

Witness Name: Northern Ireland  
Blood Transfusion Service  
Statement No: WITN2681034  
Exhibits: WITN2681035 -  
WITN2681047  
Dated: 30 May 2023

## **INFECTED BLOOD INQUIRY**

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### **WRITTEN STATEMENT OF THE NORTHERN IRELAND BLOOD TRANSFUSION SERVICE**

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I provide this statement in response to a request under Rule 9 of the Inquiry Rules 2006 dated 24 March 2023.

I, Karin Jackson, will say as follows: -

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

1. I am Karin Jackson. I have been CEO of the NIBTS since October 2016. My professional address is the Northern Ireland Blood Transfusion Service Headquarters, Lisburn Road, Belfast, BT9 7TS.
2. My date of birth is known to the Inquiry.
3. I make this statement in response to criticisms raised in the statement of Dr Kieran Morris, witness W3922.
4. Dr Morris was employed with the Northern Ireland Blood Transfusion Service (NIBTS) until his retirement on 30 September 2019. It should be noted

however that Dr Morris commenced a period of sick leave on 13 June 2019 and did not return to his post prior to his retirement.

## **Section 2: Responses to criticism by witness W3922**

### **Response to Criticisms in Paras 8-11 regarding Dr Morris' Involvement with the Inquiry**

5. I dispute the claim made by Dr Morris that he was afforded limited opportunity to engage with the Infected Blood Inquiry.
6. Furthermore, I dispute his claim that, as Chief Executive, I actively excluded him from attending two meetings and the opening hearing of the Infected Blood Inquiry.

#### *Attendance at Infected Blood Inquiry opening hearing*

7. I do not accept that Dr Morris was prevented from attending the opening hearing of the Infected Blood Inquiry.
8. During the week before the opening hearing, it became apparent that the other UK blood services were planning to send senior representatives in addition to their legal representatives to the opening hearing. I decided it would be appropriate for NIBTS to do likewise notwithstanding that this development had occurred at a relatively late stage.
9. As Dr Morris was in Prague on business that week, I had limited opportunity to discuss his attendance at the hearing. However, I do recall some discussion as to whether he should be on site in NIBTS headquarters when the other NIBTS consultant, Dr Maguire, returned to work [GRO-C] My recollection is that her return coincided with the opening hearings of the Inquiry and Dr Morris felt that he should be in Belfast when she started back to work.

However, I indicated that if Dr Morris was unable to attend then a senior medical colleague could attend the opening hearing in his place.

10. Contrary to the claim made in his statement, I did not instruct nor ask Dr Morris not to attend the hearing. On Monday 24 September 2018 I was advised that Dr Morris would be able to attend. I authorised his travel to attend the hearing on Wednesday 26 September 2018 with Mr Ivan Ritchie, NIBTS Head of HR & Corporate Services and NIBTS Senior Information Risk Owner (SIRO). This was so that he would be present when Mr Alphy Maginness, Chief Legal Advisor in the Directorate of Legal Services, made his initial oral submission to the Inquiry on that day. When I returned to work, I was surprised that Dr Morris did not attend the opening hearing and expressed that in an email to him (WITN2681035 and WITN2681047). He did not respond and refused to discuss with me his decision not to attend the opening hearing.

*Invitations to Department of Health Northern Ireland (DHNI) Meetings*

11. Dr Morris' claim that he was not invited to the regional Infected Blood Inquiry meetings organised by DHNI is not correct nor is it correct that he had to "gatecrash" these meetings.
12. These meetings were initiated by DHNI in response to correspondence from the then Permanent Secretary, Mr Richard Pengelly, (WITN2681036) which was sent to Health and Social Care Chief Executives. This letter requested a single point of contact (POC) to liaise with them for each organisation.
13. I was the single POC for NIBTS. However, as I was due to be absent from work in early 2019 for elective surgery, I nominated Mr Ivan Ritchie as POC for NIBTS during my absence. I also asked that Dr Morris be included in a poll arranging a suitable date for the initial meeting (WITN2681037 - email dated 26 September 2018). Meeting invitations were sent to Dr Morris and he was included in the email circulation list by the DHNI organiser at my request (Exhibits WITN2681038-WITN2681041).

14. In short, I made every possible effort to ensure that Dr Morris was invited to these meetings – including the first meeting that was held on 12 November 2018.

*Meeting with DLS and Counsel*

15. I take issue with Dr Morris' claim that he was not facilitated to attend a meeting with the Director of Legal Services, Counsel and senior colleagues from the Belfast Health and Social Care Trust. There were limited options for availability to meet due to attendees' other commitments and impending Rule 9 deadlines.
16. I recall that Dr Morris advised, after the meeting request was sent, that he would be on leave at that time and could not change this. The meeting took place on 16 April 2019 with Dr Kathryn Maguire, Consultant in Transfusion Medicine, present.

*Dr Morris' involvement in NIBTS response to Rule 9s*

17. I dispute Dr Morris' claim that he was not consulted or asked to advise on statements submitted to the Inquiry on behalf of NIBTS.
18. Prior to Dr Morris taking sick leave in June 2019, and before he retired from NIBTS on 30 September 2019, NIBTS received two Rule 9 requests dated 24 August 2018 and a third dated 11 April 2019. The latter concerned a specific patient.
19. The first two Rule 9 requests related to documentation held by NIBTS as well as any records management policies and procedures that had been in place for the period of interest to the Inquiry.
20. A draft response to this was prepared by the Senior Information Risk Owner (SIRO), Mr Ivan Ritchie and the NIBTS Information Governance Manager, Mrs

Paula Johnston and I subsequently approved and signed the final version of the response.

21. These responses were discussed at the weekly IBI meetings at which Dr Morris was present. He was also copied into emails to which the draft submissions were attached.
22. Dr Morris advised at that time that he had nothing to contribute to the responses as they primarily related to a period of time when he was not employed by NIBTS.
23. Similarly, Dr Morris attended meetings at which the third Rule 9 response concerning an individual patient was discussed. It is clear from the text that there was clinical input into the response, some of which was provided by Dr Morris.
24. I would therefore absolutely refute Dr Morris' assertions that he was actively excluded from contributing to those Rule 9 responses.

### **Response to Criticisms in Paras 16-23**

*Claim that medical staff were excluded from document search process*

25. I dispute Dr Morris' claim that Medical Staff were excluded from the search process for documents relevant to the Infected Blood Inquiry.
26. NIBTS took steps to secure all documents relevant to the Inquiry and to prevent them from being interfered with by any member of NIBTS staff. Locks to an area where a significant volume of documentation was stored were changed. The area used to review documents was secured with access limited to a very small number of staff. Details of these arrangements were shared with the Inquiry in response to their Rule 9 request dated of 11 June 2019 to which NIBTS responded on 6 August 2019. NIBTS took the steps described to ensure the integrity of the arrangements put in place to identify and collate

relevant documentation for the Infected Blood Inquiry not, as suggested Dr Morris, to exclude medical staff from the search process.

*Claim that use of agency staff and planning of document sort not discussed with Dr Morris*

27. I dispute Dr Morris' claim that the employment of agency staff to conduct the search of documents relevant to the Inquiry was not discussed with him.
28. A group chaired by the Chief Executive and including the Medical Director, Dr Morris, Head of HR & Corporate Services/SIRO, Ivan Ritchie, and Information Governance Manager, Paula Johnston, was established to ensure that NIBTS responded appropriately to any requests for information from the Inquiry and from DHNI. WITN2681042 is the note of the meeting during which the arrangements for Agency staff were discussed. The record clearly shows that Dr Morris was present for those discussions.
29. Exhibit WITN2681043 sets out the methodology for the sorting of both the plant room and Dr Morris' office. This was agreed at the fortnightly meetings at which Dr Morris was present. Updates on the progress of this work were given at each meeting. Dr Morris was not excluded either from the planning of the sort or from the assessment of the material identified during the sort.
30. It will be noted that, having criticised the search processes adopted by NITBS, in Paragraph 26 (g) of his statement, Dr Morris goes on to say that the files were catalogued and secured in an appropriate manner. He adds that if he still believed that documents had been destroyed, he would have raised this concern publicly. He then concludes the paragraph by saying that he was reassured and was content following a meeting with the NIBTS Information Governance Officer.

*Dr Morris' statement that no documents were missing*

31. At the end of paragraph 26 of his statement, Dr Morris says that no documents were missing. I do not believe that this is entirely correct. As Dr Morris acknowledges in paragraph 25, it was not possible to locate a number (approximately six) of “look back” files from 2000 to 2006. During that period, Dr Morris was the consultant responsible for overseeing these files. Due to concerns that Dr Morris had previously removed NIBTS material from the NIBTS headquarters building, extensive searches – which included the involvement of external agencies – were conducted. No documents relevant to the Infected Blood Inquiry were found, however, the six look back files remain unaccounted for.

*Dr Morris’ recording keeping*

32. I am surprised by Dr Morris’ claim in Paragraph 21 of his statement that he was “fastidious” with his record keeping.
33. That was not my experience and it is of note that Paula Johnston’s email dated 23 August 2019 (WITN2681044) refers to the storage of Dr Morris’ files in the NIBTS HQ plant room as “chaotic”.

*Involvement of medical staff in review of documents*

34. I dispute Dr Morris’ claim that NIBTS medical staff were excluded from the review of documents and that their offer as subject matter experts was not accepted.
35. Dr Morris’ email dated 28 December 2018 (WITN2681045) acknowledges the input that he and other medical staff had in the review of documents.
36. Moreover, Dr Morris fails to mention that NIBTS engaged a medical expert from England to augment and assist in the review of material for the Inquiry.

*Events following Dr Morris taking ill in October 2018*

37. I totally reject Dr Morris' claim that my actions, in and around 11 October 2018, following a seizure that he suffered at work, were a deliberate attempt by me to prevent him from attending a Board meeting to discuss his concerns regarding the NIBTS approach to the Inquiry. This was not the case. At all times, Dr Morris' well-being was my primary concern.
38. Dr Morris confirms in Paragraph 22 of his statement and his Additional Submission, that he experienced a sudden seizure whilst at a meeting with a colleague in a local health Trust on 11 October 2018. As a consequence of this seizure, the hospital crash team was called to provide medical assistance. Dr Morris was admitted to hospital where he remained overnight.
39. On 12 October 2018, Dr Morris informed me in a phone call that, although he was still in hospital, he hoped to be discharged that day and intended to return to work immediately. As I was extremely concerned for his wellbeing, I advised Dr Morris that he was not to return to work until he had been assessed by Occupational Health and they confirmed that he was well enough to return to work.
40. Contrary to what he has suggested, at no time was my intention to ensure that Dr Morris did not attend the Board meeting. My overwhelming concern was for Dr Morris' wellbeing. This supported by an email that I sent to the OH Manager, on 12 October 2018 and a letter that I wrote to the Occupational Health Consultant on 19 October 2018. These are available should the Inquiry wish to have sight of them. I have not exhibited them because of the confidential nature of the information contained therein.
41. In any event, notwithstanding his absence from work, Dr Morris shared his concerns with the NIBTS Board Chair at that time, Mr Jim Lennon, by email on 25 October 2018. Mr Lennon discussed these concerns with me and concluded that they were operational matters to which I could respond as appropriate.



42. Following my discussions with Mr Lennon, I sent an email to Dr Morris, dated 5 November 2018, addressing the concerns he had raised (full email provided at WITN2681035). Whilst the subject of the email states that it is DRAFT, it was, in fact, the final version and it was an error on my part that the “DRAFT” remained in the subject heading. This response was copied to Mr Lennon.
43. At every one-to-one meeting that I had with Dr Morris from the time of this email, until he was absent from work in June 2019, I asked him if we could discuss further the concerns that he raised with Mr Lennon and my response. On each occasion he declined which I noted. The notes of these meetings are available should the Inquiry wish to see them.

### **Response to criticisms in Paras 25**

#### *Claim that records potentially relevant to the Inquiry were disposed of*

44. I dispute that any records potentially relevant to the Inquiry were disposed of as suggested by Dr Morris.
45. Paula Johnston, Information Governance Manager, has confirmed that no NIBTS records potentially relevant to the Inquiry were disposed of during the decluttering of the plant room. However, as detailed in an email dated 26 October 2018 from Mrs Johnson to myself and Ivan Ritchie (WITN2681046 and WITN2681047), the team did dispose of documents that were of no business or evidential value or, which under GDPR, were not necessary to retain. These included multiple copies of documents such as procedures, forms, policies, minutes and agendas. In addition, there was a large volume of material that Dr Morris had retained such as multiple copies of flyers for courses and conferences and empty envelopes.
46. I note that Dr Morris appears to accept what Mrs Johnston has said because, as already mentioned above, at the end of Paragraph 26 of his statement, he states that he was reassured that the documents he believed were missing, were not missing.

## **Response to criticisms in Paras 28-35**

### *Position adopted by NIBTS to commencement date of HCV testing*

47. Dr McClelland sets out the position adopted by NIBTS in relation to the introduction of HCV testing in Northern Ireland at Paragraph 32 of his written statement to the Inquiry 's [WITN0892006]. He states:

*“NIBTS implemented screening for hepatitis C antibody from 1 September 1991 as in other UK regional transfusion centres. While this was the official start date, two or possibly three sites began testing on a pilot basis a short time (1 / 2 months?) before the official start date in order to check on any operational issues associated with either of the two available tests.”*

48. In Paragraph 33, Dr McClelland goes on to say: *“The approach to HCV testing in the UK was closely coordinated and involved UK transfusion services, Departments of Health and with advice being provided by world leading hepatitis virologists. .... I should note that I personally was not part of the ‘inner circle’ who took the (UK wide) decisions”.*

### *Reasons for Dr Huw Lloyd moving to Canada*

49. In his statement, Dr Morris speculates on Dr Huw Lloyd's reason for moving to Canada. Whatever Dr Lloyd's reasons for moving to Canada, how they may be relevant to NIBTS escapes me.

### *Haemophilia care in Northern Ireland*

50. Further details regarding the practices for the care of patients with haemophilia in Northern Ireland, and in particular the vCJD notification exercises, can be found in the witness statements of Dr Gary Benson (WITN3082015) and Dr Julia Anderson (WITN4027001).

### *Cessation of prison blood collections*

51. Dr Morris' suggestion in Paragraph 33 of his statement that blood collections may have continued in prisons after 1983 is incorrect. Dr Morris gives no details in support of this claim. He does not say with whom or when the discussions to which he alludes took place. The provenance of the claim is unknown.

### **Response to Additional Submission**

52. It is not clear when the document entitled "Additional Submission" was written. I note that Dr Morris signed his witness statement to the Inquiry in January 2020 which was three months after his employment with NIBTS terminated on 30 September 2019.

53. The penultimate paragraph of the Additional Submission opens with the sentence:

*"I am currently assessing what has been retained and checking for missing records which may be relevant to the Inquiry or otherwise should be retained for business purposes".*

The rest of this paragraph suggests that Dr Morris was still conducting a review of the documents at the time of writing. However, Dr Morris was no longer employed by NIBTS in January 2020 and was not involved with any aspect of the organisation's response to the Infected Blood Inquiry at that time. It would seem, therefore, that the Additional Submission was written at some (as yet) unspecified date prior to Dr Morris leaving NIBTS.

54. All other aspects raised in this submission have been addressed earlier in my statement.

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

55. In my view, circumstances surrounding Dr Morris' departure from NIBTS may have influenced his perception of events during 2018 and 2019 to which he refers in his statement to the Infected Blood Inquiry.

**Statement of Truth**

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

Signed GRO-C

Dated 30 May 2023

**Table of exhibits:**

| Date       | Notes/ Description  | Exhibit number |
|------------|---|----------------|
| 05/11/2018 | Email from Karin Jackson to Dr Morris   | WITN2681035    |
| 24/08/2018 | Letter from Richard Pengelly, Permanent Secretary, requesting a single point of contact   | WITN2681036    |
| 26/09/2018 | Email from Karin Jackson to her PA asking her to complete a poll for Dr Morris' and Ivan Ritchie's availability and enter HOLDS in diaries. | WITN2681037    |
| 03/01/2019 | Email from Karin Jackson to Dr  | WITN2681038    |

|                           |  |             |
|---------------------------|--|-------------|
|                           | Morris with papers for Regional IBI meeting & comment that she has asked DHNI to add him to circulation list   |             |
| 03/01/2019                | Email from Karin Jackson to DHNI asking for Dr Morris to be added to circulation list for the Regional group   | WITN2681039 |
| 26/09/2018,<br>09/10/2018 | Series of screenshots showing Karin Jackson invited Dr Morris to DHNI meetings, confirming the agreed meeting had been added to his calendar, KM's calendar showing the meeting. | WITN2681040 |
| 24/12/2018                | Email from Karin Jackson to Dr Morris with dates of future Regional IBI Meetings   | WITN2681041 |
| 06/09/18                  | Record of meeting during which arrangements for agency staff was discussed   | WITN2681042 |
| July 2018                 | Methodology for sorting plant room & Dr Morris' office   | WITN2681043 |
| 23/08/2019                | Email from Paula Johnston to Karin Jackson and Ivan Ritchie  | WITN2681044 |
| 28/12/2018                | Email from Dr Morris to Paula Johnston acknowledging the input of himself & other medical staff  | WITN2681045 |
| 26/10/2018                | Email from Paula Johnston and  |             |

|            |   |             |
|------------|---|-------------|
|            | attachment confirming the documents that had been disposed of | WITN2681046 |
| 25/10/2018 | Categories of Records retained and disposed                   | WITN2681047 |