

Witness Name: Dominic Lloyd

Statement No: WITN0197002

Dated: 13th May 2025

THE NOTTINGHAM INQUIRY

SECOND WITNESS STATEMENT OF DOMINIC LLOYD

I, Dominic Lloyd, will say as follows: -

INTRODUCTION

1. I am qualified as a registered mental health nurse. I am registered with the Nursing and Midwifery Council and affiliated with the Royal College of Nursing. Further details of my qualifications are set out in my first witness statement (WITN0197001) dated 12 November 2025.
2. This is the second witness statement I have given to the Inquiry and is made to assist with the matters set out in the Rule 9 Request dated 30 April 2026 (the “**Request**”). As with my first witness statement, this statement has been drafted on my behalf by the external solicitors acting for the Trust in respect of the Nottingham Inquiry (the “**Inquiry**”), with my oversight and input, following discussions in writing by email and by video conference.
3. Within this statement, I reference my interaction with Valdo Calocane (“**VC**”) on 24 May 2020.

INTERACTIONS WITH VC

4. As set out in my first witness statement I had no knowledge of VC prior to 24

May 2020. To reiterate, I also know nothing further about VC other than what is recorded in my notes from that date. Therefore, I provide this witness statement to clarify my notes from that time, explaining what I likely would have meant in the circumstances.

5. My entry on the RiO progress notes from 09:54 on 24 May 2020 (NHFT0000168, page 1) has been shown to me.
6. The entry records:

“Prior to this referral [VC] was seen by Custody Healthcare and following this was sent to ED in order to rule out organic causes to his presentation, I understand that he had bloods taken there which came back clear of substances.”

7. This entry was written from my understanding. I cannot recall the basis for my understanding that VC had undergone blood tests and that these had tested “clear for substances”. However, I can see that I added in the records ‘I understand that...’. Since I did not see the blood test results, this would indicate to me that I was advised by someone that this had taken place. If I was advised, this would have been either the custody healthcare professional or, although less likely, the Custody Sergeant. My reason for thinking this was the case is because it would usually be the Custody Healthcare Professional who requested any blood test and it would also, therefore, usually be the custody healthcare professionals who sees a summary of care from the Queens Medical Centre, and sometimes this is shared with me. If this happens, it would usually be shared verbally.
8. This information would have been shared in a conversation between me and the custody healthcare professional. It was not written down as this would have been a verbal discussion that frequently happened within the custody suite, when discussing appropriate actions to be taken. Given the passage of time, I am unable now to confirm whether I did in fact have a conversation with anyone; who the individual(s) might have been or what was discussed, as this took place over six years ago. However, as explained, the entry I have made

does suggest that I made the entry to reflect information I had been given at the time.

9. When I referred to the bloods being “clear of substances”, I would have been referring to illicit substances. This would influence my decision to call for a Mental Health Act Assessment as the substances could be affecting VC’s behaviour which could otherwise be misinterpreted for symptoms of mental illness.
10. Assuming that my recollection is correct, I would think the context of the conversation would most likely have been with the custody healthcare professional when determining if calling a Mental Health Act Assessment was appropriate at that time. This is because the assessing team would want to be as sure as possible that any organic cause or substance abuse was not influencing an individual’s behaviour. I note that the usual routine when dealing with individuals and substance misuse is suspected to be influencing their behaviour in custody is to give a six-hour rest period to help ensure that substances have left the system. So, having the blood tests come back clear was used as evidence to not require the waiting period, ensuring the MHA Assessment can happen as early as possible.
11. I now understand, as a result of information shown to me by the lawyers supporting me with this statement, that blood tests were taken at Queen’s Medical Centre (part of the Nottingham University Hospitals NHS Trust) on 23 May 2020, but that these do not appear to have tested for illicit drugs. I confirm that I would not at the time of 24 May 2020 have been able to access any records from Queen’s Medical Centre and that I do not recall seeing the physical blood test results.
12. I would not have seen the blood test results on the summary sheet unless the Custody Healthcare Professional chose to share the summary of Queen’s Medical Centre with me. Unfortunately, I am unable to confirm whether or not this took place.

13. If my understanding was not informed by a conversation with a healthcare professional, it could have been on my own assumption. Due to the passage of time, I am unable to confirm this.

Statement of Truth

I believe the content of this statement to be true. I understand that proceedings may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief of its truth.

Signed: **GRO-B**

Dated: 13/05/2026

Index to Second Witness Statement of Dominic Lloyd

No.	URN	Document Description
1	WITN0197001	First witness statement for the Inquiry
2	NHFT0000168	Medical Records of VC from 24/05/2020 to 14/06/2023, Various NHFT Staff/Teams, re: Patient Record Summary