SPECIAL REPORT

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THE LESSONS OF THE LUCY LETBY CASE

DR PHIL HAMMOND (MD)

THE LUCY LETBY CASE: PART 19

All fall down?

LAST October, the court of appeal (CoA) highlighted concerns about the evidence of Chester paediatrician Dr Ravi Jayaram in the case of Baby K: "Legitimate criticism can be made of his evidence. Although he believed that Letby had deliberately dislodged the endotracheal tube, he said nothing about it at the time, nor for many months thereafter. There was an inconsistency between his evidence and the contemporaneous records."

Now another serious inconsistency has emerged in an email obtained by the Thirlwall Inquiry and published by UnHerd last weekend. On 4 May 2017, Jayaram wrote to seven of his colleagues about a draft report to Cheshire police. It's purpose, according to Jayaram was "for the

according to Jayaram, was "for the police to have their interest piqued". Regarding Baby K, he wrote: "Staff nurse Letby at incubator and called Dr Jayaram to inform of low saturations." He also wrote: "Baby subsequently deteriorated and eventually died, but events around this would fit with explainable events associated with extreme prematurity." None of this was included in the final report to the police.

In his witness statement dated 17 April 2018, Jayaram wrote: "It is also the case that Lucy had not called me in to nursery 1 at the point that desaturation had taken place. Quite often a nurse will come looking for a doctor to assist when a baby begins to deteriorate, Lucy didn't."

Under oath, when asked by prosecuting counsel Nick Johnson KC whether he had "any call for help from Lucy Letby?", he responded: "No, not at all... In retrospect, I was surprised that help was not called, given (Baby K) was a 25-week gestation baby and her saturations were dropping." Johnson then confidently directed the jury that Jayaram has caught Letby "virtually red-handed".

Jayaram is not commenting to the press, but an unnamed source told the *Daily Mail* this week: "The email was disclosed to the prosecution, Letby's defence team and the judges at the court of appeal before her application to appeal her conviction in relation to Baby K." This would explain the CoA's highly unusual public criticism of Jayaram. The appeal failed because it was based on the narrow legal argument of whether media coverage prevented a fair retrial. Further scrutiny of inconsistencies in Dr Jayaram's evidence is now warranted. Did Letby call him for help or not?

CCRC submission

ON 3 APRIL, Lucy Letby's barrister Mark McDonald submitted 23 reports from 24 experts to the Criminal Cases Review Commission (CCRC), which he believes "completely demolish the prosecution's case that was put before the jury." The experts looked at all 17 cases Letby was charged with and found no evidence of deliberate harm by anyone in any case, and far more plausible and likely causes for the collapses and deaths of babies in a neonatal unit that was simply not up to the tasks it was given. The CCRC now has more than enough new evidence and argument, and evidence of prosection errors, to refer swiftly back to the appeal court.

Copper bottomed?

NEITHER the police nor the parents' lawyers have asked to see the full reports submitted to the CCRC, even though McDonald has

offered to share them. The Cheshire Constabulary at least tried to be better informed about the proper use of statistics while building its case, by asking for a professional review by Professor Jane Hutton. However, this was blocked by the Crown Prosecution Service on 15 July 2021. Following a freedom of information request by statistician David Webster, the information commissioner

confirmed he had seen the exact advice given by the CPS to the police but has refused to disclose it because it "risks any future legal proceedings being undermined by it being disclosed prematurely to the other party, and to the wider public, prior to the proceedings taking place."

Really? Or is it because it would help Letby's case?

Deskilling nurses

MICHELE WORDEN was an advanced neonatal practitioner at the Countess of Chester hospital. She was one of eight senior nurses replaced with less experienced bank nurses in the years leading up to the 2015/6 spike in neonatal deaths. She was convinced that deskilling of the neonatal nursing workforce, and problems in the maternity unit, may have been an important contributory factor in avoidable harm to babies.

In 2018, early in the police investigation, she telephoned Cheshire police to voice her concerns; but the female officer she spoke to was not interested in this, nor in the damning findings of the Royal College of Paediatrics and Child Health report into increased mortalities in the Countess of Chester neonatal unit. Instead, Worden was asked if she had any evidence against Letby. Like the Thirlwall Inquiry, the investigation was entirely predicated around a pre-determined outcome that refused to consider, as the international experts have concluded, that many of the collapses and deaths were due to seriously substandard care.

Dr Svilena Dimitrova, meanwhile, an experienced consultant neonatologist and one of the defence experts, has contacted Cheshire police three times to give expert evidence highlighting serious deficiencies in neonatal care at the Countess of Chester unit. But the police have ignored her offer.

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Lab error

LETBY's guilt was sealed when prosecution experts confidently proclaimed under oath that the only cause for two "high insulin and low C peptide" readings in August 2015 and April 2016 was exogenous insulin, with Letby unanimously convicted of poisoning.

On 23 May 2016, the Liverpool laboratory which processed the samples did a quality control test when a pure sample known to contain an insulin of 108.3 pmol/l (picomoles per litre) and a C peptide of 873.5 was run through its machine. The aim is to get as close to the known concentrations as possible. But the lab reported an insulin of 962 and a C peptide of 130, exactly the same reversal that convicted Letby.

Perhaps Letby had driven to Liverpool, broken into the lab and spiked the sample with insulin. More likely, it was a machine error; or more likely still, a human error with someone in the lab simply mixing up the C peptide and insulin results. This wildly inaccurate quality control result was known at the time of the trial but was not investigated or declared. It is possible Letby was wrongly convicted of insulin poisonings not because of test interference, as most experts believe, but simply because someone tired and



overworked gets their readings mixed up every eight months or so.

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