POSITION STATEMENT

IN THE MATTER OF THE LAMPARD INQUIRY

ON BEHALF OF ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

Filed pursuant to Section 21(2) of the Inquiries Act 2005 in response to the Section 21(5) Notice dated 22 April 2026

WITNESS STATEMENT OF PAUL SCOTT, CHIEF EXECUTIVE OFFICER

SECTION ONE: OPENING STATEMENT

1. This Position Statement is provided on behalf of Essex Partnership University NHS Foundation Trust ("EPUT" or "the Trust") in response to the Section 21(5) Notice issued on 22 April 2026, and to the questions set out in Appendix A to that Notice.

2. EPUT recognises the profound importance of the Inquiry to bereaved families and to understanding events that occurred over many years across predecessor organisations and EPUT itself. The Trust recognises the importance of assisting the Inquiry in establishing a full understanding of matters relevant to its Terms of Reference and in identifying learning that may improve future services.

3. This Position Statement has been prepared by EPUT, at the request of the Chair, in response to the Section 21 Notice dated 22 April 2026. The Notice sets out a range of questions which the Trust seeks to address with candour, clarity and transparency. Broadly, these questions relate to:

    (a) The capability and capacity of EPUT to meet its obligations to support the Inquiry;

    (b) Information records and information management arrangements;

    (c) Senior leadership transition and evidential continuity; and

    (d) Reflection and learning.

4. The Trust recognises that aspects of its engagement with the Inquiry have not consistently met the standards expected by either the Inquiry or the Trust itself. Where shortcomings have occurred, the Trust recognises the impact these may have had on the Inquiry, Core Participants and bereaved families and offers its sincere apology.

5. The Trust has sought to reflect on those shortcomings, understand the factors contributing to them, and implement substantive changes to strengthen its response arrangements.

6. Some of the matters set out below, in seeking to clarify the structure of EPUT's team and its responses to R9 requests, address the role of EPUT's legal team. Information has been included for the sake of candour and completeness, but it does not amount to

a waiver of the legal privilege which attaches to the communications between those teams.

Essex Partnership University NHS Foundation Trust (EPUT)

7. EPUT was formed on 1 April 2017 and has been in existence for just over six years of the Inquiry's Relevant Period, which covers 24 years. EPUT was formed by the merger between South Essex Partnership University Foundation Trust ("SEPT") and the North Essex Partnership University Foundation Trust ("NEP"). As the successor in title of these predecessor Trusts, EPUT holds document repositories relating to these earlier periods. EPUT also inherited their liabilities – including criminal liabilities such as the responsibility of responding to the Health and Safety Executive (HSE) prosecution which took place over 2020- 2021. Baroness Lampard will be aware however, that EPUT Board's legal duty is in respect of the leadership and performance of the current Trust.

8. EPUT is a community health and mental health services provider. The Trust employs approximately 6,370 staff members across more than 200 sites and delivers community health, mental health and learning disability services to a community of more than 3.2 million people living across Luton and Bedfordshire, Essex and Suffolk. The Trust operates from multiple sites and facilities within these regions, providing services for a wide range of health needs and caring for more than 100,000 people at any one time.

9. Essex Mental Health services covers all levels of mental health care and supports people with a wide range of conditions, from mild to severe, across all age groups. It is a complex system involving several agencies such as NHS Trusts, charities, and social care providers, with connections to education, housing, and the police. This is not unique to Essex. Effective collaboration between these agencies is crucial, as problems in one area - like a shortage of local authority places - can cause delays in discharge, leading to patients being placed outside Essex or kept in A&E or other safe locations longer than necessary, or supported in the community whilst they wait for a bed, which may be longer due to system flow issues.

10. Responding to the demands of a statutory Public Inquiry is not a core function of an NHS Trust, and the skills, systems and processes required to do so effectively are materially different from those deployed in clinical service delivery.

11. The Trust recognises that its ability to support the Inquiry has evolved significantly over time. The reasons for underlying delays and requests for extensions developed progressively and reflected increasing complexity, growing volume of work and shortcomings in organisational arrangements that became apparent as the scale of the Inquiry intensified. However, it is EPUT's view that it is also important to understand the volume and scale of the Inquiry's requests to the Trust. As a result, we have asked for and received from the Inquiry, advance notice of requests which will be sent and would request that there is more scope for liaison on the wording and focus of the actual requests to enable responses which meet the Inquiry's expectations.

12. The Trust recognises the inherent limitations which have impacted its ability to provide complete assurance in all areas, particularly in relation to historic records, legacy systems and pre-merger organisations. These limitations arise from the nature of long term data retention, system changes (both local and national) and organisational evolution. The Trust has sought several times to identify and explain these limitations transparently to the Inquiry and constantly seeks to mitigate their impact wherever possible.

13. Given the significance and seriousness of this issue, the Chair has indicated she is considering whether to hear oral evidence from EPUT in relation to this Position Statement during the July 2026 hearings. EPUT understands that indication, with the signatory of this statement, and all relevant senior officers, available to give evidence.

SECTION 2: EXECUTIVE SUMMARY

14. The Trust sets out in **Annex One** the number of Rule 9 requests received and responded to since April 2024 to end April 2026.

2024: Stable demand and emerging patterns

15. In 2024 the Trust responded to seven (7) Rule 9 requests. None required extensions. The Rule 9 requests during this period largely comprised record retrieval exercises that could be supported through established administrative and non-clinical processes.

16. Overall demand remained manageable and there was no indication at that stage that existing arrangements were insufficient.

2025: Increasing complexity and emerging pressure

17. In 2025 the Trust responded to sixty five (65) Rule 9 requests. Out of those, eighteen (18) required agreed extensions. During this period the number and nature of requests evolved significantly. Requests increasingly moved beyond being simply document retrieval exercises and instead required extensive analysis of documents, interpretation and input from those with the relevant clinical expertise. This created new demands on senior clinical staff and specialist resources.

18. Those pressures became increasingly evident during the latter part of 2025, particularly in relation to Rule 9(26). Existing governance, programme oversight and quality assurance arrangements proved insufficient for the scale and complexity of work required.

19. As a consequence, the Trust increasingly relied upon deadline extensions and, on occasions, did not meet the revised dates. These pressures exposed weaknesses in the Trust's programme management and its oversight and quality assurance arrangements that had not previously been apparent. This led to a pattern of reliance on deadline extensions becoming established.

20. In December 2025 the Inquiry advised the Trust that the anticipated volume of future Rule 9 requests would increase further.

2026: Remedial action and recovery

21. In 2026 alone (up to 22 May 2026), the Trust has responded to one hundred and twenty six (126) Rule 9 requests. Twenty five (25) required extensions. In addition, the Trust received seventy six (76) patient case summaries for factual review. Approximately sixty four (64), or more, are anticipated over June and July 2026, representing an additional workstream to sit alongside the Rule 9 work.

22. It became apparent in early 2026 that both volume and complexity had substantially increased. As a result, the Trust recognised that increased capacity was required, although the nature of that support was often dependent on the specific subject matter of individual requests. Whilst the Trust maintained flexibility to respond to records-based requests, analytical responses required highly specialised expertise. For example, safeguarding requests required senior safeguarding expertise, whilst requests relating to older adult services required specialist clinical input. Clinical specialists typically

required advance notice to release clinical commitments and support Inquiry work, creating unavoidable delays in mobilisation.

23. The Trust accepts that it underestimated the organisational infrastructure, programme management and executive oversight required to support demands for evidence from the Inquiry of this scale and intensity. In response, the Trust implemented a substantial remedial programme designed to strengthen governance, oversight and capacity arrangements. This included:

    (a) The appointment of a dedicated Senior Responsible Officer

    (b) Strengthened oversight and accountability;

    (c) Facilitating several staff secondments and transfers;

    (d) Increased legal, programme and clinical support;

    (e) Revised systems for tracking and escalation of Rule 9 requests;

    (f) Strengthened governance and quality assurance arrangements; and

    (g) Development of a more structured Programme Management Office approach with further external support commissioned.

24. These changes have resulted in a more stable and coordinated operating model.

25. Whilst the Trust recognises that confidence must be rebuilt through sustained performance over time, it considers that its governance and operational arrangements are now materially stronger than those in place during much of 2025 and early 2026.

26. The Trust remains committed to engaging openly, transparently and constructively with the Inquiry and to ensuring that lessons identified continue to inform both Inquiry arrangements and wider organisational governance.

SECTION 3: SUBSTANTIVE RESPONSES

PART A: DEADLINES AND EXTENSIONS

27. Over a period of time, EPUT failed to meet deadlines on multiple occasions, reflecting a combination of structural, technical and resource-related challenges. EPUT does not seek to excuse this pattern; it takes responsibility for it. These issues are addressed in detail throughout this statement but in summary, EPUT identifies the following as the principal contributing factors:

    (a) Scale and complexity underestimated at the outset: EPUT is the primary corporate core participant in a statutory Inquiry with wide-ranging Terms of Reference covering almost a quarter of a century. The scale of information required by the Inquiry and the complexity of the issues raised for EPUT to address under its obligations were not fully appreciated until after the early stages had been completed and greater demand was put on EPUT. As a result, EPUT accepts that following the initial stages of the Inquiry, it did not resource or structure its responses at a level to meet the scale and complexity of those obligations. EPUT has received over 208 rule 9 requests to date (inclusive of follow up requests to existing Rule 9 requests) – **Annex 2**

    (b) Data architecture and legacy systems: There is no interoperability between NHS data systems, either current or archived. Requests for data require searching across multiple systems including electronic patient records (of which there are multiple types, e.g. Paris, Mobius), shared drive folders, archives and paper records. Further complications arise where documents have been stored or saved differently, depending on the historical approach of previous organisations. This can lead to data gaps and impact on the time taken to undertake searches, with EPUT at times being unable to verify whether a document exists or existed at all.

    (c) Governance and Quality Assurance ("QA") structure: EPUT's QA process initially occurred too close to submission deadlines, preventing rectification of errors before deadlines expired. The model of administrative roles reporting solely into Associate Directors proved insufficient once the volume of Rule 9 requests escalated significantly from November 2025 onwards given the number and complexity of those requests. This structure has now evolved to meet the demands on the Inquiry.

(d) Staffing and skills constraints: The staffing and skills constraints have included issues relating to the lead times required to deploy specialist resource, the availability of skilled staff, and the competing operational and regulatory duties of specified clinical staff who are required to provide mental health services alongside contributing to Rule 9 responses. Further, staff members who were employed by NEP and SEPT either no longer work for EPUT or were significantly more junior at that time and so did not have organisational decision-making responsibilities or involvement in them.

(e) Pre-merger structural limitations: EPUT inherited complex, fragmented and partially incomplete clinical and corporate records from NEP and SEPT. Significant portions of those records predate any electronic record-keeping infrastructure now available to EPUT, which means they are on paper and can only be searched manually.

28. The timeframes provided by the Inquiry were challenging, with substantive information requests required to be returned within a range of 18 to 25 working days. These requests required complex and document-heavy responses, covering a wide breadth of queries across the Relevant Period as a whole. The question sets as framed have been detailed and required EPUT to cast a wide net across an extensive period, increasing the risk of discovering issues which would impact on the timeliness of the response. The Trust's failures to meet those deadlines reflect a combination of insufficient time to respond, coupled with structural, technical, and resource related challenges that were not fully foreseeable at the outset. The Trust acknowledges that the initial deadlines have been extended by the Inquiry but even revised timeframes were highly challenging, given the true scope of the disclosure exercise. It has often been the case that only once work began, and data was actually retrieved and interrogated, that the scale of the request became properly or fully apparent.

PART B: THE 13-16 FEBRUARY 2026 ASSURANCE

29. In order to address specific issues raised by the Inquiry it is necessary to set out the detail of the history leading to the Inquiry's request for eight (8) Rule 9s to be submitted to the Inquiry by 16 February 2026 and why this deadline was not met in respect of all of those Rule 9s.

30. In November 2025 EPUT received twenty three (23) Rule 9 requests; in December 2025 EPUT received thirty four (34) Rule 9 requests; in January 2026 EPUT received sixteen

(16) Rule 9 requests and in February 2026 EPUT received forty four (44) Rule 9 requests from the Inquiry. Over that four month period EPUT thus received one hundred and seventeen (117) Rule 9 requests. In the same four-month period EPUT delivered ninety two (92) Rule 9 submissions to the Inquiry. **Annex 3**

31. In February 2026 EPUT fell behind in the delivery of Rule 9 requests by the specified Inquiry deadline and in some cases without prior requests for extensions or notification to the Inquiry. For this EPUT apologises. This situation led to the Inquiry requiring the delivery of eight (8) Rule 9 requests by 16 February 2026.

32. In relation to those eight (8) Rule 9 requests, one (1) was delivered on 9 February 2026, three (3) were delivered on 16 February 2026, three (3) were delivered on 17 February 2026 and one (1) was delivered on 26 February 2026.

33. EPUT accepts it provided assurances to the Inquiry that all eight (8) Rule 9s would be delivered on time and that it failed to do so. Those assurances were given because at the time, EPUT believed that the administrative team had completed the searching and retrieval of documents required to be submitted and that the only remaining step was quality control. It was not until the quality assurance process was undertaken, in close proximity to the deadline, that it became apparent that further searching and retrieval of documents was required and that the deadline of 16 February 2026 could no longer be met in respect of all eight (8) Rule 9s. By letter of 20 February 2026, EPUT wrote to the Inquiry to issue a formal apology and to set out an explanation for the missed deadline and the lessons and improvements that EPUT had put in place, as a result, to avoid such a situation occurring again.

34. EPUT accepted that the quality assurance process occurred too close to the deadline for submission and took immediate steps to rectify this by restructuring its Inquiry Project team ("Project Team") and improving reporting lines so as to ensure that any risks to future deadlines would be identified and escalated at a much earlier stage. In February 2026, EPUT introduced a revised quality control model which saw the introduction of three additional staff members responsible for reviewing the gathering of information and documents by the team's administrators and completing quality assurance of the material.

PART C — SEARCH CAPABILITY AND SYSTEMS

35. The Chair is unclear on what EPUT's electronic search capabilities or limitations are. Specifically, the Chair wishes to know whether there is an ability to search the body of a document contained within EPUT's systems rather than just the document title.

36. As previously stated, EPUT currently uses several different systems, including those inherited from predecessor organisations, and search tools to respond to Rule 9 requests. The Trust does not hold all relevant information within a single integrated system or even within systems which operate on an interoperable basis. Consequently, searches need to be undertaken across multiple platforms depending on the nature of the request, the time period involved and the specific predecessor organisation or service to which the request relates.

37. It may be helpful to indicate that as a result of the merger which formed EPUT, the organisation inherited and has used multiple legacy systems across different services and geographical areas. Further, it remains the case that some historic records remain paper based, some legacy systems are no longer in active use, and some older systems are not fully compatible with current search tools. This means that there is a complex data and information system operating across EPUT.

38. The Trust therefore undertakes searches in a layered and often decentralised way, drawing together information from multiple sources before responses are provided to the Inquiry. **Annex 4** contains a list of all systems used by EPUT and its predecessor organisations, SEPT and NEPT, with detail of the data each system contains, the years it covers, which Trust used the system and what can be searched within the system. This information is used by the Project team when deciding what searches should be undertaken. The Trust aims to make sources of data transparent and to set out the methodology applied to each Rule 9 response within the response itself although it is accepted that the aim to include this information has not been consistently met.

39. It should also be noted that prior to 2025, the Trust's electronic search capability was significantly more limited. Searches were largely dependent upon document titles, file naming conventions and the correct spelling of names or identifiers. This created obvious limitations in identifying relevant material, particularly across historic records and legacy systems.

40. To strengthen its response capability, EPUT introduced two principal search platforms specifically to support Inquiry work: Relativity and Netwrix. Both systems are capable of

searching within document titles and, where searchable documents are available, within the body of documents themselves.

41. Relativity was introduced in April 2025 and is used as a central document review platform for Inquiry material. It contains a wide range of documents relevant to the Inquiry, including historic records, Rule 9 responses, policies, committee papers, investigation reports and illustrative case material. Relativity searches documents that are uploaded to the system including paper records that it has located and which fits the above criteria.

42. Its capabilities include searching and locating relevant documents though relevant keywords and search terms across document titles and within the body of the document if it is in text format. If the document is saved as an image, it has the capability to read the text, if the image is clear. It cannot read handwriting. The platform enables more effective searching and review of material across a consolidated database of Inquiry-related documents. Relativity's database continues to be updated with material that has been located and currently contains a repository of some 167,000 documents.

43. Netwrix was introduced on a pilot basis in August 2025 and is used to search material held within the Trust's shared drives. It is a data classification and search tool allowing EPUT to more thoroughly search its shared drives than if it relied on Windows search functionality alone. Netwrix searches all text within documents using key search terms across document titles and within the body of the document. It cannot search phrases, only key words. The section of the document containing the key words can be read on screen, to quickly determine its relevance to the Inquiry's request relatively quickly. Unlike Relativity, it cannot search within an image file. The system allows searches across document text and metadata and has improved the Trust's ability to identify potentially relevant material held within existing network locations.

44. Whilst these systems have materially improved the Trust's search capability, important limitations remain. In particular:

    (a) no single system contains all potentially relevant information;

    (b) some historic records remain paper based or exist only as scanned image documents which are not fully searchable electronically;

    (c) some legacy systems are not fully accessible through current search tools;

(d) searches remain dependent on the quality and consistency of historic record keeping and filing practices;

(e) documents which were misfiled, anonymised or inconsistently named may not always be identifiable through electronic searches alone;

(f) and some historic records may no longer exist due to historic retention and destruction practices which pre-dated the Inquiry;

(g) password protected documents when the password may be unknown;

(h) document quality limiting the system's ability to search text;

(i) the destruction of records both as a result of policy and the SEPT asbestos issue;

(j) records not being linked to an individual;

(k) the inability for Netwrix to conduct phrase searching.

45. The Trust has also identified limitations in relation to historic email records. NHS Mail, adopted by the Trust in 2018, is a nationally managed system with centrally applied retention rules. The Trust does not control those retention periods. In addition, the Trust utilises Mailsafe archive system, which was implemented in 2017, after the formation of EPUT to prevent inboxes getting full. This system was not implemented as a formal forensic archive system or used as a formal record keeping process and is therefore not subject to record management policies by way of minimum or maximum retention policies. The Trust therefore cannot provide assurance that all historic emails have been retained or remain searchable.

46. As a result, comprehensive retrospective email searches across all potentially relevant staff, time periods and services are often not reasonably practicable or proportionate given the scale and complexity of the Inquiry. Decisions regarding whether email searches are undertaken are therefore made on a case-by-case basis having regard to the nature of the request, the likely relevance of email material and the proportionality of the exercise required. In reflecting on this issue, the Trust will now keep a list of these decisions to enable the establishment of a clear audit trail relating to specific R9 requests.

47. The Trust recognises that no search methodology applied across multiple historic systems and records, can provide absolute assurance that every potentially relevant document has been identified. The Trust has therefore adopted an approach focused on reasonableness, proportionality and layered validation and this includes:

    (a) Consideration of the issues raised by the request;

    (b) the multiple potential data sources following receipt of each Rule 9 request, including those available at the relevant time;

    (c) involvement of subject matter experts familiar with the relevant services, systems and historic practices;

    (d) use of multiple search tools where appropriate;

    (e) iterative review where new information or issues emerge during drafting;

    (f) escalation of identified limitations and risks;

    (g) and retrospective validation exercises where concerns or gaps have subsequently been identified.

PART D: SEARCH/SCOPE DECISIONS AND RETROSPECTIVE REVEW

48. The Trust's approach to determining which systems, records or categories of material should be searched is dynamic and depends on the nature of the specific Rule 9 request. Following receipt of a request, the Project Team, Response Lead and relevant subject matter experts consider it and the proportionality and feasibility of the searches required to address the issues raised.

49. This assessment continues throughout the drafting process as new information, additional sources or previously unidentified limitations may emerge during the course of responding.

50. The Trust recognises that responding to Rule 9 requests is not a linear process. The breadth of requests, the number of systems involved and the historic nature of much of

the material means that additional sources, gaps or limitations may only become apparent during the course of the work.

51. The Trust accepts that decisions not to search particular systems or categories of material carry a risk that some relevant information may not be identified. It is not possible for EPUT to ensure that relevant material is not omitted from its searches; however this reflects the nature of the document search process adopted and which the Trust has described in Part C. The Trust consider this process to be extensive and proportionate, however, the very nature of using a process to identify the documents which exist and which are relevant does not lend itself easily to generating a definitive list of absences in documentation. The Trust mitigates that risk through a combination of professional judgement, subject matter expertise, layered searching and validation processes.

52. For example, where a request relates to a patient known only to one predecessor organisation, searches may initially focus on the systems and records relevant to that organisation and time period. However, consideration is also given to whether the patient may have had contact with other services or systems which would require broader searches to be undertaken. Where located and relevant documents are identified, they are disclosed accordingly.

53. EPUT does not maintain a record of decisions not to search particular categories of material but does seek to maintain transparency with the Inquiry regarding the searches it has undertaken and any known limitations through the methodology sections included within Rule 9 responses and related correspondence.

54. The Trust has also undertaken a number of retrospective reviews and validation exercises during the course of the Inquiry where concerns, discrepancies or potential gaps have subsequently been identified. These include:

    (a) iterative revisions of the List of Deceased;

    (b) manual review of 3,819 Serious Incident reports;

    (c) review of records relating to 2,200 patients following identification of a data migration issue;

(d) retrospective validation exercises relating to Ombudsman and complaint records and;

(e) revised search protocols following issues identified during Rule 9(35).

55. The Trust considers these exercises to be important examples of organisational learning and continuous improvement during the course of the Inquiry.

56. The Trust accepts that limitations remain within its historic systems and records. However, it considers that its search capability, governance arrangements and validation processes set out in Parts C and D are materially stronger than those in place during earlier stages of the Inquiry and that significant improvements have been made to support a more reliable and coordinated approach going forward.

57. The Trust has set out in its responses to 9 (18), (35) and (45), that emails searches were not included as a source due to the existing searches undertaken producing results. The Trust informed the Inquiry in each individual response The Trust has responded to one hundred and forty five 145 patient Rule 9s (including follow up requests).

58. Responses provided by the Trust prior to August 2025 were formulated without the benefit of Netwrix. There has been no retrospective review of those responses save for those where the Inquiry has made an additional request under the same Rule 9.

59. EPUT does not intend to apply Relativity searching retrospectively since the information uploaded to Relativity comprises those documents that have already been located.

PART E — USE OF TECHNOLOGY AND AUTOMATED TOOLS (AI)

60. EPUT Project team are considering the use of Microsoft Co-pilot with a closed system licence to assist in future Rule 9 process.

61. EPUT's legal team has indicated its use of AI through a procured bespoke, closed system to assist with several document-focused tasks in connection with Rule 9 responses. Specifically, AI has been used to:

(a) Identify substantive changes between policy versions in relation to R9 (25), (27) and (145), similarly, in relation to R9(146).

(b) Cross-reference draft responses against previously submitted Rule 9 statements to verify consistency of position, identify any material developments, and ensure accuracy of content by reference to the Trust's existing evidence base.

(c) Generate 100 word summaries of policies relevant to several of the Inquiry's Rule 9 Requests.

(d) Extract pertinent information, such as staff names from a suite of documents.

62. EPUT's legal team has several safeguards in place to ensure accuracy. This includes:

(a) The use of a closed system. This means that the output from the use of the AI system can only be generated from a review of the information that is fed into it. For example, a summary of a policy can only be generated by the policy content itself. No external sources are utilised.

(b) The system generates references and footnotes for each assertion it produces, linking each output directly to the specific passage within the source material from which it was derived. This enables the reviewer to verify the accuracy of the output against the underlying document and to identify if the system has generated content that is not supported by the source material, mitigating the risk of hallucination.

63. The use of AI has had a positive and a significant impact on the Trust's responses to the Inquiry and indeed the Trust's ability to respond to the Inquiry. The Inquiry is well aware that some of the Rule 9 requests made to the Trust date back to patients admitted well over twenty years ago. The use of AI in document heavy tasks such as the review and analysis of large number of policies predating the merger and pre-dating explicit version control has saved the Trust hundreds of hours of manual review. This has allowed EPUT and its legal team to focus on critical analysis and fulfilling its Rule 9 deadlines, resulting in sixty Rule 9 responses being submitted in January and February 2026 alone, supporting the Trust's use of AI as a benefit to the work of the Inquiry rather than a limitation to it.

64. All AI-generated content is subject to quality checks by qualified legal professionals before any element is incorporated into a response. EPUT confirms that no material derived from AI output has been submitted to the Inquiry without having been quality assured by a member of EPUT or its legal team.

PART F— PRE-MERGER EVIDENCE LIMITATIONS

65. The pre-merger period reflects the position from the start of the Inquiry's Relevant Period (1 January 2000) up to merger in 2017. The Trust has responded to a substantial volume of Rule 9 requests relating to events and services predating the merger. In doing so, the Trust has sought to provide the fullest possible assistance to the Inquiry within the constraints of the records, systems and organisational knowledge available.

66. However, the Trust can only provide assurance that it is confident that its responses represent the product of its best endeavours, taking into account that it has used its evolving expertise in responding to R9s, to deploy significant resource through developed processes and involve relevant expertise. It cannot provide unqualified assurance that all potentially relevant material relating to predecessor organisations has been identified or remains available. This reflects a number of structural and historic limitations, including:

    (a) the use of multiple legacy systems across predecessor organisations;

    (b) incomplete or inconsistent historic data migration;

    (c) varying historic record retention and destruction practices;

    (d) limitations in historic search capability;

    (e) the existence of paper records and non-searchable scanned documents;

    (f) inconsistent historic data recording practices;

    (g) anonymised or misfiled records;

67. The Trust's historic systems were designed for operational clinical use rather than the retrospective forensic interrogation now required by a large scale Public Inquiry. As a result, responding to requests relating to historic material often requires extensive manual review, cross referencing and interpretation across multiple systems and sources. It is important to note that the limitations affecting the predecessor Trusts are particularly significant.

68. In relation to NEP, the Trust identified during the course of the Inquiry that the historic migration of records from the legacy CareBase system was incomplete. Access to an archived dataset identified additional cases which had not transferred into the later Paris system. The Trust was not aware of this issue at the point of merger, or during the earlier stages of the Inquiry, but it informed the Inquiry promptly once it was identified.

69. The Trust also identified limitations in relation to community physical health records previously held by NEP, which were transferred to a separate community provider prior to merger and are therefore not available within EPUT's current systems.

70. In relation to SEPT, a limited number of historic records may no longer exist as a result of retention and destruction practices which predated the establishment of the Inquiry. In addition, some historic records held at Runwell Hospital were lost following a contamination incident affecting archived material.

71. Similarly, certain categories of information now sought by the Inquiry were not routinely recorded within predecessor Trust systems. For example, some historic incident reporting systems did not capture Mental Health Act status information in a format capable of later retrieval and analysis. As a result, the Trust and Inquiry agreed that EPUT will only need to provide EPUT's position on Mental Health Act status.

72. The Trust accepts that these limitations create a genuine risk that some relevant historic material may not have been identified or disclosed. Whilst that risk cannot be quantified with precision, the Trust seeks to mitigate it through:

    (a) layered searching across multiple systems;

    (b) cross-referencing of available records;

    (c) manual review exercises;

    (d) auditing and validation processes;

    (e) involvement of subject matter experts;

    (f) and transparent communication with the Inquiry regarding known limitations.

73. The Trust has not carried out a retrospective review as a result of these known limitations but undertakes mitigations as detailed in the above paragraph.

74. The Trust's current senior leadership team has limited direct corporate knowledge of the pre-merger period. Much of the Trust's understanding of events prior to April 2017 is therefore dependent upon the records that remain available and the recollections of former or longer-serving staff where accessible and relevant.

75. The Trust therefore recognises that its ability to comment reliably on some aspects of the pre-merger position is inherently constrained by the quality and availability of historic records and institutional knowledge. Nevertheless, the Trust remains committed to continuing to support the Inquiry as fully and transparently as possible within those limitations.

76. Where legacy systems permit, the Trust provides data or responses sourcing documentary evidence from available records with any limitations outlined in each Rule 9 response. Where neither former staff nor documentary evidence exists, there is little scope for mitigation.

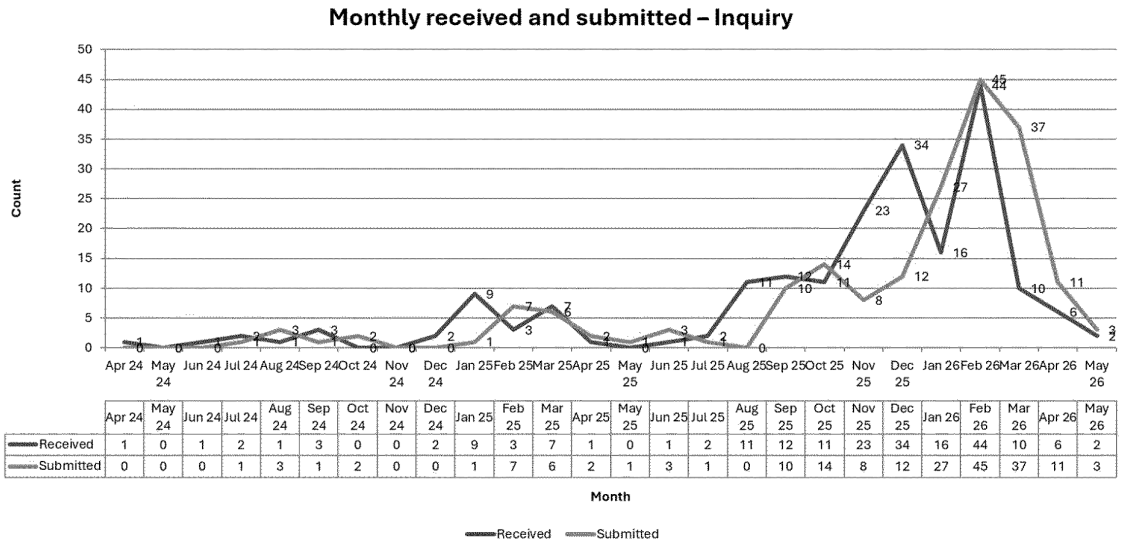
PART G — RESOURCING AND GOVERNANCE

77. EPUT has committed substantial financial and human resource to the Inquiry, accepting that expenditure alone does not equal adequate performance and noting that expenditure is indicative of direct costs and does not reflect the significant indirect cost of senior Clinical, Operational and Executive input into Rule 9 responses.

78. To meet the rapid response expectations requires a substantial increase in staffing, or an increase in the time given to respond to requests. The Trust has engaged additional staff to meet demand; however such resource cannot be implemented immediately.

79. EPUT has received two hundred and two (202) formal Rule 9 requests in total from the Inquiry since April 2024, including the additional requests within existing Rule 9s. EPUT has submitted one hundred and ninety five (195) responses to 12 May 2026 (and therefore not included the responses served in the week commencing 18 May 2026). Annex 3 sets the escalation in Rule 9 requests received from 2024, particularly those received from November 2025 demonstrating that the period since then has not simply involved managing new demand; it has been a major recovery period.

Annex 3 – up to 12 May 2026 (below)



	Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 25	Mar 25	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26	Apr 26	May 26
Received	1	0	1	2	1	3	0	0	2	9	3	7	1	0	1	2	11	12	11	23	34	16	44	10	6	2
Submitted	0	0	0	1	3	1	2	0	0	1	7	6	2	1	3	1	0	10	14	8	12	27	45	37	11	3

80. To further illustrate the above, EPUT received in a five month period (between November 2025 and March 2026) more questions than it had received in the preceding seventeen months combined, and more than twice the number of Rule 9 requests. In addition to EPUT's wider workload including seventy six (76) illustrative case summaries, responses to section 21 notices and hearing preparation [**Annex 5]** with a sample of questions posed at [**Annex 6**]

81. The Trust's Project team has maintained a position of no substantially overdue Rule 9 requests since all overdue items were cleared on 6 March 2026.

82. The complexity of individual Rule 9 requests is illustrated by the annexes to this statement, provided to assist the Inquiry in understanding the operational context within which EPUT has been working, and to demonstrate that the failures do not reflect a lack of genuine effort.

83. EPUT's Inquiry Project Team are now sufficiently resourced for the anticipated demand. It currently has a senior leadership team comprising the Senior Responsible Officer, the Programme Director, two Associate Directors and a Portfolio Lead. The Trust also has six Senior Response Leads leading on individual requests, an Analytics Lead, five Clinical Advisers, and an Inquiry Manager and Deputy. EPUT's data and administration

team comprises four Project Coordinators, five Project Administrators and sixteen Administrators with a wider team focusing on staff support and communication, including the provision of psychological support for staff members and HR and Safeguarding support to those members of staff who receive individual Rule 9 requests. This composition provides a clear, resilient structure, with dedicated capacity, defined roles and specialist support aligned to the scale, pace and complexity of the Inquiry's demands.

84. EPUT's Legal team comprise its solicitor team and its counsel team. The solicitor team at Browne Jacobson LLP includes the Senior Partner (EPUT's named Recognised Legal Representative), the Senior Supervising Partner, two Partners providing ad hoc resource, two Senior Associate Solicitors, one Associate Solicitor, one Trainee Solicitor, two paralegals. The solicitor team is capable of being flexed up or down to meet with demand

85. EPUT's counsel team is 39 Essex Street, comprising one King's Counsel, a Senior Junior Barrister and a Junior Barrister for additional support when required.

86. The Trust has implemented measures to prevent the lapse of deadlines owing to lack of resource. It has strengthened its ways of working, including: a singular intake route and triage for all Rule 9 requests; standard templates and evidence mapping; clear decision rights and signatory guidance; strengthened version control and information management; and regular performance reporting to senior leadership, including exceptions and risks.

87. EPUT groups active Rule 9 requests into a controlled pipeline managed through a single tracker capturing demand, due dates, status, dependencies and risks; triage into priority categories (hearing-critical, statutory or time-sensitive, and standard); assignment into production and review capacity bands; and a clear QA/sign-off process.

88. The progress of completing Rule 9 responses is monitored through the use of a Tracker and Microsoft Project Plan that maps and track tasks required for each Rule 9 request. Regular meetings review progress and issues are escalated to the Programme Director and Senior Responsible Officer ("SRO") as required.

89. With the support of the Lampard Inquiry providing information on prioritised Rule 9s, it is considered the Trust has recovered its position. The trust acknowledges that there

may be occasions where extensions of time may be required, but this will be on a case-by-case basis.

90. EPUT's dedicated SRO holds no other executive portfolio; additionally, the Trust has invested in additional Senior Response Leads, who bring expertise in managing end to end projects, with the skill set to break complex asks into manageable deliverables, manage the process and intervene early if off track, as well as other new roles. The additional posts within the team are an investment to improve resilience to fluctuating demand from the Inquiry.

91. EPUT is able to flex up this provision when needed from its wider staffing base. A time lag is inevitable when mobilising additional resource, (for example, to backfill staff can take up to twelve weeks dependent on expertise required). This is not unique to EPUT and is a feature of public sector recruitment. EPUT welcomed the publication by the Inquiry of its high-level timeline in January, which has enabled the Trust to carry out stakeholder and subject matter expert forecasting and be aware of any logistic issues such as annual leave.

PART I — EXTENSION REQUESTS, MISSED DEADLINES AND LATE APPLICATIONS

92. The distinct reasons for the Trust's previous requests for extensions and missed deadlines include:

    (a) Technical limitations, data gaps, and resource constraints which were identified only during the course of preparing a response. The nature of the limitation became apparent only once the search or retrieval process was underway. This was not necessarily a failure of planning, but rather a reflection of the genuine difficulty of anticipating the scope of constraints before work began.

    (b) In other instances, EPUT accepts that issues were identified internally at an earlier point than communicated to the Inquiry. This reflects a failure of escalation and transparency and is inconsistent with EPUT's stated commitment to candid engagement.

    (c) EPUT has observed at times inconsistencies in the Inquiry's understanding of an issue contained within a Rule 9 request compared to that of the Trust's, with requests for clarification not necessarily yielding clear guidance to narrow the

scope, or assist the process. Providing the right information where available the first time around is a material consideration for the Trust and has not always been possible due to those uncertainties on understanding.

(d) EPUT's Inquiry team has remained strongly focused on meeting Inquiry deadlines and maintaining responsiveness to requests. Whilst this commitment has been positive overall, there have been occasions where an assumption that delivery remained achievable persisted too far into the drafting process, despite emerging operational barriers and complexities. In some instances, this reduced the opportunity for earlier escalation or reassessment of delivery risks and contributed to late requests for extensions or missed deadlines.

93. The process improvements described in Part C are the principal steps taken to ensure early identification and the Trust's communication of constraints. In addition to this EPUT has committed to making extension requests formally in writing in advance of relevant deadlines, with clear reasons, mitigating steps, and proposed revised timetables.

94. The RAG tracking system described above is intended to surface emerging risks to deadlines at an earlier stage, allowing proactive communication rather than reactive notification.

95. A Section 21 Notice was issued on Friday 27 March 2026, and a Letter of Application to the Inquiry was sent on 10 April, six working days after receipt of the Notice, taking into account the Easter break. The application reflected genuine concerns over complying with the Inquiry's requests without adequate safeguards being in place, compromising the protection of members of staff who spoke up with reliance upon express assurances of confidentiality. The Inquiry had not engaged with how those protections could be maintained.

SECTION 4: SENIOR LEADERSHIP TRANSITION AND EVIDENTIAL CONTINUITY

96. Following the current Chief Executive Officer's ("CEO") Paul Scott's departure from the Trust at the end of June 2026, executive responsibility for matters relating to the Inquiry will transfer jointly to Alex Green (the Trust's current Chief Operating Officer and Joint Deputy CEO), and Trevor Smith, (the Trust's current Chief Financial Officer and Joint Deputy CEO), as Joint Chief Executives.

97. A structured handover process is being undertaken between now and the end of June which includes, but is not limited to:

    (a) structured handover discussions between Paul Scott, Alex Green and Trevor Smith;

    (b) the transfer of key briefing materials and relevant documentation;

    (c) continued access to Inquiry governance records, submissions, correspondence and decision-making documentation;

    (d) maintenance of central programme records and audit trails through the Inquiry response team and;

    (e) ongoing support from the Senior Responsible Officer, Programme Director and legal advisers.

98. The Trust is satisfied that these measures provide Trevor Smith and Alex Green will the sufficient authority, knowledge and access to information to support the Trust's future evidence and assurance requirements.

99. The Trust confirms its adoption of Paul Scott's evidence, including: (i) the position statement of 27 March 2025; (ii) his oral evidence before the Lampard Inquiry on 15 May 2025; and (iii) his evidence before the predecessor non-statutory inquiry.

100. Arrangements are in place with Paul Scott to ensure he remains available to the Trust responding to Rule 9 requests and/or to provide evidence to the Inquiry in relation to matters arising during his tenure. Appropriate arrangements are also in place to ensure continued access, where appropriate and necessary, to the relevant systems, records and materials required to support this process. The Trust recognises the importance of evidential continuity and organisational memory and considers that appropriate mitigations are in place to support ongoing reliability and continuity of engagement with the Inquiry.

SECTION 5: ADMISSIONS, REFLECTIONS AND LESSONS LEARNED

101. The Trust recognises from its experience of the Inquiry process that responding effectively to a Public Inquiry requires more than technical compliance with requests and deadlines. It requires strong organisational governance, clear accountability, effective programme management and the ability to provide sustained assurance over time. The Trust recognises that aspects of its previous arrangements fell short of these requirements, and significant learning has arisen from this process. EPUT remains committed to applying these lessons both to its future engagement with the Inquiry and to wider organisational improvement. In accordance with the Chair's request for a clear and express statement of the Trust's position. EPUT makes the following submissions:

102. The pattern of extension requests, late notifications, and missed self-proposed deadlines has damaged the Inquiry's confidence. EPUT takes responsibility for this and understands why that confidence has been eroded, acknowledging that this is not consistent with the standard of engagement required of a primary corporate core participant. However, the recovery process outlined above does evidence improvements in timeliness in recent months.

103. EPUT previously failed to meet deadlines set by the Inquiry, including deadlines proposed by EPUT itself.

104. On 13 February 2026, a written assurance was given to the Inquiry that all outstanding deadlines would be met by 16 February 2026. EPUT further failed to notify the Inquiry before the expiry of the 16 February 2026 deadline that some of the deadlines would not be met. This was admitted to be a failure of escalation and communication. Further detail about this and the actions taken thereafter are set out above in Part B.

105. The failure to forward thirty Next of Kin letters provided by the Inquiry on 5 February 2026 by the given deadline was admitted to be a serious failure directly impacting bereaved families. EPUT apologises unreservedly for that failure. EPUT had legitimate concerns about validating last known addresses before dispatching such sensitive correspondence to potentially unvalidated addresses, but it accepts that those factors led to unacceptable delay.

106. EPUT's internal governance and QA processes for Inquiry engagement were not commensurate with the scale of its obligations as the volume of requests from the Inquiry

increased. The Trust has demonstrated improvement of its processes given its submission of Rule 9 responses since 6 March 2026.

107. EPUT reflects that it underestimated at the outset, the scale and complexity of what would be required of it as the primary corporate core participant. That underestimation was not in bad faith, but rather an error of planning and resourcing in not appreciating the wide focus which would be put on the delivery of services by it and predecessor trusts. This had real consequences: it generated delay, eroded the Inquiry's confidence, and — in the case of the Next of Kin letters — directly affected bereaved families. The complexity and scale of the Inquiry's requirements demanded a level of programme management discipline, specialist IT capability, and senior governance not initially in place. EPUT reflects that investing in those capabilities earlier may have prevented many of the difficulties described in the statement but has sought to ensure that the correct infrastructure is now in place to continue its work.

108. EPUT has redesigned its team structure and functionality, introducing a senior tier reporting into the Associate Directors, to bring additional capacity and capability, improve the speed of responses, and ensure that commitments align more closely with what is deliverable.

109. Reflecting on previous months, EPUT's ability to plan and provide reliable timelines depends significantly on visibility of the further requests it is likely to receive. It remains difficult to plan for future work when the number, volume and breadth of forthcoming Rule 9 requests are not known in advance.

110. The duty of candour requires proactive disclosure of limitations and constraints, not merely responsive acknowledgement when they are raised. EPUT accepts that it has not always met this standard. EPUT reflects that a reciprocation of frankness at times from the Inquiry team, to ensure that issues relating to anticipated Rule 9 requests — such as breadth of questions, focus, the scope of issues, or terminology — are communicated to the Trust so that it can seek to alleviate those issues before a request is issued. EPUT commits to being more forthcoming where it considers the Inquiry would benefit from such knowledge.

111. EPUT further reflects that early communication of constraints is always preferable to late notification of a missed deadline, noting that the damage to the Inquiry's confidence from the events of 13–16 February 2026 was materially greater than it would have been had EPUT communicated its concerns before the deadline expired.

112. EPUT identifies the following systemic issues as having materially affected its ability to engage with the Inquiry:

(a) Legacy data architecture – since it was established EPUT has used seven different systems across its services. The absence of interoperability across NHS data systems is a structural problem predating EPUT's formation and not unique to EPUT. EPUT acknowledges that the communication of this constraint was not made quickly or clearly enough.

(b) QA processes and governance - The QA model in place in early 2026, with administrative teams completing searches and Associate Directors conducting QC immediately before submission, was not robust enough to handle the volume and complexity of requests being processed. EPUT should have identified and addressed this gap sooner.

(c) Visibility of incoming demand - EPUT's ability to plan and provide reliable timelines and resource to requests depends significantly on visibility of the further requests it is likely to receive. It remains difficult to plan for future work when the number, volume and breadth of forthcoming Rule 9 requests are not known in advance. The Trust acknowledges that the Inquiry Legal Team has sought to give advance notice of the nature and number of R9s to be anticipated, and their subject matter, in regular meetings with the ILT. However, a broad indication of the subject matter has not, in practice, enabled effective pre-planning.

(d) Search capability – The impact of the limitations of the Trust's search systems were not communicated to the Inquiry clearly or promptly.

(e) Pre-merger organisational intelligence - The limitations of EPUT's knowledge and documentation of the pre-merger period cannot be overcome. EPUT accepts that it has been more forthcoming about these limitations than it has been about the precise nature and implications of them on the work of the Inquiry.

(f) Completeness of Rule 9 responses - EPUT cannot provide unconditional assurance as to the completeness of its Rule 9 responses. It cannot be confident that all potentially relevant pre-merger documentation has been identified, located and retrieved, not least due to the scale and breadth of information

requested. This has been and will continue to be identified transparently in individual Rule 9 responses.

113. In reflecting on the above, EPUT considers that its remedial actions have made a measurable improvement to its Inquiry responses.

(a) The procurement of Relativity and Netwrix represents a proactive response to the search limitations identified during the Inquiry. Both systems were purchased by EPUT specifically for Inquiry purposes.

(b) The introduction of a RAG tracking system across the Rule 9 pipeline corporate responses represents a structural improvement in forward planning and risk identification.

(c) EPUT has redesigned its team structure and functionality, introducing a senior tier that reports into the Associate Directors, to bring additional capacity and capability, improve the speed of responses, and ensure that commitments align more closely with what is deliverable.

(d) The appointment of a dedicated Senior responsible Officer, the introduction of twice-weekly senior oversight meetings between the SRO and Programme Director Daw, together with weekly Executive briefings and Board-level reporting, represents a significant strengthening of governance over Inquiry engagement.

(e) No significant lapsed deadlines since 6 March 2026.

114. EPUT's open commitment that deadlines will not expire without prior written engagement. Credibility is built through sustained performance, not through assurances, and commits that it will not give assurances unless they are supported by an evidenced delivery plan, clear resourcing assumptions, and explicit accountability.

SUMMARY – BOARD ASSURANCE

115. The Board assures the Chair of the Inquiry that:

(a) It remains committed to supporting the Inquiry openly, constructively and transparently and to continuing to strengthen its response arrangements as the Inquiry progresses.

(b) All reasonable steps have been taken to ensure the information provided is complete and not misleading, in accordance with EPUTs duty of candour.

(c) Limitations in providing evidence are clearly set out above.

(d) It understands the information set out in this Position Statement may be relied upon by the Inquiry Chair and tested in oral evidence.

(e) It adopts the contents of this Position Statement as its formal position in response to the matters it addresses.

CONCLUDING COMMENTS

116. The Trust recognises that aspects of its engagement with the Inquiry did not consistently meet the standard required, particularly during periods where the scale, pace and complexity of requests increased significantly. The Trust accepts that this contributed to delays, missed deadlines and occasions where the assurances provided to the Inquiry were not ultimately achieved. The Trust also recognises the impact this had on the Inquiry, Core Participants and, most importantly, bereaved families.

117. Throughout this Position Statement, the Trust has sought to provide a candid account of the factors that contributed to those difficulties. In particular, the Trust acknowledges that it underestimated the level of organisational capacity, programme management and operational resilience required to respond to an Inquiry of this breadth, complexity and intensity, particularly where requests frequently required searches across EPUTs and its predecessor organisations, multiple historic systems and records (both electronic and paper).

118. The Trust has reflected carefully on those shortcomings and has taken substantial steps during 2026 to strengthen its response arrangements. These measures have included increased staffing and specialist support, strengthened oversight and governance, revised processes for the management and escalation of Rule 9 requests, enhanced quality assurance arrangements and the development of a more structured programme management approach.

119. The Trust considers that these changes have materially improved its resilience, coordination and delivery capability and have contributed to a sustained improvement in performance over recent months. Whilst the Trust recognises that confidence can only be rebuilt through consistent delivery over time, it believes that it is now operating from a significantly more stable and controlled position than during earlier stages of the Inquiry.

120. However, the Trust also recognises that responding to large volumes of complex Inquiry requests within short timescales presents ongoing operational challenges, particularly where requests require extensive manual review of historic records, engagement across multiple systems and input from specialist staff and subject matter experts. Whilst the Trust has significantly strengthened its resilience and response capability the time required to mobilise additional capacity - particularly when clinical expertise is required to be released from frontline patient care - and complete complex work to the required standard remains an important practical consideration. The Trust will therefore continue to work constructively with the Inquiry to support timely, reliable and proportionate responses as the Inquiry progresses.

121. The Trust respects the central role that bereaved families and those affected, play in directing its work. It remains fully committed to supporting the Inquiry openly, constructively and transparently and to continuing to strengthen its response arrangements as the Inquiry progresses.

STATEMENT OF TRUTH

I, Paul Scott, Chief Executive Officer of Essex Partnership University NHS Foundation Trust ("the Trust" or "EPUT"), make this witness statement on behalf of EPUT in response to the Section 21(5) Notice issued by the Chair of the Lampard Inquiry on 22 April 2026.

I confirm that:

a) All reasonable steps have been taken to ensure that the information provided in this statement is complete and not misleading, in accordance with EPUT's duty of candour;

b) Any limitations in the evidence provided have been clearly identified and explained within this statement;

c) EPUT understands that the position set out in this statement may be relied upon by the Inquiry and tested in oral evidence; and

d) EPUT adopts the contents of this statement as its formal position in response to the matters identified, subject only to any expressly identified limitations.

Signed: [I/S]

Name: Paul Scott

Role: Chief Executive Officer

Date: 26 May 2026