

Friday, 5 June 2026

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(10.00 am)

**THE CHAIR:** Yes, Mr Blake, I think we're going to deal with some evidence which is going to be uploaded onto the website.

**Statement by MR BLAKE**

**MR BLAKE:** Thank you, Chair. Yes, today is the final day of oral evidence in the Inquiry. Of course, oral evidence is only part of the larger body of evidence that you'll be considering when you come to write your report.

There are many statements from witnesses who have not given oral evidence, or additional statements from those who have, and, Chair, your legal team have identified a number of statements which merit publication on the Inquiry's website at this time in order to assist the public with their understanding of the evidence.

**THE CHAIR:** Yes.

**MR BLAKE:** The presentation that is about to come on to screen identifies which statements those are, and provides a brief description of the evidence those witnesses have given. Thank you.

**THE CHAIR:** Yes, thank you.

**MR BLAKE:** Thank you. So if we start, please, on page 2. We have PC Alex Leggett, PC Emma Stone, Mia Edwards and

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The next page sets out a range of different policing matters. PC Brian Gardner of Leicestershire Police gives evidence in respect of whether PC Taylor viewed a certain tab on NICHE relating to VC's outstanding warrant.

Then the statements that follow all address the attacks of 13 June 2023. So we have Detective Inspector Trevor Plumb, who addresses VC's whereabouts the day before the attacks. We have Superintendent Simon Allardice, PC Andrew Wilkinson, PC Stephen Yallop, who all address issues relating to the armed response to the attacks.

We have Superintendent Louise Clarke, who addresses her involvement as the PACE Superintendent who attended all of the Gold meetings. We have DC Asif Stevens-Garrib, who gives two statements in respect of CCTV, and we have Chief Inspector Lisa Murray, who provides a second statement addressing when VC's fingerprints were first taken.

Thank you very much.

On this page we have Claire Salter and Superintendent Paul Burrows, who address training records and disclosure of various policies respectively. Inspector Mark Stanley gives evidence in respect of dash-cam footage from police vehicles explaining why

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PC Ashley Smith. They all give evidence in respect of the incidents involving VC on 24 May 2020. Three are response officers and one provides an audit trail in respect of body-worn footage.

If we go over the page please, PC Lee Lane addresses also an incident on 24 May. He in fact clarifies that he wasn't involved in that incident.

PC William Nash, Detective Superintendent Christopher Sullivan and Officer X all give evidence in respect of VC's attendance at MI5 Headquarters on 31 May 2021, and his subsequent referral to the Fixated Threat Assessment Centre.

Finally on this page we have PC Beatrice Sutton, who addresses the assault on PC Barnaby Pritchard on 3 September 2021.

If we go over the page, please, thank you. Deborah Lynch and Temporary Assistant Chief Constable Leona Scurr address matters relating to warrants, with Ms Lynch addressing her involvement in the outstanding warrant for VC, and the Temporary Assistant Chief Constable addressing the broader issue of how warrants were executed in that relevant period.

We then have PC James Russell-Taylor and PC Eliot Meynell, who both address the execution of a Section 135 Mental Health Act warrant for VC on 28 January 2022.

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they record video and not audio.

Nathan Shaw addresses the download of VC's mobile phone and explains his findings.

And finally on this page, Retired Detective Superintendent Hayley Williams provides evidence in respect of misconduct investigations carried out by Nottinghamshire Police.

We then move on to CPS witness statements and we have Janine McKinney, Andrew Baxter and Suzanne Llewellyn, who all address their involvement in the prosecution of VC.

Then, in terms of Nottinghamshire City Council, we have Kenneth Cromwell and Brian Bussey, who both address matters relating to CCTV operations.

On this page we have statements from the Investigatory Powers Tribunal and the IOPC. In terms of the IPT, we have a statement from the Head of the Secretariat, who explains why there was a delay in considering VC's case. Nicola Marfleet addresses the IOPC's analysis of PC Reynolds' car, covering issues such as timing and speed.

We then move on to two statements that don't fit necessarily within those previous categories, we have Andrew Clarke, who addresses issues of disclosure in his position as a Solicitor to Nottingham City Council, and

1 we have Stuart Croy, who provides further detail of his  
2 contact with VC as Head of Security of the University of  
3 Nottingham.

4 Then, on the final page, we have three statements  
5 from Amissão Calocane.

6 I will now hand over to Mr Carr, who will address  
7 healthcare evidence.

8 **THE CHAIR:** Yes, thank you.

9 **Statement by MR CARR**

10 **MR CARR:** Yes, Chair. As Mr Blake indicated, we now turn to  
11 those statements to be published that are relevant to  
12 the healthcare issues under consideration by the  
13 Inquiry.

14 If we can put the presentation up, please, and if we  
15 go to the second page, the first three statements are by  
16 employees or former employees of the Trust. Susan  
17 Elcock, she is Deputy Chief Executive and Medical  
18 Director at the Trust. She gave oral evidence to the  
19 Inquiry on 20 May 2026 when her first three statements  
20 were published. Her fourth statement, dated  
21 3 June 2026, details an audit of the EIP service at the  
22 Trust, which was carried out in May 2026.

23 Between January 2020 and her retirement in  
24 June 2023, Anne-Marie Newham MBE was employed at the  
25 Trust, first as an Executive Director of Nursing, then

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1 care records, and in particular the process when  
2 a patient transfers from Wales to England.

3 When VC moved to Nottingham and registered with the  
4 GP practice at the University of Nottingham Health  
5 Service, there was not a transfer of a full set of his  
6 GP records from Wales.

7 These two statements explain the process that was in  
8 place and the steps taken to transfer VC's information  
9 from Wales to England. Importantly, they reveal the  
10 lack of any process for the simple electronic transfer  
11 of records that occurs when a patient transfers between  
12 English practices.

13 Dr Jon Van Niekerk is a Consultant Psychiatrist and  
14 is a Group Clinical Director at Cygnet Healthcare. He  
15 provides a corporate statement on behalf of Cygnet  
16 setting out the care and treatment of VC during the  
17 portion of his third admission when he was detained at  
18 Cygnet Victoria House under the care of Dr Shoilekova,  
19 Responsible Clinician, who gave oral evidence to the  
20 Inquiry.

21 Charles Hamilton Massey is the Chief Executive and  
22 Registrar of the General Medical Council. He has  
23 provided a statement to the Inquiry on behalf of the GMC  
24 that explains its role as the Independent Regulator of  
25 Doctors, the Professional Standards of Conduct and

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1 Interim CEO, and then finally as Deputy CEO.

2 Kelly Simpson is a mental health nurse who from 2021  
3 was employed as a Service Manager for the EIP team. She  
4 line-managed Emma Robinson and describes her supervision  
5 of Ms Robinson and also Sharon Heath in her statement,  
6 including, at those supervisions, the issues raised by  
7 them. She also addresses the extent of the  
8 psychological and administrative support available to  
9 the EIP service.

10 Her statement sets out, by month, the caseloads of  
11 care coordinators Ms Claudia Birtles and Mr Gary Carter.

12 Next on the list is Daniel Whiting. He is  
13 a Clinical Associate Professor in Forensic Psychiatry at  
14 the University of Nottingham and an Honorary Consultant  
15 Forensic Psychiatrist at the Trust.

16 In his clinical practice, he uses the OxMIV tool and  
17 he has published research on it. He describes in his  
18 statement a presentation he gave to the Trust on the use  
19 of the OxMIV tool, and also assessing violence risk in  
20 adult psychiatry. That's a presentation he gave in  
21 November 2025.

22 Moving onto the next page, please. David Hanson, of  
23 Primary Care Support England, and Ms Nicola Phillips, of  
24 NHS Wales Shared Services Partnership, have both  
25 provided statements that address the transfer of primary

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1 Ethics it sets and expects all registrants to follow,  
2 and its role in education and training standards. The  
3 statement identifies, when commenting on multi-agency  
4 working, the complex and often poorly understood legal  
5 landscape for sharing confidential patient information.

6 Dr Michael Mulholland is a GP and the current  
7 Honorary Secretary at the Royal College of General  
8 Practitioners and he gives evidence on behalf of the  
9 College. He explains that the College is a membership  
10 body with over 54,000 GPs. It sets the educational  
11 standards, assessment framework, and curriculum for GPs,  
12 and provides support to its members.

13 Dr Mulholland's statement explains the role of  
14 primary care in mental health. He states that the  
15 management of psychosis and schizophrenia depends on  
16 a collaborative relationship between the specialist  
17 psychiatrists and primary care. Notably, he does  
18 recognise a role for primary care in the monitoring of  
19 mental health as well as physical health. He describes  
20 what should be the vital role by primary care in  
21 providing continued holistic care for patients  
22 discharged for non-engagement. That should involve  
23 maintaining contact, prescribing and monitoring, and  
24 offering carer and family support. He describes the  
25 role of the GP in such circumstances as the only safety

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1 net when a patient is discharged from secondary care due  
2 to non-engagement.

3 Professor Jonathan Benger CBE is the Chief Medical  
4 Officer, Deputy Chief Executive and Interim Director of  
5 the Centre for Guidelines at the National Institute for  
6 Health and Care Excellence.

7 His statement, on behalf of NICE, describes the  
8 organisation, its role in formulating guidelines as  
9 commissioned by NHS England, and its production of  
10 quality standards. The statement details the NICE  
11 guidance that was available to health and care  
12 practitioners at the time relevant to the Inquiry. It  
13 explains the Guidance on Psychosis and Schizophrenia in  
14 Adults, CG178, and the Quality Standard on Psychosis and  
15 Schizophrenia, QS80, as well as what that guidance  
16 provides as to managing and treating First Episode  
17 Psychosis, including managing those likely to disengage.  
18 He also deals with the guidance on sharing information.

19 We can go to the next page now, please.

20 Rebecca Hilsenrath KC is the CEO of the  
21 Parliamentary and Health Service Ombudsman. The Inquiry  
22 heard evidence this week from Sir Rob Behrens CBE. His  
23 tenure ended shortly after the publication of the 2024  
24 Report on Mental Health Discharge.

25 Ms Hilsenrath's statement details the work  
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1 clinical decision making, access to services, premature  
2 discharge, and unclear referral pathways.

3 The second statement from Ms Taylor-Hall explains  
4 the methodology that led to its reports and  
5 recommendations.

6 Dr Crawford Fernie is the Chair of the UK Caldicott  
7 Guardian Council. His statement explains the Caldicott  
8 Principles. Those are the good practice guidelines on  
9 the use of confidential information, and it explains the  
10 role of the council in providing support, resources and  
11 networking for Caldicott Guardians and those fulfilling  
12 the Caldicott function.

13 The statement sets out his perspective as to the  
14 circumstances in which it will be in the public interest  
15 to disclose confidential patient information without  
16 patient consent.

17 Moving now to page 4, please, the final page.

18 Stephen McGowan is a mental health nurse and is  
19 a clinical advisor to the Royal College of  
20 Psychiatrists's National Clinical Audit of Psychosis.  
21 He has also been Chair of the Early Intervention in  
22 Psychosis Network.

23 His first statement, which described audit data on  
24 the Nottinghamshire Healthcare Foundation Trust's EIP  
25 teams, has already been published.

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1 undertaken following Sir Rob's departure addressing  
2 engagement with the Department of Health and Social  
3 Care, the CQC and others.

4 The statement also explains the additional and  
5 compounding harm that occurs when NHS organisations fail  
6 to learn from mistakes, and the work done in that area  
7 by the Ombudsman with its 2023 report on broken trust.

8 There are two statements from Sabrina Taylor-Hall.  
9 She is the Chief Executive at Healthwatch Nottingham and  
10 Nottinghamshire. Healthwatch is statutory bodies  
11 pursuant to the Health and Social Care Act 2012, they  
12 are funded by the Department of Health and Social Care.  
13 Their role is to obtain the views of individuals about  
14 their needs for, and experiences of, local health and  
15 social care services, and to convey those views to  
16 commissioners, regulators, and healthcare providers.  
17 They have the power to enter and view health and social  
18 care services.

19 The Nottingham Healthwatch published a report in  
20 2024 on the experiences of people living with severe  
21 mental illness, which the first statement explains  
22 identified systemic issues with access, referral  
23 pathways, crisis provision, and communication. The  
24 statement describes the concerns that have been raised  
25 as to the quality of mental health treatment, poor

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1 His second statement builds on the first and sets  
2 out the significance of working with patients at  
3 an early and emergent stage of their illness. Reducing  
4 the duration of untreated psychosis is, he states, a key  
5 action for improving prognosis and reducing risk to self  
6 and others.

7 He also, in respect of his recommendation for  
8 national and regional systems to support improvement in  
9 EIP teams, observes that regional EIP support and  
10 improvement programmes have been discontinued. This  
11 discontinuation has occurred at a time when one third of  
12 EIP teams in the country are assessed as requiring  
13 improvement. The result of that is that the  
14 responsibility for supporting the delivery of EIP  
15 services will rest with Integrated Care Boards.  
16 Mr McGowan raises concern as to whether ICBs are  
17 properly equipped and resourced to fulfil that role.

18 Dr Sarah Hughes is the CEO of the mental health  
19 charity MIND. Her statement on behalf of that charity  
20 sets out MIND's institutional position on a number of  
21 issues of relevance to the Inquiry. It addresses  
22 difficulties for mental health patients accessing  
23 services, gaps in community mental health care, and the  
24 management of the risk of violence.

25 Marjorie Wallace CBE is Chief Executive of the

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1 mental health charity SANE. Her statement sets out the  
2 work of SANE and describes the challenges mental health  
3 patients may have accessing services and finding crisis  
4 support, the shortage of mental health beds and the  
5 implications of insufficient beds, and the challenges  
6 for Community Mental Health Teams having to care for  
7 people who either are not admitted to hospital or who  
8 are discharged too early.

9 Community care is, she states, letting down people  
10 with serious and enduring mental illness. Better  
11 strategies are required to deal with disengagement, she  
12 suggests by relying on rigorous assessment rather than  
13 patient choice.

14 In respect of information sharing, she states that  
15 there's an unacceptable failure to listen to the  
16 concerns and warnings of relatives, and too narrow and  
17 rigid an interpretation of confidentiality by  
18 professionals which leaves families isolated.

19 Nicola Sanderson is the Director of Nursing and  
20 Professions at the Leeds and York Partnership NHS  
21 Foundation Trust. That is the same Trust that employs  
22 Consultant Psychiatrist Dr Nuwan Dissanayaka, who gave  
23 oral evidence to the Inquiry.

24 Ms Sanderson's statement expands on his evidence in  
25 respect of the approach taken to information sharing at

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1 incorporation in April 2022 until its dissolution in  
2 2025.

3 She led the independent investigation into the care  
4 and treatment of VC and her statement addresses the  
5 appointment of Theemis by NHS England, the members of  
6 the investigation team and the methodology they adopted.

7 The presentation can come down now.

8 Chair, there are a number of matters arising from  
9 the oral evidence that your legal team are following up.  
10 Where witnesses indicated in their oral evidence that  
11 they would provide further information to the Inquiry,  
12 steps will be taken to ensure that that's done. That  
13 follow-up work is likely to result in further requests  
14 for evidence being made.

15 For instance, in light of the oral evidence this  
16 week from Dr Vidyah Adamson, Rule 9 requests for  
17 evidence will be sent to clinical directors at the  
18 Trust. They will be asked to address the concerns and  
19 requests raised to them, if any, in respect of EIP  
20 resourcing, psychologists for the service, and the  
21 inability of the service to deliver, and what, if  
22 anything, the Clinical Directors did in light of the  
23 escalation of such concerns.

24 Further statements that are received in respect of  
25 those requests and any others will, in due course, be

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1 the Trust. It addresses in particular its approach to  
2 information sharing, highlighting the agreement with the  
3 local police force, and setting out the guidance and  
4 templates available to practitioners at that Trust.

5 Dr Peter Carter OBE is an independent healthcare  
6 consultant with a background in psychiatric nursing.  
7 His statement addresses the key role of a nurse in  
8 assessing risk, given that that is the discipline that  
9 has the most contact with patients.

10 He identifies that the key to treating those with  
11 severe mental illness successfully is ensuring  
12 compliance with medication. He identifies how  
13 non-concordance can be identified, which can be with  
14 regular drug testing, with some medications, or  
15 a deterioration in mental state with others.

16 He notes that for those with psychotic illness  
17 a lack of insight is a common feature, and in those  
18 circumstances the decision may be taken away from the  
19 patient, such that they receive medication without  
20 consent, given, as he states, the very fact that they  
21 are suffering from a psychotic illness may result in  
22 them lacking the capacity to make a rational decision  
23 about their care.

24 Finally, Amber Sargent is a healthcare consultant  
25 and was a director at Theemis Consulting from its

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1 served on Core Participants in the usual manner.

2 **THE CHAIR:** Yes, thank you, Mr Carr.

3 **MR CARR:** Thank you.

4 **THE CHAIR:** So although we're having our last oral hearing  
5 today, the work of catching up on any outstanding  
6 matters is going to continue.

7 **MR CARR:** It will continue in earnest, yes.

8 **THE CHAIR:** Thank you.

9 **MR CARR:** May I suggest a short five-minute break before the  
10 final witness is called.

11 **THE CHAIR:** Yes, we'll just take a break now until 10.35,  
12 thank you.

13 **(10.22 am)**

**(A short break)**

14 **(10.35 am)**

15 **THE CHAIR:** Yes, Ms Langdale.

16 **MS LANGDALE:** May I call Claire Waxman OBE, please.

**CLAIRE WAXMAN (affirmed)**

**Questioned by MS LANGDALE**

20 **MS LANGDALE:** You are the Victims' Commissioner for England  
21 and Wales since January 2026 and you have prepared  
22 a statement for the Inquiry dated 19 May 2026.

23 Can you confirm, subject to one small amendment that  
24 you require making at paragraph 56, where it should  
25 refer to the Victims and Courts Act rather than the

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1 Victims and Prisoners Act, subject to that amendment,  
2 are the statements true and accurate as far as you're  
3 concerned?

4 A. Yes, that's correct.

5 Q. Can you tell us something, please, about your role as  
6 Victims' Commissioner and how you discharged the role?

7 A. So as Victims' Commissioner I am responsible for  
8 championing the voices and interests of victims and  
9 survivors and witnesses. I am -- you need to extract  
10 those issues and take that to government and criminal  
11 justice agencies as well, to encourage good practice  
12 across those criminal justice agencies, and to review  
13 the Victims' Code.

14 That role has been strengthened in subsequent  
15 legislations in the Victims and Prisoners Act, being  
16 able to monitor that Victims' Code, that's very much  
17 reliant on criminal justice agency sharing data with me  
18 so that I can monitor their Code compliance, and then  
19 it's being strengthened even further through the Victims  
20 and Courts Act, there will be a duty on me to provide  
21 a report on Code compliance.

22 Q. Can we have page 3 of your statement on screen, so  
23 that's WITN0455001, page 3. Do you set out, insofar as  
24 relevant to this Inquiry, that you've published or that  
25 your office has published multiple reports examining

1 So it's really important that the information given  
2 is done in a timely way, a sensitive way, and  
3 a trauma-informed way.

4 Q. And is individual specific?

5 A. Absolutely, yeah.

6 Q. And sometimes reasonable adjustments are required?

7 A. Absolutely, depending on the needs of those victims, and  
8 that's really important to do proper and robust needs  
9 assessments on victims and families who are going  
10 through the criminal justice system. Again, that's  
11 a right under the Victims' Code, but it has not been  
12 delivered consistently and certainly not been delivered  
13 well.

14 Q. Certainly in terms of bereaved families, it should go  
15 without saying the trauma that's involved in that and  
16 the special care that's required.

17 A. I mean, it's certainly a very different case with  
18 bereaved families. I have met many, many bereaved  
19 families over the years and the Family Liaison Officer  
20 will say, "Well, I've shared the information of what to  
21 expect through the criminal justice system" and families  
22 will say, "Well, I don't recall being given that  
23 information. I don't understand that information."

24 And often it's given very early on in the process  
25 where a family is dealing with the shock and trauma and

1 bereaved families' experiences following homicide,  
2 ability and impact of advocacy services and the position  
3 of victims in cases involving mentally disordered  
4 offenders.

5 We are going to come to specific guidance later, but  
6 generically what have you identified in respect of the  
7 police?

8 A. So communication issues come up again and again for  
9 victims and families navigating our criminal justice  
10 system. It doesn't just start and stop with the police;  
11 it goes through the entire criminal justice process.

12 But in relation to the police, what does come up is  
13 real difficulties in accessing information around the  
14 investigation, getting regular updates, getting  
15 information sort of all at once and then nothing for  
16 months. Under the Victims' Code they should be  
17 regularly updating victims on the process of the  
18 investigation, but that information is often not  
19 forthcoming, the victims and families have to really  
20 push agencies to deliver the information that they need,  
21 and deliver it in a way that actually they understand,  
22 and that's really important, because often it's seen as  
23 a tick-box exercise. So the police will say, "Well, we  
24 did give the victim the information, but the victim  
25 hasn't quite understood what that information is."

1 grief of what's happened, and then they're being given  
2 so much information to absorb, often written, through  
3 a booklet, or even they're told verbally, and we really  
4 have to change the way we give that information to  
5 families.

6 There is a neurobiological impact of trauma on  
7 memory and recall, some people in the criminal justice  
8 system are starting to understand and starting to train  
9 and reflect in their practices, but it hasn't gone far  
10 enough.

11 We need to provide information in, you know, a way  
12 that families going through trauma and grief can  
13 process it.

14 Q. And comprehend?

15 A. And comprehend.

16 Q. Plain language.

17 A. Absolutely. Plain, simple language done in a way that  
18 they fully understand, and to check that they  
19 understand, and at the right time as well, and I think  
20 that's really important. I've come across families have  
21 been forced to sign, you know, things in relation to the  
22 Human Tissue Act at a time when they just lost a loved  
23 one and they don't recall signing it, and it's only  
24 months down the line do they know what they actually  
25 signed. You know, we can't be putting that on victims

1 at times when they are really processing, trying to  
2 process, the shock and grief and the trauma they're  
3 going through.

4 **Q.** You set out here generic themes for the Crown  
5 Prosecution Service as well. Can you enlarge on those  
6 for us, please?

7 **A.** Yes, as I've talked about, there is an ongoing theme  
8 here, the victims and families will report in the  
9 criminal justice system, as I've talked about it's the  
10 lack of communication and that lack of information, and  
11 that sort of follows throughout and that's a theme  
12 within the Crown Prosecution Service.

13 Many victims and families will say they find the CPS  
14 a faceless organisation. Often the information is being  
15 given to them via the police or a Family Liaison  
16 Officer. And I would say very difficult information,  
17 sometimes, you know, legal information, the reliance on  
18 that Family Liaison Officer or the officer, police  
19 officer, to share that with a victim or bereaved family  
20 member. I think it's much more important the CPS take  
21 an active role in that, especially around where there  
22 are issues around charging decisions, if there are plea  
23 bargainings and plea discussions, families and victims  
24 really need to understand that process and what's  
25 happening and why.

21

1 challenge some of the decisions.

2 **Q.** If we just have your statement off for a moment and  
3 RLIT0000057, page 1, the German Code. You say families  
4 sometimes feel at the outset, if you like, that they  
5 can't challenge decisions; is that fair?

6 **A.** Yes.

7 **Q.** We see here, in the German system, page 1:

8 "Whoever is aggrieved by an unlawful act ..."

9 And we can go over to page 2:

10 "... may join a public prosecution or an application  
11 in [prevention of] detentions proceedings as private  
12 accessory prosecutor."

13 Some countries clearly are considering victims  
14 having a right to play a more active role, aren't they?  
15 And if we look at the guidance, RLIT0000059, this is  
16 a Guide for Victims prepared by the German Federal  
17 Ministry of Justice. It's page 4 and 5, please.

18 The document is RLIT0000059, please.

19 If we can have 4 and 5 alongside each other. We see  
20 in the preface:

21 "For far too long, German criminal proceedings law  
22 focused only on offenders. Victims were primarily  
23 evidence for solving the crime and no more than that.  
24 Fortunately, that is a thing of the past."

25 We see on the second page at the top:

23

1 **Q.** How do you see the role of an independent prosecutor  
2 such as the CPS, and victims, and what their  
3 communications need to be with victims?

4 **A.** So they -- the CPS have a Bereaved Family Scheme and  
5 within that scheme they are meant to meet bereaved  
6 families at critical points of the process to explain  
7 it. What I'm told by families is that's quite  
8 inconsistent, that service, it's not always delivered,  
9 and if it is, it isn't delivered well. They don't feel  
10 they get the meetings at the right time or they're  
11 getting the right information and explanation.

12 **Q.** Do you have any sense who they are meeting?

13 **A.** So they will often meet with the prosecutor --

14 **Q.** The counsel, prosecution counsel or the CPS lawyers or a  
15 combination?

16 **A.** It depends -- it's a combination. And I think that's an  
17 issue as well because often they're not meeting the same  
18 person because it might be someone different when they  
19 get to court, obviously. So it's about understanding  
20 who they're meeting and what the information is that  
21 they're going to get, and I think a lot of the time  
22 families can feel quite dissatisfied with those  
23 meetings. It's a sort of a one-way where information is  
24 being given to them and they don't feel they really have  
25 much voice and representation in those meetings to

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1 "In Germany, we have not only implemented the  
2 European requirements, but have gone far beyond them.  
3 Our provisions on psychosocial support services are  
4 a milestone for children and young people who have  
5 become victims of serious violent and sexual offences.  
6 They now have a legal right to free professional support  
7 services throughout the entire proceedings. But the  
8 court may also assign psychosocial support services to  
9 adults in certain cases."

10 Then if we can go, please, to page 22. We see:

11 "Legal counsel

12 "If you become the victim of a crime and are also  
13 required to give evidence ..."

14 We see further down:

15 "In special cases you may even be provided with  
16 a lawyer at public expense for the duration of the  
17 hearing."

18 If we can go to page 44, please.

19 "Private accessory prosecutions".

20 "This also [we see at the bottom right] applies to  
21 other offences, such as stalking or violation of court  
22 orders in cases of domestic violence. As the victim of  
23 any other offence, you are also authorised to join  
24 a prosecution as a private accessory prosecutor if this  
25 appears to be necessary for special reasons to safeguard

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1 your interests, particularly if you are suffering from  
2 the serious effects of the crime. You are also entitled  
3 to be a private accessory prosecutor if the crime has  
4 result in the death of a close relative."

5 Then if we look at page 46, removing the burden on  
6 victims or bereaved families in those circumstances. We  
7 see:

8 "To avoid misunderstandings: if you wish to become  
9 a private accessory prosecutor, you are not required to  
10 submit your own bill of indictment. That remains the  
11 job of the public prosecutor. As a private accessory  
12 prosecutor, you do not even have to be present in court  
13 yourself. Nor do you have to make applications ... But  
14 you are allowed to do so, just as you are allowed to  
15 submit your own statements as a private accessory  
16 prosecutor.

17 "Private accessory prosecutors are always notified  
18 of the court's decisions. You will ... receive a copy  
19 of the judgment."

20 And we also see there are some appellate remedies  
21 offered.

22 Have you ever considered whether victims' rights to  
23 support and information should go further than that in  
24 the context of the criminal justice system?

25 **A.** Absolutely. I mean the big issue that victims and  
25

1 model, but that's the start of something a little bit  
2 different. That's when third-party material has been  
3 requested from the rape survivors. They can request  
4 independent legal support, they can advise them through  
5 that process, which is really critical for them in  
6 relation to their rights to privacy through the process.

7 **Q.** So through the advocacy support they can get legal  
8 support, independent legal support as well?

9 **A.** It will be separate. It will be legal independent  
10 support will now be given to rape victims -- well,  
11 firstly they've got to know about it and then obviously  
12 be able to access it -- to help them understand the  
13 information that they might be being requested of them,  
14 so the third-party material, be it medical records,  
15 therapy records, Social Services records, even phone  
16 records. There is that sort of check and balance for  
17 the legal independent support, advising them whether  
18 they should be agreeing to have that disclosed as part  
19 of the court proceedings.

20 So there's been some progress, but I would very much  
21 welcome us moving even further. I think we have a real  
22 challenge in our criminal justice system. Part of the  
23 problem is the whole system is structured around the  
24 rights of the defendant and the rights of an offender.  
25 And the role that I have always tried to play over the  
27

1 families in this country face is they are very much  
2 treated as bystanders in our criminal justice system,  
3 and that is the ongoing issue for them that comes up  
4 time and time again.

5 Much has been done to try and strengthen their  
6 rights through various legislations over the years and  
7 through the Victims' Code, but I'm afraid to say it very  
8 much sits on paper and it doesn't really translate into  
9 a meaningful change on the ground for so many victims  
10 and families.

11 And so we hear the same issues come up again and  
12 again. The very basics aren't being provided  
13 consistently and well, around information communication,  
14 even knowing about the Victims' Code, even knowing about  
15 referral and access to support services. I would call  
16 that the very basics we're not delivering.

17 But the big issue for so many victims, and  
18 especially for bereaved families, is that lack of voice  
19 and representation throughout the process.

20 Some years ago, I very much pushed and championed  
21 the need for legal independent support in rape cases,  
22 and we have made progress on that and the government has  
23 funded I think 6 million, I believe, into legal  
24 independent representation for rape victims.

25 Now that's not to come into court, like the German  
28

1 years is about how do we balance that system and look at  
2 parity of rights, because I believe victims and families  
3 should have equal rights and equal status in the  
4 criminal justice process.

5 I mean the German model is an interesting one,  
6 obviously their system is different and I haven't looked  
7 at it in great detail. I work quite closely with my  
8 equivalent in Germany, so have spoken to him about the  
9 differences. It is obviously more inquisitorial and  
10 obviously there are some adversarial elements to their  
11 justice process, but I believe, from conversations only  
12 with my counterpart in Germany, the Victims'  
13 Commissioner Roland Weber, he says it works very well  
14 for bereaved families and there's quite a huge uptake  
15 for them coming in participating. Because it gives them  
16 much more transparency and openness around what's  
17 actually happening, they can put questions through their  
18 own counsel and representation.

19 **Q.** And that's an expectation under the Code or the practice  
20 guide, that they can do that. It's not a thorn in the  
21 side; it's a right and an entitlement.

22 **A.** It's a right and entitlement, and it's very well  
23 understood and accepted as part of their criminal  
24 justice system.

25 It would be something I would very much welcome and  
28

1 support our system going in a similar way, but of course  
2 I appreciate there might be some pushback. There often  
3 is when we want to try and reform our criminal justice  
4 system to become much more victim-centric.

5 **Q.** Can we have your statement page 4, please, so  
6 WITN0455001. You touched upon the role of Family  
7 Liaison Officers earlier, and you set out here their  
8 role at paragraph 16, and you also set out potentially  
9 the various conflicting elements of their role.

10 Would you like to expand upon that, please, what  
11 they're required to do, and given that they're from  
12 within the police, where that might create tension?

13 **A.** So Family Liaison Officers are designed to be that sort  
14 of that single point of contact for those families.  
15 However, they are part of policing. So they're not  
16 independent, they're part of an investigation team.  
17 They're to provide obviously the updates on developments  
18 through the investigation and to gather that information  
19 from families, and to sort of guide families through the  
20 process as well, and of course signpost them to support.

21 But I think there is a real misunderstanding still  
22 about their role, and the issue I see is that we see  
23 differentiation between FLOs. So I think much more  
24 needs to be done to really clarify their role and remit.  
25 I see some FLOs go above and beyond what they meant to

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1 are -- like I said earlier, you are dealing with people  
2 who are processing grief and trauma and so there is lots  
3 of evidence to demonstrate, to show, why families can't  
4 take in information and can misunderstand information,  
5 through no fault of their own. It is because they are  
6 processing their grief and trauma and that impacts their  
7 memory and recall.

8 So it's really important that when people are  
9 communicating and a Family Liaison Officer is  
10 communicating, they understand that, they understand the  
11 needs of the family and they communicate in a way that  
12 is clear and that is sensitive, and that is -- when  
13 I say "trauma informed", it's understanding what they  
14 are going through, what they are trying to process.  
15 It's putting compassion and empathy into it.

16 **Q.** If we have, please, page 5, you set out in principle how  
17 FLOs can best perform their duties. Again, can you  
18 expand on that, please?

19 **A.** Yeah, so again, it's just talking about that timely,  
20 sensitive and proactive and regular communication,  
21 really, really important for families. They need that.  
22 They need that for reassurance. They need to know that  
23 things are happening and moving. Clear explanations.  
24 Where are we in the process? Why isn't something  
25 happening? Just constantly updating them, when it is

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1 be doing because they know that the families need more.  
2 But that's not necessarily their role. And families  
3 become quite frustrated because of that lack of  
4 independence, because they're still part of policing the  
5 investigation, and families often want that independent  
6 advocate that is really working on behalf of the family  
7 to push forward their needs and their requirements. So  
8 I think there's -- where there's a bit of rub and  
9 tension with that role.

10 I do pick up issues quite often with Family Liaison  
11 Officers. Often there's delays in allocating them.  
12 We've heard about poor performance from some FLOs.  
13 Some, as I said, go above and beyond, but some just  
14 don't seem to have been trained well enough to deal with  
15 a grieving family. Some of the language we've picked up  
16 isn't very sensitive or trauma-informed, and actually  
17 has caused more upset to families.

18 There is a very -- you know, their availability.  
19 Sometimes we hear of FLOs starting and then being taken  
20 off and different FLOs being appointed to a family, and  
21 that's very disruptive. You need that continuity.  
22 I think that's very important.

23 **Q.** When you say "trauma informed", would you like to  
24 explain what you mean by that?

25 **A.** Yes, of course. So it's about understanding that you

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1 necessary, in a way that they can understand and  
2 process.

3 And as I said, maintaining that continuity of  
4 contact, we have had cases where I've met with families  
5 where FLOs have been taken off after a few months due to  
6 allocation issues and other FLOs have been assigned, and  
7 I think that's terrible practice because it's really  
8 important the FLO builds a rapport with the family.

9 Equally, some families will comment that they  
10 haven't built a rapport with that FLO, and they want the  
11 FLO changed, and we need to understand that and listen  
12 to the needs of the families. If they say, "actually  
13 this FLO isn't right for our family, we want somebody  
14 else", that we respond quickly and resolve that.

15 **Q.** Page 6, please, paragraph 24, you set out the:

16 "... dual role can create challenges, for instance  
17 when information cannot be shared due to evidential or  
18 legal constraints; where communication is shaped by  
19 investigative considerations; or where families accept  
20 the FLO to advocate on their behalf in ways that fall  
21 outside their policing role."

22 You say it would be of benefit to define the role,  
23 and you can have, please, page 7 on the screen as well;  
24 how would you see it better defined?

25 **A.** So I think it needs to set out the parameters a lot

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1 clearer. And I think it does. There is a leaflet that  
2 is given to families, but I think it's to explain it as  
3 well to families that there will be information, whilst  
4 they're there to keep them updated, there could well be  
5 information that they are unable to share due to the  
6 investigation. So it's just making sure families,  
7 because often we hear from -- I hear from families and  
8 that becomes quite an issue for them "Why aren't we  
9 being told? Why are we being kept in the dark?"

10 **Q.** And they are rarely witnesses, are they, bereaved  
11 families, they won't have been there particularly in the  
12 cohort we're looking at. So if they're not witnesses,  
13 is that even more difficult to understand why  
14 information can't be shared?

15 **A.** Absolutely because they're not part, they're not going  
16 to be going into court to give evidence, they're  
17 a bereaved family and often there's this issue of "why  
18 can't we be told?" And again, that's for the role to be  
19 better defined and explained, and whether we are, you  
20 know, whether there is still information that can be  
21 shared with families. Do we need to push it a little  
22 bit further? Often there is this reticent and sort of  
23 defensive position that families will say -- will  
24 complain to me about.

25 **Q.** The Inquiry has been looking at the requirement or need

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1 So for me, the big vision and ambition that I really  
2 want for victims and families is that we create  
3 something -- and I've talked about this in my  
4 recommendations -- which I've called a Victim Care Hub,  
5 but it's that single point of contact where victims and  
6 families are entering that criminal justice system and  
7 that single point of contact would be responsible for  
8 victims and families only. So they're not part of  
9 policing, they're not part of the Crown Prosecution  
10 Service or a VLO in probation, they are there to ensure  
11 that the rights and entitlements under the Victims' Code  
12 are delivered to victims and families at the right time  
13 and are delivered and delivered well, that they are able  
14 to get all the information and support they need to  
15 navigate that justice process.

16 That's not to replicate what we have in advocates  
17 because we do have some advocates who will be coming  
18 into the system to support victims in court, but many of  
19 the advocates I talk to, IDVAs, so the Independent  
20 Domestic Violence Advisers, or IDVAs, they also struggle  
21 to get the information from the criminal justice system  
22 to give to their victims that they're supporting. So  
23 for me it's about looking at a different way in which,  
24 when victims are coming into the justice process, we  
25 have something that is front facing that deals with

35

1 for independent support alongside FLOs. What is your  
2 evidence around that? Do you think that will be  
3 beneficial to those affected by homicide?

4 **A.** Yes, so this is where -- the criminal justice system for  
5 victims and families is so difficult to navigate.

6 I think it's difficult for all of us. It's so  
7 fragmented, we don't have one system although it's  
8 a criminal justice system. Every agency works in silo  
9 and we expect victims and we expect bereaved families to  
10 navigate that very complex system.

11 And whilst with bereaved families we do have the FLO  
12 role there to help them to try and navigate, I believe  
13 there are a number of FLOs who also aren't familiar with  
14 all the different parts of our criminal justice system,  
15 so aren't necessarily well equipped or well trained to  
16 support families through that process.

17 So for me it's about the role of advocates and we do  
18 have advocates for other crime types. We have it for  
19 domestic abuse, we have it for rape and sexual violence,  
20 we have it sometimes for stalking. My predecessor, the  
21 late Baroness Newlove, did a report on it going and  
22 above and beyond and it talked about that patchwork  
23 provision around advocates for different cohorts of  
24 victims.

25 And again, there are different types of advocates.

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1 victims, and the whole wiring of our criminal justice  
2 system sits behind this hub or centre, or whatever it  
3 is, to help them through it, and if they need extra  
4 advocacy, because we have some wonderful advocates, so  
5 in domestic abuse they're looking at how do we keep that  
6 victim safe, so they'll be looking at --

7 **Q.** Support services --

8 **A.** -- support services around housing, even around health;  
9 you know, making sure there's safe accommodation; needs  
10 around children.

11 So it goes much wider than the criminal justice  
12 system. So there is -- at the moment, it's very --  
13 there's just a -- it's a mess, it's so fragmented, and  
14 that is the big problem for victims and families. We've  
15 got different parts of the criminal justice system  
16 trying to deliver little bits of the process, but  
17 there's no end-to-end service that's really gripping the  
18 journey for victims and families.

19 **Q.** For bereaved families in the circumstances we're  
20 examining here, their engagement after these horrific  
21 events won't just be with the criminal justice system.  
22 We've seen it's with the NHS, it's within other  
23 services, and communications, and it's clear from their  
24 evidence that they've benefited a lot from the help of  
25 their solicitor knowing where, how, who to address, the

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1 issues they were concerned about, such as unauthorised  
2 access. Things that go outside the criminal justice  
3 system and advocacy targeted just to the criminal  
4 justice system.

5 Do you think that suggests that there is wisdom, in  
6 a category of cases such as homicides, for solicitor  
7 support to signpost, to direct, so that messages aren't  
8 lost, key messages, and when you need to approach some  
9 organisations like the NHS with some knowledge about how  
10 you might do that?

11 **A.** There's an absolute need, because there's a gap here in  
12 support. So we've talked about obviously there's an  
13 issue with the criminal justice system; it doesn't  
14 function well enough for the needs of victims and  
15 certainly for the needs of bereaved families.

16 What you're talking about is wider because of course  
17 their journey goes much wider than the criminal justice  
18 system. Who is going to provide them advocacy?

19 So as I said, similar for domestic abuse, there are  
20 advocates who are providing the domestic abuse victim  
21 with support, not legal support but support around  
22 navigating issues with housing, maybe Family Court,  
23 issues around child contact examples.

24 So there is obviously a gap in provision for  
25 families here, whether that is advocates or legal

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1 submissions on conditions of discharge and on no other  
2 matter. Many find this patronising and offensive.

3 "I understand the tribunal judiciary actively fought  
4 the introduction of victim impact statements to  
5 tribunals under the Victims and Prisoners Bill and was  
6 successful in limiting such statements to just terms and  
7 conditions.

8 "Tribunals do not seem to have any understanding or  
9 received any training in the needs of victims."

10 Do you agree that Mental Health Tribunals lack  
11 openness and transparency with regard to victims of  
12 serious violence previously perpetrated by patients?

13 **A.** Yes. So it is, it's come up again and again. I've  
14 worked with Julian -- I mean I think over 15 years now,  
15 so I'm fully aware of the issues of what he's gone  
16 through and all the families that he's supported over  
17 the years. With Mental Health Tribunals, my predecessor  
18 also did a report back in 2018 --

19 **Q.** She did.

20 **A.** -- interviewing I think nine bereaved families, and so  
21 it obviously brought to light a lot of the issues that  
22 Julian is talking about here. And we've tried to make  
23 some legislative change. So recognising that the Mental  
24 Health Tribunals were very closed, there's a lack of  
25 transparency and openness, and that causes -- actually

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1 advocates or some legal representation I think should  
2 absolutely be explored, because I don't think the onus  
3 should be on families going through the worst things  
4 imaginable, dealing with grief and trauma, to try and  
5 navigate, one, our criminal justice system, and then all  
6 the other areas as well without proper support.

7 **Q.** That can come off the screen, please, and can we have  
8 WITN0258001, pages 32 and 33, and this is an extract  
9 from Mr Hendy's statement, and reference to Mental  
10 Health Tribunals. Can we have a look at it, please.

11 Page 32, and page 33, please. Mr Hendy says from  
12 paragraph 179:

13 "In my experience unlike the Parole Board, Mental  
14 Health Tribunals have been extremely reluctant to  
15 disclose any information to victims, despite having wide  
16 discretionary powers.

17 "I was shocked to learn victims are not considered  
18 to be 'interested parties' in a legal process about the  
19 release of their loved ones killers. Affected families  
20 are not allowed to appeal any Tribunal decision as they  
21 are not interested parties.

22 "The decision to release previously dangerous  
23 patients are matters of serious public and not strictly  
24 private concern.

25 "Victims currently are only allowed to make

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1 compounds the harm and trauma for families.

2 A big issue is just, you know, why can't we have  
3 that information? Of course the response is always  
4 around patient confidentiality. And what we try to  
5 push, I did some recent amendments to the Victims and  
6 Courts Bill, was to try to put into place something that  
7 made the Tribunal actually think about yes, patient  
8 confidentiality, but we have to balance it with victim  
9 safety, public safety, and victim wellbeing.  
10 Unfortunately, we were not successful; government  
11 rejected those amendments.

12 There has been some commitment by government to  
13 address some of that through potential guidance and  
14 training, but I don't believe it'll go far enough and  
15 I think this is still an area where we need to see more  
16 openness and transparency for victims and families, and  
17 not always, you know, falling on the position of: due to  
18 patient confidentiality, we cannot share it.

19 **Q.** I mean, they're clearly interested parties at a human  
20 level, aren't they?

21 **A.** Absolutely they are. And I think, you know, it's  
22 about -- I mean, recognising the actual harm being done  
23 to the families when you deny that information, because  
24 there is -- it does compound harm and trauma, and  
25 prevents any ability for them to -- I mean, families are

40

1 never going to, sadly, really cope and recover, but you  
 2 want them to find some peace, and to not be involved in  
 3 all these processes for years on end, and I feel very  
 4 sad for them that they cannot get the information that  
 5 I think they deserve for their own wellbeing and for  
 6 their own safety, and for public safety as well.

7 So I think this is an area government still need to  
 8 address. We have made some progress. So we have got  
 9 now Victim Impact Statements, Victim Personal Statements  
 10 in Mental Health Tribunals. That came in under the  
 11 Victims and Prisoners Act.

12 I completely agree with Mr Hendy's evidence here,  
 13 there is a reluctance still with the Tribunal's  
 14 understanding the role of the Victim Impact Statement  
 15 and why it's so necessary for families to have that  
 16 submitted and to read it out as well. From my  
 17 understanding from what Mr Hendy has shared with me over  
 18 the many months is that actually I think most families  
 19 are being rejected when asked to read their Victim  
 20 Personal Statement out.

21 So there's certainly a lack of understanding from  
 22 the Mental Health Tribunal perspective of the role of  
 23 the victim and family and why these things are so  
 24 needed.

25 Q. As you say, Baroness Newlove prepared a report on  
 41

1 page 1. Setting out, as you have helpfully done  
 2 already, at paragraph 4:  
 3 "... hospital managers must provide the information  
 4 only when they decide it is 'appropriate to do so'.  
 5 This risks further embedding a culture where an offender  
 6 patient's privacy is prioritised over the needs of  
 7 victims. Managers are not required to give reasons for  
 8 their decisions to withhold information, nor are victims  
 9 able to challenge their decisions. The Bill is an  
 10 opportunity to address this procedural unfairness ..."

11 And we see "The proposal" is:

12 "Ensuring hospital managers take a balanced approach  
 13 when deciding whether to disclose information [on]  
 14 offenders by placing a statutory requirement on them to  
 15 consider the safety and wellbeing of victims.

16 "When a hospital manager has decided not to disclose  
 17 part or all of the information requested ... placing  
 18 a requirement on them to provide written reasons to the  
 19 victim for that decision ..."

20 So you would still agree that that would be positive  
 21 steps forward?

22 A. Yes. I mean those were the amendments that I put  
 23 forward and supported and put for, so was very  
 24 disappointed when government rejected them.

25 Q. Understood. Can we have a look, please, at, "Going  
 43

1 "Entitlements and experiences of victims of mentally  
 2 disordered offenders". If we can have please,  
 3 WITN0455005. Page 2, please. We see paragraph 3:  
 4 "... mentally disordered offenders do not have the  
 5 same entitlements under the Victim Code. Neither do  
 6 they receive the same level of support and assistance.  
 7 This seeming inequality in treatment prompted me to  
 8 investigate this further ... to assess the impact this  
 9 had on the victims concerned."

10 She said:

11 "I'm also indebted to Hundredfamilies, a charity  
 12 which supports victims of homicide committed by mentally  
 13 disordered offenders. It has hugely assisted us by  
 14 sharing the experience of its membership and enabling us  
 15 to contact victims.

16 "The general message I take ... is ... they feel  
 17 isolated and unsupported in a system that can appear to  
 18 pay little regard to their needs or support ...

19 "[...]

20 "Victims of mentally disordered offenders are not  
 21 entitled to submit a victim personal statement ... when  
 22 the offender's case is reviewed ... Neither do they  
 23 have an entitlement to attend the Tribunal hearing and  
 24 present their statement in person."

25 If we can have a look, please, at WITN0455006,  
 42

1 above and beyond: Mapping the provision and impact of  
 2 Victim Advocacy in the Criminal Justice System",  
 3 INQY0000028, page 1.

4 March 2024. Would you like to tell us what this is  
 5 about? I'm going to take you to specific parts.

6 A. Yes. So I mean, again, this was done by my predecessor  
 7 so before my time in this role. And it was to look at,  
 8 as I said, sort of the -- this patchwork provision of  
 9 advocates for different victims. So looking at, you  
 10 know, talking to different PCCs, understanding how they  
 11 commission the service, and also looking at advocates  
 12 and talking to them about what they provide and can't  
 13 provide, and some of the issues they face when trying to  
 14 support victims, and then obviously talking to victims  
 15 themselves.

16 Q. We see from page 4:

17 "The report [made] ... recommendations to improve  
 18 the impact and provision of victim advocates:

19 "To improve recognition of, and support available  
 20 for, victims' advocates.

21 "To ensure support ... available to all victims,  
 22 whether they choose to report their crime or not.

23 "To ensure long term sustainable funding ...  
 24 [providing] a range of advocacy services.

25 "[And] To ensure that all groups of victims have the  
 44

1 opportunity to access support from a service of their  
2 choosing."

3 We see at page 6, again, something you reflected  
4 earlier in your evidence. At the bottom:

5 "The most significant finding from our research is  
6 that advocates help to keep victims engaged with the  
7 [criminal justice system]."

8 And it's key that, isn't it?

9 **A.** Absolutely. So it wasn't in this role. When I was in  
10 the London Victims' Commissioner role, one of my final  
11 reports was around victim attrition, so that's when  
12 victims report and choose to withdraw -- well, I say  
13 "choose", they withdraw from the process.

14 A big part of that evidence, and it's reflected here  
15 as well in this part of the research, is that victims  
16 can stay better engaged in the process and won't  
17 withdraw if they have an advocate. So they have someone  
18 that is helping them navigate that process, meeting  
19 their needs. Making sure they're getting the right  
20 support, the right information, throughout the process  
21 makes a massive difference to their journey, and their  
22 ability to cope and recover afterwards as well.

23 **Q.** We see at the top of page 7:

24 "Inconsistency in the advocacy funding and  
25 commissioning landscape."

45

1 that advocacy role isn't needed. As I said, that's why  
2 we need to look at defining these roles much better.

3 I would say the same here as well for advocacy  
4 roles. As I say, I meet different IDVAs and ISVAs, and  
5 some are very good at understanding the criminal justice  
6 system journey, or some specialise more in health and  
7 housing on behalf of victims. So there's a lot of  
8 disparity between the roles.

9 So I think we need -- I mean, I'm -- this is one of  
10 the big focus areas for me coming into this area as  
11 Victims' Commissioner and I've said this to the  
12 government already: I want to look at what support  
13 provision is already provided within our criminal  
14 justice system and by which agencies. I want us to  
15 properly map that and then look at all the different  
16 advocates as well and who comes into contact with  
17 victims.

18 Because I think there is duplication in areas, and  
19 there are gaps. And nobody has got a proper grip of  
20 that victim and family end-to-end journey. And as  
21 you've rightly said, it's not just the criminal justice  
22 journey; families are going to go on and have parallel  
23 journeys as well and we need to understand that from  
24 a victim and family perspective if we hope to better  
25 provide support and services to them.

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1 That's not without complication, is it?

2 **A.** No, so this is very challenging, because there is  
3 obviously PCCs will fund advocates, but we will also see  
4 local authorities in relation to IDVAs. So it is a very  
5 confusing and fragmented landscape around funding as  
6 well. So we will see some areas funding more for  
7 certain victims and obviously less for other victims.  
8 So it is really a bit of a postcode lottery as to what  
9 victims will be able to access.

10 **Q.** We see page 37, halfway down the page:

11 "Our findings suggested that there was a recurring  
12 need for advocacy roles to be better defined, as  
13 different advocacy roles appeared to be offering  
14 different types of support depending on their  
15 specialism, area, or organisation. An agreed definition  
16 would help build a specific service specification and  
17 help with joint commissioning. One respondent from  
18 an office of a PCC highlighted the confusion around the  
19 definitions."

20 Page 45, please. Reference to "multiple gaps in  
21 current advocacy provision resulting in insufficient  
22 support for certain victim groups".

23 Would you include this group within that?

24 **A.** Yes. I think there's a misconception that because  
25 bereaved families have Family Liaison Officers, somehow

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1 **Q.** Page 48 and 49, please. "Recommendations".

2 We see on 49, recommendations for "Victims' hubs".

3 Can you expand upon what you see the victim care  
4 hubs to be? As I understand it, they're not intended to  
5 replace existing roles, are they -- (*overspeaking*) --

6 **A.** No, and that's where I've just spoken about there's  
7 a real need to map out what's the current provision and  
8 have a look at everything, because many victims I speak  
9 to, and even if they do have an IDVA or ISVA or they  
10 don't, coming into the criminal justice system they're  
11 very much reliant on those agencies, criminal justice  
12 agencies, providing them with their rights. And they're  
13 not fully aware of their rights, they don't know what  
14 they should be getting at which point of the process.  
15 And why should they? You know, why do we want to put  
16 that onto victims and families?

17 So that idea of the hub is to have this entity, this  
18 organisation, that is very much, it's independent, but  
19 it's part of the criminal justice system. So it has to  
20 be able to access police systems, CPS systems,  
21 et cetera, to be able to give the information to victims  
22 and families when they're reporting it and when it's  
23 going through the justice process.

24 So it's not to provide necessarily what advocates  
25 do, but it's just to make sure, it's almost like

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1 a justice navigator. Someone is responsible for helping  
2 victims make sure, for example, their Victim Personal  
3 Statements are done properly and on time, and they  
4 understand what the Victim Impact Statements are about.

5 Big issue that comes up, being told too late in the  
6 process about updating their Victim Impact Statement,  
7 not being advised on what can actually go in to  
8 a statement. And I have met bereaved families where  
9 they've received Victim Impact Statements with red lines  
10 through it from the CPS. That's incredibly upsetting  
11 and distressing for families. They don't understand  
12 "Why have you removed what I've put into a statement?"

13 So again, having this sort of justice navigator or  
14 hub model would support and advise victims and families  
15 of what their rights are and what they could put into  
16 a victim statement making sure special measures, they  
17 understand what special measures they can have when  
18 going, if they're giving evidence in court, and to make  
19 sure that it's absolutely happening.

20 And also, troubleshooting mechanism. What often  
21 happens to the victims that I meet, and families, is  
22 that there are delays in communication and investigation  
23 or getting to court, there are issues that arise along  
24 the way, there is nobody there for them to communicate  
25 to and say, "Please troubleshoot this, deal with this

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1 **A.** So for that -- and it's a very good question -- and  
2 that's why there needs to be -- and this hasn't been  
3 mapped out in any way, this is just an idea and  
4 something I've been trying to drive forward for some  
5 years because I can see the gap in support in the  
6 criminal justice system.

7 But I don't want it to duplicate, it's about  
8 appointing that single point of contact. So, for  
9 example, with a bereaved family, if you have a FLO  
10 appointed, it's the hub and the FLO that will more  
11 likely communicate unless that family wants to come in  
12 directly and speak to, let's say, the hub because it  
13 should be the FLO responsible for telling that family  
14 about the Victim Impact Statements, when they need to be  
15 done, what should be going into it, et cetera.

16 So we don't want to, as I say, don't want to  
17 duplicate, but there are gaps. So we want to make sure  
18 that there is something for victims and families who are  
19 navigating the justice process. And it could be the FLO  
20 is the person that actually delivers that, and if it is  
21 going to be the FLO, then there does need -- we need to  
22 ensure there's good guidance and training for FLOs  
23 because, as I've talked about, there's inconsistency in  
24 their understanding and the information they sometimes  
25 give to families that isn't quite correct about the

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1 issue so the case can keep moving along".

2 And that's a big issue for families. So again, it  
3 would have the sort of troubleshooting mechanism where  
4 the hub could say, maybe it's to the officer, "you know,  
5 you've not given the update to this victim and they're  
6 about to withdraw if you don't explain what's happening  
7 with the investigation".

8 I have seen this model work in other countries, when  
9 I was the London Victims' Commissioner, I went to Quebec  
10 because there's quite a lot of good practice in Quebec  
11 and they have this sort of single point of contact hub  
12 for victims, it's called CAVAC and sits alongside police  
13 and CPS and the courts, but again it's that front-facing  
14 agency or hub that deals with that victim, so they  
15 understand the needs of that victim, they can make sure  
16 the police and the CPS and the courts are delivering  
17 a service and a response to meet the needs of those  
18 victims.

19 **Q.** Is there a danger they get repeat or, worse,  
20 inconsistent messages, for example, around a Victim  
21 Impact Statement? The FLO would presumably, if it's  
22 working alongside FLOs, have a view about when that had  
23 to be provided and someone in the hub having a different  
24 view or understanding of data provision? How do you  
25 stop that kind of --

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1 criminal justice system, especially around legal  
2 outcomes. It's not always explained clearly.

3 **Q.** Thank you. That can come down, please. And can we have  
4 instead WITN0455002, pages 5 and 6.

5 This is a "Summary of Victims' Rights", they'll be  
6 very well known to you, obviously, but can you tell us  
7 what these are and why they are important? Pages 5 and  
8 six, please.

9 **A.** Yep, so -- do you want --

10 **Q.** If we can have both together.

11 **A.** Okay, so there are 12 overarching rights for victims.

12 I would say these are the -- this is the minimum level  
13 of service victims and families should be receiving, and  
14 it's about making sure that they -- that, you know, the  
15 right to be able to be understood, so we've got to make  
16 sure that all the needs are understood about victims,  
17 making sure the investigation, they're getting updates  
18 throughout, getting information.

19 Once they report the crime and go through the  
20 process, they need to be told about their rights, and  
21 need to be referred, told about support services, to be  
22 told about compensation.

23 So the very basic rights, information about what to  
24 expect if you're actually going into court, giving  
25 evidence, have a pre-court familiarisation visit, making

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1 sure they know about, you know, when they're going to  
2 give evidence, who's going to be there, making sure they  
3 do their Victim Impact Statement.

4 So these are what I would say are your sort of basic  
5 rights that should be delivered. The big issue on this  
6 is that -- and I have just done a response to the  
7 government's Victims' Code consultation, and it's  
8 a hefty response, 70 pages, but I did a huge amount of  
9 engagement with agencies that support victims but  
10 victims themselves.

11 And what frustrates me is that, even in this role,  
12 so I am meant to do a report on Code compliance, I'm  
13 meant to oversee and monitor agencies' compliance with  
14 delivering the code. There is no way for me to fulfil  
15 that part of my duties, because there is no framework,  
16 still, to collate the data from all the different  
17 agencies in relation to how are you delivering these  
18 Code rights to victims? That doesn't exist still and we  
19 know on the ground this still sits very much on paper,  
20 it's not being delivered in practice.

21 So the amount of victims I speak to who are not  
22 receiving their basic Code rights comes up again and  
23 again, and then where's the accountability?

24 **Q.** Are they even aware of the Code in a number of cases?

25 **A.** No. No. And the figure has gone out of my head,

1 know, awareness in the public and in schools, training,  
2 to understand what are your rights if you become  
3 a victim of crime?

4 **Q.** And the police and CPS?

5 **A.** Yeah, I mean absolutely. There should be -- they should  
6 be training. Unfortunately, it was not a -- it was not  
7 something I got into the Victims and Prisoners Act,  
8 I wanted mandatory training for all agencies on the  
9 Victims' Code, but the government rejected that into the  
10 legislation. There is only a duty on agencies to  
11 promote the Code.

12 None of these things have come into the Victims and  
13 Prisoners Act about better monitoring of compliance of  
14 the Code and my powers within the Code have actually  
15 come into effect, still.

16 So again, it's legislation that hasn't been  
17 implemented.

18 **Q.** In terms of victims' rights, there's also enhanced  
19 rights, isn't there --

20 **A.** Yes.

21 **Q.** -- of the Code acknowledging those who are victims of  
22 the most serious crime, including bereaved close  
23 relatives.

24 What can people expect under the enhanced rights?

25 **A.** So if you're vulnerable under the enhanced rights you

1 forgive me, but in a victims survey that the last  
2 Victims' Commissioner did in 2024, I'm trying to recall,  
3 I think it was -- I may get this wrong, I've got all the  
4 numbers in my head -- only around a fifth knew of the  
5 Victims' Code. So am I right? I think only 17%. You  
6 might need to fact check that figure.

7 **Q.** We will, we will go to that next.

8 **A.** But it's still a very low number are still told about  
9 their rights. That's a very basic, because they should  
10 be told because it helps to empower them and gives them  
11 some support to know: okay, I know what I'm entitled to.  
12 Many victims I speak to, though, say -- and it's a very  
13 strong point -- "I don't know if I want to know when  
14 I've come into -- I'm a victim and I've come into the  
15 process, I don't think it's something I can start taking  
16 on board as well, it's a lot of information to know what  
17 I need and when I need it."

18 That's why that role of that victim care hub would  
19 be so critical around the delivery of these rights  
20 because we put a lot on victims to then you've got to  
21 know about their rights and then there's an onus and  
22 responsibility on them to almost advocate for themselves  
23 and push the agencies to deliver those rights. I think  
24 we ask too much of victims.

25 I think we should be doing much more around, you

1 should be getting communication and information quicker,  
2 within a day, and obviously then that's when we look at,  
3 if they're going into court, that's around special  
4 measures as well for enhanced vulnerable victims.

5 **Q.** The three surviving victims of the Nottingham attacks  
6 were allocated one FLO between them, and when the CPS  
7 opened in this Inquiry in 2026, they had wrongly  
8 believed that they were allocated two. One of the  
9 surviving victims, Wayne Birkett, has endured a brain  
10 injury which inevitably requires adjustments in  
11 communication.

12 **A.** Mm.

13 **Q.** Another, Sharon Miller, was unable to leave her house at  
14 the time of the sentencing hearing, had -- and you will  
15 recognise this from other victims' experiences -- didn't  
16 want to see the face of the defendant or pictures of the  
17 defendant. Both of those victims where the defendant  
18 had pleaded guilty to attempted murders should have had  
19 the utmost care and attention in explaining to them what  
20 was happening and adjustments made in doing so; would  
21 you agree?

22 **A.** Absolutely.

23 **Q.** In terms of Sharon Miller, she wasn't told, for example,  
24 "You could join a hearing via Teams or CVP link" and of  
25 course you can have an audio link, only, if you don't

1 want to see people's faces in the courtroom.  
 2 None of this was explained to her as an option or  
 3 possibility, and for Wayne Birkett, no real effort taken  
 4 to keep him apace with what was happening.  
 5 Participation in proceedings, it's not enough, is  
 6 it? It's nowhere near enough, what's happened there?  
 7 **A.** No, but this is their basic rights not being delivered.  
 8 And again the frustration with this Victims' Code that  
 9 comes back to me time and time again from speaking to  
 10 victims is it feels quite meaningless, this Code,  
 11 because if rights are not delivered -- and they were not  
 12 delivered in these cases -- what's the accountability?  
 13 Who do we hold to account for failing to deliver basic  
 14 victims' rights to victims in this country? Nothing.  
 15 And that, I have to say, is an outstanding frustration  
 16 of mine as Victims' Commissioner.  
 17 I started campaigning before I was the London  
 18 Victims' Commissioner and Victims' Commissioner on  
 19 victims law to strengthen victims' rights in this  
 20 country. I had a vision that that victims' law would  
 21 deliver that. And what we got in the Victims and  
 22 Prisoners Act unfortunately watered down the most  
 23 important part which was to give victims' rights teeth  
 24 and accountability. And that has not happened.  
 25 And so, therefore, when victims don't get their

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1 **THE CHAIR:** I see you smiling at that.  
 2 **A.** Sorry?  
 3 **THE CHAIR:** I see you smiling at that, the Annual Victims'  
 4 Survey.  
 5 **A.** Well, when you say "data" --  
 6 **THE CHAIR:** Yes.  
 7 **A.** -- my office is funding that in order to get some idea  
 8 of how the Code is working. So it's -- yeah, it's  
 9 a frustration. And, you know, my -- my office is very  
 10 small, I came in in January, and it's a tiny office with  
 11 not much budget, and it may not have budget to continue  
 12 to do the Annual Victims' Survey. If my office can't do  
 13 this, what insight and data will we get about the  
 14 victims' experience and journey and how the Code is  
 15 actually working in practice?  
 16 **MS LANGDALE:** We see at page 6, the "Key findings":  
 17 "Victims lacked confidence in the fairness and  
 18 effectiveness of the criminal justice system. Factors  
 19 ... [undermining] ... confidence included a lack of  
 20 resources, poor communication between criminal justice  
 21 agencies and systemic biases. They ... reported feeling  
 22 like they were not believed or taken seriously."  
 23 If we go, please, to page 7:  
 24 "Victims' experiences following a charging decision  
 25 varied greatly. Victim confidence in the effectiveness

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1 rights, they get an empty apology letter maybe from the  
 2 agency, the police, or the CPS, or whoever failed to  
 3 deliver their rights. They could go to the Ombudsman  
 4 for breach of Victims' Code. We had -- we used to have  
 5 quite a long convoluted process where the victim would  
 6 have to go to their MP and talk about the Code breach,  
 7 and then it would be referred to the Ombudsman.  
 8 So I ensured we removed that MP filter to make it  
 9 easier, but I had a victim only recently who  
 10 I encouraged to take it to the Ombudsman, because the  
 11 police had failed on her Code rights, but because the  
 12 police had given an apology to her, there was nothing  
 13 more to be done.  
 14 So it lacks teeth, it lacks accountability. So  
 15 whilst these look very nice on paper -- and I keep  
 16 saying this, to me, is minimal level of service victims  
 17 should receive -- it is not being delivered well, and if  
 18 it's not delivered well, there's no accountability. And  
 19 in my role as Victims' Commissioner, I have some power,  
 20 not a lot, but I have some power to hold agencies to  
 21 account when they are not complying with the Code, but  
 22 I cannot do that if I have no data.  
 23 **Q.** You do have data in the Annual Victims' Survey, as we  
 24 referred to earlier, 2024. So shall we have that,  
 25 please, WITN0455003, page 6.

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1 of the CPS and satisfaction with the quality of  
 2 communications about charging decisions, the court  
 3 process and court outcomes was mixed."  
 4 And we see at the bottom of the page:  
 5 "Only around a quarter (27%) ... told us they  
 6 recalled being referred or had self-referred to victims'  
 7 services. For victims whose case reached court, this  
 8 only increased to 56%.  
 9 "Nearly two thirds ... agreed the support they  
 10 received was tailored to their needs though some victims  
 11 emphasised the need for more individualised support ...  
 12 "[And] Just over half ... agreed ... their contact  
 13 with victims' services help them to recover from the  
 14 impacts of crime."  
 15 And page 8, please. As you said, the 17%:  
 16 "Less than a fifth (17%) of respondents had heard of  
 17 the Victims' Code.  
 18 "Less than two thirds ... of victims recalled being  
 19 offered the opportunity to make a Victim Personal  
 20 Statement when cases had progressed to court."  
 21 What was your cohort for the survey?  
 22 **A.** So again, this was done before I was in the role and  
 23 I believe it was over 6,500 victims.  
 24 We have just -- we are doing the survey again, and  
 25 we have just closed the survey recently.

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1 Q. As Ms Kaur reminds me, you have very clearly at page 55  
2 set out the proportion of respondents who'd heard of the  
3 Victims' Code. Only 17%.

4 A. Yeah. So in the Victims and Prisoners Act there is  
5 a duty on agencies to promote the Code. It's not been  
6 implemented yet. That doesn't mean agencies should not  
7 be doing it. I don't know what we are waiting for, but  
8 we know so few are being told.

9 I mean, I meet victims at the end of the journey  
10 because I'm not allowed to be involved at all in, you  
11 know, operational decisions, so we tend to meet when  
12 they've gone through the process, and it's one of the  
13 first questions I ask: were you made aware of the  
14 Victims' Code? And so few are.

15 I mean, the response that I get when I question  
16 agencies is they'll say, "Well, we don't explicitly say  
17 it's a Code, but we do tell them, you know, we do update  
18 them and we do tell them that they're being updated."

19 There is some disparity because when I was in the  
20 London role I was very robust in trying to look at  
21 compliance data, and we could see that actually from the  
22 Met data they had been referring victims to support  
23 services, but we could see there was a mismatch with  
24 victims saying, "I hadn't been referred to support  
25 service".

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1 -- and I go back to the hub idea -- it's when things are  
2 not working, which often they aren't. So if things are  
3 not being -- information is not being given, you don't  
4 understand something, it is so difficult. I mean,  
5 bereaved families will have the Family Liaison Officer  
6 who should be the person trying to resolve some of those  
7 issues. Some of it might go beyond their remit, and  
8 that's why, with the victim care hub, and that's for  
9 other victims, if something hasn't happened you have  
10 somewhere to go where someone will sort the problem for  
11 you. Otherwise, so many victims and families say,  
12 "Where am I meant to go to get the right advice and  
13 information?" We make it very, very difficult and very  
14 challenging for them.

15 Q. Can we have, please, WITN0455008, page 1:

16 "Victims' Commissioner ... submission to the  
17 Ministry of Justice's consultation on a new Victims'  
18 Code".

19 We see set out there in the executive summary at the  
20 bottom:

21 "... the Commissioner welcomes the ambition to  
22 strengthen the Code, the submission concludes that  
23 without systemic reform, robust accountability, and  
24 genuine cultural change, the revised Code risks  
25 remaining aspirational rather than transformative."

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1 Because again, it's about how is that information  
2 being communicated to someone who is in trauma shock,  
3 suffering with grief, going through so much. I think  
4 there's almost a -- it is a tick box, where they'll say,  
5 "Well, I told them about support". Might have said it  
6 once to them, but they may not have processed that  
7 information.

8 So it's not just a case of ticking "I told them";  
9 it's updating them all the time and checking in. It  
10 shouldn't be a one-off offer. It should be throughout  
11 for every agency, everyone who is coming into contact  
12 with that victim or family member: "Are you aware of the  
13 Victims' Code? Have you been told about support  
14 services? Would you like to access support services?  
15 If not, tell us when." You know, make sure the offer is  
16 continually made.

17 It should be a service, it's a customer service, in  
18 a way, that's how I view it, to treat them with dignity  
19 and respect and make sure you are listening to them and  
20 talking to them and updating them throughout the  
21 process.

22 Q. One of our victims, Sharon Miller, didn't get her  
23 property back until January 2026. These are important  
24 issues, aren't they?

25 A. Yeah. And I think what's so difficult there, and when

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1 If we can have pages 2 and 3, please, on the screen:  
2 key criticisms of the code. What do you say about that?

3 A. Well, I think it's echoing what I've been talking about  
4 around it being, you know, poorly implemented. It is --  
5 feels very much like a tick-box exercise for so many  
6 agencies as opposed to really trying to understand the  
7 victim position, the victim's needs, and therefore  
8 tailoring your responses, your communication, your  
9 service, to those needs.

10 As I've talked about, the lack of enforcement and  
11 accountability is the Code's greatest weakness because  
12 there is, as I've mentioned, nothing in place to give us  
13 robust monitoring and oversight of how the Code is  
14 actually working, victims are just forced to advocate  
15 for themselves to get their rights, and the  
16 fragmentation through the criminal justice system. That  
17 is the biggest issue.

18 You know, the victim and the family -- the victim in  
19 particular who is maybe going to court -- they have to  
20 navigate that entire justice process and post-sentencing  
21 as well, and yet there is nobody who can track that  
22 victim and support them through the process.

23 Again, another recommendation that I've made to  
24 various legislations, and they've not been taken  
25 forward, is around that unique victim identifier number.

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1 So you identify the victim and you -- and their needs,  
2 and it is tracked along the process. So they don't have  
3 to keep retelling their experience, their story, every  
4 time they phone in to the police or when they go into  
5 the next part of the criminal justice system. It  
6 follows through with them so they -- we can understand,  
7 okay, this is their needs, this is what's been  
8 delivered, this is what's not been delivered. Let's  
9 make sure we're on track to give them everything they  
10 need to support them through the whole journey.

11 And that doesn't happen.

12 **Q.** And you see "Key Recommendations", page 4.

13 "Make the ... Code enforceable and accountable."

14 As you've been saying.

15 And how can that been done?

16 **A.** So we actually looked at a different -- different  
17 mechanisms for the victims and prisoners, when it was  
18 the Victims and Prisoners Bill, about redress -- you  
19 know, mechanisms to make sure that there's some  
20 consequence when agencies breach the Code.

21 We talked about whether we -- you know, shame  
22 agencies, whether we look at fines, et cetera. Again,  
23 the government was given quite a number -- the previous  
24 government -- quite a number of different solutions for  
25 how to drive to make it enforceable and to make sure

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1 You've spoken this morning about your request for  
2 mandatory training in the Crown Prosecution Service and  
3 the police on the Victims' Code. Can I just ask you  
4 about counsel who prosecute cases at court, especially  
5 in homicide cases. They're very often members of the  
6 Independent Bar --

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

8 **Q.** -- and therefore self-employed, not employed by the  
9 Crown Prosecution Service nor the police.

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

11 **Q.** In what is reported to you from the experiences of  
12 bereaved families in homicide cases, are some more  
13 empathetic than others when dealing with bereaved  
14 families?

15 **A.** Yes, I mean, we do pick up issues of what I would say  
16 some real concerning issues that come up in court.

17 **Q.** Some will be of genuine support and assistance to  
18 families, won't they?

19 **A.** Some will, but unfortunately -- so in my role I'll  
20 obviously hear the negatives, so when people come and  
21 share experiences with me. So what we pick up is just  
22 sort of being quite rushed and not giving information in  
23 a clear way and not really listening to victims and  
24 families at that time.

25 **Q.** Perhaps the attitude might be described as "compassion

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1 agencies were held to account.

2 I think it's one for government to still look at and  
3 address, because, as I said, it's all very well having  
4 the Code, but when rights are breached if you're just  
5 receiving an empty apology and there's no  
6 accountability, and you get no sense what's going to  
7 change on the back of that. That's something I take to  
8 agencies: have you looked at all your complaints that  
9 are in relation to your Code breaches? They often  
10 haven't. Look at your Code breaches, and what are you  
11 doing to extract from that and drive better performance  
12 so that they don't keep making the same mistake? That  
13 work doesn't happen.

14 **MS LANGDALE:** Thank you. Those are my questions,  
15 Commissioner. I don't know if this is a good time for  
16 the morning break.

17 **THE CHAIR:** Yes, I think we'll take the morning break, so  
18 we'll start again at 11.55, thank you.

19 **(11.40 am)**

**(A short break).**

21 **( 11.54 am)**

22 **THE CHAIR:** Yes, Mr Moloney.

**Questioned by MR MOLONEY**

24 **MR MOLONEY:** Good morning, Ms Waxman. I ask questions on  
25 behalf of the bereaved families.

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1 fatigue" at times. I see you nod. Thank you.

2 **A.** Yes.

3 **Q.** That is capable of being enormously distressing --

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

5 **Q.** -- for those families and especially at such an  
6 incredibly important and stressful time that the  
7 criminal process is?

8 **A.** Yes.

9 **Q.** You may have heard the evidence of these bereaved  
10 families about how they felt at court, and how unhappy  
11 they were at times.

12 Counsel at court, especially leading counsel, are  
13 usually the leaders of the prosecution team that the  
14 families encounter, aren't they?

15 **A.** Yes, that's correct.

16 **Q.** The counsel becomes the mouthpiece for the team, as it  
17 were, in dealing with the families and explaining what's  
18 going on at court?

19 **A.** Yes.

20 **Q.** Is there any mandatory training in appropriate  
21 communication with bereaved families for members of the  
22 Independent Bar who prosecute homicide cases?

23 **A.** I am afraid I couldn't answer that. Not that I'm aware  
24 of, but there could well be, but obviously that's

25 a question for the Bar and I can only talk about with

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1 the sort of CPS and working with them and understanding  
2 what training is available for CPS prosecutors.

3 So I'm not clear what training is available.

4 **Q.** If there isn't, in your role as the Victims'

5 Commissioner and what's reported to you, do you think it  
6 would be beneficial?

7 **A.** Absolutely. I mean, there is some work underway at the  
8 moment. It's specific for rape cases with the Bar, and  
9 looking at better training and being trauma informed  
10 that is being led, actually, by the independent advisor  
11 for the Government Katrin Hohl, so she's leading on  
12 looking at that training in court, but it's specifically  
13 only around rape cases.

14 **Q.** It is. Because there is quite holistic training for  
15 prosecuting in rape cases, isn't there?

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

17 **Q.** The RASSO system?

18 **A.** Yes.

19 **Q.** But you think training of that nature in relation to  
20 homicide might also be useful in terms of dealing with  
21 bereaved families at court, victims?

22 **A.** I think it's necessary for everybody who comes into  
23 contact with families in the court, even from the court  
24 clerks, and we've talked about that as well, everybody  
25 should be trained to understand impact of trauma and the

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1 representative from the hub instead. So in a sense, the  
2 independent guide is on the other side of the equation.

3 **A.** Is on the other side. I understand the question.

4 So again, as I say, this is still a concept and it's  
5 something we really have to map out carefully. And when  
6 I talk about mapping out, it's understanding all the  
7 intricacies of a journey for victims and families, but  
8 is also plugging in and recognising the needs for  
9 families and victims. Anything I would push forward and  
10 design has to be centred in consultation with victims  
11 and families.

12 **THE CHAIR:** Yes.

13 **A.** But I think if it was just to navigate the justice  
14 process, it is probably better to have the hub be the  
15 point of contact that would communicate, certainly for  
16 victims. For families I'm not sure because obviously  
17 the FLO is providing extra things as well that the  
18 families need to access that the hub wouldn't  
19 necessarily give to the families.

20 **THE CHAIR:** Yes.

21 **A.** So again, it's something that has to be worked on  
22 through the design of this.

23 **THE CHAIR:** The hub, for example, would you envisage  
24 somebody who was able to assist in relation to the  
25 criminal justice system also being able to assist in

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1 needs of victims and bereaved families in court.

2 **MR MOLONEY:** Thank you very much, Ms Waxman.

3 **THE CHAIR:** Yes, Ms Cartwright? Thank you.

4 **Questioned by THE CHAIR**

5 **THE CHAIR:** So I think there are just a couple of questions  
6 that I have.

7 Just in relation to the hub that you're referring to  
8 and, for want of a better word, the interface with the  
9 FLOs: from your experience would it be better to have,  
10 say, one FLO on a case, that's to say a single point of  
11 contact for more people coming from the hub side rather  
12 than several FLOs, and independent advocates as well?  
13 So that way you effectively have a single point of  
14 contact from the investigation team, but a trained FLO  
15 keeping in contact with the families but through the  
16 hub.

17 **A.** So again, I think it's what works best for victims and  
18 families. So are you talking about -- so is it -- it's  
19 not one FLO for, say, there's numerous victims or  
20 families, they'll all have their individual FLOs still,  
21 but you're talking about there will be one FLO out of  
22 that cohort will then liaise with the hub; is that  
23 what --

24 **THE CHAIR:** Possibly or, alternatively, just one FLO for all  
25 victims, but all of the victims have their own

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1 relation to, for example, liaison with the Health  
2 Service?

3 **A.** No, so this hub is purely for navigating criminal  
4 justice system only and following the rights and the  
5 entitlements under the Code making sure that they are  
6 being delivered as they should be to victims going  
7 through that justice process.

8 It could probably provide, in the sense of maybe  
9 referring them on to whoever they need to be referred on  
10 to for support in that area, but it's primarily looking  
11 at criminal justice only.

12 **THE CHAIR:** I see.

13 In terms of the resistance that you've encountered  
14 in government to a number of these suggestions and  
15 recommendations, what have been the grounds of that  
16 resistance, if you can help me?

17 **A.** So, I mean, in relation to the victim care hub,  
18 I actually think it's just a lack of ambition, and just  
19 sticking with the status quo and hoping we can improve  
20 the status quo. So let's train the police, let's train  
21 the CPS, let's get everyone better at understanding the  
22 Code entitlements and just make sure they do a better  
23 job.

24 We've been trying that for years. It doesn't work  
25 and I think we need a complete overhaul in the way that

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1 we respond to support victims and families in the  
 2 criminal justice system.  
 3 So I think there's just lack of ambition in relation  
 4 to the victim care hub and something I will continue, as  
 5 Victims' Commissioner, to push government on.  
 6 The Unique Victim Identifier Number, there is more  
 7 openness to this and there is work going on within the  
 8 Ministry of Justice looking at how best to collate some  
 9 of the data on that victim journey --  
 10 **THE CHAIR:** Is the idea that they are a number to maintain  
 11 anonymity or continuity, because it's slightly  
 12 concerning just to be a number in a system where you  
 13 don't trust the system?  
 14 **A.** So not a number. We understand that and that's  
 15 something we would have to explore, but at the moment  
 16 it's coming from the need of victims who say nobody  
 17 knows what their needs are, nobody helps -- doesn't  
 18 respond to their needs because they're not tracking  
 19 those needs and their requirements along the system. So  
 20 they are having to either retell it again and again to  
 21 different parts of the system, or nobody asks at all,  
 22 and therefore, they don't get the right response and  
 23 service. So it's more from ensuring there's a better  
 24 quality of service provided to them.  
 25 **THE CHAIR:** So a number, it doesn't necessarily have to be a

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1 think I'd have the answer to that. As I said, the  
 2 Ministry of Justice are looking at all of the data  
 3 requirements regarding the victims' journey at the  
 4 moment. I know there are big issues with it because all  
 5 this data sits across different systems, and there's not  
 6 one system, as you know, so everybody -- it's the -- the  
 7 lack of communication and the just not interacting with  
 8 each other. So that's a big issue around accessing this  
 9 data and getting this data, and where it sits and who  
 10 has ownership of it.  
 11 So the idea was that the Police and Crime  
 12 Commissioners would play quite an active role and the  
 13 framework would be built around them actually being able  
 14 to get this data in different agencies. Of course, with  
 15 the police reform and the abolition of PCCs that's kind  
 16 of put a spanner in the works and we don't know what's  
 17 going to happen now as a result.  
 18 So unfortunately, the progress that we made through  
 19 the Victims and Prisoners Act to try and access this  
 20 data from agencies, or to start to put the framework  
 21 together, is pretty much paused. So that makes my job  
 22 very, very difficult, in monitoring and having some  
 23 oversight about how the Code is actually working in  
 24 practice.  
 25 **THE CHAIR:** Yes, thank you. And I think that it's right

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1 number, it could be a code?  
 2 **A.** So it's looking on the system, so it's not necessarily  
 3 you're not a number.  
 4 It's actually in a way to try and provide a more  
 5 human response than the system currently does. So it's  
 6 making sure we know who you are, and what you've been  
 7 asking for and what your needs are. And I'd also like  
 8 it to be able to track, "Right, were they referred to  
 9 support? Double-check: were you referred to support?"  
 10 So you're tracking then their --  
 11 **THE CHAIR:** The journey?  
 12 **A.** -- the journey under the Victims' Code and they've got  
 13 everything they should have got throughout the process.  
 14 **THE CHAIR:** Yes, and just in relation to the difficulties  
 15 that you have as the Commissioner in monitoring because  
 16 you don't have any data, what would be the best way, do  
 17 you consider, to collect data?  
 18 **A.** I think that that unique victim identifier number could  
 19 be a solution to helping us understand that victim  
 20 journey in relation to the Code compliance and what  
 21 agencies are and aren't giving to victims through the  
 22 process.  
 23 **THE CHAIR:** Do you know who would keep that record? All  
 24 agencies, and then you would have to do the work --  
 25 **A.** Very good question. Very good question, and I don't

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1 that in most cases we effectively had the two pages of  
 2 the victims' rights, that FLOs do give those in most  
 3 cases to the victims, but it's a question, really, of  
 4 whether they are explained, whether they are understood,  
 5 whether it's the right time?  
 6 **A.** I mean, I don't know if I -- I'm confident that they do  
 7 give it.  
 8 **THE CHAIR:** I see.  
 9 **A.** It's a question I will ask bereaved families. I don't  
 10 know if they do get everything as they should, so  
 11 information about their Code rights.  
 12 **THE CHAIR:** Because it's very simple --  
 13 **A.** It is very simple.  
 14 **THE CHAIR:** Two sides of A4, isn't it?  
 15 **A.** But again, I think we need to think about what families,  
 16 in particular bereaved families, are going through at  
 17 that time. I speak to bereaved families, they get  
 18 leaflets after leaflets and booklets and what, we just  
 19 leave that on the side and expect them to read it all,  
 20 to be able to process and retain that information at a  
 21 time when they are really struggling with grief and  
 22 trauma and shock. There is no way they can process all  
 23 these big booklets and information.  
 24 So it's about providing a much more tailored service  
 25 to help them understand what they need, what their

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1 rights are, in a sensitive, gentle way that helps  
2 support them through the process. I don't think that's  
3 too much to ask for.

4 **THE CHAIR:** No. Thank you very much.

5 Well, thank you, that's the end of your evidence, so  
6 if you'd like to go with the usher. Thank you.

7 **(The witness withdrew)**

8 **Closing Remarks by THE CHAIR**

9 **THE CHAIR:** So, after 14 weeks and 164 witnesses, we've  
10 reached the conclusion of the oral evidence hearings in  
11 this Inquiry.

12 Over the course of the hearings, all witnesses  
13 attended when they were asked to do so, apart from one  
14 occasion, and it's been unnecessary to reschedule any  
15 witnesses or depart from the timetable, and that  
16 occasion was for illness.

17 Further witness evidence has been uploaded onto the  
18 website, as you have heard this morning, and a few  
19 outstanding statements addressing issues which have  
20 arisen from the evidence which has been given will be  
21 disclosed to CPs and, where appropriate, published on  
22 the website.

23 The fact that we've completed the evidence on  
24 schedule without compromise as to breadth and depth is  
25 a credit to all core participants and their

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1 representatives and of course to Counsel to the Inquiry,  
2 the Inquiry Legal Team and the Secretariat who have  
3 organised the hearings.

4 In addition to the evidence, which had previously  
5 been considered in other reports, the Inquiry has  
6 obtained and presented evidence which has not previously  
7 been taken into account in those reports and  
8 proceedings.

9 I am now going to start work on my report  
10 considering the evidence ahead of a further hearing at  
11 Mary Ward House on 8 and 9 September for oral closing  
12 submissions.

13 Counsel for Core Participants have been sent  
14 a timetable which I've set for the September hearing and  
15 I'm just going to briefly summarise that. All written  
16 closing submissions on behalf of Core Participants who  
17 wish to make submissions shall be provided to the  
18 Inquiry by 4.00 on Friday, 14 August. After reviewing  
19 the submissions, if there are any particular issues on  
20 which I require any particular submissions, I will  
21 notify relevant counsel by 28 August and such  
22 submissions shall be provided by 4 September.

23 So if you receive no notice from me after submitting  
24 your submissions, then no further submissions will be  
25 required from you in advance of the hearing.

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1 The oral submissions will be livestreamed, and you  
2 should be aware that the technology that we've had the  
3 benefit of to upload documents and primary evidence on  
4 screen will not be available at the hearing room on 8  
5 and 9 September, so accurate references to documents are  
6 both essential and sufficient.

7 On the subject of broadcasting, I remind everyone  
8 that the Broadcasting Order of 11 November remains in  
9 force and prohibits any rebroadcasting of video or audio  
10 clips from the livestream unless such broadcasting is or  
11 constitutes a fair and accurate report of proceedings.

12 Now, before we finish today, on behalf of us all,  
13 I would like to thank all at Mary Ward House, the  
14 ushers, the security and Hestia, for their contribution  
15 to making the hearings in this emotional and taxing  
16 Inquiry as comfortable and bearable as possible for all  
17 concerned.

18 We've been fortunate indeed to have had the spacious  
19 calm of this historic building and the professionalism,  
20 kindness and thoughtful assistance of all in it.

21 Further thanks are due to RTS for the smooth running  
22 of the document system, to our document controllers and  
23 stenographer, and to my clerk Eileen for her unfailing  
24 support.

25 So that concludes this part of the Inquiry, which

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1 I now adjourn until 8 September. Thank you.

2 **(12.11 pm)**

3 **(The hearing concluded)**

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<p><b>V</b></p>				
<p><b>Van</b> [1] 7/13</p> <p><b>varied</b> [1] 59/25</p> <p><b>various</b> [4] 3/23 26/6 29/9 64/24</p> <p><b>VC</b> [8] 2/2 2/20 2/25 4/11 5/2 7/3 7/16 15/4</p> <p><b>VC's</b> [7] 2/10 3/4 3/8 3/18 4/2 4/19 7/8</p> <p><b>vehicles</b> [1] 3/25</p> <p><b>verbally</b> [1] 20/3</p> <p><b>very</b> [54] 3/20 14/20 17/16 19/17 19/24 21/16 26/1 26/7 26/12 26/16 26/20 27/20 28/13 28/22 28/25 30/16 30/18 30/21 30/22 34/10 36/12 39/24 41/3 43/23 46/2 46/4 47/5 48/11 48/18 51/1 52/6 52/23 53/19 54/8 54/9 54/12 58/15 59/9 61/1 61/20 63/13 63/13 63/13 64/5 66/3 67/5 70/2 74/25 74/25 75/22 75/22 76/12 76/13 77/4</p> <p><b>via</b> [2] 21/15 56/24</p> <p><b>victim</b> [59] 18/24 18/24 21/19 24/12 24/22 29/4 35/4 36/6 37/20 39/4 40/8 40/9 41/9 41/9 41/14 41/19 41/23 42/5 42/21 43/19 44/2 44/18 45/11 46/22 47/20 47/24 48/3 49/2 49/4 49/6 49/9 49/16 50/5 50/14 50/15 50/20 51/14 53/3 54/14</p>	<p><b>Victory</b> [1] 7/13</p> <p><b>video</b> [2] 4/1 79/9</p> <p><b>Vidya</b> [1] 15/16</p> <p><b>view</b> [4] 10/17 50/22 50/24 62/18</p> <p><b>viewed</b> [1] 3/3</p> <p><b>views</b> [2] 10/13 10/15</p> <p><b>violation</b> [1] 24/21</p> <p><b>violence</b> [6] 6/19 12/24 24/22 34/19 35/20 39/12</p> <p><b>violent</b> [1] 24/5</p> <p><b>vision</b> [2] 35/1 57/20</p> <p><b>visit</b> [1] 52/25</p> <p><b>vital</b> [1] 8/20</p> <p><b>VLO</b> [1] 35/10</p> <p><b>voice</b> [2] 22/25 26/18</p> <p><b>voices</b> [1] 17/8</p> <p><b>vulnerable</b> [2] 55/25 56/4</p>	<p><b>W</b></p> <p><b>waiting</b> [1] 61/7</p> <p><b>Wales</b> [5] 6/24 7/2 7/6 7/9 16/21</p> <p><b>Wallace</b> [1] 12/25</p> <p><b>want</b> [18] 29/3 30/5 32/10 32/13 35/2 41/2 47/12 47/14 48/15 51/7 51/16 51/16 51/17 52/9 54/13 56/16 57/1 70/8</p> <p><b>wanted</b> [1] 55/8</p> <p><b>wants</b> [1] 51/11</p> <p><b>Ward</b> [2] 78/11 79/13</p> <p><b>warnings</b> [1] 13/16</p> <p><b>warrant</b> [3] 2/20 2/25 3/5</p> <p><b>warrants</b> [2] 2/18</p>	<p><b>W</b></p> <p><b>waiting</b> [1] 61/7</p> <p><b>Wales</b> [5] 6/24 7/2 7/6 7/9 16/21</p> <p><b>Wallace</b> [1] 12/25</p> <p><b>want</b> [18] 29/3 30/5 32/10 32/13 35/2 41/2 47/12 47/14 48/15 51/7 51/16 51/16 51/17 52/9 54/13 56/16 57/1 70/8</p> <p><b>wanted</b> [1] 55/8</p> <p><b>wants</b> [1] 51/11</p> <p><b>Ward</b> [2] 78/11 79/13</p> <p><b>warnings</b> [1] 13/16</p> <p><b>warrant</b> [3] 2/20 2/25 3/5</p> <p><b>warrants</b> [2] 2/18</p>	<p><b>W</b></p> <p><b>waiting</b> [1] 61/7</p> <p><b>Wales</b> [5] 6/24 7/2 7/6 7/9 16/21</p> <p><b>Wallace</b> [1] 12/25</p> <p><b>want</b> [18] 29/3 30/5 32/10 32/13 35/2 41/2 47/12 47/14 48/15 51/7 51/16 51/16 51/17 52/9 54/13 56/16 57/1 70/8</p> <p><b>wanted</b> [1] 55/8</p> <p><b>wants</b> [1] 51/11</p> <p><b>Ward</b> [2] 78/11 79/13</p> <p><b>warnings</b> [1] 13/16</p> <p><b>warrant</b> [3] 2/20 2/25 3/5</p> <p><b>warrants</b> [2] 2/18</p>

<p><b>W</b></p> <p><b>whether [14]</b> 3/3 12/16 25/22 27/17 33/19 33/20 37/25 43/13 44/22 65/21 65/22 76/4 76/4 76/5</p> <p><b>which [25]</b> 1/4 1/14 1/20 5/22 10/21 11/14 11/23 13/18 14/13 27/5 35/4 35/23 42/12 47/14 48/14 56/10 57/23 63/2 77/19 77/20 78/4 78/6 78/14 78/20 79/25</p> <p><b>whilst [3]</b> 33/3 34/11 58/15</p> <p><b>Whiting [1]</b> 6/12</p> <p><b>who [53]</b> 1/11 1/13 2/13 2/24 3/8 3/10 3/13 3/14 3/16 3/17 3/22 4/10 4/13 4/18 4/24 5/1 5/6 6/2 7/19 13/7 13/7 13/22 19/9 22/12 22/20 24/4 31/2 34/13 35/17 36/25 37/18 37/20 47/16 51/18 53/21 55/21 57/13 58/9 62/2 62/11 63/6 64/19 64/21 67/4 68/22 69/22 71/24 73/16 74/6 74/23 75/9 78/2 78/16</p> <p><b>who'd [1]</b> 61/2</p> <p><b>who's [1]</b> 53/2</p> <p><b>whoever [3]</b> 23/8 58/2 72/9</p> <p><b>whole [3]</b> 27/23 36/1 65/10</p> <p><b>whose [1]</b> 60/7</p> <p><b>why [20]</b> 3/25 4/18 21/25 31/3 31/24 33/8 33/9 33/13 33/17 40/2 41/15 41/23 47/1 48/15 48/15 49/12 51/2 52/7 54/18 63/8</p> <p><b>wide [1]</b> 38/15</p> <p><b>wider [3]</b> 36/11 37/16 37/17</p> <p><b>Wilkinson [1]</b> 3/10</p> <p><b>will [48]</b> 5/6 5/6 11/14 12/15 15/12 15/17 15/18 15/25 16/7 17/20 18/23 19/20 19/22 21/8 21/13 22/13 25/18 27/9 27/9 27/10 32/9 33/3 33/23 33/23 34/2 35/17 46/3 46/3 46/6 46/9 51/10 54/7 54/7 56/14 59/13 63/5 63/10 67/17 67/19 70/21 70/22 73/4 76/9 77/20 78/20 78/24 79/1 79/4</p> <p><b>William [1]</b> 2/8</p> <p><b>Williams [1]</b> 4/5</p>	<p><b>wiring [1]</b> 36/1</p> <p><b>wisdom [1]</b> 37/5</p> <p><b>wish [2]</b> 25/8 78/17</p> <p><b>withdraw [4]</b> 45/12 45/13 45/17 50/6</p> <p><b>withdrew [1]</b> 77/7</p> <p><b>withhold [1]</b> 43/8</p> <p><b>within [10]</b> 4/23 21/12 22/5 29/12 36/22 46/23 47/13 55/14 56/2 73/7</p> <p><b>without [7]</b> 11/15 14/19 19/15 38/6 46/1 63/23 77/24</p> <p><b>WITN0258001 [1]</b> 38/8</p> <p><b>WITN0455001 [2]</b> 17/23 29/6</p> <p><b>WITN0455002 [1]</b> 52/4</p> <p><b>WITN0455003 [1]</b> 58/25</p> <p><b>WITN0455005 [1]</b> 42/3</p> <p><b>WITN0455006 [1]</b> 42/25</p> <p><b>WITN0455008 [1]</b> 63/15</p> <p><b>witness [8]</b> 4/8 16/10 67/7 67/10 68/4 69/16 77/7 77/17</p> <p><b>witnesses [9]</b> 1/11 1/22 15/10 17/9 33/10 33/12 77/9 77/12 77/15</p> <p><b>won't [4]</b> 33/11 36/21 45/16 67/18</p> <p><b>wonderful [1]</b> 36/4</p> <p><b>word [1]</b> 70/8</p> <p><b>work [13]</b> 9/25 10/6 13/2 15/13 16/5 28/7 50/8 66/13 69/7 72/24 73/7 74/24 78/9</p> <p><b>worked [2]</b> 39/14 71/21</p> <p><b>working [10]</b> 8/4 12/2 30/6 50/22 59/8 59/15 63/2 64/14 69/1 75/23</p> <p><b>works [4]</b> 28/13 34/8 70/17 75/16</p> <p><b>worn [1]</b> 2/4</p> <p><b>worse [1]</b> 50/19</p> <p><b>worst [1]</b> 38/3</p> <p><b>would [41]</b> 15/11 21/16 26/15 27/20 28/25 28/25 29/10 30/23 32/22 32/24 35/7 43/20 43/20 44/4 46/16 46/23 47/3 49/14 50/3 50/21 52/12 53/4 54/18 56/20 57/20 58/5 58/7 62/14 67/15 69/6 70/9 71/9 71/15 71/23 73/15 74/16 74/23 74/24 75/12 75/13</p>	<p>79/13</p> <p><b>wouldn't [1]</b> 71/18</p> <p><b>write [1]</b> 1/10</p> <p><b>written [3]</b> 20/2 43/18 78/15</p> <p><b>wrong [1]</b> 54/3</p> <p><b>wrongly [1]</b> 56/7</p> <hr/> <p><b>Y</b></p> <p><b>Yallop [1]</b> 3/10</p> <p><b>yeah [6]</b> 19/5 31/19 55/5 59/8 61/4 62/25</p> <p><b>years [9]</b> 19/19 26/6 26/20 28/1 39/14 39/17 41/3 51/5 72/24</p> <p><b>Yep [1]</b> 52/9</p> <p><b>yes [35]</b> 1/3 1/7 1/18 1/23 5/8 5/10 16/2 16/7 16/11 16/16 17/4 21/7 23/6 30/25 34/4 39/13 40/7 43/22 44/6 46/24 55/20 59/6 66/17 66/22 67/15 68/2 68/8 68/15 68/19 69/18 70/3 71/12 71/20 74/14 75/25</p> <p><b>yet [2]</b> 61/6 64/21</p> <p><b>York [1]</b> 13/20</p> <p><b>you [168]</b></p> <p><b>you'd [1]</b> 77/6</p> <p><b>you'll [1]</b> 1/9</p> <p><b>you're [9]</b> 17/2 37/16 52/24 55/25 66/4 70/7 70/21 74/3 74/10</p> <p><b>you've [8]</b> 17/24 47/21 50/5 54/20 65/14 67/1 72/13 74/6</p> <p><b>young [1]</b> 24/4</p> <p><b>your [28]</b> 1/10 1/13 15/9 17/5 17/22 17/25 23/2 25/1 25/10 25/15 29/5 34/1 45/4 53/4 55/2 60/21 64/8 64/8 64/8 66/8 66/9 66/10 67/1 69/4 70/9 74/7 77/5 78/24</p> <p><b>yourself [1]</b> 25/13</p>		
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