

Q. I'm going to move on to the case of [Baby D].

I want to start, if we may, with your defence statement, please, so if you can find that typed document in front of you.

It starts, this section of the document, at paragraph 58. Have you got that there?

A. Yes.

Q. I'd be grateful if you would read out paragraphs 58 to 66 as these are your words.

A. "I did nothing to hurt [Baby D]. I was not in the nursery before 19.30 on 21 June 2015. When I did come on duty I was not looking after [Baby D] and I would not have been with her and able to have a conversation there with her mother. I did not have a conversation with [Mother of Baby D] about bubbles around [Baby D]'s mouth."

Q. At 60 you say:

"I think the nurse described as being at [Baby D]'s cot at 19.00 to 19.20 is Kate Bissell. It would have been this nurse that [Mother of Baby D] spoke to and not me."

61:

"I have no specific recollection of the collapse at 01.30. I was probably in nursery 1 when this happened."
62:

"I don't think I had any involvement with [Baby D] until the resuscitation. She was not my allocated baby."

63:

"I think I was with Caroline Oakley at 03.00 or 03.45 when the collapse occurred. I can't remember who found [Baby D] or what state she was in."

"I did not do the footprints or the hand prints for [Baby D]."
Okay?

A. Okay.

Q. Were you affected at all by the death of [Baby D]?

A. We were all affected on the unit that night, yes.

Q. Would you answer for yourself rather than including other people? Were you affected by it?

A. Yes.

Q. You didn't, for example, think something like, well, it's happened and that's it?

A. No.

Q. You've said in evidence, and indeed to the police, that you can't remember much about [Baby D], haven't you?

A. That's right.

Q. And that is not true, is it?

A. No, I believe that is true.

Q. Let's see what the evidence shows. Can we start, please, Mr Murphy, with tile 168 of the sequence?

If we could just look at the children and the staff, please, rather than -- thank you.

So we see, don't we there, that nursery 1 was where [Baby D] was?

A. Yes.

Q. Caroline Oakley was her designated nurse?

A. Yes.

Q. JE was also in there. JE, as a matter of interest, was the same JE that you had been looking after the night [Baby C] died. So they were in nursery 1, you were looking after them?

A. Yes.

Q. Three babies in nursery 2 with Caroline Oakley responsible for one of them?

A. Yes.

Q. And therefore Caroline Oakley was splitting her time between nursery 1 and nursery 2?

A. Yes.

Q. And it follows, doesn't it, that therefore you would have been alone in nursery 1 from time to time?

A. At times, yes.

Q. I'm going to start by reminding you, if we could take that down, Mr Murphy, thank you, of some evidence that [Mother of Baby D] gave to the jury on 3 November last year.

A. Okay.

Q. [Mother of Baby D], of course, is [Baby D]'s mum. This is in relation to the resuscitation:

"I couldn't really see [Baby D]. The way he [and that's a reference to Dr Brunton] was holding her, I was seeing more of his back and we were standing there looking at [Baby D] dying. Somebody was holding

a phone to his ear and he kept shouting, 'This is [Baby D]', and he was quite agitated. Then Dr Newby told him that he had to let [Baby D] go, he had to stop, and she insisted and she tapped on his shoulder and said, 'You've got to let her go'. So he held her but he stopped massaging her and he pronounced the time of death. I couldn't stay in the room anymore so then I asked [Father of Baby D] to take me away."

And [Father of Baby D] is [Baby D]'s dad. Okay?

A. Yes.

Q. Do you remember that?

A. Yes.

Q. Sorry?

A. Yes. I remember her saying that, yes.

Q. You were the nurse holding the phone to Dr Brunton's ear, weren't you?

A. No, I don't agree with that.

Q. Oh. [Mother of Baby D] identified you as that nurse, didn't she, in her statement?

A. Yes, but I can't confirm that that was me.

Q. Right. So you dispute it because you can't remember it even though it's agreed evidence?

A. I'm saying I have no memory of doing it.

Q. Do you dispute it?

A. I don't think I understand.

Q. Do you understand what the word "dispute" means? It's your word I'm using, you see. You tell us what you mean by dispute as you've used it.

A. That if we're going to accept what [Mother of Baby D] said as true then that's different, but me remembering it, I dispute that that actually happened from my memory. I would be reliant on her accounts being accurate but I can't confirm that either way.

MR JOHNSON: The [Mother of Baby D] actually said this in court

--

A. Yes.

Q. -- and it wasn't disputed on your behalf.

A. Okay.

MR JUSTICE GOSS: Do you remember a phone being held by someone to the doctor's ear?

A. Yes, I do recall that the incident happened, yes.

MR JUSTICE GOSS: So you can remember there was such an incident.

A. Yes, because it was talked about after the event.

MR JOHNSON: Because the wrong mother was phoned, wasn't she?

A. Yes.

Q. That's the problem.

A. I agree it happened, but I cannot say that it was me that made that phone call.

Q. I want to move on to other bits of evidence and see whether you dispute these. Kathryn Percival-Calderbank, she was in nurseries 3 and 4; do you remember that or not?

A. Yes.

Q. What is her experience as you remember it?

A. She's a very experienced senior nurse.

Q. Been working as a nurse for more than 30 years, hasn't she -- hadn't she?

A. Yes.

Q. She said this:

"It was on her body, her arms and her -- so all from her chest downwards, her trunk and her arms, and it wasn't like a normal rash that you would know if a baby was becoming septic because they tend to be -- the blood vessels seem to be more bluey, they're quite mottled. This was more -- there seemed to be a larger like mosaic-type rash and it was a reddy-blue. The reddy-brown colour in it was more like the vessels or like oval-type markings on the skin, but like the vessels of blood or whatever it was seemed to be meeting up on each other."

So that is evidence she gave on 9 November.

It's at pages 62 to 64 of the transcript if anybody wants to check.

Was she a friend of yours?

A. Kate Percival-Ward?

Q. Yes.

A. I wouldn't say we were close, but we got on well, yes.

Q. Is she mistaken about what she saw?

A. Well, again, if that's what she saw, I can't comment on what she did or didn't see.

Q. Do you dispute it?

A. I did not see that.

Q. Well, I'm not going to go round the houses with you again.

Caroline Oakley --

A. It's the term "dispute" I'm a little bit unsure of because I can't comment on what anybody else saw; I just know what I did or didn't see.

MR JOHNSON: Well, you were there, weren't you?

A. I was not there for the whole event, no.

Q. We'll come to that. We'll carry on with these for now.

Caroline Oakley, who we've established was in nurseries 1 and

2:

"I don't remember specifically the exact rash, but I remember it was -- I hadn't seen it before. It was dark, it was unusual, and the rash struck me. I hadn't seen that rash before on a baby I've looked after. I've put discolouration. I remember it as like a deep red/brown, different than mottling, different from what I have seen before."

If anyone wants to check that, 4 November last year, page 45.

Was Caroline Oakley a friend of yours?

A. Not outside of work, no.

Q. Is she a very experienced nurse?

A. Yes.

Q. Is she mistaken in what she saw?

A. No, that sounds similar, I agree with that.

Q. [Nurse C], who we saw from the population chart was in nursery 2.

A. Yes.

Q. "I remember her skin was discoloured and that she was quite stiff in appearance, like a mottled appearance, which is like white circles of skin with a discolouration around it, which was like a reddy colour. It was an odd -- I remember it because it was an odd rash. I would say commonly in a baby that might need some attention is -- the baby will be blue or grey and the mottling, that colour mottling is around the white patches, whereas this was not that colour. I remember from my statement this morning that I've written that it was like a reddy-brown colour. It was unusual because it didn't match a colour that I had seen before. It was like circles with a blood supply around them."

Again, if anyone wants to check, that's 8 November last year, pages 65 to 67.

Was [Nurse C] a friend of yours?

A. No.

Q. Did you have issues with [Nurse C]?

A. No.

Q. Is she a very experienced nurse?

A. Yes.

Q. Approximately how much experience?

A. Well, many years. I don't know her exact background, but...

Q. Is she mistaken about what she saw?

A. No.

Q. Dr Newby:

"I've put in inverted commas, 'Bruised areas on her abdomen, like evolving purpura'. There were two areas, they were sort of elongated areas. I couldn't give you the precise position on her abdomen, they were quite hard to describe in a way. It was almost like a sort of brown discolouration. They were sort of linear bruises. Bruises is the best way I can describe it, really."

That's 9 November, pages 20 to 22.

Is Dr Newby mistaken about what she saw?

A. I can't confirm about the location of it, but yes, the description of it I agree with.

Q. She is not one of the Gang of Four?

A. No.

Q. Dr Brunton:

"I've documented that the skin at this point was brown and there were areas of discolouration within that that were light brown, like 'evolving purpura across the trunk', it says.

Because this is a completely unusual situation that I had never seen before, changes in the skin, I couldn't explain it."

That was 7 November last year, pages 35 to 37.

Is Dr Brunton mistaken about what he saw?

A. No.

Q. On [Baby D]'s -- that was [Baby D]'s first collapse as far as he was concerned. On the second occasion she collapsed he said this:

"She had a bit of a rash, but again I can't remember the rash previously, but she had a little bit of a rash present on her abdomen."

Is he mistaken about that?

A. I can't be specific at what time the different colouration was.

Q. The final time, just before [Baby D] died:

"I have observed that she had a bit of skin discolouration at that time, but I've documented -- I can't remember what it was like. I've never seen a baby behave in that manner prior to this and I've never seen a baby behave in that manner after this."

So a bit of skin discolouration at that time; is he mistaken about that?

A. No.

Q. Finally, Dr Emily Thomas:

"I remember [Baby D] had an unusual episode where she came out in a rash. This occurred around 01.30 in the morning. I remember taking a look. I would describe the rash as almost having the appearance of a meningococcal-type rash. It was purple in colour and mainly over the abdomen. [Baby D] seemed to settle down and the rash appeared to fade."

That was an agreed statement and was read to the jury on 8 November. So although it was an agreed statement, out of an abundance of caution, I will ask you, do you dispute that?

A. No, I agreed it looked purple and I agreed it looked like a meningococcal rash.

Q. And do you still not remember [Baby D]?

A. I didn't recall [Baby D] at the time of my police interview, no.

Q. Do you remember her now?

A. Yes.

Q. Do you remember the circumstances surrounding her death?

A. No.

Q. Let's see what you were doing in the immediate aftermath of her death. If we go to tile 286, please. I'd be grateful if you'd read out your words, please, as they are your words.

A. "We had such a rubbish night. Our job is just far too sad sometimes."

Q. And your friend [Nurse A] replied:

"No. What happened?"

And you replied?

A. "We lost [Baby D]."

Q. And then [Nurse A]:

"What! But she was improving. What happened?"

And then:

"Wanna chat? I can't believe you were on again.

You're having such a tough time."

Then you.

A. "Messed about a couple of times and came out in this weird rash looking like overwhelming sepsis. Liz came in, re-screened, et cetera."

Q. So this is -- well, just go back to the one before, please. So this is a reference, isn't it, by you to "multiple collapses, messed about a couple of times"?

A. Yes.

Q. "Came out in this weird rash"?

A. Yes, I recall she had like a meningococcal rash, yes.

Q. "Looking like overwhelming sepsis"? Had you seen lots of meningococcal rashes?

A. Not a lot, no.

Q. How many?

A. I couldn't put a figure on it. I've seen it during my training on the children's ward.

Q. So several years earlier?

A. Yes. And the discussion at the time was that the rash was due to overwhelming sepsis.

Q. "Liz came in."

That's Dr Newby, isn't it?

A. Yes.

Q. "Re-screened, et cetera."

You did remember [Baby D] when you were interviewed by the police, didn't you?

A. I remembered parts. I think it's -- I don't...

Q. Well, let's look at the next text and see whether that persuades you.

A. "... then collapsed and had full resus. So upsetting for everyone. Parents absolutely distraught, dad screaming."

Q. "Parents absolutely distraught, dad screaming."

When you told the police you didn't really remember [Baby D], that was a lie, wasn't it?

A. No, I didn't have any great recollection of the events,
no.

Q. Tile 294, please.

A. "Andrew and Liz said it'll probably be investigated."

Q. That's Drs Brunton and Newby; is that right?

A. Yes.

Q. [Nurse A] replies:

"Dad was very anxious all day."

"[Query] what the delay in treatment".

And you replied, 297?

A. "Just overall looking into the case."

Q. And at 298?

A. "And reviewing what antibiotics she was on, et cetera,
if it is sepsis."

Q. Then at 299?

A. "Dad is beside himself. They only saw her briefly but don't want her to be moved out of 1. Didn't like family room but obviously can't really stay in 1 and got a 33-weeker about to deliver and we got two screens that have stayed."

Q. So two references now to [Father of Baby D]; yes?

A. Yes.

Q. This was a dramatic and shocking incident, wasn't it?

A. Yes.

Q. And you remembered it very well when you spoke to the police in reality, didn't you?

A. No.

Q. Can we go to tile 307, please. Would you read this out?

A. "Hmm, well, it's happened and that's it. Got to carry on. I finish for nearly 2 weeks after next Friday, so I'll keep ploughing on."

Q. Do you remember almost the first question I asked you about [Baby D]?

A. Yes, was I affected.

Q. Yes. And I then said:

"Did you think: well, it's all happened and that's it?"

And your answer was?

A. "Well, it's happened and that's it."

Q. No, you said that wasn't what you were thinking, was your answer. That was a lie, wasn't it?

A. I don't think it's meant in the context that you're suggesting.

Q. Oh, well, you give us the context.

A. That it's happened and we need to move forward and keep going. I don't think it's meant to be any insensitivity to the parents or [Baby D].

Q. You were enjoying all this, weren't you, Lucy Letby?

A. No.

MR JOHNSON: My Lord, that's been almost exactly an hour.

MR JUSTICE GOSS: Yes. We'll have a break there then.

Thank you. 15 minutes, please.

(11.33 am)

(A short break)

(11.50 am)

MR JOHNSON: Something I forgot to ask you earlier but I'll ask you now: is there anything that you said yesterday or indeed have said this morning that you have reflected on and wish to reconsider?

A. No.

Q. I have just been told that I've got to keep my voice up because this is being beamed to other courtrooms, but if you find the volume of my voice in any way intimidating, will you please say so? Will you say so?

A. Yes.

Q. I'm not going to alter the content of the questions, just the volume at which they are delivered. If we go back to the sequence of events, please, tile 360, please. I haven't asked you at all yet about your repeated searching of these parents on Facebook, okay, and I intend to ask you about them all together in one go towards the end. But in this particular case, given what you told the police about not remembering [Baby D], how did you remember the name of her mother, [Mother of Baby D], on 25 June?

A. On 25 June I did recall [Baby D], in 2015.

Q. How did you recall the name of her parents?

A. I don't know.

Q. Have you got a good memory for names?

A. Yes.

Q. Do you have to keep a written record of the names?

A. No.

Q. You carry them in your head; is that right?

A. Yes.

Q. So when we, for example, see you in other cases searching many months or even longer, later, you still remember the names?

A. Yes.

Q. Would you say you've got a good memory?

A. Yes.

Q. Can we move on to 362, please. This was a message you sent to your friend, Minna. Would you read it, please?

A. "Yes. Work has been awful."

Q. She then replied on the next tile:

"Oh dear. Staffing probe? [as read]"

And then you said?

A. "We've had three unexpected deaths, transfer out. Few sick ones. Unit full."

Q. And then at 365?

A. "What I've seen has really hit me tonight."

Q. And then she replied:

"Have you worked today?"

And you replied?

A. "No, been off since Wednesday morning and now it's all hit me."

Q. She then replied:

"With all the Walton stuff and work stuff you..."

And then it morphs into the next one, it's a continuation:

"... could do with talking to a proper counsellor."

Then the next one she sent you:

"If you don't sleep well, et cetera, it will damage your health in the long run."

And you replied?

A. "I just don't think I can."

Q. She then said:

"Why not?"

A. "I can't talk about it now, I can't stop crying. I just need to get it out of my system."

Q. She replied:

"Okay. You know yourself what is best for you at present. Just think carefully whether you should be working if you feel so bad."

Followed by:

"Maybe you need to take time off."

And the conversation concluded with your next one, please.

A. "Work is always my priority. I won't let it affect it. I just haven't let myself cry over it until now and been thinking about Walton, et cetera. Once I've let it out tonight, my head will be clearer."

Q. Yes. I think you've already told us, but in case anybody forgot, the reference to Walton was to an investigation you had at the Walton Centre in Liverpool; is that right?

A. Yes.

Q. This was a very memorable time of your life, wasn't it?

Do you agree?

A. Yes.

Q. The conversation with [Nurse A] then, please, a few days later on the following Tuesday, the 30th. If we could go to 382, please.

So she to you:

"Yeah. There's something odd about that night and the other three that went so suddenly."

And you replied?

A. "What do you mean?"

Q. Did you really not understand what she meant?

A. That's what I've replied at that time.

Q. I know. What I'm asking you is whether you really didn't understand what she meant.

(Pause)

Did you not understand what she meant?

A. No.

Q. Or were you worried that people were starting to put two and two together?

A. No.

Q. Well, we'll see from the next text you sent, following up, 2 minutes later:

"Odd that we lost 3 and in different circumstances?" So this is a reference, isn't it, to [Baby A], [Baby C] and [Baby D]?

A. Yes.

Q. All of whom had, on the evidence, odd-coloured or type of rashes that experienced medical professionals had never seen before? That's the evidence, isn't it?

A. Yes.

Q. These were not different circumstances, were they?

A. Yes, they were.

Q. Well, let's see what your friend thought, who had witnessed two of these incidents, the second being [Baby B], of course. 385:

"I dunno. Were they that different?"

Then:

"Ignore me. I'm speculating."

And you replied what, please?

A. "Well [Baby C] was tiny, obviously compromised in utero. [Baby D] septic. It's [Baby A] I can't get my head around."

Q. Then [Nurse A]:

"Was she [in other words [Baby D]] definitely septic?

Did the PM [post-mortem examination] confirm?"

And you?

A. "I don't think the full PM is back yet. Debrief is next week but I'm away."

Q. Then she to you at 22.07, tile 390:

"When's [Baby A]'s? They were talking of doing a joint one for all three as all close together and similar in being full arrests in babies that were essentially stable. Dunno if they are doing though."

And your response, please?

A. "Ah, not sure, but [Baby C]'s is Thursday and [Baby D] next week."

Q. Followed by?

A. "No mention of [Baby A]."

Q. And then she said:

"I'd like to go to [Baby D] and [Baby A]'s."

And you?

A. "Speak to Eirian. I think [Baby D]'s is the 6th."

Q. Then on the next tile, please, 395. We've moved on in time, more than 3 months, haven't we, from the death of [Baby D] by the time you were searching for [Father of Baby D], the distraught father?

A. Yes.

Q. A name you were carrying in your head?

A. Yes.

Q. The next tile, please. Another search a minute later for [Father of Baby D]. You didn't really forget [Baby D], did you, Lucy Letby?

A. Yes, I didn't recall specific details at the time of my interview.

Q. Just before we leave the subject of Facebook, although we will return, does Facebook store the names that you search?

A. Yes.

Q. How many names does it store?

A. I don't know.

Q. Can I suggest the last six?

A. I don't know. I can't answer that.

Q. So what I'm suggesting to you is that if you're on Facebook all the time, which you are, and when you go back days, weeks, months later, you have the source of the name either in your head or written down somewhere. Are you saying in your case that it was in your head?

A. Yes.

Q. Yes. And yet you say you couldn't remember [Baby D] when the police were asking you questions in interview?

A. Yes, not specific details.

Q. Is it your case that staffing levels contributed to [Baby D]'s death?

A. No.

Q. Is it your case that medical competence contributed?

A. Yes, I believe she didn't have the appropriate treatment at the start of her life.

Q. So the delay with antibiotics?

A. Yes. It may have had an impact on her, yes.

Q. They don't guard against air embolus, though, do they, antibiotics?

A. No.

Q. Do you accept that once [Baby D] got into the neonatal unit she was treated properly?

A. I haven't gone through all of her notes to able to make that assessment myself.

Q. Do you accept that by the end of the day shift, on 21 June, [Baby D] was stable with a minimal amount of respiratory support in no additional oxygen, she was responsive and was making good progress?

A. I'd have to refer back to the notes. But yes, if that's what's documented.

Q. That's what Dr Rylance told us on 8 November from Switzerland.

A. Okay.

Q. And it's what she wrote in her notes at tile 158. Do you accept that Caroline Oakley's nursing notes are accurate? Do you want to look at them?

A. Are you asking me about a specific note or in general?

Q. To be fair to you, let's have a look. It's tile 207. If ever you want to look at the evidence, you just let me know.

We see this is a note made after [Baby D]'s death. She recounts taking handover, doing the necessary checks, the position of lines. The fact that she was on, it says, NCAP in air.

Do you accept her notes?

A. Yes.

Q. Do you remember her saying that [Baby D] was breathing beautifully in air and her blood saturations of oxygen are the highest they can be?

A. I don't recall her exact turn of phrase, no.

Q. Let's look at T169, which is her observations. If we can just scroll down, please. Thank you. We see the respirations. Obviously things go wrong at around midnight or 1 o'clock in the morning.

If we look down, please, the temperature is pretty much on the money, isn't it?

A. Yes.

Q. Respirations, fine?

A. Yes.

Q. Anything there of concern?

A. No.

Q. Do you accept the evidence of Caroline Oakley that she was on a break when [Baby D] collapsed?

A. I don't recall. I don't know how to answer this sort of question.

Q. Well, she told the jury that she was on a break when [Baby D] collapsed. Do you accept that evidence or do you say that she wasn't on a break or something else?

A. I couldn't say either way because I don't know.

Q. Well, you were there. You heard her evidence. Do you want to make any further comment about it?

A. No.

Q. Let's go back to T168, please. If she was on a break who was the other nurse in the nursery?

A. Myself.

Q. Do you remember Kathryn Percival-Ward or Percival-Calderbank confirming to the court that Caroline Oakley was on a break?

A. Yes.

Q. So two of your colleagues, one of whom is a friend.
Do you accept that she was on a break?

A. Yes.

Q. Can we look at the neonatal review, please, for [Baby D]? I'd like to go to the page that's in the bottom right-hand corner, page 3 of 6. It's actually page 4 of 7 because you will remember, ladies and gentlemen, that we got an extra chart that was slotted in because the population distribution changed during the shift. Do you see there at line 119, marked with a black line, the initial collapse of [Baby D]?

A. Yes.

Q. Do we see that in the 30 minutes prior to [Baby D]'s collapse you are not recorded as doing anything for any of the children in the neonatal unit?

A. Can you repeat that, please?

Q. Certainly. It might be best to concentrate on lines 109 down to 118. What I asked you was whether there is any record of you doing anything else for any of the other children in the neonatal unit in those 30 minutes or so.

A. No, the last record is at 01.00.

Q. Yes. So that's line 108, which is the child MRE; is that right?

A. Yes.

Q. Then there are two previous entries a quarter of an hour earlier at 00.45, lines 101 and 102?

A. Yes.

Q. Then before that, at 15 minutes for JE; is that right?

A. Yes.

Q. Can we go to tile 201, please, keeping that neonatal review open, please? Scroll down. Thank you.

The blood gas for [Baby D] taken at 01.14 was done by you, wasn't it?

A. I don't know.

Q. That's your writing, isn't it?

A. It could be my writing, yes.

Q. Yes, it is. You see where it says 01 and then the 14 in slightly elevated --

A. Yes.

Q. -- numbers? That's the way you write these numbers.

A. Yes.

Q. You're not the only person, of course, but that is the way you do it.

A. Yes.

Q. And that is your writing, isn't it?

A. It looks like my writing, yes.

Q. Yes. Why didn't you sign it?

A. That's just an oversight, the same as the gas on the next line down hasn't been signed, it's just an error that happens from time to time.

Q. Yes, well, of course by the time of the subsequent gas, [Baby D] was in a pretty poor state, wasn't she, 02.22; is that right?

A. The gas is good, I'm not sure about her clinical picture at that time. It's a good blood gas.

Q. Can we go to tile 202? You see there's some observations at 01.15? This line.

A. Yes.

Q. If we scroll down, please. There's quite a lot of detail filled in there and it's signed by Caroline Oakley, isn't it?

A. Yes.

Q. Do you remember she told the jury she got those details from "the girls" --

A. No, I don't remember that.

Q. -- because she was on a break? You don't remember that bit of evidence?

A. No.

Q. Were you looking after [Baby D] while she was on a break?

A. No.

Q. Who was?

A. I don't recall that there was -- who was allocated to look after her. I think Caroline had only gone on her break potentially 5 minutes before.

Q. Tile 203, please. You see the infusion chart?

A. Yes.

Q. We have the infusion at 01.25, which is the same as what we see in the neonatal review at line 116.

A. Yes.

Q. If anybody wants to make a note, it's the same as tile 203 in the sequence.

This is whilst Caroline Oakley was on her break, she said.

A. I don't agree with that. When we sign medications, we sign at the time it is given.

Q. But it depends whether she's telling the truth about that, I suppose, doesn't it?

A. Yes.

Q. Yes. Whose handwriting is the date and time in the date and time started column?

A. It looks like mine.

Q. Did you take the opportunity whilst Caroline was absent to sabotage [Baby D]?

A. No.

Q. When the alarms went off for [Baby D] you were standing over her though, weren't you?

A. I don't recall.

Q. Well, who else could it have been? Go back to the population distribution chart, please, at tile 168.

Let's look at the candidates for who it could have been looking after [Baby D] in nursery 1. Caroline Oakley wasn't there.

[Nurse C]. Is she a possibility?

A. Yes.

Q. But she said that she wasn't there, so that depends on whether she's telling the truth or not.

Who are the other possibilities?

Kathryn Percival-Ward?

A. Yes.

Q. Who had, what, four children to be looked after?

A. Yes.

Q. What about Liz Marshall, would she be in nursery 1?

A. No.

Q. No. It was you, wasn't it?

A. I can't confirm that. I will have been in nursery 1 with my babies, but other staff may have been in and out of the nursery at that time as well.

Q. Can we go to tile 221, please? There's an entry at 01.30. Do you see that?

A. Yes.

Q. Whose handwriting is, "Oral secretions ++"?

A. I can't say definitively.

Q. Whose does it look like?

A. It could be mine.

Q. Yes. Why were you writing in [Baby D]'s chart, if it was you at 01.30, if you were not the person looking after her?

A. It may have been something that I documented alongside Caroline Oakley, who's filled in the other columns.

Q. Yes, but if she's on her break, she can't have filled them in at the time, can she, if she's on her break?

A. So you mean she's filled them in at 1.30, when she was on her break, retrospectively?

Q. Well, it all depends, doesn't it? If we move across, please, in the chart towards the right of it, do you see where it says, "Suction pp LL"?

A. Yes.

Q. Whose writing is that?

A. It's not mine. I would assume it's Caroline Oakley.

Q. Who's LL in this context?

A. It would be me.

Q. Because I'm suggesting you were, to use Dr Jayaram's phrase, babysitting [Baby D]. You had, as a matter of fact, been in nursery 1 throughout, hadn't you?

A. I can't -- I can't comment on that. I don't know for certain.

Q. Let's look at back at the neonatal review, please, if we can, starting at 120 in the neonatal review, line 120. This is after [Baby D]'s first collapse now. We see that you make a note at 01.30. Is that right? Do you see that?

A. Um... Yes. For JE, yes.

Q. Yes, for JE. Were you really -- sorry, 120 is [Baby D] at 01.30.

A. Yes, that's Caroline Oakley referring to me in her nursing notes, I believe.

Q. Oh, I see. Also at 01.30, line 122, you are, as you just told us, making an entry for JE?

A. Yes.

Q. And we see, don't we, that you were putting something on to JE's, if the record is correct, neonatal fluid balance chart?

A. Yes.

Q. Were you really doing that as [Baby D] was collapsing?

A. I can't give a definitive time.

Q. Well, have you tried to make the paperwork look like you were doing something else at the time [Baby D] collapsed?

A. No, I've not falsified any paperwork.

Q. Ever?

A. No.

Q. Well, we'll come to that.

We see at 126, over the page, 127, 129 and 132, were these really being put in just after [Baby D] had collapsed?

A. Medications, yes, they are signed for at a specific time, yes.

Q. 139 (inaudible)?

A. Fluid balance charts and observations charts may not be definitively accurate of that time, no, but medication would be.

Q. At 155 to 162, we see that you were involved in giving medications to [Baby D] before her second collapse at about 3 am.

A. Yes.

Q. Do you remember that?

A. No.

Q. [Baby D]'s third collapse and final collapse we see at line 185, don't we?

A. Yes.

Q. At 174, just before [Baby D] -- well, it's about -- I say just before, it's about 25 minutes before [Baby D]'s final collapse, you were setting up an infusion with Caroline Oakley for [Baby D], weren't you?

A. Yes.

Q. We see that information if we could, please, Mr Murphy, at tile 237.

Despite all that, you're saying you don't or you didn't, when the police were asking you about it, really remember [Baby D]?

A. That's right.

Q. [Baby D] died because you injected her with air, didn't you?

A. No.

Q. And I'm suggesting that's the reason she had air in her great vessels, like [Baby A] and [Baby O].

A. I did not give her air.

Q. Did you think that the paperwork wouldn't tie you to [Baby D] at the time she collapsed?

A. Can you rephrase that, please?

Q. Yes. When you saw the paperwork when the police were asking you questions, did you think that there wasn't really a link between you and [Baby D] at the time of her collapse?

A. No, I had other babies, I wasn't caring just for [Baby D].

Q. Did you deliberately take the decision just to say, "Well, I don't remember her", to avoid answering questions --

A. No.

Q. -- or to try to avoid answering questions?

A. No, I tried to be as cooperative as I could be.

Q. You did remember [Baby D], didn't you?

A. Not in specific details at the time of the interview, no.

Q. Despite all that?

A. Yes.

Q. Despite the fact that, as you have told us, you have a very good memory, particularly a good memory for names?

A. Yes.