(In the presence of the jury)

MR MYERS: [Baby C], Ms Letby, which is the third count on the indictment. Can we put up tile 5, please, Mr Murphy, and go behind that?
In fact, if we just have a look at the front sheet, that will probably suffice.

[Baby C], born on 10 June 2015 at 15.31, 30 plus 1 weeks' gestation, born by caesarean section,800 grams at birth.
We can see IUGR, which means intrauterine growth restricted and also reverse end-diastolic flow, which means the umbilical artery flow is reversed to some extent. Are you aware of that?

A. Yes.

Q. So that's [Baby C]'s birth details. The events that we have looked at, the key events, before we look at the actual tiles with the nursing notes on, are as follows -- in fact, there's an event on 12 June 2015, not on our sequence of events, but it will come to mind if we look at this, which was a radiograph taken at 12.36, showing marked distension of the stomach and small intestine. That was on 12 June.

Then we come to the event, which is reflected on the charge on the indictment, and that's 13 June at about 23.00 hours when Sophie Ellis gave [Baby C] his first milk feed. And at about 23.15, he collapsed after a projectile vomit. And efforts were made to resuscitate [Baby C], but that resuscitation ceased at 00.45 hours, that CPR ceased then, and sadly [Baby C] died at just before 6 o'clock on the morning of 14 June, that morning.

Let's look at the relevant nursing notes if we may before I ask you questions and let you explain what you can, Ms Letby. The first of those is a note by Sophie Ellis at tile 231. Can we enlarge that? It's the large panel on the left-hand side.

We'll start with the large panel which was a note made at 8.46 on 14 June, so this is several hours after [Baby C] had died. A note by Sophie Ellis who, as we'll see, was the designated nurse.

It says:

"Cares taken over at 20.00. Safety checks completed and fluid requirements calculated. Nursed on Optiflow, 6 litres in 25% oxygen. Observations satisfactory. Heart rate 150 to 157. Respiratory rate 58 to 73, elevated at times as previously been for past few days and temp 37 to 37.1."

Statistics given there:

"Pink and well perfused. Active and alert.

On 150ml/kg/day on day 4 due to birth weight of below

1,000 grams. Hourly amount of 5ml."

It sets out the TPN and the lipids:

"Infusing via long line. Site satisfactory. To

repeat gas at 02.00 on 14/6/15. Myself asked Reg

Katherine Davis to start trophic feeds. She agreed.

Started on 0.5ml, two-hourly. First feed of 0.5ml given

at 23.00."

That's [Baby C]'s first feed:

"At around 23.15, [Baby C] had an apnoeic episode with

prolonged brady and desat. Crash call for neonatal team

put out by myself. Resuscitation commenced. Resus

drugs given as charted."

We're going to move on in fact, this doesn't involve

the vomit, I apologise, this is the brady and

desaturation after the first milk feed.

Let's scroll down, please, to the note at 07.38:

"Written in retrospect..."

This is on 16 June, we're just following through from Sophie

Ellis:

"Written in retrospect of care from 14/06/15.

Had two fleeting bradys, self-correcting, not needing any

intervention, shortly before prolonged brady and apnoea

requiring resus. Minimal bile aspirates gained. Green in colour. NGT aspirated before first feed. Bile aspirated."

That was an additional note written by Nurse Ellis 2 days after the first note.

Nurse Taylor also provided a note dealing with this and that's at tile 217. Let's go there, please, and we go into that, please. It's on the right-hand side and the second panel, the first with the text in:

"14 June. 07.20."

So again, this is a note written, in this case, a little less than a couple of hours after [Baby C] had died by Melanie Taylor:

"Called to help as baby had brady/desat. When arrived to baby, baby apnoeic, loss of colour.Neopuffed but no able to bag. No chest movement.

Guedel airway inserted. Bagged and chest movement gained. Medical team crash bleeped. No heart rate heard. Started chest compressions. No improvement. Continued. Dr Davies arrived. Dr Gibbs called to attend urgently. Intermittent gasping. Continued resus. Intubated by Dr Davies. Positive capnograph for CO2 obtained. Bagged via ETT. Good chest movement and air entry. Continued chest compressions."

It goes on to say:

"Emergency drugs administered as documented.
Further resuscitation notes in medical notes.
Parents called and present throughout resus. Dr Gibbs present throughout. Still intermittent gasping.
Parents wanted [Baby C] to be baptised.
Chest compressions and Neopuff continued until baptism finished at parents' wish.
Heart sounds then present and gasping."

Then the following note, which we can see, 08.14 that morning, deals with the parental care, [Parents of Baby C] with [Baby C], and sadly [Baby C] dying with them.

Those are the notes that deal with the event, Ms Letby. Again, I make it plain, my error when I referred to vomiting. This is an incident at 23.00 hours on 13 June, when Sophie Ellis gave [Baby C] his first milk feed and he collapsed about 15 minutes later with desaturations and bradycardia.

Before we come to the events of that night,Ms Letby, I'd just like to ask you to clarify something about 12 June. I'd be grateful if Mr Murphy could just put up -- it's not on the tiles because it's not on the sequence of events, but J1996, which is a radiograph from 12 June. We'll just have a quick look at this and J1997 that follows it.
We've had evidence about this from all the prosecution experts in the case. I'm not going to repeat what they say, but that's the radiograph.

Then if we scroll down, we can see it's for 12 June at 12.36, a little before midday. If we scroll down to see the commentary at page 1997, please, just to confirm it refers there to:

"Now marked gaseous distension of the stomach and proximal small bowel."

That's something which the experts identified as an event. I'd just like to go to your shift pattern, Ms Letby. It's at page 3323. Ladies and gentlemen, you've got the shift pattern in fact in the bundles, but we can put this up on the screen hopefully.

We know that radiograph and whatever it relates to is taken at 12.36 on 12 June. We've got your shift pattern out now. Were you working on 12 June, Ms Letby?

A. No, I wasn't.

Q. Or on the unit for that matter?

A. No.

Q. Just for those following, 12 June is in the second row down, isn't it?

A. Yes.

Q. It starts with Monday the 8th on the left when you were working nights, the 8th and 9th. That corresponds with events with [Baby A] and [Baby B], doesn't it?

A. Yes.

Q. Then you were not working on the 10th, 11th and 12th; is that right?

A. That's right.

Q. And you next come in for the evening shift on the 13th?

A. Yes.

Q. Right. We can take that down, please, Mr Murphy.
Thank you.

Can we put up, please, tile 16, Mr Murphy. We're going to look at some messages leading up to the dates we're dealing with. Thank you.

So this is 11 June, 14.08, from you to Yvonne Griffiths:
"Hi Yvonne, are you okay for staffing over the next few days? I don't have anything on if you need any extra or need to change my nights."

Tile 17, please. Yvonne Griffiths replies at 17.35 so a few hours later the same day to you:

"Thank you for your kind offer. We are still okay til Saturday night when we only have five staff so we can reassess then."

That's followed at tile 18 and you say:

"Okay. Think I need to throw myself back in on Sat."

Pausing there, what do you mean where it says, "Okay, think I need to throw myself back in on Sat"?

A. That that would be my first shift back to work after [Baby A] and [Baby B].

Q. And Saturday is the 13th?

A. That's right.

Q. That's actually when you did go in, isn't it?

A. Yes, my shifts changed that week.

Q. We touched before on this, but what are you getting at when you are saying, "I need to throw myself back in"?

What do you mean by saying that?

A. That I wanted to get back into the unit and back into looking after babies.

Q. Can we go to tile 19, please. Why? Why did you want to get back in? What is it about that that matters?

A. Because that's what I was taught at Liverpool Women's: when you have difficult shifts or babies pass away, the way to sort of overcome that is to go straight back into the environment and carry on.

Q. Right. Thank you.

Tile 19, 11 June, 17.45 hours, Yvonne says to you:

"Hopefully it may settle down by then."

Tile 20, please, you say:

"Hope so! But think from a confidence point of view I need to take an ITU baby soon."

Then tile 21, bringing this sequence to an end, Yvonne replies to you 4 minutes later at 17.50:

"Yes, it does knock us a bit when things like that happen, but it's okay to have time out as well. Enjoy the sun."

It says, "It does knock us a bit". Had you been knocked a bit by what had happened?

A. Yes.

Q. When you were interviewed about [Baby C], the police asked you about events on 13 June 2015. We're going to look at a few passages from the interview with [Baby C]. Let's reach for the interview file, please. You take it, Ms Letby, you too, ladies and gentlemen, if you would. We're going to go to [Baby C], interview 1, page 1.

(POLICE INTERVIEW)

The officer said to you:

"Question: Did you have an involvement with the care of [Baby C]?" Can you see that?

A. Yes.

Q. You said:

"Answer: Just with his resuscitation from what I remember.

"Question: Okay. Can you explain to us what your involvement was then, please?

"Answer: I'm not sure what my exact role was, but I remember him requiring resuscitation."

Pausing there, is that right, at the time of the interview is that as far as your memory went?

A. Yes.

Q. The officer says:

"Question: Okay.

"Answer: I remember that he'd not long had his first feed by one of the nurses and it wasn't long after that that he deteriorated, so I am not sure what my role was with him in that resuscitation. I think I did chest compressions. And I remember we waited for the vicar to call and we carried on resuscitation efforts until the vicar arrived and then we withdrew care and [Baby C] lived for several hours after that around -- in the parents' accommodation.

"Question: Okay. Are you aware of why he required resuscitation?

"Answer: No, I don't recall the events leading up to that. I just know that he had resuscitation."

Is that right, did you have any recollection of any events leading up to the resuscitation?

A. No.

Q. And you are asked:

"Question: So you're not aware of what the circumstances of his collapse were?

"Answer: No.

"Question: Had you had contact with him to that point?

"Answer: Not that I recall, no."

How easy was it to recall detail when you were being interviewed in July 2018 of what happened on this night leading up to this collapse?

A. It was very difficult. I don't really have any memory until the resuscitation with it being a significant event. Prior to that, it was just a normal shift.

Q. Had you had any involvement with [Baby C]?

A. No.

Q. Or any reason for it to stand out in any particular way?

A. No.

Q. How easy is it just to go back and think up details relating to a baby whose name is given to you, maybe years after the event?

A. It's very difficult. I've looked after hundreds of babies.

Q. But the events of this night, did they stand out though?

A. Yes.

Q. Did you know who the police were talking about when they asked you about [Baby C]?

A. I did, yes.

Q. Let's go through events as you recall them, Ms Letby. Can we look at the layout, please, for the start of this shift, which is at tile 138.
This shows the staff present: shift leader [Nurse B]; designated nurse, Sophie Ellis.
If we scroll down we can see who you were designated for, Ms Letby. You were for baby JE and baby PE; can you see that?

A. Yes.

Q. Do you recall which nursery you were in or nurseries?

A. Nursery 3.

Q. And do you recall which nursery [Baby C] was in?

A. Nursery 1.

Q. When it comes to recalling what took place that night, how much are you able to recall on your own recollections and how much on other matters given to you to assist with recollections?

A. I have very little independent memory.

Q. Right. Little independent memory?

A. Yes.

Q. We're going to have a look at the neonatal review then to see the movements leading up to this time. It can be put on the screens. I'm going to ask Mr Murphy if he could put up page 3 of 9 of the neonatal review for [Baby C].

We can see the event for [Baby C] at 23.15 is right in the centre at line 71; do you see that?

A. Yes.

Q. If we go up to the top half of the chart and enlarge that so we can see what you're recorded as doing in the period leading up to that. Can you see line 55?

A. Yes.

Q. What does that show you doing?

A. So that's me carrying out observations on the baby JE.

Q. And observations -- and what about line 56?

A. I also did the fluid balance chart at that time as well.

Q. That's at 23.00 hours; yes?

A. Yes, so that was an observation and fluid balance and a feed.

Q. Which nursery would you be in for that?

A. Nursery 3.

Q. Line 65, also in blue, what's happening then also at 23.00?

A. So around that time, I've also done observations on my other baby, PE.

Q. Which nursery would that be in?

A. I believe that was nursery 3 as well.

Q. Yes. Was anybody else working in nursery 3 with you as far as you can recall now with everything you have learnt?

A. [Nurse B] was around and about quite often, yes, but I don't know if she was actually working in the nursery.

Q. All right. Looking after JE and PE and carrying out the type of tasks that we can see at 23.00, what sort of timescale does that require to do those tasks across those babies approximately?

A. The observation chart for PE would probably have taken a matter of minutes. That would have been readings from a monitor I assume. With JE it would have been longer because I believe I gave a milk feed at that time as well.

Q. Right. From what you can see would you have been anywhere other than nursery 3 in or around 23.00?

A. No.

Q. Before we move forward, I'd like to see what led up to that. You have said to us you don't recall having had anything to do with [Baby C] that evening?

A. No.

Q. What were you occupied with that evening?

A. The babies I was allocated to look after in nursery 3.

Q. We know the collapse with [Baby C] is round about 23.15.

A. Yes.

Q. We know he had a feed at 23.00.

A. Yes.

Q. And we've seen what you were doing at 23.00.

A. Yes.

Q. If we look at this, starting at line 28, we're going to just look down to the end of the table, lines 28, 29 and 30, 22.00, involving baby JE. What would you have been doing at that time?

A. So I've also made an entry on my nursing notes to reflect some observations that I've made of JE at that time.

Q. And which nursery is that in?

A. Nursery 3.

Q. Move down, please, to line 37.

A. There I've taken fluid readings for my other baby, PE.

Q. Lines 38 and 39; can you help us with that?

A. Yes, they're medications that I have co-signed with [Nurse B] for a baby, HM. I'm not sure where that baby's located.

Q. I'll tell you: HM is allocated to Nicola Dennison, as it happens, on the schedule we have.
Carrying on: EB at 40 and 41. What's going on there?

A. So the same again, myself and [Nurse B] have given medication for this baby.

Q. And lines 45 and 46, what are you doing there?

A. So that's another set of drugs for another baby, a different baby again.

Q. We've seen what follows with your babies in nursery 3 at 23.00. So again, assisted by that, did you have any involvement with [Baby C] before the time of the collapse?

A. No.

Q. And so far as you can remember and from what you've seen, where were you located?

A. In nursery 3.

Q. What was the first you were aware of any problem relating to [Baby C]?

A. Once he'd collapsed.

Q. If you just stay focused with this, Ms Letby. How easily do things distract you around you if anything happens?

A. I'm very easily distracted.

Q. Have you always been like that?

A. No.

Q. You do your best to concentrate on this. Right. What I was asking, before that, was: what was the first you were aware of any issue with [Baby C]?

A. So when he collapsed.

MR JUSTICE GOSS: You did actually say after he had collapsed. It may be a distinction without a difference. I think she had originally said after he'd collapsed and then said when he collapsed. I just wonder if --

MR MYERS: That's why I wanted to go back over it. There's a certain amount of --

MR JUSTICE GOSS: Yes.

MR MYERS: -- activity. So I'm trying to get focus back on this.

MR JUSTICE GOSS: Absolutely, let's get back and focus. Perhaps start again.

MR MYERS: I will.

I've been asking about where you were working, Ms Letby.

A. Yes.

Q. And you described to us what you were doing in nursery 3.

A. Yes.

Q. What was the first you were aware of, of any event concerning [Baby C]?

A. At the time of his collapse.

Q. At the time of. Can you give us a bit more detail than that? When your recollection kicks in with detail, what is it?

A. So he was receiving support at that time and I was called to help.

Q. Right. Before you were called to help, were you aware of anything taking place with [Baby C]?

A. No.

Q. Doing the best you can to recall this, where were you before you were called to help?

A. I wasn't in nursery 1.

Q. Right. Do you recall who called you to help?

A. I believe it was Sophie Ellis.

Q. Once you'd been called to help, what happened next?

A. I don't have a lot of independent memory, but I believe I asked Sophie to go and put out a crash call and Melanie Taylor was with [Baby C].

Q. Let's just pause a moment, you've talked about Melanie Taylor now. When were you first aware of Melanie Taylor?

A. Melanie Taylor was in the nursery when I arrived.

Q. Right. When you arrived?

A. Yes.

Q. So you had been called to help?

A. Yes.

Q. Where did you go after you were called to help?

A. Into nursery 1, to [Baby C].

Q. Once you went there, do you recall what you could see?

A. Mel was with [Baby C]. I just remember that he was apnoeic and needed respiratory support, so I asked Sophie to put out a crash call.

Q. Right. Do you recall anybody else being present at that point?

A. I believe [Nurse B] was there as well.

Q. Do you believe that from your own recollection or do you believe that from things you've heard since then?

A. Um, no, I do have some recollection of that.

Q. That she was there?

A. Yes.

Q. Who was it that put out the crash call?

A. Sophie Ellis.

Q. Did you offer any assistance or play a part in what happened after that?

A. Yes, so from that point, full resuscitation commenced and I know I did take part in chest compressions at certain times.

Q. Do you remember the particulars of what took place?

A. No.

Q. I just want to go through some of the questions you were asked about this when you were interviewed by the police. I would like us to go to the [Baby C] interviews, if you would, please, ladies and gentlemen, behind tab 2. So [redacted] and this time it's 2. It'll have [redacted] in red at the top right-hand corner if we're at the right place.

There's a passage I want to remind us of and then a couple of questions about that. Can you see on the left-hand side of the page it says 00.29.10?

A. Yes.

(POLICE INTERVIEW)

Q. And the officer is talking about Nurse Sophie Ellis, who's been spoken to. This is the officer reporting this:

"Question: She was out of the room at the nurses' station when [Baby C]'s alarm sounded. She says that you had your own designated baby who was in nursery 3. Do you agree with that?

"Answer: No, as I've said before I don't remember who I was looking after on that shift, I would have to look and check."

Just pausing there, why do you know it was nursery 3 now?

A. Because when I was informed of the babies' initials of that evening shift, I could recall that baby.

Q. You are asked:

"Question: She goes on to say that when she went into nursery 1 in response to alarms she says that you were standing next to [Baby C]'s cot as you entered. Do you agree with that?

"Answer: I don't specifically remember when I entered the room or why I entered the room."

So as matters stood do you agree that you were standing next to the cot?

A. No.

Q. Do you have any recollection that you were standing next to the cot?

A. No.

Q. Do you recall alarms going off in particular?

A. I recall alarms going, yes.

Q. You do recall alarms?

A. Yes.

Q. You told the police:

"Answer: I don't specifically remember when I entered the room and why.

"Question: Nurse Sophie Ellis says that you said, 'He's just dropped his HR and sats', or something similar. Do you recall saying that to Sophie Ellis?"

And you said no.

Now looking back at this, do you recall saying anything like that to Sophie Ellis?

A. No.

Q. Over the page. Just this page that I want to deal with, page 112:

"Question: You were placed into nursery 3 during his shift and had your own designated baby to look after; do you agree with this?

"Answer: Not from memory, I'd have to check if that's documented as being right then, yes, it would have. I don't remember.

"Question: Okay, Lucy, have you got any explanation as to why you were already in nursery 1 when [Baby C]'s alarms were sounding?"

Pausing there, did you have any recollection of being in nursery 1 prior to the alarms sounding?

A. No.

Q. Or of what Sophie Ellis had said to the police?

A. No.

Q. You say:

"Answer: I don't recall from memory. I may have been in there doing the checks that we do in the ITU room, I may have been getting a drug out of the cupboard, I might have been using the computer, I might have heard his alarms, I don't recall."

Why were you suggesting all those things if you didn't recall where you were?

A. Because based on the interview of Sophie Ellis, she had placed me in the nursery.

Q. Do you mean based on the statement of Sophie Ellis?

A. Yes, sorry, yes.

Q. What the police were saying to you?

A. Yes.

Q. The police say:

"Question: What checks are they, Lucy?

"Answer: There's the resus trolley that's in the room and the ITU spaces are all checked each evening.

"Question: Would you do all that whilst caring for other babies then?

"Answer: Yes."

As it happens are those checks a nurse might do whilst caring for other babies?

A. Yes, they are, yes.

Q. But had you actually been in there, in that room, when [Baby C] desaturated?

A. No.

Q. Question:

"Had you been treating [Baby C] at this time, Lucy?"

You said:

"Answer: Not that I remember."

Pausing there, did you have anything like the neonatal review that we have now to refer back to when you were being interviewed?

A. No.

Q. Question:

"Have you got any explanation as to why you were stood at [Baby C]'s cot side as Sophie Ellis has told us?

"Answer: Not as I -- no. As I say, not from memory. I don't recall why specifically I was there."

Pausing there, had you actually remembered that you were there?

A. No.

Q. Why were you talking or beginning to talk about being there then?

A. Because from the statement of Sophie Ellis, that's what had been put to me, that I was there.

Q. Right.

We know that -- if we actually read just to the end of this section. The comments -- she talks about the comments that Sophie Ellis said you'd made:

"Question: Got any explanation as to why you made that comment to Sophie?

"Answer: That's what I must have witnessed,alarming, on the alarm, and that's when she's come."

Did you actually have any recollection of being there with the alarm sounding and saying anything to Sophie?

A. No.

Q. So why were you talking about saying things to Sophie?

A. Because that was the suggestion, that Sophie had said I was there and I was thinking of reasons, if that was correct, why I would have been there.

Q. And the officer says:

"Question: Okay, you've got no explanation as to why you're in nursery 1?

"Answer: No. As I said I don't recall."

A. Mm.

Q. We know that also in 2018, [Nurse B] had made a statement to the police. That's in evidence, we've heard that. She was asked about that when she gave evidence.
Did the police at any point, when faced with you saying you didn't recall things, tell you about what [Nurse B] had said in her statement?

A. No.

Q. Was there any reference to what she'd said, that she'd been dealing with [redacted] and Lucy when some time, between 10 and 11, [Nurse B], was called to assist with [Baby C]?

A. No.

Q. Any reference to that to assist with your memory?

A. At the police interview?

Q. Yes.

A. No.

Q. And again with regard to the statement from [Nurse B] dated 2018, was there any reference to you to assist with memory that she had said that when she entered nursery 1: "Sophie and Melanie were Neopuffing [Baby C] in an attempt to assist with breathing"?

A. No.

Q. Did they assist you with that?

A. No.

Q. And also from that same statement, raised with her in evidence in this trial, when describing the attendance of the doctors to intubate [Baby C], she said: "I also think Lucy was in the room by now as well." Was your memory assisted with that?

A. No.

Q. Whatever you said in response to what was identified from Sophie Ellis, did you have an independent recollection of what took place that night?

A. I had some recollection.

Q. Starting from where?

A. So I believed that I had been called to help.

Q. Right. Had you had any involvement with [Baby C] before that?

A. No.

Q. Or any recollection of involvement before that?

A. No.

Q. Did you accept as accurate what the police were telling you with regard to Sophie Ellis?

A. Yes.

Q. And by that I mean what she'd said in her statement, you accepted that from the police?

A. Yes, so from what they told me, I assumed that to be true.

Q. Right. Also referred to in the course of the interviews, I want to ask you about this, were messages that you'd sent whilst on duty that evening, earlier that evening --

A. Yes.

Q. -- messages between you and Jennifer Jones-Key. So could we look, please, at tile 147? Thank you.
This is a message from you to Jennifer Jones-Key at 21.48 hours on 13 June. So you were at work?

A. Yes.

Q. "Keep thinking about mum, feel like I need to be in 1 to overcome it but [Nurse B] said no."
Is that what had happened, you'd asked [Nurse B] and she'd said no?

A. I can't remember specifically now, but it reads that way, yes.

Q. And if [Nurse B] said no, what did you then get on with?

A. Taking care for the babies that I was allocated to look after.

Q. Tile 148, please. Jennifer Jones-Key says:
"I agree with her. Don't think it will help. You need a break from full-on ITU. You have to let go or it will eat you up. I know not easy and will take time."
We know -- do you recall this series of messages that took place at this time?

A. I recall the content of the conversation, not the full details, but yes.

Q. We know the messages run over a couple of hours. I'm not going to all of them, we've seen where they start, but I want to go towards where they end because that's something which the police pointed out to you in the interview. So if we go to tile 174, please.
This is 23.01. You're sending a message to Jennifer Jones-Key saying:
"Women's can be awful but I learnt hard way that you have to speak up to get support. I lost a baby one day and few hours later was given another dying baby just born in the same cot space. Girls there said it was important to overcome the image. It was awful but by end of day I realised they were right. It's just different here."
And tile 175, please:
"Anyway, forget it [this is a minute later]. I can only talk about it properly with those who knew him and Mel not interested so I'll overcome it myself. You get some sleep."
And Jennifer Jones-Key replied to you at tile 176:
"That's a bit mean, isn't it? Don't have to know him to understand. We've all been there. Yep, off to bed now."

Pausing there, we have seen that you were involved with various cares and charts at 23.00, it says.
Would that be going on at the same time as you're texting?

A. No.

Q. So can you help us with whether or not you'd have done those observations before or after the texts?

A. I couldn't say. It'd be around that time, but it's not a definitive time on the chart.

Q. Can we go to tile 178, which is the next tile in this sequence. Jennifer Jones-Key had said it was a bit mean, this is at 23.09, and you say:
"I don't mean it like that, just that only those who saw him know what image I have in my head."

And you say at tile 179:
"Forget it, I'm obviously making more of it than I should."
And then tile 180:
"Sleep well."

In interview, having gone through the evidence of Sophie Ellis, it was then identified those texts took place and it was suggested to you that you then went on to attack [Baby C].

Do you recall that being put to you?

A. Yes.

Q. Is there anything about those texts which have the effect of making you want to attack any child?

A. Not at all, no.

Q. You have been talking about how you wanted to -- how you learnt at Liverpool Women's how to deal with the loss of a baby, had you?

A. Yes.

Q. Was that something you wanted to happen? Take a drink.

A. Sorry, could you repeat that?

Q. The loss of a baby, is that something you wanted to happen?

A. Not at all, no.

Q. Why were you talking about the support you needed for it the way to deal with it?

A. What do you mean, sorry?

Q. Why were you talking about Jennifer about how best to deal with the loss of a baby and what should happen?

Why was that coming up? What was on your mind, Ms Letby, that made you want to talk about where you should be working?

A. What had happened with [Baby A].

Q. Yes. Was that something you wanted to happen again?

A. No.

Q. Do those messages have anything to do with what happened with [Baby C]?

A. No, not at all.

Q. Do you recall whether you had any contact with [Baby C]'s family in the immediate aftermath of what took place?

A. I know the family were present whilst resuscitation was ongoing and I was part of the resuscitation process, so yes, they were there.

Q. And did you have any contact with them from what you can remember?

A. I can't recall specific contact, no.

Q. And did you have any contact with [Baby C] in particular after he died? Rather, let me say, after CPR had been stopped.

A. I can't recall.

Q. All right. So is that to say you might have done, you can't remember, or you didn't?

A. I may have done, but I couldn't recall specifically.

Q. Do you recall whether you assisted with any of the steps that are taken to help families come to terms, as much as they can, with the enormity of what's just happened?

A. Not from memory.

Q. We know that you did a Facebook search for [Parents of Baby C] on 14 June at 15.52. So that's later on the day that [Baby C] had died. Why did you do that?

A. The family were very much on my mind. The first time I had met the parents was during the resuscitation of their son.

Q. And why were they on your mind, if that isn't too obvious a question?

A. Because when you go home from work, you don't forget about the babies that you've cared for and what's happened.

Q. We know that in their case and other cases there are times you do searches on Facebook in the months that follow.

A. Yes.

Q. Why is that?

A. Because there are times when they do enter my mind.

Q. How do you feel about what they have been through?

A. What the parents have been through?

Q. Yes.

A. It's unimaginable. I can't...