

Witness Name: Debra Pollard
Statement No.: WITN3094069
Exhibits: WITN3094070-77
Dated: 10.08.2023

INFECTED BLOOD INQUIRY

WRITTEN STATEMENT OF DEBRA ANNE POLLARD

I provide this statement on behalf of The Royal Free London NHS Foundation Trust in response to the notification under Rule 13 of the Inquiry Rules 2006 dated 20 October 2022 and the request under Rule 9 of the Inquiry Rules 2006 dated 10 May 2023.

I, Debra Pollard, will say as follows: -

Section 1: Introduction

1. I am employed by the Royal Free London NHS Foundation Trust ("the Trust") as Lead Nurse Specialist within the Haemophilia and Thrombosis Centre ("the Centre"). I have been in this role since May 2014. Prior to that I worked for the Trust as a Clinical Nurse Specialist since February 1992. I have therefore worked at the Centre for 29 years. I retired from this full time role in October 2020 and returned part time in December 2020. My job title remains Lead Nurse Specialist.
2. As Lead Nurse Specialist, my responsibilities include leading and managing a team of specialist nurses and allied health professionals. I am also responsible, together with the Centre Director, for the strategic development and management of the department. In my role as Lead Nurse Specialist, I have been responsible on a number of occasions for answering questions from the Infected Blood Inquiry ("the Inquiry"). As a result I am aware of some of the issues surrounding the Inquiry and know how to investigate matters arising within our archives and systems.

3. I have been asked to write this witness statement on behalf of the Trust to respond to certain criticisms raised in the witness statement of W3288 dated 12 November 2019, in which he raises criticisms regarding the care he received by the Trust
4. For the purpose of preparing this witness statement I have reviewed the records held by the Trust in relation to W3288 and provide this statement on the basis of those records. Where matters within this statement are not directly within my own knowledge, I believe them to be true.
5. I attach to this statement **Exhibits WITN3094070-WITN3094077**. These are extracts from the Trust's records detailing various aspects of W3288's care which are relevant to his criticisms.

Section 2: Background Information

6. W3288 was diagnosed with Von Willebrand disease in 1978 and was treated with Factor VIII. W3288 was informed in September 2004 as part of the vCJD notification process that as a result of exposure to British blood products between 1980 and 2001, he was considered "*at risk of vCJD for public health purposes*". We attach evidence of this notification at **Exhibit WITN3094070**. The Health Protection Agency instructed hospitals to record this information in patient health records, as exposure to vCJD is considered a public health risk, particularly in relation to the use of surgical instruments and their subsequent decontamination before reuse.
7. W3288 states that he does not know whether is infected with vCJD. This is because vCJD is a clinical diagnosis made in someone exhibiting specific neurological symptoms when further investigations might be considered by a Consultant Neurologist. This information was contained in the Patient Information sent to W3288 with the notification in September 2004.
8. There are records of W3288 being tested for HIV, HBV and HCV, all of which were negative. Please see the virology results exhibited at **Exhibits WITN3094071-WITN3094073**.

Section 3: Response to Criticism of W3288

9. The Inquiry has requested that the Trust respond to the following comments made by W3288:

At paragraphs 27-29 W3288 recalls an admission to the Royal Free Hospital following an operation to remove a tumour in around 2012. In relation to this admission, W3288 states:

"I was put into the isolation ward on the ninth floor of the Royal Free hospital. Before I got there, the nurses were lined up. I remember them saying "we don't touch him". They all refused to come near me or to administer Factor VIII to me.

A friend of mine and his wife came to visit me at the hospital. While they were there, I asked the nurses why they wouldn't administer the Factor VIII to me.

One of the nurses told me that they cannot administer the Factor VIII and recommended that I go to "a good haemophilia centre like the one at UCH" (University College Hospital)."

10. There would be no reason for W3288 to have been placed in isolation and I can only assume that there was a misunderstanding amongst the ward nurses of the requirements for treating someone *"at risk of vCJD for public health purposes"*. The Royal Free Hospital Infection Control policy makes it clear that requirements for treating such patients are largely in relation to certain pathology samples and surgical instruments.
11. At the time of W3288's admission, only Haemophilia Nurses or Doctors would administer Factor VIII to patients with bleeding disorders. Ward nurses were not able to administer the products. This policy has since changed and all ward nurses are now able to administer the products with guidance from the Haemophilia Team.
12. The Haemophilia Centre at the Royal Free Hospital is a Comprehensive Care Centre (CCC) with all elements of care required for people with bleeding disorders provided. The University College Hospital has a number of senior Consultant Haematologists who are also experts in Thrombosis and Haemostasis and are able

to treat and manage bleeding disorders, however the additional support is not available there which is why it is designated as a “Haemophilia Centre” not a CCC.

Section 3: Other Issues

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13. At paragraphs 20-21 of his statement, W3288 states that after asking whether his exposure to vCJD should be recorded in his medical notes, *“no clinicians wanted anything to do with [him]. [His] appointments would be cancelled and [he] felt this was because they saw [him] as contaminated.”*
14. Whilst I cannot comment on the actions of clinicians at other hospitals, on review of W3288’s records, he was seen on a number of occasions by the Ear, Nose and Throat (ENT), Ophthalmology and Cardiology teams at Royal Free Hospital. We attach evidence of this at **Exhibits WITN3094074-WITN3094076**.
15. Later in his statement at paragraphs 23-25, W3288 states that when he had the surgery to remove a tumour in his throat in around 2012, he had not been told what the appointment was for until he arrived at the Royal Free Hospital.
16. I note from my review of W3288’s records that Dr Chowdary referred W3288 to the ENT team at his request on 12 May 2009. As can be shown in the ENT team letters from 2010 and 2011, W3288 had a microlaryngoscopy and biopsy performed in an outpatient clinic on 15 December 2010 where a lesion was identified. This was tested and found to be non-malignant. All letters had been clearly marked as having been copied to W3288.
17. At paragraph 50 of his statement, W3288 states that he was *“never offered any treatment or counselling”*. As shown in the Patient Information sent to patients with the vCJD notification, all patients who received the vCJD notification were offered the opportunity to come to the Centre to discuss the notification with a member of the clinical team. There is no record of W3288 replying to this offer either in the Centre’s telephone log or the copies of reply slips to the notifications (see **Exhibit WITN3094077**). Following these consultations, some patients were referred to the Centre’s therapists, Mrs Riva Miller or Ms Nicola Dunn for individual counselling.
18. At paragraph 58 of his statement, W3288 states the following:

"I feel very frustrated and disillusioned with the quality of the medical care that I have received. It does not feel like the clinicians actually want to help me. If they did, they would meet with me again after the initial consultation."

19. I am not certain whether W3288's comments are made in respect of the Trust or University College Hospitals London NHS Foundation Trust. I attach a number of letters relating to W3288's care at the Royal Free Hospital before he decided to move his care to University College Hospital. The Trust considers that these letters demonstrate that his health concerns were taken seriously, with referrals being made to appropriate clinicians for investigation and management. There is also evidence of follow-up with these teams. Please see **Exhibits WITN3094074-WITN3094076** .

20. W3288 comments at paragraphs 59-61 that he told Dr Murray that he would not be coming back because he did not feel Dr Murray does anything for him. He adds that Dr Murray sent a letter to W3288 recording that he had said that. W3288 adds that this was not a surprise to him and it *"showed [him] that there was no real care. It was all about ticking the boxes"*. Whilst we have not identified the letter to which W3288 refers, in response to his comments, we would note that it is standard practice to record such conversations with patients as this in a letter to a GP.

Statement of Truth

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

Signed

GRO-C

Dated 10th August 2023_____

Table of exhibits:

Notes/ Description	Exhibit number
vCJD notification letter dated 30 September 2004	WITN3094070
Royal Free NHS Trust Department of Virology test results dated 18 May 2004	WITN3094071
Royal Free NHS Trust Department of Virology test results dated 05 May 2008	WITN3094072
Royal Free NHS Trust Department of Virology Virus Serology dated 20 May 1992	WITN3094073
Letter from Dr P Chowdary to the Consultant Surgeon at Royal National TNE Hospital dated 14 May 2009	WITN3094074
Letters regarding W3288's visual treatment	WITN3094075
Letter regarding W3288's blood pressure	WITN3094076
vCJD Patient reply sheet	WITN3094077