

of the letter in bundle 5. So, no written response. Was there any other reaction to your letter?

A From people other than Dr Roylance?

Q Yes.

A Yes; I got a telephone call from Christopher Dean-Hart who was then the chairman of the hospital medical committee and again I was in cardiac theatre and he said, "I want to see you now; come over and speak to me", so I had to get changed and I went over to meet Dr Dean-Hart. He was more interested in who had put me up to this letter; he thought I had been put up to this letter and he wanted to know what the background to my writing it was and, when I explained that I had actually taken advice and that I had been in contact with a senior member of the anaesthetic department prior to writing it, he then explained that he had been in a similar situation when he had been a junior consultant, I think either in Bristol or Manchester, and that he had been manipulated, he felt, by one of his senior colleagues and I think he saw this as a similar kind of manipulation.

Q Did you speak at all to Mr Wisheart in relation to your concerns?

A Yes, Mr Wisheart also asked to see me and I went up to see him in his office. The impression I got from the meeting, I cannot remember verbatim what happened, was that he was very angry with the fact that this letter had gone outside the cardiac surgical unit and he made it quite clear that he did not expect this kind of thing to happen in the future and that, if my career in Bristol was to be maintained, then this kind of thing was not to happen again and I think for a consultant within the first two years of his career in what was essentially his chosen hospital, in what was his chosen speciality and job, that was a very salutary lesson.

Q Why did you think it necessary or appropriate to write a letter in those terms?

A I think there was a problem with children dying unnecessarily in a cardiac surgery unit in the United Kingdom. I had tried to get some idea of what the figures were from that unit and it was very difficult to find out exactly what was going on. I was concerned for the safety of children that were dying unnecessarily and I need to know what the exact data was. That data was not coming out of the unit; I was a member of the unit and it was not being given or shared with me. That was the reason for bringing the chief executive in. I believed there was a problem, I believed that children were dying unnecessarily and I wanted to find out if my suspicions were correct.

Q Why so public then? Why not a private meeting? Why not, "Could I please come and see you and have a word in your ear"?