# Investigation into an allegation concerning Jimmy Savile at Cardiff Royal Infirmary, New Years day 1963/1965

**A report for**

**Cardiff and Vale University Health Board**

(February 2014)

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# 1. Introduction

This investigation was undertaken following a recent allegation made by patient A regarding an incident that occurred whilst an in-patient in Cardiff Royal Infirmary (CRI) during 1963-1965. The patient is unable to recall the specific date although is certain that it occurred on New Years Eve 1963/1964 1964/1965.

The alleged incident is as follows:

Patient A, who was 21/22 years of age at the time, had been an in-patient at CRI to have an ear operation. Patient A remembers that she was in a 6-8 bedded ward which consisted of mostly elderly patients. At midnight on New Years Eve, Matron (or the Night Sister) attended the ward with three men. Whilst the nurse stood at the end of the ward with the two men talking, patient A was approached by an individual believed to be Jimmy Savile (JS). He was dressed in a tracksuit and had long blonde hair. He was wearing jewellery and was walking quickly around the ward. He took the patient's left hand and started to kiss it and moved up kissing her arm whilst leaning on the bed. When he got near her shoulder/armpit she felt very uncomfortable and pulled the sheets over herself. The male, believed to be JS then moved away to the next patient.

Patient A had reported the incident to the police on the 14/11/2012, and a telephone interview was carried out by the Metropolitan Police Service on the 20/01/2013 under the auspices of Operation Yewtree.

Following contact from the Department of Health in May 2013, Cardiff and Vale University Health Board (UHB) were tasked with investigating the allegation. The investigation process commenced in June 2013 following a teleconference with the Department of Health and other NHS organisations involved in the investigation process.

Patient A was visited at home on the 27th July 2013 by two senior nurses from the UHB. Patient A's account of the incident was consistent with the initial account given to the police. Patient A's carer/friend was present at the visit and the lead investigator was accompanied by a female Nurse Specialist for Safeguarding. Patient A was quite anxious and obviously felt affected by the memories, she did not want to go into too much detail and she couldn't remember any names of staff at that time and stated that she would like to forget about it now. Patient A's friend, B, was keen to participate in the conversation but didn't really see the point in it as (JS) was dead. B also expressed concern that bringing up the incident was only adding to patient A's anxiety and trauma. Patient A was offered support and given the telephone number of the UHB Lead Investigator in case she wished to discuss the investigation further or access support and counselling. Patient A commented that the police had provided a telephone number to access support and if needed, that service would be utilised**.** Patient A gave the investigator verbal consent to access any medical records relating to her care in CRI as part of the investigation although Patient A indicated that she did not wish to have any further engagement in the matter.

Patient A described the night of the incident, she was adamant that it was New Years Eve 1964/1965 however B seemed to think it was 1963/1964. This discrepancy in dates was due to the fact that patient A was in the CRI soon after the birth of her child. B did not know patient A at that time but it was obvious that they had discussed the date. Patient A worked the date out by her children's ages as patient A's

daughter, who was born in October, was also in hospital that year. Although no firm agreement could be made on the date, Patient A could recall that she had been admitted for an ear operation and described how she had been in a 6-8 bedded area which consisted of mostly elderly patients.

Following national press coverage on the 7th November 2013 where health officials confirmed that the CRI was one of the hospitals carrying out an investigation concerning JS, the Lead Investigator made further telephone contact with patient A. This was to advise patient A that it was understood that the investigation would be published in 2014 and to offer her reassurance that her personal details would remain anonymous. During this conversation the Lead Investigator discussed the issue of consent again and requested that patient A complete a consent form agreeing that any health records which could be located, could be accessed to enable the Lead Investigator to ascertain any further detailed information which would support the full and accurate completion of the investigation. At this point in the UHB investigation no health care records relating to Patient A's admission to CRI had been located and consideration was being given to the need to access G.P. records to ascertain any information relating to any previous admissions to hospital, including any information relating to the CRI admission which patient A indicated occurred in the 1960s. Patient A subsequently returned the signed consent form on the 2nd of December 2013 and indicated that she would like to receive a copy of the completed report prior to it being published. Patient A's consent relates only to access to medical records held by healthcare professionals.

A brief on the handling of this case has been provided to the UHB Board in part B (private session) of its meeting that took place on 3rd September 2013. Given the sensitive nature of the allegation made by patient A and the patient's expressed desire at that time, to have no further interaction with this matter it was not considered appropriate for the matter to be discussed in the public Board meeting.

It should be noted that following contact with Patient A in November 2013 patient A again confirmed verbally to the Lead Investigator that she did not wish to have any further engagement with this matter.

## 2. Terms of Reference

- Examine and account for JS's association with Cardiff and Vale UHB in the 1960s.
- Investigate current concern relating to JS's behaviour at Cardiff Royal Infirmary on the 31st December, 1st of January 1963/1964 and1964/1965.
- To review historic and current Policies and Procedures specific to the organisation.
- Identify recommendations for further action if necessary by the Health Board.

# 3. Executive Summary and Recommendations

Following a complaint about an historic incident by patient A concerning JS during 1963/1965 at Cardiff Royal Infirmary, Cardiff and Vale UHB was requested by the Department of Health to carry out an investigation into the circumstances surrounding the incident. A detailed review of archived material was examined as well as newspapers, photographs and internet searches. Several staff who were employed in the CRI during the 1960's and who could still be contacted were also asked for their recollections of events and any attendance at CRI by JS. These former CRI staff (7 in total) could not recall JS visiting CRI in the 1960s nor could they recall any allegations of the nature raised by patient A being made at the time. The Lead Investigator could find no documentary evidence relating to that period to support the allegation that JS had visited the CRI during the 1960s. No incident reports or any other reports relating to the allegation made by patient A could be located by the Lead Investigator.

In line with patients A's consent, her GP and in-patients health records were examined and although most historical notes have been destroyed in line with Records Management: NHS Code of Practice (Department of Health) Annex D1: Health Records Retention Schedule, there was evidence found to support that she had undergone surgery in the CRI in May 1965. No records were found of an admission for patient A over the New Year period on either 1963/1964 or 1964/1965.

The only record of JS attending the CRI that could be found relates to a photograph that was taken in the 1980s. An account given by the member of staff who has the photograph in their possession, was that JS was running a marathon that day and had used the toilet in the CRI before posing for a picture with a number of portering staff.

During a meeting with the UHB Lead Investigator and Patient A in July 2013, patient A was adamant that she did not wish to have any ongoing involvement in the investigation nor did she wish to have any further contact with the Health Board in relation to this matter. However following media attention in November 2013 further contact was made with patient A to offer reassurance about anonymity. At the request of the Lead Investigator Patient A subsequently provided written consent to authorise access to any records relating to her hospital care at the time of the incident. Patient A has indicated that she does wish to receive a copy of the final report prior to publication.

The UHB has no reason to disbelieve patient A, but no documentary evidence could be found to show that she was in hospital in the CRI on or around New Years Eve 1963/1964 1964/1965 and no evidence could be found to show that JS visited the hospital in the 1960's. Based upon the findings of the UHB investigation it is considered that there is no further action for the Health Board to take in respect of this specific allegation, as it is unable to reach a conclusion about whether the incident took place.

This alleged incident occurred approximately 50 years ago since which time the Health Board has put in place safeguarding and incident reporting policies and procedures to support good practice which minimise the risk of incidents of this nature occurring or going unreported.

# 4. Investigation

The investigation focused on four areas:-

1. Direct contact with patient A, and a review of medical (health care) records.
2. A review of archive material from the mid 1960s. Newspaper Reports were obtained online and archive material was viewed manually at the Glamorgan Archives and Cardiff Central Library.
3. Contact with staff (7 in total) who were identified as working in the CRI in the 1960's.
4. Contact with patient A's current G.P. practice via the G.P. Practice Manager.

**Review of Medical Records**

Patients A's medical records, hospital and GP records were examined. Current GP records contained entries from 1963, 1969 and 1971. There was no mention of admission to the CRI in these hand written notes and they were very brief in detail. The records mainly commented on other health issues. Electronic records at the surgery made no reference to the incident and the Practice Manager advised that none of the GP's in the practice could recall patient A making a disclosure about JS.

Patient A's hospital inpatient and outpatient health care records were also examined as part of the investigation. The records consisted of three separate files 1993 – 2002, a current set of records dated up to 2013 and a historic set of records containing notes dating back from 1965-1984.

The retention periods for medical records as defined by Records Management: NHS Code of Practice (Department of Health) Annex D1: Health Records Retention Schedule, are as follows:

Adult record: 8 years from last point of contact

Paediatric record: 25 years from last point of contact

Mental Health: 21 years from last point of contact

Obstetric records: 25 years from last point of contact

Deceased records: 8 years from date of death

The Head of Health Records for the UHB is unable to confirm the guidelines for records in the 1960's and 1970's however when they commenced employment in 1978 the same timeframes were in place that are in place today. Patient's notes would only be retained if a patient was in continual contact with the Health Board from that time. Patient A does not fit into this category.

The review of patients A's health records associated with her admission to the CRI consisted of three documents. One document was a treatment sheet, one was an observation sheet and the other was a discharge summary that was completed by "the resident" and posted on discharge. These documents are dated between the 10th May and the 23rd of May 1965. The discharge summary indicated that surgery on patient A's left ear had been undertaken. The date of the surgery on the observation chart has been recorded as the 12th of May and date of admission has been recorded as the 10th of May. An entry on the observation chart describes the particular

operation as being undertaken on her left ear, this chart does not record the year. Observations on this chart continue up to the 20th of May, a discharge date is not recorded. The medication chart confirms that medication was commenced on the 10th of May 1965 and discontinued on the 15th of May 1965. There is no date of discharge on the discharge letter but it contains a date of the 10th of May 1965 (admission) and indicates that a take home prescription is provided up until the 27th of May 1965.

Patient A's current outpatient and inpatient health care records contain entries from health professionals about past medical history. A nursing entry in 1978 states that patient A had an ear operation in a hospital outside of the Cardiff area at the age of 16. An entry in January 2007 indicates that patient A has had two separate ear operations one on her left ear 30 years ago and one on her right ear 40 years ago which would suggest that patient A was aged 34 (left ear) and aged 24 (right ear). An entry in the patient's health record dated September 2012 stated that patient A had received two ear operations. This information is corroborated by a GP referral letter.

There is a discrepancy in the date provided by patient A and the dates identified within the medical (health care) records. Patient A said that she was in the CRI for an ear operation over the period of the New Year. Records however show that surgery was carried out in the CRI in May 1965. It is clear that patient A has had another operation on the other ear but based on information obtained through the review of the health care records it is unclear whether this surgery took place when patient A was aged 16 or 34 years of age. As patient A does not wish to be involved in the investigation it is not possible to clarify this with her. Patient A may be confused about the date of admission to the CRI, but once again it is not possible to clarify this. There is no doubt that patient A was in the CRI undergoing ear surgery in May 1965.

**Review of Archive Material**

Archive documents from 1960-1966 were viewed electronically and physically. A number of documents were only available as hard copies and had yet to be scanned electronically. The main archive material (DHC Cardiff Royal Infirmary) is stored in the National Archive at the Glamorgan Archives in Cardiff. An initial search for material from the CRI displayed DHC 1-115. Each volume of material, volume 1-volume 115 was available at the archive, the material dated from 1822 to 1973. The search criteria were narrowed down to any material from the 1960s.

The following volumes were examined for any mention of JS being present as a guest or visitor at the CRI site, and for information regarding staff that were working there during the 1960s. A search was also carried out to see if any details could be found of patients A's admission to the CRI in the 1960s.

| | |
|---|---|
| **DHC/90/7** | *1963-1964* - Lists of nursing staff |
| **DHC/98** | *1954-1963* - Register of student nurse applications |
| **DHC/100** | *1961-1968* - Programmes for presentations, correspondence, guest lists and related papers |
| **DHC/101/1** | *12 November 1983* - Record of nurses attending reunion |
| **DHC/101/3** | *15 November 1983* - News cutting from the South Wales Echo |
| **DHC/103/3** | *c1960* - Group photograph of nurses |
| **DHC/104/5** | *c1960* - Photograph of Matron and unidentified man (1956-1973 |
| **DHC/109/2** | *c1960* - Group photograph of Hospital Board Governors |
| **DHC/109/3** | *c1960* - Photographs of presentation to Matron including group photographs of nurses and other hospital staff |

A further DHC Volume that had not been catalogued was also examined, it contained 7 binders, 34 papers, 8 files, 55 photographs and 1 postcard. The records included minute books, annual reports, nursing records, case papers, admission and discharge registers, photographs and newspaper cuttings. The majority of the material was not relevant to the investigation and only material covering the scope of the investigation was reviewed.

There was no mention of JS in any archived material, this included minutes of Hospital Board meetings during the 1960s, visitor's books or newspaper cuttings. There were gaps in the archived material and no evidence was found of patient A's admission to the CRI in the DHC archives.

A further search was carried out at Cardiff Central Library using a microfiche reader. All copies of the Western Mail and South Wales Echo from the early to late 1960s were viewed. The rationale for this approach was that if a well known celebrity had visited the CRI then it might have been recorded as news. There was no story dedicated to JS in connection with the CRI during this time frame.

**Interviews with staff who were identified as working in the CRI in the 1960's**

Part of the remit of the investigation was to try and identify staff who may have cared for and treated patient A whilst at the CRI in the 1960s. The rationale being, that staff may be able to remember if JS was in the hospital at that time. It is also important to explore the cultural context of the hospital and what policies and procedures existed at the time regarding visitors, whistle blowing and safeguarding.

Given the passage of time Patient A understandably was unable to recall the names of staff or doctors linked to the hospital admission in 1965. The UHB's Electronic Staff Record was only implemented in 2001, so a Payroll search was carried out to identify any members of staff who were still employed in the organisation from that era. The longest serving member of staff was identified as commencing in 1969 and has worked in the same hospital since commencing employment. This employee was not based at Cardiff Royal Infirmary. The Payroll Department covering the Health Board has advised that whilst it holds comprehensive records from 1973 there are limited records held for the 10 years prior to this (covering the period when the alleged incident occurred).

Following national press coverage on the 7th November 2013 where health officials confirmed that the CRI was one of the hospitals carrying out an investigation concerning JS, a member of staff disclosed that he had met JS in the CRI. The member of staff had commenced work in the CRI in the early 1970s and was still employed by the UHB. He moved to the University Hospital of Wales in 2001 when the CRI was closed to in-patients. When interviewed by the investigator the member of staff was able to provide photographic evidence that JS was on the CRI premises in the 1980s. The member of staff recalls that the photograph may have been taken around 1986 when JS was running a marathon in Cardiff. This coincides with an account provided in the Western Mail (see section 6) which identified that JS was running a marathon in Cardiff in 1985. The member of UHB staff recalls JS passing the CRI and asking to use the toilet. Whilst he was in the hospital he posed with a number of portering staff for a photograph in the porters lodge.

Again following press coverage of the CRI in November 2013 another member of staff contacted the investigator disclosing that he had met JS at another community

hospital in the 1980s. This particular contact with JS was to discuss clinical details about a member of JS's family.

The investigator also became aware of a group of retired nurses who had kept in touch with each other since they completed their student nurse training in the CRI between 1963 -1966. These nurses were planning to meet up for a 50th anniversary celebration. The investigator held several telephone conversations with the coordinator of the group. She was able to confirm that she and her six colleagues whom she was in contact with were all working in the CRI during 1963-1965. She had read the newspaper articles about JS and his alleged involvement with the CRI in the 1960's. She and her colleagues confirmed that they were unaware of JS being on the premises at any time during their training or afterwards, when they were qualified nurses. The co-ordinator of the group described the CRI as being a very close knit community where everybody knew each other and she advised that it would be very unlikely that she or her colleagues would not have known about JS being in the hospital on New Years Eve. She also commented that she was not aware of any policies and procedures being in place for visiting dignitaries and whistle blowing at that time, however she did say that the hospital was run on a very strict basis and visiting hours were confined to a half hour for immediate family. This information was based upon a discussion that had taken place with her 6 colleagues which had been instigated by the UHB Lead Investigator as part of the investigation process.

A further search of complete news papers covering late December and early January for 1963/1964 and 1964/1965 document local health news and celebrity visits to Cardiff but JS is not mentioned or pictured.

**Conclusion from the review of archive material, medical records and staff interviews**

Taking into account all of the facts identified within this investigation report, Cardiff and Vale UHB has no factual evidence that JS visited the CRI on December 31st or January 1st 1963/1964 or 1964/1965. Although patient A provided an account and description of events, there is no verbal or documentary evidence to indicate that JS attended the hospital. Patient A did have surgery in the CRI in 1965 but records indicate that this surgery was carried out in May not over the New Year period.

# 5. Cardiff and Vale UHB Background Information

Cardiff and Vale University Health Board is one of the largest NHS organisations in Wales. It employs approximately 14,500 staff and provides health services to a population of around 472,400 people living in Cardiff and the Vale of Glamorgan. It came into being on 1 October 2009 through the amalgamation of three NHS organisations in the Cardiff and Vale of Glamorgan area. The three organisations amalgamated were: Cardiff and Vale NHS Trust, Cardiff Local Health Board and Vale of Glamorgan Local Health Board. It also serves a wider population across South and Mid Wales for a range of specialties as it is a teaching Health Board with close links to the university sector.

The UHB provides services out of 7 hospitals including Cardiff Royal Infirmary and a number of community premises across the localities of Cardiff and the Vale of Glamorgan covering primary, community, secondary and tertiary provision. The range of services offered by the UHB includes adult, children, maternity, older people and mental health.

Cardiff Royal Infirmary was built in 1822 when the Cardiff Dispensary was set up on Newport Road. This institution became the Glamorganshire and Monmouthshire Infirmary and Dispensary on its removal to new buildings in 1837. The present building facing Glossop Road opened in 1883 on land leased by the marquess of Bute and the older premises were later sold to the University College of South Wales and Monmouthshire. The hospital was initially known as the King Edward VII Hospital. In 1923 it became known as the Cardiff Royal Infirmary. Initial provision was for 100 beds but the rapid growth in the population of Cardiff and the neighbouring area necessitated major extensions in 1894-5, 1910-11 and during the First World War, and the number of beds rose to more than 500 by the time of the establishment of the National Health Service. Medical teaching was largely transferred to the Welsh National School in 1921 and maternity provision was transferred to the Maternity Hospital on the opposite side of Glossop Road in 1945-6. The opening of the University Hospital of Wales on the Heath in 1972 gradually reduced dependence on the Royal Infirmary, and most medical treatment at CRI had ceased by 2000. The hospital is now used as a clinic and provides community based services.

## 6. Jimmy Savile's Association with Cardiff

JS had historical ties to South Wales and there is photographic evidence that he visited South Wales a number of times, however a review of documents and internet searchers reveal no association between JS and the CRI during the 1960s.

He visited South Wales on a number of occasions, such as in 1967 when he attended a school in Aberfan.
http://www.walesonline.co.uk/news/wales-news/pictures-jimmy-saviles-visit-disaster-hit-2016853

He had relatives in Porth who he visited regularly. One such visit was reported in a local newspaper in September 1964.
http://www.walesonline.co.uk/news/wales-news/jimmy-savile-cheeky-uncle-jim-1794115

It is understood that JS ran over 200 marathons. An allegation came to light in January 2013 that he "grabbed" a woman in Cardiff when he was training for an event.
http://www.walesonline.co.uk/news/wales-news/jimmy-savile-grabbed-street-before-2497500
JS had an elder brother VS (now deceased) who was also a DJ and worked (understood to be on a voluntary basis) for a time in Cardiff in Cardiff Royal Infirmary as a hospital DJ for Radio Glamorgan. An internet search on Radio Glamorgan's website shows that the radio station was founded by VS in 1967, operating out of Cardiff Royal Infirmary between 1967 and 1974.
http://www.radioglamorgan.com/index.php/about-us.html

In 1974 the station relocated to the University Hospital of Wales (also known locally as the Heath Hospital). The establishment of Radio Glamorgan and VS's association with CRI is therefore believed to have been a number of years after the allegations made by patient A.

## 7. Themes from Chronology

Following the investigation no associations can be found between Cardiff Royal Infirmary and JS during the 1960s. As referenced above the only connection found relates to the brother of JS in his capacity as founder and volunteer with Radio Glamorgan.

## 8. Access Arrangements and Privileges Accorded to Jimmy Savile at Cardiff Royal Infirmary

Following the investigation no access arrangements or accorded privileges have been identified through this investigation.

## 9. Policy, Practice and Procedures during the Time of the Alleged Incident

The archive searches have failed to find any policies and procedures concerning complaints and whistle blowing that were in place within the CRI in the 1960's. The current Department of Health Code of Practice for management of records is specifically in relation to health records, although the code Records Management: NHS Code of Practice (Department of Health) Annex D2: Business and Corporate (Non-Health) Records Schedule, clearly details the retention of other records, which is replicated in the health boards policy for records management. It is not possible to show that specific policies and procedures were in place during the time in question. A number of search methods were employed but no physical documents were found. Anecdotal evidence from staff who worked at the CRI during the 1960's indicates that they were unaware of policies such as whistle blowing at that time. Any policies and procedures that were in place during 1960 would have been destroyed in line with the records management retention and destruction protocol. Current policies only have to be retained for 10 years under the present UHB protocol.

## 10. Current Policy, Practice and Procedures

The table below shows current policies and procedures that are now in place within the UHB to ensure appropriate safeguarding arrangements for vulnerable patients and staff. The policies are written to raise awareness amongst all staff in the organisation of their responsibilities and to ensure concerns are handled properly and escalated appropriately. It should be noted that a number of All Wales policies and procedures have been adopted by the UHB.

| Policy and Procedure | Published | Review Date |
|---|---|---|
| Recruitment and Selection Policy | January 2014 | March 2017 |
| All Wales Child Protection Procedures | 2008 | Policy is reviewed by Welsh Government |
| Volunteering Strategy | 2011 | Currently under review within the UHB |
| All Wales Disciplinary Policy | 2011 | Policy is under review in partnership on an All Wales basis |
| All Wales Raising Concerns (Whistleblowing) Policy | 2013 | Policy is under review in partnership on an All Wales basis |
| Care of Adult Patients with Capacity who are Violent or Abusive Procedure | 2013 | September 2016 |
| Wales Interim Policy & Procedures for the Protection of Vulnerable Adults from Abuse. | 2013 | Policy is reviewed by Welsh Government |
| Putting Things Right (All Wales Complaint Process) | 2011 | Policy is reviewed by Welsh Government |
| NHS Wales Dignity at Work Policy | 2011 | Policy is under review in partnership on an All Wales basis |
| Records Management Policy | 2013 | October 2015 |
| Security Services Policy | 2013 | January 2016 |
| Standards of Behaviour Framework Policy Incorporating Declarations of Interest, Gifts, Hospitality and Sponsorship | 2011 | Currently under review within the UHB |
| Records Management Retention and Destruction Protocol and Schedule | 2013 | September 2015 |
| Chaperone Policy | 2012 | December 2014 |
| Disclosure and Barring Service Policy | 2013 | January 2016 |
| Access Procedure for Sanctioned visitors to Cardiff and Vale UHB | Currently under development due for consultation June 2014 | |

## 11. Jimmy Savile's Fundraising Activities

No evidence of fundraising activities by JS was found in association with Cardiff Royal Infirmary. Reference to fundraising activities in the Cardiff area have been identified but do not relate to the period of time linked to the alleged incident which is the subject of this investigation.

## 12(a) How Complaints were Dealt with at the Time of the Alleged Incident

From examining archive material from the 1960's, no records relating to complaints and evidence of internal investigations and contact with families were found. It is understood from talking to staff who worked in the CRI at this time that incidents of this nature, if reported in writing would have been dealt with locally via the local hospital policy in place. It is likely that these documents would have been destroyed in line with the Records Management: NHS Code of Practice (Department of Health) Annex D1: Health Records Retention Schedule, and Annex D2; Business and Corporate (Non-Health) Records Schedule and therefore were not available.

## 12(b) How Complaints are Currently Dealt with

Since 2011 the NHS in Wales since April 2011 has adopted "Putting Things Right" when dealing with concerns. Putting Things Right was established to review the processes for the raising, investigation of and learning from concerns. Concerns are issues identified from patient safety incidents, complaints and, in respect of Welsh NHS bodies, claims about services provided by a Responsible Body in Wales. The aim is to provide a single, more integrated and supportive process for people to raise concerns. Protection of Vulnerable Adults procedures have also been in place in Wales since 2000 following the publication of "In Safe Hands". If a similar concern similar to the alleged incident was raised now, a Protection of Vulnerable Adult referral would be made and the Police would be contacted immediately and invited to a multi-agency strategy meeting.

## 13. Overall Analysis and Conclusions

Following a detailed review of the archive documents from 1963-1966 such as minute books, annual reports, nursing records and case papers, there is no documented evidence that JS attended the Cardiff Royal Infirmary during the given time frame. In fact, an extensive internet search reveals no record of JS visiting any hospital in Cardiff during the 1960's. Archive material such as photographs, scrap books and news papers covering the 1960's were examined and pictures of local dignitaries and celebrities are recorded, however there is no mention of JS visiting the CRI.

Following a thorough examination of available records and a meeting with patient A, the UHB considers that this case should be closed and that no further investigation is required. Significant progress has been made in the fields of child protection and adult protection since the time of the alleged incident in 1963/1965. Incident reporting arrangements have also changed significantly in the last 50 years.

There are currently policies and procedures in place within the Health Board to support good practice in relation to safeguarding, criminal records checking (Disclosure and Barring Service checks) and incident reporting. Training is provided to staff locally, at the point of induction to the organisation and on a multi-agency basis to raise awareness of safeguarding matters. Information to support robust incident reporting and investigation arrangements is also provided to all staff. Monitoring of Protection of Vulnerable Adults and Child Protection activity is undertaken through the UHB Safeguarding Steering Group and multi-agency partnership working is well established. A multi-agency strategy meeting would be held if a case of similar nature in this instance was reported. The meeting would take place in line with Welsh policies and procedures.

It should be noted that patient A does not wish to have any further involvement with the investigation of the alleged incident so the UHB Lead Investigator was unable to clarify the details of her admission to the CRI between 1963-1965. Patient A was certain that she was in hospital for an ear operation over the New Year however health care records indicate that this operation occurred in May 1965. Nurses who worked in the CRI during the 1963 to the early 1970's were unaware of JS presence at the hospital.

The UHB has no reason to disbelieve patient A, but no documentary evidence could be found to show that she was in hospital in the CRI on or around New Years Eve 1963/1964 1964/1965 and no evidence could be found to show that JS visited the hospital in the 1960's. Based upon the findings of the UHB investigation it is considered that there is no further action for the Health Board to take in respect of this specific allegation, as it is unable to reach a conclusion about whether the incident took place.

## 14. Recommendations

There are no specific recommendations made in relation to the allegation made in this case.

# 15 Appendices

Appendix A Investigation Team Biographies

# Appendix A

**Mandy Rayani** – **Assistant Director of Nursing C&V UHB**

*Mandy Rayani is a Registered Nurse (Mental health) with 30 years experience of working in a variety of settings within the NHS in Wales. The role of Assistant Nurse Director covers a broad professional nursing portfolio including safeguarding and Mandy is the identified UHB lead for Domestic Violence.*

**Simon Williams** – **Lead Nurse for Safeguarding Adults C&V UHB**

*Simon Williams is an RGN/RMN with 34 years experience of working with vulnerable groups.*