57/19 57/20 58/4 75/22</p> <p><b>dependent [2]</b> 80/10 81/25</p> <p><b>depending [1]</b> 80/20</p> <p><b>depends [7]</b> 11/7 18/8 61/2 80/10 82/17 91/13 91/24</p> <p><b>depressed [3]</b> 47/1 47/3 47/6</p> <p><b>depression [2]</b> 12/14 12/14</p> <p><b>Derbyshire [1]</b> 78/6</p> <p><b>describe [11]</b> 7/6 8/4 8/12 9/23 10/3 20/14 38/24 41/22 46/1 47/1 48/13</p> <p><b>described [4]</b> 8/13 24/1 64/11 74/24</p> <p><b>describes [6]</b> 11/1 26/21 27/7 55/17 64/16 70/14</p> <p><b>describing [6]</b> 9/22 20/13 43/7 56/11 57/16 68/10</p> <p><b>despite [3]</b> 12/18 65/15 66/20</p> <p><b>detail [4]</b> 49/22 66/10</p>	<p>66/10 77/17</p> <p><b>detailed [2]</b> 29/1 85/16</p> <p><b>detained [3]</b> 32/22 32/22 89/10</p> <p><b>detection [1]</b> 6/2</p> <p><b>deterioration [1]</b> 54/16</p> <p><b>determine [2]</b> 11/4 18/20</p> <p><b>develop [4]</b> 47/4 47/7 47/21 95/2</p> <p><b>development [1]</b> 56/23</p> <p><b>developments [1]</b> 61/16</p> <p><b>diagnosed [1]</b> 90/16</p> <p><b>diagnosis [2]</b> 47/13 47/23</p> <p><b>did [51]</b> 8/25 19/16 20/22 32/6 32/12 33/7 35/4 35/25 39/6 39/21 41/11 42/7 42/15 43/20 43/22 44/8 44/16 44/18 47/23 51/24 54/10 54/11 57/8 57/22 58/1 58/7 60/2 61/20 61/25 63/4 63/4 63/12 64/19 65/1 67/11 68/8 69/20 75/3 75/5 75/11 75/13 76/1 76/3 78/9 79/15 85/4 87/17 87/21 88/11 88/25 90/12</p> <p><b>didn't [20]</b> 8/20 19/13 29/8 35/13 36/17 36/25 44/19 54/5 54/13 54/15 60/6 65/9 67/14 69/5 70/7 72/19 73/19 77/10 77/11 91/6</p> <p><b>different [23]</b> 7/2 16/5 16/9 16/12 16/12 16/24 31/24 52/3 55/3 57/17 57/19 58/3 63/17 63/20 71/19 71/20 75/22 82/11 82/24 83/4 83/11 83/12 85/6</p> <p><b>differently [1]</b> 31/15</p> <p><b>difficult [4]</b> 53/1 65/4 73/22 94/2</p> <p><b>difficulties [3]</b> 52/21 67/15 67/15</p> <p><b>digging [1]</b> 12/1</p> <p><b>direct [4]</b> 39/11 39/20 49/7 61/20</p> <p><b>directly [2]</b> 68/20 82/18</p> <p><b>disagree [1]</b> 47/23</p> <p><b>disagreeing [2]</b> 47/16 47/17</p> <p><b>discharge [16]</b> 22/6 23/20 24/7 24/21 26/4 26/4 29/14 31/21 32/16 39/6 47/24 49/4</p>	<p>79/4 81/19 81/20 82/15</p> <p><b>discharged [4]</b> 21/10 32/24 33/2 49/4</p> <p><b>Disciplinary [1]</b> 13/20</p> <p><b>disclose [1]</b> 68/21</p> <p><b>disclosure [3]</b> 56/18 57/13 62/1</p> <p><b>discover [1]</b> 88/16</p> <p><b>discuss [12]</b> 7/24 9/17 13/18 14/7 15/25 16/3 16/8 43/23 63/4 73/12 84/20 87/21</p> <p><b>discussed [20]</b> 14/8 18/17 33/11 39/18 40/11 40/18 41/15 43/24 44/3 44/5 44/8 63/3 63/25 69/9 69/23 70/2 70/4 84/17 94/7 94/11</p> <p><b>discussing [4]</b> 8/17 85/5 85/15 93/11</p> <p><b>discussion [20]</b> 3/10 15/16 15/17 15/22 39/18 40/8 40/21 43/14 44/1 50/10 51/1 63/11 64/1 69/16 69/20 85/1 85/13 85/20 91/14 91/18</p> <p><b>discussions [2]</b> 14/21 15/21</p> <p><b>dishonest [2]</b> 56/21 62/1</p> <p><b>disorder [1]</b> 79/12</p> <p><b>disordered [4]</b> 86/16 86/19 86/21 86/24</p> <p><b>display [1]</b> 78/20</p> <p><b>dissection [1]</b> 41/3</p> <p><b>distress [1]</b> 87/1</p> <p><b>distressed [2]</b> 66/2 69/1</p> <p><b>do [50]</b> 7/9 9/15 9/17 11/18 12/5 15/11 16/9 21/17 21/23 23/23 24/13 26/1 26/16 28/7 30/2 33/21 39/13 41/3 43/2 45/2 47/5 50/1 53/3 58/8 59/2 62/6 62/9 62/12 62/13 64/4 68/5 69/2 70/23 71/15 72/23 73/12 79/21 79/25 83/4 84/14 84/24 85/12 85/17 85/23 88/13 89/1 89/18 89/23 90/13 93/19</p> <p><b>doctor [14]</b> 4/11 10/19 13/15 27/20 55/12 56/14 57/1 73/20 73/22 77/1 82/7 84/14 89/6 92/11</p> <p><b>doctors [8]</b> 7/21 7/21 9/22 62/1 62/2 76/4 77/4 77/8</p> <p><b>doctors' [1]</b> 27/22</p>	<p><b>document [17]</b> 5/14 5/17 5/20 17/19 17/21 23/1 33/17 33/18 33/21 36/5 38/11 38/22 62/4 64/10 66/24 70/13 72/13</p> <p><b>documented [3]</b> 16/11 31/23 64/22</p> <p><b>documents [6]</b> 24/20 24/24 26/12 27/25 31/13 32/19</p> <p><b>does [6]</b> 5/13 23/1 37/2 42/11 52/23 62/22</p> <p><b>does it [2]</b> 37/2 62/22</p> <p><b>doesn't [11]</b> 23/1 26/22 27/7 37/1 55/22 57/22 61/23 62/22 80/16 80/20 81/15</p> <p><b>doing [18]</b> 7/22 11/20 11/23 29/3 38/2 45/22 62/11 62/16 63/18 64/2 80/3 82/6 83/3 85/21 88/11 88/16 89/4 92/1</p> <p><b>domains [1]</b> 85/6</p> <p><b>don't [30]</b> 12/18 22/9 24/25 25/12 31/1 33/10 42/15 50/24 57/6 57/11 57/14 60/24 64/3 67/24 69/19 70/1 72/3 79/10 83/25 84/6 84/9 84/13 84/22 85/8 86/21 87/5 87/11 87/14 90/24 94/9</p> <p><b>done [8]</b> 6/17 14/1 27/15 27/16 42/1 53/10 63/24 94/18</p> <p><b>door [5]</b> 2/11 27/3 32/21 68/15 74/14</p> <p><b>dosage [1]</b> 67/6</p> <p><b>dose [10]</b> 21/24 22/2 60/23 71/14 71/15 71/18 71/19 71/22 72/2 72/4</p> <p><b>doses [1]</b> 71/20</p> <p><b>doubt [1]</b> 80/21</p> <p><b>down [17]</b> 15/3 22/19 23/12 28/2 35/18 45/25 55/16 57/3 57/16 64/16 67/9 73/1 75/6 76/8 76/10 88/9 91/17</p> <p><b>Dr [57]</b> 1/4 1/6 2/16 7/19 8/12 8/20 8/21 9/10 9/13 11/19 15/15 16/8 16/8 16/12 16/15 16/21 16/23 19/10 19/13 19/17 19/19 20/2 20/3 27/16 27/16 27/18 27/18 28/7 35/20 35/24 35/25 37/4 37/21 49/17 52/10 53/20 53/24 53/25 54/14 54/19</p>
--	---	--	---	---

<p><b>D</b></p> <p><b>Dr...</b> [17] 54/23 55/3 55/9 69/9 71/8 72/9 72/15 72/18 77/15 79/10 80/15 83/19 84/22 86/9 86/14 89/16 96/3</p> <p><b>Dr Bilal</b> [1] 28/7</p> <p><b>Dr Burri</b> [19] 1/4 2/16 11/19 16/15 16/21 35/25 52/10 53/20 55/3 69/9 71/8 72/9 72/15 77/15 79/10 80/15 83/19 84/22 89/16</p> <p><b>Dr Farnham</b> [1] 86/9</p> <p><b>Dr Farnham's</b> [1] 86/14</p> <p><b>Dr Lloyd</b> [15] 8/12 8/20 8/21 9/13 15/15 16/8 16/8 16/12 16/23 19/10 19/13 19/17 19/19 20/2 20/3</p> <p><b>Dr Malik</b> [1] 27/16</p> <p><b>Dr Manzar</b> [1] 27/18</p> <p><b>Dr Sadraei</b> [1] 27/16</p> <p><b>Dr Seedat</b> [13] 27/18 35/20 35/24 37/4 37/21 49/17 53/24 53/25 54/14 54/19 54/23 55/9 72/18</p> <p><b>Dr Tuhina</b> [2] 7/19 9/10</p> <p><b>draw</b> [1] 42/9</p> <p><b>dressed</b> [1] 74/15</p> <p><b>drive</b> [26] 44/12 45/2 45/3 45/5 45/11 79/3 79/13 79/22 80/2 80/6 80/7 80/10 80/23 81/12 81/13 81/16 81/22 82/2 82/4 82/16 82/18 82/21 84/24 85/1 85/11 87/20</p> <p><b>driving</b> [31] 44/18 44/22 44/23 44/25 45/10 45/14 45/22 78/17 79/2 80/12 82/9 83/1 83/7 83/9 83/10 84/2 84/4 84/7 84/16 84/19 84/19 84/19 85/5 85/14 87/17 87/21 88/3 88/4 88/18 89/1 89/4</p> <p><b>drop</b> [1] 16/16</p> <p><b>drugs</b> [1] 85/21</p> <p><b>due</b> [2] 5/11 69/3</p> <p><b>during</b> [10] 7/25 15/22 16/3 19/12 29/22 35/21 37/4 47/3 52/18 56/14</p> <p><b>DVLA</b> [44] 44/10 44/14 44/16 45/4 45/8 45/8 45/16 45/16 45/19 78/22 78/25 79/6 79/7 79/10 79/13</p>	<p>79/17 79/21 79/23 79/24 80/4 80/12 81/1 81/9 81/12 81/23 81/24 82/2 82/5 82/12 82/20 82/20 83/12 83/16 83/20 83/23 83/23 84/10 84/16 85/3 85/16 85/16 85/22 87/8 87/13</p> <p><b>E</b></p> <p><b>each</b> [7] 18/13 25/25 26/2 26/11 29/24 36/23 49/22</p> <p><b>earlier</b> [4] 60/7 73/3 92/21 94/19</p> <p><b>early</b> [7] 4/23 5/23 5/24 6/3 22/5 47/19 53/6</p> <p><b>Eastwood</b> [1] 88/22</p> <p><b>easy</b> [3] 74/20 74/25 75/7</p> <p><b>ed</b> [1] 74/14</p> <p><b>educate</b> [1] 43/18</p> <p><b>effect</b> [2] 65/17 68/6</p> <p><b>effective</b> [3] 71/14 71/15 72/4</p> <p><b>effectively</b> [1] 87/7</p> <p><b>effects</b> [1] 39/13</p> <p><b>effort</b> [2] 53/11 74/23</p> <p><b>efforts</b> [2] 93/17 95/3</p> <p><b>EI</b> [5] 6/5 6/12 15/5 47/19 48/6</p> <p><b>eight</b> [3] 51/10 51/10 52/15</p> <p><b>EIP</b> [25] 4/19 4/23 4/23 5/12 5/15 5/21 5/22 6/17 8/7 8/20 10/1 13/23 14/24 15/11 17/11 19/12 20/22 21/1 24/2 27/22 54/5 70/16 70/19 71/5 92/16</p> <p><b>either</b> [3] 47/3 84/22 85/8</p> <p><b>elated</b> [2] 47/2 47/3</p> <p><b>element</b> [2] 41/11 46/4</p> <p><b>elsewhere</b> [1] 2/18</p> <p><b>email</b> [7] 54/14 54/19 54/20 55/2 68/19 72/18 73/25</p> <p><b>encounter</b> [4] 24/17 31/23 31/24 63/14</p> <p><b>end</b> [9] 11/12 25/20 25/21 42/25 43/4 79/5 83/21 86/1 87/7</p> <p><b>ended</b> [5] 42/1 51/22 63/7 91/22 92/2</p> <p><b>engage</b> [1] 53/6</p> <p><b>engagement</b> [3] 52/6 64/12 85/10</p> <p><b>engaging</b> [2] 53/12 74/16</p> <p><b>enough</b> [2] 33/14 35/7</p>	<p><b>enquire</b> [2] 13/4 73/24</p> <p><b>enquired</b> [2] 66/6 73/10</p> <p><b>enquiry</b> [1] 13/8</p> <p><b>ensure</b> [1] 94/18</p> <p><b>ensuring</b> [1] 18/5</p> <p><b>enter</b> [1] 2/12</p> <p><b>entire</b> [1] 49/21</p> <p><b>entirely</b> [1] 40/3</p> <p><b>entries</b> [15] 19/5 21/7 25/13 25/13 26/3 26/8 26/12 36/22 38/12 39/5 40/12 86/9 86/16 86/18 94/24</p> <p><b>entry</b> [40] 15/14 17/9 21/12 21/14 21/17 22/4 22/9 23/1 25/25 26/2 28/4 29/15 29/20 30/2 31/3 31/3 35/20 35/25 36/18 50/4 50/8 50/15 53/23 53/24 55/15 62/18 64/15 64/21 68/9 69/7 72/24 74/9 76/9 82/8 83/2 86/5 90/9 90/13 92/20 93/7</p> <p><b>envisaged</b> [1] 52/25</p> <p><b>episode</b> [7] 23/13 23/15 23/16 45/6 46/20 81/2 92/12</p> <p><b>episodes</b> [1] 52/3</p> <p><b>equally</b> [3] 15/4 29/17 41/5</p> <p><b>eradicated</b> [1] 67/7</p> <p><b>escalation</b> [1] 76/12</p> <p><b>especially</b> [1] 12/13</p> <p><b>essential</b> [1] 88/15</p> <p><b>essentially</b> [4] 16/4 36/24 56/15 75/20</p> <p><b>et</b> [2] 74/13 76/6</p> <p><b>et cetera</b> [2] 74/13 76/6</p> <p><b>etc</b> [2] 57/18 75/23</p> <p><b>even</b> [6] 26/2 34/19 85/11 88/17 88/21 94/13</p> <p><b>evening</b> [3] 21/16 22/7 26/23</p> <p><b>event</b> [3] 2/22 30/16 31/20</p> <p><b>events</b> [6] 2/10 2/15 2/24 3/1 29/5 31/22</p> <p><b>ever</b> [7] 9/17 11/19 13/6 44/16 44/18 76/1 76/3</p> <p><b>every</b> [12] 6/12 8/16 11/22 18/18 25/25 26/2 26/11 36/23 37/2 63/7 64/5 64/5</p> <p><b>everybody</b> [1] 20/22</p> <p><b>everything</b> [6] 12/4 12/8 29/17 49/8 60/19 87/25</p> <p><b>evidence</b> [13] 4/6 24/13 27/1 36/3 54/18</p>	<p>60/6 69/14 74/3 86/8 86/14 88/1 92/14 93/10</p> <p><b>evidence-based</b> [1] 92/14</p> <p><b>exactly</b> [8] 43/6 51/4 53/1 58/25 63/2 64/3 69/19 70/1</p> <p><b>examination</b> [2] 10/10 46/1</p> <p><b>example</b> [4] 12/14 20/4 52/4 81/11</p> <p><b>except</b> [1] 15/14</p> <p><b>exchange</b> [3] 50/17 51/11 52/23</p> <p><b>expect</b> [2] 61/25 94/6</p> <p><b>expectation</b> [1] 61/17</p> <p><b>experience</b> [3] 43/18 59/2 65/23</p> <p><b>experienced</b> [1] 79/12</p> <p><b>experiences</b> [1] 77/6</p> <p><b>explain</b> [7] 28/23 32/11 43/9 46/23 65/1 79/19 80/8</p> <p><b>explained</b> [4] 16/22 22/22 73/22 74/2</p> <p><b>explaining</b> [3] 80/13 81/14 82/22</p> <p><b>explains</b> [1] 14/9</p> <p><b>explanation</b> [2] 5/12 29/19</p> <p><b>explore</b> [4] 13/6 13/13 38/19 57/23</p> <p><b>explored</b> [1] 86/23</p> <p><b>exploring</b> [1] 58/2</p> <p><b>express</b> [2] 39/21 42/14</p> <p><b>expressed</b> [4] 28/16 39/22 40/9 41/12</p> <p><b>expressing</b> [2] 41/9 42/11</p> <p><b>extent</b> [2] 15/7 65/1</p> <p><b>eye</b> [5] 49/18 51/9 51/17 51/19 52/24</p> <p><b>eyes</b> [1] 49/7</p> <p><b>F</b></p> <p><b>face</b> [16] 10/21 10/21 10/24 10/24 54/7 54/7 70/10 70/10 73/8 73/8 73/15 73/16 91/5 91/5 91/11 91/11</p> <p><b>fact</b> [11] 8/25 25/9 30/12 39/22 42/19 44/8 70/7 73/5 74/5 75/15 79/14</p> <p><b>factor</b> [1] 30/14</p> <p><b>factors</b> [2] 91/25 92/5</p> <p><b>fair</b> [1] 16/21</p> <p><b>fall</b> [1] 46/10</p> <p><b>families</b> [4] 12/22 34/18 34/25 35/8</p> <p><b>family</b> [6] 6/10 34/22</p>	<p>35/3 35/5 35/11 89/16</p> <p><b>far</b> [6] 15/15 31/18 36/24 37/23 74/22 93/24</p> <p><b>Farnham</b> [1] 86/9</p> <p><b>Farnham's</b> [1] 86/14</p> <p><b>fault</b> [1] 77/1</p> <p><b>feature</b> [1] 12/14</p> <p><b>features</b> [1] 5/17</p> <p><b>February</b> [5] 5/9 66/24 71/11 89/7 89/10</p> <p><b>February 2021</b> [1] 5/9</p> <p><b>feel</b> [5] 39/13 54/8 75/11 77/10 77/11</p> <p><b>feeling</b> [1] 87/1</p> <p><b>feelings</b> [1] 66/15</p> <p><b>felt</b> [3] 33/7 73/18 76/16</p> <p><b>female</b> [2] 27/8 27/21</p> <p><b>few</b> [13] 9/21 11/2 11/3 17/7 17/16 24/1 32/18 42/1 44/9 57/16 60/7 61/4 61/14</p> <p><b>fifth</b> [1] 10/25</p> <p><b>final</b> [10] 3/4 27/7 48/12 48/12 49/17 50/4 70/8 71/8 82/20 92/10</p> <p><b>finally</b> [3] 22/25 93/15 93/19</p> <p><b>find</b> [2] 31/16 33/23</p> <p><b>finding</b> [3] 39/4 39/9 87/4</p> <p><b>finish</b> [3] 9/5 30/1 95/9</p> <p><b>finished</b> [1] 20/21</p> <p><b>firm</b> [1] 76/14</p> <p><b>first</b> [51] 1/19 2/8 2/9 2/10 2/15 2/16 2/22 7/5 17/14 17/23 17/23 20/25 22/6 24/2 24/16 25/3 25/21 27/9 27/16 29/9 29/12 29/13 33/22 34/15 35/21 36/17 36/19 44/5 45/5 46/20 48/24 54/25 58/9 69/15 70/23 74/10 77/17 78/4 78/4 79/25 80/21 81/13 84/1 86/8 87/12 87/22 90/7 92/12 93/3 94/2 94/3</p> <p><b>first-floor</b> [1] 27/9</p> <p><b>Firstly</b> [2] 31/3 70/12</p> <p><b>five</b> [5] 4/16 5/1 54/13 61/1 63/14</p> <p><b>five days</b> [1] 54/13</p> <p><b>Fixated</b> [1] 86/15</p> <p><b>fixation</b> [1] 87/1</p> <p><b>flagged</b> [1] 13/11</p> <p><b>flat</b> [5] 26/23 28/12 28/17 29/8 30/17</p> <p><b>flee</b> [2] 2/13 27/21</p> <p><b>flexibility</b> [4] 11/10</p>
---	--	--	---	---

<b>F</b>	<b>gather [2]</b> 14/3 34/4 <b>gave [5]</b> 61/6 76/15 84/5 85/8 91/4 <b>general [6]</b> 18/19 43/14 51/18 66/4 71/6 85/14 <b>generally [2]</b> 12/9 91/13 <b>get [9]</b> 17/19 43/16 49/16 56/16 57/7 57/12 57/15 68/25 75/5 <b>getting [1]</b> 66/19 <b>give [17]</b> 10/11 10/12 11/19 14/13 14/15 14/17 18/23 20/4 29/6 30/7 51/24 60/19 68/24 75/3 82/13 83/17 91/6 <b>given [21]</b> 15/9 28/21 41/1 51/6 54/16 55/24 59/20 60/13 61/3 61/25 63/20 65/8 66/8 75/1 75/11 77/6 80/16 87/20 90/16 91/7 93/13 <b>gives [2]</b> 12/20 91/23 <b>giving [3]</b> 41/6 81/17 82/3 <b>go [48]</b> 6/12 7/1 8/3 8/11 9/20 12/16 12/18 16/6 16/13 20/11 20/19 21/3 21/8 26/20 27/5 28/2 28/3 28/9 28/15 33/21 34/16 35/18 35/19 36/24 38/22 45/25 47/22 49/21 53/21 53/22 56/10 58/10 61/13 69/5 70/24 71/3 72/19 72/20 72/22 72/25 74/8 74/23 76/9 82/14 88/22 89/2 90/10 92/9 <b>goes [7]</b> 2/21 19/22 20/10 50/16 53/2 57/16 82/20 <b>going [19]</b> 12/7 12/21 13/16 31/9 39/25 40/23 49/21 50/20 58/16 59/7 59/7 62/12 63/23 74/1 80/15 82/7 87/11 90/18 90/22 <b>gold [1]</b> 6/6 <b>gone [4]</b> 52/12 71/9 91/2 91/8 <b>good [14]</b> 20/19 21/4 24/4 33/19 40/10 40/11 46/12 53/9 68/23 72/9 75/13 75/14 75/15 77/15 <b>got [16]</b> 2/24 16/16 16/18 18/17 26/12 32/25 32/25 34/13 46/13 55/2 66/17 78/6 79/11 81/13 90/3 91/15	<b>government [1]</b> 57/20 <b>GP [7]</b> 31/4 31/6 31/10 31/18 31/18 49/3 49/6 <b>grasp [1]</b> 46/3 <b>great [1]</b> 49/22 <b>group [9]</b> 58/13 82/10 82/24 82/25 83/6 83/9 83/10 84/6 84/19 <b>group 2 [2]</b> 82/10 83/6 <b>guess [5]</b> 20/1 26/10 30/4 51/3 63/12 <b>guidance [5]</b> 7/15 79/11 82/13 83/12 84/9 <b>guide [2]</b> 33/19 34/7 <b>guideline [3]</b> 79/2 82/12 85/23 <b>guidelines [10]</b> 6/6 44/10 44/11 45/4 78/25 80/17 83/17 84/5 85/3 85/16 <b>guilty [1]</b> 89/9	<b>60/16 60/20 61/4</b> 72/16 73/5 75/18 79/11 87/13 <b>hasn't [1]</b> 22/7 <b>have [109]</b> <b>haven't [5]</b> 1/14 15/9 27/2 36/6 45/15 <b>having [2]</b> 37/18 60/7 <b>he [209]</b> <b>he'd [10]</b> 42/1 42/1 45/22 56/16 60/14 74/4 74/23 75/15 76/18 90/17 <b>he'll [2]</b> 22/23 93/1 <b>he's [17]</b> 22/15 40/6 41/23 42/4 54/3 56/10 64/20 72/17 75/24 77/5 79/14 87/3 88/7 88/10 88/14 93/3 95/5 <b>head [1]</b> 83/15 <b>heading [8]</b> 10/15 17/24 19/6 19/7 28/9 45/25 46/19 62/17 <b>heads [1]</b> 36/10 <b>health [8]</b> 19/6 19/9 26/16 28/13 54/4 77/23 78/5 85/6 <b>Healthcare [1]</b> 4/12 <b>hear [4]</b> 16/16 16/19 44/16 57/5 <b>heard [4]</b> 44/17 57/9 60/6 86/8 <b>hearing [6]</b> 15/8 17/8 36/4 56/15 66/1 95/12 <b>help [1]</b> 68/21 <b>helps [1]</b> 72/2 <b>her [4]</b> 15/6 27/10 70/3 90/20 <b>here [14]</b> 2/6 3/12 9/22 31/9 41/9 42/4 45/15 59/24 64/14 68/10 76/6 83/1 85/24 86/9 <b>hesitant [1]</b> 73/12 <b>high [1]</b> 67/24 <b>Highbury [1]</b> 32/17 <b>higher [2]</b> 78/4 88/18 <b>him [88]</b> 3/22 17/16 22/22 26/7 26/14 30/15 36/10 39/19 41/3 41/6 41/15 45/1 48/7 49/18 50/10 50/23 51/17 53/6 53/12 54/1 56/21 57/8 58/4 58/6 60/16 61/3 63/23 63/23 64/7 65/2 65/6 66/7 69/1 69/21 69/25 70/5 70/7 70/9 70/25 71/1 71/18 72/19 74/17 74/23 74/24 74/24 75/4 75/6 75/8 75/12 75/21 76/3 76/4 76/24 77/4 78/25 79/2 80/23 81/15 81/17 82/3 82/16 82/22 84/5 84/8 84/21	<b>85/2 85/9 86/2 86/19</b> 88/5 89/20 90/1 90/10 90/11 90/12 90/18 90/23 93/9 93/11 93/13 93/18 93/23 93/25 94/4 94/11 94/19 95/3 <b>himself [1]</b> 74/17 <b>hindsight [2]</b> 30/24 31/1 <b>hint [1]</b> 30/7 <b>his [68]</b> 17/17 18/1 21/17 21/24 22/7 22/14 22/15 22/20 23/2 23/7 24/14 26/24 35/23 38/25 39/22 40/25 41/4 41/9 41/13 42/11 42/13 42/14 42/14 44/23 46/3 46/7 49/7 50/19 54/7 56/11 56/14 57/11 57/12 57/22 57/25 58/19 59/2 59/17 59/24 60/14 60/16 60/18 65/8 65/25 66/4 66/10 66/12 66/14 66/15 66/18 67/10 67/15 68/15 73/13 73/18 73/24 74/13 81/19 81/20 84/23 86/12 87/21 87/24 87/25 88/23 89/10 90/5 94/5 <b>historically [2]</b> 77/7 77/7 <b>history [9]</b> 10/10 25/14 41/1 41/17 54/16 55/24 65/15 85/9 91/7 <b>hm [2]</b> 49/25 51/12 <b>home [6]</b> 50/4 51/10 52/18 73/23 74/11 77/24 <b>hope [1]</b> 43/15 <b>horizon [2]</b> 25/11 48/17 <b>hospital [9]</b> 32/23 42/4 56/11 56/16 79/20 80/22 89/10 90/18 91/8 <b>hour [4]</b> 8/16 15/16 29/10 29/23 <b>hours [1]</b> 9/6 <b>House [1]</b> 70/14 <b>how [42]</b> 11/4 11/11 14/1 14/7 18/13 18/16 18/19 18/20 18/24 19/2 25/24 27/7 29/12 32/12 38/5 39/12 39/13 40/8 40/21 43/13 47/22 52/2 53/7 53/9 62/22 63/22 65/4 66/10 66/11 72/17 75/1 76/16 81/25 85/1 85/6 85/16 85/17 91/5 91/18 92/8 93/14 94/23
<b>G</b>	<b>Gail [2]</b> 68/11 68/19 <b>gap [1]</b> 78/8 <b>Gary [4]</b> 50/16 55/16 59/21 60/6	<b>had [48]</b> 2/13 3/10 7/18 9/17 17/20 21/1 21/19 21/21 21/24 24/12 24/12 35/6 35/16 35/23 37/1 37/4 40/8 47/12 50/22 52/25 54/1 55/20 56/21 59/14 59/21 62/25 63/11 65/12 68/11 69/16 69/20 69/22 70/21 71/22 73/11 73/15 73/20 75/14 75/15 76/20 79/12 79/14 81/1 84/20 85/9 90/17 90/20 91/8 <b>hadn't [2]</b> 22/2 67/7 <b>half [2]</b> 8/22 8/24 <b>halfway [1]</b> 75/20 <b>hallucination [1]</b> 58/5 <b>hallucinations [4]</b> 57/17 65/10 65/24 86/10 <b>happen [5]</b> 49/1 49/14 80/9 80/14 91/21 <b>happened [6]</b> 29/11 29/13 31/22 36/21 36/22 41/18 <b>happening [3]</b> 11/25 51/4 74/5 <b>hard [3]</b> 52/7 61/14 94/11 <b>harmful [1]</b> 13/5 <b>has [17]</b> 21/10 21/16 22/14 22/20 41/17 46/3 48/4 50/16 50/20	<b>60/16 60/20 61/4</b> 72/16 73/5 75/18 79/11 87/13 <b>hasn't [1]</b> 22/7 <b>have [109]</b> <b>haven't [5]</b> 1/14 15/9 27/2 36/6 45/15 <b>having [2]</b> 37/18 60/7 <b>he [209]</b> <b>he'd [10]</b> 42/1 42/1 45/22 56/16 60/14 74/4 74/23 75/15 76/18 90/17 <b>he'll [2]</b> 22/23 93/1 <b>he's [17]</b> 22/15 40/6 41/23 42/4 54/3 56/10 64/20 72/17 75/24 77/5 79/14 87/3 88/7 88/10 88/14 93/3 95/5 <b>head [1]</b> 83/15 <b>heading [8]</b> 10/15 17/24 19/6 19/7 28/9 45/25 46/19 62/17 <b>heads [1]</b> 36/10 <b>health [8]</b> 19/6 19/9 26/16 28/13 54/4 77/23 78/5 85/6 <b>Healthcare [1]</b> 4/12 <b>hear [4]</b> 16/16 16/19 44/16 57/5 <b>heard [4]</b> 44/17 57/9 60/6 86/8 <b>hearing [6]</b> 15/8 17/8 36/4 56/15 66/1 95/12 <b>help [1]</b> 68/21 <b>helps [1]</b> 72/2 <b>her [4]</b> 15/6 27/10 70/3 90/20 <b>here [14]</b> 2/6 3/12 9/22 31/9 41/9 42/4 45/15 59/24 64/14 68/10 76/6 83/1 85/24 86/9 <b>hesitant [1]</b> 73/12 <b>high [1]</b> 67/24 <b>Highbury [1]</b> 32/17 <b>higher [2]</b> 78/4 88/18 <b>him [88]</b> 3/22 17/16 22/22 26/7 26/14 30/15 36/10 39/19 41/3 41/6 41/15 45/1 48/7 49/18 50/10 50/23 51/17 53/6 53/12 54/1 56/21 57/8 58/4 58/6 60/16 61/3 63/23 63/23 64/7 65/2 65/6 66/7 69/1 69/21 69/25 70/5 70/7 70/9 70/25 71/1 71/18 72/19 74/17 74/23 74/24 74/24 75/4 75/6 75/8 75/12 75/21 76/3 76/4 76/24 77/4 78/25 79/2 80/23 81/15 81/17 82/3 82/16 82/22 84/5 84/8 84/21	<b>85/2 85/9 86/2 86/19</b> 88/5 89/20 90/1 90/10 90/11 90/12 90/18 90/23 93/9 93/11 93/13 93/18 93/23 93/25 94/4 94/11 94/19 95/3 <b>himself [1]</b> 74/17 <b>hindsight [2]</b> 30/24 31/1 <b>hint [1]</b> 30/7 <b>his [68]</b> 17/17 18/1 21/17 21/24 22/7 22/14 22/15 22/20 23/2 23/7 24/14 26/24 35/23 38/25 39/22 40/25 41/4 41/9 41/13 42/11 42/13 42/14 42/14 44/23 46/3 46/7 49/7 50/19 54/7 56/11 56/14 57/11 57/12 57/22 57/25 58/19 59/2 59/17 59/24 60/14 60/16 60/18 65/8 65/25 66/4 66/10 66/12 66/14 66/15 66/18 67/10 67/15 68/15 73/13 73/18 73/24 74/13 81/19 81/20 84/23 86/12 87/21 87/24 87/25 88/23 89/10 90/5 94/5 <b>historically [2]</b> 77/7 77/7 <b>history [9]</b> 10/10 25/14 41/1 41/17 54/16 55/24 65/15 85/9 91/7 <b>hm [2]</b> 49/25 51/12 <b>home [6]</b> 50/4 51/10 52/18 73/23 74/11 77/24 <b>hope [1]</b> 43/15 <b>horizon [2]</b> 25/11 48/17 <b>hospital [9]</b> 32/23 42/4 56/11 56/16 79/20 80/22 89/10 90/18 91/8 <b>hour [4]</b> 8/16 15/16 29/10 29/23 <b>hours [1]</b> 9/6 <b>House [1]</b> 70/14 <b>how [42]</b> 11/4 11/11 14/1 14/7 18/13 18/16 18/19 18/20 18/24 19/2 25/24 27/7 29/12 32/12 38/5 39/12 39/13 40/8 40/21 43/13 47/22 52/2 53/7 53/9 62/22 63/22 65/4 66/10 66/11 72/17 75/1 76/16 81/25 85/1 85/6 85/16 85/17 91/5 91/18 92/8 93/14 94/23

<b>H</b>				
<b>however [1]</b> 73/14				
<b>huge [1]</b> 37/14				
<b>hurt [1]</b> 36/12				
<b>I</b>				
<b>I agree [3]</b> 30/16 68/22 92/6	30/4	<b>I think [14]</b> 8/23 11/23 16/15 18/6 19/18 29/25 37/7 55/2 55/6 59/4 69/19 77/20 88/12 88/20	<b>illness [14]</b> 10/12 11/9 37/9 37/14 43/6 43/9 43/15 46/4 46/14 47/4 47/20 47/22 79/14 87/25	31/16 32/6 32/8 32/13 33/5 33/15 34/4 34/9 35/7 35/16 38/7 38/15 40/14 61/21 68/16 68/18 68/21 68/25 71/4 71/7 81/13 88/3
<b>I agreed [1]</b> 69/1	25/12 33/3 33/14 36/11 36/13 45/10 59/9 71/21 78/12 90/2	<b>I told [4]</b> 64/4 79/2 80/23 82/16	<b>immediate [1]</b> 40/19	<b>informed [1]</b> 35/2
<b>I already [1]</b> 33/6	<b>I joined [2]</b> 14/2 19/21	<b>I took [2]</b> 9/21 41/19	<b>immediately [1]</b> 79/21	<b>informs [1]</b> 45/15
<b>I also [2]</b> 42/8 78/25	<b>I just [6]</b> 2/25 30/7 32/11 70/11 72/9 76/8	<b>I understand [2]</b> 63/19 63/19	<b>impact [3]</b> 46/15 87/19 87/20	<b>ing [1]</b> 79/1
<b>I always [1]</b> 10/23	<b>I know [5]</b> 16/18 25/3 32/20 38/1 88/19	<b>I want [10]</b> 2/7 3/8 3/12 3/19 16/1 42/9 49/15 53/2 72/13 78/15	<b>impacted [2]</b> 24/13 38/13	<b>inherited [1]</b> 71/18
<b>I am [5]</b> 2/22 81/15 82/7 83/13 85/3	<b>I left [1]</b> 20/4	<b>I wanted [1]</b> 1/23	<b>impacts [1]</b> 84/23	<b>initial [1]</b> 20/17
<b>I ask [7]</b> 12/23 58/4 58/7 60/16 77/15 83/2 89/6	<b>I may [3]</b> 25/18 72/10 72/15	<b>I was [71]</b> 2/7 3/10 3/12 3/12 3/14 3/23 8/9 17/22 20/5 22/10 23/13 23/14 23/16 25/6 25/8 25/11 25/14 27/14 27/18 27/20 29/1 29/2 29/15 29/16 29/17 29/18 30/6 34/20 34/20 34/23 35/1 36/2 37/25 37/25 38/3 38/6 39/15 42/12 44/23 47/15 47/17 50/12 50/24 54/18 54/20 54/20 58/1 70/20 77/8 80/13 81/9 81/14 82/3 82/5 82/22 82/23 83/8 83/9 84/7 84/25 85/2 85/5 85/14 85/21 89/12 90/2 91/20 91/21 93/10 94/1 94/23	<b>implementation [1]</b> 53/9	<b>initially [1]</b> 73/13
<b>I asked [2]</b> 45/13 73/18	<b>I mean [8]</b> 41/23 51/15 60/23 77/7 82/12 83/15 84/25 88/19	<b>I was [71]</b> 2/7 3/10 3/12 3/12 3/14 3/23 8/9 17/22 20/5 22/10 23/13 23/14 23/16 25/6 25/8 25/11 25/14 27/14 27/18 27/20 29/1 29/2 29/15 29/16 29/17 29/18 30/6 34/20 34/20 34/23 35/1 36/2 37/25 37/25 38/3 38/6 39/15 42/12 44/23 47/15 47/17 50/12 50/24 54/18 54/20 54/20 58/1 70/20 77/8 80/13 81/9 81/14 82/3 82/5 82/22 82/23 83/8 83/9 84/7 84/25 85/2 85/5 85/14 85/21 89/12 90/2 91/20 91/21 93/10 94/1 94/23	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>injuries [1]</b> 90/19
<b>I asked: are [1]</b> 83/11	<b>I meant [1]</b> 71/17	<b>I will [1]</b> 93/16	<b>important [13]</b> 24/6 24/11 26/3 31/6 31/11 34/19 63/9 63/21 71/7 73/12 73/20 94/15 94/24	<b>injury [2]</b> 30/14 30/20
<b>I basically [1]</b> 2/9	<b>I mention [1]</b> 30/17	<b>I wonder [1]</b> 41/21	<b>impression [9]</b> 10/11 25/9 46/19 75/3 76/8 76/10 76/14 81/17 90/3	<b>inpatient [5]</b> 21/21 31/21 53/24 57/1 82/14
<b>I calculated [1]</b> 45/7	<b>I might [3]</b> 24/25 24/25 63/24	<b>I would [18]</b> 13/8 16/6 16/9 16/13 18/19 19/18 33/9 37/7 37/7 38/1 45/11 53/7 70/23 70/24 73/23 88/5 91/12 94/6	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>input [3]</b> 10/7 10/12 18/23
<b>I can [13]</b> 9/19 20/1 27/25 35/1 39/10 40/7 44/19 51/2 52/3 57/5 65/20 83/24 93/10	<b>I mixed [1]</b> 2/10	<b>I'd [1]</b> 70/23	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>Inquiry [1]</b> 1/13
<b>I can't [6]</b> 9/16 31/19 54/21 54/24 71/2 83/15	<b>I must [2]</b> 44/3 65/6	<b>I'll [4]</b> 28/23 45/12 75/6 77/1	<b>important [13]</b> 24/6 24/11 26/3 31/6 31/11 34/19 63/9 63/21 71/7 73/12 73/20 94/15 94/24	<b>insight [18]</b> 41/1 42/7 42/8 42/17 42/23 43/16 46/2 46/6 46/7 46/9 46/10 48/16 51/8 67/11 67/13 84/23 85/2 85/20
<b>I cannot [7]</b> 32/19 40/7 40/13 50/12 51/4 63/2 63/5	<b>I needed [1]</b> 32/8	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>instability [2]</b> 85/9 86/6
<b>I challenge [1]</b> 59/2	<b>I never [2]</b> 84/20 90/3	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>instance [1]</b> 38/20
<b>I commented [1]</b> 65/20	<b>I normally [1]</b> 12/4	<b>I would [18]</b> 13/8 16/6 16/9 16/13 18/19 19/18 33/9 37/7 37/7 38/1 45/11 53/7 70/23 70/24 73/23 88/5 91/12 94/6	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>instead [2]</b> 2/15 68/20
<b>I correctly [6]</b> 8/21 8/24 9/5 15/4 29/25 54/25	<b>I provided [1]</b> 94/22	<b>I'd [1]</b> 70/23	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>instigated [1]</b> 57/13
<b>I could [6]</b> 9/12 25/24 25/25 30/5 30/25 36/22	<b>I put [9]</b> 2/14 2/22 11/17 16/7 24/15 24/19 29/4 46/8 47/25	<b>I'll [4]</b> 28/23 45/12 75/6 77/1	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>intelligence [1]</b> 38/8
<b>I did [14]</b> 32/6 33/7 35/4 41/11 44/8 47/23 51/24 58/1 63/12 64/19 75/5 79/15 85/4 87/21	<b>I read [2]</b> 27/17 36/2	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>intending [2]</b> 3/13 3/23
<b>I didn't [4]</b> 29/8 35/13 44/19 77/11	<b>I recall [2]</b> 13/25 15/1	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>intention [1]</b> 35/10
<b>I discussed [3]</b> 39/18 41/15 43/24	<b>I remember [2]</b> 44/9 49/2	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>interaction [1]</b> 54/9
<b>I do [1]</b> 72/23	<b>I represent [2]</b> 78/18 89/16	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>interested [1]</b> 93/20
<b>I don't [10]</b> 22/9 24/25 25/12 42/15 50/24 60/24 69/19 70/1 90/24 94/9	<b>I reviewed [2]</b> 26/12 34/12	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>interpretation [1]</b> 71/2
<b>I enquired [1]</b> 73/10	<b>I said [21]</b> 4/23 25/19 28/23 30/21 32/15 33/5 33/14 33/16 34/12 35/16 36/19 38/15 40/6 41/12 46/17 50/24 51/22 68/23 69/2 91/13 94/21	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>interval [1]</b> 11/5
<b>I explained [1]</b> 73/22	<b>I saw [11]</b> 24/16 26/7 26/14 26/18 29/25 32/15 32/16 32/17 32/17 32/18 74/17	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>intervene [1]</b> 45/12
<b>I explored [1]</b> 86/23	<b>I should [1]</b> 59/7	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>intervention [3]</b> 4/24 5/23 5/24
<b>I feel [1]</b> 54/8	<b>I specifically [1]</b> 66/6	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>interventions [1]</b> 92/15
<b>I first [1]</b> 77/17	<b>I spent [6]</b> 39/16 41/2 41/18 65/4 78/5 78/6	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>into [10]</b> 26/23 27/10 48/16 57/7 57/12 57/15 80/22 91/8 92/5 94/23
<b>I found [1]</b> 46/16	<b>I spoke [1]</b> 32/3	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>introduced [1]</b> 94/4
<b>I gave [1]</b> 84/5	<b>I state [1]</b> 84/3	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>involved [8]</b> 17/22 37/25 38/7 58/2 90/2 90/5 94/1 94/14
<b>I got [3]</b> 26/12 55/2 78/6	<b>I suggest [1]</b> 94/17	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>involvement [3]</b> 13/16 17/20 50/22
<b>I guess [2]</b> 26/10	<b>I suspect [1]</b> 50/25	<b>I'm [28]</b> 3/20 9/14 15/6 25/10 26/10 27/24 30/4 35/3 37/20 39/25 48/1 48/2 49/21 52/2 53/23 55/3 55/6 60/2 62/8 62/13 66/13 71/25 75/12 80/8 80/15 83/19 84/15 93/19	<b>implemented [6]</b> 45/23 51/13 51/14 52/9 52/9 53/9	<b>is [240]</b>

<b>I</b>	<b>just</b> [41] 1/25 2/25 12/20 16/15 16/22 20/1 21/10 23/10 30/7 31/19 32/11 34/8 35/1 37/20 48/9 48/9 48/19 49/20 49/22 53/22 55/15 63/12 69/14 70/11 72/9 72/13 72/15 72/22 73/19 74/22 76/8 76/9 77/17 78/2 80/16 80/18 80/25 82/23 85/24 92/9 94/13	<b>leftover</b> [2] 60/20 61/7 <b>legal</b> [2] 42/13 82/4 <b>legally</b> [2] 79/23 85/3 <b>Leicestershire</b> [1] 78/13 <b>length</b> [1] 69/19 <b>less</b> [1] 68/3 <b>let</b> [3] 16/15 20/4 79/19 <b>let's</b> [2] 85/24 88/6 <b>letter</b> [7] 20/17 21/3 31/4 31/10 31/11 31/19 81/10 <b>level</b> [1] 93/18 <b>licensing</b> [1] 84/24 <b>lie</b> [1] 80/12 <b>lied</b> [1] 56/25 <b>light</b> [4] 11/24 48/19 61/16 61/21 <b>like</b> [25] 1/23 6/16 12/3 16/7 16/10 18/9 18/15 19/19 19/21 26/13 29/7 38/4 41/7 48/1 51/21 51/24 52/1 52/4 70/3 71/7 81/10 91/22 91/22 92/2 92/12 <b>likely</b> [8] 43/1 46/15 46/20 47/12 47/24 49/7 71/21 79/22 <b>limits</b> [2] 46/6 51/8 <b>line</b> [16] 1/22 3/8 3/19 3/19 10/25 11/1 21/13 22/19 26/11 30/25 48/12 48/13 54/3 65/21 70/2 70/3 <b>lines</b> [4] 17/25 23/12 57/3 57/16 <b>listed</b> [1] 19/10 <b>little</b> [3] 26/5 65/19 68/3 <b>Lloyd</b> [17] 7/19 8/12 8/20 8/21 9/10 9/13 15/15 16/8 16/8 16/12 16/23 19/10 19/13 19/17 19/19 20/2 20/3 <b>LMHT</b> [1] 9/9 <b>loads</b> [2] 28/25 85/20 <b>local</b> [2] 54/4 66/5 <b>lockdown</b> [7] 10/23 58/9 58/10 58/23 59/5 59/8 59/9 <b>London</b> [1] 70/18 <b>long</b> [4] 46/4 48/14 90/22 93/24 <b>long-term</b> [1] 48/14 <b>longer</b> [2] 56/14 85/11 <b>look</b> [23] 2/16 5/13 6/25 19/3 20/16 20/19 21/3 21/3 21/4 21/7 21/12 22/12 26/19 27/6 29/20 31/14 33/17 57/2 63/24 67/24 74/14 85/18	88/6 <b>looked</b> [6] 17/8 23/10 24/10 39/4 52/15 69/13 <b>looking</b> [7] 11/21 13/4 22/4 49/20 53/20 53/23 55/15 <b>looks</b> [4] 26/13 51/2 55/13 74/16 <b>lot</b> [5] 30/6 39/18 41/19 43/2 64/12 <b>lots</b> [8] 13/5 16/3 26/8 36/20 36/22 62/4 91/15 91/24	<b>M</b> <b>made</b> [21] 3/21 14/19 15/19 15/22 23/24 25/13 29/4 29/21 35/3 40/12 50/10 50/12 53/5 54/22 58/8 74/22 89/6 93/9 93/21 93/24 94/19 <b>main</b> [4] 5/21 5/22 5/23 10/6 <b>major</b> [1] 70/5 <b>make</b> [15] 1/17 1/21 2/4 2/6 2/7 3/7 3/8 12/1 35/7 48/15 49/6 49/13 49/17 54/8 82/2 <b>makes</b> [2] 3/24 57/17 <b>making</b> [4] 66/16 68/14 94/25 95/2 <b>Malik</b> [1] 27/16 <b>man</b> [3] 48/4 58/4 75/12 <b>management</b> [19] 7/16 10/8 10/15 37/6 37/7 37/8 37/8 37/10 37/14 37/16 37/16 37/22 37/24 38/13 38/17 43/25 44/6 49/2 70/22 <b>management-wise</b> [1] 49/2 <b>manager</b> [1] 15/5 <b>manner</b> [1] 68/17 <b>many</b> [5] 34/4 66/10 66/11 75/22 92/4 <b>Manzar</b> [1] 27/18 <b>March</b> [3] 5/9 67/20 68/10 <b>March 2021</b> [1] 5/9 <b>mark</b> [1] 48/1 <b>marks</b> [2] 57/4 57/4 <b>matter</b> [1] 55/25 <b>maximum</b> [1] 71/19 <b>may</b> [20] 2/8 3/15 23/17 25/18 25/21 26/20 26/23 27/6 46/4 48/16 59/22 70/15 72/10 72/15 73/10 73/22 76/8 89/8 89/8 89/8 <b>May 2021</b> [1] 89/8 <b>maybe</b> [11] 11/15	12/18 20/1 20/6 32/18 40/19 63/11 63/11 88/9 93/13 93/13 <b>MDT</b> [13] 13/24 14/1 14/3 14/8 14/9 14/22 14/25 15/7 15/12 17/10 51/1 51/3 51/20 <b>MDTs</b> [2] 7/25 17/12 <b>me</b> [39] 11/1 15/24 18/17 19/21 20/4 31/12 33/6 33/11 34/22 34/23 34/23 37/12 39/20 39/22 40/14 40/18 41/6 41/14 42/16 52/7 53/1 57/14 61/6 61/14 64/4 65/4 66/9 70/4 78/25 79/19 81/10 86/23 87/24 88/2 88/4 88/25 90/3 94/2 94/11 <b>me'</b> [1] 73/14 <b>mean</b> [24] 7/9 25/20 29/22 37/9 41/23 46/8 47/19 49/5 49/12 51/15 58/8 58/15 59/3 60/13 60/23 63/5 64/1 77/7 81/15 82/12 83/15 84/25 88/19 89/1 <b>meaning</b> [1] 47/6 <b>means</b> [18] 5/23 6/1 6/5 6/6 6/12 7/10 7/14 9/6 10/9 41/6 42/22 43/1 43/9 48/2 51/20 60/15 66/13 89/1 <b>meant</b> [5] 32/11 57/25 63/22 71/17 88/17 <b>measures</b> [1] 48/21 <b>media</b> [5] 12/3 12/5 12/7 12/12 12/17 <b>medical</b> [17] 7/11 7/15 10/7 10/7 10/13 10/18 11/10 15/9 19/20 20/25 24/2 28/2 35/18 54/15 76/23 89/20 89/25 <b>medication</b> [55] 6/8 6/19 10/13 21/17 22/8 22/15 22/16 22/20 23/2 23/7 23/18 24/14 25/4 32/24 32/25 37/9 38/25 39/7 39/12 39/14 39/21 39/23 40/3 40/10 40/11 40/13 40/16 40/22 40/24 41/4 41/7 41/10 41/24 42/5 42/15 42/18 42/20 42/25 44/7 48/15 49/5 49/7 49/10 55/18 59/17 59/25 60/9 60/14 64/17 66/20 66/25 67/6 71/9 71/13 85/19 <b>medications</b> [1] 23/4 <b>meet</b> [3] 12/8 12/18
<b>J</b>	<b>lack</b> [5] 42/7 42/8 48/5 67/11 84/23 <b>lacking</b> [1] 42/17 <b>lady</b> [1] 38/5 <b>laptop</b> [1] 15/6 <b>large</b> [1] 75/19 <b>last</b> [12] 3/8 4/1 24/18 25/19 36/20 70/10 78/5 79/5 79/18 81/21 86/1 94/13 <b>late</b> [1] 22/6 <b>later</b> [3] 29/10 64/7 83/2 <b>lay</b> [1] 43/9 <b>lead</b> [1] 39/20 <b>leader</b> [1] 19/20 <b>leadership</b> [2] 7/15 10/14 <b>leading</b> [1] 61/17 <b>leads</b> [2] 38/4 41/18 <b>learn</b> [1] 44/24 <b>least</b> [4] 44/12 54/21 79/3 84/11 <b>led</b> [5] 25/4 25/15 32/21 56/2 90/18 <b>left</b> [7] 20/4 55/20 60/17 61/1 61/2 61/2 70/16	<b>job</b> [9] 21/5 66/4 66/7 66/10 66/17 66/17 88/22 88/23 92/1 <b>join</b> [1] 34/20 <b>joined</b> [2] 14/2 19/21 <b>joint</b> [1] 73/25 <b>July</b> [8] 4/21 25/22 33/1 70/16 79/4 81/20 90/5 90/7 <b>July 2021</b> [2] 4/21 90/5 <b>jump</b> [1] 29/12 <b>jumped</b> [3] 27/8 30/13 38/5 <b>June</b> [7] 25/21 25/22 35/20 69/3 69/17 93/6 93/23 <b>June 2020</b> [2] 35/20 93/23 <b>June 2021</b> [1] 69/17 <b>junior</b> [3] 4/11 7/21 9/22	<b>88/6</b> <b>looked</b> [6] 17/8 23/10 24/10 39/4 52/15 69/13 <b>looking</b> [7] 11/21 13/4 22/4 49/20 53/20 53/23 55/15 <b>looks</b> [4] 26/13 51/2 55/13 74/16 <b>lot</b> [5] 30/6 39/18 41/19 43/2 64/12 <b>lots</b> [8] 13/5 16/3 26/8 36/20 36/22 62/4 91/15 91/24	<b>M</b> <b>made</b> [21] 3/21 14/19 15/19 15/22 23/24 25/13 29/4 29/21 35/3 40/12 50/10 50/12 53/5 54/22 58/8 74/22 89/6 93/9 93/21 93/24 94/19 <b>main</b> [4] 5/21 5/22 5/23 10/6 <b>major</b> [1] 70/5 <b>make</b> [15] 1/17 1/21 2/4 2/6 2/7 3/7 3/8 12/1 35/7 48/15 49/6 49/13 49/17 54/8 82/2 <b>makes</b> [2] 3/24 57/17 <b>making</b> [4] 66/16 68/14 94/25 95/2 <b>Malik</b> [1] 27/16 <b>man</b> [3] 48/4 58/4 75/12 <b>management</b> [19] 7/16 10/8 10/15 37/6 37/7 37/8 37/8 37/10 37/14 37/16 37/16 37/22 37/24 38/13 38/17 43/25 44/6 49/2 70/22 <b>management-wise</b> [1] 49/2 <b>manager</b> [1] 15/5 <b>manner</b> [1] 68/17 <b>many</b> [5] 34/4 66/10 66/11 75/22 92/4 <b>Manzar</b> [1] 27/18 <b>March</b> [3] 5/9 67/20 68/10 <b>March 2021</b> [1] 5/9 <b>mark</b> [1] 48/1 <b>marks</b> [2] 57/4 57/4 <b>matter</b> [1] 55/25 <b>maximum</b> [1] 71/19 <b>may</b> [20] 2/8 3/15 23/17 25/18 25/21 26/20 26/23 27/6 46/4 48/16 59/22 70/15 72/10 72/15 73/10 73/22 76/8 89/8 89/8 89/8 <b>May 2021</b> [1] 89/8 <b>maybe</b> [11] 11/15	12/18 20/1 20/6 32/18 40/19 63/11 63/11 88/9 93/13 93/13 <b>MDT</b> [13] 13/24 14/1 14/3 14/8 14/9 14/22 14/25 15/7 15/12 17/10 51/1 51/3 51/20 <b>MDTs</b> [2] 7/25 17/12 <b>me</b> [39] 11/1 15/24 18/17 19/21 20/4 31/12 33/6 33/11 34/22 34/23 34/23 37/12 39/20 39/22 40/14 40/18 41/6 41/14 42/16 52/7 53/1 57/14 61/6 61/14 64/4 65/4 66/9 70/4 78/25 79/19 81/10 86/23 87/24 88/2 88/4 88/25 90/3 94/2 94/11 <b>me'</b> [1] 73/14 <b>mean</b> [24] 7/9 25/20 29/22 37/9 41/23 46/8 47/19 49/5 49/12 51/15 58/8 58/15 59/3 60/13 60/23 63/5 64/1 77/7 81/15 82/12 83/15 84/25 88/19 89/1 <b>meaning</b> [1] 47/6 <b>means</b> [18] 5/23 6/1 6/5 6/6 6/12 7/10 7/14 9/6 10/9 41/6 42/22 43/1 43/9 48/2 51/20 60/15 66/13 89/1 <b>meant</b> [5] 32/11 57/25 63/22 71/17 88/17 <b>measures</b> [1] 48/21 <b>media</b> [5] 12/3 12/5 12/7 12/12 12/17 <b>medical</b> [17] 7/11 7/15 10/7 10/7 10/13 10/18 11/10 15/9 19/20 20/25 24/2 28/2 35/18 54/15 76/23 89/20 89/25 <b>medication</b> [55] 6/8 6/19 10/13 21/17 22/8 22/15 22/16 22/20 23/2 23/7 23/18 24/14 25/4 32/24 32/25 37/9 38/25 39/7 39/12 39/14 39/21 39/23 40/3 40/10 40/11 40/13 40/16 40/22 40/24 41/4 41/7 41/10 41/24 42/5 42/15 42/18 42/20 42/25 44/7 48/15 49/5 49/7 49/10 55/18 59/17 59/25 60/9 60/14 64/17 66/20 66/25 67/6 71/9 71/13 85/19 <b>medications</b> [1] 23/4 <b>meet</b> [3] 12/8 12/18

<p><b>M</b></p> <p><b>meet... [1]</b> 87/11</p> <p><b>meeting [4]</b> 8/12 18/17 21/11 72/16</p> <p><b>meetings [8]</b> 10/21 13/17 13/21 13/24 14/1 14/25 15/12 17/10</p> <p><b>member [1]</b> 58/14</p> <p><b>members [1]</b> 7/2</p> <p><b>memory [8]</b> 28/1 67/16 67/18 67/20 67/25 68/4 68/6 70/8</p> <p><b>mental [10]</b> 10/10 19/6 19/9 26/16 28/12 45/25 54/4 54/7 77/23 85/6</p> <p><b>mentally [1]</b> 46/11</p> <p><b>mention [1]</b> 30/17</p> <p><b>mentioned [6]</b> 30/10 30/11 30/25 31/20 40/24 51/3</p> <p><b>message [5]</b> 29/17 35/22 37/2 73/3 73/5</p> <p><b>messages [3]</b> 36/6 36/9 38/10</p> <p><b>METF000007 [1]</b> 70/13</p> <p><b>MHA [10]</b> 24/22 26/18 27/14 27/15 27/19 27/24 29/9 32/17 32/21 32/22</p> <p><b>MHAs [1]</b> 31/21</p> <p><b>MI5 [2]</b> 70/25 87/2</p> <p><b>MI6 [2]</b> 57/18 75/22</p> <p><b>microphones [1]</b> 16/18</p> <p><b>middle [7]</b> 21/12 21/15 23/3 64/15 67/23 68/9 69/7</p> <p><b>might [16]</b> 13/4 19/3 24/25 24/25 32/12 32/13 40/17 48/24 49/14 50/25 51/3 55/6 63/24 65/2 71/3 88/18</p> <p><b>Millbank [1]</b> 70/14</p> <p><b>milligram [1]</b> 71/22</p> <p><b>milligrams [4]</b> 60/24 60/25 60/25 71/19</p> <p><b>mind [8]</b> 13/7 20/7 37/12 53/2 63/1 80/17 87/6 87/18</p> <p><b>mine [1]</b> 59/7</p> <p><b>minimisation [1]</b> 46/5</p> <p><b>minutes [8]</b> 15/6 15/7 15/25 29/24 30/1 36/15 62/7 62/7</p> <p><b>misleading [2]</b> 56/21 62/1</p> <p><b>miss [1]</b> 77/18</p> <p><b>missed [2]</b> 61/4 61/10</p> <p><b>missing [6]</b> 1/24 31/9 31/9 31/16 59/18</p>	<p>61/14</p> <p><b>mixed [2]</b> 2/10 2/24</p> <p><b>Mm [2]</b> 49/25 51/12</p> <p><b>Mm-hm [2]</b> 49/25 51/12</p> <p><b>model [2]</b> 5/18 6/5</p> <p><b>modern [1]</b> 12/17</p> <p><b>Moloney [4]</b> 72/7 72/8 89/18 96/5</p> <p><b>moment [6]</b> 16/15 39/1 39/2 39/25 64/24 93/4</p> <p><b>moments [3]</b> 9/21 17/7 24/1</p> <p><b>monitor [1]</b> 50/23</p> <p><b>monitoring [9]</b> 54/9 62/19 62/23 63/5 63/10 63/16 63/18 63/20 63/22</p> <p><b>month [19]</b> 26/5 26/8 36/20 79/3 79/23 79/23 80/1 80/2 80/6 80/9 80/9 80/14 81/14 81/16 81/25 82/4 94/2 94/14 94/17</p> <p><b>month's [1]</b> 55/17</p> <p><b>months [21]</b> 11/3 11/5 11/16 11/16 20/6 24/18 25/20 42/1 44/12 45/6 74/17 79/5 80/19 80/21 81/4 81/13 81/19 82/15 84/11 85/25 87/11</p> <p><b>mood [5]</b> 47/1 47/1 47/1 47/2 47/10</p> <p><b>more [21]</b> 3/15 13/3 20/9 25/18 30/6 30/14 40/19 46/17 49/6 53/10 54/9 56/2 60/13 60/21 70/11 72/21 74/16 88/17 91/10 91/11 94/18</p> <p><b>morning [5]</b> 21/22 21/25 22/2 22/4 22/19</p> <p><b>most [4]</b> 7/10 26/3 91/22 92/19</p> <p><b>mother [1]</b> 3/11</p> <p><b>move [6]</b> 4/6 30/8 64/6 85/24 86/1 88/9</p> <p><b>Mr [16]</b> 1/3 1/7 1/8 55/17 72/7 72/8 72/16 75/18 89/15 89/18 90/9 90/13 95/8 96/4 96/5 96/7</p> <p><b>Mr Beer [1]</b> 95/8</p> <p><b>Mr Carr [7]</b> 1/3 1/7 1/8 72/16 75/18 90/9 96/4</p> <p><b>Mr Carter [2]</b> 55/17 90/13</p> <p><b>Mr Moloney [4]</b> 72/7 72/8 89/18 96/5</p> <p><b>MR STRAW [2]</b> 89/15 96/7</p> <p><b>Ms [6]</b> 8/9 68/19 69/17 77/13 77/14</p>	<p>96/6</p> <p><b>Ms Birtles [1]</b> 69/17</p> <p><b>Ms Cartwright [3]</b> 77/13 77/14 96/6</p> <p><b>Ms Claudia [1]</b> 8/9</p> <p><b>Ms Gail [1]</b> 68/19</p> <p><b>much [9]</b> 11/7 25/23 25/24 40/8 45/14 65/4 74/17 77/12 95/6</p> <p><b>Multi [1]</b> 13/20</p> <p><b>Multi-Disciplinary [1]</b> 13/20</p> <p><b>mum [4]</b> 50/9 52/5 90/9 91/2</p> <p><b>must [18]</b> 26/8 35/1 43/24 44/3 59/20 60/13 63/17 65/6 65/8 79/13 79/13 81/4 81/6 81/7 83/20 84/10 84/13 94/7</p> <p><b>my [55]</b> 1/12 12/4 13/3 13/7 14/21 15/22 15/24 17/13 18/15 18/17 20/6 24/15 24/16 24/19 25/1 25/8 25/16 27/25 29/18 29/21 33/9 33/12 34/12 35/6 35/7 38/18 39/11 39/20 41/20 45/9 45/10 51/15 53/2 54/22 54/25 63/14 66/19 71/8 71/20 72/6 77/1 78/4 78/5 78/6 83/15 84/1 84/3 84/17 84/18 84/21 85/4 85/4 87/3 94/21 94/23</p> <p><b>myself [4]</b> 9/10 20/3 51/21 63/2</p>	<p><b>neighbours [1]</b> 68/14</p> <p><b>never [3]</b> 84/18 84/20 90/3</p> <p><b>new [11]</b> 3/21 3/24 3/25 10/9 12/3 22/10 34/16 34/17 38/7 61/24 95/1</p> <p><b>next [27]</b> 1/4 7/20 11/13 22/18 22/21 22/24 32/5 34/1 40/23 48/7 49/5 50/7 57/2 64/2 64/6 66/23 67/14 72/25 75/19 80/6 81/10 82/3 82/14 85/25 86/2 88/12 88/13</p> <p><b>NHFT0000168 [7]</b> 21/8 28/3 35/19 53/21 64/10 72/14 78/20</p> <p><b>NHFT0000202 [1]</b> 17/20</p> <p><b>NHFT0000460 [1]</b> 5/14</p> <p><b>NHFT0015099 [1]</b> 33/17</p> <p><b>NHS [2]</b> 4/12 78/12</p> <p><b>NICE [2]</b> 6/6 92/11</p> <p><b>no [64]</b> 3/24 3/25 9/3 13/24 14/24 15/14 15/21 17/22 18/9 18/15 27/4 36/2 39/13 42/25 44/2 44/17 44/17 44/19 44/23 45/2 45/18 47/17 53/8 56/14 57/11 59/24 69/11 69/17 70/5 70/20 75/14 76/5 76/5 76/7 76/8 77/11 80/1 80/21 81/5 81/5 81/18 81/23 82/12 83/5 83/9 84/1 84/2 84/6 84/15 86/21 87/1 87/1 87/2 87/10 88/1 88/1 88/19 89/12 89/22 90/12 93/8 93/16 95/8 95/9</p> <p><b>NOCC0000044 [1]</b> 26/19</p> <p><b>NOCC0000045 [1]</b> 27/5</p> <p><b>nodded [2]</b> 17/18 83/13</p> <p><b>non [11]</b> 22/5 25/2 25/2 25/7 25/10 25/15 25/15 39/16 41/17 55/22 62/10</p> <p><b>non-compliance [8]</b> 22/5 25/2 25/7 25/10 25/15 25/15 39/16 62/10</p> <p><b>non-concordance [2]</b> 25/2 55/22</p> <p><b>normally [4]</b> 11/12 12/4 69/22 71/20</p> <p><b>not [148]</b></p> <p><b>note [5]</b> 16/19 54/13 56/6 81/8 93/8</p>	<p><b>noted [3]</b> 59/21 59/24 67/4</p> <p><b>notes [18]</b> 15/4 15/5 15/12 16/6 16/7 16/11 16/14 17/2 17/8 17/9 25/8 26/10 27/23 29/2 31/15 34/12 84/9 84/14</p> <p><b>nothing [1]</b> 74/18</p> <p><b>notice [1]</b> 73/23</p> <p><b>notified [3]</b> 83/23 83/23 87/13</p> <p><b>notify [6]</b> 79/13 81/4 81/6 81/7 83/20 83/24</p> <p><b>noting [2]</b> 53/25 54/3</p> <p><b>notion [1]</b> 68/23</p> <p><b>Nottingham [3]</b> 28/14 77/20 78/5</p> <p><b>Nottinghamshire [1]</b> 4/11</p> <p><b>November [22]</b> 1/14 5/5 49/16 53/21 54/11 55/9 55/11 55/15 56/3 56/5 59/4 71/10 72/11 72/17 72/18 72/19 72/24 73/6 86/2 86/20 89/18 92/23</p> <p><b>November 2020 [2]</b> 5/5 72/18</p> <p><b>now [47]</b> 3/21 3/25 8/20 12/4 12/11 12/23 13/23 17/14 19/12 20/4 20/22 22/14 24/1 28/20 34/6 36/2 36/17 38/12 48/7 48/19 50/20 51/6 53/1 54/10 55/22 56/6 58/19 64/21 65/25 69/13 72/25 80/9 81/10 81/14 82/17 83/8 83/20 83/24 87/5 87/10 87/18 88/15 90/16 91/7 92/10 92/19 93/6</p> <p><b>number [5]</b> 19/4 42/23 49/10 50/13 74/2</p> <p><b>number 1 [2]</b> 42/23 49/10</p> <p><b>nurse [3]</b> 18/20 18/22 73/14</p> <p><b>nurses [2]</b> 8/3 14/17</p> <p><b>nursing [1]</b> 8/6</p> <p><b>nutshell [1]</b> 10/17</p>
<p><b>O</b></p> <p><b>o'clock [2]</b> 30/1 30/3</p> <p><b>obligation [1]</b> 24/3</p> <p><b>obliged [1]</b> 85/3</p> <p><b>observations [1]</b> 23/24</p> <p><b>observed [1]</b> 18/11</p> <p><b>obstacles [1]</b> 9/1</p> <p><b>obtained [1]</b> 65/15</p> <p><b>obviously [18]</b> 14/2 18/14 25/18 28/25</p>				

<p><b>O</b></p> <p><b>obviously... [14]</b> 34/15 34/18 37/11 39/11 40/21 41/15 42/11 47/20 49/11 58/4 62/4 68/1 69/22 95/1</p> <p><b>occasion [3]</b> 66/25 83/22 84/2</p> <p><b>occasions [1]</b> 5/1</p> <p><b>occupant [4]</b> 27/8 28/16 29/12 30/17</p> <p><b>occur [1]</b> 88/25</p> <p><b>occurred [1]</b> 59/14</p> <p><b>occurs [1]</b> 20/13</p> <p><b>October [14]</b> 44/13 50/4 50/8 50/16 50/22 52/3 79/5 79/18 81/21 83/21 86/1 87/7 90/8 90/12</p> <p><b>odd [3]</b> 59/18 61/11 61/12</p> <p><b>off [1]</b> 68/2</p> <p><b>offer [3]</b> 6/9 69/25 73/22</p> <p><b>offered [2]</b> 70/5 93/23</p> <p><b>offers [1]</b> 42/20</p> <p><b>office [1]</b> 9/9</p> <p><b>officer [1]</b> 68/11</p> <p><b>officer Gail [1]</b> 68/11</p> <p><b>often [7]</b> 11/11 18/13 18/16 18/24 19/2 63/22 91/5</p> <p><b>Oh [3]</b> 16/17 38/21 41/7</p> <p><b>okay [6]</b> 48/3 54/8 64/4 92/10 93/14 95/6</p> <p><b>olanzapine [1]</b> 29/10</p> <p><b>old [1]</b> 48/3</p> <p><b>on [149]</b></p> <p><b>once [7]</b> 20/4 20/14 39/7 61/23 63/1 63/6 91/15</p> <p><b>one [54]</b> 2/15 3/15 8/16 12/5 12/14 12/17 15/14 15/16 17/9 18/25 20/18 23/7 24/22 25/11 25/18 25/23 29/10 29/23 29/23 30/18 31/16 31/17 37/8 37/13 40/5 40/5 43/3 45/10 46/2 46/8 48/4 49/22 50/13 51/11 52/18 55/15 55/17 57/12 58/13 58/13 60/21 60/21 60/23 60/25 61/8 61/13 63/25 68/13 69/14 72/10 72/13 90/12 90/19 92/3</p> <p><b>ones [1]</b> 75/24</p> <p><b>ongoing [4]</b> 42/7 42/8 65/5 65/9</p> <p><b>online [4]</b> 11/20</p>	<p>11/23 13/4 13/5</p> <p><b>only [11]</b> 19/12 23/7 39/6 51/2 56/16 63/12 63/14 79/17 84/4 84/16 85/22</p> <p><b>open [9]</b> 34/20 39/22 41/23 51/22 63/7 71/2 91/22 92/2 92/24</p> <p><b>open-ended [3]</b> 51/22 63/7 92/2</p> <p><b>openly [2]</b> 41/9 41/23</p> <p><b>openness [1]</b> 41/11</p> <p><b>Operational [1]</b> 5/14</p> <p><b>optimise [1]</b> 71/18</p> <p><b>optimised [1]</b> 71/13</p> <p><b>option [4]</b> 35/14 72/1 93/12 94/7</p> <p><b>or [84]</b> 1/23 1/24 1/25 1/25 1/25 2/1 3/13 5/25 7/21 10/15 12/22 14/4 15/21 16/12 17/23 17/24 18/17 18/18 19/16 20/16 24/24 29/2 29/24 32/7 32/12 33/8 33/8 34/22 34/23 38/13 40/10 40/18 41/23 42/20 43/23 44/21 47/3 48/20 50/12 50/23 51/13 52/1 52/6 52/9 53/7 54/21 57/8 59/12 60/21 60/25 61/2 61/13 61/24 63/1 63/6 63/12 63/23 64/4 64/5 66/7 66/17 67/15 70/22 71/5 73/1 73/18 75/12 76/2 76/24 79/12 80/3 80/12 81/11 82/2 82/21 83/8 85/9 85/17 88/3 88/9 88/20 88/22 90/4 91/21</p> <p><b>Oral [1]</b> 23/5</p> <p><b>order [3]</b> 2/25 13/13 34/6</p> <p><b>originator [1]</b> 28/7</p> <p><b>other [19]</b> 14/17 18/13 18/25 24/24 27/17 31/12 32/7 57/6 57/6 57/10 57/11 57/14 63/7 64/5 76/4 77/23 89/3 92/4 93/7</p> <p><b>others [5]</b> 31/14 32/18 33/20 46/15 66/5</p> <p><b>otherwise [2]</b> 16/10 84/7</p> <p><b>ought [3]</b> 55/24 56/2 71/4</p> <p><b>our [9]</b> 20/20 34/20 35/9 37/12 37/23 47/19 72/2 79/19 85/1</p> <p><b>out [40]</b> 5/17 7/1 7/20 12/18 19/4 22/21 23/17 27/8 28/10 28/20 33/7 33/23 34/6</p>	<p>34/9 34/22 35/5 35/14 36/6 44/11 45/14 48/6 49/15 49/21 52/24 56/13 56/16 58/10 58/16 59/7 59/8 67/20 68/7 76/18 79/20 88/14 88/23 88/24 89/2 90/10 90/22</p> <p><b>outcome [1]</b> 79/22</p> <p><b>outlook [1]</b> 66/4</p> <p><b>outpatient [10]</b> 9/23 9/25 10/3 10/6 10/17 11/18 13/17 29/21 29/22 42/13</p> <p><b>outside [4]</b> 12/6 12/8 12/21 50/19</p> <p><b>over [10]</b> 26/5 47/21 49/3 49/8 61/1 61/2 61/2 73/13 74/8 95/2</p> <p><b>overall [12]</b> 7/16 10/14 52/7 53/4 62/5 66/18 68/1 68/8 69/23 69/24 70/3 92/6</p> <p><b>overdue [4]</b> 55/18 60/9 60/13 61/9</p> <p><b>oversee [1]</b> 20/1</p> <p><b>oversight [2]</b> 7/12 10/7</p> <p><b>overspeaking [3]</b> 47/7 59/12 63/8</p> <p><b>overwhelming [1]</b> 18/25</p> <hr/> <p><b>P</b></p> <p><b>page [72]</b> 1/19 2/4 3/5 3/18 5/17 7/1 7/20 8/3 8/11 9/20 17/23 19/3 19/5 19/6 20/12 20/13 21/9 21/9 21/12 21/13 21/15 22/12 22/18 22/18 22/25 23/9 23/21 26/21 27/6 28/4 28/5 28/6 28/9 31/25 32/2 33/21 34/1 34/1 34/2 35/19 38/22 46/19 48/12 49/20 49/21 50/4 50/7 50/13 53/22 53/23 56/6 56/8 62/17 64/10 65/19 66/24 67/21 67/23 68/9 69/7 69/7 72/20 72/22 72/25 74/8 76/10 82/19 86/3 88/6 88/12 88/13 96/2</p> <p><b>page 119 [1]</b> 21/9</p> <p><b>page 12 [1]</b> 1/19</p> <p><b>page 122 [1]</b> 22/12</p> <p><b>page 123 [1]</b> 22/18</p> <p><b>page 124 [1]</b> 22/25</p> <p><b>page 133 [3]</b> 28/4 28/9 38/22</p> <p><b>page 134 [1]</b> 49/20</p> <p><b>page 136 [2]</b> 53/22 72/22</p> <p><b>page 137 [1]</b> 72/20</p> <p><b>page 138 [2]</b> 56/6</p>	<p>86/3</p> <p><b>page 140 [1]</b> 88/6</p> <p><b>page 141 [1]</b> 64/10</p> <p><b>page 146 [1]</b> 66/24</p> <p><b>page 148 [1]</b> 67/21</p> <p><b>page 149 [1]</b> 68/9</p> <p><b>page 15 [1]</b> 9/20</p> <p><b>page 155 [1]</b> 69/7</p> <p><b>page 2 [2]</b> 26/21 27/6</p> <p><b>page 21 [1]</b> 35/19</p> <p><b>page 27 [1]</b> 8/11</p> <p><b>page 29 [2]</b> 31/25 32/2</p> <p><b>page 3 [1]</b> 19/3</p> <p><b>page 30 [1]</b> 2/4</p> <p><b>page 33 [1]</b> 23/9</p> <p><b>page 6 [1]</b> 7/1</p> <p><b>page 7 [3]</b> 5/17 8/3 33/21</p> <p><b>page 8 [2]</b> 20/12 34/1</p> <p><b>pages [3]</b> 50/21 62/4 82/19</p> <p><b>paragraph [38]</b> 1/19 2/4 2/17 3/5 3/8 3/17 7/1 7/22 8/12 9/21 9/23 10/25 20/12 20/12 20/21 23/9 23/21 26/21 27/7 31/25 32/2 39/14 39/17 43/4 44/10 55/16 56/10 57/3 59/16 64/16 64/16 65/21 67/9 67/14 71/12 74/10 75/19 84/25</p> <p><b>Paragraph 113 [1]</b> 3/17</p> <p><b>paragraph 141 [1]</b> 3/5</p> <p><b>paragraph 148 [1]</b> 71/12</p> <p><b>paragraph 15 [1]</b> 7/1</p> <p><b>Paragraph 16 [1]</b> 20/12</p> <p><b>paragraph 26 [1]</b> 1/19</p> <p><b>paragraph 36 [2]</b> 9/21 9/23</p> <p><b>Paragraph 66 [1]</b> 8/12</p> <p><b>paragraph 73 [2]</b> 31/25 32/2</p> <p><b>paragraph 75 [2]</b> 2/4 2/17</p> <p><b>paragraph 80 [1]</b> 23/9</p> <p><b>paragraph 82 [1]</b> 23/21</p> <p><b>paragraphs [1]</b> 38/24</p> <p><b>parcel [2]</b> 88/19 89/2</p> <p><b>parcels [2]</b> 88/14 88/24</p> <p><b>part [18]</b> 4/19 8/20 15/24 30/5 35/8 43/25 44/2 44/6 51/15 65/5 66/8 76/6 77/9 87/25</p>	<p>89/20 90/1 90/4 94/22</p> <p><b>particular [7]</b> 13/7 18/7 30/15 32/12 41/20 51/25 91/6</p> <p><b>particularly [2]</b> 34/7 51/24</p> <p><b>parties [1]</b> 34/9</p> <p><b>party [3]</b> 32/8 32/14 88/3</p> <p><b>past [4]</b> 31/22 39/16 40/19 56/25</p> <p><b>pathway [2]</b> 6/7 6/13</p> <p><b>patient [52]</b> 6/12 7/8 7/16 10/8 10/18 11/5 11/12 11/14 11/19 11/22 12/2 12/11 12/25 13/4 15/2 16/13 16/24 18/7 18/13 18/22 18/25 19/2 20/3 26/9 28/25 29/23 30/1 30/2 30/3 34/16 37/11 38/9 39/24 40/6 42/10 42/12 42/19 45/10 45/15 46/25 48/23 51/25 62/6 79/20 80/5 80/18 81/1 82/14 84/10 87/10 91/15 91/17</p> <p><b>patient's [5]</b> 10/10 15/3 16/6 31/7 34/25</p> <p><b>patients [38]</b> 6/17 7/13 7/24 11/8 11/18 12/4 12/13 12/15 12/23 13/6 13/9 13/16 14/13 15/17 16/1 16/4 18/8 18/16 18/23 20/9 29/24 42/11 43/10 43/19 45/2 45/5 46/10 47/2 47/20 68/5 71/20 72/2 80/22 83/18 85/4 91/16 91/24 91/25</p> <p><b>patients' [1]</b> 14/4</p> <p><b>pause [1]</b> 80/25</p> <p><b>paused [1]</b> 73/19</p> <p><b>pausing [1]</b> 82/23</p> <p><b>penultimate [4]</b> 43/4 48/13 50/15 54/3</p> <p><b>people [15]</b> 12/6 12/8 12/19 13/3 31/15 36/10 36/12 57/6 57/7 57/10 57/12 57/14 66/11 75/21 89/3</p> <p><b>per [4]</b> 44/11 63/1 79/2 94/6</p> <p><b>perhaps [10]</b> 16/6 25/25 30/24 53/10 61/19 62/11 64/19 71/23 72/21 87/14</p> <p><b>period [18]</b> 5/1 47/21 51/13 77/18 77/22 78/8 80/19 82/11 82/24 83/4 83/12 83/14 85/11 86/5 93/9 94/14 94/17 95/2</p> <p><b>periods [1]</b> 94/13</p> <p><b>permanently [1]</b></p>
---	---	---	--	---

<p><b>P</b></p> <p><b>permanently... [1]</b> 36/12</p> <p><b>permitted [1]</b> 81/21</p> <p><b>person [7]</b> 11/11 19/18 19/25 20/7 20/9 49/24 65/24</p> <p><b>personal [1]</b> 91/24</p> <p><b>phase [1]</b> 12/16</p> <p><b>phone [2]</b> 11/21 73/13</p> <p><b>photograph [1]</b> 27/2</p> <p><b>pick [1]</b> 49/8</p> <p><b>picture [5]</b> 27/2 27/4 29/6 33/3 34/13</p> <p><b>place [4]</b> 27/21 48/22 88/24 89/2</p> <p><b>placement [1]</b> 4/16</p> <p><b>places [1]</b> 80/25</p> <p><b>plainly [1]</b> 87/18</p> <p><b>plan [45]</b> 10/15 16/12 17/16 18/3 19/3 24/22 32/18 35/7 44/6 48/19 51/9 51/13 51/15 51/16 51/25 52/8 52/15 53/8 61/23 61/25 62/3 62/3 62/8 62/9 62/12 62/17 62/22 64/21 69/9 69/10 69/11 69/11 69/13 69/18 70/2 70/4 84/13 87/2 87/13 91/4 91/6 91/10 92/3 92/5 94/10</p> <p><b>plan/no [1]</b> 69/11</p> <p><b>pleaded [1]</b> 89/9</p> <p><b>pleasant [4]</b> 74/19 74/24 75/1 75/7</p> <p><b>please [32]</b> 1/9 1/11 3/2 4/6 5/12 8/11 9/20 20/11 21/8 22/12 22/25 26/19 27/5 28/3 33/17 33/21 35/19 45/25 50/2 64/10 66/23 72/10 72/14 72/20 74/8 78/3 78/16 78/20 78/20 86/3 88/6 88/9</p> <p><b>pm [5]</b> 1/2 21/14 53/17 53/19 95/11</p> <p><b>point [27]</b> 2/16 7/5 7/20 8/3 22/4 33/22 34/2 41/22 48/15 49/4 49/17 61/9 63/15 72/5 77/7 77/9 78/15 82/15 84/16 85/13 88/2 89/6 89/22 89/25 94/3 94/10 94/13</p> <p><b>points [1]</b> 31/2</p> <p><b>police [12]</b> 2/11 28/13 32/7 33/8 34/10 35/11 57/18 68/11 70/13 71/5 71/6 75/23</p> <p><b>Policy [1]</b> 5/15</p> <p><b>politely [1]</b> 73/8</p>	<p><b>poor [2]</b> 52/6 85/10</p> <p><b>position [2]</b> 19/15 77/23</p> <p><b>positive [3]</b> 27/24 39/10 80/10</p> <p><b>positively [2]</b> 40/8 40/16</p> <p><b>possession [1]</b> 60/11</p> <p><b>possibility [3]</b> 31/14 40/17 42/24</p> <p><b>possible [7]</b> 6/2 26/1 26/11 34/5 34/14 43/12 92/15</p> <p><b>possibly [2]</b> 36/23 48/7</p> <p><b>post [2]</b> 22/6 89/9</p> <p><b>post-discharge [1]</b> 22/6</p> <p><b>potentially [1]</b> 22/7</p> <p><b>power [4]</b> 57/22 57/25 59/9 86/12</p> <p><b>powers [3]</b> 58/19 58/21 58/24</p> <p><b>practical [1]</b> 92/4</p> <p><b>practice [7]</b> 12/12 33/9 33/13 33/19 71/21 77/18 79/20</p> <p><b>preceding [1]</b> 33/4</p> <p><b>preparation [2]</b> 17/21 34/3</p> <p><b>prepared [3]</b> 1/13 33/23 69/14</p> <p><b>preparing [7]</b> 15/8 17/8 27/1 36/2 36/4 54/18 93/10</p> <p><b>prescribed [1]</b> 21/19</p> <p><b>prescribing [1]</b> 49/3</p> <p><b>prescription [1]</b> 49/9</p> <p><b>presence [1]</b> 46/24</p> <p><b>present [2]</b> 30/15 32/9</p> <p><b>presentation [1]</b> 64/12</p> <p><b>presenting [1]</b> 28/17</p> <p><b>previous [7]</b> 21/13 28/5 31/20 31/21 34/13 56/11 65/13</p> <p><b>primary [1]</b> 41/16</p> <p><b>principles [1]</b> 34/6</p> <p><b>prior [1]</b> 55/14</p> <p><b>probably [3]</b> 26/1 37/15 46/16</p> <p><b>process [9]</b> 14/9 20/13 45/7 45/15 45/23 80/13 81/15 81/24 85/23</p> <p><b>processes [1]</b> 79/6</p> <p><b>Professionally [1]</b> 4/7</p> <p><b>profile [1]</b> 11/8</p> <p><b>prognosis [1]</b> 48/20</p> <p><b>progress [5]</b> 15/3 26/10 29/2 51/19 69/23</p> <p><b>property [5]</b> 2/12 2/13 27/3 27/10 50/19</p>	<p><b>propose [1]</b> 16/13</p> <p><b>proposing [1]</b> 62/6</p> <p><b>prove [2]</b> 58/19 59/8</p> <p><b>proven [1]</b> 5/25</p> <p><b>provide [8]</b> 5/24 7/14 8/5 10/7 10/13 37/15 78/21 92/13</p> <p><b>provided [10]</b> 7/8 7/12 35/23 36/5 38/11 43/5 68/16 78/16 87/6 94/22</p> <p><b>provides [1]</b> 86/14</p> <p><b>providing [1]</b> 68/18</p> <p><b>proving [5]</b> 57/22 57/25 58/21 58/23 86/12</p> <p><b>provision [2]</b> 6/8 6/10</p> <p><b>psychiatric [1]</b> 29/2</p> <p><b>Psychiatrist [4]</b> 4/7 7/6 7/7 7/17</p> <p><b>Psychiatrists [1]</b> 33/19</p> <p><b>psychoeducation [8]</b> 43/5 43/7 43/8 44/3 92/21 93/8 94/22 94/22</p> <p><b>psychological [1]</b> 92/15</p> <p><b>psychology [2]</b> 92/10 93/8</p> <p><b>psychosis [29]</b> 4/24 5/23 5/25 6/2 6/7 43/11 43/12 43/13 43/13 43/16 43/21 43/25 45/2 45/4 46/20 46/21 46/23 46/24 47/5 47/8 48/2 64/23 65/16 67/11 68/5 80/22 82/14 92/13 92/14</p> <p><b>psychotherapy [1]</b> 64/24</p> <p><b>psychotic [14]</b> 28/18 43/6 44/7 46/24 47/4 47/7 76/12 76/15 79/11 79/14 81/1 86/25 87/23 87/23</p> <p><b>published [1]</b> 33/18</p> <p><b>punished [1]</b> 58/7</p> <p><b>purely [1]</b> 85/2</p> <p><b>purpose [5]</b> 10/3 10/4 10/6 22/22 85/22</p> <p><b>purposes [3]</b> 15/8 17/7 27/1</p> <p><b>put [28]</b> 1/23 2/14 2/22 6/7 11/17 16/5 16/7 16/7 16/9 16/13 17/1 24/15 24/19 25/7 28/24 29/4 30/16 30/18 30/19 46/8 47/25 48/22 57/9 59/2 63/16 70/3 72/13 72/22</p> <p><b>putting [6]</b> 25/8 25/10 29/17 30/22</p>	<p>30/24 94/23</p> <p><b>Q</b></p> <p><b>quality [1]</b> 92/11</p> <p><b>question [19]</b> 12/10 12/24 13/3 13/25 14/21 36/17 40/2 41/20 45/9 48/1 52/10 52/10 55/4 66/19 71/8 73/19 75/5 82/23 83/11</p> <p><b>Questioned [8]</b> 1/7 72/8 77/14 89/15 96/4 96/5 96/6 96/7</p> <p><b>questioning [3]</b> 39/11 39/20 70/11</p> <p><b>questions [4]</b> 72/6 77/15 90/8 95/9</p> <p><b>quick [3]</b> 25/15 25/16 48/5</p> <p><b>quickly [2]</b> 48/6 94/8</p> <p><b>quite [8]</b> 18/10 26/13 37/19 39/16 43/17 43/17 44/9 63/7</p> <p><b>quotation [1]</b> 57/4</p> <p><b>R</b></p> <p><b>raise [4]</b> 14/11 43/20 43/23 44/18</p> <p><b>raised [4]</b> 14/13 20/18 67/14 88/5</p> <p><b>raising [2]</b> 50/9 88/17</p> <p><b>rang [1]</b> 70/15</p> <p><b>range [4]</b> 46/9 72/1 91/20 92/13</p> <p><b>rapport [3]</b> 74/20 74/25 75/8</p> <p><b>rather [6]</b> 20/8 27/22 57/4 68/17 73/9 92/3</p> <p><b>reach [6]</b> 9/12 33/7 34/22 35/5 35/14 85/16</p> <p><b>reached [4]</b> 47/12 71/13 71/16 72/3</p> <p><b>read [18]</b> 20/19 21/4 24/4 25/25 26/3 26/11 27/14 27/17 27/20 27/22 27/25 34/8 35/25 36/2 36/17 36/23 37/1 37/4</p> <p><b>reading [1]</b> 26/2</p> <p><b>ready [1]</b> 48/11</p> <p><b>really [2]</b> 38/16 73/15</p> <p><b>reason [12]</b> 12/23 20/1 30/9 33/5 33/16 36/25 41/20 46/8 60/20 61/5 61/6 67/6</p> <p><b>reasons [1]</b> 57/13</p> <p><b>recall [34]</b> 9/15 9/16 9/17 9/19 13/25 15/1 15/5 22/9 23/23 24/25 25/12 26/15 26/16 27/25 32/19 33/11 39/10 40/7 40/13 44/17 44/19 50/12 50/24 51/4 54/21 55/1</p>	<p>61/22 63/2 63/5 64/3 65/4 69/19 90/13 90/15</p> <p><b>receive [3]</b> 6/1 65/2 68/22</p> <p><b>received [2]</b> 7/16 45/18</p> <p><b>recent [4]</b> 26/3 39/16 41/1 90/18</p> <p><b>recently [1]</b> 91/8</p> <p><b>recognise [1]</b> 51/7</p> <p><b>recognised [1]</b> 51/8</p> <p><b>record [12]</b> 14/25 22/10 23/24 25/23 26/9 30/2 32/9 40/23 44/1 55/1 63/9 72/14</p> <p><b>recording [3]</b> 14/1 14/21 15/7</p> <p><b>records [29]</b> 13/24 15/9 15/12 15/21 17/10 17/12 20/20 20/23 21/5 21/7 24/4 24/6 24/7 24/10 24/11 24/12 28/2 31/3 35/18 35/20 35/25 36/18 39/5 53/20 63/21 71/9 90/9 90/11 92/19</p> <p><b>red [1]</b> 36/14</p> <p><b>refer [1]</b> 8/17</p> <p><b>reference [11]</b> 29/5 30/19 35/8 36/14 43/7 44/1 57/17 57/19 58/9 67/10 70/12</p> <p><b>referenced [2]</b> 44/2 80/19</p> <p><b>references [1]</b> 36/8</p> <p><b>referencing [1]</b> 88/10</p> <p><b>referral [5]</b> 6/5 20/17 21/3 92/16 93/22</p> <p><b>referred [7]</b> 20/14 25/20 29/9 30/11 30/12 38/12 89/18</p> <p><b>referrer [1]</b> 20/18</p> <p><b>referring [7]</b> 5/20 20/21 27/15 27/18 51/15 58/12 59/6</p> <p><b>refers [4]</b> 21/15 44/10 57/22 69/8</p> <p><b>reflect [2]</b> 80/16 86/18</p> <p><b>reflections [1]</b> 51/6</p> <p><b>regarding [2]</b> 13/25 83/8</p> <p><b>regional [1]</b> 78/12</p> <p><b>Register [1]</b> 77/21</p> <p><b>regular [1]</b> 8/5</p> <p><b>regularity [1]</b> 18/5</p> <p><b>regularly [3]</b> 59/17 59/25 64/17</p> <p><b>relapse [4]</b> 25/16 32/25 38/4 54/16</p> <p><b>relapses [2]</b> 90/18 91/8</p> <p><b>relation [1]</b> 68/18</p> <p><b>relationship [7]</b> 24/19 34/17 47/21</p>
--	---	---	--	--

<p><b>R</b></p> <p><b>relationship... [4]</b> 75/13 75/14 75/15 95/1</p> <p><b>relative [1]</b> 34/22</p> <p><b>relatively [2]</b> 67/24 90/17</p> <p><b>relatives [3]</b> 32/7 34/10 34/18</p> <p><b>relevant [4]</b> 14/5 30/14 31/6 93/13</p> <p><b>reliable [1]</b> 34/4</p> <p><b>relicensing [1]</b> 85/12</p> <p><b>relied [1]</b> 40/5</p> <p><b>reluctance [1]</b> 23/18</p> <p><b>relying [2]</b> 31/19 40/16</p> <p><b>remain [2]</b> 19/16 84/10</p> <p><b>remained [1]</b> 66/21</p> <p><b>remaining [1]</b> 61/9</p> <p><b>remains [1]</b> 74/19</p> <p><b>remember [11]</b> 8/21 8/24 9/5 24/20 29/25 44/9 49/2 60/24 89/18 89/23 90/25</p> <p><b>repetition [2]</b> 59/12 59/13</p> <p><b>replaced [1]</b> 20/5</p> <p><b>report [14]</b> 27/5 29/2 40/4 64/18 79/7 79/25 79/25 80/3 80/11 81/11 82/1 82/17 82/19 85/17</p> <p><b>reported [5]</b> 65/9 65/11 67/15 68/20 74/5</p> <p><b>reporting [1]</b> 40/17</p> <p><b>reports [2]</b> 26/17 27/22</p> <p><b>represent [2]</b> 78/18 89/16</p> <p><b>request [1]</b> 80/3</p> <p><b>requested [1]</b> 73/8</p> <p><b>requesting [1]</b> 73/3</p> <p><b>require [2]</b> 34/8 83/12</p> <p><b>requirement [1]</b> 80/25</p> <p><b>requirements [2]</b> 78/22 80/18</p> <p><b>requires [2]</b> 61/23 79/11</p> <p><b>requiring [1]</b> 91/10</p> <p><b>resident [2]</b> 2/12 26/24</p> <p><b>resolve [1]</b> 48/6</p> <p><b>resort [2]</b> 82/13 83/16</p> <p><b>respect [6]</b> 9/24 13/23 44/16 45/18 68/14 71/8</p> <p><b>respond [2]</b> 71/20 73/19</p> <p><b>responded [1]</b> 71/22</p>	<p><b>responding [2]</b> 66/3 86/25</p> <p><b>response [6]</b> 66/15 67/18 73/2 89/21 90/8 94/5</p> <p><b>responsibility [6]</b> 7/18 8/14 19/8 19/15 19/16 82/5</p> <p><b>responsible [7]</b> 7/7 7/9 7/11 18/4 19/10 19/25 20/8</p> <p><b>rest [3]</b> 40/21 50/13 79/6</p> <p><b>resultant [1]</b> 87/2</p> <p><b>reverse [1]</b> 2/25</p> <p><b>review [5]</b> 10/18 11/13 32/3 33/10 54/16</p> <p><b>reviewed [4]</b> 24/21 26/12 34/12 38/12</p> <p><b>reviewing [1]</b> 22/10</p> <p><b>reviews [4]</b> 8/6 10/5 34/20 53/4</p> <p><b>revisit [1]</b> 87/17</p> <p><b>revisiting [1]</b> 87/5</p> <p><b>right [60]</b> 1/15 1/18 1/20 2/2 2/5 4/2 4/13 4/15 4/18 4/20 4/22 4/25 5/2 5/4 5/6 5/8 5/10 5/16 6/20 6/22 6/24 8/2 8/19 10/2 13/19 13/20 13/22 13/23 14/14 14/16 14/20 16/20 17/6 17/15 19/14 21/2 21/6 21/20 22/3 23/25 28/5 36/7 36/16 48/1 50/15 53/16 54/12 59/20 59/23 65/14 67/19 68/12 69/13 69/15 77/3 77/12 78/15 84/8 90/6 93/7</p> <p><b>rights [1]</b> 42/14</p> <p><b>rigid [2]</b> 18/9 92/3</p> <p><b>RiO [7]</b> 20/21 20/23 26/3 36/18 36/23 72/14 92/19</p> <p><b>risk [30]</b> 13/7 19/9 25/6 25/10 30/14 33/20 37/10 37/16 37/17 37/22 37/23 37/24 38/3 38/4 38/14 38/17 39/15 41/16 41/16 43/1 51/7 57/10 61/18 61/20 61/24 62/10 62/15 66/5 73/19 92/8</p> <p><b>risks [5]</b> 19/7 34/14 37/25 38/6 38/6</p> <p><b>role [4]</b> 7/20 7/24 9/23 13/15</p> <p><b>roles [1]</b> 7/2</p> <p><b>roughly [3]</b> 19/5 51/10 64/6</p> <p><b>round [1]</b> 75/16</p> <p><b>Royal [1]</b> 33/18</p>	<p><b>rules [3]</b> 18/9 58/10 59/9</p> <p><b>rum [1]</b> 36/14</p> <p><b>run [2]</b> 50/21 53/21</p> <p><b>run-up [1]</b> 53/21</p> <p><b>running [1]</b> 24/18</p> <p><b>S</b></p> <p><b>Sadraei [1]</b> 27/16</p> <p><b>safety [3]</b> 19/7 19/10 73/18</p> <p><b>said [52]</b> 4/23 16/9 25/19 28/23 29/7 30/21 32/15 33/5 33/14 33/16 34/12 35/16 36/19 38/15 40/6 41/12 46/17 49/11 50/24 51/22 56/16 56/25 57/5 58/1 58/6 58/12 58/19 59/3 59/5 59/17 59/22 59/24 60/18 61/1 62/25 64/20 68/23 69/2 73/11 75/1 76/20 77/3 83/22 91/6 91/13 92/23 93/1 93/12 93/14 93/15 93/19 94/21</p> <p><b>same [5]</b> 9/9 37/15 41/5 59/10 79/12</p> <p><b>sat [2]</b> 9/11 74/15</p> <p><b>saw [24]</b> 5/1 10/23 17/14 17/16 20/3 24/16 26/7 26/14 26/18 29/25 32/15 32/16 32/17 32/17 32/18 36/19 46/7 69/15 70/7 70/8 74/17 75/6 86/19 90/9</p> <p><b>say [52]</b> 1/22 3/15 3/23 16/16 16/19 18/19 19/18 21/23 23/8 23/21 26/10 27/14 28/15 29/8 30/19 31/19 32/1 32/2 32/5 35/4 36/17 37/7 39/11 41/21 42/18 45/18 47/24 53/7 53/8 54/24 58/6 59/16 61/10 61/15 66/13 71/2 71/15 71/17 71/25 74/12 76/1 76/3 76/25 77/1 77/22 78/24 81/9 84/15 85/3 85/13 91/12 92/12</p> <p><b>saying [15]</b> 2/17 3/20 36/9 40/7 41/23 42/25 48/1 59/22 59/23 65/17 73/20 79/16 82/8 83/20 88/14</p> <p><b>says [8]</b> 3/9 16/23 22/20 22/23 35/22 75/20 81/8 93/3</p> <p><b>scale [1]</b> 11/4</p> <p><b>scary [1]</b> 43/17</p> <p><b>scheduled [1]</b> 73/9</p>	<p><b>schizophrenia [3]</b> 47/13 47/25 90/17</p> <p><b>score [3]</b> 68/3 68/3 68/8</p> <p><b>scored [1]</b> 68/3</p> <p><b>scores [2]</b> 67/23 67/25</p> <p><b>screen [1]</b> 39/1</p> <p><b>scroll [2]</b> 72/25 73/1</p> <p><b>scrutinise [1]</b> 60/2</p> <p><b>second [32]</b> 2/3 2/9 2/13 2/14 2/15 2/17 2/21 2/21 2/23 3/19 8/3 21/10 23/20 24/7 24/21 25/5 26/4 26/21 29/11 32/16 32/22 37/10 39/5 47/24 56/10 56/10 59/5 62/18 64/21 65/21 83/22 84/2</p> <p><b>secondly [2]</b> 40/7 42/23</p> <p><b>secretary [1]</b> 73/24</p> <p><b>section [3]</b> 9/22 19/16 27/19</p> <p><b>Section 12 [1]</b> 27/19</p> <p><b>sections [1]</b> 19/7</p> <p><b>secure [1]</b> 66/4</p> <p><b>see [92]</b> 10/10 11/11 11/12 11/13 11/15 11/18 12/13 15/11 17/9 18/13 19/2 19/4 19/13 21/9 21/13 21/17 21/18 22/18 23/3 23/5 25/23 26/7 26/25 28/7 28/8 29/7 29/22 30/9 33/22 36/25 37/8 37/11 38/2 39/14 42/8 45/4 47/21 47/22 48/19 49/9 49/21 49/23 50/8 50/13 50/23 52/3 53/4 53/25 54/10 54/19 55/1 56/6 56/7 57/6 63/23 64/7 65/20 67/9 67/14 67/20 67/23 68/4 68/4 69/3 70/7 70/24 72/2 72/19 72/20 72/25 74/9 74/23 75/18 79/10 79/19 83/1 83/25 84/9 84/14 84/22 85/8 86/2 87/5 87/12 87/15 88/10 88/14 90/10 90/12 90/23 93/10 93/16</p> <p><b>Seedat [13]</b> 27/18 35/20 35/24 37/4 37/21 49/17 53/24 53/25 54/14 54/19 54/23 55/9 72/18</p> <p><b>seeing [12]</b> 11/5 11/11 13/16 19/13 20/9 24/8 26/15 36/1 42/12 44/21 48/7 55/14</p>	<p><b>seek [3]</b> 32/6 34/9 38/19</p> <p><b>seem [2]</b> 79/16 80/16</p> <p><b>seems [3]</b> 71/7 79/8 79/16</p> <p><b>seen [29]</b> 15/14 18/16 18/18 18/24 22/9 22/15 23/7 23/23 24/12 24/24 24/25 25/1 25/12 25/24 27/2 27/4 36/8 36/11 36/13 39/7 52/1 52/11 55/11 63/23 71/9 71/21 90/2 90/24 91/5</p> <p><b>sees [1]</b> 10/19</p> <p><b>self [3]</b> 40/4 64/18 74/18</p> <p><b>self-report [2]</b> 40/4 64/18</p> <p><b>send [1]</b> 31/4</p> <p><b>senior [1]</b> 7/10</p> <p><b>sense [2]</b> 45/12 56/24</p> <p><b>sent [4]</b> 70/12 73/3 73/5 73/25</p> <p><b>sentence [9]</b> 2/17 10/25 32/5 40/23 43/4 48/12 56/10 57/2 67/9</p> <p><b>sentences [1]</b> 22/21</p> <p><b>September [33]</b> 5/3 17/14 17/19 20/25 24/16 25/9 25/22 26/7 26/16 27/13 28/4 28/6 31/24 32/3 32/15 34/11 35/4 35/13 35/16 38/23 40/9 49/23 50/3 50/21 51/7 52/14 52/25 53/2 69/15 78/21 87/6 92/20 94/1</p> <p><b>September 2020 [1]</b> 5/3</p> <p><b>sequence [1]</b> 22/25</p> <p><b>serious [3]</b> 90/17 90/19 91/8</p> <p><b>seriously [3]</b> 41/19 86/16 86/19</p> <p><b>service [1]</b> 5/18</p> <p><b>services [1]</b> 6/14</p> <p><b>session [1]</b> 15/24</p> <p><b>set [8]</b> 6/6 7/1 22/21 23/17 28/10 28/20 34/6 45/14</p> <p><b>sets [4]</b> 5/17 7/20 44/11 56/13</p> <p><b>setting [1]</b> 36/6</p> <p><b>seven [1]</b> 17/25</p> <p><b>severely [1]</b> 86/21</p> <p><b>shall [1]</b> 2/25</p> <p><b>share [1]</b> 9/9</p> <p><b>shared [3]</b> 71/5 74/13 88/3</p> <p><b>she [14]</b> 8/20 8/23 8/25 9/4 9/5 15/5 17/4 20/6 40/9 68/13 69/24 70/3 70/4 90/11</p>
---	--	--	---	--

<p><b>S</b></p> <p><b>Sheffield [2]</b> 77/25 78/13</p> <p><b>short [3]</b> 53/18 67/16 73/23</p> <p><b>short-term [1]</b> 67/16</p> <p><b>shortly [1]</b> 24/7</p> <p><b>should [33]</b> 2/18 2/20 20/8 20/24 24/10 30/19 33/7 34/3 44/4 44/12 44/14 45/5 45/11 55/11 58/6 58/19 59/7 59/22 61/18 62/23 63/1 68/16 73/14 79/2 79/6 79/17 83/19 87/19 91/5 91/10 93/21 94/18 95/3</p> <p><b>shouldn't [1]</b> 2/18</p> <p><b>show [3]</b> 24/23 90/11 92/20</p> <p><b>sic [1]</b> 80/24</p> <p><b>side [3]</b> 18/15 25/7 39/13</p> <p><b>sign [1]</b> 22/5</p> <p><b>significance [8]</b> 31/2 42/19 42/22 43/2 63/19 63/20 78/17 80/17</p> <p><b>significant [11]</b> 40/25 41/2 41/5 41/21 42/21 51/2 56/18 56/20 63/13 63/15 68/2</p> <p><b>simply [4]</b> 2/25 40/13 47/17 66/20</p> <p><b>since [3]</b> 12/3 26/3 26/4</p> <p><b>sitting [1]</b> 48/6</p> <p><b>situation [2]</b> 61/24 80/4</p> <p><b>six [3]</b> 11/16 17/24 20/6</p> <p><b>six months [1]</b> 20/6</p> <p><b>sixth [1]</b> 11/1</p> <p><b>sleep [1]</b> 48/5</p> <p><b>slightly [3]</b> 19/4 55/3 66/19</p> <p><b>so [275]</b></p> <p><b>social [8]</b> 6/14 6/23 12/3 12/5 12/7 12/12 12/17 13/1</p> <p><b>solely [1]</b> 31/19</p> <p><b>some [18]</b> 1/17 12/9 15/5 21/7 29/4 31/16 39/16 41/2 46/4 47/6 52/6 52/21 54/13 60/18 67/18 77/17 86/8 92/1</p> <p><b>some job [1]</b> 92/1</p> <p><b>somebody [6]</b> 20/14 47/24 77/3 82/21 85/17 91/2</p> <p><b>somehow [1]</b> 3/24</p> <p><b>someone [8]</b> 41/9 76/20 79/11 86/16</p>	<p>90/10 90/16 91/7 92/12</p> <p><b>something [24]</b> 11/25 12/10 13/6 13/10 16/8 16/23 20/7 26/1 34/23 38/19 43/10 44/4 46/16 55/6 58/12 62/8 62/13 73/11 73/20 74/12 83/16 87/3 91/21 93/18</p> <p><b>sometimes [6]</b> 15/4 18/23 18/24 19/22 30/23 31/15</p> <p><b>soon [1]</b> 92/15</p> <p><b>sooner [2]</b> 55/11 73/11</p> <p><b>sorry [20]</b> 1/10 1/14 1/25 9/16 16/17 16/17 21/23 23/14 25/18 26/18 40/1 41/14 55/3 55/5 55/8 65/19 75/5 77/1 88/12 88/13</p> <p><b>sort [9]</b> 12/9 20/9 40/19 46/17 51/21 66/7 88/24 89/2 91/22</p> <p><b>sorting [2]</b> 88/14 88/23</p> <p><b>sought [1]</b> 76/18</p> <p><b>source [1]</b> 40/5</p> <p><b>sources [2]</b> 32/14 34/4</p> <p><b>South [1]</b> 9/9</p> <p><b>South LMHT [1]</b> 9/9</p> <p><b>space [2]</b> 9/9 51/9</p> <p><b>speak [2]</b> 34/22 45/12</p> <p><b>speaking [1]</b> 75/21</p> <p><b>Specialist [1]</b> 77/21</p> <p><b>specialty [2]</b> 4/14 4/16</p> <p><b>specific [2]</b> 11/24 92/5</p> <p><b>specifically [6]</b> 11/22 12/1 66/6 85/15 86/9 87/21</p> <p><b>specify [3]</b> 63/9 63/21 64/19</p> <p><b>speech [1]</b> 57/4</p> <p><b>speeding [1]</b> 89/7</p> <p><b>spent [6]</b> 39/16 41/2 41/18 65/4 78/5 78/6</p> <p><b>spoke [1]</b> 32/3</p> <p><b>spoken [1]</b> 33/10</p> <p><b>stability [3]</b> 44/13 79/4 87/11</p> <p><b>stable [2]</b> 84/10 87/18</p> <p><b>staff [4]</b> 22/23 76/23 89/20 90/1</p> <p><b>stage [2]</b> 22/14 47/6</p> <p><b>standard [5]</b> 6/6 12/10 33/9 33/12 94/6</p> <p><b>standards [1]</b> 92/12</p> <p><b>stands [1]</b> 6/5</p> <p><b>start [7]</b> 5/12 6/4 28/4</p>	<p>48/9 53/16 79/1 79/7 <b>started [3]</b> 29/9 32/23 59/5</p> <p><b>starts [2]</b> 11/1 48/13</p> <p><b>state [6]</b> 10/10 46/1 54/8 62/22 71/12 84/3</p> <p><b>stated [1]</b> 26/15</p> <p><b>statement [18]</b> 1/13 1/16 2/8 4/3 6/25 7/2 8/11 9/20 20/11 23/8 24/15 24/20 31/25 32/1 62/25 64/11 71/11 77/19</p> <p><b>states [1]</b> 17/25</p> <p><b>stating [2]</b> 73/13 73/15</p> <p><b>Station [1]</b> 28/13</p> <p><b>stationery [1]</b> 88/24</p> <p><b>stay [1]</b> 32/22</p> <p><b>stayed [1]</b> 33/1</p> <p><b>steer [1]</b> 7/15</p> <p><b>step [1]</b> 64/2</p> <p><b>still [9]</b> 12/19 21/16 37/15 57/3 65/16 66/1 66/21 67/3 72/1</p> <p><b>stimuli [1]</b> 66/3</p> <p><b>Stonebridge [2]</b> 4/17 14/24</p> <p><b>stop [4]</b> 32/25 41/24 42/5 80/7</p> <p><b>stopped [3]</b> 25/3 74/5 90/5</p> <p><b>stopping [1]</b> 91/21</p> <p><b>straight [3]</b> 23/20 25/4 53/22</p> <p><b>STRAW [2]</b> 89/15 96/7</p> <p><b>strength [1]</b> 61/3</p> <p><b>stress [1]</b> 48/5</p> <p><b>subject [2]</b> 4/3 65/5</p> <p><b>subsequent [2]</b> 44/8 52/15</p> <p><b>subsequently [1]</b> 94/24</p> <p><b>such [5]</b> 16/1 53/11 70/5 73/23 91/20</p> <p><b>suffered [1]</b> 30/13</p> <p><b>suffering [1]</b> 65/16</p> <p><b>sufficient [3]</b> 33/14 35/7 35/16</p> <p><b>suggest [4]</b> 74/18 80/15 82/7 94/17</p> <p><b>suggested [3]</b> 76/19 76/20 83/19</p> <p><b>suggestibility [1]</b> 65/24</p> <p><b>suggesting [2]</b> 79/17 81/19</p> <p><b>suggestions [3]</b> 3/21 3/24 3/25</p> <p><b>suggests [1]</b> 82/8</p> <p><b>summaries [1]</b> 31/21</p> <p><b>summarise [3]</b> 5/20 10/4 49/23</p> <p><b>summarises [1]</b> 35/21</p>	<p><b>summarising [1]</b> 13/15</p> <p><b>summary [16]</b> 16/21 17/16 17/24 18/3 23/6 24/21 24/22 32/16 32/18 37/1 37/1 37/4 37/20 37/21 53/25 74/10</p> <p><b>Summary/Formulation [1]</b> 17/24</p> <p><b>superficial [5]</b> 46/2 46/6 46/8 46/18 48/16</p> <p><b>supernumerary [1]</b> 19/23</p> <p><b>supervised [2]</b> 9/2 9/4</p> <p><b>supervision [9]</b> 8/17 13/17 15/15 15/16 15/23 15/23 16/2 16/22 19/24</p> <p><b>supervisions [3]</b> 7/25 15/25 16/3</p> <p><b>supply [4]</b> 49/5 49/10 55/17 60/9</p> <p><b>support [6]</b> 6/13 6/23 49/18 51/17 52/24 86/16</p> <p><b>suppose [2]</b> 35/3 71/17</p> <p><b>supposed [2]</b> 15/1 15/3</p> <p><b>sure [12]</b> 8/22 9/14 15/6 40/20 48/14 49/6 49/13 52/2 54/8 62/8 62/13 72/12</p> <p><b>surely [1]</b> 81/11</p> <p><b>surgery [1]</b> 90/20</p> <p><b>surplus [1]</b> 59/21</p> <p><b>surprised [3]</b> 44/24 45/13 45/21</p> <p><b>surprising [1]</b> 87/14</p> <p><b>survivors [1]</b> 77/16</p> <p><b>suspect [2]</b> 48/24 50/25</p> <p><b>suspected [2]</b> 5/25 47/12</p> <p><b>symptoms [13]</b> 11/8 28/18 46/15 46/25 47/2 47/4 65/16 76/12 82/17 82/18 85/2 85/19 87/25</p> <p><b>system [1]</b> 20/20</p>	<p><b>taken [12]</b> 19/23 21/17 22/7 22/14 22/20 23/5 60/14 60/16 74/9 75/19 76/9 86/5</p> <p><b>takers [1]</b> 16/19</p> <p><b>taking [19]</b> 17/1 21/21 21/24 22/15 23/2 23/7 25/3 39/7 39/12 41/24 42/5 55/17 59/17 59/24 60/25 64/17 64/20 79/4 81/20</p> <p><b>talk [2]</b> 8/1 10/23</p> <p><b>talked [2]</b> 40/22 84/4</p> <p><b>talking [2]</b> 2/22 41/3</p> <p><b>team [57]</b> 4/19 4/23 4/23 4/24 5/13 5/15 5/21 5/22 6/17 7/3 7/11 13/16 13/20 14/2 14/17 19/21 19/22 19/23 20/5 20/14 20/16 21/15 22/13 22/19 22/22 23/24 24/3 24/17 24/19 25/19 29/9 32/24 34/17 34/25 36/20 47/12 47/19 53/5 53/7 53/11 54/4 62/5 62/6 62/9 63/25 68/21 70/16 71/5 77/24 90/10 91/5 91/18 92/6 92/16 93/18 94/8 95/2</p> <p><b>technology [1]</b> 12/17</p> <p><b>telephone [7]</b> 50/3 50/9 50/11 51/11 52/19 54/21 73/2</p> <p><b>tell [12]</b> 42/23 43/11 57/14 66/9 73/20 74/4 77/19 78/2 81/1 83/15 84/8 86/22</p> <p><b>telling [8]</b> 80/5 80/18 81/15 83/3 84/22 85/2 85/9 87/24</p> <p><b>tells [10]</b> 12/8 42/10 42/16 42/24 56/24 60/15 62/5 67/13 68/7 88/7</p> <p><b>temporary [1]</b> 20/10</p> <p><b>ten [10]</b> 59/21 60/11 60/14 60/15 60/17 60/20 61/2 61/7 61/8 61/13</p> <p><b>tend [2]</b> 12/11 12/15</p> <p><b>term [5]</b> 43/8 43/9 46/4 48/14 67/16</p> <p><b>terms [22]</b> 6/18 10/14 16/10 26/9 28/23 36/4 37/7 37/16 38/3 38/17 42/16 46/10 49/2 53/3 62/14 63/3 63/16 66/3 66/14 67/4 80/23 94/9</p> <p><b>terrified [1]</b> 27/8</p> <p><b>test [2]</b> 67/25 70/8</p> <p><b>tests [2]</b> 67/18 67/20</p> <p><b>text [7]</b> 35/21 36/6</p>
<p><b>T</b></p>				
<p><b>tablet [5]</b> 60/21 60/21 60/23 60/25 61/8</p> <p><b>tablets [9]</b> 59/21 60/11 60/15 60/17 61/1 61/2 61/2 61/7 61/8</p> <p><b>take [13]</b> 15/5 20/19 28/2 35/18 41/7 48/14 48/16 60/18 68/25 75/2 76/8 78/15 88/21</p> <p><b>takeaway [2]</b> 67/25 68/1</p>				

<p><b>T</b></p> <p><b>text...</b> [5] 36/8 37/2 38/10 73/2 73/5</p> <p><b>Thames</b> [1] 70/14</p> <p><b>than</b> [13] 20/8 27/22 55/11 56/3 60/13 60/21 63/17 68/17 72/21 73/9 74/17 92/3 93/7</p> <p><b>thank</b> [21] 2/2 3/3 14/9 32/2 50/2 53/16 72/7 77/12 77/13 78/15 78/24 88/9 89/13 89/14 89/17 90/8 95/6 95/7 95/8 95/9 95/10</p> <p><b>that</b> [669]</p> <p><b>that's</b> [89] 1/15 1/18 1/20 2/5 4/2 4/13 4/15 4/18 4/20 4/22 4/25 5/2 5/4 5/6 5/8 5/10 5/16 6/16 6/20 6/22 6/24 7/21 8/2 8/13 8/19 10/2 10/16 11/17 12/12 12/25 13/19 13/22 14/7 14/14 14/16 14/20 17/6 17/15 18/1 19/14 21/6 21/20 22/3 23/25 25/7 27/24 29/18 30/9 33/4 33/6 33/14 33/16 36/7 36/16 36/25 39/17 41/2 41/12 41/18 41/20 45/6 46/17 47/25 53/13 54/12 54/24 60/16 61/5 61/6 63/15 65/14 67/19 68/12 72/10 72/15 76/16 77/5 77/20 79/16 80/23 81/8 81/17 82/7 83/11 84/20 86/18 87/3 87/14 88/17</p> <p><b>their</b> [34] 6/2 6/4 6/4 6/13 11/8 11/9 11/9 11/21 12/22 12/22 14/4 18/8 18/23 19/24 37/9 42/20 42/23 43/1 43/14 43/15 43/16 45/6 46/10 47/4 47/9 47/20 47/22 53/4 68/6 80/18 82/17 82/18 82/18 92/1</p> <p><b>them</b> [12] 2/10 6/9 11/15 43/11 45/12 46/7 47/21 54/7 59/8 83/24 90/19 92/19</p> <p><b>themselves</b> [2] 12/16 38/10</p> <p><b>then</b> [112]</p> <p><b>therapeutic</b> [4] 71/14 71/15 72/1 72/4</p> <p><b>therapies</b> [1] 94/18</p> <p><b>therapy</b> [11] 6/9 6/10 6/10 6/21 37/9 43/25</p>	<p>44/7 65/3 94/7 94/10 94/24</p> <p><b>there</b> [143]</p> <p><b>there'd</b> [1] 15/16</p> <p><b>there's</b> [13] 11/23 13/5 36/14 49/23 50/3 50/8 51/10 61/24 72/20 82/24 90/13 93/8 94/14</p> <p><b>these</b> [26] 2/23 11/2 19/9 24/6 24/6 24/10 37/11 37/19 38/16 47/18 49/22 50/23 51/2 51/4 52/2 52/5 58/2 58/3 58/15 60/17 60/20 61/13 68/7 78/14 86/15 91/19</p> <p><b>they</b> [61] 6/1 6/3 6/7 6/12 7/14 8/5 11/11 11/20 12/7 12/9 12/16 12/21 12/21 15/2 18/13 18/23 18/24 19/2 19/23 20/10 20/24 21/16 22/13 24/11 33/15 34/18 34/19 39/6 42/24 43/2 45/2 45/3 45/7 45/11 47/4 47/5 47/6 47/6 51/20 51/20 55/18 58/6 67/24 67/24 68/5 68/20 71/22 76/6 76/25 79/21 79/21 79/21 80/4 80/22 81/4 81/6 81/7 82/14 82/15 91/25 92/20</p> <p><b>they'd</b> [2] 74/5 74/6</p> <p><b>they're</b> [3] 10/21 11/23 75/24</p> <p><b>they've</b> [2] 6/3 81/1</p> <p><b>thing</b> [7] 16/12 25/18 36/23 59/10 70/23 72/10 91/20</p> <p><b>things</b> [9] 10/15 11/20 18/19 36/21 39/19 51/4 58/6 85/18 92/9</p> <p><b>think</b> [24] 8/23 11/23 16/15 18/6 19/18 24/13 29/25 35/1 37/7 40/10 41/10 55/2 55/6 59/4 62/25 65/7 69/19 69/24 72/3 77/20 88/12 88/20 93/1 93/12</p> <p><b>thinking</b> [6] 35/6 36/14 41/12 67/10 79/1 92/3</p> <p><b>thinks</b> [3] 75/12 77/4 77/5</p> <p><b>third</b> [14] 1/22 22/18 32/7 32/14 34/1 34/9 55/16 57/3 63/25 64/15 65/21 67/9 67/9 88/3</p> <p><b>third-party</b> [2] 32/14 88/3</p>	<p><b>thirdly</b> [1] 42/25</p> <p><b>thirds</b> [1] 19/5</p> <p><b>this</b> [176]</p> <p><b>those</b> [40] 3/1 4/3 10/5 14/21 15/12 15/21 16/3 17/9 23/6 23/23 24/12 25/12 26/12 26/18 26/19 27/18 27/25 30/15 31/22 32/13 32/17 34/6 36/8 37/10 38/12 40/11 45/21 48/20 50/20 56/21 58/5 58/10 58/17 67/20 67/25 72/6 78/2 78/17 86/18 94/18</p> <p><b>thought</b> [5] 75/3 76/2 76/3 76/23 86/24</p> <p><b>thoughts</b> [4] 20/17 37/19 38/16 66/15</p> <p><b>Threat</b> [1] 86/15</p> <p><b>threatened</b> [1] 58/13</p> <p><b>three</b> [35] 8/21 8/23 11/16 24/18 25/20 29/24 30/3 36/20 44/12 45/6 48/8 79/23 79/23 79/25 80/2 80/6 80/9 80/9 80/14 80/19 80/21 81/4 81/13 81/14 81/16 81/19 81/25 82/3 82/15 84/11 85/25 87/11 94/2 94/14 94/17</p> <p><b>three months</b> [8] 24/18 25/20 80/19 80/21 81/4 81/19 82/15 84/11</p> <p><b>three o'clock</b> [1] 30/3</p> <p><b>three years</b> [1] 48/8</p> <p><b>threshold</b> [1] 49/14</p> <p><b>through</b> [6] 49/22 52/12 53/2 71/9 75/20 92/19</p> <p><b>throughout</b> [6] 34/24 52/3 63/14 74/19 74/25 84/3</p> <p><b>Thursday</b> [3] 9/6 9/6 73/10</p> <p><b>till</b> [1] 90/2</p> <p><b>time</b> [68] 8/7 8/9 8/17 8/18 8/18 8/20 8/23 8/25 10/18 10/22 12/3 13/23 14/2 14/24 15/11 17/11 17/13 18/11 18/15 18/19 19/12 22/10 25/17 27/12 27/17 30/22 32/9 32/20 33/5 33/7 33/16 35/6 35/13 35/15 36/2 36/19 37/25 39/17 41/3 41/5 41/19 44/20 44/25 46/12 47/21 53/14 54/25 59/4 63/4 63/18 65/4 70/8 70/10 76/5</p>	<p>76/15 80/19 82/1 84/3 84/4 86/2 86/22 87/22 88/1 88/20 90/2 93/3 94/3 95/2</p> <p><b>times</b> [1] 44/9</p> <p><b>timing</b> [1] 29/20</p> <p><b>titled</b> [1] 17/23</p> <p><b>today</b> [4] 73/4 73/9 74/11 95/10</p> <p><b>today's</b> [1] 5/11</p> <p><b>told</b> [17] 40/18 50/24 56/13 64/4 64/4 65/6 74/11 78/25 78/25 79/2 79/13 80/23 81/8 82/16 85/25 87/7 87/15</p> <p><b>too</b> [2] 36/24 93/24</p> <p><b>took</b> [5] 9/21 41/19 44/13 49/3 49/8</p> <p><b>top</b> [11] 19/5 20/12 21/13 26/21 27/6 35/22 50/7 53/22 53/23 56/7 83/15</p> <p><b>touch</b> [2] 34/25 68/13</p> <p><b>touched</b> [1] 6/18</p> <p><b>track</b> [1] 73/15</p> <p><b>trainee</b> [2] 7/21 20/5</p> <p><b>trainees</b> [3] 19/21 19/22 19/22</p> <p><b>training</b> [5] 4/14 4/16 15/24 78/4 78/7</p> <p><b>trajectory</b> [1] 10/14</p> <p><b>treat</b> [1] 43/13</p> <p><b>treating</b> [3] 37/5 44/25 56/21</p> <p><b>treatment</b> [11] 6/4 6/7 6/18 7/12 7/15 46/13 77/24 84/13 85/10 92/14 94/6</p> <p><b>trial</b> [2] 39/23 40/25</p> <p><b>tried</b> [3] 2/12 27/21 54/1</p> <p><b>trouble</b> [2] 57/12 57/15</p> <p><b>trouble'</b> [1] 57/7</p> <p><b>true</b> [1] 4/3</p> <p><b>truly</b> [1] 42/18</p> <p><b>trust</b> [6] 4/12 71/6 73/14 77/20 78/5 78/6</p> <p><b>trusts</b> [3] 77/23 78/12 78/14</p> <p><b>try</b> [4] 34/3 49/18 75/6 77/1</p> <p><b>trying</b> [11] 26/10 29/16 30/4 35/4 48/3 66/13 71/17 71/25 80/8 81/9 84/15</p> <p><b>Tuesday</b> [1] 1/1</p> <p><b>Tuhina</b> [2] 7/19 9/10</p> <p><b>turn</b> [2] 66/23 69/20</p> <p><b>turning</b> [2] 34/1 70/25</p> <p><b>twice</b> [2] 63/1 63/6</p> <p><b>two</b> [35] 2/10 2/23 6/4 9/6 18/18 19/5 19/9 25/4 26/19 27/16</p>	<p>27/17 30/1 31/2 32/23 32/25 33/1 34/7 36/21 37/8 47/18 50/21 51/10 51/24 52/18 60/25 70/11 77/18 77/22 78/3 78/4 78/5 78/8 90/17 92/16 93/22</p> <p><b>two hours</b> [1] 9/6</p> <p><b>two o'clock</b> [1] 30/1</p> <p><b>two pages</b> [1] 50/21</p> <p><b>two weeks</b> [8] 6/4 18/18 25/4 32/23 32/25 33/1 92/16 93/22</p> <p><b>two years</b> [3] 78/3 78/4 78/5</p> <p><b>two-thirds</b> [1] 19/5</p> <p><b>two-weekly</b> [1] 51/24</p> <p><b>two-year</b> [1] 78/8</p> <p><b>type</b> [2] 52/23 52/24</p> <p><b>types</b> [1] 11/20</p> <p><b>typical</b> [1] 29/22</p> <p><b>typo</b> [2] 1/24 3/13</p> <hr/> <p><b>U</b></p> <p><b>ultimate</b> [4] 7/18 8/13 19/20 80/11</p> <p><b>ultimately</b> [6] 7/7 7/9 7/11 19/19 19/25 20/2</p> <p><b>unclear</b> [1] 80/23</p> <p><b>under</b> [13] 2/16 14/5 17/24 19/5 19/6 19/24 19/24 28/9 28/12 42/12 45/25 46/19 62/17</p> <p><b>undergoing</b> [1] 65/2</p> <p><b>underneath</b> [1] 48/19</p> <p><b>understand</b> [13] 2/3 3/4 35/17 43/10 47/20 48/3 48/10 57/8 63/19 63/19 78/17 79/8 88/16</p> <p><b>understanding</b> [5] 17/11 25/1 25/17 44/20 46/14</p> <p><b>understood</b> [2] 59/1 59/10</p> <p><b>undertaking</b> [3] 4/14 20/25 24/2</p> <p><b>unduly</b> [1] 69/1</p> <p><b>uni</b> [1] 48/5</p> <p><b>unit</b> [1] 31/22</p> <p><b>university</b> [4] 32/7 33/8 34/10 35/11</p> <p><b>unless</b> [1] 11/23</p> <p><b>unseen</b> [1] 66/3</p> <p><b>unstable</b> [1] 87/10</p> <p><b>unsuccessful</b> [1] 50/14</p> <p><b>until</b> [9] 16/11 50/15 50/22 54/10 72/19 77/20 83/21 90/12 95/12</p> <p><b>unwell</b> [9] 46/11 54/17 76/18 76/19</p>
--	---	---	--	--

<p><b>U</b></p> <p><b>unwell... [5]</b> 76/21 77/4 77/6 86/17 87/18</p> <p><b>up [31]</b> 2/10 2/24 7/15 11/10 12/25 17/19 17/25 29/24 35/7 38/24 39/2 42/1 42/25 48/4 49/8 50/14 50/21 52/14 53/21 61/17 65/19 69/21 70/25 72/13 72/15 72/22 73/1 77/7 78/15 91/1 93/15</p> <p><b>update [5]</b> 61/20 61/23 62/7 62/12 69/11</p> <p><b>updated [1]</b> 61/18</p> <p><b>updating [1]</b> 62/3</p> <p><b>upon [6]</b> 6/18 11/7 39/4 45/23 84/23 87/20</p> <p><b>urgent [4]</b> 54/15 73/3 73/6 74/11</p> <p><b>urgently [1]</b> 56/2</p> <p><b>urging [2]</b> 54/4 54/7</p> <p><b>us [12]</b> 33/2 42/23 45/8 47/18 49/3 49/9 74/14 77/8 77/19 78/2 79/7 81/10</p> <p><b>use [8]</b> 12/5 43/8 47/1 47/5 82/13 83/17 85/20 85/21</p> <p><b>used [1]</b> 58/9</p> <p><b>uses [1]</b> 12/11</p> <p><b>using [2]</b> 12/7 42/14</p> <p><b>usual [2]</b> 63/17 81/24</p> <p><b>usually [4]</b> 18/11 18/12 20/16 20/19</p>	<p><b>view [4]</b> 67/12 69/16 71/4 76/14</p> <p><b>viewpoint [1]</b> 60/17</p> <p><b>views [10]</b> 39/21 40/9 41/4 41/10 41/13 42/11 42/12 42/14 42/20 65/8</p> <p><b>vigilant [2]</b> 38/1 48/25</p> <p><b>violate [2]</b> 58/10 59/9</p> <p><b>violation [1]</b> 59/8</p> <p><b>violence [1]</b> 38/5</p> <p><b>visit [13]</b> 22/12 22/13 22/19 49/24 50/5 54/7 56/5 73/23 74/1 74/2 74/11 74/23 93/15</p> <p><b>visited [1]</b> 60/7</p> <p><b>visits [9]</b> 18/21 22/22 23/6 23/10 39/6 44/8 51/11 52/5 52/18</p> <p><b>vocational [1]</b> 6/14</p> <p><b>voice [2]</b> 16/16 58/2</p> <p><b>voices [23]</b> 3/21 56/15 57/5 57/9 58/3 58/11 59/6 65/18 65/20 66/2 66/2 66/9 66/10 66/14 66/16 66/21 66/22 67/3 67/7 74/4 75/21 86/23 87/24</p>	<p><b>we're [3]</b> 49/20 55/15 57/2</p> <p><b>we've [8]</b> 16/16 39/4 52/11 52/15 71/9 71/9 86/8 92/19</p> <p><b>week [7]</b> 8/16 18/2 18/18 63/1 63/6 81/10 90/7</p> <p><b>weekly [6]</b> 7/25 15/15 51/1 51/23 51/24 52/1</p> <p><b>weeks [15]</b> 6/4 11/3 11/5 11/16 18/18 25/4 32/23 32/25 33/1 51/10 51/10 52/16 64/7 92/16 93/22</p> <p><b>weight [1]</b> 94/23</p> <p><b>welcome [1]</b> 34/19</p> <p><b>welcomed [1]</b> 74/14</p> <p><b>well [34]</b> 3/15 16/4 16/11 18/23 24/16 25/8 30/16 31/23 32/19 33/10 34/20 37/20 40/13 40/23 45/13 51/21 54/15 55/1 57/6 62/25 68/8 68/22 74/14 80/15 81/17 83/11 84/10 85/24 87/13 88/6 91/16 91/23 93/15 94/23</p> <p><b>went [3]</b> 46/13 80/22 92/21</p> <p><b>were [83]</b> 3/21 3/23 4/10 4/14 4/19 7/22 8/7 9/25 13/24 14/8 15/2 15/11 15/19 15/21 17/1 17/11 17/12 18/19 19/12 20/25 22/6 23/9 24/1 24/6 24/6 24/8 24/11 27/12 27/15 31/12 33/3 36/22 37/5 38/16 40/12 44/21 44/25 45/13 46/6 47/6 47/13 47/16 48/21 50/10 53/20 55/18 58/11 58/11 58/15 58/17 60/15 61/7 61/8 63/18 63/22 66/14 66/22 67/3 67/20 69/3 70/18 70/19 71/25 75/3 75/7 75/21 76/2 76/4 76/23 77/21 82/8 82/9 86/22 89/6 89/11 89/20 90/1 91/4 92/7 92/7 93/13 94/13 94/19</p> <p><b>weren't [3]</b> 69/3 76/6 76/9</p> <p><b>what [133]</b></p> <p><b>What's [3]</b> 2/6 42/19 83/14</p> <p><b>whatever [4]</b> 3/13 14/5 16/1 48/11</p> <p><b>when [68]</b> 2/7 2/21 8/9 9/4 10/18 11/12 11/13 11/18 12/13</p>	<p>12/13 14/2 19/18 19/21 21/16 22/10 24/15 24/16 25/1 25/8 27/14 28/24 29/4 30/4 32/15 36/2 37/11 39/6 40/6 40/15 41/20 43/24 46/9 47/2 48/16 50/16 54/17 54/18 54/21 54/24 57/16 58/7 59/2 61/1 61/9 62/3 64/7 70/7 70/15 71/15 73/10 74/5 74/13 76/19 76/20 77/3 77/5 77/20 82/13 84/3 84/4 84/16 86/19 88/2 89/10 90/12 93/10 94/2 94/21</p> <p><b>when I [1]</b> 40/15</p> <p><b>whenever [1]</b> 35/2</p> <p><b>where [36]</b> 1/22 2/20 2/22 3/9 3/16 3/20 10/15 10/15 10/16 11/4 13/18 16/22 18/3 31/13 37/16 40/9 40/23 45/15 46/9 47/19 48/23 55/16 71/22 72/1 77/22 78/2 78/8 78/9 78/21 82/9 83/2 84/2 88/6 90/9 94/14 94/17</p> <p><b>whereas [1]</b> 56/13</p> <p><b>whereby [1]</b> 79/7</p> <p><b>whether [44]</b> 9/12 12/11 12/25 13/3 18/17 24/24 25/12 31/18 31/18 32/12 37/13 40/10 40/11 41/21 44/21 44/23 50/12 50/24 51/5 52/6 52/7 52/8 53/6 60/24 61/13 62/7 62/8 62/13 63/12 64/3 65/17 66/7 66/8 70/2 76/2 80/12 82/2 82/21 83/8 83/8 89/19 91/1 91/2 94/3</p> <p><b>which [34]</b> 2/4 5/24 7/12 10/25 16/24 29/23 31/24 32/19 40/12 47/23 48/12 50/14 51/15 52/8 52/18 54/13 58/3 61/3 61/4 63/15 66/19 68/4 72/14 84/19 84/23 85/4 86/2 86/23 87/24 89/3 89/9 89/25 90/18 92/21</p> <p><b>while [5]</b> 9/25 25/12 25/23 29/18 58/1</p> <p><b>whilst [4]</b> 21/21 50/20 70/18 72/14</p> <p><b>who [25]</b> 7/17 7/17 8/7 9/4 9/8 9/9 9/10 9/15 9/24 11/11 15/2 19/20 19/25 20/3 20/9 36/10 41/9 42/10 42/12 79/11 80/22</p>	<p>86/14 86/16 86/17 91/8</p> <p><b>who'd [1]</b> 90/16</p> <p><b>who's [1]</b> 18/4</p> <p><b>whoever [1]</b> 80/3</p> <p><b>whole [10]</b> 9/7 25/14 26/7 39/14 39/17 43/25 44/6 52/2 70/2 93/9</p> <p><b>why [26]</b> 11/17 27/24 33/6 33/14 35/15 36/18 39/17 41/2 41/12 41/18 42/20 45/6 45/13 46/17 47/25 54/13 54/15 54/24 60/16 60/17 60/20 63/15 65/7 73/10 84/20 87/17</p> <p><b>wider [1]</b> 91/18</p> <p><b>will [40]</b> 5/11 6/19 14/6 17/19 18/16 18/21 30/9 36/8 37/14 38/8 39/1 41/7 42/25 43/1 45/8 49/5 51/19 51/20 51/21 64/2 64/4 69/2 69/25 72/20 79/5 79/7 79/22 80/8 80/11 80/14 81/12 81/24 81/25 82/1 82/2 85/25 91/18 92/8 93/12 93/16</p> <p><b>window [2]</b> 27/9 30/13</p> <p><b>wings [1]</b> 19/25</p> <p><b>wise [1]</b> 49/2</p> <p><b>wish [6]</b> 1/17 1/21 2/4 2/6 3/7 39/22</p> <p><b>withdrawn [1]</b> 12/16</p> <p><b>within [4]</b> 6/3 6/4 92/16 93/22</p> <p><b>without [3]</b> 45/22 82/16 92/3</p> <p><b>WITN0337001 [3]</b> 6/25 20/12 23/8</p> <p><b>witness [7]</b> 1/4 1/13 6/25 17/18 20/11 31/25 83/13</p> <p><b>woman [2]</b> 58/4 90/19</p> <p><b>wonder [1]</b> 41/21</p> <p><b>word [4]</b> 1/22 46/25 47/5 94/4</p> <p><b>words [1]</b> 57/11</p> <p><b>work [11]</b> 5/13 5/21 6/16 9/1 9/22 18/19 19/24 66/11 78/9 78/14 89/3</p> <p><b>worked [7]</b> 4/21 8/20 77/19 77/22 78/2 78/12 93/14</p> <p><b>worker [1]</b> 23/2</p> <p><b>working [9]</b> 4/11 4/19 8/7 8/9 9/4 17/11 88/7 88/11 88/14</p> <p><b>works [3]</b> 8/21 9/8 9/10</p>
(39) unwell... - works				

<p><b>W</b></p> <p><b>world [1]</b> 12/6</p> <p><b>worrying [2]</b> 56/23 56/24</p> <p><b>would [67]</b> 9/5 11/4 11/5 13/8 13/10 13/10 14/11 16/6 16/9 16/13 17/1 17/20 18/19 19/18 20/16 20/19 24/13 33/9 34/7 34/8 37/5 37/7 37/7 37/15 37/17 37/21 37/23 38/1 38/13 38/15 38/18 38/19 44/24 45/11 45/21 53/7 53/8 61/9 61/10 62/13 63/21 64/23 70/21 70/23 70/24 71/23 73/23 76/24 77/5 79/14 82/9 82/10 84/8 84/24 85/10 85/13 86/17 87/19 88/5 88/12 90/22 91/9 91/12 92/23 93/21 94/6 94/19</p> <p><b>wouldn't [3]</b> 17/5 26/2 34/8</p> <p><b>write [13]</b> 3/13 15/3 30/5 31/15 43/5 45/8 79/7 79/24 80/4 81/9 81/11 81/24 82/1</p> <p><b>writing [6]</b> 2/7 29/1 29/2 29/15 30/5 64/14</p> <p><b>written [4]</b> 14/25 20/2 24/15 24/19</p> <p><b>wrong [1]</b> 92/9</p> <p><b>wrote [1]</b> 40/15</p>	<p><b>your [85]</b> 1/9 1/11 3/5 4/1 4/4 4/6 4/16 6/25 7/1 7/2 7/24 8/11 8/16 9/1 9/1 10/11 10/12 11/24 12/12 13/15 13/16 13/18 13/18 13/23 15/15 15/15 16/15 16/22 17/4 17/10 19/15 20/11 20/14 23/8 24/13 26/5 27/1 27/12 28/6 30/2 31/25 35/10 35/10 37/6 37/22 38/8 38/8 38/13 38/20 42/9 43/18 44/20 45/9 46/14 46/14 48/20 48/20 50/21 51/6 51/9 51/13 61/17 62/25 64/11 67/11 67/18 68/9 68/15 68/17 69/14 69/16 70/21 71/4 71/11 72/10 74/10 75/5 77/6 77/19 77/23 78/21 81/8 85/7 89/21 93/7</p> <p><b>yourself [1]</b> 46/15</p>			
<p><b>Y</b></p> <p><b>yeah [116]</b></p> <p><b>year [7]</b> 4/16 4/19 48/3 77/18 77/22 78/6 78/8</p> <p><b>years [4]</b> 48/8 78/3 78/4 78/5</p> <p><b>yes [145]</b></p> <p><b>you [550]</b></p> <p><b>you said [1]</b> 75/1</p> <p><b>you'd [3]</b> 38/11 74/22 74/24</p> <p><b>you'll [1]</b> 78/17</p> <p><b>you're [10]</b> 4/7 20/13 46/2 59/23 66/19 68/10 81/17 81/19 92/11 92/16</p> <p><b>you've [30]</b> 6/18 8/13 15/8 16/18 16/21 17/8 30/11 30/11 30/12 36/5 38/11 45/14 45/23 52/11 52/11 52/14 59/24 61/10 64/11 64/21 74/2 74/8 76/14 78/2 80/16 80/18 83/23 85/25 86/5 87/6</p>	<p><b>Z</b></p> <p><b>zoom [3]</b> 19/4 49/15 49/20</p> <p><b>zopiclone [1]</b> 29/10</p>			