# Scottish COVID-19 Inquiry Witness Statement

Statement of Margaret Waterton – Witness Number

## **Background**

1. I, Margaret Waterton, am giving a statement in relation to the death of my mother, Margaret Simpson on 18 June 2020.

# **Margaret Simpson**

2.	My mother died from r	nosocomial	Covid 19.	My mother	was 86	years o	old
	Personal Data	] Mum was	a much-le	oved mother	r, Gran,	sister,	
	Aunt and friend.						

3. She had lived alone and independently since the death of my father in 1999. Mum had previously enjoyed her Scottish Country dancing classes, line dancing group and was a member of her local 'green' and indoor short mat bowling clubs. Mum was a keen gardener and grew all her plants from seed so in springtime, the house was full of seed pots. Her garden was a source of pride for her, and she enjoyed receiving comments on how lovely her garden was as well as offering gardening advice to those who asked.

# **Health and Healthcare – Pre-pandemic**

- 4. Mum had lifelong asthma and as is the nature of a chronic respiratory condition, over time she developed severe COPD and emphysema. Mum also had Meniere's disease which had been diagnosed many years previously.
- 5. Mum also had severe osteoarthritis in her hips, knees, back and hands. She had sustained a fractured shaft of femur as a young girl, and this had resulted in her having a deficit in leg length on the affected side and the osteo arthritis was particularly severe in that hip.
- 6. Over time Mum's respiratory conditions resulted in her having to reduce her physical activity including giving up her garden, but she tried to have short walks each day, enjoying her walks to the local shops and post office. She also attended a weekly lunch club and believed that this was important for both her physical wellbeing and her mental health. Mum was able to manage light housework and her laundry with help and support from me. I also arranged for her to have a cleaner who came to the house once per fortnight. Mum cooked for herself but over time she found that using ready-made meals was easier as she found standing at

- the hob tiring. I made extra portions of meals for her, and she always said that my late husband made 'guid soup'.
- 7. Mum could be quiet and a little shy at times, but she had a great sense of humour and especially enjoyed the company of her 3 grandsons. She was very proud to be the 'mother of the bride' when my late husband and I got married in 2011 and both she and I cried when I saw her in her 'mother of the bride' outfit as she looked so lovely and so elegant. She gasped in delight when she saw me in my bridal gown on my wedding day and I remember that we sat quietly and held hands for a few minutes during the reception, just mother and daughter together.
- 8. Mum's sister was a frequent visitor, and my aunt would telephone my Mum several times per day. My Mum called my other Aunt (her sister-in-law) weekly, and they put the world to rights.
- 9. Mum liked to go out for coffee and my brother and I would take her out to garden centres and to shop a little and to visit family. Mum had a good relationship with her neighbours, and they would pop into each other's houses to have coffee and share magazines with each other.
- 10. Mum had complete intellectual capacity and she was as sharp as a tac. Mum had a will in place, and we had arranged Power of Attorney at the same time.
- 11. Recurring chest infections were a part of Mum's chronic respiratory conditions and were usually successfully managed by her GP and being prescribed oral antibiotics and steroids. Probably in what became the last 2 3 years of Mum's life, the chest infections became more frequent, and Mum was more physically affected by them and would be 'off her legs' as the GPs say. She was usually back on her feet within a few days once the antibiotics and steroids had taken effect.
- 12. In February 2020, Mum started to express concern about what we were hearing and seeing on the TV news regarding the pandemic. She was naturally concerned about Covid 19 given her age, lifelong brittle asthma, severe COPD and emphysema.

#### Lockdown

13. I discussed it with her and in March 2020, 2 weeks before the UK government implemented the first lockdown, we agreed that Mum should stop going to the shops and other places where there were groups of people, including her lunch club, stop having visitors in her house, stop visiting her neighbours and we stopped her cleaner from coming into the house.

- 14. My brother has severe COPD, and my Mum was very anxious about him and how he would keep himself safe as he was also at high risk if he contracted Covid 19.
- 15. Mum said that she was anxious about contracting Covid 19 as if she did, she would be a goner with her chest.
- 16. Mum knew that she would be in the shielding category and was relieved that my brother would also be in that category. In due course she received her shielding letter and she and I started to put things in place.
- 17. My late husband had been diagnosed with Chronic Fatigue Syndrome in late 2019 following several years of being investigated for complex sleep apnoea. I was therefore trying also to protect him as well as support my Mum.
- 18. I did grocery shopping for my Mum and would leave the shopping at her front door, not going inside. I would bring her meals and again hand these over at the front door and not go inside. The local Community Council provided a service for local residents where they collected prescriptions from the pharmacy, and this meant that Mum's supply of medication was assured.
- 19. I came often and sat outside Mum's house and had a coffee and a chat whilst she sat sheltered and distanced from me inside her front door. One of my nephews did the same and brought his new puppy down to let Mum see him and talked to Mum through the window. He also brought Mum fish and chips once a week, handing this into her at the door.
- 20. Mum managed to continue with her light housework and developed work arounds so that she could keep her kitchen and wet room floors clean. She went out for a walk each day, walking round the block but she struggled with the isolation of lockdown as it progressed, saying to my aunt that it was not a life but an existence.
- 21. Nobody entered Mum's house from mid-March 2020, and I wore a face covering when I dropped groceries etc at the door and always sat 2 metres away from the front door when I was visiting Mum and having a coffee. I mostly brought a flask with me and always had my own cup so that Mum did not have to handle the cup that I had been drinking from.
- 22. I was aware that people could enter the homes of vulnerable people and although Mum was a vulnerable person, I was very aware that I was going into supermarkets and although both my husband and I were adhering to the guidance and rules, I did not want to take any risks with Mum's health.

- 23. In late May 2020, Mum telephoned me to say that she wasn't feeling well, and she seemed quite confused. I went straight in to see Mum, entering her house for the first time since mid-March.
- 24. I wore a disposable face mask and disposable gloves that I had purchased myself. This was the only PPE that I could access at that time.
- 25. Mum was very unwell; she had a very high temperature and was unable to walk even with my assistance. She was very confused.
- 26. I contacted the local Health Centre and asked if a GP could visit Mum. The GP did visit wearing full PPE and said that he thought that Mum had a chest infection and required antibiotics. The GP asked me if I could manage Mum at home. He said that he would go back to the Health Centre and make enquiries about admitting Mum to hospital and that he would call me in an hour and if in that time, I could not manage Mum on my own, she would need to go to hospital. I asked the GP if I could be provided with a commode from the local Joint Equipment Store and the GP said that this would not be possible as all the Joint Equipment Stores had been closed as part of the lockdown processes.
- 27. Mum could not walk at all even with my support, she could not even take a step. If a commode had been provided, I could have with the support of my sister-in-law who had been shielding with my brother and therefore presented low to no risk to my Mum, managed to get Mum into bed and then I could have managed her on and off the commode and into/out of bed myself.
- 28. I am a retired nurse and was a Director of Nursing when I retired in May 2011, so I have skills in moving people safely.
- 29. The GP called back, and I said that I could not manage Mum on my own. I asked if the District Nursing team could be asked to help, and he said that this was not what they were doing. I asked if Mum could be admitted to the local hospital, the Kello Hospital in Biggar, but he said that the hospital was closed to admissions due to a covid outbreak.
- 30. I asked the GP if the District Nursing Team could be asked to give Mum IV antibiotics and he said that this was not what they were doing, and that Mum would have to be admitted to hospital.

### **Admission to Hospital**

31. Mum was admitted to University Hospital Wishaw. She was taken by ambulance with the 2 paramedics wearing disposable aprons, gloves and face masks. They gave Mum a facemask to wear.

- 32. In the first instance, she was taken into the respiratory receiving unit in A&E. Mum was tested on admission for Covid 19 and that result was negative.
- 33. During her admission, Mum was moved to the Medical Admissions Unit, then to another clinical area before being admitted to a Care of Frail Elderly ward. Mum received IV antibiotics in the first instance, and these were changed to oral antibiotics 24 hours before she was discharged home.
- 34. They discovered that Mum had an underactive Thyroid problem and that some of her blood chemistry was altered and medication was prescribed to correct these problems.
- 35. Mum was discharged from the Care of Frail Elderly ward. In the 4 nights and 3 days that Mum was in hospital she was in 4 different clinical areas. Pre-pandemic, this level of patient movement would have been considered a risk to patient safety and considered a critical incident worthy of investigation. Moving a patient between clinical areas increases the risk of cross infection and moving a frail elderly person from one clinical area to another carries high risk of disorientation and confusion and this could have been significantly exacerbated in my mum's case.
- 36. Mum had been on the verge of sepsis when she was admitted and was in a state of delirium. On her arrival home, Mum was provided with ambulance transport. I had received a call from the Senior Charge Nurse on the ward asking if I was planning to come and collect Mum. I asked the Senior Charge Nurse about this as, although I was perfectly willing to do so, I could not understand why this would be an option as Mum was still in the shielding category and I did not think it was an option for me to be in a confined space with her for a journey time of an hour.
- 37. Mum was discharged from hospital on oral medication, and she was bright and cheerful on her arrival home. I am not aware whether Mum had a Covid test prior to her discharge.
- 38. All her neighbours were sitting outside, all appropriately distanced, awaiting her arrival and Mum was delighted to see them all.
- 39. I had taken the opportunity to clean Mum's house whilst she was in hospital. I had contacted South Lanarkshire Carers Network as they were providing PPE and had been provided with disposable gloves, disposable face masks, disposable aprons as well as a bathing apron and a bottle of hand alcohol. I was told that the PPE would be replenished every week.
- 40. Mum looked well and said that she felt better. She was walking as she usually did with her stick.

#### **DNACPR**

- 41. I was looking through Mum's belongings for the discharge letter to give to her GP and I found another envelope which had a DNACPR form in it.
- 42. Mum had attempted to sign it the day she was admitted to hospital. I asked Mum if she knew what it was, and she said that she didn't. When I explained what it was and what it meant, she was horrified. She didn't recall signing it at that poin but later when she had had time to think, she remembered that when she was admitted to A & E a doctor had spoken to her, but she didn't understand what the doctor was saying and said that she felt that the Doctor was putting words in her mouth.
- 43. Mum was in a state of delirium on her admission, and this is confirmed in her medical notes. I complained to the Hospital about the DNACPR and the means by which it had been signed.
- 44. After Mum's death, I got a response to my complaint from the Medical Director, confirming that the way the Junior Doctor had obtained the DNACPR was less than satisfactory, that Mum was in a state of delirium and that the Junior Doctor should have consulted their Consultant and not proceeded to have Mum sign the form.
- 45. I decided that I would now come into Mum's house as often as was necessary. I wore the PPE that I had and sat 2 metres away from Mum. If I was having a coffee with Mum, I sat in the hallway so that I could take my mask down and was at least 3 metres away from Mum whilst I did so. Nobody else came into Mum's house.
- 46. After a few days Mum became increasingly unwell. Her temperature was spiking around 39 plus degrees C and she was really short of breath.
- 47. I called NHS 24 and was directed to the Covid Hub and spoke to the Doctor. The Doctor thought that it was probably a recurrence of Mum's chest infection. The Doctor advised me to get a Covid home test for myself although I did not have any symptoms.
- 48. An Advanced Nurse Practitioner was sent that night to examine Mum and she agreed with the Doctor that it was a chest infection, prescribed further antibiotics and suggested that we ask the GP to call on Mum the next day. The antibiotics were of a type that weren't any use to Mum, and she was less than chuffed about that.
- 49. The next morning Mum was no better and I contacted the local Health Centre and one of the GPs Name Redacted came in to see Mum. She examined

Mum and said that she didn't think she was listening to a Covid chest and prescribed a different antibiotic and more steroids.

- 50. Name Redacted quietly told me that she was worried that Mum had come out of hospital with more than she went in with. Name Redacted said that she would go back to the Health Centre and check the current guidance as it was changing several times per day and call me to determine if I should get a Covid Home Test. Name Redacted called me and advised me to get a test for both Mum and I. By this time Mum had been out of hospital for about a week.
- 51. I managed after several attempts to get a home test for Mum but I was unable to get a test as I had no symptoms and was told that I did not meet the criteria for a test. I had to wait 2 days for the test to arrive by Courier.
- 52. Mum continued to be unwell and the day I was to do the test for Mum, I went in to see her at about 6am. She was already sitting up in her armchair, she looked grey, and her temperature was spiking over 39 degrees C.
- 53. I did the test for Mum and the inside of her mouth was coated and horrible. I had to go home to leave the test for the Courier to collect and came straight back into Mum.
- 54. I called NHS 24 and was put through to the Covid Hub and spoke to the Doctor. The Doctor decided that she would admit Mum to hospital and said that she thought Mum might have Covid. I raised my concerns with the Doctor about the DNACPR that Mum had signed, and the Doctor assured me that this would be discussed afresh when Mum was admitted as the situation had changed. The Doctor also said that this was not the first time that she had heard about DNACPR being obtained inappropriately in hospitals.
- 55. I phoned my brother who was still shielding and told him that the Doctor thought Mum had Covid and that she was going to be admitted to hospital. I said that he should come and see her as she was very ill and that he should stay in the garden and speak to her through the window. I was anxious that this might be the last time he would see her.
- 56. My brother came to the house and spoke to Mum through the window at first. He wanted to come in so I gave him a mask and apron and made him keep 2 metres away so she could see him better. I made him sit outside when we had a cup of tea. Mum managed to have a little to eat and a hot drink and I gave her paracetamol, and her temperature came down a bit.

- 57. Mum was taken to hospital by ambulance. The Paramedics wore face masks, disposable aprons and gloves and gave Mum a mask to wear when she went into the ambulance. Mum was admitted to University Hospital Monklands. This was Sunday 7th June 2020.
- 58. Mum was admitted to a Covid ward, and she had a Covid test on admission. The ward staff phoned me on Monday 8th June in the late afternoon and told me that Mum had tested positive for Covid.
- 59. I was very distressed and frightened given Mum's respiratory conditions and that she had been so unwell when she was taken into hospital.
- 60. I received a call from the Consultant to discuss the level of treatment Mum would be afforded. The Consultant said that she thought that Mum's existing long term and severe respiratory condition meant that she would not be able to withstand CPAP or HDU/ITU level care and therefore she proposed that they would afford Mum every care and every effort up to that level and that if she did not respond to this they would not pursue further treatment.
- 61. The Consultant also said that she did not think Mum would be able to withstand active resuscitation. I agreed with the Consultant that Mum would not withstand this and agreed DNACPR.
- 62. Mum was offered trial drugs and refused them. I didn't know anything about this, only finding out in the only telephone call I had with Mum and by that time it was too late, and she would not change her mind. She had refused the trial drugs on the basis that she would need to go back to hospital regularly for follow up and attending hospital was always something that distressed Mum.

### Visiting in hospital

- 63. On 9th June 2020, I received a call from NHS Test and Protect to advise me that Mum's Covid test was positive. I informed them that I was already aware of this and that my husband and I were self isolating.
- 64. The Adviser worked out when my self-isolation period was to end. As there were no visitors allowed in the hospital, we weren't allowed to see Mum over the next 7 days.
- 65. Mum had a mobile phone, but she would only text and would not make calls with it. Mum sent me a few text messages at the beginning of her admission, but the messages became muddled and then stopped altogether.

- 66. She was receiving oxygen through a face mask and as Mum wore glasses, she couldn't have her glasses on and couldn't see well enough to use the phone and then she became too unwell to do so.
- 67. One of the nurses used her own phone to make a WhatsApp call to me and I was able to see and speak to Mum. This happened once in the first couple of days after Mum was admitted.
- 68. I had daily telephone calls with the Doctor, and it was clear that Mum's condition was deteriorating and that even with high flow oxygen she was not improving. Finally on 15th June 2020, I was called by the ward's Specialist Nurse who asked if I was planning to come and visit Mum that day. I said that I didn't know that I could visit her as I had been consistently told that there was no visiting allowed. She consulted with someone and came back to ask me if I could come to the hospital for 1pm that afternoon as the Doctor wanted to speak to me and that I could see Mum for a short time then.
- 69. My husband and I went to the hospital and my brother and sister-in-law also went to the hospital. We travelled in 2 cars as my brother was still shielding.
- 70. I was allowed to see Mum for a short time and then the Doctor asked to speak to me. She told me that Mum wasn't going to survive and that there was no more that they could do for her and that we should prepare ourselves. No-one else was allowed into the ward or to see Mum. The Consultant said that it was too much of a risk for my brother as Mum was continuing to test positive for Covid 19.
- 71. I was allowed to spend a further hour with Mum that day. The nurses diligently dressed me in full PPE, theatre hat, FFPP3 mask, face visor, full length theatre style scrub gown and double gloves. Thereafter I was told that I could stay with Mum for as long as I could tolerate the PPE but to avoid the mornings as the nurses had to dress me in the PPE and then 2 of them watched and instructed me in how to remove it properly. I spent around 3 4 hours with Mum each day for the next 2 days.

#### PPE

- 72. I saw no shortage of PPE in the ward. I suspect that I was allowed in to see Mum and able to wear that level of PPE as there were good supplies of it.
- 73. I did witness breaches of infection control practice on a couple of occasions in the ward. On the day Mum died, a member of the domestic

staff entered the inner room Mum was in wearing a face mask only and had no other PPE. Mum was in an infectious diseases ward and in a single room with an ante room where I was only allowed to enter once I was in full PPE and when I had called the nurses to watch me remove the PPE at the end of my visit. I also witnessed a Consultant enter the ward and walk into the main ward area without wearing a face mask which was required on entering the ward.

- 74. I witnessed breaches of infection control practice within ambulance staff also including not wearing PPE and not cleaning the ambulance between patients.
- 75. I witnessed a Patient Safety Walk Round taking place in the ward Mum was in where the person leading the Walk Round had to be instructed how to wear a face mask by the Estates Manager who was also taking part in the Walk Round. The individual had the mask on upside down and inside out.
- 76. I also saw a 'Youtube' video of NHS Lanarkshire's Nurse Director who was Gold Commander on the day the video was filmed, urging staff across NHS Lanarkshire to avoid meeting in public spaces in the hospitals as they were 'concerned about staff outbreaks.' This was on 24 May 2020, the date my Mum most likely contracted nosocomial Covid 19.
- 77. On 15th June 2020, it was considered too much of a risk to allow my brother into the ward to see my Mum. He was taken to look through her room window. She couldn't really see him, and she couldn't hear him, but she waved towards the window. She continued to look at the window and ask when he was coming to see her until she could no longer speak.
- 78. On 16th June 2020, the Consultant asked to see me and said that they would try my Mum with oral Dexamethasone, 'one last throw of the dice'. If this didn't work, then they would move to a morphine and midazolam subcutaneous infusion and I agreed that if there was no change with the Dexamethasone, then all I wanted for Mum was dignity, comfort and peace.
- 79. On 17th June 2020, I again saw the Doctor and the Dexamethasone had made no difference and they had started the Morphine and Midazolam infusion. When I went in to see Mum, she told me that the Doctor had seen her that morning and had told her that she wasn't going to survive. Mum said, 'I think I knew'.
- 80. I found this so lacking in compassion all for the sake of a few hours. The Doctor knew I was coming to see Mum and she could have waited so that I was there with Mum when she broke this news to her.

81. When I was with Mum particularly on 17th June 2020, I would talk with her and hold her hand, and I gave her messages from close family members, all of whom knew that my Mum was in the last days of her life.

## **Day of Passing**

- 82. I got a call around 7am on 18th June 2020 to say that there had been a change in my Mum's breathing and that as they knew I wanted to try to be with Mum when she died that I should come in.
- 83. I made my way to the hospital and was with Mum from around 8am. Mum knew I was there with her. I stayed with Mum, held her hand and talked quietly for a time, telling her how much I loved her and how much her family loved her and told her not to be frightened as my Dad would be waiting for her with his arms open wide.
- 84. Mum died peacefully at around 3.30pm.
- 85. The cause of death on the death certificate was Covid 19.

## **Complaints**

- 86. I complained to NHS Lanarkshire as I believed that Mum contracted Covid whilst in their care when she was in hospital in May 2020. I eventually received a response to my complaint in which NHS Lanarkshire set out that there had been 4 patients who tested positive for Covid 19 in the Care of Frail Elderly ward during the time Mum was admitted there. The Health Board used a Public Health algorithm to calculate the likelihood that Mum contracted Covid whilst in hospital.
- 87. They concluded that it was extremely likely that she had contracted Covid whilst in University Hospital Wishaw as she had tested negative on admission and had been in the same room as other patients who had Covid.
- 88. There was no real apology and no recognition of the fact that my Mum contracted Covid 19 when in the care of NHS Lanarkshire and no explanation as to how this had occurred or any review of infection control practice that had enabled this to happen.
- 89. The fact is that Mum tested negative when she was admitted and tested positive days later. The timelines fit.

- 90. Neither I nor my husband contracted Covid 19 during this period and I had been in close proximity to Mum providing personal care in the days leading up to her being admitted to University Hospital Monklands.
- 91. Mum was 86 years old when she died. She was interested in life and people and took such pride in her family. She was living independently and had done so since the death of my father in 1999. She had a good quality of life and though she lived in a simple, quiet way, she had life yet to live. She never got to meet her great grandson which would have been one of her greatest joys.

#### **Funeral**

- 92. Following Mum's death, we had to discuss the funeral service with the Minister in my garage as he was not allowed to come inside the house. Instead, we sheltered in our garage as it had doors at each end, so we had free flowing air with shelter from the rain and it was big enough that my brother, the Minister and I could sit 2 metres apart.
- 93. We were only able to have 20 people at the funeral and were not allowed any gathering of any kind afterwards. None of Mum's neighbours could come to her funeral so the Minister took the time to say a prayer with them outside Mum's house as the hearse left from there.
- 94. We were not allowed to sing the hymns and had to have a 'virtual' choir as singing was considered high risk. I was able to hug my husband but could not hug my brother, my aunt or any other member of my family who attended the funeral.
- 95. I struggled with the loss of my mum and my grief and experienced flashbacks for months afterwards.
- 96. I blamed myself for not having tried harder to keep Mum at home, for not having protected her and for her contracting Covid 19.
- 97. If only I had tried harder to keep her at home, she would not have contracted Covid 19. If I had been able to access a simple thing like a commode, I could have managed Mum in her home, and she wouldn't have needed to go to hospital.
- 98. If the District Nurses had been more appropriately utilised in supporting particularly older and more vulnerable people to stay at home and have IV antibiotics, then Mum wouldn't have needed to go to hospital. I don't think I will ever really forgive myself.

- 99. Only when my husband died on 2nd January 2021 also from Covid, did I truly understand what my Mum went through as a widow. How I wish I could tell her how much I admire her for her strength and courage.
- 100. Grief is a constant, it's not something to be gotten over, it takes constant managing, it's effortful and wearisome and takes every bit of resilience that I have.
- 101. My life and I have been changed forever.

# **Undernote:**

I certify that the above statement is true to the best of my knowledge and belief.
I authorise release of my statement to the Inquiry

**Signature** Mrs Margaret Waterton (Aug 10, 2023, 10:04pm)