

Now, we're moving on to [Baby C], born on 10 June 2015 and died at about 5 am on 14 June, although the event for which we allege you to be responsible that caused his death happened just before midnight on 13 June and, more particularly, at about 11.15 that night, 23.15. I'd like to start with your defence statement on this one, please.

It starts with you saying that you did nothing to hurt him at paragraph 50; is that right?

A. Yes.

Q. You say that on the night of the 13th to 14th June, you had the care of another child, JE, in nursery 3?

A. Yes.

Q. At 52 you say:

"My recollection of events prior to the collapse of [Baby C] is vague, but I don't remember being in nursery 1 and I don't think Sophie Ellis is correct when she says I was."

A. Yes.

Q. Paragraph 53:

"I think I heard the alarms going off but I didn't go straight to [Baby C]. I don't know whether I was walking past the nursery or how I came to go in there."

It may have been I was called in because of the collapse, but at night-time sometimes we have to go into nursery 1 even if we're working in nursery 3, for example, to check equipment for the ITU spaces, but I don't recall being in there when [Baby C] collapsed."

Paragraph 56:

"I did have some contact with '[Baby C]'s family, but not to the extent described by his mother."

As a matter of fact, just on that point,

[Mother of Baby C]'s evidence, was agreed, wasn't it?

Do you remember it was read to the jury?

A. Yes.

Q. "I didn't speak to [Baby C]'s mother asking if she wanted a priest to be called, nor was I the person who handed [Baby C] to his mother after we had stopped resuscitation. I don't think I helped with the footprint or taking a lock of [Baby C]'s hair. I do not recall asking if the parents wanted to put [Baby C] in a basket or any awkward conversation." And again, that specific point, putting his body in a basket, is something that [Baby C]'s mother suggests you said and was agreed evidence, wasn't it?

A. Yes.

Q. "After [Baby C] had died, I was still looking after JE.
That would have been my focus."

Just to bring it back to mind, this particular shift, this is the shift where your colleague [Nurse B] suggested that she had to keep, in effect, removing you from the parents' room as [Baby C] was dying and just after he'd died.
Do you remember that evidence?

A. Yes.

Q. I'm going to suggest that your assertion in your defence statement that your recollection of events prior to [Baby C]'s collapse being vague is not true. What do you say?

A. I don't agree with that.

Q. You don't. And I'm going to suggest that you enjoyed what happened and that's why you were in and out of the family room.

A. No.

Q. You had been off on Thursday the 11th and Friday, 12 June, hadn't you?

A. Yes.

Q. And you were back in on the night shift of Saturday the 13th?

A. Yes.

Q. When you were being interviewed, did you remember [Baby C]?

A. Yes.

Q. Why did you say that you didn't?

A. I'm not sure what you mean. My police interview?

Q. Yes.

A. I'm not sure what detail I had to start with, but I know I remembered him once I had more details. I'm not sure what I was told at the very beginning.

Q. We'll come to the detail. Is it your case that staffing levels contributed to [Baby C]'s death?

A. No, I don't know how [Baby C] died.

Q. Is it your case that medical competence or incompetence contributed?

A. No.

Q. Or that anybody made a mistake?

A. No.

Q. Do you accept that [Baby C] progressed well having been born in good condition?

A. I... I can only go on what other people's notes were, I'd not looked after [Baby C] before.

Q. But do you accept that the evidence is that [Baby C] was doing well?

A. I think there had been issues with his abdomen and things, but...

Q. He wasn't perfectly healthy, that's why he was in a neonatal unit, but there were no causes for concern, were there?

A. Not that I recall, no.

Q. No. I will just remind you of some of the context. The jury and you may remember that this is a case where one of the notes in the nursing notes was misfiled on a different baby's file and when [Baby C] had died, it was transferred from that file to [Baby C]'s file.

It was a note made by Yvonne Griffiths; do you remember that?

A. Yes.

Q. And just while we're on that subject, once you have entered - we've seen in many cases, haven't we, that in the nursing notes the time that the file entry is opened is recorded by a computer?

A. Yes.

Q. And the time that it is entered into the system is also recorded?

A. Yes, the time it's completed, yes.

Q. Yes. Once a nursing note is completed, is it editable?

A. No.

Q. And that perhaps is the reason why this particular note couldn't simply be transferred across, it had to be rewritten?

A. Yes.

Q. Okay. Let's start with that because that gives us the position on the day shift of Friday, 12 June. It's tile 273, please, Mr Murphy.

If we can just go to that. These concern events at 18.30 on the day shift of Friday, 12 June. Just to remind us all, YG, Yvonne Griffiths, we can see that the note's actually entered after [Baby C] had died. At the time that - we've got an eight-minute window in which these were typed, between 17.38 and 17.46, on 14 June.

We see that these are characterised or described as:

"On reflection notes from 12/6/15 for day shift, written in [redacted]'s notes for [Baby C]."

So presumably that was the family name of the child in whose notes this was entered erroneously; do you agree?

A. Yes.

Q. So nursing notes printed and rewritten as follows

"Assumed care of infant at 20.00 hours. Assistance with ventilation throughout the day..."

"By N CPAP in a pressure [and it gives the figures]. Nares [which we know are nostrils] red but not broken. DuoDERM applied. No apnoeas noted. Caffeine given as prescribed (inaudible) long line. [Baby C] unsettled at times, soothes with pacifier. Enjoyed kangaroo care with parents."

And then material about the X-ray of the long line and the fact that the NGT had been aspirated and 2ml of black-stained fluid obtained.

[Baby C] had been having - what is kangaroo care, would you just remind us, please?

A. It's when the baby takes its clothes off and is put against the mother or father's chest skin.

Q. Otherwise known as skin-to-skin?

A. Yes.

Q. When a child is enjoying kangaroo care with parents, of course the child is not on any form of breathing support; is that right?

A. No, we can do kangaroo care with breathing support, but they would be stable enough to be brought out.

Q. All right. But as a matter of fact, I'll suggest that [Baby C] had been off breathing support, and we'll come to some documentation in a moment, but if we go backwards, please, Mr Murphy, although forwards in time, to T41. This is Yvonne Griffiths - sorry, Mel Taylor's nursing note

"Remained nil by mouth. Tummy soft. Not distended. Dark bile obtained from OGT. Registrar Davies aware. To continue nil by mouth for now and monitor. Bowels not opened. Passed urine."

Right?

A. Yes.

Q. So that's overnight, the 12th to the 13th. The day shift, in other words the shift immediately before the shift on which you were working and [Baby C] died, it was Joanne Williams who looked after him. I just want to deal with what happened on that day.

If we start, please, with the nursing at tile 116.

So we see there at the top JW for Joanne Williams.

Creation time, 16.19:

"Nursed on CPAP [pressures given]. Capillary blood gas at 9.00, very good. However, [Baby C] very unsettled and fractious. After discussion with Registrar Ogden, taken off CPAP whilst out having skin-to-skin with mum. Calmed down straightaway while on mum. Just required some facial oxygen while out. No signs of increased work of breathing..."

You read it all to yourself if you would, please.

Is that a positive picture?

A. (Pause) - Yes.

Q. Can we go to tile 67, please? This document gives us a ready reckoner for what sort of breathing support [Baby C] was on, doesn't it?

A. Yes.

Q. Do we see from that document that he was on, on the 13th, so this is the day on which he died, that he was on CPAP up to 10 am, 10.00 hours?

A. Yes.

Q. There was nothing at all, no breathing support other than, if we remember what was in the nursing note, the ambient oxygen --

A. Yes.

Q. - at 11 and 12?

A. Yes.

Q. And he then went on to Optiflow - so not CPAP,
Optiflow - at 13.00 hours?

A. Yes.

Q. And that remained the position until the event that terminated with his or culminated with his death?

A. Yes.

Q. If we go to tile 120 next, please, it's another note of Joanne Williams. It's the note at 18.00 on the 13th.
"Capillary blood gas at 18.00 showed improvement from previous capillary blood gas. However, lactate risen to 2.5 millimoles. SHO informed. Remains stable on Optiflow. Blood pressure stable. Aspirates reduced this evening. [Query] commence enteral feeding tonight."
Do you remember that?

A. Yes.

Q. And do you remember that it was Dr Gibbs who directed the commencement of enteral feeding?

A. I can't remember who authorised it, but I know, yes, doctors had agreed he could start feeds, yes.

Q. And do you remember the evidence of Dr Marnerides, the pathologist, who said that the histology shows that [Baby C] did not have any bowel issue?

A. Yes.

Q. Let's move on then to the shift on which you were present. It's tile 138, please, Mr Murphy, if you would.

Here we see the population list of the NNU, 12 children on the unit.

A. I can just see the staff at the moment.

Q. It's my fault, I'm sorry. There it is at the bottom of the page. So we see the population list at the bottom of the page. We see that you had a child, JE.

A. Yes.

Q. That's at number 3 there. As a matter of fact, JE was in nursery 3, wasn't he, do you remember?

A. Yes.

Q. Sorry, I missed your answer. Do you remember that he was in nursery 3?

A. Yes, sorry.

Q. And this, to bring it back, was - he was the child with the breathing problems that [Nurse B] thought were worthy of close monitoring.

A. Yes.

Q. Your other charge that evening was PE, who is number 10 in the list; do you see?

A. Yes.

Q. And so far as nursery 1 was concerned, we heard evidence from several witnesses that there were two children in - although we haven't got a population distribution chart, we heard from several witnesses that [Baby C] was in nursery 1.

A. Yes.

Q. And so was another child who was being looked after by Melanie Taylor, who we see in the list at number 8, MRE.

A. Yes.

Q. Do you recall there being any other children in nursery 1?

A. No.

Q. So the evidence suggests, would you agree, that there were two children in nursery 1, one of whom was [Baby C], the other MRE?

A. From this, yes.

Q. Yes. Well, not only from this but from all the evidence that we've heard in the trial --

A. Yes.

Q. - relating to this event, so from all your colleagues who gave evidence.

A. That there were three babies in nursery 1?

Q. No, two babies in nursery 1: two in number 1 and you were looking after two in number 3.

A. Okay. I'm not sure. If that's what they've said, so...

Q. I'm suggesting that's the evidence, and I'm sure I will be corrected if I'm wrong, and if I find out off my own bat I've made a mistake, I will correct it.

Anyway. First of all, I'm going to suggest to you that this was yet another shift on which you migrated from either nursery 3 or 4 back into nursery 1.

A. Yes, in response to [Baby C]'s care needs.

Q. No, before [Baby C] collapsed.

A. I don't have a recollection of that.

Q. Do you remember [Nurse B] told us she was the shift leader on this shift?

A. Yes.

Q. And do you remember her telling us that she had to tell you to look after him rather than getting yourself involved with other children?

A. Yes.

Q. Is that true?

A. No. I don't recall that conversation.

Q. Are you saying you reject it or simply you don't remember?

A. I do not remember a conversation like that happening.

Q. I'm going to suggest that you were very unhappy with the arrangements that she had made, which dictated where you were working. Do you agree that you were unhappy at being in nursery 3?

A. Yes, but that wasn't down to [Nurse B], it was down to the shift leader on the previous shift.

Q. Yes, we have heard a bit of evidence about that from various people, but as a matter of practice, does the leader of the shift on which the nurses are actually working have the capacity to redistribute labour?

A. Yes.

Q. So if you had asked [Nurse B], she would have had the power to redistribute, to put you somewhere else if she thought that was appropriate?

A. Yes.

Q. As a matter of fact, do you agree that she thought JE needed your attention?

A. He did need attention, yes, and I gave him that attention.

Q. Let's look at how unhappy you were because I'm suggesting this is precisely how you were. Starting at tile 146, please. This is your friend, Jennifer Jones-Key, asking if you're all right. 147. You read to us what you replied.

A. "I just keep thinking about Monday, feel like I need to be 1 to overcome it but [Nurse B] said no."

Q. Monday was [Baby A]; is that right?

A. Yes.

Q. 148 is Jennifer Jones-Key:
"I agree with her, don't think it will help. Need a break from full-on ITU. You have to let it go or it will eat you up. I know not easy and will take time."
Then 149. Your message, please.

A. "Not the vented baby necessarily, I just feel I need to be in 1 to get the image out of my head. Mel said the same and [Nurse B] let her go. Being in 3 is eating me up. All I can see is him in 1."

Q. The vented baby we know was not [Baby C], don't we?

A. Yes.

Q. This was the other baby in nursery 1, who was ME or MAE as he appears in the list; is that right?

A. Yes, on the list yes.

Q. So you wanted to look after [Baby C], didn't you, if there were two babies in nursery 1?

A. I don't think I'm referring to specifically [Baby C].
I can't...

Q. There's a field of two available for care in nursery 1. You want to be in nursery 1 and you're saying, well, okay, I won't have the vented baby. Who does that leave?

A. Okay, if that's true and there were only two babies in that nursery then, yes, it would fall to [Baby C], yes.

Q. Is that the truth of it, that you wanted to look after [Baby C]?

A. No. Not [Baby C] specifically, no.

Q. 150 next, please. If you'd read your own messages I'd be grateful.

A. "It probably sounds odd but it's how I feel."

Q. And 151. Jennifer Jones-Key replied:

"Well, it's up to you but I don't think it's going to help. It sounds very odd and I would be the complete opposite. Can understand [Nurse B], she's trying to look after you all."

And then you replied?

A. "Well that's how I feel. From when I've experienced it at Women's I've needed to go straight back and have a sick baby otherwise the image of the one you lost never goes. Why send Mel in if she's trying to look after us? She was in bits over it."

Q. That's a reference to the fact that Melanie Taylor was looking after the other - the vented baby in nursery 1, isn't it?

A. Yes.

Q. And 153, please:

A. "Don't expect people to understand but I know how I feel and how I have dealt with it before. I have voiced that so can't do any more, but people should respect that".

Q. You wanted to get your own way, didn't you?

A. No, I expressed a preference to go to nursery 1, as did Mel.

Q. "And people should respect that", what does that mean in this context?

A. People should respect what I'm asking and saying that that's how I potentially deal with something.

Q. So you should get your own way?

A. No, it's not about having your own way, it's about how you deal with things. Mel and I had both asked to go into nursery 1.

Q. 160. Jennifer Jones-Key replies:

"I think they do respect it, but also trying to help you. Why don't you go in 1 for a bit?"
What did you take that to mean?

A. That the staff there are trying to help me.

Q. Well, Jennifer Jones-Key isn't working, is she?

A. No.

Q. Right. Okay. So what did you understand her to be saying to you by:

"Why don't you go in 1 for a bit"?

A. Spend some time in nursery 1.

Q. Yes. And your response?

A. "Yeah, I've done a couple of meds in 1, I'll be fine."

Q. What did that mean?

A. That I've checked or drawn up some medications in nursery 1.

Q. 162:

"It didn't sound like you would be. Sorry, was eating my tea."

I assume that's a reference to "you would be fine", was it?

A. Yeah, I think so, yes.

Q. And then you responded and there's something, part of a message relating to somebody that has nothing to do with this. Then when did you say?

A. "Forget I said anything, I'll be fine. It's part of the job. Just don't feel like there is much team spirit tonight."

Q. Did you feel that you weren't getting your own way?

A. It wasn't about me having my own way.

Q. She replied:

"I'm not going to forget, but just think you're way too hard on yourself. It is part of the job but the worst part. I do believe it makes us stronger people."

So that takes us to 164. The conversation continued at 167. So we are now at 22.53. Could you read this one that you sent to Jennifer Jones-Key?

A. "Unfortunately, I've seen my fair share at the Women's but you are supported differently and here it's like people want to tell you how to think/feel. Anyway, onwards and upwards. Just shame I'm on with Mel and [Nurse B]. Sophie in 1 so haven't got her to talk to either."

Q. 167 - of course, Sophie was looking after [Baby C], wasn't she?

A. Yes.

Q. Then Jennifer Jones-Key responded:

"Work is work. A lot of girls say Women's don't support and tell them to get on with it. I think they don't mean to tell you though and were overcaring sometimes. Yeah, that's not good but you got Liz."

Who is Liz in that context?

A. Elizabeth Marshall, the band 4 that was on.

Q. The nursery nurse?

A. Yes.

Q. Okay. We then resume the conversation at 174. Could you read your message, please?

A. "Women's can be awful but I learnt the 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 the day I realised they were right. It's just different here."

Q. And then, a minute later?

A. "Anyway, forget it. 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."

Q. Were you upset?

A. Yes.

Q. Were you upset with Mel?

A. No, I was upset just generally that I didn't feel my feelings were being considered.

Q. By who?

A. By [Nurse B] and Mel.

Q. And what did you expect Mel to do for you?

A. That Mel and I had both been present with [Baby A] and that we could have supported one another with that.

Q. So you wanted her to talk to you about [Baby A]'s death, is that it?

A. I wanted her to be there to support me, yes. And she had wanted to go in nursery 1 for the same reason and she had been put in there.

Q. According to what you said this morning, Mel was responsible or potentially responsible for [Baby A]'s death?

A. Potentially, yes.

Q. And you wanted her to talk to you about it?

A. No, I think what I'm suggesting here is the only way you overcome these things is by talking to colleagues that were also present.

Q. Shared experience?

A. Yes.

Q. Is that what you enjoyed?

A. Can you rephrase that?

Q. Is that what you enjoyed?

A. What, talking to colleagues? I don't...

Q. No, sharing experience of babies collapsing and dying.

A. No, we share experiences of very many reasons, not just that.

Q. Well, Jennifer Jones-Key responded:

"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."

You replied at 178?

A. "I don't mean it like that, just that only those who saw him know what image I have in my head."

Q. And then the next one, please.

A. "Forget it. I'm obviously making more of it than I should."

Q. And then you said, "Sleep well", at 180. A couple of times there you've said "forget it"; were you frustrated?

A. Yes, I felt I wasn't getting anywhere with the conversation and I just wanted to leave it at that point.

Q. This is the conversation with Jennifer Jones-Key?

A. Yes.

Q. What were you expecting her to say that she was not saying? What were you wanting from --

A. That she could maybe have been a little bit more understanding about what I was saying and how I was feeling.

Q. Did you want attention?

A. I don't think attention's the right word, I think it's just recognition from a friend to acknowledge how I was feeling.

Q. Because you've been through such a dreadful experience, witnessing the death of [Baby A], you wanted people to show you what?

A. I don't think I wanted them to show me anything. She is a friend, I wanted to express how I felt to her and I didn't feel she fully understood the context in which I was saying things, so I wanted to leave the conversation.

Q. Sophie Ellis, Melanie Taylor and [Nurse B] were all asked questions on your behalf on the basis that Sophie Ellis was insufficiently qualified to have been looking after [Baby C].

A. Yes.

Q. Do you remember that?

A. Yes.

Q. Is that your position?

A. Yes.

Q. So does it come to this then: you wanted to be in nursery 1?

A. Yes.

Q. Your wish was being frustrated by management?

A. By the shift leader, not by management, but the shift leader, yes.

Q. And in your view, the person who had what you wanted, in other words to be looking after the non-vented baby in nursery 1, wasn't sufficiently qualified for the job?

A. No, Sophie wasn't, I don't think, in the correct position to care for [Baby C].

Q. Why's that?

A. She was recently qualified. She did not have the experience or the skills.

Q. Which particular skill was she deficient in?

A. She didn't have experience of premature babies, small babies like [Baby C].

Q. But which -- you see, one of the questions I asked you several minutes ago now was whether there was some sort of deficiency in care that led to [Baby C]'s death. So I'd like you to explain to us why it is Sophie was insufficiently qualified to being doing the job she was doing.

A. I'm not saying Sophie caused anything with [Baby C], I'm just saying she was the least experienced member of staff on that shift, she was in nursery 1, the intensive care room, with another ventilated baby and she had very little experience with small premature babies like [Baby C] that we need to keep a close observation of.

Q. So she had something you wanted?

A. No.

Q. The care of [Baby C], wasn't that what you wanted?

A. No, not specifically [Baby C], no.

Q. Can we go to [document redacted], please, which is the second of the [Baby C] interviews. Here you can see there's a long question towards the top of the page.

A. Which page, sorry?

Q. [Document redacted]. It's the second interview.

A. Yes.

Q. My fault. So there's a long question that runs to about 10 lines in the top third of the page; do you see that?

A. Yes.

Q. What the police are asking about is some of the text messages that we've referred to.

A. Yes.

Q. They read them to you. They ask you whether you recall the conversation. You say no. Then the question:

[POLICE INTERVIEW]

"Question: Can you tell me where it -- where you were when it took place?

"Answer: I don't remember it. What do the messages relate to?"

What did you say then?

A. "I don't remember".

Q. Was that the truth?

A. Yes, because at this point that message had just been read out to me without any context.

Q. Isn't the context fairly obvious from the messages themselves?

A. Not when I was being interviewed about multiple babies at multiple times and this was just read out with no context. I did not immediately link that to that shift.

Q. All right. Let's see what the context was if we go back to page 11, please. Do you see there at 29.10, they're talking about a statement that's been taken from Sophie Ellis --

A. Yes.

Q. -- who said she was out of the room when [Baby C]'s alarm sounded; is that right?

A. Yes.

Q. That you, Lucy Letby, had your own designated baby in nursery 3?

A. Yes.

Q. Sophie Ellis says that when she went into nursery 1, you were standing over or standing next to [Baby C]'s cot?

A. Yes.

Q. "Question: Sophie Ellis says that you said, 'He's just dropped his heart rate and saturations', or something similar. Do you recall saying that to Sophie Ellis?"

Then over the page:

"Question: You were placed into nursery 3 during this shift, had your own designated baby to look after [and you said you didn't remember]. Have you any explanation as to why you were in nursery 1 when the alarms went off?"

And you said you didn't remember. You mention that you might have been doing checks in nursery 1; is that right?

A. Yes.

Q. You were asked whether you'd been treating [Baby C] and you say not that you remember, you couldn't remember specifically why you were there. Do you see that?

A. Yes.

Q. They then, having laid out all that to you, turn to the telephone conversation that we've just dealt with.

A. Yes.

Q. Was that not sufficient context for you to remember what it was all about?

A. No.

Q. Let's see what was happening at about this time in the neonatal review, please. So if we can go to that document in the white bundle, please.

Here we see quite a lot of blue material or blue typeface, I should say, which reflects what you were doing; is that right?

A. Yes.

Q. So at line 2 at 20.00, line 6, 21.00, 17 and 20, 21.10 and 21.30, you're dealing with the children JE and PE.

Is that right? Then these are simply making entries on charts, observations, aren't they?

A. Yes.

Q. No medications there, are there?

A. No.

Q. Can you find us a medication that you were responsible for on this page?

A. The one at line 38 for HM.

Q. HM was not one of the babies in nursery 1?

A. No, it was my baby in nursery 3.

Q. Yes. Any other medications there (inaudible) at 45?

A. Yes.

Q. Well, actually --

A. The medication for NM.

Q. Yes, we've got JE at 20.00 hours in nursery 3; is that right?

A. Yes.

Q. We've got PE and HM and EB at 37 to 41?

A. Yes.

Q. 20.00 hours to 22.50.

A. Yes.

Q. We've got NM at lines 45 and 46 at 22.21?

A. Yes.

Q. None of those babies were in nursery 1, were they?

A. No, but the medications are drawn up in nursery 1.

Q. Well, I know that's what you say, but context, as you say, is everything.

If we go back -- I'll check I've not missed something. No.

If we go back to line 161 -- sorry, tile 161:

"I've done a couple of meds in 1, I'll be fine."

That's a message you sent at 22.34?

A. Yes.

Q. You hadn't actually given any meds to any children in nursery 1, had you?

A. No.

Q. As you say, context being important, when we looked at that conversation, what you wanted was to be treating one of the children in nursery 1?

A. Yes, at the start of my shift, yes.

Q. And that's what you were suggesting you had been doing to your friend, Jennifer Jones-Key, isn't it?

A. Clinical practice is IV medication is always drawn up in nursery 1. That is where the medications are all stored and kept, oral and IV. It could not be made up in a special care nursery.

Q. Are you covering yourself?

A. No, it's standard practice.

Q. At 23.00 hours, we know that Sophie Ellis gave [Baby C] his first feed and did his observations, don't we?

A. Yes.

Q. Do you accept her evidence that she aspirated his stomach and obtained a little bit of green bile?

A. Yes.

Q. Do you accept that if that's what she did, there wasn't any air in his stomach?

A. No, if she's documented correctly, then yes.

Q. So no air in [Baby C]'s stomach at 23.00 hours?

A. No, according to Nurse Ellis, yes.

Q. Have you any reason to doubt what she says?

A. No.

Q. And then Nurse Ellis said that she did some meds for other children. Do you remember her saying that?

A. Not specifically now, no.

Q. Rather than relying on our memories, perhaps we can rely on the neonatal review at lines 66 to 70. These are medications for MRE, who is, as a matter of fact, Melanie Taylor's other child or her charge in nursery 1.

A. Yes.

Q. She then told us that she left nursery 1; do you remember that?

A. Yes.

Q. And that was the opportunity that you took to sabotage [Baby C], wasn't it?

A. No.

Q. If we go to your interview, please -- this is the second of your interviews, please. If we start at [document redacted] to give us the context. This is the interview that we looked at a short time ago; all right?

A. Yes.

Q. It's dated 11 June 2019 and we have reviewed the first two and a half pages, which precede the text conversation that I was asking you about, about 10 or so minutes ago.

A. Yes.

Q. If we move on, we can see that the conversation -- sorry, the questions at the bottom of page 13 included references to more of the texts that I asked you about.

A. Yes.

Q. As it continued over on to page 14 --

A. Yes.

Q. -- and 15 --

A. Yes.

Q. -- which is where you say, after the officer reading out quite a long series of texts, which are at tiles 175 through to 178, that you were frustrated with Jennifer Jones-Key, with her response; is that right?

A. Disappointed, more, I would say, but yes.

Q. Well, I'm using your word.

A. Okay, yes.

Q. Frustrated.

[POLICE INTERVIEW]

Then do you see a bit further down the page it says:

"Okay. 23.09, Lucy, is when you sent that final message to Jen on that shift.

Where were you when you sent that message?"

And you say that you don't remember.

You say that in one of the messages at 21.55 -- they repeat back to you your message: "Being in 3 is eating me up."

Which we have at tile 149. Do you see that?

A. Yes, because I was unsure whether I was on shift that day.

Q. Yes. Well, are you suggesting that the death of [Baby C] wasn't very memorable?

A. I don't think that's a fair point. I think at this point I was being interviewed by (sic) so many babies on various dates, I could not recall every baby that I'd looked after or that this was specifically [Baby C] at that time.

Q. Well, I'm not going to re-plough the field we ploughed earlier to give you the context.

The police conclude their review, as I reviewed with you, of that series of text messages. Do you see there?

A. Yes.

Q. They say about seven lines down:

"So you sent that file text to Jen at 23.09 and
[Baby C] collapsed at 23.15?"

A. Yes.

Q. "So 6 minutes after you've sent that message,
[Baby C] has collapsed?"

A. Yes.

Q. "What are your thoughts on that?"
And your response?

A. "I don't recall where I was at the time that I send that
text. I might have been at the nurses' station and then
have gone into nursery 1 to do something else [as
read]."

Q. Yes. They're not telling you were in nursery 1, are
they, at that point?

A. Yes, I believe beforehand, Sophie had suggested that
I was there --

Q. Oh yes, right at the beginning of the interview.

A. Yes.

Q. You are here accepting, aren't you, that you were in nursery 1 when you finished that series of texts with your friend, Jennifer Jones-Key, and you were feeling frustrated?

A. No, I can't confirm that I sent that message in nursery 1, no.

Q. No, not sent the message, you are confirming that you went -- having sent the message, you went into nursery 1?

A. No, I'm not saying that, I don't think. I'm saying I don't recall where I was.

Q. Yes, you say:

"I don't recall where I was at the time that I sent that text."

A. Yes.

Q. "I might have been at the nurses' station and then I've gone into nursery 1 to do something else."

A. Yes, because just previous to that it was stated to me that Sophie Ellis had seen me at the cot side and I took that to be accurate.

Q. It is accurate, isn't it?

A. It was on her word at that time.

Q. You were quite happy to accept it, were you?

A. I haven't accepted it, I've said I don't recall.

Q. The death of [Baby C] was very, very memorable,
wasn't it?

A. Yes.

(In the presence of the jury)

MR JUSTICE GOSS: Good morning, members of the jury. I'm sorry we are late coming in, I was just dealing with a matter. We're in a position to proceed now. Sorry about that delay.

MS LUCY LETBY (continued)

Cross-examination by MR JOHNSON (continued)

MR JOHNSON: Yesterday at the end of the day, we'd got to the position in the chronology or the sequence of events relating to [Baby C] just before he collapsed at 23.15; do you remember that?

A. Yes.

Q. I had just been asking you about a part of your interview; do you remember that?

A. Yes.

Q. And I was asking you, as well as the part of your interview, about some text messages that you had sent to your friend, Jennifer Jones-Key.

A. Yes.

Q. Just to put us back into the sequence, the text messages were sent at between 23.01 and 23.09. They're between tiles 174 and 180. Okay?

A. Yes.

Q. I was asking you questions specifically about what I was suggesting to you was your acceptance that at the time, this is in interview, your acceptance in interview that at the time [Baby C] collapsed, you were in nursery 1. Do you remember that?

A. Yes.

Q. And do you accept that you were in nursery 1 at the time [Baby C] collapsed?

A. No.

Q. Why did you tell the police that you did accept it?

A. Based on what Sophie Ellis saw and what was told to me, I took that to be accurate. I have no memory of being in the room.

Q. If you have no memory, how can you dispute?

A. I dispute the fact that I have not agreed that I was definitely in the nursery.

Q. I'll put the question a different way then. Are you disputing that you were in the room at the time [Baby C] collapsed?

A. Yes, I have no recollection of that.

Q. Well, I'm going to suggest to you -- I'm not going to do this every time because otherwise we'll be here a long time, but I'm going to suggest to you that you're ignoring the question and in due course I may suggest to the jury that the reason you're ignoring the question is because you can't answer the question. All right? So I'll give you one more opportunity to answer it. Do you dispute that you were in the room at the time [Baby C] collapsed?

A. Yes.

Q. Why?

A. Because I have no memory of that.

Q. Do you remember being born?

A. No.

Q. Do you dispute that you were born?

A. No.

Q. Just before the prosecution say that you were in the room with [Baby C] when he collapsed, you were texting Jennifer Jones-Key.

A. Yes.

Q. You had left one of your babies in the nursery, having just taken his or her observations; do you remember that?

A. I can't say when I left that baby, no. I don't know where I did the texting.

Q. Well, let's just look at this if we can, please. Can you go to the neonatal review at page 3 of 9? Can you see there at line 65 the fact that you took the observations of the baby PE?

A. Yes.

Q. And PE was in nursery 3, wasn't she?

A. Yes.

Q. Do you remember PE as a matter of interest?

A. No.

Q. Can you see what's in the line above that?

A. Yes, Nicola Dennison has made an entry on the fluid balance chart.

Q. Yes. Just to remind us, who is Nicola Dennison?

A. The band 4 nursery nurse.

Q. Why did you leave PE with Nicola Dennison?

A. I haven't handed over care to Nicola Dennison.

Q. No, but whether or not you've handed over care, why did you leave a nursery nurse, a band 4, someone of lesser qualification to you, with a nursery nurse (sic)?

A. Well, I can't answer that. It's not unusual for nursery nurses to help out with feeds.

Q. Well, it may not be, but I'm asking why you left that child at that time with that nursery nurse.

A. I have no memory of that.

Q. Whose responsibility was PE?

A. Mine.

Q. Did you have something better to do?

A. No. Both babies that night had the care they needed.

Q. That's not the question. I'm not suggesting that Nicola Dennison couldn't do what you left her to do. What I'm asking you is why you left her to do it.

A. I can't recall that now.

Q. Well, I will remind you. Can we go to tile 174? To mean to Jennifer Jones-Key is the answer, isn't it?

A. No.

Q. Sorry?

A. No, I've not left somebody to go to text. I've also been doing things with JE as well at that time.

Q. Oh, show us on the neonatal review, please, what you were doing with JE.

A. 55 and 56.

Q. Where's that?

A. Lines 55 and 56.

Q. Right. Yes. Okay. But we know that that time is the wrong time, don't we?

A. It's not a wrong time, it's an approximation.

Q. Sorry, could we go back to the text, please? According to your evidence that you gave to the jury, you never use your phone in a clinical area.

A. No, that's right.

Q. So you were not in the nursery at 23.01, were you?

A. No.

Q. If you hadn't been texting your mate, would you have had time to feed JE -- sorry, PE?

A. I did feed JE at that same time, which is possibly why Nurse Dennison looked after PE for me.

Q. Would you answer the question, please? If you hadn't been texting your mate, would you have had time to feed PE?

A. I can't answer that.

Q. Because you were texting Jennifer Jones-Key right up to 23.09, weren't you?

A. Yes.

Q. Eight minutes. That might well have been long enough to feed your baby, mightn't it --

A. Yes.

Q. -- PE?

A. I can't recall the circumstances around that now.

Q. But it took you out of the nursery, didn't it, whatever the circumstances were?

A. Yes, I would not have used my phone at the cot side, so yes, I would have been in the doorway or elsewhere on the unit, yes.

Q. This is the time we suggest that you were in nursery 1 with [Baby C]; yes?

A. I don't accept that, no.

Q. Mel Taylor wasn't in the room when [Baby C] collapsed, was she?

A. I don't recall her evidence.

Q. Well, that's her evidence and if we look at tile 185, please: "Called to help baby. When arrived to baby, baby apnoeic."

She told us she wasn't in the nursery, didn't she?

A. I can't remember her saying that, but she is saying she's come over to the baby, yes, to the baby's cot side. She doesn't specify being out of the nursery.

Q. That was her evidence.

A. Okay. I can't recall her evidence right here, right now.

Q. Do you remember how Mel described you --

A. No.

Q. -- at this time? "Cool and calm"; do you dispute that?

A. No, I would expect members of staff to be cool and calm on a unit. That's what we're trained to do.

Q. And you said to Sophie Ellis:

"He's just had a brady and a desat."

A. I can't recall saying that.

Q. Do you dispute that you said it?

A. I have no memory of saying it.

Q. Well, I'll ask you one more time: do you dispute that you said it?

A. Yes, because I have no memory of that.

Q. Do you remember the arrival of Dr Katherine Davis at 23.26?

A. No, not specifically. I remember doctors arriving but I couldn't be specific on times, no.

Q. Can we go to tile 187, please. This is Dr Davis' --

"23.26, crash bleeped to attend NICU. On arrival, Guedel airway in situ, bagged via Neopuff by nursing staff. Occasional intermittent gasps noted. Chest compressions commenced."

Can we scroll down, please?

MR JUSTICE GOSS: I think actually, going back up -- sorry to be pedantic about this, but I am a pedant -- it says:

"Bagged via Neopuff by nursing staff. Chest compressions in progress on arrival."

MR JOHNSON: Sorry, yes.

MR JUSTICE GOSS: And then "chest compressions recommenced" three lines further down.

MR JOHNSON: Yes, quite right. I was just trying to -- if Mr Myers thinks I'm missing anything out, I'm sure he will --

MR JUSTICE GOSS: It's not Mr Myers, it's me. I'm just reading what we can all see on the note.

MR JOHNSON: Yes. We can see the condition of [Baby C] there: "Occasional intermittent gasps."

Is that right?

A. Yes.

Q. Is that what you saw, for example, with [Baby I] on 13 -- I can't remember which month it was now. 13/10, wasn't it, 2015?

A. I'm not sure that's that date, is it, for [Baby I]?

Q. I think it was the second incident, 13 October. Anyway.

You know the incident I'm talking about in nursery 2?

A. Yes.

Q. The same sort of thing, is it?

A. Yes.

Q. And then if we can scroll down, please. We have the two attempts at intubation, but:

"Unable to pass ETT as cords ++. Clear oral secretions, no blood seen. Neopuffed with Guedel airway."

Cords ++. She told us, Dr Davies, that they were swollen and oedematous, was the word she used. What does oedematous mean?

A. Swollen.

Q. Had you put something down [Baby C]'s throat?

A. No.

Q. Do you agree that this becomes a theme of some of these collapses, that when the doctors look down the throats of these children, they see either swelling or bleeding?

A. Yes, I know other doctors have commented on that, yes.

Q. Yes. This is not something that's caused by the use of a Guedel airway, is it?

A. I can't answer that.

Q. There then ensued a very long and protracted decline for [Baby C], didn't there?

A. Yes.

Q. And [Baby C] had massive gastric dilation and ballooning of the stomach, didn't he?

A. At this point?

Q. Well, that's the evidence of what was found after the event.

A. Okay.

Q. Yesterday I was asking you about Sophie Ellis having aspirated [Baby C]'s stomach just before she fed him that one half of 1ml of milk --

A. Yes.

Q. -- at 11 o'clock. Do you agree that something caused [Baby C]'s stomach and bowel to dilate between 11 o'clock and his collapse?

A. So the air you're referring to is before the collapse?

Q. That's what's found after he died. We're suggesting that's the reason for the collapse.

A. I think if he was found with air when he's died, that could be related to the Neopuff resuscitation. I'm not accepting that he had noticeable gas between 23.00 and 23.15.

Q. So something caused him to -- he was fed at 23.00?

A. Yes.

Q. Something caused him to collapse at 23.15?

A. Yes.

Q. Extensive CPR was undertaken?

A. Yes.

Q. For some reason, a heart rate was restored; do you remember that?

A. Yes.

Q. And he clung to life for a further 5 hours plus?

A. Yes.

Q. Had you ever seen that sort of a decline before?

A. In the context of when he first collapsed?

Q. Yes.

A. Yes, I've seen babies suddenly collapse before, yes.

Q. And cling to life the way [Baby C] did?

A. No, I haven't seen that before, no.

Q. You enjoyed the aftermath of this, didn't you?

A. No.

Q. Why were you so keen to involve yourself with the
[Baby C] family as they cradled their dying son?

A. I don't agree with that. I don't recall being there for
a lot of the time like they've said.

Q. Do you remember [Nurse B] said that she had
to keep pulling you out of the family room?

A. Yes.

Q. That was not disputed on your behalf with her, was it?

A. I can't recall that now.

Q. Do you dispute it now?

A. That I'd been in the family room?

Q. Repeatedly.

A. No, I agree that I've probably gone round at some point
but not repeatedly, no. I don't recall [Nurse B] having to
pull me back out.

Q. What she said was this:

"I asked Lucy to focus back in nursery 3 on baby JE
because I was still heavily concerned about him.

However, Lucy went into the family room a few times and I asked her to come out and to leave that family [that is the [Family of Baby C]] with Mel."

Are you disputing that?

A. Yes.

Q. Of course, Mel is senior to you, isn't she?

A. Yes.

Q. More experienced?

A. Yes.

Q. Given that Mel was looking after this family, what useful function were you performing?

A. I -- I don't understand the question, sorry.

Q. What were you contributing --

A. I can't recall from --

Q. -- to the dreadful situation that the [Family of Baby C] were going through?

A. I can't recall whether I assisted Mel with any of the mementos, which is a two-person job.

Q. You can't recall it, so what, are you disputing that you did assist her?

A. No, I agree that I went to the family room at times. It's the conversation with [Nurse B] that I don't recall.

Q. Right. So given that you are agreeing with what she says, that you did go in there several times, I will return only once more to the question: what useful contribution were you making for this family?

A. I can't recall from my memory now.

Q. So does that mean that you dispute that you were making a useful contribution?

A. I'd have to check the charts to see if there was anything that I co-signed at that time.

Q. The charts wouldn't be in the family room, would they?

A. The bereavement checklist, yes.

Q. You leave that with the family, do you, the bereavement checklist?

A. All the paperwork for a baby is kept in their cot side, so --

Q. He wasn't in a cot, he was in the arms of his mother --

A. No, but I may have been assisting --

Q. -- dying, wasn't he? Wasn't he, Lucy Letby?

A. Yes.

Q. Yes. So one more time: tell us what you were doing.

A. I can't recall from memory. I would have to see if there was something that I signed as doing with Mel, such as the hand and footprints.

Q. Of course if that was what you were doing, [Nurse B] would have approved of it, wouldn't she?

A. I have no memory of that conversation with [Nurse B].

MR JOHNSON: Do you remember what else [Mother of Baby C] told the jury about what you did?

A. I'd made a comment about saying goodbye to [Baby C] and putting him in a basket.

Q. Yes:

"You've said your goodbyes now, do you want to put him in here?"

Agreed evidence. Do you still agree it or do you dispute it?

A. No, I don't recall ever saying that, no.

Q. So you're disputing it now, are you?

A. Yes.

Q. Even though it's agreed evidence. I see.

When did you decide that you were disputing that bit of evidence?

A. I don't understand.

Q. It was agreed when it was read to the jury, you see, so that's the starting point. We're now at the end point where you're disputing it. I'm asking you when between when it was read and today you decided that you were disputing it.

A. I don't think I've ever accepted definitively that that's what I said, if that's an accurate recollection by the parents, but I don't recall that.

Q. You were enjoying what was going on, weren't you,
Lucy Letby?

A. No.

Q. Did you remember, before you saw all the evidence in
this case, that [Baby C]'s collapse had happened just
after he was first given that one half of 1ml of milk?

A. Yes.

Q. Why did you remember that particular detail?

A. Because Sophie Ellis had been very upset that [Baby C] had
deteriorated so soon after having his first feed that she had given
him.

Q. Was she blaming herself?

A. She was questioning whether it was related, yes. She
was very upset.

Q. But you knew what had really happened, didn't you?

A. No.

Q. Did you enjoy seeing Sophie Ellis upset?

