

OPUS2

Scottish Covid-19 Inquiry

Day 15

November 23, 2023

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Thursday, 23 November 2023

(10.00 am)

THE CHAIR: Good morning, everybody.

Right. Now, Mr Gale.

MR GALE: Good morning, my Lord. The first witness today is

Gillian Grant. She is one of three witnesses who will

be giving evidence today from -- I'll just call them the

"Skye Care Home Group".

THE CHAIR: Very good. Thank you very much indeed.

MR GALE: The statement reference is SCI-WT0142-000001.

MS GILLIAN GRANT (called)

THE CHAIR: Good morning, Ms Grant. Please take a seat and

make yourself as comfortable as you can be. You will be

asked questions by Mr Gale. So, Mr Gale, when you're

ready.

MR GALE: Thank you.

My Lord, the reference in fact should be "000002",

rather than "000001".

THE CHAIR: Very good.

MR GALE: I think we probably know the statement.

Questions by MR GALE

MR GALE: Good morning, Ms Grant. Your full name, please?

A. It's Gillian Grant.

Q. The Inquiry is aware of your personal details and your

contact address and also you can confirm that you've

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provided a statement to the Inquiry, the reference I've

just given, and that statement, together with the oral

evidence that you will give today, will be the evidence

from you for the Inquiry to consider?

A. Yes.

Q. And you're agreeable that your evidence is recorded for

that purpose?

A. Yes.

Q. Thank you. Now, you're here to talk about your

grandmother.

A. That's correct.

Q. And I think you refer to her as your "gran".

A. Yes, or "grandma".

Q. That probably makes things a little easier because

I think you're aware there is a restriction order in

place so that you cannot name your grandmother in terms

or indeed any other members of the family or indeed any

other persons, so people who may have been carers for

your grandmother, but you can name the location where

your grandmother was in care.

A. Okay.

Q. We know that your grandmother sadly passed away on

4 November 2020 and she was 91 when she died.

A. That's correct, yes.

Q. And she was in a care home -- we'll come to the care

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home in a minute -- but she was in a care home when she died and we are obviously aware of the -- some details about that care home and I'll ask you a little about that.

But, first of all, can I ask you a little background about your grandmother? You describe her in paragraph 4 as "a very mischievous little old lady".

A. Yes.

Q. You say she was great fun, she was talkative, and before going into care, she lived just around the corner from you and you've always had a very close relationship; is that right?

A. Yes, we did. Yes.

Q. You say that you loved her and you miss her very much.

A. I do, yes. Yes.

Q. Prior to the pandemic, she lived in sheltered accommodation, where she'd been for between 18 and 20 years?

A. Yes.

Q. And I think she was very settled there?

A. She was. She was very happy there, yes.

Q. And again it was in the vicinity of you, and you could pop in and see her regularly?

A. I could, yes.

Q. And, as you say, she was -- you say in paragraph 8 she

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was particularly happy living there.

A. Yes.

Q. There was, however, a deterioration in her condition and she struggled to appreciate the nature of the pandemic when it struck in 2020?

A. Yes. She --

Q. Could you just explain the difficulties that she had in relation to that?

A. Yes. She'd suffered from quite a lot of pain in her legs and her back and she had some falls, but she also had a mild bit of dementia, which meant she was forgetting some things, like taking her pills and just general things. She had difficulty with dates and times and what day of the week it was. But with regards to the pandemic, she just found it very hard to understand what was going on with regards to looking at the television. She didn't really understand the information that was coming across from the media. She was also very hard of hearing so it was difficult for her to understand the television at the best of times.

Q. Did you try to explain some of these things to her?

A. We did. As a family, we tried to explain it as best we could. I tried to explain it by writing letters to her. Her eyesight wasn't great either so I would type letters in big bold writing to try to explain things as best

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1 I could. But I think a mixture of the mild dementia,
 2 the deafness and her eyesight, she often maybe thought
 3 that the world was still revolving outside and she was
 4 very isolated inside and thought that what was happening
 5 to her wasn't happening to everybody else.
 6 Q. Now, you've very helpfully in your statement set out the
 7 reasons why the decision was taken to move your gran
 8 into a care home. I think amongst those reasons not
 9 least was the fact that she was going a bit deaf --
 10 A. Yes.
 11 Q. -- and that she'd had a number of falls and that, as
 12 you've said, there were indications of dementia.
 13 A. Yes.
 14 Q. And at paragraph 18 of your statement -- I should say
 15 your statement will appear on the screen in front of
 16 you -- but at paragraph 18 you indicate that
 17 Social Services became involved and that they said that
 18 they felt that your gran should be in a more -- as you
 19 put it, a more regimented--type setting?
 20 A. Yes, that's correct. A paramedic actually wrote
 21 a report to the GP, and this was after they'd been
 22 called I think on two occasions and they felt that she
 23 wasn't capable of being on her own anymore. And
 24 Social Services suggested that she went into a care home
 25 and the doctor agreed with this, and my gran was quite

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1 old-fashioned in that sense, that if a doctor suggested
 2 that she did something, she pretty much thought that was
 3 the right thing to do.
 4 Q. Yes. So it was doctor's orders, was it?
 5 A. Pretty much, yes.
 6 Q. I think your parents also discussed it with your gran?
 7 A. Yes.
 8 Q. And your gran was able to appreciate it and she agreed
 9 to the move taking place?
 10 A. Yes.
 11 Q. Now, the care home that she went to, was it one that
 12 your gran had been able to see before she went in there?
 13 A. No. Unfortunately, due to the pandemic, there was no
 14 access to anybody other than residents during the time.
 15 So my gran, nor myself or any other family members were
 16 able to view the care home prior to her going into the
 17 care home.
 18 Q. One thing I think I've probably slightly forgotten to
 19 ask you. I think you and your father had a power of
 20 attorney in relation to your gran.
 21 A. That's correct, yes.
 22 Q. But also, at and around this time -- and I don't wish to
 23 get any further details about it -- but I think you were
 24 ill.
 25 A. I was, yes.

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1 Q. I think you say that, had you been healthy, you would
 2 have at least contemplated trying to take your gran into
 3 your own home to look after her.
 4 A. I would have, yes.
 5 Q. You yourself I don't think were particularly happy about
 6 the situation of your gran going into a care home?
 7 A. I think it was a concern more about the fact that it was
 8 COVID and there was a pandemic and it felt that maybe it
 9 wasn't the right time to be going into a care home. But
 10 I understood that my parents weren't fit enough to take
 11 my grandmother in and my son was a key worker at the
 12 time so it would have been quite dangerous for her to
 13 come to live with me and also I was really unwell at the
 14 time as well so there was a lot of decisions surrounding
 15 the fact why she went into the care home, yes.
 16 Q. Was one of the, I suppose, possible positives about your
 17 gran moving into the care home that she would have had
 18 a little bit more company?
 19 A. Yes, that was certainly discussed with her and that was
 20 one of the reasons she seemed quite keen to go. She did
 21 feel very isolated at that point. We as a family had --
 22 in order to protect her, had been staying away from her
 23 quite a bit because we were very, very concerned about
 24 any risk of giving her the virus at all, so she had very
 25 little interaction prior to going into the home with

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1 anybody really by way of protecting her. So I think she
 2 felt that going into the care home would be a way of
 3 being able to interact with people.
 4 Q. I think she moved into the care home between August
 5 and September 2020 --
 6 A. Yes.
 7 Q. -- so we were some months into the pandemic at that
 8 time.
 9 A. That's correct.
 10 Q. Prior to that, how were you able to see your gran?
 11 Were you able to go to her home and, if so, what
 12 precautions did you take when you went to see her?
 13 A. I did go to see her a couple of times just before she
 14 went into the home. When we were obviously under
 15 lockdown I didn't go to see her and then, when we came
 16 out of lockdown, I went to see her and I was very, very
 17 cautious. I would usually take -- well, I always took
 18 a COVID test before I went to see her. I always wore
 19 a mask when I was visiting her, which was very difficult
 20 because of her hearing issues. She often lipread so
 21 that posed a lot of problems. But I was just so
 22 terrified that I would give her the virus that I did
 23 everything in my power to make sure that didn't happen.
 24 Q. At paragraphs 25 and 27 of your statement, you indicate
 25 that your gran was a bit upset about the move and

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1 somewhat scared I think is how you put it.
 2 A. Yes.
 3 Q. But she wanted to go ahead with it, partly because her
 4 doctor had recommended it. Can you explain perhaps how
 5 she manifested her upset and scaredness about it?
 6 A. Yes. I think this was probably the day before she went
 7 to go. I'd gone round to help her pack her things.
 8 She'd asked me to come round and I think naturally the
 9 fear was starting to set in of the unknown. Under
 10 normal circumstances, most people would have been able
 11 to go to see where they were going to live and that
 12 would have probably settled her a lot more. She would
 13 have known where she was going, what it was like, what
 14 the people were like. But because she knew none of
 15 that, she was leaving her home of 20 years to go and
 16 live somewhere completely unknown. Like I said, she did
 17 have mild dementia, so that complicated things. She
 18 couldn't take most of her belongings, she could only
 19 take one suitcase, and she wasn't going to be able to
 20 see any of her family members at all for a period of ten
 21 days because she had to go into isolation and she knew
 22 she would have to stay in this one room that was not
 23 known to her or familiar to her for those ten days, so
 24 she was scared.
 25 Q. And you yourself took her, as I understand it, to the

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1 care home on that day?
 2 A. I did, yes.
 3 Q. And effectively you had to drop her off there?
 4 A. Yes.
 5 Q. And leave her there?
 6 A. Yes.
 7 Q. Do you know what the restrictions were, the guidance at
 8 that time about entering the care home?
 9 A. I don't know what the official restrictions were, but
 10 the care home's restrictions were that nobody was
 11 allowed to come in apart from residents and staff.
 12 Q. And potentially a new resident --
 13 A. Yes.
 14 Q. -- was allowed to come in but --
 15 A. But she had to go straight to her room and isolate.
 16 Q. She was required to isolate for -- I'm sorry, what
 17 period?
 18 A. Ten days.
 19 Q. Ten days?
 20 A. Yes.
 21 Q. Now, you mentioned earlier that you wrote your gran
 22 letters.
 23 A. Yes.
 24 Q. That's probably a novel concept for us now but one we
 25 should encourage. You wrote to her and told her about

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1 the restrictions and about the isolation, I think; is
 2 that right?
 3 A. I did. I wrote to her and told her a lot of things
 4 about the care home, about the restrictions, as many
 5 nice things as I could to try and put her at ease, and
 6 anything I could tell her about the care home and how
 7 things would work, just so that she fully understood
 8 what was happening.
 9 Q. And obviously while she was in isolation you were not
 10 able to visit her?
 11 A. No, I could visit her through the window -- at the
 12 window because we were lucky enough that she was on the
 13 ground floor, but other than that, no.
 14 Q. Did you visit her when she was in isolation and see her
 15 through the window? Were you able to do that?
 16 A. I did, yes.
 17 Q. There was I think at that time some suggestion of the
 18 possibility of garden visits.
 19 A. That's correct, yes.
 20 Q. And how was that communicated to you?
 21 A. We were told that before she went into the home, that
 22 she would be allowed to have one person nominated for
 23 garden visits and she was to decide who that would be.
 24 So she asked me to be her named person for garden visits
 25 and they said that once she was out of isolation, they

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1 would arrange for garden visits. We weren't told --
 2 I don't recall being told exactly how often we would get
 3 garden visits, but, as I say, they said that when she
 4 came out of isolation we would be allowed to have
 5 arranged garden visits with her.
 6 Q. Now, you tell us about the home that your gran went to
 7 at paragraphs 30 and following. It was --
 8 Mavisbank Care Home, I think --
 9 A. That's correct.
 10 Q. -- was the name of the home that she went to. We can
 11 read that section and we will hear a little more about
 12 your views on the care home as we proceed.
 13 You were able to have some garden visits and you
 14 refer to these at paragraphs 43 and 44 of your
 15 statement. The one thing we've heard already, Ms Grant,
 16 is a lot about garden visits and the downside of garden
 17 visits, the weather in particular and distancing that
 18 one had to keep from a loved one, so this is something
 19 we are conscious of. But you say at paragraph 43 in
 20 relation to garden visits that it felt as if you were on
 21 a prison visit and "it felt very inhumane, as though you
 22 weren't trusted to touch your loved one". I think you
 23 were under supervision --
 24 A. Yes.
 25 Q. -- when you were there, but one of the things you

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1 observed in that period of time was that you thought
 2 your gran had lost weight?
 3 A. Yes, I actually bought her a jacket, a coat, because she
 4 had lost weight. The coat never reached her.
 5 Q. This was the disappearing coat that you talk about in
 6 your statement that didn't get to her?
 7 A. That's correct. It didn't get to her. It was
 8 a brand-new coat that still had the price tag on, just
 9 in case she didn't like it, but when I handed it in to
 10 the care home, it never got to her and there was no
 11 explanation for that. So she had to just wear one that
 12 she already had, so it was far too big for her. It
 13 drowned her. But, yes, because it was so cold, she just
 14 had to wear it. The garden visits were very —
 15 "inhumane" is the only way I can describe it. The first
 16 thing she wanted to do, because she didn't understand,
 17 was come towards me and hug me, and I had to hold my
 18 hand out and stop her, which felt awful. We were
 19 watched over the entire time, as if we weren't trusted.
 20 Q. Was your gran able to understand why you were having to
 21 put your hands up and ask her to keep distance?
 22 A. I don't think so, not really.
 23 Q. And one of the points you make in paragraph 43 — and
 24 again it's a point we've heard from other witnesses —
 25 is that you felt as if you weren't being trusted and you

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1 say, "which, in itself, is crazy", as the last thing
 2 that you would want to do is to put somebody at risk.
 3 A. Yes. It felt as if we were being watched over to make
 4 sure that I didn't take my mask off or hug her or go too
 5 close to her. And I thought — for a start, I tested
 6 myself before I went for the visit and the last thing
 7 that I would want to do was put my grandmother in
 8 danger. So the fact that this staff member had to watch
 9 over us the whole time that I was there just seemed like
 10 utter madness and a waste of resources that could have
 11 been spent elsewhere. This person could have been going
 12 and helping somebody that needed help while I was
 13 sitting with my grandmother, looking after her
 14 effectively. They didn't have to be there watching me.
 15 Q. Yes. Just one point in fact in paragraph 41, can I just
 16 ask you about? You mention there that I think your gran
 17 had said to you that she'd been taken for a shower and
 18 you describe what — well, you said, "Oh, well, that's
 19 good", and then your gran explained what the shower
 20 comprised. Can you just tell us what that was, please?
 21 A. Yes, I said to her, "That's good you had a shower", and
 22 she said, "No, they took me and they threw a big bucket
 23 of water over me". And people with mild dementia — she
 24 had a habit of sometimes telling little tales and
 25 stories, so at first I thought maybe that was something

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1 like that, but it stuck in my mind because I thought it
 2 was a very odd thing for her to say. I've since spoken
 3 to quite a lot of people with relatives in the home and
 4 people that have worked in the home and I really do
 5 think that that might have been the case, that that did
 6 happen.
 7 Q. Thank you. You have also expressed a concern about
 8 a lack of care in the home, and one instance depending
 9 on, I suppose, whether your gran was telling tales or
 10 whether she was being accurate about the shower — but
 11 I think also the coat which you delivered for her and it
 12 never apparently reached her.
 13 A. Yes.
 14 Q. And also you tell us about a situation when she was
 15 having a meal.
 16 A. Yes.
 17 Q. Can you just tell us about that, please?
 18 A. Yes, I'd gone to visit — I'd been passing one night.
 19 Usually I had a whiteboard that I took with me that
 20 I could write messages on when I stood at the window
 21 because she obviously couldn't hear me, so if there was
 22 anything that I needed to say to her and that was
 23 important, I would write it on the whiteboard. But
 24 I just happened to be passing that night, I hadn't
 25 planned to drop by and I decided to go past anyway and

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1 go to the window. And they brought her dinner to her
 2 while I was there, and it was a plate of mince and
 3 chips, which I thought was an odd dinner to begin with,
 4 but she started to eat it, and she had a great appetite,
 5 my gran — she was a tiny little woman but she had
 6 a great appetite — and she started to eat this meal.
 7 And I looked down at it and the mince was pink, it was
 8 raw, and between her deafness and the window, I didn't
 9 want to panic her and I knew that — and I didn't have
 10 the whiteboard. I didn't know how to communicate to her
 11 not to eat it and if I just started hammering at the
 12 window and flapping my arms, she would have panicked,
 13 she wouldn't have understood what I was saying, and she
 14 was still eating away at it.
 15 We had issues with the care home if we went to the
 16 door that they didn't answer it. There was a day that
 17 my mum had gone and it had taken over 40 minutes for
 18 them to answer the door. By the time I would have gone
 19 to the door to tell them that there was an issue with my
 20 grandmother's meal, she would have eaten the whole
 21 thing, so I felt helpless and I just had to stand there
 22 and let her continue to eat it.
 23 Q. Did you make any representations about that to anybody
 24 in the care home?
 25 A. I went in there and spoke to them afterwards and they

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1 said that they would deal with it.
 2 Q. I suppose on the basis that your grandmother had eaten
 3 it --
 4 A. Yes.
 5 Q. -- that was a little bit late perhaps.
 6 A. Exactly.
 7 Q. Just a little bit about PPE in the home. You talk about
 8 this in paragraph 48 of your statement and you make
 9 certain comments about the PPE that was being used.
 10 Perhaps you could just explain what your -- if you had
 11 a concern about the PPE that was being used --
 12 A. Yes.
 13 Q. -- by the carers within the care home.
 14 A. Yes, it was very inconsistent. You know, sometimes you
 15 would see staff with aprons on, sometimes you would see
 16 them with gloves on. I don't ever recall seeing anybody
 17 using hand sanitiser. But what did really upset me was
 18 the use of masks. They would come into my grandmother's
 19 room either with their masks on or round their chins and
 20 quite often they would come up to her and they would
 21 speak to her and, if they had their mask on and she
 22 couldn't hear them, they would take them down to speak
 23 to her because they were frustrated about her not being
 24 able to hear, and they would maybe only be this far away
 25 from her face (Indicates) and then they would talk to

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1 her. And I remember being on the outside of the window
 2 thinking, "Well, they could have been at home kissing
 3 their children that have been at school or their husband
 4 that's been at work or they've been at the supermarket,
 5 they could have been anywhere and they could be carrying
 6 this virus and yet I'm on the other side of this window
 7 and I'm not allowed in there", and it didn't seem right
 8 to me and they were putting my grandmother in danger.
 9 Q. You yourself at paragraph 50 say that when you went to
 10 visit her you always did self-test.
 11 A. That's correct, yes.
 12 Q. Do you know what testing, if any, was done of your gran?
 13 A. As far as I am aware, the only time she was ever tested
 14 was when she was tested and was tested positive.
 15 Q. I'll come to that in a moment. And you do mention that
 16 you were aware -- this is paragraph 51 -- that you were
 17 aware of an outbreak of COVID within the home and that
 18 was an outbreak that led to a number of deaths within
 19 the home.
 20 A. That's correct.
 21 Q. Again, a feeling that we've heard other witnesses talk
 22 about is one you refer to in paragraph 52, which is
 23 guilt. I think you not only say guilt but you also say
 24 anger.
 25 A. Yes.

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1 Q. Can you just explain those feelings, if you can?
 2 A. Yes. I think I was very angry about not being able to
 3 go in and see her and not be with her, and there was
 4 a lot of anger towards the staff and the staff's
 5 attitude, the way they behaved. I think actually the
 6 next paragraph --
 7 Q. Yes, we get the Indian restaurant visit in the next
 8 paragraph.
 9 A. Yes.
 10 Q. Tell us about that.
 11 A. Yes. I was at the window with my son and his girlfriend
 12 one night and there's an Indian restaurant pretty much
 13 across the road from the care home. I think it was the
 14 staff changeover time and all the staff came out of the
 15 building -- there was about ten or 12 staff members and
 16 they all left and went straight over to the Indian
 17 restaurant. And I remember thinking to myself, "Well,
 18 hang on a minute, so they're all away to socialise and
 19 have a lovely time in this Indian restaurant". It felt
 20 like an unnecessary risk. They would all be returning
 21 the next day and putting everybody in the care home at
 22 risk. And all these poor people that were in the care
 23 home had been locked up there for months on end with no
 24 outside, other than the garden visits, interaction, and
 25 my gran hadn't left there since she got in, and all she

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1 wanted to do was go for a bit of shopping or a cup of
 2 coffee and she wasn't allowed to, yet these staff
 3 members were allowed to do whatever they wanted and they
 4 had no regard for the safety of the people they were
 5 caring for.
 6 THE CHAIR: If I can be pedantic at this point, it's
 7 genuinely just pedantry on my part: we know that this
 8 must have been August and September and November of 2020
 9 for obvious reasons.
 10 A. That is correct.
 11 THE CHAIR: I will be honest, I cannot remember exactly what
 12 the state of guidance was at that time. But my
 13 recollection, which may be incorrect, is that when --
 14 and it's purely based on personal experience -- is that
 15 when the restrictions were eased and you were allowed to
 16 go to a restaurant, there was a limitation on the number
 17 of people that could go. I think it was four although
 18 I may be wrong in relation to that. The reason I ask
 19 this is because you say in the paragraph I'm just
 20 reading that ten or 12 of them headed to an Indian
 21 restaurant, and I think you inferred or you said that
 22 they actually -- you saw them going into the Indian
 23 restaurant.
 24 A. Hmm--hmm.
 25 THE CHAIR: Of course, we don't know what they did when they

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1 got in there and what the table seating arrangements
 2 were, but is your recollection the same as mine, that at
 3 that time the limitation on going as a group or whatever
 4 it was was four people?
 5 A. Yes, and I believe I remember us talking about that at
 6 the time.
 7 THE CHAIR: Yes, all right. A small point but I wanted to
 8 be clear about that. Thank you.
 9 MR GALE: Thank you, my Lord.
 10 We now move on to an area which is headed -- we'll
 11 just call it "do not resuscitate".
 12 A. Yes.
 13 Q. I understand this is a particular concern for you and
 14 a point that you want to get across to the Inquiry.
 15 We'll look at it in a little detail. But so that we
 16 know the timeline for this, it was a few days before
 17 your gran died that you got a call to say that a member
 18 of the staff had tested positive for COVID.
 19 A. That's correct.
 20 Q. Was that the first time you got that information?
 21 A. Yes.
 22 Q. And I think you say that that member of staff worked
 23 a lot on the ground floor and that your gran was on the
 24 ground floor.
 25 A. Yes, and apparently the staff member had worked quite

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1 a lot with my gran.
 2 Q. Okay. And then the following day the care home
 3 contacted you to say that your gran had tested positive
 4 but that she was fine and that they would keep you
 5 updated?
 6 A. That's correct, yes.
 7 Q. Perhaps one point leading on to another, you do say, as
 8 we progress through the next few paragraphs of your
 9 statement, about your understanding that the care home
 10 had given your gran a mild sedative.
 11 A. Yes, this was a good few days later. Basically they
 12 advised that she was still relatively well but that her
 13 oxygen levels were lowering, but that she was on oxygen
 14 through a nasal cannula and that every time she took it
 15 out, which she had to do when she was going to the
 16 toilet because it was an oxygen canister, that the
 17 oxygen levels were naturally dropping. And I think the
 18 main reason for this was because she was forgetting to
 19 put it back in when she came back from the toilet. So
 20 rather than any other way of dealing with that
 21 situation, their way of dealing with it was to
 22 administer a mild -- what they said was a mild sedative,
 23 to stop her I think getting up so much more than
 24 anything else.
 25 Q. Yes, and you've very helpfully summarised that, but it's

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1 in effectively paragraphs 57 through to 59 of your
 2 statement.
 3 Just in relation to this, in paragraph 59 you say
 4 that your mum agreed to that, which is the
 5 administration of the mild sedative.
 6 A. Yes.
 7 Q. What was your reaction to being made aware of that?
 8 A. At the time I was okay with it because it had already
 9 been done. You know, there was no point in making
 10 any -- you know, changing anything at that point. And
 11 we were advised it was a mild sedative and so we thought
 12 maybe it would make her more comfortable. In hindsight,
 13 I realise that (a) there is more things that could have
 14 been done, she could have been given an oxygen mask,
 15 somebody could have helped her, you know, make sure she
 16 went to the toilet and replaced it, and also now that
 17 I know what she was given, it makes no sense to me why
 18 she was administered it.
 19 Q. I think you go on to say that your understanding of what
 20 she was given, it wasn't a mild sedative.
 21 A. That's correct.
 22 Q. What about your mother's role in that?
 23 A. Well, my mother was not power of attorney so she
 24 shouldn't have -- the care home should not have called
 25 her to ask her what medication they could have provided

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1 to my grandmother. You know, it's not my mum's fault at
 2 all but the care home -- I felt that they actually
 3 possibly exploited that situation a little bit, that
 4 they phoned my mum out of the blue and put her on the
 5 spot a little bit by asking her that.
 6 Q. Right, thank you. This brings us on to do not
 7 resuscitate, and what was your understanding when your
 8 gran was in the care home about any do not resuscitate
 9 notices that may have existed in relation to her?
 10 A. My understanding was that there was no do not
 11 resuscitate order against my grandmother. I was asked
 12 if I would put one in place and I categorically said
 13 "No". The reason for that was that, whilst my
 14 grandmother still had mild dementia, she still had
 15 capacity to make those kind of decisions. She would
 16 forget things, you know, she maybe sometimes mixed up
 17 certain things, but she would still have full
 18 understanding of something like that. So I didn't
 19 believe it was my place to make that kind of decision
 20 for her unless she was not conscious or anything like
 21 that, in which case then that might have been a decision
 22 I would have made. But I --
 23 Q. Or presumably if she had been able to discuss it with
 24 you?
 25 A. That's correct, yes.

24

1 Q. You subsequently ascertained that there was a do not
2 resuscitate notice in relation to your gran?
3 A. That's correct.
4 Q. Can you just explain how you came by that information?
5 A. We had heard that there was a possibility that there was
6 a do not resuscitate order -- after my grandmother had
7 died, we'd heard from the solicitors that there was talk
8 that there was a do not resuscitate order on my gran's
9 file, but nobody had ever seen it so we didn't know the
10 full facts of it. But when I actually sat with the
11 Inquiry team to give this statement, my solicitor
12 produced the do not resuscitate order and it had my name
13 on it and it was dated on 2 November and it --
14 THE CHAIR: Was it signed?
15 A. I've got a copy of it but it's kind of block capital
16 letters with my name.
17 THE CHAIR: So, in other words, not your normal signature?
18 A. Not my signature at all.
19 MR GALE: Was the possibility of a DNR notice ever discussed
20 with you by the care home?
21 A. Yes, it was.
22 Q. And could the care home have understood from the
23 discussion that they had with you that you might be
24 authorising a DNR notice for your grandmother?
25 A. Absolutely not. My exact words to them were

25

1 categorically "I do not want to put a do not resuscitate
2 order in place".
3 Q. You tell us in paragraph 65, which is a lengthy
4 paragraph about this, that the DNR is incomplete.
5 A. Yes.
6 Q. How is it incomplete, beyond the point that you've just
7 clarified with his Lordship about your signature?
8 A. There's a section in it that asks if the patient is
9 aware of the do not resuscitate order being in place and
10 there's a box to tick "Yes" or "No", and neither box is
11 ticked.
12 Q. Right. I think you also say that it wasn't dated.
13 A. No, it is dated.
14 Q. Sorry --
15 A. Sorry, that part is not dated, so that part should be
16 ticked "Yes" or "No" and it should be dated and it
17 isn't.
18 Q. Have you any idea how this DNR notice came about?
19 A. Absolutely no idea whatsoever.
20 Q. Did you make any representations when you became aware
21 of it, obviously ex post facto of your grandmother's
22 death?
23 A. It wasn't that long ago that I actually got the
24 document, so, no, not yet.
25 Q. I think you've said that you would be happy if the

26

1 Inquiry were provided with a copy of it --
2 A. Yes.
3 Q. -- and I think we would be grateful to see that.
4 A. Yes.
5 Q. Sadly we know that your gran died on 4 November --
6 A. Yes.
7 Q. -- and I know from what you say at paragraph 115 -- and
8 it's not necessary for you to look at this -- that you
9 have an issue about the time of her death --
10 A. I do, yes.
11 Q. -- by about ten minutes, I think --
12 A. Well, more than that.
13 Q. Well, you think it may be very different --
14 A. Yes.
15 Q. -- but ostensibly about ten minutes?
16 A. Hmm.
17 Q. Now, we know -- and I don't want to go through this in
18 detail because I'm sure it's very upsetting for you --
19 but you were called by the care home on the day of your
20 grandmother's passing, but she'd already passed away?
21 A. They didn't say that to me on the phone, no. They said
22 that she was deteriorating and, as per my previous
23 instructions that had been in place all through the time
24 she had COVID, I said, "Have you called an ambulance?",
25 and they said "No", and I said, "Well, can you call an

27

1 ambulance?", and they said, "She doesn't ..." -- they
2 said, "She doesn't want that", and I said, "Well, I want
3 that. Can you please do that?", and they said, "I think
4 it's too late for that", and I said, "Well, what do you
5 mean?", because the last interactions I'd had with them,
6 they'd told me she was absolutely fine and the last time
7 I'd seen her she was walking about, eating and drinking,
8 absolutely fine, and that was about 12 hours previous,
9 so I couldn't understand why I was getting this call.
10 Q. Right.
11 A. And they said, "No, I think it's too late to call an
12 ambulance". I got the impression I was getting nowhere
13 with this nurse on the phone, so I said, "Can I come in
14 to see her?", and the response I got was, "If you want",
15 which I thought was quite an odd response to have. So
16 I went straight to the care home with my mother and my
17 uncle.
18 Q. And when you got there?
19 A. When I got there, we walked in the door and we were told
20 that my grandmother had passed away ten minutes prior to
21 us arriving.
22 Q. One of the points you make in your statement is that
23 there was, as you put it, a young girl who had been
24 sitting with your grandmother all night.
25 A. She claimed she had been sitting with my grandmother all

28

1 night, yes.

2 Q. This is paragraph 69. You put it as that she claimed

3 that that had been the case. Do you have reason to

4 disbelieve that?

5 A. There's a few reasons that I disbelieve that, one of

6 which -- what I don't understand is, if she'd been

7 sitting with my grandmother all night, then the only

8 reason that would happen would be -- is if she thought

9 my grandmother was dying. That's the only reason

10 a member of staff would be allocated to sit with

11 somebody all night. And if that was the case, then why

12 would they not have contacted us as a family? The only

13 reason to be allowed entry to the care home at that

14 point would be if somebody was at end of life and that

15 would be the only reason she would have been sitting

16 with my grandmother all night and we weren't contacted

17 at all.

18 The other reason was that there was only three

19 members of staff on that night and she was one of them,

20 and I could see how busy the care home was at that

21 point, and if she had been sitting with my grandmother

22 all night, then I don't know how the other two staff

23 members were possibly coping with all the other

24 residents.

25 Q. Okay. You also noticed when you saw your gran that she

29

1 was wearing a jumper in bed.

2 A. That's correct, a woollen jumper.

3 Q. That's unusual presumably?

4 A. Yes. So this was by this point 20 to 5 in the morning

5 and she was wearing a woollen jumper.

6 Q. And you feel that she may have been dead for longer than

7 you were told?

8 A. Yes, we all felt that. Her mouth and her eyes were wide

9 open and I -- one of the first things I tried to do was

10 to close them because she didn't look at peace and

11 I couldn't. My mum, who is a retired nurse, also tried

12 to do the same and she couldn't. She was very cold to

13 the touch, and considering they told us that she had

14 only passed away 20 minutes ago by that point, that

15 didn't seem right to me. The colour of her skin wasn't

16 right either. There was various factors that led all

17 three of us to believe that she'd been dead for

18 a considerable period of time.

19 Q. Now, you did eventually see some of your gran's medical

20 notes --

21 A. Yes.

22 Q. -- and I think one of the things that you noted from

23 that was that there was a marked or noted deterioration

24 in her condition at 11.00 pm the previous evening --

25 A. Yes.

30

1 Q. -- and then again at midnight --

2 A. Yes.

3 Q. -- there was a further deterioration, and you posed the

4 question as to why there wasn't a call to you at that

5 time?

6 A. That's correct, for two reasons, because in the first

7 instance I would have requested that she be sent to

8 hospital if I'd known that there was a deterioration and

9 I would have been with her.

10 Q. Now, just on the question of sedation, you have

11 ascertained that the sedative that she was given is one

12 called midazolam.

13 A. That's correct.

14 Q. And we've heard about midazolam from other witnesses,

15 and I think it is associated with end-of-life care.

16 A. She was also given two other drugs that were part of an

17 end-of-life protocol.

18 Q. What's your reaction to learning that?

19 A. Very angry and very upset about it. From the medical

20 notes that I've read, the GP had called on the 3rd, the

21 day before she died, to check on her condition and the

22 care home had actually said that she had improved

23 slightly from the day before and that her observations

24 had got better. The GP had actually said that, whilst

25 they had got better, they were still considerably --

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1 still a bit poor and would she perhaps benefit from

2 going to hospital. The care home had stated that us as

3 a family didn't want her to go to hospital and that my

4 grandmother didn't want to go to hospital, but none of

5 this is anything that we had said. We never once said

6 that we didn't want her to go to hospital. I'd always

7 said the exact opposite. And if my grandmother had said

8 that she didn't want to go to hospital, then I, as power

9 of attorney, could have overruled that.

10 Also it said at this point there was a DNR in place

11 in the medical notes, which again I've only had sight of

12 recently so I wouldn't have known that at the time. So

13 the care home staff said, "No, the family want her to

14 remain at the care home", and the doctor said, "Fair

15 enough. We'll leave things as they are. We will give

16 you these drugs", and it was the midazolam and the two

17 other drugs which are part of an end-of-life protocol --

18 "just in case" was the terminology used in the medical

19 notes, but there wasn't specific instructions to

20 administer them at that point. So I don't know at what

21 point the care home chose to administer those drugs but

22 it must have been at some point between the afternoon of

23 the 3rd and the early hours of the 4th.

24 Q. Yes. And, just to be clear, you weren't consulted in

25 any way about that?

32

1 A. Not at all, no.
 2 Q. Just going to paragraph 82, if I may of your statement,
 3 this is after your gran's death and you recall sitting
 4 in her room and watching staff go out from her room to
 5 other rooms, as you put it, without changing their PPE.
 6 A. Yes.
 7 Q. You say that struck the fear of God into you.
 8 A. It did.
 9 Q. Can you explain why?
 10 A. I was sitting there with my grandmother's body in front
 11 of me when I should have been grieving and all I could
 12 think was, "They're just spreading this virus around
 13 this home". My grandmother was the first person to die
 14 at Mavisbank and I just kept thinking, "Everybody else
 15 here is going to die if they don't stop doing what
 16 they're doing", and I kept on thinking, "What do I do
 17 here? How do I stop this?". There was no care or
 18 attention at all.
 19 Q. Right. I think you've mentioned that there were
 20 a number of deaths during this outbreak of COVID within
 21 your grandmother's care home.
 22 A. Yes.
 23 Q. Were they all within that same period?
 24 A. I believe so. There was 15 in total.
 25 Q. 15 in total, thank you. And your grandmother was the

33

1 first?
 2 A. That's correct.
 3 Q. Just on the impact, you talk about in paragraphs 83 and
 4 following — there's perhaps again two aspects to
 5 this — you say that "There was no support from the
 6 home" after your gran's death and that "they were almost
 7 borderline rude".
 8 A. Yes.
 9 Q. Can you explain how you formed that impression?
 10 A. I think I called the home the next morning, as I recall,
 11 to ask what was happening about it, what they were going
 12 to do about it, and the manager was quite rude on the
 13 phone.
 14 Q. You say you called them to ask "what they were going to
 15 do about it". What they were going to do about what?
 16 A. About the outbreak, you know, if there was anything that
 17 they would do. I think I asked how many staff members
 18 had been on the night before because I was quite
 19 concerned about that as well. I'd only seen three staff
 20 and I felt that that wasn't enough. And I just didn't
 21 feel there was much in the way of warmth or condolences
 22 or care about what was happening.
 23 Q. I think that set you off on a number of communications
 24 that you refer to in your statement, including calls to
 25 the Care Inspectorate.

34

1 A. That's correct.
 2 Q. What was your mindset about calling the
 3 Care Inspectorate? Why were you thinking about doing
 4 that?
 5 A. I just felt somebody had to do something to make sure
 6 that there was as little spread of this virus as
 7 possible within the care home and I thought that the
 8 Care Inspectorate were the right people to contact to
 9 make sure that that happened.
 10 Q. I think you subsequently ascertained that there was
 11 a Care Inspectorate report which had been done shortly
 12 before, on 26 October, and that's in paragraph 89 of
 13 your statement. We can read that.
 14 A. Yes.
 15 Q. And subsequently you put in a complaint to the
 16 Care Inspectorate that you refer to in paragraph 91 with
 17 four grounds of complaint.
 18 A. Yes.
 19 Q. Can you just read those four grounds of complaint to us,
 20 please?
 21 A. Yes, so it was that the care home didn't give us
 22 satisfactory explanation about my grandmother's health
 23 deterioration and the actions taken prior to her passing
 24 away, that there weren't enough staff on on 4 November
 25 to care for all of the residents and that they did not

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1 maintain my grandmother's dignity by ensuring her
 2 clothes had been changed into appropriate nightwear and
 3 that, on 4 November, the staff were observed by three
 4 family members not wearing PPE despite the care home
 5 having an outbreak of COVID—19.
 6 Q. As you say, the Care Inspectorate upheld three out of
 7 the four of your complaints.
 8 A. That's correct.
 9 Q. Perhaps you can just clarify which one they didn't
 10 uphold because it's probably easier to look at that
 11 rather than see the ones that they did.
 12 A. Yes, they didn't agree with the fact that there weren't
 13 enough staff members on duty on the night of my
 14 grandmother's death.
 15 Q. Thank you. The Care Inspectorate did a subsequent
 16 inspection on 11 November, I think —
 17 A. That's correct.
 18 Q. — which you refer to at paragraph 93, and what did you
 19 take from that, if anything?
 20 A. Yes, so the reason that the majority of my complaint was
 21 upheld was because they observed exactly what I observed
 22 with regards to the staff not adhering to PPE practices.
 23 Also, one of the staff members that I had seen on the
 24 night of my grandmother's death didn't even have
 25 a uniform on, never mind PPE. He had a very dirty white

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1 T—shirt and jogging trousers on, and when they visited,
 2 he was wearing exactly the same thing. He was exactly
 3 as I had described him to be, and that's why they upheld
 4 that part of the complaint.
 5 Q. Can we have a break, sorry?
 6 Q. If you wish.
 7 THE CHAIR: If we need a break to do that, we can do that.
 8 We're close to the time when we need to give the
 9 stenographers a break anyway so would 15 minutes be
 10 acceptable?
 11 MR GALE: Yes.
 12 A. Thank you, sorry.
 13 (10.57 am)
 14 (A short break)
 15 (11.14 am)
 16 THE CHAIR: Right. Mr Gale, when you're ready.
 17 MR GALE: Thank you, my Lord.
 18 At paragraphs 100 and 101 of your statement,
 19 Ms Grant, you make two further general comments. You
 20 say that:
 21 "It was such an unexpected thing for the whole
 22 world, but you expect to be by their bedside and holding
 23 their hand, and when you can't, it is horrible."
 24 I think we understand that.
 25 A. Yes.

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1 Q. You also say that you don't think that your gran's
 2 rights were fully considered. Can you explain why you
 3 say that?
 4 A. Yes. I feel that she wasn't considered really through
 5 the whole of the virus, you know. I think generally
 6 elderly and vulnerable people, their health was
 7 considered — you know, they were protected from that
 8 point of view, everybody was so worried about making
 9 sure they didn't get the virus, but their emotional and
 10 mental well-being wasn't considered in so many ways. In
 11 some ways the isolation and the loneliness and the
 12 confusion and the fear was almost worse than the virus
 13 itself.
 14 Q. In the course of your gran's time in the care home,
 15 did you come across the concept of essential visitor?
 16 A. No.
 17 Q. Okay. You did contemplate litigation against the care
 18 home, I think —
 19 A. Yes, I did.
 20 Q. — but that didn't go anywhere, largely because of the
 21 fact that the potential of the cost were you not to be
 22 successful was prohibitive effectively?
 23 A. Yes, we were advised to drop the legal action on the
 24 basis that the provider would take it all the way and it
 25 would cost too much money.

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1 Q. The "Lessons to be Learned" that you set out in
 2 paragraph 106 and following, again, I don't wish to
 3 suggest that these are insignificant but they are
 4 matters that we've heard from other witnesses, and if
 5 I can summarise them, one of those is your gran's
 6 isolation. The other was that you were watched over
 7 effectively with, as you see it, the suspicion that you
 8 might be somebody who could infect your gran.
 9 A. Yes.
 10 Q. You also refer to an undercurrent of, you say, sometimes
 11 neglect and abuse in care homes.
 12 A. Yes.
 13 Q. Now, that could be seen as a general comment or it could
 14 be seen as a specific comment. What are you wanting to
 15 convey by that?
 16 A. I do feel that it is specific in this case and a general
 17 comment, that there are things that happen within care
 18 homes, whether it's neglect or in some cases some forms
 19 of abuse, and unfortunately the pandemic meant that that
 20 went severely unchecked because all that was in the care
 21 home were staff members and the residents. There were
 22 no family just dropping in every now and again, meaning
 23 that things happened that wouldn't normally have
 24 happened. I think this means that in my view the entire
 25 care home system needs to be looked at when we're

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1 talking about lessons to be learned.
 2 There needs to be — the fact that I said to the
 3 Care Inspectorate about three staff members looking
 4 after 26 residents who had dementia and all sorts of
 5 care needs and they felt that was acceptable, I don't
 6 understand that. I think there needs to be some
 7 restrictions on staffing levels, there needs to be more
 8 requirements with regards to training of staff members
 9 in care homes and there needs to be some regulation on
 10 record-keeping. All the records in the care home my
 11 gran was in and certainly a lot of other ones that I've
 12 looked at are all kept by handwritten notes, and in this
 13 day and age there's hardly any institutions that are
 14 like that. Everything is digital. So I don't
 15 understand why care homes can't be the same.
 16 Q. Yes. And I think your particular concern is that you,
 17 in the case of your gran, weren't afforded the
 18 opportunity to go into the care home where you could
 19 have been a check on what might have been happening
 20 within the care home; is that right?
 21 A. That's correct. I think if this was — anything like
 22 this was to ever happen again, then I don't see why
 23 relatives should ever be locked out of care homes. If
 24 staff members can come and go and go to their own homes
 25 and supermarkets and other places, then why would it

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1 pose more of a risk for relatives to do exactly the
 2 same? Relatives, I think, would take much more care to
 3 protect their loved ones if they're coming in to visit
 4 them so I don't understand why relatives were ever
 5 locked out of care homes.

6 Q. Thank you. Just one other matter. In paragraph 109 of
 7 your statement you express the view that you didn't
 8 think or you don't think that there are enough ways to
 9 challenge guidance and instruction issued by the care
 10 home because you just had to do what they said. Do you
 11 have any suggestion as to how you feel that those
 12 challenges could be made?

13 A. Yes, I mean, there's a couple of things there. With
 14 regards to the care home, there is always this fear that
 15 if you go directly to the care home and complain about
 16 things and make yourself a trouble—making family, so to
 17 speak, that somehow that will have repercussions for
 18 your loved ones in the care home, and I think a lot of
 19 people feel that way, so you don't want to cause too
 20 much trouble directly with the care home. You're not
 21 there to protect that vulnerable elderly person within
 22 the care home 24/7 or at all in the case of the
 23 pandemic.

24 When you go to the Care Inspectorate, you make
 25 complaints and they'll go in, they'll do an inspection,

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1 they'll make recommendations, but particularly in my
 2 case, they make these recommendations, they tell the
 3 care home that they have to adhere to certain standards,
 4 they'll come back two weeks later and nothing's changed,
 5 and all they do is move the date forward another two
 6 weeks or another four weeks. Every now again something
 7 will change slightly, but then, within a few weeks
 8 again, it's slipped back down to weak standards or good
 9 standards or back down to weak standard. There's never
 10 any continuity, there's never any punishment or
 11 repercussions, and I think the Care Inspectorate system
 12 needs to be looked at completely. There needs to be an
 13 appeals procedure for a start that's not to the
 14 Care Inspectorate itself. It needs to go to somebody
 15 else — if you're going to appeal it, it shouldn't be to
 16 the same body — and there needs to be, you know,
 17 recommendations that actually go somewhere. There needs
 18 to be, you know, a punishment or fines or something if
 19 recommendations aren't adhered to.

20 Q. Yes. Well, you've clearly given that a considerable
 21 amount of thought presumably over the time.

22 A. Yes.

23 MR GALE: Ms Grant, thank you very much for the evidence
 24 you've given. It's been very helpful.

25 A. Thank you.

42

1 THE CHAIR: Yes, thank you, Ms Grant.

2 Very good. We do actually have to have a break for
 3 technical reasons which again are beyond me so I'll not
 4 try to explain them. I think probably about ten minutes
 5 or so before the next witness. Thank you.

6 (11.23 am)

7 (A short break)

8 (Section of transcript redacted)

9 (The short adjournment)

10 (2.00 pm)

11 THE CHAIR: Good afternoon, everybody.

12 Mr Gale.

13 MR GALE: Thank you, my Lord. The next witness is
 14 Micheleine Kane. Her witness statement, the reference
 15 is SCI—WT0069—000001.

16 MRS MICHELEINE KANE (called)

17 THE CHAIR: Good afternoon. Please come in and make
 18 yourself as comfortable as you can and Mr Gale will ask
 19 you some questions.

20 Yes, Mr Gale. When you're ready.

21 MR GALE: Thank you, my Lord.

22 Questions by MR GALE

23 MR GALE: Hello, Mrs Kane. How are you?

24 A. I'm okay.

25 Q. Right, your full name is Micheleine Kane?

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1 A. Yes.

2 Q. And your details are known to the Inquiry, including
 3 your contact details. You've provided the Inquiry with
 4 a statement and I've given the reference to that. The
 5 evidence that you're going to give today will be under
 6 reference to that statement and all of the evidence that
 7 you give today will be recorded and will inform the
 8 Inquiry as we make our reports and recommendations.

9 A. Yes.

10 Q. Can I remind you that there is a general restriction
 11 order in relation to certain things and in particular
 12 into naming people, including the person about whom you
 13 are going to speak, which is your mother, so please
 14 don't name anybody —

15 A. Okay.

16 Q. — or try not to name anybody, including anybody who
 17 worked in the care home where your mother was located.

18 Now, as I've indicated, you're here to talk about
 19 your mother, and she died sadly in a care home on
 20 13 May 2020?

21 A. Yes.

22 Q. And she was 73 when she died?

23 A. Yes.

24 Q. Now, you tell us a little bit about her in your
 25 statement, and your statement will appear on the screen

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1 in front of you, the various paragraphs that I make
 2 reference to. I think we know from paragraph 1 that she
 3 was one of ten children from a large family. They all
 4 remained close. You say that your mum was straight as
 5 a die, told you exactly what she thought, didn't
 6 sugarcoat anything for anybody. She and your father had
 7 a great work ethic. She was very organised, she always
 8 had the money available for the rent man, et cetera.
 9 I think you say that she loved her bingo and lived for
 10 cigarettes and coffee.
 11 A. Yes.
 12 Q. I think the cigarette room became a feature, as we're
 13 going on --
 14 A. Yes.
 15 Q. -- so we'll talk about that in a little. She was also
 16 sadly a young widow?
 17 A. Yes.
 18 Q. And I think you said that she found the death of your
 19 father -- she took that very badly?
 20 A. Yes.
 21 Q. I think you say, in paragraph 1, that a part of her died
 22 when he died.
 23 A. Yes.
 24 Q. She was also diagnosed very early with
 25 multiple sclerosis?

45

1 A. Yes, when she had my brother.
 2 Q. She worked, however, all her life, but, as you say, she
 3 started to fail physically when she got to about 60 --
 4 A. Yes.
 5 Q. -- although she didn't fail mentally?
 6 A. No, she never failed mentally at all.
 7 Q. Okay. And she moved into sheltered accommodation,
 8 I think; is that right?
 9 A. Yes.
 10 Q. But after a while, when she was in sheltered
 11 accommodation, she started to withdraw into herself and
 12 kept herself in her own room?
 13 A. She had a house. It wasn't a room, it was a house.
 14 Q. But she started to --
 15 A. Withdraw.
 16 Q. -- keep herself --
 17 A. Yes.
 18 Q. -- within that house?
 19 I think you mention at paragraph 5 that there was
 20 a concern that she was becoming depressed.
 21 A. Yes, there was.
 22 Q. You also say at paragraph 5 that you made the decision
 23 for her to go into a care home.
 24 A. Yes, she was depressed and we were concerned about her
 25 health. I had to -- before then, I had to take her to

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1 hospital and they told me that she was in such a bad
 2 condition that another couple of days and she might not
 3 have been there, so it was a big concern.
 4 Q. Yes. You say that this is a decision that you've had to
 5 live with?
 6 A. Yes, every day.
 7 Q. As you've said, there was a spell in hospital. What was
 8 that for?
 9 A. Sorry?
 10 Q. She had a spell in hospital?
 11 A. Yes.
 12 Q. What was that --
 13 A. She was depressed. She didn't want to go back to the
 14 sheltered housing. And her health was failing. She was
 15 sitting up all night, her legs were swollen. I think
 16 basically Mum was lonely in the sheltered housing.
 17 Everybody had their own lives and I think she started to
 18 feel -- and she stopped going to the bingo so she
 19 stopped socialising and withdrew into herself.
 20 Q. You tell us that after working with Social Work your
 21 mother moved into a care home in -- I think it was
 22 2016 --
 23 A. Yes.
 24 Q. -- she was moved.
 25 What you do tell us -- and this is at paragraph 6 --

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1 is that when she moved there she did settle and adjusted
 2 quite quickly.
 3 A. She was in one first, it was a council one, and she --
 4 I won't say she liked it but she adjusted quite quickly
 5 and she was a bit more herself, a lot better than she
 6 was in the sheltered housing.
 7 Q. But unfortunately that care home closed?
 8 A. Closed, aye.
 9 Q. And you had to find a change. As I understand it, she
 10 told you to choose one for her; is that right?
 11 A. Where she could smoke.
 12 Q. Yes. Really one of the factors in that choice was the
 13 availability of a smoking room. I think she had
 14 previously indicated that she wasn't too enamoured of
 15 the idea of having to go outside into the garden for
 16 a cigarette?
 17 A. Didn't matter.
 18 Q. Okay. As time progressed, as I understand it, there was
 19 a change of ownership of the care home to which she'd
 20 moved and you personally became concerned about the
 21 standard of care in that care home and you say at
 22 paragraph 15 that, had you known of the way in which the
 23 care deteriorated, you would never have put her there.
 24 A. No, I wanted her to leave then. I tried to get her to
 25 leave.

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1 Q. And I think you indicate at paragraph 16 of your
2 statement that your mother did have full capacity.
3 A. Aye, till she ...
4 Q. I think she obviously had something of a way with words
5 because ---
6 A. Yes, she didn't ---
7 Q. --- she said something about what she might like to do
8 if, as you put it, she lost her mind.
9 A. If she lost her mind, didn't know what was happening,
10 she wanted to go to Switzerland.
11 Q. And that was for, as I think you've given us the quote,
12 "to have the eternal sleep drink", so she certainly knew
13 her own mind?
14 A. My mum didn't want not remembering anything. My mum
15 was --- my mum knew everything that was going on. She
16 was absolutely sharp as a tack. I think she didn't want
17 to have no memory of things and no memory of people.
18 Obviously she was in a home that she'd seen it happening
19 to people, she knew that they didn't know --- she didn't
20 want to be that person.
21 Q. The home that she was in is called Cumbrae Care Home; is
22 that right?
23 A. Yes.
24 Q. You say at paragraph 17 of your statement --- sorry
25 paragraph 18 of your statement --- that there were hardly

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1 any activities for the residents within the care home.
2 You mentioned dancing perhaps once a week, and you say
3 that your mum started to become depressed again and
4 affected by the same sense of isolation which she'd
5 experienced in the sheltered housing.
6 A. She was better than it was in the sheltered housing and,
7 as I said, I asked her to move out of there but, as you
8 say, the smoking room became a big factor in why Mum ---
9 Mum literally lived in the smoking room and then went to
10 bed --- that was Mum's day --- and then in between then
11 the visits, but she'd always see people round her to
12 talk to. She preferred the staff at night-time and she
13 always did.
14 Q. I think you had a difficult relationship with one of the
15 nurses who --- it's not her actual name, at least I hope
16 it's not her actual name --- I think you called her
17 "Nurse Cratchit".
18 A. No, Nurse Ratched, Ratched. I didn't know who she was.
19 It was my aunts called her it to my mum.
20 Q. I think she's a character from a film called "One Flew
21 Over the Cuckoo's Nest".
22 A. Oh, right, that's who they called her.
23 Q. If that's who it is. You're quite right, it is
24 "Ratched" rather than ---
25 A. That's what they used to call her, yes --- my mum's

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1 sister who referred to her quite a lot.
2 Q. As we approached the end of 2019, you were of the view
3 I think that you wanted your mother out of that home.
4 A. Yes.
5 Q. And was that with a view to her coming back to live with
6 you or to go somewhere else?
7 A. No, there was other --- that wouldn't have been an ideal
8 choice, the one my mum was in. The other one was nearer
9 where her sisters and everything were and it was where
10 more or less the sheltered housing was, where her
11 preferred bit was, and it was a better place and she
12 would have known people in that building because a lot
13 of them were from the area she grew up.
14 Q. But it wasn't possible to make any of those
15 arrangements ---
16 A. No, because she had to go outside to smoke! And she
17 did --- what she said was, "I'm too tired to be bothered
18 moving". I wanted to move her. I had asked --- I had
19 started the ball rolling to move her.
20 Q. However --- obviously we're looking at now the time of
21 the beginning of the pandemic in 2020, but prior to that
22 you had reasonably good access to the home and to your
23 mother. You could go pretty much when you wanted, as
24 I understand it.
25 A. What do you mean, before the pandemic?

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1 Q. Before the pandemic.
2 A. Yes, aha. I went most Tuesdays and then I took my
3 grandkids every Sunday. And she's seen my --- she's seen
4 her sisters and she's seen my nephew and my niece and
5 that. She's seen --- they were quite near her. I was
6 the furthest away, but I wanted her to be near her
7 sisters and her family because they were all getting
8 older, and her brother came and her sisters, so she was
9 at the best part for Mum. It wasn't about me, it was
10 about my mum, so she was at the best part for her.
11 Q. Now, the home she was in, as I understand it, locked
12 down early ---
13 A. Yes.
14 Q. --- is that right? When it did lockdown, you did ask
15 whether or not you could see your mum but you were told
16 that you couldn't. I think you referred to this at
17 paragraph 27. What was it that you were told by the
18 home about coming to see her
19 A. We didn't even get told the home had locked down. My
20 nephew went to see my mum. As I said, I went on
21 a Tuesday and he went before me and he messaged me and
22 says, "Gran's been locked down and we can only see her
23 at the window". And I phoned and they said, "We've sent
24 you a letter", and I says, "What do you mean you've sent
25 me a letter? Why did youse no phone me to tell me you

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1 were locking the home down so I could see my mum?", so
 2 I never got to see my mum. I says, "When can I come and
 3 see my mum?" and they says, "It's Government rules just
 4 now that nobody can get in or out just now while
 5 obviously the pandemic was kicking off". They knew more
 6 than we knew because just two weeks previous to it
 7 they'd asked me about a DNR and I never thought anything
 8 (inaudible)— can't make it out because I didn't know
 9 that was what was going on.
 10 Q. We'll come to the DNR in a moment. I just wanted to
 11 look at the initial communications about lockdown.
 12 A. Yes.
 13 Q. You use a phrase in paragraph 27 of your statement that
 14 you were told that they weren't letting anybody in and
 15 they weren't letting anybody out.
 16 A. That's what they said?
 17 Q. Is that what they said?
 18 A. Because I wanted to take her out — I said I wanted to
 19 take her out.
 20 Q. When you say you wanted to take her out, was that with
 21 the intention of taking her out on a full —time basis —
 22 A. Yes, (inaudible)— can't make it out.
 23 Q. — or just on a visit?
 24 A. Hmm—hmm.
 25 Q. And you also say that the information you were given —

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1 this is again towards the bottom of paragraph 27 — that
 2 it had been done under orders.
 3 A. Aye. They said that they were acting under Government
 4 orders, that nobody could go in and nobody could leave,
 5 that they were locked down. And she said that she'd
 6 locked down quicker than other people had locked down.
 7 I don't know — I don't know whether there was truth in
 8 that or not, but they'd locked down anyway.
 9 Q. And you did receive a letter, but that was after the
 10 fact of lockdown?
 11 A. The next week. She was already — I already knew by my
 12 nephew.
 13 Q. You say at paragraph 29 that your mum hated lockdown.
 14 A. Yes.
 15 Q. Can you explain why that — how she manifested that to
 16 you? How did you understand that from her?
 17 A. Mum lived for people visiting her and talking to her and
 18 family. We were there all the time. Mum would have
 19 been in there on her own, with none of us, and other
 20 people that were in there that didn't have capacity
 21 wouldn't have known, but Mum would have known from the
 22 very day that there was nobody coming to see her, no
 23 daughter, no sisters, no family — no niece, no
 24 nephew — my nephew was there quite a lot, odd days, and
 25 they'd play cards and stuff.

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1 Mum went from week to week waiting on the visits.
 2 The visits were the most important thing to my mum,
 3 which meant she didn't have the kind of thoughts that
 4 she had been when she was alone in the sheltered housing
 5 because she had people around her. That was the whole
 6 point of Mum going in the home, was so that there was
 7 people there so that I was not going to find my mum dead
 8 behind the door. Mum was really not well when we put
 9 her in hospital because she just had stopped — she just
 10 stopped, but when she went into the home, she was
 11 better.
 12 Q. Was that because she had presumably company within the
 13 home?
 14 A. She had company and staff she liked and she knew
 15 everything that was going on and she would chat to them
 16 and they would go in and say, "[Redacted], do you want
 17 ... " — they would ask her if she'd want a coffee.
 18 Sorry. (Pause)
 19 THE CHAIR: Yes, Mr Gale.
 20 MR GALE: Thank you, my Lord.
 21 Ms Kane, at paragraph 30 of your statement, you
 22 refer to the concept of "designated visitor". This is,
 23 as I understand it, something that you were never asked
 24 about or told about.
 25 A. No.

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1 Q. I think you indicate that you didn't really get very
 2 much feedback from the home about your mum or what was
 3 happening in the home. Now, can I divide that up to two
 4 matters? Did you get feedback about your mum's
 5 condition or how she was coping?
 6 A. No, we got — I got told that Mum — the doctor had been
 7 in to see Mum because she had a sore neck.
 8 Q. We'll come to that in a moment, but prior to that
 9 did you get regular updates about how your mum was?
 10 A. No, no. They would just say she was okay and — but we
 11 never got to speak to her.
 12 Q. Right, okay. Did you get information about the way in
 13 which the home was coping —
 14 A. No.
 15 Q. — with the pandemic?
 16 A. No.
 17 Q. You do say at paragraph 36 of your statement — you say:
 18 "It seemed like every time I phoned the home asking
 19 after my mum and wanting to know what was going on, the
 20 home were evasive saying they would contact me when they
 21 had any developments ..."
 22 What did you understand by that?
 23 A. I asked her — I said, "What do you mean by
 24 a 'development'?", she says, "Well, if anything is going
 25 to change", because obviously I'd like to my mum, and

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1 I kept saying, "Well, when can I speak to my mum? When
2 can I see my mum? Am I going to get to see my mum? Is
3 any of us going to get to see my mum?". I thought it
4 might be -- one person would be, as I say, designated --
5 somebody would get in -- and she says, "We're just
6 waiting on Scottish Government -- we're following
7 Scottish Government's guidelines".
8 Q. One other thing in relation to your mum's treatment and
9 care. Paragraph 33 of your statement, you mention that
10 there was a change of GP.
11 A. Yes.
12 Q. Again, please don't mention the name of the doctor.
13 A. No.
14 Q. But your mum's doctor was changed?
15 A. Yes.
16 Q. You had a power of attorney in relation to your mum?
17 A. Yes, for her health and financial, both.
18 Q. And you weren't asked about the change of doctor, I take
19 it?
20 A. No.
21 Q. Right. Now, you do mention -- and you mentioned it
22 a moment ago -- that, as you put it in paragraph 38,
23 about a week after the start of lockdown, so we're
24 probably talking about towards the end of March 2020,
25 you were told that your mum had a sore neck.

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1 A. Yes.
2 Q. Was there any further information given to you about
3 that?
4 A. Well, just that Mum had a sore neck and they were
5 getting a doctor in.
6 Q. When you say a "sore neck", was it a sore throat or was
7 it --
8 A. No, the sore throat came after that. It started with
9 a sore neck.
10 Q. And your reaction to that was anger, I think, because it
11 was the first time you'd been given any information
12 about it?
13 A. About my mum, yes.
14 Q. You subsequently wanted to have direct contact with your
15 mum?
16 A. Yes.
17 Q. And I think through another member of the family an iPad
18 was supplied --
19 A. My son took the iPad to my mum.
20 Q. Now, we'll come to issues about the iPad in a moment,
21 but you did have a video call with your mum on using the
22 iPad, I think; is that right?
23 A. Yes.
24 Q. And you tell us about that in paragraphs 43 and 44.
25 Well, can you tell us in your own words what impression

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1 you gained when you were able to see your mum on the
2 iPad?
3 A. Well, they said that she'd a sore neck, and when they
4 put her on the iPad -- I said, "I want to see my mum",
5 and they put her on -- she put the iPad on and the carer
6 was sitting and she had a cup of coffee in her hand --
7 my mum was allowed to drink coffee -- and my mum was
8 taking a drink, and I said to my mum, "Can you taste
9 that, Mum?", and she was like, "I'm okay, hen", but she
10 looked -- I'm saying she looked tired because it was how
11 she looked there at the time and she didn't look right.
12 I says to her, "Mum, can you taste that? Can you smell
13 that?", and she's like "Oh, hen" -- and then the carer
14 was sitting next to her and she had no PPE on. I could
15 see her tattoos and everything. I could see it in the
16 video. And she's like, "Och, your mum's okay. She's
17 just not feeling very well, she's tired. She's no
18 feeling too good". But I knew, and I just looked at her
19 and I was like, "Mum ..." -- and I kept saying to her,
20 "Mum, can you taste that?", because by then it had been
21 on the TV and I'd remembered about smell and the taste
22 and she looked -- she was so pale and she was just --
23 and I mean, you're talking about it was only a matter
24 of, like, maybe two weeks since I'd seen my mum, so even
25 in that short time she looked really -- I mean, I was

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1 crying because I was -- and I was trying to get her to
2 answer me about whether she could smell it or taste it
3 but she was kind of just like brushing me off.
4 Then as I say, the carer was sitting next to her and
5 she was saying "Oh, she's just a wee bit tired, she's
6 okay", and that, but, I mean, she had absolutely no
7 gloves, no anything on, you could see the tattoos on her
8 arm and everything else, and I was just thinking,
9 "What's going on in here?". Then she was like, "I think
10 she wants to go. She's getting a wee bit tired now",
11 and obviously I was still quite in shock by what I'd
12 seen within the space of the last time I saw her and
13 that time.
14 Q. I appreciate that. Were you concerned at the time about
15 the possibility that your mum might have the virus?
16 A. No.
17 Q. Did you ask whether or not there had been any cases --
18 A. Yes.
19 Q. -- of the virus within the care home?
20 A. I asked them when I phoned and I says to her, "Has
21 there -- have you got COVID?", she went "No". I said
22 "So my mum can't have COVID then", was my exact words to
23 her, she went -- I said, "So there's no COVID in
24 your home?", because when I've seen my mum, I was like
25 "no" -- there was something -- like, I knew my mum.

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1 There wasn't even — my mum would be chatty, she'd be
2 asking me how things were, how the kids were, how
3 general life was, and she would be telling me not to
4 worry, she'd be saying she was okay and she wasn't
5 saying anything. She just looked as if — she looked to
6 me as if somebody had drugged her, to be honest with
7 you. She was very subdued — that's the word I'm
8 looking for — very subdued.

9 Q. You talk about calling the home and trying to ascertain
10 whether or not there was COVID in the home. You tell us
11 about that in paragraph 44.

12 A. Yes.

13 Q. But then you say in 47 that:

14 "It was after this call with my mum that all of
15 a sudden, all communication broke down ..."

16 A. Yes.

17 Q. Can you give us a little more information about that?

18 A. For two weeks, two full weeks, we couldn't get to speak
19 to Mum on the phone, her sisters couldn't get to speak
20 to her. All of a sudden they were telling people
21 that — when they phoned the care home, that they would
22 have to go through me and ask me if they could speak to
23 Mum, which never ever happened before. They all used to
24 speak. Her sisters — her sisters, my aunties, who went
25 to visit her, were concerned. They were on the phone,

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1 "She's like that. We can't get to speak to her. Have
2 you spoke to her?", and I hadn't spoke to her. I says,
3 "Well, I've got the iPad in". So I says, "Right, I'm
4 going to speak to a member of staff", who was the
5 manager at that time — I said, "I'm going to phone her
6 and I'm going to ask what's going on here. I'd like to
7 speak to my mum".

8 So we went on the phone. They were getting told the
9 same as me, "Oh, she's awful tired, she's not feeling
10 great", and all this, and I kept saying to them, "Is
11 there COVID in this home? Youse need to tell me", and
12 I was getting really annoyed with them. I said, "Right,
13 well, Mum's got an iPad there". I said, "I want to
14 speak to my mum. My aunties want to speak to Mum", and
15 they were like — so that's when she says — so I had
16 a full-blown conversation with the manager in which she
17 said — to say to me it was something to do with their
18 internet and getting internet.

19 So I was really upset, and my son came in and he
20 says, "What's wrong?". I says, "I can't get to speak to
21 Mum. They're telling me it's the internet and they're
22 saying that they're going to try to sort something out
23 with the internet, and I knew something was wrong", and
24 he says to me, "Mum, what are you talking about? It's
25 got a SIM card in it". And I didn't think about that at

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1 the time because it was my son's iPad. He says, "Mum,
2 it's got a SIM card in it. Tell them you want to speak
3 to my gran. She doesn't need wifi", because he had
4 a contract. And I never thought about that. I was just
5 so upset and I wanted to just speak to my mum.

6 So I phoned them back and I says, "Mum's got a SIM
7 card in her iPad so put my mum on this. I want to speak
8 to my mum". I says, "Mum can get internet at any time.
9 Mum's got a SIM card in that iPad", and then she went —
10 you heard the carer in the background, going, "Oh,
11 that's right. I was supposed to tell her a couple of
12 days ago. The charger is not working", and I just
13 thought, "No, no, no way".

14 Q. Now, you tell us all that in paragraph 49 through to 52
15 of your statement, but can I go back just a little?

16 A. Yes.

17 Q. You I think decided that it might be more advantageous
18 if you spoke to the nightshift staff rather than the
19 dayshift staff?

20 A. Yes.

21 Q. Again, please don't name them. But you spoke to a nurse
22 who was on nightshift?

23 A. Yes.

24 Q. And I think you got a bit more information from her?

25 A. Always did, right through the whole thing.

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1 Q. And I think what she told you round about that time was
2 that your mum wasn't eating —

3 A. Yes.

4 Q. — because she was too tired and they were trying to get
5 fluids into her.

6 A. Hmm—hmm.

7 Q. I think we find this at paragraph 46 of your statement.

8 A. Yes.

9 Q. You were obviously very worried when you heard that?

10 A. Hmm.

11 Q. This was when you then tried to insist on the use of the
12 iPad —

13 A. Yes, I wanted to see her.

14 Q. — and were eventually told that the charger was broken?

15 A. Yes.

16 Q. I think you then arranged for your nephew to take
17 another charger to the home immediately so that you were
18 able to see your mum.

19 A. Yes.

20 Q. And you tell us in paragraph 54 of succeeding and being
21 able to see her and what you saw. You say that:

22 "... she looked like a corpse. She looked
23 absolutely terrible. Pure white, her hair all matted
24 into the back of her head."

25 That would have been obviously very upsetting for

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1 you to see that.
 2 A. Aye.
 3 Q. You had a conversation with your mum at that time and
 4 I think we can read about what she was saying to you.
 5 Essentially she was saying that she was very tired,
 6 wanted to be —
 7 A. Yes, she kept saying she was tired. I was asking her to
 8 go to hospital and she was saying she was too tired.
 9 I said to her, "Mum, please can you go to hospital?",
 10 and she said, "I'm tired, hen". I said, "Listen, you
 11 need to listen. You need to speak to me, Mum. I need
 12 you to go to the hospital. I need you there", and she
 13 still — she was really just dead incoherent. She just
 14 was not her. She was just so white and so ... it didn't
 15 even look like my mum.
 16 She was just like — just a forwarded-on version of
 17 the first time I seen her, and that was a bad enough
 18 shock. But even — and this was just one other wee
 19 space, a couple of weeks, she looked so much worse, and
 20 she was just lying there. She wasn't even moving. She
 21 was just lying back and they were having to move the
 22 iPad, and I was kind of half of the time wanting that
 23 they show (inaudible) trying to move because she
 24 couldn't sit up. She was just lying in the bed.
 25 I took a screenshot because I thought, "No, there's

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1 something seriously wrong. She's not — she's more than
 2 just no well, she's more than just no well". She didn't
 3 even have — remember, my mum had capacity so my mum was
 4 able to speak for herself. She was a woman that could
 5 cut you with her tongue. So this woman, this — my mum,
 6 who I had known all my life, was just lying there,
 7 saying nothing except, "I'm tired, I'm tired, I'm
 8 tired".
 9 Q. I think this prompted you to ask again whether they had
 10 COVID in the home.
 11 A. Yes.
 12 Q. And you asked that. What was the response to that?
 13 A. Still "No" — still a flat-out "No".
 14 Q. But at paragraph 62 — and again please don't name the
 15 doctor — but you asked the doctor, your mother's GP,
 16 I think, whether she had COVID, and what was his
 17 response to that?
 18 A. What happened was they told me that — the doctor was
 19 coming in to see Mum, and I said, "I want the doctor to
 20 phone me. You tell him he's to phone me as soon as he's
 21 been to see my mum. I want a doctor in to see my mum
 22 and I want to speak to the doctor". And so the doctor
 23 came on the phone and I was like, "Right, what's
 24 happening with my mum?", and then — I couldn't even
 25 believe how bad — it went from this sore neck to all of

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1 a sudden he says, "You maybe have to prepare for the
 2 worst". And I was like, "What do you mean, 'You need to
 3 prepare for the worst'? They've told me they've not got
 4 COVID in. What's wrong with my mum?", and he says,
 5 "Well, I suspect it could be COVID", and I says, "How
 6 can you suspect it could be COVID if the home hasn't got
 7 COVID?". I had been asking them and asking them and
 8 asking them, "Have you got COVID? Have you got COVID?";
 9 "No, no, no".
 10 I says but how — I went — I says, "How can you say
 11 that my mum's got COVID if there's no COVID in the home?
 12 How can she possibly have COVID? You're locked down.
 13 How could she have it?", and he's like, well —
 14 obviously because she hadn't been tested yet, it was
 15 like well — his answer to that was, "Well, I've seen
 16 a few others and your mum's similar so I think you need
 17 to prepare". He never said she had COVID.
 18 Then I came back to him again. I said, "But how can
 19 my mum have COVID if nobody in the hospital has got
 20 COVID?", and that's when he turned to me and he said,
 21 "Well, a staff member had it". And then I just
 22 absolutely — I just wanted to scream. I really did.
 23 I wanted to scream.
 24 Q. I think you also said to the doctor that you wanted your
 25 mother taken to hospital.

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1 A. Yes, I wanted her took to hospital and he said he would
 2 go away and speak to her. I said, "I want my mum out of
 3 there", and then he says, "No" — what he said was,
 4 "They'll no — they don't get to leave the care home",
 5 in a sense. He said that in a kind of roundabout way,
 6 with different words and things, but basically what he
 7 was saying in essence was they weren't letting them
 8 out — they weren't getting allowed into hospitals,
 9 especially if they had suspected COVID.
 10 I says to him, "I want my mum out of there", I says,
 11 "so you had better go and speak to my mum", because what
 12 I said was — I didn't actually — I says, "I want my
 13 mum out", and he says, "Well, your mum needs to decide
 14 that because she's got capacity", and I says to him,
 15 "No, but I've got power of attorney over my mum and
 16 I want my mum out now. I want you to send my mum to
 17 hospital". So he went off the phone to go and speak —
 18 I says, "You need to go and speak to my mum and tell my
 19 mum I want her to go to hospital right now, I want my
 20 mum out of there. I want her in a hospital and I want
 21 her out now". And he says to me, "Right, I'll go and
 22 speak to your mum". I says, "And I want to speak to my
 23 mum. I want to hear it from my mum. I want to speak to
 24 mum". And then I had to go and phone my brother and
 25 I had to tell him what he'd just told me on the phone.

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- 1 Q. You did subsequently see your mother again, I think on
2 the iPad, and, as you tell us, she looked even worse the
3 next time you saw her and that was a couple of days
4 later. And your mum was able to say to you — because
5 you were upset and you were talking about getting her
6 into hospital, and I think your mum was able to say to
7 you her view about going to hospital.
- 8 A. She said "I'm scared".
- 9 Q. Did she — well, at paragraph 70, you tell us that she
10 had said that the doctor had told her that she wouldn't
11 make it.
- 12 A. She says to me, "The doctor says I won't make it, hen,
13 that — they'll leave me in the ambulance and then I'll
14 have to go into triage if I even make the ambulance
15 journey".
- 16 Q. And what did you feel about that?
- 17 A. Pain, anger, scared, most of all, frightened because
18 I knew that then that was just — I knew then — I knew
19 then what I knew when I'd seen her, and she was just so
20 resigned, and that wasn't my mum. My mum would have
21 said to him, "Get me effing out of here now".
- 22 Q. I think you took the view that, by making these comments
23 to your mum, as you say in paragraph 71, you thought
24 they were terrorising her.
- 25 A. Aye, they terrorised her. He told her that she would

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- 1 not make it to hospital. See, if they wouldn't have
2 said all that to my mum, that she wouldn't make it to
3 the hospital and that she wouldn't survive the
4 ambulance, you know, and that, my mum would have said,
5 "Right, send me to hospital". She would have. And she
6 knew how upset I was, and I was crying and I'm her
7 daughter, and she wouldn't have wanted to see me hurting
8 the way I was, because she could see me crying and she's
9 saying to me, "It's okay, hen", and I'm saying to her,
10 "Please, Mum, I need you to go to hospital", and she
11 says "I'm frightened, hen, frightened". That was her
12 words, "I'm frightened".
- 13 So that was my mum lying in there, I was helpless
14 and my mum was frightened, and I was on the other end of
15 a screen. I wasn't there. I couldn't comfort her,
16 I couldn't hold her, I couldn't get her, I couldn't do
17 anything. I was just absolutely powerless to do
18 anything, except sat there and cry.
- 19 Q. Yes. I think you were aware from having seen on the
20 television the use of what are called "C-PAP machines".
- 21 A. And I asked them to get her one.
- 22 Q. You asked whether or not they could be obtained for your
23 mum?
- 24 A. Yes.
- 25 Q. What was the response to that?

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- 1 A. He said, "Your mum ..." — this was exactly what they
2 said — right? — and bearing in mind — and this is
3 what I could never get over — my mum smoked and drank
4 coffee all day every day — right? — 40 cigarettes
5 a day, absolutely; right? So not only was my mum sick,
6 she was withdrawn from caffeine, nicotine, of
7 a 13-year-old to 73, all the years and all that,
8 (inaudible), and all she kept asking them was could she
9 go and get a cigarette and they kept telling her "No".
10 And I can imagine her keeping saying, "I want to go for
11 a fag" — I can hear her in my head saying that. Even
12 if she couldn't say it now, she would've been saying,
13 "I want to go for a fag, to the smoke room", or
14 whatever. And they said to me, "Your mum's been asking
15 can she go for a cigarette", and I says, "What do you
16 mean?". She went, "Well, we can't. We're not
17 allowed — we can't take her out the room", but they
18 didn't tell me why they couldn't have took her out the
19 room. They just said, "We can't take her out the room",
20 so I was like, "Oh".
- 21 And then, remember at that time they told me that
22 she'd had a sore throat and she had a sore neck, you
23 know, and this. And obviously after this I found out
24 why she had a sore throat, but they didn't tell me why.
25 She had a sore throat at the time and they said she had

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- 1 a sore throat, but never elaborated on the sore throat.
2 They just said Mum had a sore throat and they were
3 getting a doctor in to see her but never elaborated on,
4 but the sore throat actually — the cause of the sore
5 throat, I didn't find that out till later.
- 6 Q. We'll come to that in just a moment. I think you say at
7 paragraph 75 that the doctor said that he would speak to
8 the community nurses and see what he could do.
- 9 A. Aye.
- 10 Q. But you say that you knew that he was really just
11 humouring you —
- 12 A. He was.
- 13 Q. — being nice, and you didn't hear any more —
- 14 A. My mum smoked 40 cigarettes a day and never coughed.
15 That's what he said to me. "Your mum doesn't have
16 a cough and your mum doesn't have a temperature", and
17 I said to him, "Well, why is my mum so ill?". If my mum
18 who smokes 40 cigarettes a day hasn't got a cough — and
19 you know that everybody was saying it's a cough and
20 a loss of smell and a loss of taste — so my mum, who
21 smokes 40 cigarettes a day, had no cough and no
22 temperature, neither of both. So I was like, "Right, so
23 all these symptoms that they're saying on TV that we're
24 all hearing, why has my mum no got these then?".
- 25 Q. At paragraph 76 I think you indicated that — or you

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1 contacted the home on 10 May.
 2 A. That's the wrong date.
 3 Q. It's the wrong date, is it?
 4 A. Yes.
 5 Q. Whatever date it is, it's around about —
 6 A. It was the 7th — well, it was the 6th.
 7 Q. The 6th, okay — that you wanted to go in but again you
 8 were told "No"; is that right?
 9 A. I was told "No" and then I caused a fuss and I says,
 10 "I want to see my mum".
 11 Q. And you put it there in fairly trenchant terms of, "I'm
 12 no asking, I'm telling"?
 13 A. Aye, that's what I said. "I'm not asking you, I'm
 14 telling you I want to see my mum".
 15 Q. Now, you mentioned earlier about the cause of your
 16 mother's sore throat or sore neck and I think you were
 17 able to see your mum —
 18 A. Me and my brother.
 19 Q. And you were able to see her. You talk about this in
 20 paragraph 81 and you again observed that she was in
 21 a worse state than she was at the time that you'd seen
 22 her before.
 23 A. We got in — do you mean when we get in to see Mum?
 24 Q. Yes.
 25 A. When we actually get in the home? I caused a big fuss

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1 and I said, "I want to see my mum and I'm going to come
 2 and stand outside and shout up", and I was quite
 3 prepared to do that. I said, "I need to see my mum.
 4 You're telling me to prepare for the worst. I want to
 5 see my mum for myself — I want to speak to my mum and
 6 I want to see my mum".
 7 So eventually they went away and they spoke to
 8 whoever it was and they said, "Right" — I says, "And my
 9 brother", because we're her own two kids, "we want to
 10 see my mum, both of us want to see my mum". So they
 11 said, "Right, you can come in and see your mum but
 12 you'll have to go through all the COVID stuff". Bearing
 13 in mind my mum still hadn't actually been diagnosed with
 14 COVID at this time, so it was still suspected, and
 15 I phoned my brother and said, "Right, we can go in and
 16 see Mum". So because I've got blood cancer, I was high
 17 risk, I was shielding, and obviously my doctor wasn't
 18 very much impressed by the fact that with blood cancer
 19 and being on the shielding list, I was going to go —
 20 quite prepared to go and see Mum.
 21 So we took precautions, extra set of clothing on and
 22 everything, because that was my mum. I wanted to see my
 23 mum. I wasn't caring about blood cancer or anything,
 24 I wanted to see my mum, and I didn't care. I wanted to
 25 be — I wanted to see my mum and we wanted to see what

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1 was happening because I couldn't sleep and I couldn't do
 2 anything and I was lying with a phone next to me. I was
 3 frightened and I wanted to see my mum. It's a human
 4 instinct. You want to see your mum, especially when she
 5 needed me. I wanted to see her. So they said, "Right,
 6 you can go in". So we got to the door and the staff
 7 member was waiting at the door and she says, "You will
 8 need to put this on", a gown and ...
 9 Q. Yes.
 10 A. And she actually had the absolute cheek to say, "because
 11 I don't want COVID in my corridor". and I thought, "Oh
 12 my God, man". So I never said anything and we went up
 13 the stair and Mum was lying in the bed. She knew it was
 14 us and, because of my blood cancer, I sat kind of as far
 15 away as you are from there, but my brother went and sat
 16 next to Mum, and we were sitting and the carer came in
 17 and she had a cup of coffee with a straw and a yoghurt,
 18 and you could see the steam coming off the coffee — you
 19 could literally see the steam. And she sat the coffee
 20 down — Mum was lying in bed — she sat it down on the
 21 wee table and then she opened the yoghurt, she plopped
 22 it down and she turned round, she says to us, "I'll be
 23 back in a minute", and she walked out the door.
 24 And we're sitting — Mum couldn't even lift her
 25 head. She knew we were there, she knew we were talking

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1 to her. She was just kind of — I just went, "Mum, I'm
 2 going to speak to her". She went, "No, you speak to
 3 me", but she couldn't even lift her head. So she's
 4 lying, can't lift her head, there's this steaming hot
 5 cup of coffee and then there's this yoghurt opened, just
 6 plonked down. She's lying there and me and my brother
 7 are sat looking at each other, going, "Is this actually
 8 happening?".
 9 Then she comes back in again after about ten minutes
 10 and I says to her — I says, "What did you leave that
 11 there for? Was my mum supposed to get up and get that
 12 herself? I mean, my mum can't move". She went — "Oh,
 13 no", she says, "I was letting it cool. We burnt her".
 14 And I went, "What?", and she went, "Oh, we burnt her
 15 with soup. That's what happened to her throat".
 16 Q. You tell us about that incident in paragraphs 84 to 86
 17 and being informed by the carer that your mum's throat
 18 had been burnt with soup on an earlier occasion. Was
 19 that the occasion —
 20 A. Probably the occasion that they got the doctor out for
 21 the sore throat, but they didn't elaborate on the sore
 22 throat to us, they didn't tell me they'd burnt her.
 23 They just said Mum had a sore throat, and I thought,
 24 like everybody else, it must be a COVID symptom, with
 25 a sore neck, sore throat. I never for a minute thought

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1 that somebody burnt Mum.
 2 Q. You also mention, I suppose, a subsequent incident or
 3 possibly at the same time, an incident where you were
 4 informed about the delivery of pizzas to the home.
 5 A. So I started crying — I was in the room, my brother was
 6 sitting with my mum, he was trying to feed her the
 7 yoghurt, and I said, "I need to get out of here.
 8 I can't sit here. They burnt her. She's lying there,
 9 she can't talk to us, she can't move. I can't sit here
 10 while they're stood outside that door and they did this
 11 to my mum. I need to leave.". I was so hurt and I was so
 12 angry and I was scared that I would actually ruin
 13 everything by losing my temper, but that was my mum
 14 lying there and this is the first time I'd seen her
 15 since — before the pandemic when I saw her, she was all
 16 smiling and laughing and saying "I'll see you on
 17 Tuesday, hen", it was that conversation before that day,
 18 and there was this frail woman who couldn't even lift
 19 her head, who couldn't even move, who they'd been
 20 telling me they were having difficulty getting her to
 21 eat and drink, but no wonder, they burnt her. She was
 22 relying on them for care. She was relying on them to
 23 look after her and they burnt her, they burnt my mum.
 24 My mum would never have eaten anything again if
 25 someone had done that, she wouldn't have. My mum would

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1 not have because that's the kind of person my mum was.
 2 She wouldn't eat anything at the best of times. She ate
 3 sweets and crisps and juice. She had a fridge full of
 4 rubbish because she wouldn't eat them meals because she
 5 didn't know who was touching it; right? So see if they
 6 burnt her, my mum would have refused point blank to let
 7 them near her and so would anybody in their normal frame
 8 of mind. My mum had capacity. My mum knew what was
 9 going on in that building at all times, all the time.
 10 She was — she knew everything, more than what they
 11 wanted anybody to know. But I was outside —
 12 Q. I just want to ask you, Ms Kane, if I may, just about
 13 the pizza delivery that you do make reference to —
 14 A. So I went outside —
 15 Q. This was something that you were shown I think on your
 16 son's phone, a picture of pizzas being delivered.
 17 A. When I left — so I went down the stair, she had said to
 18 me about the COVID. I came out the room and they were
 19 standing. They had a wee table like that, just like
 20 this, with a sanitiser and bits and bobs on it. And
 21 I came out — I left my brother there. I said, "I can't
 22 sit here. I can't sit here with them outside that door.
 23 I need to leave, I need to leave". I said, "I'm sorry,
 24 Mum, but I need to go because I cannot sit here and
 25 watch this". And I said to my brother, "Can we not just

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1 pick her up and go? Can you not just lift her?". He
 2 went, "We can't", and I went, "Please, can we not just
 3 take her away?"

4 It was the fact I was going to have to leave and
 5 leave her there still, even finding out that they'd just
 6 burnt her, and I just thought, "I can't be leaving you
 7 here with them. I'm leaving you here with them". And
 8 down the stair my son was waiting. I tried to take off
 9 all my layers of clothing and everything, and he was
 10 spraying me with rubbing alcohol. He said, "Are you all
 11 right, Mum?". And I was like — I was in tears and
 12 I went, "No", and he went, "Well, you're not going to
 13 like what I'm going to tell you now", and I was like,
 14 "What is it?", he went, "They've just let a pizza
 15 delivery guy just walk right through their doors". And
 16 I was like, "What?". He went, "They've just literally
 17 let a guy walk right into the home off the street with
 18 pizzas". I thought, "You need to take me home because
 19 I can't take it anymore".

20 So the nurse phoned me down and she says, "Your
 21 brother can't be in here on his own because you're not
 22 here. Youse have to come in together and youse have to
 23 leave together so he'll have to leave". So obviously my
 24 brother was upset because he had to leave Mum. And then
 25 I was like — we were talking outside and obviously my

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1 brother's like, "Aye, pizza guy went into the home". I
 2 was like, "What's happening here? What's happening?
 3 What's going on?"

4 Then I got in the car, my brother got in, went away,
 5 and then I cried all the way home, and my boy was like,
 6 "I shouldn't have told you that", and I said, "No, but
 7 you need to tell me these things". So as soon as I got
 8 in, I phoned the home — I phoned the manager and I says
 9 to her, "You want to tell me why I get spoken to like
 10 'We don't want COVID in our hall' and yet you let
 11 a pizza delivery driver walk right through the front
 12 doors, right through?". I went, "Don't deny it",
 13 I says, "because my son's got it". I says, "My son
 14 witnessed it", I went, "so don't deny it". And she
 15 went, "Oh, sometimes they bring in the food for the —
 16 they were helping the carers", which I see the point,
 17 but not walking right through the doors when they've
 18 been outside, when we get literally held till we put PPE
 19 on and everything inside the door before we even
 20 entered.

21 It's like — there's a door likes this (Indicates)
 22 and then you go through to get into the home. It's like
 23 a reception. Well, we had to stand in reception and put
 24 PPE on, yet he walked right through reception and right
 25 into where all the staff sat at the other end of the

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1 corridor usually. And I thought, "Is somebody actually
2 pulling a joke on me here? Is this actually what's
3 going on in my life? I've just sat and took that off
4 them, told they burnt my mum and they let a pizza
5 delivery guy just walk right through the door as if that
6 was okay". And it wasn't okay and it was absolutely
7 breaking my heart.

8 I says to her, "I'm reporting you". I says, "I'm
9 reporting youse". She went -- I says, "I don't care".
10 I says, "I'm reporting you". I says, "And see tomorrow
11 I want to speak to the doctor because I want my brother
12 ... " -- because he was the nearest. I was too far away.
13 As I said, they're over in the north of the city and
14 I was away at the other end, outside of Glasgow -- and
15 I'm like, "No", I says, "I want my brother in and I want
16 him to be able to feed Mum".

17 So we'd asked could my brother come in to make sure
18 Mum was getting fed because she was just lying there,
19 and, as I said, what we'd just witnessed with the coffee
20 and the yoghurt and everything else, and then they were
21 like, "Oh, we'll have to ask. We'll have to see whether
22 there's protocol" and all this. I went, "Well, I don't
23 care". I said, "Get them to find out", and that was on
24 7 May. I says, "Get them -- speak to them and tell them
25 that I want my brother in here to feed my mum. We want

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1 somebody in here to make sure Mum's okay or try and feed
2 her at least". They were like, "Oh, well, it will take
3 a couple of days till we speak to people", and I'm
4 thinking -- so bearing in mind this was 7 May ...

5 Q. Can I take you on -- I'm sorry, Ms Kane -- rather
6 directly to your mother's passing? You tell us at
7 paragraph 116 that you spoke with her GP again, you've
8 mentioned the possibility of C-PAP machines and you
9 mention, as you've said, your mother's intake of fags
10 and her cough. You said something to the doctor which
11 you quote at the end of paragraph 116 of the statement.
12 Perhaps you would just say what you said.

13 A. Yes, aye, that's what I says to him. I says to him, "My
14 mum is not dying of COVID. My mum is dying of
15 starvation and dehydration". You just had to look at my
16 mum to see that. Her eyes were sunk right into the back
17 of her head. I went, "If my mum's no eating and no
18 drinking ..." -- and my mum was slight. My mum was
19 underweight. She wasn't heavy or anything. She
20 couldn't afford to ha lost weight, absolutely couldn't
21 afford to ha lost weight. And I said, "She's no eating,
22 she's no drinking, so my mum is not dying of COVID.
23 She's not got a cough, she's not got a temperature.
24 She's dying with dehydration and starvation, and here in
25 front of youse, in front of all your eyes, and we've

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1 seen it".

2 Q. You also say in paragraph 118 that you were informed by
3 the home that your mum was deteriorating on 13 May.
4 They got in touch with you to tell you that, to tell you
5 that she was really unwell?

6 A. They phoned me and they says, "Youse will have to come
7 up because your mum is deteriorating".

8 Q. I think you made various arrangements that members of
9 your family could come --

10 A. Me and my brother.

11 Q. -- and see your mother. You then say that you were
12 driving together with your son -- this is
13 paragraph 120 -- you were driving with your son five
14 minutes from the home at about 4 o'clock in the
15 afternoon and your phone rang, it was the home, and they
16 told you that your mum had passed away.

17 A. (Nods).

18 Q. And obviously it's a matter of great sadness and sorrow
19 for you that your mum died on her own.

20 A. I was five minutes away and I knew when the phone went
21 they were going to say that that was my mummy. My
22 brother was outside and they wouldn't let him in. We
23 had to go in together because you had to go in
24 together -- their policy of people not going in and
25 out -- we had to go in together, and he would have been

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1 there. He would have been in there but he was waiting
2 on me. He was already there. So she died on her own.
3 It the one thing we never ever wanted for her.

4 The whole point of her being in the care home was so
5 that she didn't die on her own, so that I didn't go and
6 find her dead, so that nobody found her dead, so that we
7 would be there, we all would be there. And the one
8 thing I wanted to do was be with my mum, and we were
9 robbed of that as well. She died on her own.

10 Q. Yes. You also I think noticed that your mum was wearing
11 clothes when she died --

12 A. Aye.

13 Q. -- which you seemed obviously to think was unusual.

14 A. Absolutely. My mum wore her jammies all the time. She
15 wouldn't let them get her dressed some of the time and
16 she was just sat about in her jammies.

17 Q. I think you also say that she looked angry.

18 A. Aye, she looked angry. She looked angry.

19 Q. You also noticed, as you observe, a needle mark round
20 her thumb.

21 A. Right there (Indicating).

22 Q. You're pointing to your thumb.

23 A. Right there. I was holding her hand, she was dead --
24 I was crying and saying "Sorry" and rubbing her hand,
25 and then I looked and she had the red dot, but it looked

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1 really recent, it was still red and you could see the
2 wee bit where the blood clots, you know, and a wee red
3 dot.
4 Q. What did you think about that?
5 A. All I kept thinking was they must have given her a jag
6 there somewhere, but at that time it hadn't come out
7 about — I was always under the impression they were
8 giving my mum morphine because I'd fought with them not
9 to give my mum stuff and then they'd get Social Work
10 involved, the stand-by Social Work. You can't get
11 Social Work for love nor money but they managed to get
12 them on a Bank Holiday weekend to call me and say —
13 because I did say — I said, "Youse gave my mum
14 palliative care medicines. I'm getting you charged with
15 murder if anything happens to my mum".

16 So Social Work Department phoned me on the May Bank
17 Holiday, just before I got to see Mum, and they says to
18 me — I says, "Listen I've got power of attorney for my
19 mum, full power of attorney, and that's for her health
20 as well. If I tell you you're not giving my mum just in
21 case or palliative medicines, you're no giving her it".

22 My mum was on — what they were saying, my mum was
23 only on liquid paracetamol. My mum was delirious three
24 weeks before — I never got a coherent conversation out
25 of her — except the only coherent conversation I got

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1 out of her was to tell me she was frightened when she
2 was going to hospital. Every other conversation was not
3 any sort of conversation. She just looked as if she was
4 drugged. She looked as if she'd been drugged.
5 Q. Did you take this matter any further? Did you complain
6 about what you thought may have happened to your mum?
7 A. Aye. They knew her — I told them what I thought might
8 have happened to my mum and I had asked for
9 a post-mortem, and then — but because of COVID and
10 everybody was upset, rightly so, and the family was all
11 going through a lot of pain — it was taking long enough
12 to get them buried, as you know. It was taking over
13 a month. And I phoned up and I says, "Oh ..." —
14 I spoke to the guy. I says, "I want a post-mortem on my
15 mum", right? And he says to me, "Right, that means it
16 will be longer for the funeral", right? And people were
17 grieving. My aunts were older.

18 Then, if you remember — right? — you could only
19 get ten people at a funeral. Between me, my brother and
20 my kids and his kids — that wasn't even counting — my
21 aunts sat in a car park outside the church where
22 Mum — my aunts were outside the crematorium in cars
23 and didn't even get to say a proper goodbye to their
24 sister. That was another thing my mum never wanted.

25 My mum always wanted to have a send-off. She didn't

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1 get a send-off. We had to pick between her brothers and
2 sisters who would actually get in to the actual — to
3 get her cremated. It was the most horrible thing
4 ever. It was a bad enough time, and I didn't want to
5 put anybody else through any more pain. They were all
6 hurting and they were saying, "You cannot bring her
7 back. It doesn't matter", any one of these kind of
8 things, because people were grieving. I was grieving
9 and angry. We were all grieving.

10 We all had our different bits. Her sisters were
11 grieving their sister, I was grieving my mum, and I had
12 the guilt and I had the burden and all these things, but
13 I wanted to know what had happened to her because
14 I never ever believed for a minute it was COVID,
15 I didn't. I didn't believe it was COVID. And she still
16 had not been tested. And I phoned them just before
17 that — I says, "Why has my mum still not had a COVID
18 test?", and he said, "I've left them with the home".
19 And then I phoned the home. I says, "Have you got Mum's
20 COVID test? Has it come back yet?". She went, "No,
21 there was something wrong with the last one". I mean,
22 it was literally like three days before Mum died — not
23 even that — 48 hours before Mum died that they actually
24 said that it was confirmed it was COVID. This went on
25 for weeks.

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1 Q. Your mother's death certificate did disclose that the
2 cause of death was COVID, I think.

3 A. It said "COVID" on the top of it, yes.

4 Q. You tell us about the funeral and I don't think
5 there's — everything you've said so far is really
6 incorporated in paragraph 129. You were — if you look
7 at paragraph 128, you have some concern that some
8 treatment that you had was — had the same mark —
9 injection mark —

10 A. In the exact same —

11 Q. — in the same location.

12 A. Exact same. I couldn't believe it. I had aggressive
13 cancer and I caught COVID eventually and they had to
14 remove my Hickman line because I had a Hickman line in.
15 And when they took me down to the theatre and, because
16 they had to take quite — because they were putting
17 a lot of antibiotics to me, she said to me, "I'm going
18 to give you midazolam", and I went, "No". She went,
19 "Yes, because we can't give you an anaesthetic or
20 anything, so I'm going to give you midazolam, just a wee
21 bit, so that we can get this out", because they had to
22 take my Hickman line out, and she gave me it there, and
23 it was the exact same mark on my — exact same place it
24 was on my mum and exact same mark was left on my finger.

25 I kept looking at it, going, "That's the exact same

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1 as where Mum ..." -- because I had always been under the
2 impression -- I thought by palliative care medication,
3 they thought morphine, and I was thinking, "Where were
4 they giving her the morphine?". I didn't know whether
5 they were giving her it orally because they didn't
6 actually ever say what the -- they didn't even tell me
7 it was palliative care. They said it was just in case
8 medicine.

9 I mean, I challenged them on it -- as you said, when
10 I was angry and I says to them, "Youse were meant to be
11 putting a ring round these homes to protect them", and
12 she says to me, "We are. We're trying to do a ring of
13 protection. This is what we've been meant to do". And
14 I says, "No, this is not a ring of protection youse have
15 put round these homes. This is a burning ring of fire
16 youse have put round all these homes". And she says to
17 me, "You cannot say stuff like that". I says, "I can,
18 because I'm watching it and I'm watching it burning and
19 I'm going to have to carry the scars along with every
20 other relative the same as me that's going to have to
21 carry these scars until we burn", because that is what
22 happened. That is what happened in these homes.

23 Q. Can I just turn finally, Ms Kane, to the "Lessons to be
24 Learned"? I think at paragraph 130 of your statement
25 you say that you didn't get any respect as a family,

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1 your mum got no respect --

2 A. No.

3 Q. -- you as her kids got no respect and you were treated
4 like a hindrance --

5 A. Yes.

6 Q. -- because you were questioning everything.

7 A. Everything.

8 Q. We can read the rest of that. I think most of it is
9 material you've already told us. Then your hopes for
10 the Inquiry at paragraphs 133 through to 136, you
11 mention that you're in a COVID bereavement group --

12 A. Yes.

13 Q. -- and you're still having the traumatic after-effects
14 of what you've been through.

15 A. Well, I was diagnosed with delayed grief because they
16 said -- my cancer came back aggressive after Mum died,
17 after lockdown, and then ... I was fighting for my
18 life, and -- it's all right for people to say you can
19 get over it, but when you can't get over it, when you
20 need an answer, when you need somebody to tell you why,
21 why you couldn't see your mum, why you couldn't be there
22 when she needed you, why you couldn't comfort her, why
23 you couldn't just get a straight answer even, you
24 couldn't even get a straight answer. It was always
25 caught up in some sort of protocol or some sort of

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1 something they couldn't tell you. But it was all just
2 a cover-up and at the end of this was a family who were
3 just distraught and devastated and in pain. But the
4 worst thing was, as I said -- and I've always said it --
5 my mum died on her own, and the whole point of her being
6 in that place in the first place was so that wouldn't
7 happen to her.

8 Q. Yes. You also ask that there should be honesty, there
9 should be an acknowledgement that things could have been
10 done better --

11 A. Aye.

12 Q. -- and also an admission that parents were not treated
13 well.

14 A. No, I --

15 Q. Those are some of the things that you would want the
16 Inquiry to --

17 A. We all need honesty because we're -- I'm not the only
18 family going through this sadly. There's a lot of us.
19 But we all need to hear answers, we need to hear people
20 saying that they made the mistakes, that mistakes were
21 made, because we're living and blaming ourselves, but we
22 weren't allowed in, we weren't allowed to do anything,
23 we weren't allowed to interact, we were deprived. And
24 the people -- my mum was deprived of everything that's
25 natural, a cuddle, a hug, time. She was deprived of all

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1 them things, and they're hard for us -- it's hard for me
2 every day because I think, "What was she thinking?",
3 because she had capacity. I used to wish my mum didn't
4 have capacity, I did. I used to actually wish -- I wish
5 she didn't know what was going on, but she knew all of
6 it right up until she died. She knew every single thing
7 that was going on. She might have been weak and she
8 might have been whatever, but my mum knew. She knew
9 every bit of thing that was going on round about her.
10 She knew we were there, she was trying to talk, but she
11 was just so tired and so weak that she just couldn't.

12 Q. Mrs Kane, I think everybody realises that this has been
13 an emotional occasion for you. We're very grateful to
14 you for making the effort and enduring this and we are
15 very grateful. Thank you very much indeed.

16 A. Thank you.

17 THE CHAIR: Yes, thank you. That's all.

18 Very good.

19 MR GALE: Thank you, my Lord.

20 THE CHAIR: 10 o'clock tomorrow morning.

21 (3.17 pm)

22 (The hearing adjourned until
23 Friday, 24 November 2023 at 10.00 am)

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