

Tuesday, 24 September 2024

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(10.00 am)

(Proceedings delayed)

(10.07 am)

MR GRIFFIN: Chair, today is the final day of commemorative and impact evidence in this September session.

Again, we will be hearing about some distressing and difficult matters, and I refer again to the emotional support service that's available, which is overseen by the Inquiry's chief psychologist. Counsellors are present here today, they're wearing black lanyards and, for those in the room, they're sitting just at the back here. Further information about services is available on the support services page of the Inquiry's website. That's at [lampardinquiry.org.co.uk](http://lampardinquiry.org.co.uk), or just by coming up to a member of the Inquiry team. We're wearing purple lanyards and we can point you in the right direction. As I've said every day, we want all of those engaging with the Inquiry to feel safe and supported.

Chair, the first commemorative account today comes from Margot Binns on behalf of her family, and it's about her father, Roland Guy, or Ron. I will be reading it, but Margot is here with her sister Kathleen Hodgeson, as I read.

1 Statement by Margot Binns about Roland Guy

2 MR GRIFFIN: With this commemorative account, I am  
3 representing the rest of my family, particularly my mum,  
4 brother and sisters, so I'll use a collective term in  
5 place of "I" in much of this account.

6 I'm afraid I don't have the capability to  
7 commemorate a man as complex and entire in character as  
8 my dad within eight pages, but here goes.

9 Our dad, Roland Guy, preferred to be known as Ron.  
10 He grew up mainly in Dagenham, one of three boys. His  
11 mother did have a longed for girl, but her death as  
12 an infant impacted heavily on the family, especially  
13 dad's mother, Dorothy. Dad's father, Frank, was a train  
14 driver who had served at the Somme in World War I.

15 Dad was a respectful, athletic and intelligent son  
16 with a rebellious streak. His mother was very  
17 house-proud. Dad being a rough and tumble boy with lots of  
18 energy was often in trouble. His two brothers were less  
19 athletic and more studious. Dad always said his mum was  
20 a good cook and he was always well clothed and well fed.  
21 If dad needed reprimanding, his father would give him  
22 the belt as directed by his mother, which was a fairly  
23 normal punishment in most of the nearby households at  
24 the time.

25 Dad signed up with the RAF when the Second World War

1 began. He was only 15 years old but eager to serve his  
2 country. His father, having lied about his own age when  
3 he enlisted in World War I, suspected as much and  
4 informed the RAF of his true age. But the moment dad  
5 was legally old enough, on his 17th birthday, he joined  
6 the Royal Marines. Soon after he enlisted they asked  
7 for volunteers for hazardous duties and dad stepped  
8 forward. He didn't know at the time he was to be  
9 trained as a Commando, which were a new force at the  
10 time.

11 Dad spent the next two years training, mainly in  
12 Scotland and Wales, in preparation for the invasion of  
13 France and Germany. He was trained as a sniper, in rock  
14 climbing, explosives and unarmed combat. He was  
15 recruited into the 30th Assault Unit, an intelligence  
16 gathering force, whose commander was Ian Fleming, later  
17 to become the author of the Bond novels. A sub-unit of  
18 30AU was X Troop, which was so secret it did not exist.  
19 Dad served in this unit too.

20 Dad never really spoke about his actions in the war,  
21 he'd signed the Official Secrets Act after all, but he  
22 would offer an occasional snippet of information, always  
23 retreating if pressed for further information. I can  
24 remember him saying when he passed out and received his  
25 green beret it was one of the proudest moments of his

1 life.

2 His unit landed in France in June 1944. On their  
3 first night at Sainte-Mère-Église, they were strafed  
4 with gunfire from the air. Some of the comrades, who  
5 had become like brothers to him over the past two years,  
6 were killed, and many wounded. At this time, dad was  
7 just 19 years old. His unit made their way through  
8 northern France, mainly concerned with the V1 and V2  
9 rockets sites and secret weaponry. They arrived in  
10 Vannes, Brittany in August 1944. This is where he met  
11 mum, who was in the French Resistance.

12 Our French grandmother, aunt and mum were later  
13 awarded certificates from the American President Dwight  
14 D Eisenhower for service to the American people, hiding  
15 airmen who had been shot down over France, getting them  
16 through an escape network and back to England.

17 Mum had been a student at the Beaux-Arts when  
18 Blitzkrieg cut her studies short. She was eight years  
19 older than dad and considered French bourgeoisie. Dad  
20 was from the East End of London and from a very  
21 different class, culture and background. I'm sure they  
22 would have never met in normal circumstances.

23 Dad was only in Vannes for two weeks and met mum  
24 there a handful of times. Our grandmother was helpful  
25 to dad's unit as she spoke perfect English and could

1 pass on a certain amount of intelligence concerning  
2 German positions and resistance networks. Therefore,  
3 the commanding officer, along with dad, came to their  
4 house a few times. Mum and dad then continued getting  
5 to know each other, corresponding by letter, this  
6 courtship by post culminating in their marriage early in  
7 1947.

8 Dad's unit was sent to Germany in 1945 where they  
9 continued their intelligence work, mainly directed at V1  
10 and V2 rocket technology and the apprehension of German  
11 scientists.

12 Once the war was over, dad was sent to Hong Kong.  
13 He was in Hong Kong for nearly two years. One of his  
14 main duties was guarding Japanese prisoners of war  
15 before their trial. He became particularly close to  
16 some of these inmates, going into their cells to learn  
17 jujitsu, also exchanging small gifts. In later life he  
18 did speak of what he considered the injustice meted out  
19 to some of these low ranking soldiers. He felt that the  
20 true commanders and perpetrators of hideous war crimes  
21 often escaped the death penalty because they were tried  
22 later, once the fervour of war had subsided. Instead  
23 the truly responsible were given lighter sentences and  
24 it was the foot soldiers, many of whom dad became  
25 friendly with, who were those given the harshest penalty of

1 death.

2 Dad's duty was to guard these prisoners, take them  
3 to the courthouse, march them to the gallows and watch  
4 them hang. Dad was only 20 and 21 years old during this  
5 period.

6 The one person in the world he would confide in was  
7 our mum. He adored her and she him, and he was  
8 immensely proud of her many talents. In her opinion, it  
9 was not the liberation of France, nor the invasion of  
10 Germany, which damaged dad's mental well-being. In  
11 France he met the love of his life and helped liberate  
12 an occupied people. In Germany, he helped halt the  
13 proliferation of advanced weaponry aimed at his  
14 countrymen. It was in Hong Kong, in the stillness of  
15 peace, the real damage was done.

16 Dad had signed up for 12 years, unlike many of his  
17 comrades who were 'hostilities only', so were on civvy  
18 street once the war was over. Dad did not want to wait  
19 until 1954 to be with mum. He did not want to serve his  
20 country by taking young men like himself to the gallows  
21 to watch them die. The only possibility to escape this  
22 mental torture would be to buy himself out, which he  
23 could not afford. He had to find another way to be  
24 discharged.

25 The correspondence between mum and dad from 1944 to

1 late into 1946 serves to verify much of what dad  
2 insisted was the true history of his mental illness and  
3 his subsequent discharge from the forces on medical  
4 grounds. He was eager for us to know his initial stay  
5 in a mental hospital in 1946 was orchestrated by himself  
6 and it had no bearing on his problems in later life. He  
7 saw mental illness as a shameful weakness, especially in  
8 himself.

9 But whatever the truth, he must have been  
10 a desperate man. Even though the letters between our  
11 parents were censored at the time, it is obvious they  
12 longed to be together and dad had a plan to leave  
13 Hong Kong so he could marry mum and leave this torturous  
14 existence behind him.

15 Dad said he feigned a mental breakdown in order to  
16 be sent home. Dad carried out his plan and was given  
17 a lumbar puncture (which at the time was believed to ease  
18 pressure on the brain). He was then boarded on to  
19 a hospital ship and caged deep down in the dark of the  
20 ship without windows. The mentally ill were allowed on  
21 deck occasionally to take air. Dad ventured out of his  
22 caged dungeon and on to deck once during the whole  
23 six-week voyage as he couldn't bear a repeat of the  
24 humiliation he suffered the first and only time  
25 an audience of passengers staring and pointing, mocking

1 the mentally ill.

2 We are proud of our parents' role in the war. Dad's  
3 small role to find V1 and V2 launch sites, retrieve  
4 secret documents deep within burning mines and from  
5 booby-trapped bodies undoubtedly saved lives. This new  
6 weaponry was causing destruction and terror in our  
7 cities and the necessity to understand and halt what  
8 were the first ballistic missiles was essential to  
9 winning the war against the Nazis.

10 He never collected any of his campaign medals,  
11 believing he didn't deserve them as he was no hero. The  
12 heroes, in his mind, were those who never came home.  
13 But we know survivors like mum and dad do not go through  
14 war and come out the other side unscathed. They spend  
15 their lives as the walking wounded. Dad bore a living  
16 sacrifice with painful memories he buried deep within  
17 and never spoke of, but we can piece together a little  
18 of his suffering.

19 Regardless of all his training and intelligence,  
20 many like our dad felt they were left on the scrap heap  
21 and found it difficult to get work after the war.  
22 Despite the dreadful treatment he endured as a mentally  
23 ill patient the previous months, he was determined to  
24 provide for his now wife and growing family.

25 Dad became a heating engineer, running jobs mainly



1 at oil refineries, industrial sites, schools and  
2 universities. Mum had five girls and one boy over the  
3 next ten years. Our parents bought their own home and  
4 dad worked very hard over the next 50 years. Not bad  
5 for someone who suffered from depression and undulating  
6 moods. We had a frugal upbringing, despite mum's  
7 heritage. The wealth was and always remained in France,  
8 but this is another story.

9 As children, we knew dad had a temper and would  
10 avoid making him angry, running for cover when we did.  
11 He was, however, a very kind and generous person. He  
12 installed central heating to many of our neighbours'  
13 houses, only ever charging for materials, giving his  
14 labour and time for free, even when money was short in  
15 our own home. Give dad a screaming baby and he would  
16 pace up and down tirelessly, singing 'Swing Low, Sweet  
17 Chariot' in smooth baritone, soothing and rocking gently  
18 until the infant in his strong arms, no matter how long  
19 it took.

20 He was a deft, self-taught tap dancer. He taught us  
21 how to knit, play cribbage, chess and bridge, his  
22 grandchildren too. He would sit alongside mum at her easel  
23 and capture the scene wonderfully with a sketch pad and  
24 charcoal. He was social and friendly, but would have  
25 bouts when he would get down in the dumps and sometimes

1 go to bed for a week or two, lose his appetite and not  
2 want to involve himself in much at all.

3 The rest of the family would carry on as normal,  
4 knowing dad would eventually pick himself up and carry  
5 on. This was dad's pattern for decade after decade  
6 until he went to see a GP, subsequently being placed  
7 under the care of Essex Mental Health.

8 A doctor prescribed him antidepressants of some  
9 kind. This, for unknown reasons, was the doctor's first  
10 and only approach, no offer of counselling or getting to  
11 the root of any problem. The doctor didn't even know  
12 dad, he had never treated him before. The doctor was  
13 not a psychiatrist or a specialist in mental health, he  
14 was a general practitioner. We feel this was  
15 an irresponsible and neglectful approach.

16 Dad had never taken any medication for his problems  
17 until this point in his life. He had never had any help  
18 at all from outside his family. The antidepressants  
19 were prescribed in 1994. Even though dad had proudly  
20 and freely given to his country, he only asked just once  
21 for anything in return, and he was let down.  
22 Appropriate, effective help was not given.

23 The visit to the doctor was the catalyst, when we  
24 all witnessed him change beyond our recognition, never  
25 to see the dad we'd previously known again. Only little

1 glimpses. The undulating mood changes, which would take  
2 years to complete a cycle and he'd always experienced,  
3 became mountainous highs and the deepest lows. This new  
4 cycle would complete in very rapid succession then start  
5 all over again.

6 After taking the antidepressants, dad experienced  
7 a high we found frightening, followed by the one and  
8 only time he overdosed in an attempt at suicide. He'd  
9 never tried to kill himself before. Our dad was brought  
10 up in a prudish, Victorian and careful household, and  
11 yet suddenly he'd become a completely different person.

12 I will try to describe as best I can this new  
13 pattern of his and our suffering.

14 He begins making lewd and suggestive jokes, which  
15 makes us feel extremely uncomfortable, especially coming  
16 from our prudish, Victorian dad. He is normally  
17 friendly and sociable but he becomes loud and  
18 dominating. Our frugal dad visits jewellery shops and  
19 buys us all gifts, spending hundreds of pounds at  
20 a time, lavishing money he'd worked hard all his life to  
21 earn. We consider getting power of attorney to stop him  
22 spending his own money. He knows everything, a fountain  
23 of all knowledge. He talks and laughs incessantly.  
24 Conversation is one-sided, it is never your turn. His  
25 laughter booms from wall to wall. It's embarrassing and

1 unpleasant being near him. Saying this about the dad we  
2 love and our children love makes us feel terribly sad  
3 and guilty, but it's the truth. He has a gargantuan  
4 appetite which cannot be satisfied, he stokes this high  
5 with cakes and coffee. His whole demeanour is manic,  
6 loud and exaggerated.

7           Gradually the laughter disappears, he shuns company  
8 because it's distracting him from his obsessive mission.  
9 This quest is serious business. He stays up all night  
10 composing letters to MPs, the Prime Minister, the  
11 multitude of bureaucrats he detests, and the one or two  
12 he admires. As the days pass, the writing becomes less  
13 legible and the content more bizarre. He draws  
14 colourful patterns and in his mind they signify  
15 something. There is an all-consuming urgency to  
16 chronicle his message. He has invented a new language  
17 of bold swirling colour, thick lines at the outer page  
18 edge squeezed down to central infinity. It is necessary  
19 to communicate in this visual code. If not, Bill Gates,  
20 MI5, the Pentagon, our family's doctor and even the  
21 newspaper boy will give his secrets away to them. Spies  
22 have been infiltrating his TV and telephone. Only  
23 a genius on a similar astral plane will have any hope of  
24 understanding his ciphered clues for help.

25           We don't recognise this person. We cannot identify

1 with him at all. Our ageing mum is distraught and  
2 bewildered. She begins to retreat into a world of her  
3 own.

4 Anger and frustration ooze from him. He paces like  
5 a caged gorilla as he struggles to express himself. He  
6 cannot. There is so much he wants to say, but he can't  
7 verbalise any more. Each sentence begins with a stifled  
8 energy that queues impatiently like a traffic jam at the  
9 tip of his tongue, bunching up behind the barrier of his  
10 clenched teeth. Unable to escape into words, a few  
11 stunted grunts relieve the building pressure of  
12 frustration. He unsuccessfully attempts to speak again  
13 and again.

14 Dad wants to lash out, bang and crash, his eyes are  
15 murderous, I think he wants to hit me. We avoid him, so  
16 he begins to believe no one understands, no one cares.  
17 Dad sighs a lot. Lungs full of air expel their content  
18 in sharp bursts of despair. We prepare for a deeper  
19 plunge. He knows what is coming. His deep blue eyes  
20 glare with terror as though he is descending into hell.  
21 He reaches and grasps to save himself, like clawing  
22 fingernails screeching against the impenetrable sides of  
23 his black hole, he is sliding, slipping, he cannot cling  
24 on. Screaming tinnitus rebounds around his brain.

25 He takes to his bed and stays there. Dad is not

1 hungry, he does not eat or drink. He must be coaxed or  
2 he will starve. He doesn't want to touch or be touched.  
3 His soul has been sucked away into a black void. His  
4 deep blue eyes are empty, there is no one in, vacant,  
5 silent, nothingness. For us peace, relief and guilt.

6 We can breathe, we can recharge, we can pretend he  
7 doesn't exist. How horrible this makes us feel to say  
8 this about our dad. This becomes his extreme pattern of  
9 suffering, one phase leading to the next in a continual  
10 and rapid cycle of agony for all concerned.

11 This sequence of behaviour accelerates so the whole  
12 process from mania to deep depression covers a period of  
13 a couple of months. This is his life for 12 years until  
14 he dehydrates and starves himself to death under the  
15 care of Essex Mental Health Services.

16 Many times we would try to contact and engage health  
17 professionals to help our dad during each of these  
18 phases. The health professionals only ever seem to step  
19 in and propose any help at all when the situation became  
20 desperate.

21 And dad was deeply depressed. He was regularly  
22 sectioned during the depressive phase and taken to  
23 Runwell Hospital.

24 No problem at all.

25 (Pause)

1           Each time he was there, we were pressured to give  
2           our consent to electro-convulsive therapy. We were told  
3           our dad is willing to have it. This would always be  
4           when dad was deeply depressed and starving himself. If  
5           someone had asked dad if he would like to end his life  
6           at this time, he would have agreed to it, so it was  
7           a ridiculous proposition, and inappropriate to be  
8           pressurised in this way. We knew in his logical state  
9           dad would not want it. We had to fight his corner. He  
10          was incapable.

11          Dad's extreme suffering began in 1994 and ceased  
12          with his death in 2006. We feel this extreme suffering  
13          could have been avoided with appropriate health and  
14          care. We hate the fact he suffered in this way, and we  
15          hate the fact he did not get the right help. These  
16          feelings give rise to our own self-hate.

17          Our dad lived a full life. We are grateful for  
18          that, as we know many who were failed had been denied  
19          this. All sufferers and their loved ones are in our  
20          thoughts and prayers.

21          We will give credit where credit is due, though.

22          Runwell Hospital was set in beautiful surrounding  
countryside, green  
23          grass, trees and rabbits visible from every angle. As  
24          dad improved we'd go for walks in the grounds and sit  
25          outside and have a cup of tea, even take him out to

1 lunch at a local pub. The immediate world outside his  
2 ward was conducive to him wanting to get well. Sadly it  
3 is now a luxury housing development.

4 In the days before his death, dad was transferred  
5 from Runwell Hospital to Southend General Hospital. He  
6 was badly dehydrated and in a poor physical state. When  
7 it was obvious dad had no hope of surviving this last  
8 starvation ordeal, the sister at Southend Hospital  
9 allowed his children and grandchildren to gather round  
10 his bed to say a final farewell, and they were there by  
11 his side as he took his last laboured breath. He was  
12 taken long before his time but his suffering was, after  
13 12 long and tortuous years, finally over.

14 Chair, that is the account.

15 THE CHAIR: Can I thank you for a really eloquent account of  
16 an admirable man. Thank you.

17 (Pause)

18 MR GRIFFIN: Chair, there will be two people at the table  
19 next, yes.

20 (Pause)

21 I invite Adam and his wife to come up to the table,  
22 please.

23 Chair, we hear now from Adam Rowe, who will give his  
24 commemorative statement about his mother, Amanda Hitch,  
25 and Adam is accompanied by his wife,



1 Dr Maxine Feldman.

2 Can you put up the photograph, please, and Adam,  
3 please start whenever you feel ready.

4 Statement by Adam Rowe about Amanda Hitch

5 MR ROWE: Thank you.

6 Amanda Hitch was my mother. As a child I lived with  
7 my mum and dad in Ongar, Essex. When my younger brother  
8 was born we moved to Clacton-on-Sea.

9 My mum worked as a lunch time assistant at my  
10 primary school. When I was 8 years old we moved to  
11 Chelmsford for my father's work. My mum then worked as  
12 a teaching assistant at a primary school where she loved  
13 her job and worked really hard at it whilst also running  
14 the household.

15 My parents separated in 2011. My mum's mental  
16 health started to deteriorate shortly after. My mum,  
17 who was not usually an angry person, started to get  
18 angrier about everything. She also became increasingly  
19 hyperactive.

20 In and around 2010 my mum left the family home with  
21 my brother. She moved into a barge boat in Chelmsford.  
22 One of the reasons for this was that she didn't have  
23 much money, but to my mind this was also an indication  
24 that things weren't quite right. She also left her job  
25 during this phase because she felt she was being pushed

1 out. I recall her being very angry about the fact that  
2 she had been told by her line manager that she was not  
3 performing as she used to.

4 After she left that job, she had various jobs such  
5 as waitressing at a pub and working in a park café.  
6 I remember an air of financial uncertainty during this  
7 period. My brother, who was living with my mum at the  
8 time and studying for his A levels, also had to work  
9 part-time.

10 My mum's condition continued to deteriorate. She  
11 became increasingly anxious and rarely left the house  
12 because she was nervous about seeing other people.

13 My mum was admitted to the Linden Centre, Broomfield  
14 Hospital in Chelmsford in 2014. I understand that she was  
15 suffering with psychosis. She told me that she was  
16 hearing voices in her head and she thought buildings were  
17 moving and talking to her. She bit her nails until she  
18 did not have any left and the nail beds were bleeding.

19 When I visited her in hospital, she told me that  
20 someone was trying to kill her. Even when I was able to  
21 have "normal" conversations with her, there was  
22 an undertone of psychosis. For example, she would  
23 mention that the buildings were moving midway through  
24 conversation. It was clear that this was extremely  
25 distressing for her. It was heartbreaking for us, as

1 a family, to see her level of distress.

2 By this time, it was very clear that my mother was  
3 seriously unwell. She had always been so very  
4 independent and had held down multiple jobs and had been  
5 such a stable force in our childhood. It felt like the  
6 roles had been reversed. I was now the carer.  
7 I wondered whether she would ever recover.

8 I felt extremely frustrated by the failure of staff  
9 to listen when I tried to convey to them all that my mum  
10 had been able to do, ie run a household, look after her  
11 children, do well at her job and live independently.  
12 She had also obtained a qualification from the  
13 University of Cambridge, which she was very proud of.  
14 I did not feel that the Hospital or the community staff  
15 understood or appreciated the rate of decline in her  
16 condition.

17 After around nine months she was discharged. With  
18 my help she sold her house in Writtle and bought a house  
19 in Clacton-on-Sea, which is where I'd spent most of my  
20 childhood, and this is probably where my mum had her  
21 fondest memories. However, it became clear to me that  
22 my mum could no longer live independently. For example,  
23 when I would leave her house she would phone me about 20  
24 times afterwards and tell me that she was worried the  
25 walls were going to fall in.

1           Shortly after her separation from my dad, my mum  
2           found a partner who cared for her a lot. He started to  
3           stay at her house to care for her, but this was not  
4           enough by way of support, and then mum moved into his  
5           house. Mum had about three further hospital admissions  
6           during the next five years. She was admitted following  
7           suicide attempts. For the majority of the rest of her  
8           life she remained in what was clearly a very depressed  
9           state and actively suicidal or consistently expressing  
10          a desire to die.

11          I had a very close relationship with my mum. As her  
12          mental health declined I viewed her as someone who  
13          needed my support.

14          When I was a child she had provided me with  
15          an infinite amount of support. For example, she planned  
16          every single day of our summer holidays, ensured our  
17          homework was always completed. Even as I entered my  
18          mid-20s she would book my favourite restaurant with cake  
19          and decorations for my birthday each year. Her love for  
20          my brother and I never wavered and was about the only  
21          thing that gave her some happiness. I felt like I could  
22          rely on her if I was going through a difficult time, and  
23          as she became more unwell I felt like it was my turn to  
24          step up.

25          When she lived with her partner I saw her about once

1 a week, or at least once a fortnight. We went out for  
2 the day to places like Epping Forest. I was conscious  
3 that she would not organise activities for herself and  
4 that when I left she would remain in a depressed state  
5 and mainly stay in the house until we next saw her. As  
6 such, there was an undertone of sadness to our trips and  
7 there was an element of it being a chance to check in on  
8 her mental health. My mum would sometimes cry when our  
9 day came to an end.

10 I felt like I was the only one who was pushing her  
11 to get better. On several occasions she stopped taking  
12 her medication, and I felt that this was not tackled by  
13 the mental health teams. I implored the mental health  
14 services to find an alternative to the oral medication  
15 which she was taking and, as a result of my challenge,  
16 she was offered a depot injection to form part of her  
17 regime of medication. I felt that the clinical team  
18 should have been more proactive in this decision rather  
19 than responding to a suggestion from a non-  
20 medically trained patient's family member.

21 My brother went to university and then moved to  
22 complete his postgraduate degree. As he lived far away  
23 I did not want him to share the burden of our mum's  
24 condition. I felt that it was my responsibility to  
25 ensure that she took her medication and attended her

1 medical appointments. I tried to shelter my brother as  
2 much as I could. This inevitably put a lot of pressure  
3 on me, not only to support my mum on a practical level,  
4 that is to deal with appointments, life admin and phone  
5 calls with the care team, but it was also emotionally  
6 draining and lonely.

7 In around 2020 I realised that my mum's condition  
8 was not improving and that her partner was unable to  
9 meet her needs. I felt that my mum would never get  
10 better again. I thought that if she lived for the next  
11 ten to 15 years it would be a miracle. It felt like  
12 I was dealing with someone with a terminal illness as  
13 I was convinced she would die by suicide. As such,  
14 I wanted to make the most of our time together.

15 I organised a trip to Ramsgate with my brother and  
16 mum in September 2021. This was the first time we had  
17 been away together since I was a teenager. My mum  
18 brought board games, we went for walks. It was so nice  
19 to spend quality time with her and to see her enjoying  
20 herself.

21 I started to research into sheltered accommodation  
22 for her to move into. She was encouraged by this idea  
23 because she wanted to regain her independence whilst  
24 being supported. My mum chose accommodation in Ongar,  
25 which we felt provided an appropriate level of support.

1           My mum had mixed feelings about the supported  
2           accommodation. I knew she was -- I think she knew she  
3           was not going to get a better place, but it was  
4           difficult for her to be surrounded by people  
5           significantly older than her, mum being in her late 50s  
6           at this time. She often made comments such as, "Who  
7           knew you'd be doing this for me when we used to do this  
8           for nanny", referring to her mum who also lived in  
9           a care home with dementia for the latter part of her  
10          life.

11          We had some good times together during this period  
12          yet her severe depression and suicidal intent never  
13          lifted.

14          In 2021 she hosted us for Christmas. She put up a  
15          Christmas tree and bought us sacks with presents in  
16          them. This was a really important event as it gave her  
17          some independence and was something she used to do for  
18          us as children. However, this was a rare event. For  
19          the majority of the time, up until her death, mum  
20          remained very unwell and suicidal for much of the time.

21          On 12 February 2022, I arrived at home around  
22          9.30 pm. I was alone in my flat as my partner was away.  
23          I heard a buzz at the door at 10.30 pm. When I opened  
24          the door and saw British Transport Police I knew  
25          immediately that my mum had committed suicide. The BTP

1 told me that there had been an incident that had  
2 resulted in my mum's death. I went into shock. The BTP  
3 stayed with me until my partner arrived at the flat.  
4 I did not sleep that night. I had images of what  
5 happened in my head. I had long anticipated that moment  
6 but it still felt surreal. I had so many questions: was  
7 this time any different? Did she leave a note? Did she  
8 try to call me?

9 My brother was at a friend's house that evening, so  
10 I decided to contact him the next day because I felt it  
11 would be detrimental to his welfare to tell him that  
12 night. The next morning I drove to my brother's  
13 friend's house and told him about mum's death. He went  
14 into shock too.

15 My brother, his partner, my partner and I stayed  
16 together for four days to support each other. We then  
17 relocated to my father's house to sort out the practical  
18 things, such as organising the funeral.

19 The rest of the family feels a huge gap left by the  
20 loss of my mum. I often sit and reflect on how sad her  
21 life was and how with better support this needn't have  
22 been the case. But before she was unwell and during her  
23 occasional periods of wellness my mum was the perfect  
24 mum. If I ever had friendship or relationship issues  
25 I could talk to her as a friend and source of support.



1 She wanted me to do well in school, but if anything went  
2 wrong I could always go to her. I could call her any  
3 minute of the day and she would be there. She  
4 always wanted my brother and me to go to her house to  
5 spend time with her. She was so proud of us. She would  
6 light up when she spoke about our work and university  
achievements.

7 She pushed herself out of her comfort zone for us. When  
8 I was at university in Birmingham, she drove there to  
9 see me, even though she hated driving. On another  
10 occasion she organised a surprise birthday dinner for me  
11 and arranged for my closest friends to attend.  
12 I remember these times with great fondness.

13 Mum's death has not only devastated me but has left  
14 a hole in our family. Both my brother and I miss her  
15 terribly.

16 MR GRIFFIN: Could you put up the remaining photographs,  
17 please.

18 (Photographs shown)

19 That's the final photograph.

20 THE CHAIR: Thank you very much indeed, very much  
21 appreciated.

22 (Pause)

23 MR GRIFFIN: The next account today is that of a person the  
24 Inquiry is referring to as FD4. It's about their son,  
25 who the Inquiry is referring to as PD2.

1           Chair, the use of ciphers instead of names in no way  
2           detracts from the very human nature of what you're about  
3           to hear, and it will be read by Rachel Troup, Counsel to  
4           the Inquiry.

5                               Statement by FD4 about PD2

6   MS TROUP: PD2 was a very much wanted and loved child. He  
7           bounced into our lives, a beautiful baby boy, full of  
8           smiles and cheekiness. It was a joy to have and to love  
9           him.

10           As I am one of three girls in the family, a boy was  
11           a great addition. My sisters, along with grandparents,  
12           were excited and happy for us to welcome this new  
13           addition.

14           PD2 grew into an inquisitive toddler, always keen to  
15           learn a new skill. He was only nine months old when he  
16           practically walked unaided to his Christening. He  
17           seemed to reach many milestones much earlier than  
18           expected.

19           When PD2 was three years old, his father was posted  
20           overseas. He and I followed, where we maintained our  
21           family unit. The time we spent there was happy. He  
22           joined a pre-school group to make friends and learn  
23           through play, which he enjoyed.

24           Before PD2 was due to start regular school, we  
25           returned to England in time for the reception class.

1 His sister arrived the same year, and it was a joyous  
2 occasion. We were a very happy and contented family.

3 PD2 approached school with the same inquisitiveness  
4 he had had as a toddler, always wanting to learn new  
5 skills. This approach was repeated throughout his  
6 schooling. Friendships were formed, various  
7 after-school clubs were found and attended. He was  
8 a popular participant, and soon sifted through the  
9 activities he wanted to pursue.

10 His grandparents idolised him, he really was the  
11 apple of their eye. PD2 regularly spent weekends with  
12 his grandparents, and he adored their company. They  
13 took him to various theme parks and events that he was  
14 interested in, particularly the WWF wrestling.

15 PD2 also enjoyed swimming and playing the keyboard.  
16 Because the interests in keyboard progressed, lessons  
17 were introduced and attended in order to take that  
18 further. He had some success with the keyboard, being  
19 entered into local competitions which he enjoyed taking  
20 part in.

21 He enjoyed all the family holidays. He was very  
22 well travelled, and developed a varied palate, trying  
23 all types of food.

24 After school finished, PD2 went to college, but  
25 decided to take his chances by gaining a position in

1 a London bank, an administration role. He soon realised  
2 that this was not for him. Being in the office  
3 environment was not where he wanted to be.

4 He gained a role with a local construction company  
5 where he learnt the basics of the building trade. Once  
6 he had completed the training, his uncle took him on to  
7 work with him in the building trade. He worked well  
8 with his uncle and enjoyed the freedom of working  
9 outside in the summer months.

10 The impact of PD2 taking his life has left a huge  
11 gap in our lives. The missed family events, the missed  
12 birthday and Christmas celebrations, the daughter he  
13 will never see grow up, the milestones achieved in his  
14 daughter's life never to be seen by him. He is  
15 an uncle. Sadly he will never know his nephew.

16 We will be forever asking ourselves why he was  
17 released when it was clear to us things were not right.  
18 To be told that I and my daughter were not allowed to  
19 see or talk to him when he was an inpatient will forever  
20 be etched in my brain. To release him without  
21 an appropriate plan in place for follow-up was arrogant,  
22 with no duty of care applied, unprofessional, resulting  
23 in a devastating end.

24 How will we pick up the pieces of that fateful day?  
25 It is a question we will never know the answer to.

1 MR GRIFFIN: Chair, that's the end of that statement.

2 THE CHAIR: I'm grateful for it, thank you.

3 MR GRIFFIN: We come to the stage in the morning where we  
4 will take our break, and I suggest that we reconvene at  
5 11.20.

6 THE CHAIR: 11.20, thank you.

7 (10.48 am)

8 (A short break)

9 (11.23 am)

10 MR GRIFFIN: The next commemorative statement is by  
11 Carole Stokes. She will be talking about her son,  
12 Lee Spencer, and present with her at the table are her  
13 two children, Ben and Charlie Spencer. May I ask that  
14 the photo is put up, please. Carole, please start  
15 whenever you feel ready.

16 Statement by Carole Stokes about Lee Spencer

17 MS STOKES: Lee Henry Spencer was born on 23 September,  
18 which was yesterday, 1998, at 4.26, in Harold Wood,  
19 Romford.

20 He was the youngest child of three, having an older  
21 brother, Ben -- sorry. That's wrong. Having older  
22 brother Ben and Charlie, his sister. We lived in  
23 Romford area until August 2017 when we moved out to  
24 Coggeshall.

25 Until Lee was four, we lived with his dad. The

1 marriage then came to an end. Lee moved with me and his  
2 siblings to a new home locally so that the change was  
3 not too big for the children.

4 His dad started a new relationship and moved to  
5 Wales permanently from 2006 and then marrying in 2009.  
6 He did maintain a relationship with the children,  
7 collecting them every other weekend and taking them on  
8 holiday once a year. This lasted until teenage years  
9 when for one reason or another the visits dwindled. He  
10 did still see them over the years but not as regularly.

11 From an early age, Lee was so energetic. He loved  
12 playing sports, he loved playing games in the garden,  
13 and could brighten up anybody's day with his cheekiness.

14 All our memories with him are of him being up to  
15 something, whether he was playing football, hockey,  
16 skating, climbing or even playing on the PlayStation.  
17 One memory in particular I remember fondly was going to  
18 watch Lee play for the school team, and they were winning  
19 the game, and the ball being mainly at the other end of the  
20 pitch. I remember that I looked at him in the goal, and  
21 Lee was scaled at the top of the goal as and was using  
22 the top bar as a monkey bar practising his gymnastics  
23 because he was bored.

24 He was very caring and loved by everybody. His  
25 relationship with his nieces and nephews was amazing.

1           They loved him so much.

2           Lee continued through his schooling locally in  
3           Romford. He was always a challenge due to his  
4           hyperactivity, which was useful when it came to sport.  
5           He represented all of the schools he went to in various  
6           sports, including football, running and swimming.  
7           Although he was unable to concentrate too much, he did  
8           come out with some exam results in September 2016.

9           He started college to train as a plumber. He  
10          completed year 1, then in year 2 he was given  
11          an opportunity of an apprenticeship, which unfortunately  
12          did not continue due to contract issues. This really  
13          upset him and resulted in the first signs of him  
14          starting to have issues with his confidence.

15          In early 2017 we decided it was a good time to move  
16          out of Romford so that Lee could start his second year  
17          of college in a new area. We did that and moved to  
18          Coggeshall in August '17.

19          Lee then started to attend Colchester Institute in  
20          September 2017. He nearly got to the end of his course  
21          but he was frustrated and struggling with confidence,  
22          which led him to giving up the college and leaving just  
23          before the end of his last exams. So he never received  
24          his qualifications.

25          From then on he tried to work hard, finding new jobs

1 in different places, but just a small mishap would make  
2 him leave the job. His last job he started in  
3 April 2019 at Millbank. He really seemed to enjoy it  
4 and was really happy when he was given a permanent  
5 contract in July '19.

6 From 2016 to 2019 we had various problems with Lee's  
7 mental health. Finally, in March '19, Lee knew he was  
8 struggling, so we suggested he go to the doctors. He  
9 was prescribed some antidepressants, which he started to  
10 take and was feeling better in himself, so he decided to  
11 stop the medication, stating that he was not depressed  
12 and so he didn't need them.

13 Lee then declined again in June '19. He declined  
14 terribly, which resulted in him referring himself to The  
15 Lakes. He spent four days in there and was diagnosed  
16 with emotional unstable personality disorder. He came  
17 out of hospital feeling optimistic and very positive.

18 When Lee was released from hospital, he was handed  
19 over to the community team and was told they would be  
20 contacting him to allocate him with a key worker within  
21 two weeks who would be able to find him help and  
22 therapy, and the therapy he needed to learn the skills  
23 he needed to cope with the way his head worked.

24 I chased Essex Partnership University Trust on  
25 several occasions over the next three months but no



1 contact to Lee was ever made by them.

2 Lee had spent the week before he died staying at his  
3 friend's house as the boy's parents were away on  
4 holiday. They worked together and had taken the week  
5 off as annual leave. I spoke to Lee every day.  
6 I remember that he enjoyed himself playing on quad bikes  
7 and chilling out.

8 Lee then came home on the Thursday evening and spent  
9 the weekend relaxed and chilled, and ready to go back to  
10 work on Tuesday morning.

11 On Tuesday morning, I found that Lee was not in his  
12 bed when I woke up to go and check on him. I kept  
13 calling his phone to find out where he was. The worst  
14 call ever came around 8.30 on 27 August '19 when the  
15 police officer asked to come to my house. My heart  
16 shattered there and then. I knew we'd lost him.

17 My relationship with Lee was always close. He was  
18 my baby boy. Through his teenage years we had a bond,  
19 no matter what.

20 (Pause)

21 No matter what was happening around us, with all the  
22 stresses we had, we always checked in on each other. He  
23 also had a good relationship with Gary, his stepdad. We  
24 got married in 2016, having been together since 2014.  
25 They were always friends and he never tried to be a dad

1 to him. He shared everything with me, sometimes too  
2 much, but I preferred that. There was no surprises when  
3 his friends tell me stories about the things they got up  
4 to. We were especially close in the final two years,  
5 when Charlie and Ben had both left home, so we had more  
6 time alone at home. I miss him.

7 Our family will never recover from losing Lee. Not  
8 an hour goes by without his name going through my head.  
9 I cry nearly every day, just about silly things that he  
10 should be here for.

11 (Pause)

12 Every time there's an event, I think he should be  
13 with us. He has missed out on all the stepping stones  
14 of his nieces and nephews growing up, his friends and  
15 his family, life events, and just life. He should be  
16 here with us.

17 Lee has left a massive mark in all of the people  
18 that he met in his life, and I don't think it will ever  
19 be the same without him. Lee is thought about every  
20 single day and we really wish he could have seen how  
21 many people were there for him. There were over 300  
22 people at his funeral, and countless people that had the  
23 pleasure of knowing him. Whenever we are out and bump  
24 into people that he knew before he passed, or only --  
25 sorry. Whenever we are out and bump into people that he

1           knew before he passed or only just met him, they always  
2           have a funny story to tell about him. His memory will  
3           live on forever. He was one in a million. I just wish  
4           he knew that.

5 MR GRIFFIN: Could you put up the remaining photographs,  
6           please.

7   (Pictures shown)

8           That's the final photograph.

9 THE CHAIR: Thank you very much for telling us about Lee.  
10           Thank you so much.

11   (Pause)

12 MR GRIFFIN: Thank you.

13           Chair, we'll just rearrange the table.

14   (Pause)

15           May I invite Lynne to go to the table.

16   (Pause)

17           Chair, we hear now from Lynne Breaker-Rolfe. She'll  
18           give her commemorative account about her husband,  
19           Roy Breaker-Rolfe, and she's accompanied at the table  
20           about her legal representative, Agata Usewicz.

21           On the table we have framed photographs, one is of  
22           Roy and the other is of Roy again with his  
23           grandchildren, his daughter's children. And I invite  
24           Lynne to start when she's ready.

25

1 Statement by Lynne Breaker-Rolfe about Roy Breaker-Rolfe  
2 MRS BREAKER-ROLFE: Roy, my husband, was born at Fanners  
3 Green near Chelmsford, and then when he was about four  
4 moved to Broads Green near Chelmsford.

5 Roy had a great childhood, being outside most of the  
6 time with his friends, roaming in the fields, looking  
7 for wildlife, scrumping for apples, getting up to  
8 mischief, but all good fun. Roy had a few pets,  
9 guinea pigs, and once brought home a puppy, which he was  
10 allowed to keep.

11 Roy used to love to go to Suffolk to see his  
12 grandparents who lived on a farm, again a lot of  
13 wildlife, going out with his uncles across the fields.

14 Roy's other grandparents had a small holding where  
15 he and his friend used to cycle over to help and see to  
16 the animals.

17 School was not a very happy time, being an  
18 undiagnosed dyslexic made some lessons difficult.  
19 However, when Roy left school he went to Writtle  
20 agricultural college where he gained qualifications in  
21 animal husbandry and general farming. Considering his  
22 dyslexia, this was something he was very proud of. This  
23 was something he was interested in and went to work on  
24 a local farm, which he really did enjoy.

25 I met Roy one Sunday when I was out driving around

1 with my friend and we stopped in a café for a drink.  
2 Roy was there and we immediately liked the look of each  
3 other and found we had a lot in common. Roy was  
4 a good-looking boy, he had a great big, lovely smile,  
5 quiet, and drove his beloved American Pontiac Firebird  
6 car with an amazing hooter.

7 One of my most memorable moments was when I first  
8 met Roy, we really did fall in love with each other that  
9 day. And we never looked back. A few days after we  
10 met, he told his sister he was going to marry me, and he  
11 did.

12 We soon became girlfriend and boyfriend, spending  
13 all our evenings and spare time together. We then  
14 decided we would get married after about a year. We  
15 then went on to have two children, a daughter Lynette  
16 and son Byron.

17 Roy was a lovely father to his children. We used to  
18 have a lot of caravan holidays as we had a touring  
19 caravan, so had many good times away in various places  
20 in the UK. We always had dogs that were very special to  
21 Roy. They always came on holiday with us. Christmas  
22 was a special time, us four together playing board  
23 games, which Roy and Byron always used to cheat at, much  
24 to Lynette's dismay. We used to go to country fairs  
25 a lot, showing our dogs and just enjoying the different

1 events of the day. It was a happy time.

2 We used to visit Roy's parents most Saturdays,  
3 always having the same lunch, which the kids thought was  
4 just great. We might then play cards or games in the  
5 early evening leaving with the kids in their pyjamas  
6 ready for bed at home.

7 Roy was a loving and generous son. He was always  
8 drop everything to help his father with anything he  
9 needed doing, which he carried on after his father  
10 passed away, always helping his mother with the garden  
11 and bits on the house. Roy loved his parents very much.

12 Roy was also a landscape gardener. When the  
13 children were young, Byron used to go with his dad to  
14 work a lot, which they both enjoyed. But when the  
15 children were older, his real passion was renovating  
16 property. We would buy a derelict property, live in our  
17 caravan while we got it ready to live in and then sell  
18 on. Roy renovated about 15 properties over the years.  
19 He was self-taught and gained so much knowledge over the  
20 years, it was truly amazing. We worked on the  
21 properties together, and these times are now very  
22 special memories of us being together all the time.

23 Roy's main hobby was Formula 1 racing. He always  
24 watched the races with Byron. There was always conflict  
25 over who was the best and should win, but it was all

1 good fun.

2 His other interest was his pets, particularly the  
3 dogs, who he was amazing with, and they all loved him.  
4 We also have a parrot, Jasper. We had many a laugh  
5 listening to what Roy and Byron had taught Jasper to  
6 say, some not so repeatable. Jasper still speaks in  
7 Roy's voice now telling the dogs to stop barking and so  
8 on. On occasions it catches me out, as it's like he is  
9 in the room.

10 Roy was always the first one along with our grandson  
11 in the sea, even in winter they paddled. Roy loved to  
12 be beside the sea at any time of year. We always went  
13 somewhere every weekend, country or coast, all over the  
14 country, so there are not many places we have not been  
15 to, and again I have those great memories of those times  
16 spent together.

17 One of our most memorable Christmases was spent in  
18 Goathland, North Yorkshire. We arrived on  
19 Christmas Eve, went to church for a candlelight carol  
20 service. When we came out it had been snowing. It  
21 snowed all night and was about 4 foot of snow. The  
22 ploughs were out. Roy was in his element, playing in  
23 the snow with the dogs and kids, helping people who  
24 needed a tow out. That time will always remain one of  
25 the happiest in my memory.

1           Roy had a happy personality. He was loyal, kind and  
2           generous. Family meant a lot to him, spending as much  
3           time as he could with the family. It was also very rare  
4           to see Roy down in the dumps. It would be something  
5           major to see him like that. Always pleased to see our  
6           friends, parents and his sisters. He was the sort of  
7           person you cannot stay mad at very long, things were  
8           soon back to normal, with no grudges held.

9           As Roy got a bit older his anxiety became more  
10          apparent, so we adjusted our life to make him feel more  
11          secure. I believe this began after his father passed  
12          away. He then had a very good friend pass away and his  
13          brother-in-law, all in a short space of time. This all  
14          took some time to come to terms with, which resulted in  
15          poor sleep and depression. Roy's condition deteriorated  
16          hugely over the last year of his life, trying to take  
17          his own life several times.

18          The last few years, we, I asked for help many times  
19          from various hospitals. No one listened to what I had  
20          to tell them, they just took what Roy said as truth.  
21          They could not even recognise a mental health crisis and  
22          just bumped Roy into A&E on his own. At no time did  
23          anyone listen. In the end, he was sent to hospital in  
24          Norfolk that now just works for the NHS taking mental  
25          health patients. I had no information on him or what



1 had happened when Roy arrived there about 10.30 pm,  
2 no one bothered to listen to what I had to say, instead  
3 taking the word of a paranoid psychotic person who only  
4 a few hours ago could not even speak.

5 There was no help out there for him. This was  
6 particularly distressing to our family as we were the  
7 ones trying to look after him, which was not an easy  
8 task never knowing where Roy was or what he was doing.  
9 The NHS failed Roy and failed our family in the worst  
10 possible way.

11 (Pause)

12 Roy passed away 21 February 2021. He was 63. This  
13 was unexpected and has had a massive impact on all our  
14 family. Our future plans for retirement have now all  
15 disappeared, my life completely changed in a heartbeat.  
16 I am a different person and cannot still believe what's  
17 happened.

18 Lynette and Byron are equally distraught at losing  
19 their dad. They both find it so hard to talk about what  
20 happened, as the terrible last 18 months of his life  
21 overclouded all the good memories. In the very odd  
22 conversations we have about their dad, it always ends in  
23 tears, so sometimes the subject is changed as it is too  
24 painful to remember he is still not here. Byron still  
25 cannot get used to it only being me when I visit, as

1 he's used to us always going everywhere together and  
2 still expects to be both of us.

3 Roy and I lived and worked together. We were always  
4 with each other, enjoying each other's company nearly  
5 24 hours a day, and that was how we liked to live. We  
6 had many plans for the future. Roy loved life and his  
7 family. Roy's elderly mother has found his passing very  
8 difficult to come to terms with and understand and, of  
9 course, it was a terrible shock to her, his sisters and  
10 extended family and our friends who miss him also.

11 I know Roy would like to be remembered to be the  
12 kind, loyal, generous person he was. Roy would not want  
13 to be remembered for his illness, but what he was like  
14 before he became ill: fun-loving, kind, loyal, he is the  
15 love of my life, my best friend, he always will be and  
16 never will be forgotten.

17 I also wanted to share some memories and thoughts of  
18 Roy from friends and family, so I have included these.

19 MS USEWICZ: This is from Barbara and Ron, who are friends.

20 We've known Lynne and Roy a very long time, way back  
21 to when we had our sons within six months of each other  
22 40 years ago. I remember when Byron, their son, was  
23 born and how excited Roy was as he gave us the news when  
24 Lynne had given birth. Their family was complete.  
25 Lynette and Byron were truly loved and cherished and had

1 a great childhood with Lynne and Roy.

2 Roy had the kindest soul, would help anyone out and  
3 he absolutely adored Lynne. She encouraged him to have  
4 the confidence to do anything he wanted to succeed in  
5 life, which is how they came to start buying and  
6 renovating properties. He was good at it and it helped  
7 his mental health to have something manual to get stuck  
8 into.

9 We noticed a few years ago that Roy seemed more  
10 nervous and anxious for some reason. Of course we now  
11 know he got quite bad, but at the time he tried to hide  
12 it from everyone, except his close family, as he was  
13 worried about admitting it, somehow feeling ashamed of  
14 it, as other people would not understand the nature of  
15 the illness.

16 However, we would get together every few weeks for  
17 lunch or barbecues in the summer and had some really  
18 good times. He was a great joker and liked to tell us  
19 funny stories. When Lynne had broken her ankle badly  
20 and was very immobile for a year, he looked after her.  
21 And they had just started to renovate another house but  
22 he managed that and was doing all of Lynne's care at the  
23 same time. He was just a lovely man who lived for his  
24 family.

25 He loved his grandchildren and spending time with

1           them and he was a great animal lover. They were never  
2           without a dog and used to walk the dogs for miles across  
3           the fields where they lived.

4           Roy and Lynne loved to travel around the country  
5           seeing different places and just loved to be together.

6           Accepting that Roy was driven to suicide has been so  
7           hard for all his family and friends and, of course, his  
8           wife Lynne. She says she constantly feels guilt that  
9           she could not help him enough, but she has tried every  
10          avenue she could to get him some help. And, of course,  
11          she could not confide in us about what was going on with  
12          Roy's mental health as he did not want anyone to know  
13          that he was not coping. He was the love of her life.  
14          They were soulmates. The impact on her has been  
15          enormous, the life they had planned and saved for in  
16          retirement has been ripped away and I know that she  
17          feels she has no proper purpose in life herself now.

18          If it was not for her son, his wife and her  
19          daughter, I really believe that she might take the same  
20          path as Roy, but she would not want her family and  
21          friends to go through what she has had to experience, so  
22          she tries to be brave and carry on, but I know that  
23          every day is a struggle without Roy. I hope that in the  
24          future she will manage to find some peace and know that  
25          everyone around her is so proud of how she's actually

1 managing to function, even though what happened with Roy  
2 is constantly playing like a video on repeat in her  
3 head, and I know that at last Roy's pain has gone and  
4 that one day he will meet Lynne again and they will be  
5 together again at last. RIP Roy.

6 Then this is from Dena, her friend.

7 Roy and Lynne had a very special connection and  
8 love. I often said I have never seen another couple who  
9 are so truly devoted to each other. Not many people are  
10 lucky enough to experience this true connection and have  
11 such an amazing bond and love with someone as they did.

12 I feel so very lucky and honoured that I had the  
13 great pleasure of having both you, Lynne, and Roy in my  
14 life. You both became my friends after Lynne came to  
15 work for me with my children's nurseries. They became  
16 friends first and foremost. Above all else, please know  
17 the huge admiration I have for Roy in so many ways, not  
18 only a friend, but Roy used to tend my garden and keep  
19 it nice and neat. It took me a long time to let another  
20 person tend the garden.

21 He loved my coffee bean machine, I always had a cup  
22 waiting for him. The machine starts on its own  
23 sometimes now, I'm sure it's him nudging me for  
24 a coffee.

25 Roy became a very valued friend and someone who came

1 to help me out when it was needed. An instance is  
2 one year when we had snow and I was struggling to get some  
3 salt to take to my children's nursery to put down in the  
4 car park as it was iced over. Roy immediately came to  
5 my rescue telling me to stay at home, he would go and  
6 get the salt and lay it, which he did.

7 My dog, Peanut, absolutely adored Roy. Peanut got  
8 very excited when he saw Roy as he knew it was playtime  
9 and a walk. Roy was without doubt one of Peanut's  
10 favourite people of all time. He was kind and  
11 understanding to both my pets, Peanut and Belle the cat.

12 Roy would at the drop of a hat take Peanut home for  
13 the weekend if I needed to be somewhere, which was so  
14 much enjoyment for him, as Lynne and Roy always went out  
15 on a journey at the weekends taking Peanut with him,  
16 stopping at the pub for lunch, and then they all enjoyed  
17 a nice walk.

18 I can only imagine the hell that Lynne is going  
19 through trying to deal with the loss of someone who was  
20 her whole world. Words cannot come close to helping or  
21 supporting Lynne through this difficult time. Roy was  
22 a very special person who will be always be in his  
23 family's hearts. His light will always continue to  
24 shine. To all those who knew him through treasured  
25 memories these will live on and never fade.

1           With much love to Roy, Lynne and family.

2           And then we have an account from Lynette, Roy's  
3 daughter.

4           My dad was a happy person, who loved to joke around.  
5 He told me many tricks he used to play on my poor nan  
6 growing up. I could not have asked for anything more,  
7 as you gave me your time, love and support growing up.  
8 You were the best dad. We would play a lot of games  
9 when we were children which he always had to win, and he  
10 always did as he would cheat, which used to cause  
11 an argument.

12          Dad used to take us all out on days out. He always  
13 made sure it was a fun and full day of exploring. The  
14 earliest one I can remember, he took us to London for  
15 the day. Dad drove, and he took us to all the sites.  
16 It was a great day, I still have the photos.

17          Also we went on lots of holidays. We all liked  
18 going to Cornwall, exploring the beaches and caves and  
19 castle trips. In the boat on the boating lake, dad  
20 rocking the boat so I was scared I would fall in. He  
21 always played tricks on us.

22          Dad was really proud of my three sons, his grandsons  
23 Josh, Callum and Owen. He used to call in on his way  
24 home from work when the boys were young to see us, and  
25 we spent hours in McDonald's in the play area. We used

1 to meet at my nan's, then walk up to the woods so the  
2 boys could make a den. We then had a picnic. My dad  
3 loved to do this with my boys. The boys were always  
4 excited on going on these trips.

5 I have lots and lots of good memories of holidays,  
6 days out. We used to visit my nan and grandad's every  
7 Saturday. There was a lot of nice memories made on  
8 those days, playing games, helping my nan with the  
9 dinner.

10 I cannot find the words to say how much my dad is  
11 missed. There is nothing that can fill that hole. My  
12 dad passing away has left us all devastated. We will  
13 always love and miss him. He will never be forgotten.  
14 He was such a big part of my life.

15 I miss you, dad. With lots of love, Lynette.

16 This is the final statement.

17 This is my statement to tell you just how lovely  
18 Roy Breaker-Rolfe was, by Marie Findlay, his  
19 daughter-in-law.

20 I honestly don't know where to begin or how to put  
21 into words how much of a hole in our hearts there is.  
22 I have been with Roy's son for nearly 21 years and we  
23 have two wonderful children aged 13 and 15, so I knew  
24 Roy for 18 years and heard lots of wonderful stories of  
25 Byron and his dad.



1           Byron isn't able to write this statement because he  
2           can't even say the words that his dad has died. It's  
3           raw since the day, nothing will heal him.

4           When growing up, Byron told me he spent so much time  
5           with his dad. Byron struggled and school was an issue  
6           for him and social anxiety, so his dad supported him and  
7           took him to work with him some days. He was taught so  
8           many life skills and had his dogs by his side. He tells  
9           me he had the best childhood, and being with his dad got  
10          him through it all.

11          Roy was such a hands-on person and had so many  
12          skills when it came to gardening, building skills and  
13          working on cars. All of these were taught to Byron and  
14          now he can take his hand to most things. They bonded so  
15          much, spending all that extra time together and working  
16          on projects together.

17          There were so many stories of him messing around and  
18          playing jokes, so laid-back and a family man. Since  
19          I have known him, I can say the same. Every time we  
20          went round to their house, Byron would be warned not to  
21          start or mess around and wind us up. Lynne would say  
22          the same to Roy, because we knew what we were like when  
23          they got together. This never lasted, and within  
24          minutes they'd be messing around and making jokes. Roy  
25          would always find the sweets and chocolates before

1 dinner, and keep asking when dinner's ready, both  
2 pretending that they're starving. Then, when my boys  
3 grew up, our youngest would join in too. We joked that  
4 you could tell that they were Breaker-Rolfes, they were  
5 just like peas in a pod.

6 We used to laugh so much, and Christmas times were  
7 fun, playing games, and Roy always cheated at games. He  
8 didn't like to lose, even against the kids. So  
9 competitive, but in a fun way. He was like a little  
10 child around his grandchildren and loved playing with  
11 them. I remember one Christmas we played beer pong. We  
12 didn't have beer so I think it was vodka or gin. But,  
13 because of their competitiveness, Byron and Roy both  
14 wanted to win, but all they won were headaches.

15 On days out he was the first to offer treats to his  
16 grandkids and always pulled out a handful of change. No  
17 matter what, he had cash all the time. The boys always  
18 knew to go up to granddad because he was such a softy  
19 with them and loved spoiling them.

20 One holiday we all went to Norfolk and hired a boat  
21 for the day. I remember Roy was the first to drive it,  
22 all excited. All four boys loved it and they were in  
23 their element together, while me and Lynne sat at the  
24 back watching. Such an amazing day.

25 When we were at the beach, it was Roy who took the

1 kids into the sea for the first time. Our son was in  
2 his element with his boogie board and grandad taking him  
3 out so far, he thought it was amazing.

4 Roy had this huge love of all animals. He would  
5 take in any wild animals that were injured and nurse  
6 them back to health. This had passed on through the  
7 generations. I have been told so many stories of how  
8 they helped ducks, partridges, birds and anything that  
9 needed help. They also had dogs their whole life and he  
10 was so committed to them. They lived the best life,  
11 going to work with him every day. Byron had pet rats,  
12 finches, ferrets, et cetera, and since we got together  
13 this has all passed to me and we have our own little zoo  
14 now.

15 About five years ago I was messaged and asked to  
16 take on some abandoned chickens, and it was Roy who  
17 convinced us. He loved coming to see our pets too, and  
18 we have their African grey parrot living us with,  
19 Jasper, so we still hear Roy's voice every day through  
20 him. He was taught to burp and make funny noises, as  
21 well as so much more. When Lynne leaves our house, he  
22 always says "See you later" in Roy's voice. It's lovely  
23 to still hear him and the humour that was always there.

24 Heaven gained an angel in Roy, a much loved and  
25 missed dad and grandad.

1 MR GRIFFIN: Could you play the short video, please.

2 (Video played)

3 And could you put up the photographs.

4 (Photographs shown)

5 That's the final photograph.

6 THE CHAIR: Thank you very much for sharing that account,

7 Mrs Breaker-Rolfe. Thank you.

8 MR GRIFFIN: Chair, that's the last account for this

9 morning, so can we reconvene at 2 o'clock, please.

10 THE CHAIR: 2 o'clock.

11 (12.00 pm)

12 (The short adjournment)

13 (2.02 pm)

14 MR GRIFFIN: The next commemorative statement will be given

15 by Lisa Morris, and it's about her son, Benjamin Morris,

16 or Ben. May I ask that the photo is put up, please.

17 (Photograph shown)

18 And, Lisa, please start whenever you're ready.

19 Statement by Lisa Morris about Ben Morris

20 MS MORRIS: Thank you.

21 Ben was just 20 years old and a voluntary inpatient

22 at the Linden Centre in Chelmsford when he died. Just

23 a few months before Ben was admitted into the Linden

24 Centre, he had finally been diagnosed with attention

25 deficit hyperactivity disorder, ADHD. He possibly also

1 had temporal lobe epilepsy.

2 ADHD is a neurodevelopmental disorder characterised  
3 by executive dysfunction occasioning symptoms of  
4 inattention, hyperactivity, impulsivity and emotional  
5 dysregulation that are excessive and pervasive.

6 Looking back now, I can see that Ben had so many of  
7 the symptoms of ADHD, which include being unable to sit  
8 still, especially in quiet and calm surroundings, acting  
9 without thinking, little or no sense of danger -- Ben  
10 had none -- being unable to wait their turn, having  
11 difficulty organising tasks, being unable to stick to  
12 tasks that are tedious or time-consuming, and appearing  
13 to be unable to listen to or carry out instructions.

14 As is known, the symptoms can cause significant  
15 problems in life such as underachievement at school,  
16 poor social interaction with other children and adults,  
17 and problems with discipline. As is stated on an NHS  
18 website:

19 "Living with ADHD can be difficult as the symptoms  
20 can make everyday activities more of a challenge. It is  
21 important to get the support you need to understand and  
22 cope with your own child's condition. The impulsive,  
23 fearless and chaotic behaviours typically of ADHD can  
24 make everyday activities exhausting and stressful." [As  
25 read]

1           Despite having all these symptoms, and more, from  
2           a young age, Ben was never assessed, so this diagnosis  
3           was missed. Ben saw so many doctors and specialists,  
4           but unfortunately he was turned away on every occasion  
5           with a diagnosis of bad behaviour, a bit of a chip on  
6           his shoulder, and I was also told he needs a bit of  
7           anger management.

8           I recall that during one of the appointments  
9           I attended with Ben, when he was crying out for help, he  
10          was asked about his financial situation. When Ben  
11          explained that he was struggling financially because he  
12          was finding it hard to manage or cope with his symptoms  
13          and to get a job, he was told that if he was looking for  
14          a diagnosis just so he could claim benefits, then that  
15          wasn't going to happen. I saw how crushed Ben was by  
16          this response. He was trying to get help with his  
17          condition, not with benefits.

18          Ben was admitted into the Linden Centre on  
19          8 December 2008. As a family, we were initially  
20          relieved as we believed that finally Ben would now get  
21          a proper diagnosis and the help and treatment that he  
22          needed so desperately and had waited for for so long.

23          Sadly, this wasn't to be. Ben's physical and mental  
24          health deteriorated rapidly. He lost a lot of weight  
25          and always seemed very heavily medicated. He died

1           20 days later whilst under the care of North Essex  
2           Partnership Trust, known now as Essex Partnership  
3           University NHS Trust, EPUT.

4           On 29 December, around 9 am, the doorbell rang. Two  
5           police officers were standing at my door. Their  
6           demeanour was quite cold and felt quite hostile. They  
7           asked me to confirm my name, and when I did, they asked  
8           if they could come in. Once they were in the lounge,  
9           they told me that my son Ben had been found dead in his  
10          room around 9 pm the night before. They delivered this  
11          news in a very cold and pragmatic manner. They did not  
12          offer any condolences or say anything that might be  
13          constructed as kind or sympathetic. They said that that  
14          was all they could tell me, and that I would be hearing  
15          from the Coroner's Office. My legs just gave way, and  
16          my partner, then, had to catch me. The two police  
17          officers just left.

18          I felt like something had physically hit me, and so  
19          hard that I thought I had died too. The instant pain,  
20          shock and disbelief was so intense. Then the question:  
21          how? It was screaming in my head: how could this be  
22          when staff had told me just half an hour before the time  
23          Ben had been found that they were watching him closely  
24          while he was waiting for the doctor to come, as he had  
25          been asked to be discharged?

1           I can't begin to describe the severity of the pain,  
2           hearing that my beautiful boy, just 20 years old, had  
3           been found dead in his room. He was in hospital, which  
4           I thought was the safest place he could possibly be.

5           I felt like I had woken up in a different world and  
6           that I could never ever go back to my old one.  
7           I couldn't sleep, I couldn't eat, and I even felt as  
8           though I could not breathe properly. I was physically  
9           sick every day, sometimes several times a day, for  
10          around four years after Ben died. Even now, although  
11          the pain is somewhat dulled, remembering the  
12          circumstances surrounding his premature death is a daily  
13          torture that I don't think I will ever be free from.  
14          I still suffer now from horrific nightmares.

15          Ben was the most beautiful, healthy and happy baby.  
16          He had hair like silk, the biggest brown eyes, and  
17          eyelashes like feathers. He was so full of life and so  
18          full of fun. His smile, along with his beautiful white  
19          teeth, would make my heart flip.

20          He had so many plans for his life. He wanted to be  
21          a personal trainer, and he loved boxing, as he said it  
22          helped him cope with how he was feeling. Ben truly was  
23          one in a million, and my life will never be the same  
24          without him in it.

25          I'm so proud of Ben. He never gave up, he never



1 gave in, and he never sat around feeling sorry for  
2 himself. He was determined, with or without help, to  
3 beat this.

4 Every day I wonder how Ben's life would be if he was  
5 still here today. I'm sure it would have been so  
6 different for him if he had only been properly diagnosed  
7 and given the right care and treatment.

8 Ben leaves a beautiful daughter who was just two and  
9 a half when he died. He was an amazing dad and he loved  
10 her with all his heart. They had a very special bond,  
11 always laughing and always dancing together. Like any  
12 dad, he wanted to give her the world and the best life  
13 he possibly could.

14 Ben had so much to live for and so much to look  
15 forward to. His death was premature, unnecessary and  
16 preventable.

17 I'd like to share this poem, because it describes so  
18 well what it was like to live in Ben's world:

19 "Take my hand and come with me,  
20 I want to teach you about ADHD.  
21 I need you to know, I want to explain,  
22 I have a very different brain.  
23 Sights, sounds, and thoughts collide.  
24 What to do first? I can't decide.

25

1           Please understand I'm not to blame,  
2           I just can't process things the same.

3           Take my hand and walk with me.  
4           Let me show you about ADHD.

5           I try to behave, I want to be good,  
6           But I sometimes forget to do as I should.

7           Walk with me and wear my shoes,  
8           You'll see it's not the way I'd choose.

9           I do know what I'm supposed to do,  
10          But my brain is slow getting the message through.

11

12          Take my hand and talk with me,  
13          I want to tell you about ADHD.

14          I rarely think before I talk,  
15          I often run when I should walk.

16          It's hard to get my school work done,  
17          My thoughts are outside having fun.

18          I never know just where to start,  
19          I think with my feelings and I see with my heart.

20

21          Take my hand and stand with me.  
22          I need you to know about ADHD.

23          It's hard to explain but I want you to know,  
24          I can't help letting my feelings show.

25          Sometimes I'm angry, jealous or sad.

1 I feel overwhelmed, frustrated and mad.  
2 I can't concentrate and I lose all my stuff.  
3 I try really hard but it's never enough.  
4  
5 Take my hand and learn with me,  
6 We need to know more about ADHD.  
7 I worry a lot about getting things wrong,  
8 Everything I do takes twice as long.  
9 Everyday is exhausting for me ...  
10 Looking through the fog of ADHD.  
11 I'm often so misunderstood,  
12 I would change in a heartbeat if I could.  
13  
14 Take my hand and listen to me,  
15 I want to share a secret about ADHD.  
16 I want you to know there is more to me.  
17 I'm not defined by it, you see.  
18 I'm sensitive, kind and lots of fun.  
19 I'm blamed for things I haven't done.  
20 I'm the loyalist friend you'll ever know,  
21 I just need a chance to let it show.  
22  
23 Take my hand and look at me,  
24 Just forget about the ADHD.  
25 I have real feelings just like you.

1           The love in my heart is just as true.  
2           I may have a brain that can never rest,  
3           But please understand I'm doing my best.  
4           I want you to know, I need you to see,  
5           I'm more than the label, I am still me."  
6 MR GRIFFIN:   Would you put up the further photographs,  
7           please.  
8                                 (Photographs shown)  
9           That's the final photograph.  
10 THE CHAIR:   Thank you so much, Ms Morris.  
11 MS MORRIS:   Thank you.  
12 MR GRIFFIN:   Thank you very much.  
13           We'll just set up the table for our next account.  
14                                 (Pause)  
15           Is the speaker on the table?   May I ask Ralph to  
16           come up to the table.  
17                                 (Pause)  
18           We will hear now Ralph Taylor give his commemorative  
19           account about his wife, Carol Taylor.  He's accompanied  
20           by his legal representative, Dr Achas Burin.  
21           May I just ask, Ralph, can you hear me all right?  
22 MR TAYLOR:   I'm hearing you well, thank you.  
23 MR GRIFFIN:   We've put up a photograph.  Please start  
24           whenever you feel comfortable to do so.  
25 MR TAYLOR:   Yes.  I'll start now, then, shall I?

1 THE CHAIR: Please do.

2 Statement by Ralph Taylor about Carol Ann Taylor

3 MR TAYLOR: Carol was a much loved wife, mother,  
4 grandmother, sister, aunt, cousin, friend and teacher,  
5 who was gifted in so many crafts and touched so many  
6 lives so positively. I, Ralph, as her widower, am  
7 making this informal statement in relation to her life,  
8 and it's poignant that the first day of this Inquiry,  
9 9 September 2024, would have been Carol and my golden  
10 wedding anniversary.

11 Carol was born in Barts Hospital on 25 March 1948,  
12 the first child of Harry and Sylvia King and the eldest  
13 of three, John and Sharon followed. The family lived in  
14 the area around Great Ormond Street Hospital during her  
15 happy childhood. Her lifelong friend, Susan, recalls:

16 "I have lots of very happy memories of my childhood  
17 with Carol. Our nans lived in the same house, and we  
18 were always together. We went to St Leonard's Nursery  
19 in Corams Fields. Carol had the peg with the picture  
20 of the doll on it and I had the teddy bear. I remember  
21 always wanting the doll. One day Carol and I were  
22 chasing each other around the cloakroom. I fell and hit  
23 my head and a massive egg-like bump came up on my  
24 forehead. I was crying, Carol was crying, we couldn't  
25 be consoled and our mums had to come and pick us up."

1 Susan also records that:

2 "We went to Saturday morning pictures and were the  
3 King's Cross Grenadiers, if you got up on stage and sang  
4 before the film you got a big bag of sweets. Carol and  
5 I would get up every week and sing April Love until they  
6 got fed up with us, called us over one day and said we  
7 had to give someone else a chance, so Century  
8 King's Cross lost its two best singers."

9 Carol had a happy childhood, although her parents  
10 remarked that she was always strong-willed. She went to  
11 Haverstock comprehensive school and was in the grammar  
12 stream. She didn't achieve the academic results that  
13 she might have done, possibly because she was anxious  
14 about being tested in any circumstance, which later  
15 included taking her driving test, which she passed on  
16 the fourth attempt. However, she persuaded her father  
17 to buy a typewriter on which she self-taught herself  
18 touch typing so as to expand her employment  
19 opportunities. She was always self-driven, believing  
20 that you can achieve anything you put your mind to.

21 Her first job on leaving school was working in  
22 a bookshop near the British Museum, where she combined  
23 serving in the shop with working in the office. She  
24 gave most of her first pay packet to her mother, who was  
25 a skilled dressmaker, and asked that she have her

1 clothes made so that she had an individual style.

2 After a number of typing jobs, Carol started working  
3 as a secretary in a solicitor's office, which is where  
4 we met. I was a young rather naive newly qualified  
5 solicitor and noticed a pretty secretary wearing  
6 an intriguingly short crochet dress. We sometimes  
7 chatted, and although she didn't work for me  
8 specifically, she sometimes did if I was busy. One day  
9 she handed me a bill for the work she had carried out,  
10 the price of which was a drink after work. I took her  
11 for that drink, and we immediately hit it off, and  
12 within five months of our first date we bought and moved  
13 into a house together, an early example of Carol being  
14 impulsive and getting what she wanted.

15 I was swept off my feet. Looking back, the true  
16 cost of that bill was substantially more, but it was  
17 worth paying every penny.

18 Our relationship was based on mutual attraction and  
19 strong shared family values, influenced by her parents,  
20 whom she adored, and my own, all of whom were in time  
21 able to celebrate their respective golden wedding  
22 anniversaries with us. From this foundation came our  
23 own children, David, Ann and Jane.

24 Carol's working life was put on hold until Jane was  
25 about two. Carol thought about becoming a teacher. She

1           went to enquire, at what was then North-East London  
2           Polytechnic, what qualifications she would require, but  
3           was told that as a mature student she could be  
4           immediately accepted.

5           Leaving Jane at nursery school, she cycled to  
6           college to study and blossomed in that environment.  
7           After she graduated, she then embarked on  
8           an unbelievable career within teaching, a career that  
9           took her from a class teacher at Becontree Heath and  
10          other schools via a deputy headship at Cleveland School  
11          to a headship at the Leys School, Dagenham, all within  
12          ten years of graduation.

13          Carol's friend Linda, a fellow teacher, comments in  
14          relation to her headship that Carol was very popular  
15          with the staff, parents and children. She completely  
16          transformed the school, creating a wonderful stimulating  
17          learning environment for the children. She was really  
18          involved with the pupils, spending as much time as  
19          possible in class, and leading them in drama and  
20          singing, as well as extending their knowledge of the  
21          environment. Out of her own pocket, she bought  
22          a variety of animals, including hamsters, guinea pigs,  
23          snakes and insects, so that the children could  
24          experience caring for them.

25          Initially, during the holidays, these animals had to



1 be kept at home, and Jane remembers trying to recover  
2 the escaping stick insects. Carol was responsible for  
3 overseeing and managing the expansion of the school from  
4 a nursery/infant school to a full junior one, all the  
5 time spending as much time with children as possible and  
6 leaving administration matters to be done outside  
7 teaching term times.

8         Alongside her teaching career, Carol was a mother,  
9 primarily responsible for rearing and guiding and  
10 leading our children during their own childhood and  
11 schooling. One main advantage of her being a teacher  
12 was in the school holidays where she devoted more time  
13 to them.

14         Overall as a family we tried to involve our children  
15 in activities such as cubs, scouts, brownies, guides,  
16 dancing, gymnastics and fishing clubs. Carol was a cub  
17 leader. And, as a family, we travelled to Denmark on an  
18 exchange visit for Ann's gymnastic club.

19         Pets were always part of our family life, with  
20 a succession of cats over the years, rabbits,  
21 guinea pigs, gerbils, hamsters, birds, tortoises,  
22 terrapins, fish and latterly dogs.

23         We enjoyed regular visits to parks, museums and zoos  
24 as well as family holidays, initially in my parents'  
25 caravan in Pevensey Bay, and then renting out cottages

1 in Devon, Cornwall and Pembrokeshire, until the vagaries  
2 of the British weather tempted us further afield.

3 The wider family were very much in our lives,  
4 centring around our parents, and including siblings and  
5 subsequently their partners and children, and Carol was  
6 pivotal in this. For many years she and I hosted family  
7 gatherings, particularly around Christmas, where  
8 attendance at the Boxing Day lunches increased in size  
9 year by year. They are still remembered by the wider  
10 family, and in recent years Jane has taken over the role  
11 of hosting the Boxing Day lunches.

12 After Carol retired from teaching, she wondered what  
13 she might do, and I told her to enjoy the benefits of  
14 the grandchildren when they came along, which they did  
15 like buses, with Lauren, Alex, Angelique, Miles and  
16 Scarlett being born within five years. Carol doted on  
17 them and loved to see them whenever she could, nanny  
18 Carol sitting with them encouraging them to express  
19 themselves, creating artwork together, and never being  
20 critical of their efforts, although they understood  
21 there were boundaries not to be crossed. They could and  
22 did have fun and for five consecutive years we took all  
23 five of them with us to Centre Parcs for a week, where  
24 activities were facilitated, shared and enjoyed.

25 One day after reading -- sorry, one day after

1 watching the film Mamma Mia, Carol decided to emulate the  
2 character played by Julie Walters, by climbing on the  
3 table to sing "If You Change Your Mind" and nearly  
4 falling off, providing a memorable experience.

5 During this time, Carol developed her skills in arts  
6 and crafts, initially holding classes herself from home.  
7 When we moved to Buckhurst Hill, she joined classes for  
8 pottery, at which she excelled, as well as china  
9 painting, mosaics, découpage, knitting, crocheting and  
10 jewellery making.

11 There were also Carol's collecting skills about  
12 which there was something almost obsessional. Most  
13 people start a collection with one or two items. Not  
14 Carol. Whether it be ducks on the wall, Toby jugs or  
15 dolls' houses, there had to be a more or less complete  
16 set immediately. Once complete, the collection might be  
17 retained or passed on to our friend David for him to  
18 sell in his antique shop, and another collection  
19 started.

20 When as a family we met with a celebrant for Carol's  
21 funeral and he asked what interests she had, he was  
22 deluged with widespread and varied examples like rabbits  
23 being pulled out of a bottomless hat. Carol had been in  
24 the St John's Ambulance Brigade as a teacher, was  
25 an accomplished cook, trained in cordon bleu cooking,

1 who enjoyed hosting dinner parties, she sang in an adult  
2 choir, kept bees and made honey, tried to play the  
3 piano -- three pianos purchased and sold -- tried  
4 playing the guitar, was a parish councillor, member of  
5 both the National Trust and the RHS. We regularly  
6 visited the theatre, ballet, cinema and restaurants  
7 together.

8 We travelled widely, to the USA a number of times,  
9 Thailand, Goa, South Africa, Singapore and throughout  
10 Europe. In Singapore, Carol accompanied me four times  
11 on business trips, mostly staying in Raffles Hotel,  
12 where she enjoyed the facilities while I worked.

13 One might wonder how it is possible for one person  
14 to have done so much and touched so many lives so  
15 positively, but that was Carol. Her friends variously  
16 described her as unforgettable, special, amazing,  
17 talented, impulsive, loving and very loyal.

18 Someone once asked me if I believed in God, and  
19 I replied that I did and I was married to her. Although  
20 this was said partly in jest, it was partly true, as in  
21 my way I worshipped her. Without her and my children  
22 and grandchildren, my life would have been empty and  
23 unfulfilled. I have to go on, as Carol would have  
24 wanted me to do. I could not do so without the support  
25 of my family and friends.

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(Pause)

Suffering from mental health issues is cruel. To the outside world, you may appear normal, but inside your head your thoughts are churning around and logic disappeared.

In 2012/13, Carol had her first serious mental health episode. She was diagnosed as suffering from recurrent depressive disorder, and after being treated with appropriate medication, her condition stabilised for about ten years.

By November 2022, following a series of joint replacements, which progressively reduced her mobility, and increasingly debilitating associated conditions, Carol's mental health started to be affected. This worsened during a cruise to Iceland in March 2023 to see the northern lights, which Carol regarded as the trip of a lifetime. Carol developed pneumonia and had to be taken off the ship in Reykjavík, and to a hospital. There she was also diagnosed with diabetes. She had to stay in hospital until she could be repatriated by air after three weeks.

On her return, Carol's mental condition steadily deteriorated and she recognised that she needed psychiatric help, which was unfortunately not forthcoming.

1           On 28 June, frustrated and in despair, she took  
2           an overdose of her depression medication. This was  
3           a classic cry for help, as immediately after she took  
4           the overdose she telephoned my younger daughter, Jane,  
5           to tell her what she had done. I was in the house at  
6           the time and arranged for Carol to be taken to A&E.

7           She was transferred to St Margaret's Mental Health  
8           Unit in early July. There she proved resistant to  
9           treatment, as she had done back in 2013, and had also  
10          experienced difficulties in eating and drinking, which  
11          resulted in a significant weight loss. ECT was  
12          eventually recommended, but never administered.

13          My daughter Jane and I visited Carol on the evening  
14          of 20 November 2023, when although clearly still unwell  
15          physically and mentally, she seemed a little brighter.  
16          By the time we left, she had agreed to have her hair  
17          cut, which she hadn't had done since she was admitted,  
18          and also to have new clothes bought for her, since her  
19          existing ones were far too loose, because of weight  
20          loss.

21          We were, therefore, totally shocked to receive  
22          a phone call in the early hours of 21 November 2023 that  
23          Carol had passed away suddenly and unexpectedly. The  
24          shock seemed to be shared by the staff when my daughters  
25          and I came to view Carol's body. It was only when

1 I read the post-mortem that I became concerned about  
2 Carol's death.

3 Carol's care was entrusted to EPUT. We as a family  
4 considered that EPUT's primary responsibility was to  
5 preserve and protect Carol's life, and they appeared to  
6 have failed to do this.

7 The impact of Carol's death has fallen heavily on  
8 both family and friends. I have been deprived of my  
9 soulmate of over 50 years. I was diagnosed with stage 4  
10 melanoma in November 2018. I didn't expect to be here  
11 now. I have been fortunate to be treated by  
12 immunotherapy and to have been cancer-free for over  
13 three years.

14 It is cruelly ironic that as my health has improved  
15 over the past few years, Carol's declined. I believe  
16 that Carol would have recovered her physical and mental  
17 health, had she received timely and effective treatment.

18 Carol's children, her grandchildren and wider family  
19 have all been deprived of Carol's continuing love,  
20 guidance and support. This is particularly true for  
21 those of them who also suffer from mental health  
22 conditions and for whom her support was pivotal and  
23 irreplaceable.

24 Carol's death has left a huge and unfillable hole in  
25 the lives of so many.

1 MR GRIFFIN: That's the end of the statement.

2 THE CHAIR: Thank you very much for letting us hear about  
3 your remarkable wife. Thank you.

4 MR GRIFFIN: Chair, it's time for our break. Could we say  
5 that we will be back at 3.10.

6 (2.38 pm)

7 (A short break)

8 (3.10 pm)

9 (Proceedings delayed)

10 (3.14 pm)

11 THE CHAIR: Thank you.

12 MR GRIFFIN: The final account the Inquiry is receiving in  
13 this September hearing is from Robert Wade, and it's  
14 about his son Richard Wade, and Robert is accompanied  
15 today by his wife, Linda, and by his son, Richard's  
16 brother.

17 Could the photograph go up, please, and please start  
18 when you're ready.

19 Statement by Robert Wade about Richard Wade

20 MR WADE: Okay, thank you very much.

21 I'm here to speak on behalf of my son, Richard Wade.  
22 Richard was born on 13 April 1985 and he died on  
23 21 May 2015.

24 What I say is in two parts. The first part shall be  
25 the journey that we as a family took to get here, or



1 parts of that, and also some general views on the  
2 direction of the Inquiry as we have seen it in our  
3 efforts over many years; and the second part shall then  
4 be a commemorative statement on my son, Richard.

5 After much campaigning and following the Public  
6 Administration and Constitutional Affairs Committee,  
7 PACAC, meeting of 15 October 2019, we were told that  
8 a statutory public inquiry into Richard's death would  
9 not take place, there being two specific reasons: one,  
10 such inquiries do not happen for single numbers; and,  
11 two, the problems needed to be more systemic in nature.

12 With yet further assistance from our MP,  
13 James Cartlidge, we secured an independent inquiry into  
14 Richard's death following his raising a Friday  
15 adjournment debate. The subject of that debate will  
16 most likely come up in evidential sessions of this  
17 Inquiry.

18 Statements already given to this Inquiry show that  
19 other families walked a parallel path and likely  
20 conjointly grew into the non-statutory Essex Mental  
21 Health Independent Inquiry, the specifics of which  
22 I neither know nor seek to know.

23 As a family, we are grateful to the Independent  
24 Inquiry for the following: firstly, it allowed Linda, my  
25 wife, to give evidence in an informal setting compatible

1 with our nature and, secondly, it allowed my son, given  
2 his circumstance, to give evidence at all.

3 We are also grateful to the staff of this Inquiry  
4 for their knowledge of the evidence we have already  
5 given, and hope that that evidence has helped inform  
6 them as they take on the challenge of further  
7 understanding the desperately sad issues that underlie  
8 these proceedings.

9 Ironically, it would seem the Independent Inquiry's  
10 inability to meet its terms of reference would later  
11 sweep away the aforementioned PACAC reasons blocking  
12 a statutory inquiry into death in mental health  
13 facilities and allow the weight, if I may, of public  
14 opinion and campaigning to bring us here.

15 The two key facts to emerge from the Independent  
16 Inquiry were, one, the number of deaths meeting that  
17 Inquiry's terms of reference approached 2,000 and, two,  
18 of some 14,000 current and past staff, just a handful  
19 had agreed to engage with the Independent Inquiry.

20 The number of qualifying deaths clearly and  
21 terrifyingly overwhelmed the first PACAC constraint of  
22 single numbers, but it was the Independent Inquiry's  
23 second fact that dispensed with PACAC's second  
24 condition. But why was it systemic? For a systemic  
25 failure, it is necessary to first consider EPUT, or

1 NEPT, the Trusts, as a system, and systems need control  
2 to achieve their objectives.

3 When driving your car, and it drifts to the right,  
4 you turn slightly to the left to correct the error.  
5 That is negative feedback, and it is an essential  
6 element in any stable system, and without it any  
7 controlled system will fail.

8 Mental health is both a profession and a vocation,  
9 and each of its practitioners should have the  
10 opportunity to raise failings and then contribute to the  
11 prevention of their future re-occurrence. And yet  
12 across what is now nearly a quarter of a century, no  
13 more than 0.1% of practitioners chose, for whatever  
14 reason, to raise their voice at the Independent Inquiry  
15 to correct the failings of their chosen career path and  
16 provide the negative feedback essential to the  
17 prevention of future deaths.

18 That is systemic failure.

19 Although the above argument is here applied to  
20 internal control, the same argument can be applied to  
21 external control bodies. As a family, we are pleased to  
22 see the relevant external control bodies listed within  
23 the Terms of Reference of this statutory Inquiry.

24 Chair, I respectfully submit that the apparent  
25 internal and external control failings here considered

1 be matters for your Inquiry, for without a voice for  
2 practitioners or a willingness or ability to act by  
3 regulators, any satisfactory long-term solution will be  
4 difficult if not impossible to achieve, as either will  
5 be lacking the negative feedback necessary for effective  
6 control and, therefore, the prevention of future deaths.

7 For negative feedback to work, systems require a set  
8 point, a set point against which to measure its errors.  
9 For an organisation, the set point is a target. I shall  
10 return to this delicate issue at the conclusion of my  
11 commemorative statement.

12 I shall now begin my commemorative statement.

13 (Pause)

14 Richard was born early in the morning of  
15 13 April 1985 in Newport, Gwent. The events of that day  
16 are firmly fixed in my memory. There was a thunderstorm  
17 outside, with lightning filling the room with a sharp,  
18 clear light and hence my name for him, Electric Blue.

19 Our second son arrived two years later, and my wife  
20 Linda and I set about the joys and challenges of family  
21 life. Richard grew up healthy and strong, with a sharp  
22 and agile mind. His early schooling was successful,  
23 with all the accompanying issues to be expected with  
24 boys.

25 Throughout his all too short life, Richard was

1 always keen on sports, and those he could not play he  
2 would study. Chess, football, rugby, tennis, boxing,  
3 kickboxing, karate, weight training and cricket. He  
4 just loved sports.

5 His first major sporting interest was Formula 1.  
6 Books, models, Scalextric, magazines, and visits to  
7 Grand Prix meetings followed, his hero being  
8 Michael Schumacher. Out of the blue, Richard presented  
9 my wife with an invoice for a set of mock racing  
10 overalls. They were in the colours and with the  
11 respective sponsorship badges of Michael Schumacher. He  
12 had negotiated their production and price with the  
13 supplier. He was not yet ten. They were not too  
14 expensive, and how can one say no to such enterprise?  
15 He looked wonderful.

16 But Richard's king of sports was cricket.  
17 A competent player destined for village green  
18 non-league, Richard delivered a truly unique leg spin  
19 style. Where he truly excelled was in the history of  
20 the game. For Christmas 1996 he requested a copy of  
21 Wisden's Cricketers' Almanack, a record of every test  
22 match for a given year. That Richard would find such  
23 a trove of data interesting was not surprising. What  
24 was surprising was that he methodically set about  
25 memorising its contents.

1           He had discovered the concept of memory palaces, and  
2           he decided to build one based on cricket data, amusing  
3           anecdotes and film clips. This continued for over  
4           a decade, his long-suffering friends not being allowed  
5           to leave his bedroom to play cricket until the latest  
6           palace contents were rigorously tested.

7           I'd like to just drift back to Formula 1 for another  
8           anecdote I'd like to slip in that gives a slightly  
9           different and not just so studious view of Richard.

10          As a family we went on holiday to America to take  
11          our boys to the much loved Fantasyland in Orlando. One  
12          of the evenings we went out for a meal and a rodeo show  
13          to amuse our two boys, and on that trip we met two other  
14          families. We got on well, and so when we got back to  
15          our hotel we decided to have a drink and a chat.

16          It turned out the two gentlemen we were with were  
17          also interested in Formula 1, so they asked Richard  
18          a question, to which he gave the answer. They asked him  
19          another question, he answered that as well. Soon the  
20          question went on to: who won this? Who came third? And  
21          he answered all of them. Not satisfied, the two  
22          gentlemen pushed even further, "Well, if you know that  
23          much, at a particular race, in a particular year, on  
24          a particular lap, who was in this position and who was  
25          three places in front of them?" Richard reeled off the

1 answer. This went on for some time. In the end, the  
2 two men gave up asking questions and just admitted that  
3 he knew what he was talking about.

4 Later that evening, the other two families departed,  
5 and Richard walked back over for a bit more money to go  
6 and play on some of the games machines. So I asked him  
7 the question, "Richard, I know that you knew all of the  
8 races, the winners' positions, but I didn't realise  
9 you'd memorised every lap position for every driver."  
10 To which he responded, "I didn't, but I figured they  
11 hadn't either."

12 That pretty much summed up his nature. He could be  
13 fun and he could be funny and he had a roar of a laugh.

14 Back to cricket. His friends of cricket that were  
15 tested, these friends were true throughout his school  
16 days, true through his successes and troubles, and still  
17 true after his death. Each year, a Richard Wade  
18 Memorial Cricket Match is held between a Richard Wade  
19 select XI, where "select" simply means that you've been  
20 chosen, and Leavenheath Cricket Club where Richard and  
21 his friends played. For eight years the match has been  
22 a carnival day of competitive cricket. It is  
23 a testament to my wife, Linda and her friends, Richard's  
24 friends and the club that so much charitable good has  
25 come from such a dreadful death. But that dark matter

1 is for a later time.

2 I'd just like to move now to a statement -- a  
3 memorial written by one of Richard's friends,  
4 Johnny Weavers, that was sent unprovoked to my wife.  
5 My wife still communicates with all of Richard's  
6 friends, and I would like to read some of it now:

7 "A little over nine years ago I received a call  
8 that's changed my life ever since, informed that my best  
9 friend, Richard, R Wade, R the Cat Wade, had sadly taken  
10 his own life. Life hasn't ever been quite as good for  
11 me personally and it led me to specialist bereavement  
12 counselling in the months after that call.

13 "The lady that supported me was amazing. She helped  
14 me through a period that I hope nobody else ever has to  
15 go through. It was her suggestion to try to find a way  
16 of positively remembering R Wade.

17 "As soon as she said that, it was obvious that it  
18 had to involve cricket, a sport we shared a love for  
19 together and a club we'd enjoyed playing at Leavenheath  
20 Cricket Club. Richard's mum, Linda, didn't need any  
21 persuading at all and the Richard Wade Memorial Cricket  
22 Match was born. Leavenheath Cricket Club couldn't have  
23 been more supporting at accommodating us all. Linda  
24 chose the charity CALM, Campaign Against Living  
25 Miserably, and we all agreed this was the perfect cause



1 for us to raise money and awareness."

2 And my wife has been extremely successful in that  
3 regard.

4 Richard was successful in both his GCSE and A level  
5 results. His undergraduate years were at Warwick  
6 University, where he read economics. Although achieving  
7 honours, he never found comfort with his grade, having  
8 succumbed to undergraduate life and the rugby team.

9 I'll drift a little bit again for a moment and make  
10 this the last.

11 Where I say he didn't quite achieve, as he  
12 approached his final examinations and he was revising,  
13 my wife and I decided to give him a call. We called  
14 him, and he was out. I asked him the question, "You're  
15 out, aren't you revising?" "No, mum, I needed to have  
16 a little bit of relaxation." "Okay." But the noise  
17 sounded quite odd, so I asked him, "Richard, where are  
18 you?" To which he answered, "Prague." I said, "Why are  
19 you in Prague?" "I'm on a rugby tour." That was  
20 Richard, you never quite knew what answer you were going  
21 to get or what he would do next.

22 One passion consumed Richard more than any other,  
23 reading, and with a vast memory palace at his disposal  
24 he would, across many years, absorb the contents of  
25 innumerable books. Today they are displayed in his

1 bedroom, stored in several boxes in my garage, they're  
2 filling the bookshelf at his brother's house and given  
3 in at least equal numbers to charity shops.

4 But for all his gifts, Richard had a flaw, and it is  
5 that that has brought me here. After returning from  
6 university, Richard met a course friend for a break in  
7 London. To the surprise of my wife and I, that friend  
8 brought Richard home. The friend explained that  
9 Richard's mental condition had deteriorated and it was  
10 necessary to get him home safely.

11 Given the unexpected nature of Richard's condition,  
12 we were fearful of drugs or some other event that may  
13 have brought about this condition. The friend assured  
14 us that nothing untoward had happened in London, and  
15 Richard would explain no further. We thanked the friend  
16 for his kindness, and he departed.

17 Richard was clearly agitated and deeply troubled,  
18 but still closed on the matter. Over the coming days,  
19 his mental state worsened and his visit to doctors  
20 arranged. Depression was diagnosed and antidepressants  
21 were prescribed, but his mental condition continued to  
22 deteriorate. We were concerned for his mental health  
23 and noticed during this time that Richard would pace  
24 around a lot. We also found that he was speaking to  
25 himself and telling us that his body felt like it was on

1 fire. Richard would also cry and continue to be  
2 agitated, and was neither resting nor sleeping.

3 We did discover that the cause of his depression and  
4 now profound anxiety was motor neurone disease. Again,  
5 appointments were made with doctors with no hint of  
6 motor neurone disease being detected, but Richard's  
7 state of mind would not allow for him to accept the  
8 diagnosis and his suffering continued.

9 Richard, before his mental health issues, from  
10 a young age was a completely rational person. However,  
11 he'd developed an irrational fear of motor neurone  
12 disease. Any tremor that Richard would have would  
13 reinforce his deep fear of motor neurone disease. It  
14 would take us a long time to explain to him in  
15 a rational manner that motor neurone disease was not an  
16 issue for him. However, Richard was in a black hole of  
17 irrational behaviour that he could not get out of.

18 We believe that Richard's irrational fear of motor  
19 neurone disease probably started at university. In  
20 an attempt to allay Richard's fears we arranged  
21 a private consultation with a recognised motor neurone  
22 disease specialist. The consultant concluded that  
23 Richard did not have motor neurone disease, adding, "But  
24 I do not expect that you will believe me." He was  
25 right, Richard's disease was elsewhere.

1           Richard's condition moved towards crisis. When it  
2           came, we called for a doctor's home visit, which was  
3           granted. Richard was given a sedative and he slept. He  
4           continued to sleep for weeks, catching up on all that he  
5           had lost over the unknown duration of his mental  
6           torment. That single dose of a sedative would prove to  
7           be the only effective intervention Richard would ever  
8           receive for his mental ill health.

9           I do not remember the doctor's name, but would  
10          belatedly like to thank him for the eight wonderful  
11          years he gave Richard.

12          While Richard was recovering from his sleep  
13          deprivation, he was watched over by Linda, his brother,  
14          me, uncles, aunts, cousins and friends. In time, we  
15          provided private counselling and he moved towards his  
16          recovery and future.

17          He first decided to return to study, choosing  
18          a history master of arts at Essex University. That was  
19          followed by a PhD in politics, earning his doctorate in  
20          the minimum time permitted. Immediately on completing  
21          his PhD, Richard embarked on authoring a book on  
22          economic policy, published by Palgrave, and this is  
23          a copy -- this is one of the proof copies that he gave  
24          to us and to his close family. A truly treasured  
25          possession.

1           To help support himself while researching, Richard  
2           lectured in US politics. He also project managed the  
3           launch of a student research journal, and found the time  
4           to play rugby for the university, but one achievement  
5           left a legacy that is truly reflective of Richard's  
6           nature. I heard the story from an Essex student who  
7           studied under Richard, a courteous and gentle man who  
8           confessed to restrictive shyness. The day I heard it  
9           was Richard's funeral, a day on which I was to learn so  
10          much about my son from those who shared his life.

11          When Richard inaugurated, selected and trained  
12          the -- and led -- the Essex University debating society, he  
13          did not see this particular student's shyness as  
14          a barrier to success. The student was recruited, and  
15          the effects went well beyond the university. The  
16          ex-student now had his own show on an Asian radio  
17          network based in the Midlands.

18          I would like to say that if you met Richard and you  
19          spoke with him, you would have thought differently after  
20          that conversation about whatever it was that you spoke  
21          about. A remarkable man.

22          His studies now being over, Richard turned to the  
23          world of work, securing a trainee accountant role with  
24          a major international consultancy, intending to  
25          specialise in auditing. All was going well and his life

1 was on the move. Work and martial arts were his  
2 cornerstones in this period. To stay in touch with some  
3 of his school friends a self-imposed challenge was set  
4 for he and his friends to visit all 96 of the  
5 Football Association's league grounds, the purpose being  
6 to rate the meat pies.

7 Things were going well for Richard, with final  
8 qualification as an accountant almost within his grasp.  
9 It was at this time that my wife and I started to notice  
10 some changes in Richard, followed by the return of some  
11 of the troubling symptoms of his earlier encounter with  
12 mental illness, anxiety, pacing, insomnia, and  
13 a constant need for reassurance. Richard confessed the  
14 return of his irrational fear, motor neurone disease,  
15 and once again we trod the path of general  
16 practitioners, out-of-hours surgeries, and Accident &  
17 Emergency units.

18 The treatment provided was antidepressants,  
19 a long-term approach to the chronic aspects of his  
20 mental illness. What Richard needed was relief from the  
21 rapidly accelerating downward spiral of his acute  
22 symptoms. Sleeping tablets were ineffectual. He had  
23 long passed the point of that return.

24 For two weeks and with much help from family and  
25 friends, we coped as best we could, but Richard's

1 direction of travel had long been set. The rate of his  
2 deterioration would only increase and we were incapable  
3 of keeping pace.

4 On the afternoon of 16 May 2015, Richard moved  
5 himself into the street outside the family home and  
6 refused to re-enter. My wife and I were physically and  
7 mentally exhausted and out of ideas. We called our  
8 younger son, who came home, and we discussed our options  
9 while a neighbour oversaw Richard. Having only one  
10 option, we called Suffolk Mental Health Services for  
11 an emergency visit. We thought we were about to welcome  
12 respite into our home. What entered was the prelude to  
13 a nightmare.

14 When the emergency team arrived, Richard absolutely  
15 refused to enter his home. For personal safety reasons,  
16 he wanted to be admitted to a mental health institution.  
17 Put simply, he was having suicidal thoughts.

18 As he grew increasingly agitated and fearful of his  
19 condition, Richard became ever more desperate. Perhaps  
20 to precipitate a conclusion, perhaps out of confusion at  
21 his prolonged suffering, Richard accused me of intending  
22 to kill him. With utter shock and no warning, I found  
23 myself being peremptorily questioned for conspiracy to  
24 murder my own son. My police constable interrogator  
25 quickly realised the true cause of the accusation.

1           For a further four hours, Richard was left outside  
2           as the temperature dropped, pacing the streets with  
3           a police escort. Tea, sandwiches and warm clothing were  
4           all sent out to keep the cold at bay. Finally, the  
5           Trust capitulated and Richard had an admission to  
6           a mental health ward as a place of safety at the  
7           Linden Centre, Chelmsford.

8           Richard kissed his mother goodbye, and I being kept  
9           apart by events earlier that evening. He was driven  
10          away by Essex police to what we were told and believed  
11          to be a place of safety.

12          Now, there are sections redacted here, and I shall  
13          cover that to link to the next part by merely saying  
14          that the following day Linda and I went to the  
15          Linden Centre, and we were admitted at the time that my  
16          son started to take his own life and were on the ward at  
17          that time, and witnessed the events surrounding it.

18          I shall now move on and continue with the rest of my  
19          statement.

20          We were ushered away to a family room. The enormity  
21          of our tragedy was beginning to engulf us. Despite our  
22          repeated requests no information about Richard was  
23          forthcoming and staff avoided speaking to us. With  
24          Richard's brother now with us, we moved to join Richard  
25          in Accident & Emergency after he had been transferred to



1 hospital. It was here that the true extent of Richard's  
2 condition was beginning to be revealed, and it was  
3 following his transfer to an ICU, intensive care unit,  
4 that that agonising nail was driven home and hope driven  
5 out.

6 Nothing could have prepared us for what had been  
7 done to our son and brother. Little more than 12 hours  
8 before, Richard was physically strong and handsome. Now  
9 his head was swollen with blood, purple red from burst  
10 blood vessels and the structure of his eyes breaking  
11 down. On first sight, no one could bear looking at him  
12 for more than a few seconds. It was our family's great  
13 misfortune that our beloved Richard should fall victim  
14 to the Trust's dangerous practices, as it has been for  
15 so many other families.

16 Given the scale of the suffering caused, there will  
17 be no painless solution in righting this Trust and its  
18 broader operating environment, if indeed it can survive.  
19 For my part, I am willing to give this Inquiry every  
20 assistance within my compass in finding that solution.  
21 But to get here and make that commitment, my family has  
22 suffered greatly. We've spent too many years fighting  
23 to uncover the truth about Richard's death, too many  
24 years campaigning to get the people that mattered to  
25 listen. Those years took their toll.

1           Having changed to an academic career later in life,  
2           and being in good health, in 2015 I had many wonderful  
3           opportunities and years ahead of me. On 17 May that  
4           year, all my professional ambitions ceased to be.  
5           Indeed, they no longer mattered.

6           The psychological, physical and financial  
7           consequences of a loss by suicide are devastating. At  
8           the time when you can least cope, you are confronted by  
9           a deluge of enquiries, inquests and probate and through  
10          unmanageable trauma you must pore through every detail  
11          of a loved one's life to resolve the consequences of  
12          their passing.

13          My recovery, whatever that means, was supported by  
14          antidepressants, sleeping tablets and wise guidance, but  
15          such crutches can only take you so far.

16          At some point one's demons must be faced. Mine were  
17          my warmest memories of Richard, and they were there at  
18          every turn. The only way I could find peace was to  
19          confront them. Whatever triggered the memory, a piece  
20          of music, a picture, I would listen or look at it until  
21          no further tears could flow. Cleansing in turn each  
22          treasured memory of its sorrow was the only way I could  
23          find to cope, giving me space to see lost happiness  
24          between the sadness. But everything has its price, and  
25          for me the years of unremitting stress have left me with

1 an untreatable heart condition. But he was my son and  
2 I have no regrets for the decisions I have made.

3 Immediately upon our loss, my wife relinquished her  
4 voluntary work with the Citizens Advice Bureau, unable  
5 to face another's troubles while embroiled in the  
6 tempest of her own sorrows. It took her two years of  
7 counselling and innumerable hours of support of family,  
8 friends and doctors to help her cope with her terrible  
9 situation. She too suffered terribly because of the  
10 long-term consequences of stress, needing to be admitted  
11 to Papworth Hospital with Takotsubo syndrome. The  
12 British Heart Foundation recognises an alternative name,  
13 broken heart syndrome, the consequence of her loss being  
14 too great to bear. Yet carry on she must, and I am  
15 proud and grateful that she has, my constant companion  
16 through my darkest days and a trusted hand in trying to  
17 correct my errors. She is a remarkable woman.

18 Richard and his brother, allowing for fraternal  
19 competition, grew always as the best of friends. Each  
20 was proud of his brother's successes and ready to help  
21 when needed. They played sport together in their youth,  
22 and they would later meet every New Year's Eve. They  
23 would discuss the year that had passed and that to come.  
24 Richard's loss was devastating to his brother. Our  
25 younger son had to resolve the consequences of his loss

1 while fulfilling his duties without let. It is  
2 a testament to his inner strength that he did so.

3 At Richard's funeral, his brother, despite his own  
4 distress, honoured the coffin at its arrival, led the  
5 pallbearers and gave Richard the most touching of  
6 eulogies, a eulogy that ended in an epitaph that was  
7 both true of Richard's life and likely his future,  
8 an extraordinary man.

9 At his wedding, Richard's brother kept one important  
10 seat vacant, that of the best man. Loyalty and  
11 brotherly love decreed that one person and one person  
12 only could have the honour of that singular role.  
13 Nothing had diminished their friendship.

14 We have never received a satisfactory explanation of  
15 Richard's death from the Trust. Piecing that story  
16 together fell upon us. It was a long and debilitating  
17 journey, a journey that no one should ever have to take  
18 again.

19 With regards to my family's loss, I am not sure what  
20 individual justice for Richard would mean, but with the  
21 passing of years and with the number of deaths to be  
22 considered, I am left with one overriding certainty, the  
23 deaths must stop.

24 And now I shall return and pick up where I left off  
25 on my original statement relating to targets.

1           If the deaths are to stop, what attribute must the  
2           Trust display? There can only be one acceptable target  
3           for non-natural deaths: zero. Any other arbitrary  
4           number would be tantamount to a quota, a moral dilemma  
5           if ever there were one. Even beating a national  
6           average, however low, would be at least nothing other  
7           than accepting worse practice elsewhere. It must be  
8           zero.

9           All those souls that have been lost scream silently  
10          for that change, and is it not deafening?

11          I thank you.

12   THE CHAIR: Thank you.

13   MR GRIFFIN: Chair, that's the last account of this  
14          September hearing. We have a further hearing from  
15          25 November to 5 December, and the Inquiry will provide  
16          details -- further details about that shortly.

17   THE CHAIR: Thank you.

18   (Pause)

19                                   Closing remarks by THE CHAIR

20   THE CHAIR: As we have come to the end of the commemorative  
21          accounts, I want to thank everyone who has participated  
22          in these hearings. I'm grateful to those who provided  
23          opening statements, both by submitting them in writing  
24          and those that were read during the hearing. All the  
25          opening statements were thought-provoking and I, along

1 with the Inquiry team, will carefully consider their  
2 contents and the matters of concern which they've raised  
3 as we proceed with this Inquiry.

4 I want to express my deepest gratitude to everyone  
5 who gave us commemorative and impact accounts over the  
6 past two weeks, whether that was by reading that  
7 account, by allowing the account to be read by someone  
8 else, or by sharing photographs and videos. I know how  
9 difficult and emotionally challenging it must have been  
10 to contribute to these hearings, and I really appreciate  
11 the courage and effort it will have taken to gather up  
12 precious memories, both happy and the more distressing  
13 ones, and to share them in such a public forum.

14 All accounts were provided with grace and candour,  
15 and they have certainly made a lasting impression on me  
16 and on the whole of the Inquiry team.

17 It's important, I think, that we at all times keep  
18 in our minds the real people and their families who  
19 experienced the mental health inpatient services that  
20 we're concerned with. The commemorative accounts will  
21 certainly help us to do that, and I thank you all for  
22 them.



1 (3.53 pm)

2 (The hearing adjourned until Monday, 25 November 2024)



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