

Tuesday 21 October 2025

(10.22 am)

MS TROUP: Good morning. Today we will be continuing to hear evidence from the families of those who have died. This morning we will hear from Carole Stokes the mother of Lee Henry Spencer who died on 27 August 2019 at age 20. This afternoon, Chair, you will hear evidence in a private session from a family witness to whom you have granted a restriction order. Before we hear any evidence, I want to point to the fact that today's evidence may again in parts be distressing and difficult to listen to. For some it may not be possible to sit through this session. Anyone in the hearing room is welcome to leave at any point. I would also like to remind people that emotional support is available for all who require it. We have support staff from Hestia, an experienced provider of emotional support, here today and for each day of this hearing. There is a private room downstairs where people can talk to Hestia support staff if any emotional support is required during the hearing. Those particular staff are wearing orange-coloured lanyards and scarves, or speak to a member of the Inquiry team and we can put you in touch with them.

For those who may be watching online information about available emotional support can be

1 found on the Lampard Inquiry website at
2 lampardinquiry.org.uk, and under the support tab near the
3 top right-hand corner. This is for all of those engaging
4 with the Inquiry to feel safe and supported.

5 Could the witnesses be sworn, please -- or
6 witness, I am so sorry.

7 **CAROLE STOKES (affirmed)**

8 **Examination by MS TROUP**

9 **Q.** Could you state first your full name for the record,
10 please?

11 **A.** Carole Stokes.

12 **Q.** Carole, this Inquiry sent to you a request under Rule 9
13 for written evidence and you provided a witness statement
14 dated 7 May 2025. You should have a hard copy of that
15 statement in front of you. If we look, please, very
16 briefly, at page 17, that is where you made a statement
17 of truth.

18 **A.** Yes.

19 **Q.** And you signed?

20 **A.** Mm hmm.

21 **Q.** Can you confirm now that you are happy that the content
22 of your witness statement is true and accurate?

23 **A.** Yes.

24 **Q.** Thank you. Carole, as I said, you are the mother of Lee
25 Henry Spencer who was born on 23 September 1998 and who

1 died on 27 August 2019, aged just 20. Your statement and
2 the evidence you are to give comes from your own
3 recollection of events but also, as I understand it, from
4 your and your legal team's analysis of some of the
5 records, and in particular from a Root Cause Analysis
6 report that was produced after Lee had died; is that
7 right?

8 **A.** Mm hmm.

9 **Q.** You came to this Inquiry's hearing in Chelmsford in
10 September 2024 when you gave commemorative evidence. You
11 spoke to us about Lee as a person, his life, the
12 development of his mental health problems and you spoke
13 also to us about the impact his death has had on you and
14 on your family. We thank you for that evidence and for
15 your evidence today.

16 Going back a little bit to the background and
17 some of the matters you told us about during your
18 commemorative evidence back in September 2024, I
19 understand that as a young boy, he was fairly typical; is
20 that right?

21 **A.** Yes, yes.

22 **Q.** You tell us in your witness statement that you began to
23 notice some problems, although not mental health
24 problems, but problems with focus and concentration, when
25 Lee was in school.

1 **A.** Yes.

2 **Q.** Tell us a little about those.

3 **A.** He couldn't sit still, he didn't concentrate all of the
4 time, very hyperactive, was much happier when he was
5 outside doing fun things. He did learn. He wasn't -- he
6 didn't stop learning, but he was just, he didn't
7 concentrate as much as he needed to, really. He always
8 knew that he would do something more constructive as he
9 got older, rather than professional stuff.

10 **Q.** Something practical?

11 **A.** Yes.

12 **Q.** Something outside, something with his hands?

13 **A.** Yes.

14 **Q.** There came a point, I think, during his schooling where
15 he was assigned a mentor to help him with his focus and
16 concentration.

17 **A.** Yes.

18 **Q.** What stage was that, primary or secondary?

19 **A.** It was primary. He was -- we used to go for meetings at
20 CAMHS, I can't remember how often, once a month, I don't
21 know, but also there was a mentor in school which they
22 never told me what was happening or anything. They just
23 used to just pull him out of class and sit with him and
24 talk to him and stuff.

25 **Q.** Yes, and I think he also participated in some

1 after-school clubs and activities to help him sort of
2 channel his energy and learn to focus.

3 **A.** Everything sporty. He didn't do any other extra classes
4 that didn't involve -- he was in all the school teams
5 and -- but everything sporty.

6 **Q.** He needed to be moving.

7 **A.** Hm mmm, yes.

8 **Q.** That was in primary school. Did that kind of mentorship
9 and/or those kinds of issues continue in secondary
10 school?

11 **A.** Yeah, yeah he still was the same, still struggled with
12 staying still and concentrating for too long. I mean, he
13 never -- he never, he was never suspended, he was never
14 in trouble at school, but he didn't excel in the learning
15 side. But he was in all the school teams still, in the
16 secondary school and everything.

17 **Q.** Given all of that background, help me, please, did anyone
18 at any time suggest an assessment, for example, for ADHD?

19 **A.** No, never. All of the people that he saw at school,
20 nobody ever suggested having him assessed for anything.

21 **Q.** As I understand it, you consider that Lee did have
22 undiagnosed ADHD.

23 **A.** Now, yes.

24 **Q.** In hindsight.

25 **A.** Yes.

1 **Q.** Yes. And I think, you must correct me if I am wrong, you
2 also consider that that sort of misdiagnosis was a very
3 important factor in the later development of mental ill
4 health.

5 **A.** Yes, potentially if he had have been diagnosed and
6 received help that he could have had and medication,
7 maybe, maybe it wouldn't have -- it wouldn't have
8 contributed into the down spiral of him when he was
9 older.

10 **Q.** Yes. As I understand it, looking back you would say that
11 his serious mental health difficulties began in around
12 about 2016, so he would have been around 17.

13 **A.** Yes.

14 **Q.** And tell us about those and how he presented. What is it
15 about that period that makes you say that that's when you
16 really noticed that there were mental health
17 difficulties?

18 **A.** He struggled with if there was any disappointment, he
19 would sort of spend a lot of time in his room and not
20 really wanting to talk and not wanting to sort of
21 socialise in any way, and just wanted to be left alone.

22 **Q.** So isolated, withdrawn?

23 **A.** Yeah, yeah, just ... yeah, just not the person that he
24 was before. We just saw him just go down and take quite
25 a long time to get out of situations. Like, if there was

1 something wrong, there was an upset of whatever, it took
2 him quite a time to get through it and not just be able
3 to just shrug it off and get on with it.

4 **Q.** Yes, one of the things I understand you to have told us
5 in your witness statement is that things that might upset
6 us in general, but that we would be able to brush off
7 fairly quickly, for him, it took him a long time to talk
8 through something that had happened and to unpick it and
9 for him to begin to settle again.

10 **A.** Yes.

11 **Q.** I understand that you -- Lee himself, when he was about
12 16, said to you that he thought he might have ADHD?

13 **A.** He did, yes. It was definitely after he was 16 because I
14 said to him that he needed to go to the doctors himself
15 because I couldn't -- he was allowed to go after.

16 **Q.** At 16, yes.

17 **A.** And he did go, I can't remember. It was after we moved,
18 so it was after August 17, he did go to the doctors and
19 asked to be assessed and he was sent the stuff to phone
20 up and make an appointment, but he didn't do it.

21 **Q.** He didn't do that, and by then, of course, it wasn't --
22 well you could possibly have made an appointment for him
23 but you couldn't manhandle him to an appointment, he
24 would either go or he wouldn't.

25 **A.** He knows, he knows I was supporting him and he knows I

1 would have taken him to any appointments that he needed,
2 that he was to go to, but he didn't -- I was trying to
3 make him independent and trying to teach him that your
4 mum's not going to always do everything for you so you
5 need to make the appointment yourself and I will take you
6 to it.

7 **Q.** Yes. And he didn't do that.

8 **A.** No.

9 **Q.** I understand that he had other problems in secondary
10 school around -- you learnt this later, I think that he
11 was involved in a number of fights and that on one
12 occasion in particular, you learned later, that he had
13 been beaten up and that that continued to affect him for
14 some years?

15 **A.** Yes. I think it affected him more mentally and
16 emotionally, rather than physically. He didn't, there
17 wasn't -- I don't remember him being bruised or --

18 **Q.** Injured? Yes.

19 **A.** Yes, so it was the more what happened to him, like,
20 internally.

21 **Q.** And I think actually the records reflect that because
22 what has been picked up is that the GP records show at a
23 later date Lee himself saying to the GP that he felt that
24 his depression had started from that incident of being
25 beaten up at school at 16 years old?

1 **A.** Yes.

2 **Q.** You say that at around the same time, although you didn't
3 know about that incident, that he began to hide things
4 from you in a way that he hadn't done before. Do you
5 mean that he just wasn't engaging with you as much?

6 **A.** Yeah, he sort of -- I mean, we were really, really close
7 and most of things that happened, he would talk to me
8 about but sometimes it took him a little bit longer, the
9 bigger things that were going on with him took him a
10 little bit longer to talk to me about. So I sort of
11 found out about it like once it was a major issue rather
12 than a minor issue.

13 **Q.** Yes. There are a couple of other things that you have
14 noted and want to say, that you think were contributed to
15 or were important factors in the development of mental
16 ill health in Lee, and I think one of those is the lack
17 of a father in his life; is that right?

18 **A.** Yeah, I mean, his dad was around. He was always there,
19 but he was more, if you want me I'm here, rather than
20 actually actively involving himself in his life.

21 **Q.** So not proactive input?

22 **A.** No, no. He would sort of, when my daughter had her son,
23 because my ex-husband lived far away, so he would come
24 down and he would come and spend time with her and the
25 grandson and then Lee would be at the end sort of, if you

1 -- come and talk to me outside sort of thing --

2 **Q.** If he had time --

3 **A.** Yeah, not -- there was no like, he never -- at the time,

4 obviously he didn't want to go and spend time, he didn't

5 want to go up to where he lived because he had a social

6 life and a job and all the rest of it, but there was no

7 actual quality time spent with him. It was just sort of

8 a chat in the car when he came round.

9 **Q.** Like an afterthought, is that fair?

10 **A.** Yeah, I think, I feel that that's ...

11 **Q.** One of the things that you consider, again looking back

12 or perhaps you knew it at the time, that that led to a

13 very diminished sense of self-worth in Lee?

14 **A.** Yeah, he always felt that -- not always, but as he got

15 older and as this sort of developed, he felt that he

16 wasn't important to anybody.

17 **Q.** You have told us that you were very close and that he

18 would talk to you about what was happening in his life

19 and what was going on. I think one of the other things

20 that you have told us that he confided in you about were

21 some issues around his sexuality, and that was something

22 that you engaged with him on and supported him on, but

23 you know that it was something that troubled him and

24 continued to trouble him; is that fair?

25 **A.** Yes, and that's one of the things that he didn't tell me

1 for a long time.

2 **Q.** I see.

3 **A.** It took him a long time to actually confide in me and
4 tell me what was going on.

5 **Q.** Yes, and when he did, you made very clear to him that
6 there was no judgement from you and that he was safe to
7 express himself and you welcomed him telling you about
8 the issues he was having and his thoughts and so on; is
9 that right?

10 **A.** Yes.

11 **Q.** What you tell us is that after secondary school Lee went
12 on to college, I think, and that's when signs of possible
13 mental ill health became more visible.

14 **A.** Yeah, he did the first year of college and then he was
15 offered an apprenticeship, which he took and was going to
16 finish the course whilst doing his apprenticeship, but
17 then after a couple of months of the apprenticeship, the
18 guy -- I don't know if he lost a contract or whatever,
19 but he kept letting him down, he would go to work and
20 wait for him and the guy didn't turn up.

21 **Q.** Lee would go and wait and the employer let him down?

22 **A.** Yeah, so he ended -- so that went on for a few months and
23 then, so that was when we decided to move and he start --
24 so he then started his second year of college where we
25 moved to.

1 **Q.** I understand.

2 **A.** And then he did his second year, and then throughout, he
3 was okay, he went to college every day and did his
4 course, but then towards the end of it, he was getting
5 frustrated with not being able to get through a certain
6 part of it, being able to fix -- I don't know, I can't
7 remember, and he just walked out. He just said, "Right,
8 I'm not doing it, I can't do it." And so he was
9 literally at the end of the course and just needed to
10 just try and keep going for a little while longer but he
11 just said, "No, I'm not doing it."

12 **Q.** During the whole of that period, I think, he was a
13 cannabis user and you were aware of that.

14 **A.** Yes.

15 **Q.** And I think that's one of the things you tell us is that
16 when you moved, you and he, or perhaps you for him were
17 hoping for a fresh start?

18 **A.** No, he was, that's what he wanted. He wanted to get away
19 from some of the things that he had got involved in where
20 we used to live and wanted to start again and he tried
21 really, really hard to stop smoking, but didn't.

22 **Q.** And I think your impression, both then and now, was that
23 what that offered to him was some sort of relief from the
24 emotional distress that was by then becoming much more
25 frequent and much more obvious?

1 **A.** Yes.

2 **Q.** In 2019, by January 2019, what you tell us is that his
3 struggles with his mental health or his emotions were
4 becoming really very much more obvious.

5 **A.** Yes.

6 **Q.** And you encouraged him, again, to make an appointment
7 with the doctor?

8 **A.** Yes.

9 **Q.** The records tell us that on 25 January 2019, he did go to
10 his GP and that that GP noted depressive symptoms and
11 past suicidal thoughts, and also that record tells us
12 that Lee told the GP on that day that he had tried to
13 hang himself the previous year but had stopped.

14 **A.** Yes, it was just before Christmas.

15 **Q.** Did you know about that at the time?

16 **A.** No, he told me when I got him to go to the doctors.

17 **Q.** A few days after that visit to the GP, so moving to 30
18 January, I think a different doctor, or perhaps the same
19 one it doesn't matter, prescribed antidepressants and
20 discussed with Lee possibly trying to reduce his use of
21 cannabis.

22 **A.** Yes.

23 **Q.** The antidepressants I think he stayed on for, you said,
24 approximately 6 to 12 weeks, yes?

25 **A.** Yeah.

1 **Q.** And you tell us that initially those did help?

2 **A.** Yeah, after a couple of weeks I could tell the
3 difference, he was a lot more positive, a lot happier.
4 They were helping him, I think they were helping him
5 regulate his brain a little bit better, to the point
6 where he decided that he was better now and that he
7 didn't need them any more. And I said to him, "No, you
8 can't just come straight off of them, you need to go, you
9 need to talk to the doctor and maybe if you want to
10 reduce the dosage or take them every other day or
11 something like that, but you need to talk to the doctor
12 about it first", and he phoned the doctor to make an
13 appointment to talk to the doctor, he did listen to what
14 I was saying, luckily, but they never called him back, so
15 he never got the call back to discuss with the doctor so
16 he just stopped taking them.

17 **Q.** Yes, so he did what you advised and called the GP to
18 discuss possibly, gradually coming off those
19 antidepressants but never received the follow-up call.

20 **A.** No.

21 **Q.** Just tell us a little about how Lee would have dealt with
22 that, the sense of rejection or the lack of follow-up?

23 **A.** Yeah, that's it, that was it. He would not talk to the
24 doctor, even though I said to him, "Come on, you know,
25 they're busy, call them again, I'll call them for you,

1 make an appointment", "No, just not interested, doesn't
2 care about me so I'm not talking to them."

3 **Q.** So very black and white, maybe, in the thinking and "Now
4 that that person has" -- I'm so sorry.

5 **A.** Let him down.

6 **Q.** "Now that that person has let me down, that's it."

7 **A.** Yes.

8 **Q.** What you say is that you think that failure to make a
9 follow-up call to him itself led to quite a significant
10 worsening of his mental health?

11 **A.** Yes, it was another -- another being let down and that
12 nobody cares about him.

13 **Q.** I want to move, please, to 1 June 2019, which is what you
14 described as the crisis point?

15 **A.** Yes.

16 **Q.** How had Lee been between April 2019, when he stopped his
17 antidepressants, and this crisis point that we are going
18 to come on to discuss in early June 2019?

19 **A.** Again, I could tell that he was starting to go down again
20 and obviously tried to encourage him to go back to the
21 doctors but he just refused and said, "No, they're not
22 bothered about me", and even still, even if they hadn't
23 had that message to say the call back request from them,
24 the fact that they had put him on the medication, surely
25 they knew how many they had given him, how much dosage

1 they had given him, some kind of reminder for them to
2 say, "Right, we need to follow up on him", but there was
3 nothing at all.

4 **Q.** Just even in terms of is this person still taking this
5 medication, are they coming for a repeat prescription?

6 **A.** Yes.

7 **Q.** But what you are talking about is just falling off?

8 **A.** Yes.

9 **THE CHAIR:** Did he actually speak to the GP at the time or
10 did he just speak to one of the receptionists?

11 **A.** As far as I am aware, he spoke to the surgery and asked
12 to speak to, yeah, to have a call back or an appointment
13 or something from the doctors.

14 **THE CHAIR:** Thank you.

15 **A.** Yeah, so I could tell that he was starting to decline
16 again and going back to dealing with each incident as it
17 happened.

18 **Q.** Yes.

19 **A.** If he -- quite often it was more about work. I can't
20 remember what work he was in at the time because he used
21 to sort of have a job for a few weeks, maybe a couple of
22 months and then something would have happened, and he
23 would just "That's it", and just finish. I do remember
24 at that time, it must have been around that time, he
25 decided he wanted to join the army.

1 **Q.** I see.

2 **A.** So he went for the assessment, I think it was in
3 Chelmsford. He had to do some, I remember him going
4 running because he had to show them that he could run a
5 certain amount and he had to time it.

6 **Q.** Yes, a certain level of physical fitness, yes.

7 **A.** I remember him coming home and saying, "Right, I did that
8 many kilometres in that amount of time", and then he was
9 waiting for an e-mail to then go on to the next phase, I
10 don't know whether he ever got that e-mail. I don't know
11 what happened after that, but he never -- nothing further
12 happened.

13 **Q.** Nothing came of it as far as you know?

14 **A.** No.

15 **Q.** I understand. If you want to follow it, looking at page
16 5 of your witness statement now, and at paragraph 30, I
17 don't think you need to follow it on paper but just so
18 you know we are. As I understand it, on 1 June 2019
19 there was some distress from Lee that morning --

20 **A.** Yes.

21 **Q.** -- because his phone had stopped working?

22 **A.** Yes.

23 **Q.** And you were on your way to visit his sister, your
24 daughter?

25 **A.** Yes, she was on her way to me and we were going to -- we

1 were going to Braintree, so I said to Lee, "Wait till she
2 gets here and then we'll all go together and you can go
3 and get your phone fixed", but he wanted to go now and I
4 said, "Look we have only got a couple of hours, wait
5 until she gets here and then we'll go together", because
6 otherwise it meant me going backwards and forwards. So
7 yeah that's what we did, we went together, then two went
8 off to the shop and got his, done something, and then on
9 the journey home I can't remember if we did anything
10 else, I'm not really sure, but on the journey home
11 something wasn't working on his phone and he -- that was
12 when he really kicked off and got really, really angry.
13 He wanted me to turn around and go back and I said, "No,
14 come on let's go home and we'll work it out and see what
15 we can do", and he was really, really angry. He got out
16 of the car and he walked home. And then, when he got
17 home was when he said that he wanted some, he needed
18 help.

19 **Q.** Was that the first time -- so you got home, he had
20 walked. Your daughter is sitting with you now. You were
21 together and you say, I think in fact what he said to you
22 is that he needed help because he would, in the absence
23 of help, he would hurt himself or someone else?

24 **A.** Yeah. I mean, he had been like that before, like where
25 he said he needed help and that was obviously times when

1 I said to him about going to the doctors and all that
2 sort of stuff. But that time he was more like he wasn't
3 taking no for an answer. He wasn't, he wasn't -- he just
4 knew that that's what he wanted. He knew that he needed
5 to go and be taken somewhere or do something.

6 **Q.** He was making clear to you that he was in crisis?

7 **A.** Yes, yeah.

8 **Q.** You called the 111 service?

9 **A.** Yes.

10 **Q.** Who advised that he be taken to hospital for an emergency
11 mental health assessment?

12 **A.** Well they spoke to him as well.

13 **Q.** Did they?

14 **A.** Yeah.

15 **Q.** Right.

16 **A.** He was laying in his room, and I had to give the phone to
17 him and I didn't listen to the conversation. They spoke
18 to him. And then he gave the phone back to me and that's
19 when they said to me that I needed to take him to
20 Broomfield.

21 **Q.** I see, and you did that, getting to Broomfield A&E at
22 about 7.40 pm?

23 **A.** Yes.

24 **Q.** And there was a crisis mental health assessment carried
25 out, actually I think about an hour later?

1 **A.** Yes.

2 **Q.** As I understand it, you were present during that
3 assessment?

4 **A.** Yes.

5 **Q.** Could you tell us what you remember about it? So for
6 example, how long did it last? It may be that you don't
7 remember, but tell us what you do remember?

8 **A.** I don't remember how long it lasted. There was lots of
9 talking about how he was feeling and what had happened
10 during the day and previous things, like being on the
11 depression tablets and stuff, and then obviously talking
12 to him as well. I can't remember whether or not they
13 asked me to leave the room at any point and speak to him.
14 I can't really remember that.

15 **Q.** Can you remember what kinds of questions the assessing
16 clinician asked Lee?

17 **A.** Not in detail, but just more about how he was feeling and
18 what sort of thoughts that he was having, and was there
19 maybe sort of questions about was there anything in
20 particular that had happened that would make him be
21 feeling like this, and he just explained to them that he
22 gets to feel the way he does for different situations.

23 **Q.** What about questions, forward-looking questions, about
24 needing help and his own plans and what he had said to
25 you and possibly to 111 about feeling that he might hurt

1 himself or someone else? Do you remember that being
2 covered?

3 **A.** I can't remember, but I'm sure it was. He described
4 everything that -- but obviously I didn't listen to what
5 he said to 111, so I don't know whether they re-asked him
6 the questions that they had said to that, but yes, they
7 did ask him like the incidents and how he was feeling and
8 everything.

9 **Q.** During the assessment how was he because obviously at
10 home what had led you to call 111 was him being very
11 clear that he had reached a crisis point. How was he
12 presenting during that assessment at A&E?

13 **A.** When they were listening to him he was calm and answering
14 questions. Every time they started to suggest that he
15 didn't need to be admitted, in whichever way, and that
16 maybe it could be dealt with in the community, he was
17 agitated. He walked out a couple of times, I had to go
18 out and find him, get him to come back and talk to us
19 because he was just adamant that he needed to be in
20 hospital and he wasn't taking no for an answer.

21 **Q.** Were you asked or offered the opportunity to provide any
22 input into the background or Lee's character, or what had
23 led him to that point, during the assessment on the 1st?

24 **A.** Yeah, they asked me about the history of him and like I
25 say, there wasn't -- there wasn't too many incidences

1 before. Obviously everything that had happened before
2 was dealt with, like, in a bubble with just me and him
3 talking to each other and obviously going to the doctor.
4 Because it wasn't an ongoing -- sometimes it was
5 absolutely fine, like just normal life, living
6 day-to-day, socialising, going to work. Everything that
7 was a normal life, and it was just pockets of problems
8 that we just dealt with. I can't remember if I told them
9 about anything in particular, but obviously the big
10 things, the -- like he had a lot of problems with a girl
11 at the time that caused him a lot of distress, that
12 obviously I had to sit and talk to him about a lot and
13 talk through with him and everything, and the other
14 stuff.

15 **Q.** I wondered whether, and it might not have come out and
16 you might not remember, whether either you or Lee
17 mentioned the matter we discussed when Lee had told the
18 GP that the previous year he had tried to hang himself.
19 Did that come up during the assessment on 1 June, as far
20 as you can remember?

21 **A.** I don't know, I can't remember, and it might have been
22 talked about when he was on his own with them as well. I
23 can't remember if that particular thing was talked about
24 then, but I would say it was, because obviously he was
25 trying to explain to them that this wasn't the first time

1 he was feeling the way he was. I'm sure it would have
2 been.

3 **Q.** As you remember, would it be right for me to say that Lee
4 was very open with them, with the assessing clinician?

5 **A.** Yes.

6 **Q.** And made it obvious that he was by then desperate for
7 some kind of help, is that fair?

8 **A.** Yes.

9 **Q.** As I understand it, there was some discussion during that
10 assessment to determine whether it might be appropriate
11 to detain Lee under section. Do you recall that?

12 **A.** No, I don't remember whether there was or not.

13 **Q.** That's fine. I will ask you just very briefly, please,
14 just to look at page 7 and paragraph 39 of your witness
15 statement. It may be that you don't know because this
16 comes from the records, but I just want to be clear.
17 What you say there is that the assessing clinician stated
18 that sectioning was not considered because Lee believed
19 that medication would not help him. Is that something
20 that's come from your legal team's analysis of the
21 records or is it something that you recall?

22 **A.** I don't remember being told that sectioning was not
23 considered, but I do know that any time anybody was
24 talking to him, he kept on saying that he doesn't need
25 medication because he's not depressed. So he was adamant

1 that he wasn't taking any medication.

2 **Q.** What did he want to happen?

3 **A.** I think he wanted someone to make sure that his brain was

4 working properly.

5 **Q.** And to listen to him?

6 **A.** *(The witness nodded)*

7 **Q.** Thank you. Now we will come to the events of the next

8 days, but over the whole of this short period, so running

9 from 1 June, which I have described and you described as

10 the crisis point, to 6 June, when in fact Lee was

11 discharged, did anyone discuss the possibility -- any

12 clinician or staff member discuss the possibility of

13 sectioning Lee with you, can you recall?

14 **A.** No.

15 **Q.** What actually happened was that it was decided that Lee

16 could be managed in the community. That was the

17 conclusion of the assessment, yes?

18 **A.** Yes, once he had been assessed in the hospital.

19 **Q.** Lee then became, as I understand it, quite desperate and

20 insisted that he had to be helped that day or he would

21 hurt someone, or himself?

22 **A.** Yeah.

23 **Q.** And what you were told, I think, is that there were no

24 beds available whatsoever?

25 **A.** In the whole country.

1 **Q.** What was your reaction to that, Carole?

2 **A.** In a way, obviously, I didn't believe that was true, but,
3 as I said all the way through everything, I trusted the
4 process. Everything that they told me, I believed,
5 because I didn't have any reason to not believe at the
6 time what I was being told. Also not being involved in
7 any of this before, I always thought that everything they
8 were doing was for his best interests and accepted what
9 they were telling me.

10 **Q.** Yes.

11 **A.** But obviously and I did say the next day, when he was
12 eventually admitted, "It's funny how there was room in
13 The Lakes the next day, but there wasn't any that night."
14 So a little bit sort of "Hmm" at the time.

15 **Q.** Yes, because the time you left hospital, on 1 June,
16 having gone in for that assessment, it was quite late,
17 you went home, and we will come to it, he was in fact
18 admitted to The Lakes the next day. On the 1st, when you
19 left the hospital, can you remember whether you or Lee
20 were given any advice or a plan or what to do if he
21 deteriorated further and the crises deepened, can you
22 remember whether any information was given to either of
23 you about --

24 **A.** Yeah, we were given some kind of leaflet, crisis. If he
25 declined even more overnight, this is what I needed to

1 call, and we were just told that during the day tomorrow
2 they would contact us, they would be trying to find a bed
3 for him and that they would contact us the next day.

4 **Q.** Thank you.

5 **THE CHAIR:** I can't quite understand how did they go from the
6 assessment, which had decided he needed to be looked
7 after in the community, and saying there were no beds
8 anywhere in the country, to letting him come back the
9 next day, they would look for a bed the next day. Do you
10 see what I mean? There doesn't seem to be much
11 consistency in that. Were they saying he would need
12 a bed and come back the next day or were they saying
13 there was no need for him to be admitted?

14 **A.** They tried a few times to get us to agree that the
15 community would be the place for him, that he didn't need
16 to be admitted, but he just kicked off and again told
17 them --

18 **THE CHAIR:** And they agreed?

19 **A.** -- to the point, he just said to them, "If you don't
20 admit me, I'm going to either go out and do something to
21 myself or I'm going to do something to somebody else to
22 make sure that I am admitted."

23 **THE CHAIR:** Thank you.

24 **A.** I don't know at what point they realised that he was
25 serious and that's what he needed.

1 **MS TROUP:** Yes, so you went away on the understanding that
2 there were no beds available in the entirety of this
3 country, but that one would be being looked for, and that
4 you would receive some contact the next day from the home
5 first treatment team?

6 **A.** Yes.

7 **Q.** That contact did come at about midday I think the next
8 day, a community psychiatric nurse came to the house to
9 see him, and you were there -- not through all of it but
10 you were there at first?

11 **A.** I was there for the whole thing.

12 **Q.** You were there throughout?

13 **A.** Yes.

14 **Q.** What you tell us is that initially during the
15 conversation with the CPN, Lee, he was quite calm.

16 **A.** Yes.

17 **Q.** And would it be right for me to say that that was because
18 the follow-up had occurred exactly as had been promised.
19 There was the step that he had been told would take
20 place, someone was there to speak to him?

21 **A.** Yes.

22 **Q.** As the conversation developed, I understand there came
23 talk of whether he might be able to see a psychiatrist
24 the next day, which would have been the 3rd or perhaps on
25 the 4th and it became apparent to Lee that he might be

1 being dismissed or that his concerns about the crisis
2 state he was in might not be being taken seriously.

3 **A.** Yes.

4 **Q.** And then he became very distressed and agitated.

5 **A.** Yes.

6 **Q.** Tell us about that.

7 **A.** He became very distressed. He laid on the floor, he was
8 crying, he punched the floor and he broke his hand, broke
9 like the knuckle on his hand, which obviously once he --
10 once they found the bed I took him over to A&E in
11 Colchester and they X-rayed it which is when we found out
12 he had actually broken it. But again the distress of
13 being told they weren't going to do what he asked them to
14 do. He became really distressed again.

15 **Q.** Of course, you tell us, but the conversation with the CPN
16 then moved to possible admission to hospital?

17 **A.** Yes.

18 **Q.** And what you tell us in your witness statement is that he
19 was incredibly emotionally distressed by that point and
20 clinging to you and sobbing. I know from your
21 photographs from the commemorative account that Lee was a
22 smoker because you had a lovely photo of him smoking
23 under a "No Smoking" sign. But even when he was told
24 that were he to be admitted to hospital restrictions
25 would apply, such as no smoking, he accepted that.

1 **A.** Yes.

2 **Q.** He just wanted the help.

3 **A.** Yes.

4 **Q.** And said so.

5 **A.** Yes.

6 **Q.** So I understand that, as you say, not many hours after he
7 had been told there were no beds at all, a bed was found
8 that day at The Lakes?

9 **A.** Yes.

10 **Q.** Did you go with him to The Lakes for the assessment and
11 admission process?

12 **A.** If I remember rightly, the lady went away because she
13 didn't come with the information that the bed was
14 available.

15 **Q.** I see.

16 **A.** She went away and then we had to wait again, but he was
17 still calm because he had been told that, yes, this was
18 going to happen, and they went away to find a bed for
19 him. Then they phoned us to tell us that the bed was
20 available and we went down there about, we got there
21 about 4 o'clock I think that day. So he packed up some
22 stuff and some toiletries and bits and I took him there.

23 **Q.** Can you remember very much about taking him there and the
24 admission process and what took place?

25 **A.** Yeah. We went in and we were met by one of the people

1 that worked there. They showed him what room he was
2 going to be staying in, showed him where he needed to put
3 his toiletries and there was a little place for his
4 cigarettes and that sort of thing, and told him sort of
5 the rules of being able to go -- because obviously he
6 wasn't sectioned so he was allowed to go outside and
7 smoke and stuff.

8 **Q.** Was there a formal -- was there a mental health
9 assessment that you remember?

10 **A.** I don't remember him seeing somebody, because it was
11 Sunday afternoon, I don't remember him seeing anybody as
12 soon as we got there. It was more sort of checking in,
13 really.

14 **Q.** As in checking in to the facility?

15 **A.** Yes.

16 **Q.** Getting him settled?

17 **A.** Yes.

18 **Q.** One of the things you say in your witness statement is
19 that during his admission you do not consider that you
20 were properly consulted as a family about any assessments
21 that might be taking place?

22 **A.** No. We were -- I went every day when I finished work and
23 I spoke to some of the professionals that he saw, and
24 they gave me an analysis of what had happened that day,
25 but I was never told, as far as I remember, I was never

1 told what was going to happen tomorrow.

2 **Q.** Or what the plan was?

3 **A.** Yeah.

4 **Q.** So on the Sunday, when you first arrived there, you left

5 Lee there obviously, because he was checked in. Did

6 anyone tell you, he was a voluntary patient, you knew

7 that, he was admitted voluntarily, he was not under

8 section. As I understand it from your witness statement,

9 the possibility of sectioning Lee was not discussed on

10 that Sunday during the sort of check-in process to The

11 Lakes?

12 **A.** No.

13 **Q.** Did anyone tell you what the plan was or did you have any

14 idea, when you walked out of The Lakes, how long he might

15 be there?

16 **A.** No.

17 **Q.** Or what was going to be happening?

18 **A.** No, I didn't know anything what was going to happen, just

19 that he would be -- anything that was going to happen

20 would be starting on the Monday.

21 **Q.** I see. And did anyone on the Sunday, while you were

22 present, ask either him or you any questions about his

23 background, mental health problems leading up to that

24 admission, what had occurred? Do you remember?

25 **A.** I don't think -- I don't remember anybody asking me any

1 questions, and I think we were only seen by an admin type
2 person for the time that I was there, it was all just
3 about -- I don't think we were seen by any kind of
4 professionals because I was not there, I remember not
5 being there very long, so it was more sort of dropping
6 him off and making sure that he was safe and calm.

7 **Q.** Yes.

8 **A.** I wouldn't say happy, but calm.

9 **Q.** He was there in fact from the 2nd, when you dropped him
10 off, until his discharge on the 6th, so not very many
11 days at all.

12 **A.** No.

13 **Q.** During the whole of that period you visited every day,
14 and he was also, as a voluntary patient, entitled to come
15 out on leave which he did. On 5 June he asked to come
16 home for the night and was allowed to come out for
17 overnight leave?

18 **A.** I think if, I remember rightly, they said that they had
19 sort of done all the assessments that they needed to do,
20 and that on the Thursday was the day they were going to
21 sit down and talk to us and give their findings and work
22 out what, moving forward, what was going to happen from
23 there. So I think -- I don't know, I can't remember for
24 definite, but maybe I sort of knew at that point that he
25 may be coming home on the Thursday, that he wouldn't be

1 staying any longer than that because he knew he was ready
2 and he knew he was in the right place -- sorry not that
3 he knew he was in the right place. He knew he didn't
4 need to be there because he could tell by the time that
5 he had been in there that as much as he thought he was --
6 how bad he thought he was, he realised that he was better
7 than he thought he was because of all the other people
8 that were in there.

9 **Q.** So seeing some of the other patients on that ward led him
10 to that realisation that perhaps it wasn't the place for
11 him?

12 **A.** Yeah, he realised that he was not as in need as some of
13 the people that were in there.

14 **Q.** During his stay, as far as you saw, you have just said
15 it, but he wasn't happy, but you described him as calm?

16 **A.** Yes.

17 **Q.** That crisis sort of agitation that you described on the
18 1st and 2nd had gone?

19 **A.** Yes, because he was being listened to and cared for.

20 **Q.** As I understand it, other than engagement with you and
21 understanding what the plan was, you have no particular
22 complaints about his stay at The Lakes?

23 **A.** No.

24 **Q.** Or about staff or about the way he was treated?

25 **A.** No, not at all. He didn't say that anything nasty had

1 happened, that he was treated badly. He was quite
2 absolutely fine about everything that was going on in
3 there, telling me little stories about some of the other
4 people that were in there and the way things had
5 happened. But even to other people he didn't -- he
6 didn't say that he had seen anything nasty in any way and
7 anybody being treated badly because I would be the first
8 person, if he had come to me and said, "Mum this
9 happened", I would have been the first person shouting at
10 them saying, "Why did you treat my son like this", but
11 nothing at all.

12 **Q.** Nothing at all, and I think, as you said, you feel that
13 short stay gave him something of a new perspective on the
14 state of his own mental health and how he might move
15 forward?

16 **A.** Yes.

17 **Q.** Most crucially, as I understand it, at some point during
18 that stay, I think on the final day, the psychiatrist who
19 was in charge of Lee's care gave him a diagnosis and that
20 diagnosis was emotionally unstable personality disorder
21 or EUPD.

22 **A.** Yes.

23 **Q.** On that first, as far as you are aware, what was Lee's
24 reaction to being given that diagnosis?

25 **A.** That finally, finally there was a reason why he was like

1 he was.

2 **Q.** Could I say that he was relieved to have the diagnosis.

3 Is that right?

4 **A.** I don't know if "relieved" is the right word, but just --

5 yeah, maybe "relieved" is the right word, but he just --

6 he just felt that there was an answer; there was, it

7 wasn't just in his head.

8 **Q.** You tell us about that diagnosis, and you tell us in your

9 witness statement that the treating psychiatrist

10 explained what EUPD is and said that it did not require

11 hospitalisation. Just so that I am clear, were you

12 present for that explanation? Is this something that you

13 were there for when that diagnosis was given?

14 **A.** Yes, but I don't know whether or not they told him before

15 because obviously I arrived later and whether or not they

16 had -- I think they did, I think they did tell him and

17 they sort of explained to him the symptoms of EUPD and it

18 sort of gave him a lot of answers as to why he felt the

19 way he did.

20 **Q.** Yes.

21 **A.** And then obviously they went through it all again with me

22 when I got there.

23 **Q.** When you say -- no go ahead.

24 **A.** What more they said to him, I don't know.

25 **Q.** Of course. In terms of what you do know because of what

1 information was shared with you, do you consider, looking
2 back, that you were given adequate information about that
3 condition and its symptoms and how to help him, bearing
4 in mind that he was coming to the end of his period of
5 hospitalisation?

6 **A.** Obviously they told me what it was, they gave me a sort
7 of synopsis of what the symptoms are, but I went home and
8 read about it properly, and yes, it did answer a lot of
9 questions and it did give me a lot of explanation as to
10 the reason why he had been like he had been for a lot of
11 his life.

12 **Q.** Yes.

13 **A.** And they just said that they would -- it would be further
14 ongoing treatment for him, counselling, teaching him how
15 to deal with the situations as they come up, teaching him
16 how to navigate the way his brain was feeling when they
17 came up. Because day-to-day, if everything was okay, he
18 was fine, he was just normal the same as the rest of us,
19 just got up, got on and worked, normal stuff. It was
20 when there was a situation that he just couldn't --

21 **Q.** These pockets of crisis that you described?

22 **A.** Yes he just couldn't, he couldn't channel his feelings
23 and work out how to deal with them. So to him it was go
24 and sit in his room for a couple of days and smoke lots
25 of weed would make it all better.

1 **Q.** So you don't know what they might have told Lee before
2 you were spoken to about that diagnosis and the plan, but
3 what you were told, is this right, that he was going to
4 be discharged that day and that there would be, then,
5 follow-up from home treatment teams?

6 **A.** Yes.

7 **Q.** And in particular, I think you were told that the first
8 follow-up would come within 48 hours?

9 **A.** Yes.

10 **Q.** As far as you are aware that's the same information that
11 Lee himself was given?

12 **A.** Yes. Well, we were told together. So whether they had
13 told him as well, but everything that happened when I
14 went to the hospital that day, he was with me.

15 **Q.** Yes. When did you first come to learn that a decision
16 had been taken to discharge Lee that day, the 6th?

17 **A.** Because he was, he self-admitted, I think he told them
18 that he wanted to go home.

19 **Q.** Understood.

20 **A.** And they didn't disagree. I don't know that they were
21 going -- if he had decided that he needed more, whether
22 they would have told him he had to go home, I don't know
23 the answer to that question.

24 **Q.** I understand.

25 **A.** But he wanted to come home.

1 **Q.** Yes. Other than being told that there would be some
2 follow-up within 48 hours and alongside what you had been
3 told about EUPD, that it didn't require hospitalisation,
4 that it wouldn't require antidepressant medication, that
5 he would likely benefit from therapy.

6 **A.** Yes.

7 **Q.** Other than that information, were you given any more
8 details, for example, about what the follow-up
9 arrangements would be or when those would occur and from
10 who?

11 **A.** Yes, we were told we would be would be hearing from the
12 mental health team and I don't remember the bit about the
13 phone calls, I don't remember what they said about the
14 phone calls, but I do remember that within two weeks we
15 would be allocated a care co-ordinator, or whatever it
16 was they called them, and --

17 **Q.** Yes, that was something -- that assurance was given to
18 you on the 6th before you left?

19 **A.** Yes.

20 **Q.** I think you make reference in your witness statement to
21 the fact that you were told he was on a waiting list.
22 Was that for a care co-ordinator?

23 **A.** Yes, so after two weeks when I hadn't heard anything I
24 called them and they said, "Yes, he's on the list, we
25 have got all of his information and he's waiting to be

1 allocated a care co-ordinator."

2 **Q.** So you leave together on 6 June, both thinking that some
3 sort of follow-up will come, even if it is just an
4 arrangement for another -- to arrange therapy or whatever
5 it is going to be, within 48 hours and that never came.

6 **A.** I don't know, because obviously they had his phone
7 number, so I don't know whether, I can't remember whether
8 or not they said that -- whether he told me that they had
9 called.

10 **Q.** Yes.

11 **A.** Because obviously he's an adult and not with me 24/7 so
12 if they did call him, I don't remember whether he told me
13 or not.

14 **Q.** I understand. You can look at it if you want to, I am
15 not suggesting that you need to, what you tell us on page
16 11 of your witness statement, and I am looking at about
17 paragraph 70, is that the later report, the RCA report,
18 tells us that that follow-up was not arranged in time and
19 that actually attempts to begin to arrange it were not
20 made until 10 June. Now those attempts did not come
21 through you?

22 **A.** No. At the time, obviously because of the problem that
23 he had with his phone before he went into the hospital,
24 he was in the middle of -- because I got him a SIM card
25 for him being in hospital.

1 **Q.** Yes.

2 **A.** So he had three different phone -- he had two different
3 phone numbers at the time and they had my phone number as
4 well. So he gave them all of the -- we gave them all of
5 the phone numbers.

6 **Q.** When did you do that?

7 **A.** When he was admitted.

8 **Q.** I see, so you know that they had your phone number and
9 his because were you present when those phone numbers
10 were jotted down?

11 **A.** Yeah, yeah.

12 **Q.** And that was on 2 June, the Sunday?

13 **A.** Yes, and his temporary phone number that, the SIM card
14 that I had bought him because the other one was broken --
15 because that was what the problem was that his SIM card
16 wouldn't work in -- it was a SIM card problem, I don't
17 know.

18 **Q.** Yes.

19 **A.** So he had three phone numbers and we gave them all and he
20 also gave them permission to speak to me if they couldn't
21 --

22 **Q.** Get hold of him.

23 **A.** In contact with him.

24 **Q.** When did he give that permission?

25 **A.** At every point, to everybody.

1 **Q.** Would it be fair for me to say that it was made clear
2 that you were to be contacted if he couldn't be reached?
3 **A.** Yes.
4 **Q.** At every stage.
5 **A.** Yes.
6 **Q.** At any stage, from 6 June when he left The Lakes to the
7 day that he died, were you contacted?
8 **A.** No.
9 **Q.** Other than the calls you yourself made to try to get
10 assistance or follow-up for Lee, you heard nothing?
11 **A.** No.
12 **Q.** We also learn from the RCA report that an appointment was
13 scheduled, apparently, for 12 June so that would have
14 been five or six days after he had left The Lakes, an
15 appointment had been scheduled for 19 June, so a week
16 later, but that apparently he didn't attend them. You
17 have seen nothing at all to indicate that he even knew
18 about those appointments?
19 **A.** No, no.
20 **Q.** He didn't speak to you about anyone arranging an
21 appointment. Certainly, as you have said, nobody
22 contacted you, and there were no letters?
23 **A.** No.
24 **Q.** He lived with you?
25 **A.** Yeah, and even if he had got in before me and opened a

1 letter addressed to him, I never found, as I have said in
2 my statement, when we were clearing his room there was
3 lots of paperwork, payslips, et cetera, but there was no
4 letters at all from them.

5 **Q.** About any appointments?

6 **A.** No.

7 **Q.** Apart from anything else, one of the things you say to us
8 in your witness statement is that you consider that if
9 those appointments were arranged and clinicians were
10 expecting him to attend, whether or not he had actually
11 been notified of them, the fact that he didn't attend
12 either of them should, in your mind, have triggered some
13 concern or some sort of action?

14 **A.** Yes.

15 **Q.** As far as you are aware, it did not.

16 **A.** No.

17 **Q.** Again Carole, looking at paragraph 74 now on page 11 of
18 your witness statement, you tell us that Gosfield Ward,
19 which is the ward he had been on at The Lakes --

20 **A.** Yes.

21 **Q.** -- told you on the 12th that they were trying to contact
22 Lee. Is that because you had called Gosfield Ward on the
23 12th? How did that contact come about?

24 **A.** Maybe that was the first --

25 **Q.** Your first call --

1 **A.** Yeah, I don't know if they called me or I called them.

2 **Q.** Understood.

3 **A.** I am sure I would have called them because he hadn't

4 heard anything.

5 **Q.** So that was the other thing, during the whole of this

6 period I understand that you are saying you can't know

7 for certain what contact was made with Lee because

8 there's a possibility he wouldn't have told you, but

9 during the period from 6 June and through that summer, he

10 was telling you that he hadn't had any follow-up contact,

11 wasn't he?

12 **A.** Well, he wasn't telling me that he had.

13 **Q.** Understood, so the other way around.

14 **A.** Yeah, he would have told me.

15 **Q.** Right.

16 **A.** If -- because, one, he didn't drive and everywhere you go

17 where we live needs transport.

18 **Q.** You would have been taxi?

19 **A.** He would have asked me to take him.

20 **Q.** Yes.

21 **A.** And asked me to come with him as well because I was

22 heavily involved in everything that was going on, and

23 obviously from when I started calling them two weeks

24 after, I knew that he hadn't had any contact with them

25 because they had told me that nothing was happening.

1 **Q.** Nothing had been done.

2 **A.** Yes.

3 **Q.** I understand from your witness statement that however

4 that contact with the ward at The Lakes had arisen on

5 12th, you did during that call voice your concern about

6 the complete absence of the follow-up that he had been

7 assured of, and what you were told is that the ward would

8 contact Lee the following day and notify the Home

9 Treatment Team, so that action would be taken?

10 **A.** Yes.

11 **Q.** That's the assurance you were given on the phone on the

12 12th. And what the RCA report tells us is that no e-mail

13 was ever sent following that call and you voicing your

14 concerns.

15 **A.** Yes, and also the 12 June was the date that I -- was that

16 the date that I spoke to them?

17 **Q.** Yes.

18 **A.** Well, they didn't say anything to me about an appointment

19 that had been made for him.

20 **Q.** For that day?

21 **A.** Yes.

22 **Q.** Or indeed for the 19th, which the RCA records as -- or

23 the records show, sorry not the RCA, the records show

24 were categorised as missed appointments.

25 **A.** Yes.

1 **Q.** Nobody said to you during that call, "Well hang on a
2 minute, Mrs Stokes, he has got an appointment today", I
3 understand.

4 **A.** Yes, yeah, because I would have made sure he'd have got
5 there.

6 **Q.** Of course. Because presumably, even by 12 June, you
7 yourself were extremely concerned given all that we have
8 said about how Lee reacted to being let down.

9 **A.** Yes.

10 **Q.** That he might on this occasion be being let down.

11 **A.** Yes. And also when I had the meeting with EPUT after the
12 Inquiry, I asked them to show me what phone number they
13 called him on because they had -- or how they actually
14 informed him of the meetings and they couldn't.

15 **Q.** They weren't able to?

16 **A.** They couldn't tell me whether they wrote to him, whether
17 they e-mailed him, whether they phoned him, and if they
18 did phone him what phone number did they phone him on,
19 because he had three phone numbers on record at the time
20 and they couldn't give me any proof at all of how contact
21 was made.

22 **Q.** What efforts they had made to contact him. That meeting,
23 I think, took place on 10 February 2020, that was a
24 meeting with the Trust?

25 **A.** Yes.

1 **Q.** Only six days after the inquest into Lee's death, did you
2 also ask at that meeting whether anyone had made any
3 attempt to contact you during the whole of that period?

4 **A.** Yes, that's what I said to them, that he gave permission
5 for me to be spoken to throughout everything so why was I
6 not -- if he didn't turn up at those appointments that
7 you say were made for him, why was I not called?

8 **Q.** And the response was?

9 **A.** That because he was an adult, that they didn't generally
10 do that and again, I explained what I have said now, that
11 for me, if my son was in a coma laying on a bed, they
12 would talk to me about his care and what was happening
13 because they couldn't talk to him. So why when somebody
14 is in mental health crisis do they not talk to somebody
15 else? Because they are not always, even though he came
16 across as being able to listen and understand, was he
17 taking it in? Was he listening?

18 **Q.** Was he stable enough to process the information --

19 **A.** Exactly.

20 **Q.** -- is one of the things you say, and able to -- he needed
21 your help is what you were making clear, I think as you
22 said, at every stage.

23 **A.** Yeah, and to make sure that, because sometimes when he
24 was in a good place he didn't feel like he needed any
25 help any more.

1 **Q.** Yes.

2 **A.** So we knew that he needed to -- I knew that he needed to
3 carry on with this because he needed to learn how to deal
4 with himself when he was in a bad place.

5 **Q.** Yes.

6 **A.** But when he was in a good place he didn't feel that he
7 needed any help at all, so to say to anybody, "Oh no, I'm
8 fine now, Im alright now", we knew that he still needed
9 that continuation.

10 **Q.** Because although he couldn't necessarily see it in an
11 ordinary or good period, you were aware and in some part
12 of him he was aware that another pocket of crisis would
13 come.

14 **A.** Yeah, yes.

15 **Q.** As I understand it, as far as you are aware, there was no
16 contact at all between 13 June, so that's the day after
17 you had a call with the ward and expressed your concerns,
18 and 7 August, because on 7 August you called and
19 expressed your frustration.

20 **A.** Yes. I had called another few times in between that
21 time. I sort of scheduled, sort of every two or three
22 weeks, so I think it works out about every -- about four
23 times I might have contacted them.

24 **Q.** Over the entire period?

25 **A.** Yes, and was told each him he's still waiting for a care

1 co-ordinator to be allocated to him. And then on 7
2 August he -- I don't think, he wasn't in a bad place but
3 he had just got up late that day for work because he went
4 to work really early, and me and him ended up having a
5 little bit of an argument and I took him to work. So
6 then I was running early for my own work that day. So on
7 the way to work I thought, "Right, I must give them
8 another call" -- I wasn't concerned about his mental
9 health on that day but I was again reminded, like trying
10 to get, to make sure that the help was coming because we
11 had been waiting for 12 weeks at that point or 8 weeks or
12 however long it works out. So I called them again and
13 this time I said to them, "I'm not accepting you saying
14 to me that he's still on this list, I want some answers,
15 put me through to a supervisor, put me through to
16 somebody that can give me an answer." So she said,
17 "Okay, I'll get somebody to call you back", and as I have
18 explained before, I used to work in somewhere where I
19 wasn't able to take phone calls all day, so when I had --
20 I don't remember whether I had a message or not on my
21 phone when I come down to the office in my lunch break,
22 but I called them and they said --

23 **Q.** Later that same day?

24 **A.** That day, yeah, so --

25 **Q.** The 7th.

1 **A.** So I either reminded myself that I needed to call them or
2 I had a message from them. So I called them and they
3 said to me, "Don't worry, we have spoken to him, we don't
4 need to talk to you now." So they had called him during
5 the morning.

6 **Q.** After your call first thing in the morning?

7 **A.** After I had called them and he was angry with me that I
8 had called them because as far as he was concerned he was
9 okay, and --

10 **Q.** Had he also given up on them in the way that you had
11 described earlier he did with his GP about the
12 antidepressants, or do you think he was still hopeful?

13 **A.** In that time I never -- I didn't have conversations with
14 him about the fact that nothing had happened because I
15 was trying to keep him positive.

16 **Q.** Yes.

17 **A.** Keep him looking to the future.

18 **Q.** And not focusing on the fact --

19 **A.** -- and not focusing on that he had been let down or he
20 was being let down, so I didn't, I tried not to talk
21 about it with him. And I didn't tell him each time I
22 called them, because again that was another thing I was
23 conscious of with the EUPD, that being let down was
24 something that was a triggering thing for him.

25 **Q.** Yes.

1 **A.** So they said, "Don't worry about it, we have spoken to
2 him."

3 **Q.** Yes.

4 **A.** So when I got home -- and at the same time my husband was
5 really not very well at all, so I had messaged Lee in my
6 lunch break because my husband hadn't answered me all day
7 and asked him would he just go and check that Gary's
8 okay.

9 **Q.** This was still on the 7th?

10 **A.** Yeah, this was on the 7th.

11 **Q.** As in just go and --

12 **A.** Just go and check that Gary's okay because he was in his
13 bed and he hadn't answered me all day. And Lee didn't,
14 and so when I got home from work I went in to talk to Lee
15 and I said to him, "I'm really upset with you that you
16 haven't let me know that Gary was okay", and he was angry
17 with me because the mental health team had called him and
18 said, "Why are you phoning them?" And I said to him I
19 didn't, I didn't want -- he was angry with me because he
20 thought that I thought that his mental health was going
21 down that day.

22 **Q.** I understand.

23 **A.** Because we had had this little argument, and he was
24 saying to me, "Mum, I'm fine, everything's fine, you
25 don't need to keep on phoning them", and like, "Why do

1 you think that just because we had a little argument that
2 I'm not well again?" But I was trying to get him the
3 help that he needed for the future.

4 **Q.** Of course.

5 **A.** Not just that day, like he thought that I thought he was
6 in crisis that day -- not in crisis but, you know, bad
7 that day.

8 **THE CHAIR:** You were trying to get them to do what they had
9 said they would do.

10 **A.** Exactly, exactly. So it was a bit of a misunderstanding
11 between us, you know, so he was angry with me.

12 **MS TROUP:** Carole, you were, if I can put it this way, you
13 were walking a bit of a tightrope because in the
14 background and quietly and without exacerbating Lee's
15 stress or sense of rejection or upset, you were
16 desperately trying to get the follow-up that you had been
17 assured would come, but also then when he did find out
18 and some contact was made, trying to ensure that he
19 wasn't upset by it, didn't feel any sense of judgment or
20 rejection from you.

21 **A.** Yes.

22 **Q.** Do you know, given those circumstances and that he was
23 angry with you about it for the reasons you have
24 explained, do you know what that conversation was, the
25 contact between him and the mental health team on the

1 7th?

2 **A.** No.

3 **Q.** Do you know whether any kind of appointment was arranged?

4 **A.** No idea. All I know is that they said to me that they

5 had spoken to him and obviously me and him argued about

6 that happening.

7 **Q.** Yes.

8 **A.** But what they told him, what they promised him, what was

9 going to happen, I don't know the answer.

10 **Q.** I understand.

11 **A.** It took him a couple of days to calm down and start

12 talking to me again. And then again, doing what I was

13 doing, whether I was right or wrong, sort of just pushing

14 it under the carpet and hoping that --

15 **Q.** Trying to keep things on an even keel.

16 **A.** And keep him on an even keel.

17 **Q.** Yes.

18 **A.** All they said to me every time I called was that he was

19 waiting to be -- a care co-ordinator and that we have got

20 phone numbers to call if he declines.

21 **Q.** Yes, and I think you were also told a number of times

22 that he -- they couldn't discuss Lee's care with you

23 because he was an adult?

24 **A.** On that day was one of the days because all of the other

25 times I called, I said to them straight away, "I don't --

1 I've got, you know, I don't want to talk about his case,
2 I just want to know when he is going to get allocated
3 somebody."

4 **Q.** Yes, you weren't asking confidential details?

5 **A.** I wasn't asking -- yeah, yeah.

6 **Q.** You just wanted to know a date?

7 **A.** Yes.

8 **Q.** I understand.

9 **A.** Maybe when I spoke to her, I did say to her so like,
10 "What was discussed?" And that's the time when she said
11 to me, "We can't discuss what we talked to him about
12 because we have spoken to him."

13 **Q.** Yes, as I understand it there was then, certainly with
14 you, no other contact.

15 **A.** No.

16 **Q.** In the rest of August?

17 **A.** Yes.

18 **Q.** I would like to move, if at all possible, to the days
19 leading up to Lee's death and the events surrounding
20 those. You tell us that I think, can I put it in this
21 way, he was fairly well for the rest of August. It was a
22 period of calm?

23 **A.** Mm hmm.

24 **Q.** Over the weekend beginning Friday 23 August he didn't
25 come out for lunch, he kept to himself a little bit and

1 said that he didn't feel very well?

2 **A.** Yeah, he had stayed at his friends for the few days
3 before because the parents were away on holiday, somebody
4 that he worked with, so they both took the week off of
5 work and they just did boy things, buggy -- what are they
6 called? Quad bikes and that sort of stuff and he had a
7 really lovely time. And he came home and he had had a
8 busy time with the other lad, and I know that there would
9 have been quite a lot of smoking going on, because they
10 both smoked together, so probably he might have been a
11 little bit more subdued because of the amount of smoking.
12 So yeah, he was very quiet. On the Friday, me and my
13 husband were off work and he -- I asked him to come out
14 to lunch with us but he didn't want to go far and I can't
15 remember the reason why, but we wanted to go somewhere
16 further and he didn't want to come out with us because we
17 were going further and were going to be out of the house
18 for X amount of time and he didn't want to be out of the
19 house for that amount of time. So he stayed at home on
20 that day.

21 **Q.** On the Sunday he went out for dinner with his sister?

22 **A.** Yes.

23 **Q.** And you say that he seemed lighter in mood and they had
24 had a good conversation and a good time?

25 **A.** Yeah, because they had had a falling out during the year,

1 they had not spoken to each other for a little while, so
2 they had a good, they had a chat and they went out, just
3 you and him together on your own, and it was nice and he
4 come home and said he felt a lot better about their
5 relationship and they had talked about the things that
6 had happened previously and he was in good spirit and
7 was, felt he was okay.

8 **Q.** On the Monday, which was the 26th, you and Lee were at
9 home together and he was quiet, just relaxed in his room.
10 You asked him about whether he was looking forward to
11 going back to work the next day and he said yes?

12 **A.** Yeah, just before he went to bed that night. During the
13 day it was very hot and I was saying to him, "Come and
14 sit in the garden with me", because my husband was at
15 work as well so it was just me and him. I was saying to
16 him, "Come and sit in the garden with me", but he didn't.
17 Then he went out on his bike for a little while.

18 **Q.** Yes.

19 **A.** But he did seem really deep in thought when he come back.
20 I just remember him coming up the drive, he seemed like
21 he was quite deep, which I think now was probably when he
22 was going, he was planning on doing what he was going to
23 do.

24 **Q.** I understand.

25 **A.** But I don't know, obviously I don't know the answer to

1 that. I booked his 21st birthday present that day,
2 taking him to Vegas, but we never went.

3 **Q.** I understand.

4 **A.** So yeah, it was just calm but obviously ...

5 **Q.** Yes. Carole, I am being reminded it might not be the
6 time, I am being reminded that we've been going for an
7 hour and 15 minutes which is a little but longer than I
8 thought. I am going to cover that day, the 27th August,
9 and then as long as the Chair is content, suggest that we
10 take a break, so you can talk to us about what happened
11 after Lee's death, the investigations and your proposals
12 for change. Is that all right?

13 **A.** Yes.

14 **Q.** I understand that on the Monday, no, it wasn't a Monday,
15 the Tuesday, the 27 August, you woke at about 6 am and
16 you found that Lee was not in the house?

17 **A.** Yes. So he started work at 6, so usually I got up and I
18 went in his room to check that he had got up because
19 usually he was out of the house by the time I got up
20 anyway. And he was not in his room.

21 **Q.** But I think his work bag was there?

22 **A.** Yes, his work bag was there and then I went downstairs
23 and the key was in the door, which meant that it was
24 still locked. And then I went out the back, and it was
25 still locked so all the doors were locked, which was a

1 bit odd. And then I went out the front and his bike was
2 there so and that's how he got to work. And that was
3 when I started realising that -- and his work bag was
4 there in his room, so that was when I called, first of
5 all, called his work friend and because he had already
6 started work, he didn't answer me for a while.

7 **Q.** Yes.

8 **A.** And then I started calling his phone. I can't ... it was
9 the fact that all the doors were still locked that I knew
10 that something was different.

11 **Q.** All was not well?

12 **A.** Yes, yes. So that was when I started calling him and
13 calling his work, calling his friend.

14 **Q.** And I understand that eventually one of the calls you
15 were making to Lee's phone was answered by a police
16 officer?

17 **A.** Yes.

18 **Q.** He asked you where you were --

19 **A.** Yes.

20 **Q.** -- and came straight to the house.

21 **A.** Yes.

22 **Q.** And then he told you that Lee had been found in woods,
23 and I mention this only because it's something that you
24 note, that that officer showed you a photograph of the
25 note that Lee had left?

1 **A.** Yes.

2 **Q.** You, I think, the following days are mostly a blur, the
3 days that follow after that?

4 **A.** Yeah -- well, no, I remember a lot of it.

5 **Q.** Okay. The next day I think, on the 28th, you went with
6 your son and Lee's father?

7 **A.** Well we all went together, but it was my son and his dad
8 that went in to identify him.

9 **Q.** Yes. You tell us, and we will come back to this after we
10 have a break, that no one explained to you what would
11 happen next, what the processes were, or offered
12 assistance at that time?

13 **A.** I don't know. Everybody else did all the talking for me
14 at that point.

15 **Q.** I understand, and that at some point on 28 August, the
16 family having gone and your son and Lee's father having
17 identified his body, you made a call to the Trust to say
18 essentially, "You can take him off your books"?

19 **A.** On the way home from the hospital, yeah, that's what I
20 phoned them and said, "Take him off your list now he's
21 not here any more", out of anger.

22 **MS TROUP:** Chair, I wonder if you would be content that we
23 take a short 10 or 15 minute break now?

24 **THE CHAIR:** Yes.

25 **(11.45 am)**

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(Break)

(12.05 pm)

MS TROUP: Carole, before the break we went through the events of Lee's death, and one of the things that you tell us in your witness statement is that looking back, you consider that the way in which you were told about his death and shown the photograph of the note, was brutal, if I can put it that way?

A. Yes, but any way would have been brutal.

Q. Yes. Thereafter, after your family had gone to identify Lee's body, you were, in your words, left to cope alone.

A. Yes. Yeah.

Q. The contact you received, as I understand it, was that on 29 August you received a letter from the Trust to tell you that they would be investigating Lee's care and that they would be liaising with the Coroner's office. You had a similar letter on 17 September 2019, sent under the duty of candour, offering you an opportunity to contribute to the investigation?

A. Mm hmm.

Q. And you chose not to do that?

A. Mm hmm.

Q. Why was that? Please understand that isn't a criticism, just help us understand why you decided not to contribute to the process.

1 **A.** Grief, anger.

2 **Q.** Yes.

3 **A.** Lots of communication now and not in the previous 12

4 weeks.

5 **Q.** When you needed it?

6 **A.** Yes, every letter I received, that was my answer, "You

7 are talking to me now" --

8 **Q.** Why now?

9 **A.** -- "because you are trying to ensure that you show that

10 you are paying attention and dealing with the issue, when

11 the issue is no longer here, so what's the point in

12 trying to work out what went wrong?"

13 **Q.** Yes. You received a copy of the RCA report that was

14 dated October 2019, you received it in January and as I

15 understand it, at the time you tried to read it and

16 process it and make notes?

17 **A.** Yes.

18 **Q.** But you just couldn't take it in at that time?

19 **A.** As I remember it, I don't remember any other way, I

20 received it as part of the inquest bundle.

21 **Q.** I see. Not before then?

22 **A.** Which also enclosed witness statements of how they found

23 him and lots of other stuff. So taking on board what

24 they had written in that then was not the time for me to

25 be working, you know ...

1 **Q.** Carole, did anyone prepare you for the kind of material
2 that was likely to be in the inquest bundle?

3 **A.** No. I don't think so. I think there was ... I think I
4 remember receiving some information about how the inquest
5 is, the procedure and -- but not, I had never been
6 involved in anything like that before so I didn't know
7 what I was expecting. I knew it was going to be hard and
8 I knew it was going to be horrible.

9 **Q.** That contact that you received, was it from the Coroner's
10 office, do you think, about the process?

11 **A.** I think so, yes. I think when they sent me the dates,
12 because the inquest was supposed to be another date but
13 they had to put it back a week, so I think they sent me
14 some attachments to the e-mails then of the procedure and
15 what an inquest was for and all that sort of stuff.

16 **Q.** Do you know why it was put back by a week?

17 **A.** I can't remember why.

18 **Q.** The inquest took place on 4 February 2020 and you did
19 attend?

20 **A.** Yes.

21 **Q.** As I understand it, you had no legal representation?

22 **A.** No.

23 **Q.** Did you know, you as family, before the inquest, that you
24 could seek legal representation?

25 **A.** It may have been in one of the leaflets, but I didn't, at

1 that time didn't understand the enormity of this
2 situation. I thought I was the only person in the world
3 that anything like this had ever happened to, so I didn't
4 feel like there was -- I wouldn't have even thought of
5 having legal representation because to me, there was
6 nothing to need -- I didn't need it.

7 **Q.** You didn't think there was anything that you needed to be
8 represented about?

9 **A.** No.

10 **Q.** You had no awareness at the time that you might not be
11 the only family or the only mother who found herself in
12 this position?

13 **A.** Mm hmm.

14 **Q.** Do you remember much about the inquest itself, about the
15 day?

16 **A.** Yes.

17 **Q.** Can you remember whether or not the Coroner issued a
18 Prevention of Future Deaths report to the Trust?

19 **A.** She gave them four weeks, which actually was two months,
20 I read in this, I thought it was four weeks, to provide
21 some information on how they would go in the future,
22 which I think that's what that's called. But I remember
23 her giving them the time to come back to her with a
24 report on the situation.

25 **Q.** And that would have been about, so to your recollection

1 they were going to be asked to provide information within
2 that specified time period?

3 **A.** Yes.

4 **Q.** About sort of lessons learned and action that was going
5 to be taken to stop something like this happening to
6 another family?

7 **A.** Yes.

8 **Q.** I then understand that there was a meeting with the Trust
9 that you attended just six days later, that's 10 February
10 2020.

11 **A.** Yes, they approached me after the inquest, we all went
12 into a room.

13 **Q.** On the day?

14 **A.** On the day.

15 **Q.** Yes.

16 **A.** And they asked to talk to me then and asked if I would go
17 and sit in a room in the inquest, in the court, and talk
18 to them and I said no. One, because we were -- we were
19 planting a tree for Lee that day; and two, because how
20 could I sit and talk about all of this after the inquest
21 that we had just been to?

22 **Q.** Yes.

23 **A.** So I said, "No, but I will talk to them."

24 **Q.** But not that day?

25 **A.** Not that day.

1 **Q.** So the meeting was arranged for the 10th. We have spoken
2 about that, I think. You must tell me if I have missed
3 something. You did manage during the meeting to begin to
4 question how could this have happened?

5 **A.** Yes, that was when I went through the report and on my
6 copy of that I have got all questions and notes.

7 **Q.** Notes that you made?

8 **A.** Yes, questioning the answers that they gave, and actually
9 challenging their answers and how did they do this, like
10 the phone number situation, what number did they call.

11 **Q.** Yes.

12 **A.** Where are the notes, show me the notes of the contact
13 that you made?

14 **Q.** Yes.

15 **A.** And things like that. I went through the report and
16 questioned the things.

17 **Q.** Is it fair for me to say that you came out of that
18 meeting, on those major issues around the contact and the
19 lack of follow-up care, with no satisfactory answers?

20 **A.** No, not at all. And then they wrote again an addendum to
21 the report, about another week later, answering the
22 questions. So the second letter was answering the
23 questions that I had given them at the meeting.

24 **Q.** And do you consider that those answers were satisfactory?

25 **A.** No, not at all. There was no -- really there was no

1 answers to the questions that I had made. They couldn't
2 answer the questions because they didn't have the
3 information or any kind of reporting system or anything
4 to say. We went back to our notes and we could see that
5 we did this and we did this. They had nothing.

6 **Q.** It wasn't there?

7 **A.** No.

8 **Q.** If you want to look at it, Carole, I am looking now at
9 the top of page 16 of your witness statement, where you
10 have very helpfully set out some of the failings that the
11 Trust acknowledged in its -- in the Root Cause Analysis
12 investigation, and those starting at paragraph 108, are a
13 delayed and inadequate follow-up.

14 **A.** Mm hmm.

15 **Q.** I think you might say a little more than inadequate.
16 There was none --

17 **A.** No.

18 **Q.** -- as far as you could see?

19 **A.** No.

20 **Q.** Poor communication and poor documentation?

21 **A.** No communication and poor documentation.

22 **Q.** A failure to follow the disengagement policy.

23 **A.** Mm hmm.

24 **Q.** Their own disengagement policy. A lack of family
25 involvement, despite consent having been given on a

1 number of occasions, and certainly at every crucial stage
2 --
3 **A.** Yes.
4 **Q.** -- and lessons not implemented?
5 **A.** Yes.
6 **Q.** By that I understand that there was some sort of
7 recognition, at the very least, that nobody did anything
8 about the concerns that you were repeatedly raising?
9 **A.** Mm hmm.
10 **Q.** And I understand that you agree with those findings, or
11 the acknowledgment of those failings?
12 **A.** Yes.
13 **Q.** But that you consider that it goes deeper than that; that
14 the failings are more than are acknowledged in that list?
15 **A.** Yes.
16 **Q.** You say it at paragraph 116, looking at the same page, at
17 its baseline you consider that if the Trust had followed
18 its own policy, Lee would still be with you?
19 **A.** Mm hmm.
20 **Q.** He was willing to engage, he was relieved by the fact of
21 a diagnosis and he was hopeful?
22 **A.** Mm hmm.
23 **Q.** And that hope was then shattered by a complete lack of
24 action and a complete lack of follow-up?
25 **A.** Mm hmm.

1 **Q.** As a family, my understanding is that you feel utterly
2 let down?

3 **A.** Yes.

4 **Q.** And as a mother, I understand that your overall feeling
5 and your lasting feeling certainly now, is one of anger?

6 **A.** Yes.

7 **Q.** Is that right?

8 **A.** Yes.

9 **Q.** At paragraph 119, on the final page of your witness
10 statement, you have set out a number of things that you
11 call on the Chair and the Government to action very
12 strongly, and those are as follows: to recruit more
13 medical professionals and support staff; to implement a
14 more robust and accurate recording system; to improve
15 training for community mental health staff; to ensure
16 better communication with next of kin and greater
17 involvement with families in care planning, and
18 engagement with families in general I think you would
19 say?

20 **A.** Yes.

21 **Q.** To improve communication with patients, and of course to
22 strengthen and enforce discharge planning and follow-up
23 procedures?

24 **A.** Yes.

25 **Q.** Having been through all these matters this morning in

1 your evidence, is there anything at all that you want to
2 add to that list or anything more that you want to say
3 before we come to the close of your evidence?

4 **A.** No. Just that, obviously, this has been a huge learning
5 curve for us because we have not been involved in
6 anything like this before, and hindsight is a wonderful
7 thing, and I would have been a lot more involved and
8 kicked off a lot more by insisting help and, you know,
9 but as I said, I trusted them and look where it got us.
10 It's just really sad and lots of other families are in
11 the same situation because they have just let everybody
12 down.

13 **MS TROUP:** Carole, thank you. Chair, that brings me to the
14 end of this witness's evidence and that brings us also to
15 the end of public hearings for today.

16 **THE CHAIR:** Is there a photograph?

17 **MS TROUP:** There is a photograph, thank you. I will ask that
18 that be shown now. That was Lee on the left?

19 **THE WITNESS:** Yes.

20 **THE CHAIR:** Thank you for letting us see that and thank you
21 for letting us hear your evidence. I know it has been
22 really upsetting but we really appreciate it.

23 **MS TROUP:** Thank you.

24 (12.20 pm)

25 (Break)

1 **(12.26 pm)**

2 **HEARING MANAGER:** As there are no further Rule 10 questions,
3 we will close proceedings for today and resume tomorrow
4 at 10 am. Thank you.

5 **(12.27 pm)**

6 **(Adjourned until 10 am on 22 October)**

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I N D E X

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