

Witness Name: Timothy Ho  
Statement No: WITN5698003  
Exhibits: Nil  
Dated: 13<sup>th</sup> April 2021

## INFECTED BLOOD INQUIRY

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### THIRD WRITTEN STATEMENT OF TIMOTHY BOON LEONG HO ON BEHALF OF FRIMLEY HEALTH NHS FOUNDATION TRUST

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I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 21 January 2021.

I, **TIMOTHY BOON LEONG HO**, of Frimley Health NHS Foundation Trust, Frimley Park Hospital, Portsmouth Road, Frimley, GU16 7UJ (the “Trust”) **WILL SAY AS FOLLOWS:-**

#### **Section 1: Introduction**

- Q1. Please set out your name, address, date of birth and professional qualifications*
- Q2. Please set out your current role at Frimley Health NHS Foundation Trust and your responsibilities in that role*
- Q3. Please set out the position of your organisation in relation to Frimley Park Hospital criticised by the witness*

1. I am a Consultant Chest Physician, Medical Director of the Trust and Executive Director on the Trust's Board. I joined the Frimley Park Hospital NHS Foundation Trust (the predecessor to the current Trust) in 2004 and was appointed as Medical Director in December 2013. Prior to being appointed medical director I was the clinical director for medicine and lead consultant chest physician for the Trust, establishing a medical high dependency unit and a number of regional diagnostic services for respiratory medicine.

2. By way of historical background, Frimley Park Hospital NHS Trust was created in 1991. It acquired Foundation Trust status on 1 April 2005, becoming known as Frimley Park Hospital NHS Foundation Trust. On 1 October 2014, Frimley Park Hospital NHS Foundation Trust acquired Heatherwood and Wexham Park Hospitals NHS Foundation Trust, and became Frimley Health NHS Foundation Trust, as it is known today.

## **Section 2: Response to Criticism of Witness W1950**

*Q4. At paragraph 16 of her statement, witness W1950 states that Frimley Park Hospital shared the information regarding her husband's infection whilst both of her teenage daughters were present. Witness W1950 explains that the hospital did not discuss the matter with herself and her husband prior to disclosing it to her children, as this was a serious matter which would 'devastate us all'. Please comment on this.*

3. The Trust is unable to comment on what common practice was at the time in question, in relation to informing family members of health news, or what happened in this particular instance as the relevant staff members have left the Trust. The Trust does understand that in some situations, it would not be uncommon for family members to be told of news together, and that this would depend on the specific circumstances. However, and notwithstanding this, the Trust recognises that the manner in which the news was given to the family was distressing to them, and I would like to apologise on behalf of the Trust.
4. At the time that Witness W1950 and her husband were informed of her husband's diagnosis, I understand that the only option for treatment was transplantation, as there were no other options available at the time. Presently, with the development of new drugs and treatment, patients receiving a diagnosis may have additional options, and as such, the tone and tenure of receiving such news would be different.

*Q5. At paragraph 16 and 17 of her statement, witness W1950 states that she was angry and disappointed regarding the quality of the information provided by Frimley Park Hospital. Witness W1950 states that the Hospital did not convey the seriousness of the situation, particularly that the condition could be fatal. She also details that they failed to communicate how the infection was transmitted to her husband and the lack of information provided regarding the risk of transmission. Please comment on this*

5. The Trust is unable to comment on what information was provided to the witness and her family at the time in question, in relation to the information provided by Frimley Park Hospital, and in relation to the quality of the information that would have been provided, as relevant members of staff have now left the Trust. However I would like to apologise on behalf of the Trust for any anger and disappointment caused to witness W1950 and her family due to any lack of communication and/or the quality of communication received.
6. With regard to the information provided regarding the risk of transmission, the Trust understands that Witness W1950 and her daughters were tested for any transmission of Hepatitis C, which fortunately resulted in negative results. As part of the informed consent process of testing, the usual procedure would have involved explaining the following points as part of obtaining informed consent:
  1. the purposes for which testing was being carried out (which would have been the risk of potential transmissibility of the infection in this case)
  2. what infections were being screened for and the importance of identifying the infections
  3. the symptoms and prognosis of the infections and the treatments available, if appropriate
  4. as well as any other risks and the need to perform a blood test
7. Without knowing the detail of what happened at the time, the Trust can make the assumption that the purposes of testing would have been to identify whether there had been any onward transmission of the infection from the husband of W1950 to his family, and that this discussion would have formed part of the process of informed consent. I would like to apologise on behalf of the Trust for any distress that the witness or her family were caused as a result of any relevant information not being given to them or not being explained in an appropriate manner.
8. Current practice at the Trust involves obtaining verbal consent from patients for any testing, and Trust staff providing patients with relevant guidance, such as direction to the British Liver Trust website, and physical leaflets from the British Liver Trust, so that patients are given all relevant information which they can take away and read. The British Liver Trust is the UK's leading liver health charity that works to improve liver health and supports those affected by liver disease or cancer.

### **Section 3: Other Issues**

9. The Trust has identified some discharge summaries for witness W1950's husband from one of the Trust's historical I.T. systems. The Trust can confirm that all hard copies of this patient's personal data have been destroyed in line with their relevant retention periods, as previously confirmed to the Inquiry. The electronic patient discharge summaries include some prescriptions, fluid charts, a record of the patient's Hepatitis C diagnosis in September 2005, and record of a blood transfusion in September 2005 which was undergone after the Hepatitis C diagnosis. If witness W1950 would like any further information on this, the Trust would be happy to assist where it is able.
10. I have reviewed the Inquiry's Terms of Reference and can confirm that there does not appear to be anything else which I consider relevant to the Inquiry's investigation of the matters set out in its Terms of Reference

### **Statement of Truth**

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

GRO-C

Signed

Dated 13<sup>th</sup> April 2021