HIA REF: 251
Witness Nam HIA 251

THE INQUIRY INTO HISTORICAL INSTITUTIONAL ABUSE 1922 TO 1995

## WITNESS STATEMENT O HIA 251

## HIA 251 , will say as follows:-

## Personal details

1. I was born

I have two older brothers called $\square$ and and one older sister called My parents separated in 1978. My father went to prison in 1979 and my mother found it difficult to cope. My siblings and I were all taken into care in or around 1980. We were in several children's homes. My first placement was Ballyclare Children's Home and I was then moved to Knockfergus Children's Home in Carrickfergus and Carnview Children's Home.
2. My mother met her partne and my half-brothe $\square$ was born in 1981
 and I were allowed home to live with my mother for a short period of time before I was sent back to Carnview in 1985. I know I started to miss school and became difficult at home. I started drinking alcohol and experimented with solvent abuse. At the time I was confused and I wondered why I was the only one of my siblings taken back into care. I don't remember any bad treatment at Carnview but something happened and I was moved to Lissue when I was 11 years old.

## Lissue Hospital (1985-1986)

3. No-one told me I was being moved to Lissue. I remember I had a Social Worker called LS 32 but I don't remember any conversations with her about
why I was in Lissue. It felt like I was in Carnview one minute and the next minute I remember being in a room at Lissue which had big green plastic chairs in it. I think I was admitted twice to Lissue Hospital, for a period of a few months each, between 1985 and 1986.
4. I don't remember much of my time in Lissue because I spent the majority of my time strapped to a bed. I remember the medical officers strapping me to a bed on several occasions and going out cold. They gave me injections. I could have been under for days and in that time I don't know what they were doing to me. There was a large mirror in my room and I must have been observed by the medical officers. I was given injections regularly and I do not know how long I was sedated for. That's how I remember my time in Lissue. I would like to know what injections they gave me to put me out. I feel the injections had a negative impact on my life.
5. I also remember there was another room with lots of cameras in it and they took videos of us playing. There were toys and a sand pit in the room. My step-fathe $\quad$ told me once he remembers that room. He thought it was abnormal. My mother and went up to Lissue for an interview once. I think it was an interview about me being allowed home for weekend visits and they recorded that interview.
6. I was kept in a room by myself and was very rarely allowed out to mix with the other children. I can visualise the corridors but I cannot remember where the rooms where as I was kept in my room most of the time. I know the staff office was right beside me so they could observe me. The door was always kept open and I could see out. I remember a boy and girl who were brother and sister. They used to live up by the $\quad$ in $\square$ On one occasion I remember looking out of my room and seeing the girl being followed into a room one day by a member of staff. This particular man was small with dark hair and he was horrible. He walked up the corridor after her and he followed her into one of the dormitories. I always wondered what happened to that girl.
7. The other thing I remember about the boy and the girl is that they had a big meccano set and they used to build cars and motorbikes out of them. They loved it. I remember on one day this same member of staff was walking down the corridor and he kicked the motorbike to smithereens when we were playing with it. I was very upset and they took me back to my room and strapped me to my bed again. After about twenty minutes, my next memory was waking up in bed the next morning.
8. That same member of staff hit me on several occasions also. He would ask me if I wanted a cigarette and when he gave me one he would say "Do you want a light", and when I said yes, he would hit me on the face or head. It was like he was playing mind games with me.
9. I also recall a man who came to the window in my room in the evenings. I think there was a fire escape outside my room. The window hatch was opened slightly and he use to knock and slip cigarettes under the hatch. I don't know who the man was. He was an older man with a bald head. The staff at Lissue thought I made this man up. I know I didn't because I remember looking forward to getting a cigarette in the evening and a bit of conversation.
10.I don't recall any particular routine at Lissue. I have no memory of attending school during my time there or being taught school lessons. There was a cookery class and we used to make buns during it. I also remember a teacher taking our photographs with instant cameras.
11.1 remember that as a punishment the staff would put me in a room with children who were severely disabled. I know I had behavioural issues but I was not disabled. The staff would make me sit with these children for hours and I could not understand why. I thought that they were playing mind-games with me and were punishing me in some way. These children had special red chairs with sheepskin padding and I remember these chairs very clearly. My mother came to see me regularly when I was at Lissue and when she saw I was sitting with these children she couldn't understand why. I think it upset
her. I remember my mother tried to take me out of Lissue one day. We got as far as the front gate before a member of staff stopped us and I was sent back.
12.I also remember an incident when a member of staff examined me. He put his hands down my trousers and asked me to cough. I do not know if it was a doctor or a psychiatrist. I always wondered if that was inappropriate and I remember asking a GP once for his advice. The GP said if it was a doctor it was mostly like a medical examination. I am aware of the abuse that happened in Lissue and sometimes I wonder if anything happened to me when I was sedated for days.
10. The food in Lissue was ok. It was just like hospital food. I don't remember where the bathrooms where. I do remember one day we were sent outside to shower. It was a very hot day and we were all lined up against the wall and they showered us with the outside watering hose. I remember the power of the hose was so strong we were scraped against the wall. The wall was rough and it nicked my skin. When they gave me soap or shampoo to wash I remember it seeped into my cuts and stung my skin.
14.1 ran away from Lissue frequently and the police would always find me and bring me back. I wanted to go back to my mother. I remember one time I ran back to Carnview and broke in to steal food from the kitchen. I was away for days before the children in Carnview saw me and the staff alerted the police. I would climb onto the roof in Lissue to find escape routes and the staff would call the police. On one occasion, when I was attempting to escape, I remember running down the lane from Lissue. A man, we called the 'gate man', chased after me. I must have fallen and the gate man grabbed me and pushed my face right down in a puddle of dirty water. I remember struggling and two policemen and a member of staff ran over and pulled the gateman off me but no report was ever made of it.
15.1 was given a medical examination every time | returned to Lissue after running away. I remember the staff would drag me into a particular room. They would give me some medication which knocked me out. The next thing I
would remember is waking up and being strapped to the bed again. I prefer to sleep on my front now. If I wake up and I'm facing the ceiling I remember being in Lissue and I panic. Lissue was a horrible and scary place. I will always remember the crows sitting round the building and the laneway.
11. After Lissue I was sent back to Carnview Children's Home and was eventually allowed home for a short period of time. My behaviour deteriorated and I got involved in criminal activity and was admitted to Rathgael.

## Rathgael Training School (1987)

17. I was sent to Rathgael because I became increasingly involved with drugs and re-offending. I think I was fostered as some point to a family in Glengormley. It did not work out and I was returned to Rathgael to be committed. I have no complaints about Rathgael. I thought it was better than Lissue. They took me out on day trips, like rock climbing, and I was taught woodwork and metal work. I found it motivating. I was allowed to smoke in Rathgael. I was allowed home sometimes at weekends and on extended leave. I got involved in criminal activity again and became more dependent on drugs and started to run away from Rathgael. I wanted to go back home to live with my mother. I was then sent to Lisnevin.

## Lisnevin Training School (1989)

18. I was remanded to Lisnevin borstal. I knew it was for bad boys. I misbehaved in Rathgael and was put in to Lisnevin. There was a points system in Lisnevin where you had to eam points to be able to leave at the weekends. I had several admissions to Lisnevin. I would be returned to Rathgael and something would happen and I would be back in Lisnevin again. I don't have any particular complaints about Lisnevin. At this stage of my life I had been from one institution to another and I felt I belonged to the system. When I was returned to Rathgael I would run away and get involved in trouble. My drug addiction increased as I got older. I started taking heroin in or around 1989. It was like a vicious circle. I committed more serious crimes such as burglary, criminal damage and assault, and ended up in Hydebank.

## Crumlin Road (dates unknown)

19. Before I was sentenced to Hydebank I was sent to Crumlin Road Prison for a few nights. I remember the first time I went to Crumlin Road. I was petrified. It was a man's jail and I was only 16 years old. My father and uncle were in floor above me and the prisoners knew who I was. I felt like I got respect in some way which I never received when I was outside prison.

## Hydebank Young Offender's Centre (dates unknown)

20. I have no complaints about the treatment in Hydebank. I put my head down and did my time. I was an 'orderly' which meant I was given jobs to do which gave me a routine and meant I spent less time in my cell. I was not allowed to leave Hydebank and stayed there until I was 21 years old. When I left I got involved with serious criminal activity and re-offending again and ended up in Crumlin Road and Hydebank again. I made friends inside prison. I have been in and out of prison most of my adult life.

## Life After Care

21. After I left Hydebank when I was 21 years old I stayed out of trouble for about ten years. I got married and had a son. I left my wife shortly after my son was born. I found it difficult to cope. As a result I did not form a good relationship with my son. I had another relationship and had a daughter. I maintained a good relationship with my daughter. I also have two grandchildren. I am close to my sister and her daughters now. Her husband recently passed away and she is in a new relationship. I babysit my great nieces and nephews. It is a good distraction and I enjoy it. I think it helps me.
22. In my mind I feel like I never left Lissue. I grew up in the system, living in one institution to another, and I felt I never really got the help I needed especially with my drug addiction. I was in and out of care homes and I have had a life of drug addiction and re-offending. I have been out of prison for nearly two years now. I would say I'm a hard-line prisoner. I have an extensive criminal record but I have been punished for every offence I have committed. To be honest I
don't like it outside. In prison you get three square meals a day, clean laundry and the medical help is a lot better. I find the doctors outside prison unhelpful. The doctors outside tell me I fit the criteria of a 'junkie'. I don't like being labelled in that way. I have a drug addiction. My previous GP changed my medication and I am finding it really difficult to cope. I have transferred to a new GP and was referred to the Outreach Team. I am currently living at
23. My dependency on drugs started at a very young age. I feel that the injections I was given in Lissue contributed to that and messed my head up. I don't think it was right to strap me to a bed and sedate me the way they did in Lissue. To this day I have problems sleeping. Looking back, I know I had behavioural issues but I do not think I was given the correct treatment. I should not have been put in with the other severely disabled children and I will never forget the incident were the gateman assaulted me.

## Statement of Truth

I believe that the facts stated in this witness statement are true.


Dated $18 / 2 / 16$

13. In paragraph 4 of his statement, the Applicant recalls spending the majority of his time in Lissue strapped to a bed and being given injections. The Board believes
that it may be the roof incident that the Applicant is referring to. On 30 May 1986 it is recorded that the Applicant went onto the roof once more, $\square$. On receiving this information, it is recorded that staff immediately put into place the guidelines recommended by Dr McAuley $\square$. After three hours, the Applicant was brought down from the roof after which he ran away across the fields. Staff members gave chase and were able to apprehend him and he was brought back to the Unit. On return to the Unit, $\square$ the Applicant was put to bed and given 20mgs of Diazepam intramuscularly. The Applicant was subsequently constantly supervised and the behaviour programme noted above was reinstated in order to allow the Applicant to earn his way out of his bed. The records regarding reprimand for the roof incident often concern the Applicant being put to bed and earning his way out of bed,
. There are no mentions in the records of straps being utilised to achieve this but rather constant supervision. The Board does not believe that this method of restraint was likely to have been employed in this case. The Board does not believe that this method of restraint was likely to have been employed in this case. It is known however that restraints, including gloves which could be attached to beds and bedding, were used in very particular circumstances with very disturbed children. This would have been in cases where children may have tried to harm themselves, or remove clothing and this method was employed to try and prevent them doing further damage to themselves.
14.

15

Behool meport an HIA251 sense

## MASHEMATECS:

 progreasing to xultiplecation by 10,20, etc.


 had grasped the kill sastatactorty.


Yollowmp Metho books 30 4 Atpha maths Dook One.
 PROJECT HORX:

 following copice. He had gecial incereet in neture and contributed greatio throughout



 mnowdrops/ctocusem/duffociss the ecory of bated beany the etozy of chocolater the fallow dees gigno of Spetrgy


 collect.

## Music:



 types of aumde on the tapa recomder. lle llked "The Staqete of Londoan vesy much.
P.E:



## POTHERY:

Huch pleasare ver derived from mxpertmantiag with and mioping the clayo pracilec



School menoes ou
HIA251 G\$t

## ARTCAABT:






## COOKERY


 the work taxiuffag kicehma chored.

## GTMEAL REMABSS


 comoperabive projact work. H had tha capaciby co concentrate on given fems







 casgied out.


HIA251 and gemezally I Eownd hia to be exusturthy fikeable boy who could shav

 bisa an ay clame.

## LS2

Clas Toncher

## IN-PATIENT NURSING NOTES

## HIA251

$\qquad$
$\qquad$
$\qquad$

He had heou enticed Qy aneottor chued noto it sppaons had left ecass foulowing Cobreptern ic ccassroom eaxiès. Heyt apso Rencaineor in orea unulier aracent IOOpm

When they lopp Lopicál qounds.
Qttenuph by Stafl to Recuron Hour to heoide up to this thure were unsucusflul.

Heave inforn Disterer. R.U.C and \&S whon he Recinizin. (S

12/13/5/88. Dhone cace from Rue say thy had been piedes up al freen eantt.

Reldly Ruc © IIpr. HIAR51 Veny quit, thousers vony diniy - Decteel in bed quebaly Wichout a wond. Do detaels aboul exceapade. ho beva altention parer Whim ly flato put into beed quiedy.
13 shsb Jowned in with vother ypear sat socival skills theis vaftereroon. (winn)boconding yesterday.
 Restless af tea tathe later sot an wedted voder.
13/14-5-86. Sdr ainetly all evening wdiching a video in compaimp of peers. No problem.

IN-PATIENT NURSING NOTES
HIA251
$\qquad$
14-5-86. Moering Reponet
Rewonned u'pyjomas this uokning vepgeresoing Q"coutdu'r "ane kes" allitade". Treyiy is rinitete ocher checdie $V$ incoukage tten is tribbehave. Peers aileriplee ts put orevoure O HIA251 diki, wistris mecelti, but he liened a deap ear it ktem, Weur is clars as urval but lefr ciars at $9^{30}$ A dos. Uspolce to. HIA251 in venbline axia y he sicee d is go bace is chen peacsabity, Thene wes us fout language or afgermie behaiour $\rightarrow$ HIA251 gave the uppression be hed bee tolo he would be goig ts Rattgael + fiot ramion'r wair tobi thenen Said the cooutd oray in chavist put up. wite il uncil the ded of tie weol.
at 10-0 a.m. SIN [S34
reported to me that HIA251 and [S127 were on the bungalow loof. I designdted staff. do "mantain a conturuois survellance of the area, and ensure che chidren were wottain sight. they altenately dook mnsturction and acted eccadingly. dlowever HIA251 a
proceded do dandalye de rof. aining
h linnts t.j alile [S127 he linnts T.J. apeabs T.. A anter of rof
and veate enterior danage thoongh skylights. Breaking Widows chroupt ant Bualding No bavoning ot all could encourage the elalder do ceaces. at time's attacking soff with Bnchs, slates and paines of Glas.
offer alos
1 inforined who in tive refamed Lagan Valley Qdimersdator Caunire stoff here hemwant HIA251 om key waka infouned, the infauned Sonal waker). Mi wis assitat pircipal Queverien wes heserthy at Lissue pa epporitoriant in relation do arothen child.
dowever atuation completely
aracebated beyand. conted (keeping LST29 upolated). Staff a children in bulding at ride. 1 anoured safety of Same, Taking all childern do aion of woid avay from dangei. Rexching stafy assited daligingly. pacdiatuc unte, canteen, butchen d danestic staly abeo oduried do umain in building. "Kibbuin. Police" reforned at this atage who allased ovising staft survering area. HIA251 and LS127 hirled alates and bucks at-. Police tutting and omashing Dindoven

IN-PATIENT NURSING NOTES

$$
\text { Date } 14-5-86
$$

$\qquad$
of 'Freste Car' belonging do ane of dhe. Donestes heie as dhis continued police gladually chichererted furm highest vof to area with less dange both chidien jumped down and ien ofb awos fields. Police gove cheae and retived dhem do unit at $11.45^{\circ} \mathrm{am}$. [SS129 rifoumed of same.

Cartact Dr.Melion and Dr. me aully do no avart.
2. Mr. WirR Ussitant Prineipal Cunvieu) $\therefore$ raims by LS134 do Do no 2 mo. wi,
following diseusion with onypelf and
atterpted to contact Rathgal (RG16 to arguive re- possibutaty of HIAR51 admosian there. No ploies curnenty. mere is avare that thio do this recident a surteble placinal fol HIAzsi is tobe fand no later dhan this coming Friday $16-5,86$.

On retuen do urit displayed No remase, smuling, gining and ginewaly apathetie do siluation. Pur to : bed un obsewation woin, obsewod curvently by SLN LS34

Time of repar 1.30 pir.
$\frac{14}{15}$
15.5.96.

Remansad a Real under conetant supreevision From spm until 8am. Presented no peorbiim. Settled to Slep all 9-3opr. slepl. Sound throust oul Ia wisht.
15-5-86. Team tiendover auins bs see panents ts dai. Some collectuce thoughts to be tricen as aldat we have have wor for fler fre trida, Peport on HIA251 to be propare ${ }^{2}$ t sent - Mr.veir (amit. princpal sw).

Continiee to be obresed, os a 1-1; in quet form. This pirliccome fuile natliss. hr eut boal? haviz fr be tetouncis toy siffo Voy Roule when [S127 allowed doum for fomiey Therazy. HIA251 got eup furm bed \& ettenpted to hrect put frot thangh unidow by bicking sindow. Returnex to bad by otoff uhece he aettlat doun grain. Moox sivil very Rotiles
$15 / 16 \cdot 5 \cdot 86$ LS135 sated for hoveictes for supprew obinte as ib matest tin steyp: in quaite form, askeqs 10.30. Pr.

## IN-PATIENT NURSING NOTES

$\qquad$

Doctor
16.5.86. Evemig Repoar.

Spoliew hs by LS138 $\quad$ nimperf. Very sotey Spaken of arrowered is nuonosigllables. Is very aurate that his "purishment" is his oun doing * any hurr he feels has been seff rifucted. Said he wished te had listened to ruppeff $\checkmark$ Sla LS44 on wedmaso ay mornirg before undilging in his volous behourial. Howeres no taces buer ratter demandinp when he could join other children a have his priirleages Retinned. Irdied up hiner upboand a appeares ts aryin danig so. ate al his let.

IN-PATIENT NURSING NOTES

Doctor $\qquad$ Date $28-5-86$ $\qquad$ Doctor
AM -56 Jas discussed at word meeting in respect to intergration" programme- Pt, hos shown no remove for his behoungur last wednesday.
27/5/86 A needs to Know that thew is a consequence for his action. if was suggested that a point system ba established for

- him te eam his way back ito the normal ward routine. Highly probable that HIA251 will repeat last Wednesdays episode of climbing onto the roo and te having very destructively. Pt needs a chance to prove himself. Pan of action needs to be made out incas thesis is a repair of last Wednescloyst be haviour.

$$
19-5.86
$$

Golloiking discussion it was decided that:-

1) HIA251 to sensain on constant supervision until next tuesday - regardless whether he remains in bed ox is allowed sp.
(2) Lo get sehool-work sent up to his room.
(3) A points progeanuce to be formulated boding to gradual re-intepeation to full pert interaction, bevin fully. up by graiday.
$20 \mid 586$ Continies to be obsewed by a murpe. Has beein doing school wonk which he has completed well:
dong ochool work which he has cample
Hais also been alcwed up for meals
in
202it 788. Mat
 Obenuuel eant. $\square$
$211518^{\circ}$ Stel conturute to be ofserved by a nure. up thes evennang. anc from 5-30- 8-30. Chot fulled an except for sclol period ture Well befared

24/22-5-86. Had supper and neturned.
to bad at 8.3opm - obsandiow
continined. No problem at'allwery quid.
22.5.86. ban le unampulatine lutt sTaft on the ball, contumien to be colserved chosely An..ioser $v$. to might.

## IN-PATIENT NURSING NOTES

|  | Date .........nnd May, 1986 |
| :---: | :---: |
| Doctor ............,, ............................................ |  |
| Nuxstins Summary cont. |  |
| Iissue and would have to earn his privileges back. |  |
| Also visits from mum, dad and aunt to be arranged if possible. |  |
| On 19 th May it was decided that HAZs should have his school work sent to ward. Also a Points Programme to be formulated leading to pradual reintegration to full peer interaction. |  |
|  |  |
|  |  |

The Royal Belfast Hospital<br>for Sick Children<br>DEPARTMENT OF CHILD PSYCHIATRY

Belfast BT12 6BE Northern Ireiand. telephone 240503
EXT 3550/2100

20 May 1986

## LS8

Nursing Officer
Lissue Hospital

Dear


RE: HIA251
I understand that following an incident last week, when this child and another child were on the roof of Lissue Hospital at which time they did considerable damage that the problem was discussed with Dr Nelson and it was agreed that Winston should in the meantime stay in Lissue Hospital. I understand it perhaps most importantly he shouild not be allowed to gain his objective of admission to Rathgael by extreme behaviours such as those mentioned above. At the moment he is being closely supervised but my own worry is that this can hardly be particularly productive in the long term and therefore I record below a proposed plan of action which has been discussed with you and which I am now reccommending should be put into action.

1. Careful attention should be given to easy access polnts to the roof and if it is feasible, access to these points should be made more difficult. A further point which I think is worthy of attention is that cars should where possible be parked in the maln carparking area and perhaps not be parked in areas where they may be easily damaged from the roof here I am thinking especially of car parking perhaps in the bothy region. obviously you may only be able to go so far on these polnts but think each is worthy of consideration.

## 2. If the child returns to the: roof then it is my opinion that his

 behaviour should be ignored. It would seem that it is far more dangerous to attempt to get the child down and infact such efforts may meet with increasing levels of destructiveness and direct aggression. Further any chase on the roof could result in elther the child or staff members falling and seriously injuring themselves. During the period that the child is being ilgnored then it is my opinion that he should be observed from a distance by one member of staff who does not in anyway attempt to interract with the child and whose sole purpose is to really monitor the situation. In general large scale observation should be avoided and persons including adults and children should be cleared away from any potentialiy dangerous areas. Of course this suggested course of action may have to be reviewed in the light of further experiences but it would seem to me that the most important thing is to try a definite course of action.3. Following any episode in which the child goes out on to the roof and later comes down my opinion is that he should be given a tranquillizer in the immediate phase and this should hopefully also allow the situation created in the general ward to settle down. Following this then a programme in which the child earns his way out of his own room should be instigated. This has already been discussed with: staff at Lissue and I hape that they would take this as their responsibility to design.
4. Very importantly I think that various people need to be informed about this course of action mainly in view of its potentially serious nature. Firstly both the district nursing and administrative people should be contacted and the plan of action revealed to them. Secondly social services should be informed since the child is I understand on a Fit Person Order. If there are problems with our plan which are raised by any of these bodies or if you perhaps yourself envisage any difficulties I would hope that you would immediately consult back with me.

I would appreciate your passing this information on to both nursing staff and other disciplines in Lissue and also to the district authorities as mentioned above. Perhaps you could ask one of the social workers on the unit to ensure that social services have also been informed as is mentioned above.

I hope that this course of action will help defuse the situation and deal with the problem if it reoccurs.

Yours sincerely

R McAuley MD MRCPsych Consultant Psychiatrist

IN-PATIENT NURSING NOTES
HIA251
Name
Date $30-5-86$
Docior ...Nelson. $\qquad$
OM cosuring on dutey thio morning $I$ was ingoenzed by staff-munae [S79 (a menctoen of the might-eluty stapy), that the alooue patiunt, HIA251, haed once ogain mansiged to abscoud on to the roof - he had been to the toilet, Accompained by staff-ruene Law who waited sutside the dooR, and managed to squeye theough the small unindow in the toilet; neme grom whre he managed its pain aleos f anto the roog byone he esold be apprelended by a nember of staft.

OM reciving Tho ruos $\%$ inmediatuly put into pperaten the reconmendations autlined in DR.
R. MrAuluys lettue to [S8 , dated 20 may 86 , which referred to the previons ineident when a sumilar episode ocentred.

The following steps coso were carried out i-

1) I assiqued initially a nember of the murscip staff - Bta/f-Nuse LS7 At keep HIA251 sunder observation from a safe distance and to nownition the siteration without altempting to iuterox
with him in any way.
2) I then instructed sally to ensure the safety of the childen remaining in the unit, by moving then to a safe area (in this eave the sining area initially, and following breakfast, the smaller of the two day-rooms), Making sure to keep all personnel away from any windows, sud closing all the ecertains sn the windows.
3) I informed the remaining persoued ins. The unit of the situation and to ensure their safety and salify of the children in the Pardiatcie Unit, I advised the musing staff in the Paediatric. lint it
a) Remise the chider flem any areas of dougete eopseially frons below the skylight in main hall.
b) Ho place a notice on the stain way below tho same sta skylight moteneting abl personal not to mae this stairway ealibt HIAR51 was an the roof.
4) \& I aloo instecueted all persona to muse their

IN－PATIENT NURSING NOTES
Name HIA251

Date $30-5-86$
Doctor $\qquad$ Newton． $\qquad$
4）Continued－
Cans away frown the main building area，down the which it a safer location．
（Unfostumately there had keen some ears dept oversight in the main ear－park at the front of the building by other disciplines attending a two－day whak－shop in hiosue and they could mot be centaveted to moue these sud sone wince subsequently ohmioged before they could eventually be moved．

5）I instructed［S140 and $\square$ members of the porterug staff，to：－
a）Block off access－up the drive and instruct any in conning personal of the danger，and re－rocits then to tho unit by a safer－nouts．

6）Ho block－If the stairway leading gean the reception area to the Child Psychiatry Mut and to erect a restive instratarg personnel mot 夜 use it（this stairway abs biro below is
sky-light which would prase a potential soucce of daugese'
I insheucted the pollawing persouel per phene of the in eident;
[S8 , Rsst. Dicectes of Nursing Leevices, to hio home, giving him the detecto. at that tive.
2) [SS142 Semior Registeal in ehild Psychiatey; who asked if wis were catrijing out the instructimo recommended by Dr. Ime Auly and $y$ crseced him that we (wsete) had; he also assuced mese that he would instruct De me Aully of this in eidust (De. Mrituley would be attendtueg the thint latee as the was aloo atteuday the work shap").
3) I Attempted to eontact Servics; at the Health Centse: and ringemed [S141

Services
Asst. Dinectie of Nussing hor who was deputising for [S129 of what had occurred, giving her detaito of the incident as I knew them at that time.
4) I aloo contacted Ruth Wark, Reputy Oppicer-in-Charge of Chen View Chilthews Home, frean where HIA251 was sductited, ; and she agreed $t$ eoutact the relwant Bocieal services elepartmout as HIA251 is presently under a

IN-PATIENT NURSING NOTES

HIA251
Name . $\square$ Nolom
$\qquad$

- "Mit Pusmin Ordex.

Chese stepo takeen of then arraisged foe the children remaining, is houre theire schoohing on the waed, as of did ust want ts expose them to any unneressary ohanger by musing autside the beilldury. With the help and eo-operation of the tenchureg atapt this was eluly completed.

I assiqued pucthes nuembers of trays to nelp is mesuitie HIA251 mevements on the roof without drawing attention to thenselues or exposing themochses it danges.

Whilst HIA251 then unbarked on an ocoy of destrenction, the nuenshes of musing staft aftempted os reatinue on the racitine of the unit as best stey cowld.

DR. AteAcley and LS142 whomerelatie as thand persouklly to see what had pecusted ap990 aud botk were moiotant thet HIA251 uass is
revive us attention which might frovithere eugrawits the situation and woe happy io leave the situation in the hauls of the nursing staff, they then rentinned with their wrek-ship.

Apter approximately three hours, HIA25T revered off the amain roof area ants the roof above the video vieusing-rookn, and with mussily (proved) blocking his aces back to the main roof; [S99 managed to trap him between us both.

At the stage HIA251 jumped into an adjoining field and ran off acres the towards the railway dives.
[S99 immediately quaver chase and managed to catch up with him on the railway hive bopper he was placed is any gunther danger, and with the help of mussing staph returned him back to the Unit.

On retum to the Whist HIA251 was inumediatily put to bed and recieved so mags of Diagepan inter-
 instructions giving us time to bring the unit back into ito pul router.

A murre was assiqued to maintain constant

IN-PATIENT NURSING NOTES

HIA251
Name .
$\qquad$ Nader $\qquad$
$\qquad$ HIA251 Supervision as

Date $30-5-86$ $\qquad$

H251
and a behaviour programme HIA251 to earn his way back out of bed to full par interactive.

The relevant slisciphines reese then brought up to plats an the situation, and all information chill documented, and relevant grows completed.


Charge Nurse.
$30 / 5 / 86$

