

Assistant Director for Public Inquiry and Trust Liaison
Craigavon Area Hospital

Telephone:

Personal Information redacted by the USI

From: Romina Trinidad Personal Information redacted by the USI
Sent: 30 July 2021 09:40
To: Corrigan, Martina
Subject: RE: RCS Eng IRM: Review Planning

Dear Martina,
I hope this email finds you well.

Thank you for supporting the review team in accessing the clinical records, it has been a challenge getting to this point, with everything being done remotely.

In answer to your query, we have not set a timescale with the reviewers in completing their review of the clinical records. This is the first review that the College have had, that involved a huge amount of records being assessed remotely. Taking into account the difficulties in accessing the records and the time its taking them to view the cases, the reviewers took a while to get started.

Having said that, I do monitor their progress to ensure that all of them are working towards the same timeframe, with a view of meeting them in a couple of weeks' time to discuss their conclusions and report production.

Please note that the report will be issued to the Trust between 8-10 weeks after the review has been completed.

I hope the above information is useful, please do let me know if you need further assistance.

Kind regards,
Romina

Romina Trinidad
Invited Review Manager

Royal College of Surgeons of England
38-43 Lincoln's Inn Fields
London WC2A 3PE

T: Personal Information redacted by the USI
E: Personal Information redacted by the USI
W: www.rcseng.ac.uk

From: Corrigan, Martina Personal Information redacted by the USI
Sent: 26 July 2021 12:04
To: Romina Trinidad Personal Information redacted by the USI
Subject: RE: RCS Eng IRM: Review Planning

Good morning Romina,

I hope you are keeping well?

I have been liaising with 3 out of the 4 reviewers (Brian, Mark and Jonathan) and I hope they are getting on ok? it is a difficult exercise trying to do this remotely but I think that they are managing ok using our Electronic Care Record.

Dr O’Kane our Medical Director had asked me to get in touch regarding timescales for completing this piece of work (this was never agreed between Jessica and my colleague Stephen), so not sure if the Consultants are working to when this will be completed?

Many thanks and please do not hesitate to contact me if there is anything that I can do to help.

Kind regards

Martina

Martina Corrigan
Assistant Director for Public Inquiry and Trust Liaison
Craigavon Area Hospital

Telephone:

Personal Information redacted by the USI

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Corrigan, Martina

From: Romina Trinidad Personal Information redacted by the USI
Sent: 15 November 2021 15:01
To: Corrigan, Martina
Subject: RE: Urology Invited Services Review

This message was sent from outside of the Southern Trust. Please do not click links or open attachments unless you recognise the source of this email and know the content is safe.

Hi Martina,
I am well thank you and I hope you are too.

There has been considerable delay in drafting the report due to the time it has taken for the review team to provide their review of the cases and up to now I still haven't received a quarter of the cases for me to progress the report. Unfortunately, I cannot provide a timescale on when I will be able to issue the report as it will need to be reviewed and signed off by the review team and undergo a quality assurance review before I can send it to you.

I apologise for this delay and rest assured that I am working on it as a matter of urgency.

Kind regards,
Romina

From: Corrigan, Martina Personal Information redacted by the USI
Sent: 15 November 2021 10:01
To: Romina Trinidad Personal Information redacted by the USI
Subject: Urology Invited Services Review

Good morning Romina

I hope this email finds you well and you had a nice weekend?

I was wondering if you have a tentative date for our Trust receiving the Invited Review Report into the 100 urology patient charts that your teams had reviewed recently?

I just need to update the Public Inquiry legal team as to when we are going to receive this report.

Many thanks

Martina

Martina Corrigan
Assistant Director for Public Inquiry and Trust Liaison
Craigavon Area Hospital

Telephone:

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Corrigan, Martina

From: Romina Trinidad
Sent: 21 December 2021 11:59
To: Corrigan, Martina
Subject: RCS Eng IRM Review

Personal Information redacted by the USI

This message was sent from outside of the Southern Trust. Please do not click links or open attachments unless you recognise the source of this email and know the content is safe.

Dear Martina,
Thank you for your email.

I am writing to let you know that there has been considerable delay in producing the RCS Eng review report for Southern Trust.

The delay was caused by staff shortages and high amount of workload within the IRM Team in the last few months and the consequence of these is that some reports have incurred prolonged delays and have stalled in their progress. We are doing everything we can to rectify this issue and we hope to catch up completely in the next couple of months.

I do apologise for any inconvenience caused by this delay, and I assure you that the Southern report will be progressed early in the new year.

Thank you for your patience in this matter and I look forward to issuing the report at the earliest opportunity.

Kind regards,
Romina

Romina Trinidad

Invited Review Programme Manager

Royal College of Surgeons of England
38-43 Lincoln's Inn Fields
London WC2A 3PE

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Corrigan, Martina

From: Romina Trinidad [Personal Information redacted by the USI]
Sent: 14 January 2022 16:53
To: Corrigan, Martina
Subject: RE: RCS Eng IRM Review

This email was sent from outside of HSCNI. Please do not click links or open attachments unless you recognise the source of this email and know the content is safe.

Dear Martina,
Happy new year and thank you for your response and understanding.

Of course I can keep you updated on my progress, I will inform you when the review team have finalised the drafted report. At that stage, the report will be sent for quality assurance review so I can give you an estimate of when it can be signed off and issued to the Trust.

In the meantime, please do let me know if you have any questions.

Have a great weekend!

Kind regards,
Romina

From: Corrigan, Martina [Personal Information redacted by the USI]
Sent: 14 January 2022 12:37
To: Romina Trinidad [Personal Information redacted by the USI]
Subject: RE: RCS Eng IRM Review

Dear Romina

Happy New Year.

Apologies I have just realised that I never responded to your email below (I had drafted a response but didn't send it so sorry about that)

Thank you for your explanation as to why there has been a delay and I appreciate that you are going to concentrate on getting the Southern Trust report to us as soon as is feasibly possible.

It would be good once you have it near completion if you could let me know as I have to keep the Urology Service Public Inquiry Team advised of progress.

Many thanks and best wishes and hope you have a nice weekend

Kind regards

Martina

Martina Corrigan
Assistant Director for Public Inquiry and Trust Liaison
Craigavon Area Hospital

Telephone:

[Personal Information redacted by the USI]

From: Romina Trinidad [Personal Information redacted by the USI]
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Thank you for your patience in this matter and I look forward to issuing the report at the earliest opportunity.

Kind regards,
Romina

Romina Trinidad

Invited Review Programme Manager

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Quality Care - for you, with you

20th February 2022

Ref: MOK/ec

Via email

Personal Information redacted by the USI

Professor Timothy Rockall FRCS
Chair of the Invited Review Mechanism
Professional and Clinical Standards
The Royal College of Surgeons of England
35-43 Lincoln's Inn Fields
London

Dear Professor Rockall,

RE: ROYAL COLLEGE OF SURGEONS INVITED REVIEW SERVICE

I am writing in regards to the invited review commissioned from the Royal College of Surgeons by the Southern Health and Social Care Trust, Northern Ireland in 2021 relating to urology services.

As you may be aware, the Trust is currently undertaking a lookback exercise regarding urology patients that were under the care of a particular consultant urologist over an 18-month period to identify any potential patient safety issues. The Royal College invited review outcome will assist in guiding the relevant bodies decide if an extended period of lookback will be required.

We are currently awaiting the Royal College report on this matter. To date we have been unable to obtain a target date for the report to be shared with the Trust therefore I would be grateful if you could advise when we should expect to receive draft copies of the report. As you will be aware we are keen to plan for all eventualities, I would therefore be grateful

Southern Trust Headquarters, Craigavon Area Hospital, 68 Lurgan Road, Portadown, BT63 5QQ

Tel:

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Email:

Personal Information

if you could provide details of when this report may be available and if any interim findings are of relevance to patient or service safety.

I look forward to hearing from you.

Yours sincerely

Personal Information redacted by the USI

Dr Maria O’Kane
Medical Director

Southern Trust Headquarters, Craigavon Area Hospital, 68 Lurgan Road, Portadown, BT63 5QQ

Tel: Personal Information redacted by the USI

Email: Personal Information redacted by the USI

Stinson, Emma M

From: Corrigan, Martina
Sent: 23 March 2022 17:47
To: OKane, Maria; McClements, Melanie; McKimm, Jane; Carroll, Ronan; Ward, Sarah; Wallace, Stephen
Cc: Stinson, Emma M
Subject: FW: RCS Eng IRM Review

Dear all,

Please see below for information

Many thanks

Martina

From: Romina Trinidad Personal Information redacted by the USI
Sent: 23 March 2022 14:34
To: Corrigan, Martina Personal Information redacted by the USI
Subject: RE: RCS Eng IRM Review

This email was sent from outside of HSCNI. Please do not click links or open attachments unless you recognise the source of this email and know the content is safe.

Dear Martina,
I hope you are well.

I write to provide a short update on my progress with the Southern review report. I am still currently drafting the report in which I am required to summarise all 100 cases reviewed. It is now being prioritised and will be progressed as a matter of urgency.

Please note that I have been in touch with Dr O’Kane last month regarding the delays in producing the report and informing her that we are aiming to issue the report in late April 2022.

In the meantime, please do let me know if I can assist further.

Kind regards,

Romina

From: Romina Trinidad

Sent: 14 January 2022 16:53

To: Corrigan, Martina

Personal information redacted by the USI

Subject: RE: RCS Eng IRM Review

Dear Martina,

Happy new year and thank you for your response and understanding.

Of course I can keep you updated on my progress, I will inform you when the review team have finalised the drafted report. At that stage, the report will be sent for quality assurance review so I can give you an estimate of when it can be signed off and issued to the Trust.

In the meantime, please do let me know if you have any questions.

Have a great weekend!

Kind regards,
Romina

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Sent: 14 January 2022 12:37

To: Romina Trinidad

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Subject: RE: RCS Eng IRM Review

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Thank you for your explanation as to why there has been a delay and I appreciate that you are going to concentrate on getting the Southern Trust report to us as soon as is feasibly possible.

It would be good once you have it near completion if you could let me know as I have to keep the Urology Service Public Inquiry Team advised of progress.

Many thanks and best wishes and hope you have a nice weekend

Kind regards

Martina

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Craigavon Area Hospital

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Kind regards,
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UROLOGY PATIENT REVIEW FORM

This form is to be completed for each patient previously under the care of Mr O'Brien reviewed by the Southern Trust Urology team since Mr O'Brien's departure on 17th July 2020. This form is to be retained in the patient notes and copied to Martina Corrigan, Head of Service.

Patient Details

Name	
H&C Number	
Date of Birth	

Patient Details

Presenting Condition(s)	
Patient Summary	

Regarding the patients current care

	Question	Y / N / Unable to Determine	Details
1	Is the present diagnosis / diagnoses reasonable? (<i>'Reasonable' to consider if diagnosis / diagnoses is consistent with investigations and examinations carried out to date, is there a requirement for further investigations / examinations to confirm diagnosis / diagnoses?</i>)		
2	Are the current medications prescribed appropriate? (<i>'Appropriate' to consider if prescribing is consistent with current best evidence based practice, are any deviations from guidance recorded and rationale fully noted?</i>)		
3	Is a secure clinical management plan currently in place? (<i>'Secure Clinical Management Plan' to consider if the current</i>		

	<i>patient treatment pathway is optimal and in line with current best evidence based practice and guidance)</i>		
4	If there is not a secure clinical management plan in place please document immediate actions required to be taken		

Clinical Professional Reviewing Care

Name	
Title	
Date of Appointment	

UROLOGY PATIENT REVIEW FORM

This form is to be completed for each patient previously under the care of Mr O'Brien reviewed by the Southern Trust Urology team since Mr O'Brien's departure on 17th July 2020. This form is to be retained in the patient notes and copied to Martina Corrigan, Head of Service.

Patient Details

Name	
H&C Number	
Date of Birth	

Patient Details

Presenting Condition(s)	
Patient Summary	

Regarding the patients current care

	Question	Y / N / Unable to Determine	Details
1	Is the present diagnosis / diagnoses reasonable? (<i>'Reasonable' to consider if diagnosis / diagnoses is consistent with investigations and examinations carried out to date, is there a requirement for further investigations / examinations to confirm diagnosis / diagnoses?</i>)		
2	Are the current medications prescribed appropriate? (<i>'Appropriate' to consider if prescribing is consistent with current best evidence based practice, are any deviations from guidance recorded and rationale fully noted?</i>)		
3	Is a secure clinical management plan currently in place? (<i>'Secure Clinical Management Plan' to consider if the current</i>		

	<i>patient treatment pathway is optimal and in line with current best evidence based practice and guidance)</i>		
4	If there is not a secure clinical management plan in place please document immediate actions required to be taken		

Based on the information available at the time of previous reviews, please answer the following to the best of your knowledge. If a determination cannot be made please give reasons why.

No.	Question	Y / N / Unable to Determine	Details
4	Were appropriate and complete investigations carried out for all relevant conditions? <i>(‘Appropriate’ to consider if investigations consistent with current best evidence based practice at the time of review, are deviations from guidance recorded and rationale fully noted?)</i>		
5	Were the medications prescribed appropriate? <i>(‘Appropriate’ to consider if prescribing was consistent with current best evidence based practice at the time of previous review, are deviations from guidance recorded and rationale fully noted?)</i>		
6	Were the diagnosis / diagnoses reasonable? <i>(‘Reasonable’ to consider if diagnosis / diagnoses is consistent with investigations and examinations carried at the time of review, was there a requirement for further investigations / examinations to confirm diagnosis / diagnoses?)</i>		

7	Was the clinical management approach taken reasonable? <i>(‘Reasonable’ to consider if clinical management plan if the patient treatment pathway at the time was optimal and in line with best evidence based practice and guidance available at that time.)</i>		
8	Were there unreasonable delays within the Consultants control with any aspect of care (reviews, prescribing, diagnostics, dictation etc) <i>(‘Unreasonable Delays’ to consider if diagnosis required more urgent treatment / intervention that was received based on best evidence based practice and guidance available at that time. The Southern Health and Social Care Trust will consider any delays in treatment highlighted to assess if these were within the Consultants control or due to systematic issues e.g. length of waiting lists)</i>		
9	On balance, did the patient suffer any harm or detriment as a result of any of the above questions (4-9) ?		

Clinical Professional Reviewing Care

Name	
Title	
Date of Appointment	

Quality Care - for you, with you

XX XXXXXXXXXX 2021

Healthcare Ref: _____

Private & Confidential

<Name>

<Address>

Dear <title> <name>

RE: Urology Lookback Exercise

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust). On the 23rd November 2021 the Minister for Health then gave direction for the Public Inquiry to start investigating the Clinical Practice of Mr Aidan O'Brien, Consultant Urologist.

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired, to be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust.

I can now advise following a review of your care that no issues of clinical concern have been identified and your current plan is completely satisfactory. I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully.

I do appreciate that up until you have received this letter this may have been a worrying time. You have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

The Trust has set up a Urology Helpline which is available Monday to Friday 10am-2pm should you wish to speak to a member of the Urology Service about any issues or concerns you may have. An information leaflet detailing the information for the Urology Services Helpline is attached with this letter.

Yours Sincerely,

SHANE DEVLIN
CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref:

Private & Confidential

Mr

Dear

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2020 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you ***** if required

(prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer)***** if required

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE

Quality Care - for you, with you

XX XXXXXXXXXX 2021

Healthcare Ref: patient HCN

Private & Confidential

<Name of NOK>

<Address of NOK>

Dear <title> <name> of NOK

RE: Urology Lookback Exercise

RE: Add patient name

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust). On the 23rd November 2021 the Minister for Health then gave direction for the Public Inquiry to start investigating the Clinical Practice of Mr Aidan O'Brien, Consultant Urologist.

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In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust.

I can now advise following a review of your Mothers/Fathers/Husbands/Wives etc care that no issues of clinical concern have been identified. I apologise it has taken some time to

complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully.

I do appreciate that up until you have received this letter this may have been a worrying time. You have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

The Trust has set up a Urology Helpline which is available Monday to Friday 10am-2pm should you wish to speak to a member of the Urology Service about any issues or concerns you may have. An information leaflet detailing the information for the Urology Services Helpline is attached with this letter.

Yours Sincerely,

SHANE DEVLIN
CHIEF EXECUTIVE



Quality Care - for you, with you

XX XXXXXXXXXX 2021

Healthcare Ref: _____

Private & Confidential

<Name>

<Address>

Dear <title> <name>

RE: Urology Lookback Exercise

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust). On the 23rd November 2021 the Minister for Health then gave direction for the Public Inquiry to start investigating the Clinical Practice of Mr Aidan O'Brien, Consultant Urologist.

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

At the time of writing this letter to you I can advise that your care has not as yet been reviewed. I can advise however that a plan is currently being progressed which will have your care reviewed by either a Trust Urology or external Consultant. We are endeavouring to have your care reviewed within 3 months at which time we will accordingly advise you of the outcome of this review. I apologise it has taken some time to complete. This is due to

the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully.

I do appreciate that up until you have received this letter this may have been a worrying time for you. You have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise. The Trust has set up a Urology Helpline which is available Monday to Friday 10am-2pm should you wish to speak to a member of the Urology Service about any issues or concerns you may have. An information leaflet detailing the information for the Urology Services Helpline is attached with this letter.

Yours Sincerely,

SHANE DEVLIN
CHIEF EXECUTIVE



Quality Care - for you, with you

XX XXXXXXXXXX 2021

Healthcare Ref: _____

Private & Confidential

<Name>

<Address>

Dear <title> <name>

RE: Urology Lookback Exercise

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In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records.

I can now advise following a review of your care that the independent Urology Consultant has identified aspects of your care which will require further review. This may be a further medical record review, a telephone consultation or an outpatient appointment. We are endeavouring to have your care reviewed within 3 months at which time will we accordingly advise you of the outcome of this review. I apologise it has taken some time to complete.

This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully.

I do appreciate that up until you have received this letter this may have been a worrying time. The Trust has set up a Urology Helpline which is available Monday to Friday 10am-2pm should you wish to speak to a member of the Urology Service about any issues or concerns you may have. An information leaflet detailing the information for the Urology Services Helpline is attached with this letter.

Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely,

Personal Information redacted by the USI



Shane Devlin

Chief Executive

RE: Review of Urology Care relating to the Practice of a Southern Health and Social Care Trust Consultant

The Southern Health and Social Care Trust has become aware that a Consultant Urologist previously employed by our organisation may have delivered care that did not meet with the standards we would expect and, as a Trust, we are committed to being open when events such as this occur. You may be aware that the Minister for Health has commissioned a public inquiry regarding Southern Trust Urology services. As part of this your details will be shared with the Public Inquiry panel as part of this look back review, the Public Inquiry panel may contact you directly regarding your experience.

As a precaution, we will be reviewing patients under the care of this Consultant from 2019. The Southern Trust has commissioned an independent review of the care you received. This means an independent Consultant has completed a Structured Clinical Record Review of your care. We have included a leaflet to explain this process in further detail. Following this review you will soon receive notification of an appointment or a telephone review with a Consultant. This is to discuss your current treatment and review your plan of care.

We appreciate this news, especially so close to Christmas may cause you concern about your care. Whilst we recognise this will be a considerable process that will take some time we want to offer our sincere apologies that this is the situation you are in. You have a right to expect the very best care every time you use our services. However, if things do go

wrong, it is the role of the Trust and our staff to learn from any failings, so that we can provide answers to families and patients and improve our care now and in the future.

An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process. You will note the unique reference number on this leaflet, this should be used when contacting the support line.

The Trust is committed to engaging fully in this inquiry and committed to ensuring that all patients, families and carers are informed and supported throughout.

Yours Sincerely,

Quality Care - for you, with you

XX XXXXXXXXXX 2021

Healthcare Ref: patient HCN

Private & Confidential

<Name of NOK>

<Address of NOK>

Dear <title> <name> of NOK

RE: Urology Lookback Exercise

RE: Add patient name

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust). On the 23rd November 2021 the Minister for Health then gave direction for the Public Inquiry to start investigating the Clinical Practice of Mr Aidan O'Brien, Consultant Urologist.

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

At the time of writing this letter to you I can advise that your Mothers/Fathers/Husbands/Wives etc care has not as yet been reviewed. I can advise however that a plan is currently being progressed which will have their care reviewed by either a Trust Urology or external Consultant. We are endeavouring to have their care

reviewed within 3 months at which time will we accordingly advise you of the outcome of this review. I apologise it has taken some time to complete. This is due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully.

I do appreciate that up until you have received this letter this may have been a worrying time for you. The Trust has set up a Urology Helpline which is available Monday to Friday 10am-2pm should you wish to speak to a member of the Urology Service about any issues or concerns you may have. An information leaflet detailing the information for the Urology Services Helpline is attached with this letter.

Yours Sincerely,

SHANE DEVLIN
CHIEF EXECUTIVE



20 January 2022

Healthcare Ref:

Private & Confidential

<Name>

<Address>

Dear <title> <name>

RE: Urology Lookback Exercise

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records.

I can now advise that your care was initially reviewed by the Independent Consultant who recommended that that your previous management plan for your ***** should be reviewed/ was satisfactory Subsequently a review by*****, Consultant Urologist in the Southern Health

& Social Care Trust on the *** found that the treatment you received for your *** was appropriate and no concerns were identified. Mr **** has advised ***

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully.

I do appreciate that up until you have received this letter this may have been a worrying time. The Trust has set up a Urology Helpline which is available Monday to Friday 10am-2pm should you wish to speak to a member of the Urology Service about any issues or concerns you may have. An information leaflet detailing the information for the Urology Services Helpline is attached with this letter.

Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

Chief Executive



Quality Care - for you, with you

Chair
Eileen Mullan

Temporary Accounting
Officer
Dr Maria O'Kane

Our ref: MOK/jmck/ew

8 March 2022

BY EMAIL: info@usi.org.uk

Christine A Smith, QC
Chair of the Urology Services Inquiry
Urology Services Inquiry
1 Bradford Court
BELFAST
BT8 6RB

Dear Ms Smith QC

I write in response to your correspondence of 15 February 2022, addressed to former Chief Executive Shane Devlin, in which you highlighted inaccuracies in a letter resulting from our on-going Lookback Review.

Both the former Chief Executive and I, as current Accounting Officer, apologise sincerely for **the misleading account provided in that letter of the Minister's written statement of 31 August 2021**, which set out the Terms of Reference of the Inquiry. We further accept that, on 23 November 2021, the Health Minister did not direct the Public Inquiry to investigate **the clinical practice of Mr Aidan O'Brien**.

Our initial review indicates that a letter that was, in part, a draft was mistakenly issued to patients. While the clinical information in the letter is correct, the details in the letter **regarding the Public Inquiry reflects neither the Health Minister's announcement nor the** stated purpose of the Urology Services Inquiry accurately.

We have looked into how this draft letter came to be issued. Regrettably, it seems that there was perhaps too great a focus on issuing important clinical information to patients and, in the haste to have that information provided to them, the approval process required before issue was not fully completed in respect of other parts of the letter. Staff have since been advised that no information should be released relating to the Public Inquiry that has not first had clearance through the Trust Public Inquiry Team.

It is the **Trust's intention to re-**issue updated letters to the patients concerned. A proposed draft of this fresh letter is attached for you information and we would, of course, welcome any observations the Inquiry has in respect of same (if considered appropriate).

I can also confirm that we are undertaking a review of information that has been shared as part of the Inquiry to ensure that the inaccuracies apparent in the letter in question are not repeated elsewhere. I will update the Inquiry when this process has been completed.

I sincerely regret any inconvenience caused to you and your team and any confusion caused to patients and their families. We have reflected on the learning from this experience and have implemented improvements as a result.

If I can provide any further assurance please do not hesitate to contact me.

Yours sincerely

Personal Information redacted by the USI

DR MARIA O'KANE

TEMPORARY ACCOUNTING OFFICER/
MEDICAL DIRECTOR

UROLOGY RECORD OF SCREENING

Patient 17

HNC:

Personal Information redacted by the USI

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	15/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	Personal Information redacted by the USI year old man with known history of prostate adenocarcinoma, Gleeson Score 3+3=6 March 2011. PMHX of Hypertension, AAA, BCC, and MI. Patient is currently on Bicalutamide 50mg for his Prostate Cancer. For outpatient review to recommend stopping Bicalutamide and management of surveillance with up to date MRI staging if his PSA is rising and consideration of management options at that point.
Summary of Discussions	15.11.21 - MDT surveillance, 2012 PSA rising, hormone and radiotherapy. Not referred for radiotherapy. Were these patients ever brought back to MDT. No mechanism in MDT at present to check or follow up of recommendations. This is a weakness. Has been highlighted at a senior level. Meets the criteria for review.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 19

HNC:

Personal Information redacted by the USI

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	08/11/21
Date of Screening	
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlindan Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	<div>Personal Information redacted by the USI</div> <p>Year old gentleman who had organ confirmed, Gleason 7 Prostatic Carcinoma diagnosed in 2011 and managed entirely with androgen blockade alone since then. He has continued to take Bicalutamide 150mg daily in addition to Tamoxifen 10mg daily. <div>Personal Information redacted by the USI</div> is on Bicalutamide 150mg for his non metastatic prostate cancer. Watchful waiting/ Intermittent ADT are recommended treatments</p>
Summary of Discussions	<div>Personal Information redacted by the USI</div> <p>15.11.21 - MDT outcome at aged <div>Personal Information redacted by the USI</div> - started on bicalutamide. Looks like hormones alone when treatment options should have been radical treatment or watchful waiting/surveillance. Now onto watchful waiting. Has had fractured neck of femur. ADT increases risk of osteoporosis. Meets the criteria for review.</p>
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 20
 HNC: [Redacted]
 Datix : [Redacted]

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	15/11/21
Incident (IR1) ID:	[Redacted]
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	[Redacted] year old gentleman diagnosed with high risk Gleason 4+3 prostate cancer in 2014 and was started on androgen blockade. His ongoing PSA monitoring has showed minimal change in PSA with his most recent PSA in July 2020 being 0.05ng/ml. From medication point of view he currently takes Tamoxifen 10mg once daily and Bicalutamide 150mg once daily
Summary of Discussions	15.11.21 - Looks like hormones alone when treatment options should have been radical treatment or watchful waiting/surveillance. MDT May 2014. Started on 150 mg. Nothing to suggest he was offered radical treatment as MDT suggested. April 2021 consideration of radiotherapy. Has since had same. Due to finish ADT in January 2022. Delay of 7 years - this has resulted in unnecessary ADT. Meets the criteria for review.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 23

HNC :

Personal Information redacted by the USI

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	15/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	Patient is currently receiving no treatment for his prostate cancer. For outpatients review and recommendation of management by active surveillance with an up to date MRI scan and consideration of surveillance biopsy on the basis of PSA dynamics and MRI findings. Structured Clinical Judgement Review to be performed
Summary of Discussions	15.11.21 - This patient is on watchful waiting. Localised prostate cancer 2011. Initially had some discussions about treatment with hormones and radiotherapy. TURP 2013. Stopped ADT himself and switched to surveillance. Prescription of hormones was 50mg initially. Not a licensed dose. Meets the criteria for review.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 37

HNC :

Datix :

Personal Information redacted by the USI

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	15/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	Patient is currently on Bicalutamide 150mg for a high risk non metastatic prostate cancer. For outpatients to recommend the addition of EBRT and referral to Oncology if fit for radiotherapy.
Summary of Discussions	15.11.21 - Diagnosed with high risk locally advanced prostate cancer in Feb 2020. Not referred for radiotherapy. MDT consideration for radical treatment or watch and wait. Commenced on hormones alone. Subsequently referred for radiotherapy. Meets the criteria for review. Recurring trend that patients are started on adjuvant treatment and not being followed up. PRO7 study findings have been well known since 2015 - specifically relates to this case (hormones and radiotherapy should have been the management for this patient)
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 38

HNC :

Personal Information redacted by the USI

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	15/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	Patient has been managed with Bicalutamide 150mg for prostate cancer. Despite antiandrogens his current PSA is 11.6. For outpatients review to recommend stopping Bicalutamide and monitoring of PSA with a view to watchful waiting/ intermittent androgen deprivation and to consider staging with CT and Bone Scan. If hormones are required in the future it should be an LHRH analogue of LHRH Antagonist. Following MDM discussion, his Bicalutamide has now need discontinued.
Summary of Discussions	15.11.21 - Was started on an unlicensed dose of 50mg. Should have been offered a radical treatment option. PSA was not controlled. Questions around whether he should have been switched to a standard treatment. Should have been offered long term watch and wait rather drug therapy. Three issues which require investigation. Meets the criteria for review.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 40
 HNC: [Redacted]
 Datix: [Redacted]

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	17/11/21
Date of Screening	23/11/21
Incident (IR1) ID:	[Redacted]
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	<p>7 year old gentleman diagnosed in 2012 with a PSA of 9 Gleason 7 (4+3) T2 adenocarcinoma of prostate gland. Treatment history, completed radical radiotherapy January 2013. Various doses of hormone treatment over the years stopping in January. PMHX of prostate Cancer and Renal Stone disease. Patient has been treated with radiotherapy for his prostate cancer. He had some concerns regarding the delay from diagnosis to having radiotherapy</p>
Summary of Discussions	<p>15.11.21 - Patient advised during consultation with Mr Haynes. Was not referred for radiotherapy on diagnosis. Diagnosis in 2008 (prostate cancer). Started on Bicalutamide 50mg. Also had Tamoxifen started. In 2012 started on LHRHa in addition to Bicalutamide - referred to oncology. In documentation regarding radiotherapy it is noted patient found it difficult to travel but later raised concerns about a delay in radiotherapy from 2008 to 2012. Need to obtain MDT outcomes. Standard pathway MDT at point of diagnosis, would not come back when switching treatments. 19/11/2021 There was no MDT at this time. 22.11.2021 there is documentation in letters about radiotherapy, but patient advised he had difficulty travelling for radiotherapy. 2008 no MDM on CaPPs system. The patient has raised the concern in consultation, reviewing this one comment. not keen for surgery, would not travel to Belfast on daily basis for 7/52. Adequate evidence, offered radio and patient choice not to get radiotherapy. Low dose Bicalutamide unlicensed treatment. For SJR.</p>
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 51

HNC:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	
Date of Screening	08/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlindan Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	<div>Personal Information redacted by the USI</div> <p>Year old gentleman diagnosed with Gleason 3+4 prostate cancer which is currently managed with androgen deprivation therapy. Patient is currently receiving Bicalutamide for his prostate cancer. For outpatients review to arrange up to date staging with an MRI and to discuss options of ERBT vs surveillance/ watchful waiting.</p>
Summary of Discussions	15.11.21 - Looks like hormones alone when treatment options should have been radical treatment or watchful waiting/surveillance.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 61

HNC:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	08/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	<p>Personal Information redacted by the USI year old gentleman diagnosed with Gleason score 4+4=8 organ confined adenocarcinoma of his prostate gland. June 2012. Personal Information redacted by the USI</p> <p>Personal Information redacted by the USI is on a LHRHa for his prostate cancer. For outpatient review to discuss re-staging and referral to oncology if fit for radiotherapy and to refer for assessment of bone density.</p>
Summary of Discussions	15.11.21 - Was not offered radial treatment at time of diagnosis - options were surveillance or watchful waiting. Has received a prolonged period of ADT which was not indicated. Diagnosis in 2012, MDT decided radiotherapy but this was not followed up. Was discussed at MDT on 8 April 2021 and opinion of group was that restaging and discuss. Not offered radical treatment at the time of diagnosis in 2012 as he should have been. Patient has not got the service that they should have got - meets the criteria for an SJR as he was not offered the primary treatment.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 77
 HNC: [Redacted]
 Datix : [Redacted]
 Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	15/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	Personal Information redacted by the USI year old gentleman was diagnosed with clinical and biochemical diagnosis of prostatic carcinoma in May 2018 when he was reported to have a prostatic volume was reported to be 88ml and his residual urine volume was reported to be 201ml. Patient commenced him on Bicalutamide and Tamoxifen 2018. Patient is on Bicalutamide 150mg for a clinical diagnosis of prostate cancer. For outpatient review, to recommend stopping bicalutamide and management with surveillance with consideration of staging / investigation dependent upon PSA dynamics
Summary of Discussions	15.11.21 - Reluctance to manage patients without treatment. Breast growth with bicalutamide. Tamoxifen to reduce this. Was started on medication without evidence of metastatic disease. Now being managed with watchful waiting and PSA monitoring. No diagnosis of cancer. Suspect reduced dose was to reduce complications of treatment. Meets the criteria for review.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 74
 HNC: [Redacted]
 Datix : [Redacted]
 Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	15/11/21
Incident (IR1) ID:	[Redacted] Personal Information redacted by the USI
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	patient has a low risk non muscle invasive bladder cancer treated by TURBT. For review by AOB to recommend flexible cystoscopy in 3 months. Complaint about his treatment under AOB Comment MDH - ?indications for why a TURP was performed in 2013
Summary of Discussions	15.11.21 - Patient who contacted the Trust re concerns about management. Helpline. Was seen in clinic by Mr Haynes. Prostate cancer treated with radiotherapy. Now incontinent managed with pads. Issues are incontinence. Mr Haynes could not satisfy the decision to proceed to TURP - this is incontinence stems from. Continuous stress incontinence. Bladder cancer first and then TURP when he attended for bladder procedure. Prostate cancer diagnosed at this point. 2013 given botox, went into retention, subsequent TURP (10% risk of retention) not an indication for bladder outflow surgery. In absence of obstruction TURP can worsen obstruction. Stress incontinence relates to closure pressures. Concerns re bladder outflow surgery. Meets the criteria for review.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 6
 Personal Information redacted by the USI
HNC:
Datix : Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	15/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	Patient has an intermediate risk organ confined prostate cancer. Initially treated with Bicalutamide 50mg, switched to 150mg in November 2019 and then patient has discontinued Bicalutamide since his last prescription in February 2020 - Recent PSA 15
Summary of Discussions	15.11.21 - Initially started on 50mg for stage of disease which options were radical treatment or surveillance. Neither has he been treated or monitored. Meets the criteria for review
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 66
 HNC: [Redacted]
 Datix: [Redacted]
 Personal Information redacted by the USI
 Personal Information redacted by the [Redacted]

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	15/11/21
Incident (IR1) ID:	[Redacted] Personal Information redacted by the [Redacted]
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	On review with AOB he was commenced on a low dose of Bicalutamide and placed on the waiting list for a TURP with the intent that the TURP would improve his urinary symptoms and obtain tissue for pathology with regards to prostate cancer likely diagnosis
Summary of Discussions	15.11.21 - 2019 Raised PSA. No evidence of metastasis. Commenced on 50mg and planned for a TURP. No diagnosis of prostate cancer. PSA 28.8. Standard investigation of a raised PSA would include consideration of MRI and prostate biopsy. Started on unlicensed dose and investigation plan was not standard for diagnosis. Received hormone treatment to December 2020. Still no tissue diagnosis. Now on watchful waiting. [Redacted] year old. PSA dynamics do not trigger any indication for treatment. The only standard use for 50mg is for testosterone flair for patients being started on LHRHa. Difficult to understand why this drug was used. Meets the criteria for review
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 60

HNC:

Personal Information redacted by the USI

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	11/11/21
Date of Screening	15/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	Moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Mr Matthew McAlinden Mr Chris Wamsley Mr David Cardwell Mrs Carly Connolly
Summary of Incident	High risk locally advanced prostate cancer diagnosed 2017 and treated with oral Bicalutamide to date
Summary of Discussions	15.11.21 - 2017 MDT high risk locally advanced disease. Treatment with curative intent. Started on 150 mg in March 2017. For patients having ADT with radiotherapy will receive this drug from oncologist. Meets the criteria for review.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 31
 HNC : Personal Information redacted by the USI
 Datix : Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Bicalutamide 2011 and then Radiotherapy 2014 for CaP had assessment of LUTS prior to RT but dose of bicalutamide 50mg and 3 years from diagnosis to RT incorrect dose of bicalutamide referral to oncology delayed
Summary of Discussions	22.11.2021 Discussed at screening- 01.05.2021 tel consultant with Mr Haynes. Patient was on an unlicensed dose of Bicalutamide, Now on correct treatment, For SJR.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 67
 HNC: [Redacted]
 Datix [Redacted]
 Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Colovesical fistula, Haematuria / ?TCC bladder and raised PSA initial pathological interpretation of bladder lesion as G2Ta bladder cancer but review at MDM in keeping with inflammatory process. Raised PSA at time. MDM review January 2019 '... For review by Mr O'Brien to reassure and to repeat serum PSA.' Letter 16/1/19 discharged. No repeat PSA. Subsequently PSA has been found to remain elevated and is undergoing further investigations currently - Repeat PSA not checked despite MDM recommendation
Summary of Discussions	22.11.2021 Discussed at screening. MDM Jan 2019 advised to repeat serum PSA- this was not done. Has had PSA repeated since and was elevated. Has since gone through prostate cancer diagnostic pathway and treated for prostate cancer. Patient aware. Would have had an earlier diagnosis had PSA done earlier. Patient has not come to harm. Earlier treatment small/ slight increase in cure. Patient inadvertently went onto watchful waiting. There is the potential of harm. MDM outcome not followed. For SJR review.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 43

HNC :

Datix :

Personal Information redacted by the USI

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	17/11/21
Date of Screening	23/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Admitted and catheterised for high pressure retention 2x TURPs CVA after 2nd TURP commenced on off license bicalutamide dizziness (SE of both tamsulosin and bicalutamide). Concerns; 1)no evidence of discussion of off license use or risks of bicalutamide 2)no offer of alternatives to TURP for large glands (NICE CG97 2010/15 recommendation 1.5.4) Bicalutamide off license use with no evidence discussion of this or risks prostate volume not assessed formally on initial admission and no discussion of alternatives to TURP as per NICE CG97 maybe had CVA after second GA. If he had been offered and opted for holmium enucleation (would have been ECR to England) would have only required 1 GA.
Summary of Discussions	22.11.2021 Discussed at screening- unlicensed use of Bicalutamide- bladder outflow surgery reasonable, TURP failed to establish voiding, 2nd TURP failed to establish voiding and pt had a stroke. Prostate volume 148cm ³ at the time, Nice guidelines recommend Prostate volume >80 alternative treatment should be used, should have been offered alternative treatment and avoided 2nd anaesthetic, which resulted in a stroke. Cardiovascular complications risk doubles after 1st anaesthetic- patient was 70 yrs at the time. Issues: 2 operation could have been avoided if offered alternative treatment; Bicalutamide off licensed dose. ADT given afterwards. NICE guidance offer alternative treatment, and maybe would have had a better outcome (no CVA). Unlicensed dose of medication, with side effects. FOR SJR
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 26
 HNC: [Redacted]
 Personal Information redacted by the
 USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Diagnosis: Intermediate risk localised prostate cancer diagnosed 2009 – on Bicalutamide 50mg since July 2010
Summary of Discussions	22.11.2021 Discussed at screening- on a prolonged period of unlicensed dose of Bicalutamide. Mr Haynes reviewed patient 02.11.2020, patient aware. FOR SJR
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 33

HNC:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Diagnosis: T2 intermediate risk localised prostate cancer diagnosed in 2014 treated with low dose Bicalutamide since 2014
Summary of Discussions	22.11.21 Mr Haynes reviewed patient on 3.11.2020. at diagnosis. 2014 commenced on low dose Bicalutamide. Patient had a prolonged period of unlicensed dose of low Bicalutamide. Patient aware. Now switched to watchful waiting, FOR SJR
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 41

HNC :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Diagnosis: Prostate cancer diagnosed September 2014, gleason 3+5=8 in 2 of 6 cores with initial PSA of 8.02 initially commenced on Bicalutamide and Tamoxifen at a dose of 150/10. Discontinued due to hot flushes. He was then more recently started on Bicalutamide 50mg
Summary of Discussions	22.11.21 Discussed at screening 02.11.20 reviewed by Mr Haynes, Patient had high risk disease, no MRI was completed but had CT scan, commenced Bicalutamide and discontinued, then was restarted on Bicalutamide 50mg, treatment options should have been watchful waiting or hormone/ radiotherapy. Discussed at 2014 MDT histology review, no evidence of subsequent MDM discussion. Patient informed. Patient is currently on watchful waiting pathway. For SJR.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 46

HNC:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Diagnosis: intermediate risk prostate cancer diagnosed 2015 with initial PSA 13.25, gleason 4+3=7 prostate cancer in 5 of 10 cores and radiological evidence of no metastases and possible early T3a disease. on combined androgen blockade
Summary of Discussions	22.11.21 Discussed at screening. Mr Haynes has reviewed patient - non metastatic cancer standard treatment would be surveillance/ watchful waiting or radical treatment. Not offered referral to Radiotherapy. Patient was on unlicensed treatment. Patient now aware. FOR SJR
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 48

HNC :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Diagnosis: Locally prostate cancer diagnosed in 2010, on anti-androgen since diagnosis
Summary of Discussions	22.11.2021 Clinical relevant index, diagnosed in 2010, PSA 15 prostate cancer, non-metastases prostate cancer 2010, pt was commenced on hormone treatment, AOB thought no need for radiotherapy, no evidence of benefits to treat with hormone treatment. Not offered opportunity for radiotherapy. Mr Haynes has reviewed patient and now on watchful waiting as this is the appropriate pathway. Patient could have had 10 yrs without hormone treatment on watchful waiting pathway. For SJR
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 49

HNC:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Diagnosis: Clinical/radiological suspicion of prostate cancer diagnosed in 2015 with PSA of 6.24 (on finasteride) and radiological suspicion of T2 (localised) prostate cancer - No prostate biopsy performed.
Summary of Discussions	Mr Haynes met and reviewed patient- Radiological suspicion of localised disease, [redacted] at time, not biopsied, started low dose Bicalutamide and continued on same [redacted] yrs old showed evidence PSA of 12 and evidence with localised disease, watchful waiting without biopsy, now on surveillance pathway as appropriate treatment. Unlicensed treatment dose of Bicalutamide, no sign of consent process, risks and benefits explained. For SJR.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Personal Information redacted by the USI
 hnc: [REDACTED]
 Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Diagnosis: Low risk prostate cancer diagnosed 2003 treated with initially LH RH analogue for short period followed by low dose Bicalutamide treatment which he has remained on since diagnosis
Summary of Discussions	22.11.2021- [REDACTED] yr old diagnosed in 2003 with low risk prostate cancer, placed on LHRH then Bicalutamide 50mg, treatment now discontinued, current treatment on surveillance pathway. Can't find all details, should have been offered surveillance/ watchful waiting as most appropriate, patient had an unlicensed dose for 16 years before stopped Dec 2019. Patient is aware, NH patient wont actively follow up. For SJR.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 68

HNC:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Diagnosed 2017 with an iPSA of 43, Gleason 7 (4+3), T2, N0, M0, adenocarcinoma of the prostate Gland – seen in Independent Sector and recommended that his case management is reviewed
Summary of Discussions	22/11/2021 Discussed at screening diagnosed in 2011 prostate cancer, then treated with Bicalutamide at 150mg then sub LHRH, had non metastases disease at presentation, no discussion about radiotherapy until 3-4 years later, subs referral made to radiotherapy 2016/17. HIGH RISK localised cancer, MDMT outcome not followed, could have been off treatment if referred to radiotherapy earlier. Radiotherapy was recommended, no mechanism for tracking MDM outcomes. Responsibility lies with clinician to carryout MDT outcomes. Has been treated and currently on appropriate treatment. For SJR review.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 80

HNC:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	23/11/21
Incident (IR1) ID:	
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Dr Raymond McKee Mr Mark Haynes Mrs Wendy Clayton Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	<div>Personal Information</div> year old gentleman diagnosed with Intermediate risk small volume localised prostate cancer in May 2012 with initial PSA of 7.36 and gleason 3+4=7 prostate cancer in 3 of 12 cores radiological stage T2 N0 M0. Treatment with low dose (50mg) Bicalutamide and tamoxifen since diagnosis
Summary of Discussions	22/11/2021 screening recurrent theme, unlicensed dose of bicalutamide, follow on from morning decision , seen by Mark Haynes on unlicensed treatment for prolonged period, without indication, should have been surveillance or radical treatment, now on surveillance. For SJR
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 82

HNC:

Personal Information redacted by the USI

Datix

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	23/11/21
Date of Screening	29/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Raymond McKee Mr Mark Haynes Mr Ronan Carroll Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Personal Information redacted by the USI year old deceased gentleman Personal Information redacted by the USI diagnosed with Localised intermediate risk prostate cancer initially in 2010 and commenced on low dose Bicalutamide 50mg and Tamoxifen 10mg February 2011.
Summary of Discussions	29/11/2021 - Seen Mr Hayes recently -standard localised prostate cancer age Personal Information redacted by the USI - low dose Bicalutamide maintained, patient was never offered radical treatment, Mr Haynes took of treatment Nov 2020.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 42

HNC:

Personal Information redacted by the USI

Datix

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	23/11/21
Date of Screening	29/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Raymond McKee Mr Mark Haynes Mr Ronan Carroll Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Prostate cancer treated with radical radiotherapy – phoned Urology Inquiry Information line – wants his care under Mr O'Brien looked into (transferred to Mr Young on his wishes)
Summary of Discussions	29/11/2021- Query timescales- seen in 2017 urinary symptoms raised PSA , clinical obs USS done March 2018, pt went on holiday bloods done Aug 2018. Letter March 2018 stated for blood test in June, if PSA was up to arrange MRI, pt tried to contact AOB with results and no action was taken. Despite contact with sec, no action taken, pt escalated to HOS and had an app with Mr Young. Patient was then diagnosed and had radiotherapy. Pt describes interaction he had with Mr AOB led to AOB not to take action for review. Patient contacted secretary and received no response. We don't know if sec shared info with AOB. Patient was investigated and assessed as intermediate risk prostate cancer. The patient's interaction was unsatisfactory and led to him not being followed up. Escalated following multiple contacts with secretary. Sec should add to doaro list and remain on list until PSA done, In August this should have been identified and flagged up. There was delay in diagnosis, no evidence harm done.. There is potential harm, doaro list is a failsafe and should be used. FOR SJR.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 36

HNC :

Datix :

Personal Information redacted by the USI

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	23/11/21
Date of Screening	29/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Raymond McKee Mr Mark Haynes Mr Ronan Carroll Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	This Personal Information redacted by the USI year old man attended Urology in 2017 and had Adenocarcinoma Prostate Gleason 3+4 diagnosed in April 2017. He was commenced on Bicalutamide and Tamoxifen on 05.05.17 and subsequently commenced on Fesoterodine 4mg daily in September 17.
Summary of Discussions	29/11/2019 MDM outcome watchful waiting, was started on hormone treatment, never referred for radiotherapy. Patient not aware DNA appointment. Not offered radio or watchful waiting, Quality impact on life on hormonal treatment. Evidence should have had hormone and radiotherapy, or watchful waiting. FOR SJR
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 46
 HNC: [Redacted]
 Datix: [Redacted]

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	01/12/2021
Date of Screening	10/01/2021
Incident (IR1) ID:	[Redacted]
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Mr Mark Haynes Mr Chris Wamsley Mrs Carly Connolly Mrs Dawn King
Summary of Incident	SJR on bicalutamide for years before going on an LA analogue and started on non-recommended treatment
Summary of Discussions	Discussed at screening 10/01/2022: off license dose of bicalutamide FOR SJR
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 55
 HNC: [Redacted]
 Datix : [Redacted]
 Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	23/11/21
Date of Screening	29/11/21
Incident (IR1) ID:	[Redacted] Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Raymond McKee Mr Mark Haynes Mr Ronan Carroll Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Diagnosis: Gleason 3+4=7 prostate adenocarcinoma diagnosed 2015 Radical radiotherapy completed July 2015 – IPSS =17 Subsequent treatment with Bicalutamide, Tamoxifen and medroxyprogesterone
Summary of Discussions	29/11/2021 Discussed at screening. Noted some clinicians rely on outpatient review to trigger a follow up, even with recognition they cannot provide review within recommended time scales due to back log. Outpatient reviews. 3/12 No PSA, there was a delay in referral, then pt DNA appointment. There are complex letters query excuse for 8/12 delay in dictation. Definitely there was a delay in action from clinic outcome, delayed referral to oncology. pt DNA himself, although pt might have miss-understood urgency due to the delay in appointment. DNA are common for a variety of reasons. Delay in referral was too long. Reason provided in letter does not justify reason for delay and non-action from MDT recommendation. FOR SJR.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 28
 HNC: [Redacted]
 Datix: [Redacted]
 Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	01/12/2021
Date of Screening	10/01/2021
Incident (IR1) ID:	[Redacted]
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Mr Mark Haynes Mr Chris Wamsley Mrs Carly Connolly Mrs Dawn King
Summary of Incident	Diagnosis: T3b N1 prostate cancer at diagnosis 2017 treated with oral Bicalutamide
Summary of Discussions	Discussed at screening 10/01/2022. Metastases prostate cancer, [Redacted] yr old commenced Bicalutamide , MDT recommended LHRHa, carried on Bicalutamide, no documentation of consultation about inferior outcomes of treatment, no referral to oncology for SJR
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 27

Personal Information redacted by the USI

HNC:

Datix:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	01/12/2021
Date of Screening	10/01/2021
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Mr Mark Haynes Mr Chris Wamsley Mrs Carly Connolly Mrs Dawn King
Summary of Incident	Diagnosis: 4.5cm left renal mass Prostate cancer on androgen deprivation therapy On Bicalutamide and Tamoxifen for gleason 3+4 prostate cancer since 2014, stage T2 N0 M0
Summary of Discussions	Discussed at screening 10/01/2022 - Kidney cancer was incidental finding, pt was restaged and this was identified, 2014 Initially commenced on low dose Bicalutamide then increased to 150mg, pt should have been offered radical treatment in 2014. Mr Haynes has referred pt for radiotherapy. 2 issues off license dose Bicalutamide and surveillance or radical treatment. FOR SJR, recent clinical letter documents pt informed of options
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 62

Personal Information redacted by the USI

HNC:

Datix:

Personal Information

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	01/12/2021
Date of Screening	10/01/2021
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Mr Mark Haynes Mr Chris Wamsley Mrs Carly Connolly Mrs Dawn King
Summary of Incident	Patient request and highlighted by professor Sethia: I would like to have my care reviewed I was operated on by Mr Hagan in the City Hospital but the diagnosis and original procedure were carried out by Mr OBrien. As a result I had bladder cancer and prostate cancer I also had a kidney removed and as a result I had a stent inserted and now wear a colostomy bag.
Summary of Discussions	Discussed at screening 10/01/2022 - 2017 pt had stroke, renal impairment right hydronephrosis, 2018 CT urogram 2018, which showed thick bladder wall, TURP July 2018. There was some delay in diagnosis management, flexible cystoscopy should have been considered based on urogram result. CT showed hydronephrosis, no stone evident, pt had a thick bladder wall. Flexible cystoscopy would not have required GI anaesthetic therefore low risk post stroke FOR SJR patient need to be informed.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

HNC:

Datix :

Patient 35

Personal Information redacted by the USI

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	23/11/21
Date of Screening	29/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Raymond McKee Mr Mark Haynes Mr Ronan Carroll Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Initial diagnosis in 2009 with a Gleason 7 T2 adenocarcinoma of the prostate gland. US guided biopsy in 2012 Gleason 7 was noted and a PSA of 3.9.
Summary of Discussions	29/11/2021 Discussed at screening. Same as previous cases. Feb 2013 Bicalutamide 50mg, Off licence dose, later increased 150mg, no evidence offered surgery instead of hormone treatment, completed radiotherapy December 2014. FOR SJR Surgery should be a treatment option, no evidence choice offered, low dose of Bicalutamide . treatment discussion in outpatient department, should be in notes. See attached notes.07/02/2022 Discussed at screening, Bicalutamide dose. FOR SJR
Level and Type of Review	
Review Team	

RECORD OF SCREENING

Patient 66

Personal Information redacted by the USI

HNC:

Datix:

Personal Information

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	01/12/2021
Date of Screening	10/01/2021
Incident (IR1) ID:	Personal Information
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Mr Mark Haynes Mr Chris Wamsley Mrs Carly Connolly Mrs Dawn King
Summary of Incident	Highlighted by professor Sethia Diagnosis: T2, N0, M0 Gleason 4+3 iPSA 27NGS/ML (on 5ARI) prostate cancer. 9 out of 14 cores recent TURP.
Summary of Discussions	Discussed at screening . Patient was on bicalutamide 150mg. Pt seen with raised PSA in Jan 2017, no correspondence from consultant, planned PSA + USS, both were completed. There is no evidence the results were actioned until patient attended clinic appt August 2018. there is no evidence patient was reviewed. Concerns raised in relation to initial management Jan 2017, high risk prostate cancer, was diagnostic investigation TURP standard practice at the time, patient now has pelvic node. Had patient had earlier management for same in 2017 would be in a different position. PSA raised significantly and no documentation action was taken. FOR SJR. Unsure if patient is aware.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 58

HNC:

Personal Information redacted
by the USI

Datix:

Personal
Information

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	01/12/2021
Date of Screening	10/01/2021
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Mr Mark Haynes Mr Chris Wamsley Mrs Carly Connolly Mrs Dawn King
Summary of Incident	Highlighted by professor Sethia DIAGNOSIS: Adenocarcinoma of prostate - He has been diagnosed with prostate cancer in 2008 and has been kept on active surveillance since then.
Summary of Discussions	Discussed at screening 10/01/2021. Localised prostate cancer 2008, commenced low dose Bicalutamide then therapeutic dose 159mg, patient should have been referred for radiotherapy, FOR SJR patient aware Mr Haynes informed, pt does not recall offer of radiotherapy.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 47

HNC:

Datix: Personal Information

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	10/01/2021
Incident (IR1) ID:	<small>Personal Information</small>
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Mr Mark Haynes Mr Chris Wamsley Mrs Carly Connolly Mrs Dawn King
Summary of Incident	Highlighted by Professor Sethia incorrect management of Ca prostate in 2010 - possible harm
Summary of Discussions	Discussed at screening 10/01/2021. Patient seen privately, no letters on NIECR,pt had non metastases disease in 2010, should have been offered radical treatment, did patient decline? Patient was seen privately but getting scans done on NHS. Patient commenced primary hormone treatment as stated on Radiology request forms. Sarah to inform patient FOR SJR, need to acquire private consultation notes from the GP if not already obtained.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 6

HNC:

Personal Information redacted by the USI

Datix:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	
Date of Screening	10/01/2021
Incident (IR1) ID:	Personal Information
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Damian Scullion Mr Mark Haynes Mr Chris Wamsley Mrs Carly Connolly Mrs Dawn King
Summary of Incident	Diagnosis: Low risk prostate cancer diagnosed 2006 - Upgrade to intermediate risk prostate cancer on surveillance biopsies 2012 commenced Bicalutamide 50mg daily September 2019
Summary of Discussions	Discussed at screening 10/01/2021. Commenced off license dose of Bicalutamide, should have had radical treatment or watchful wait. Mr Haynes has spoken with pt, telephone consultation and discussed treatments. Discussed at MDT. On appropriate treatment now, surveillance. FOR SJR
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 63

HNC:

Personal Information redacted by the USI

Datix:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	13/12/2021
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Professor Sethia Delayed diagnosis of Ca lung
Summary of Discussions	Discussed at screening 20/12/2021 - Patient had CT scan Dec 2017- new lung nodule- follow up not done. CT 2018 Nodule bigger. There was a 9 month delay in lung cancer, CT report was not actioned. Patient attended as an emergency and only then was action taken, referred to oncology. FOR SJR, Patient not aware but may have some insight.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 34

HNC:

Personal Information redacted by the USI

Datix:

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	13/12/2021
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Mr Keane at OPD clinic in Independent Sector SJR no letters pt was on bicalutamide for a number of years before being offered radiotherapy
Summary of Discussions	Discussed at screening 20/12/2021 - Patient commenced bicalutamide 2013. Off license dose, delay in referral to radiology, pt seen privately. FOR SJR.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 72

HNC:

Personal Information redacted by the USI

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	13/12/2021
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Mr Keane at OPD clinic in Independent Sector SJR - on bicalutamide for years before he had alternative treatment (2012-2014) and only started his LH/RHa in May 2014
Summary of Discussions	Discussed at screening 20/12/2021- off license dose of bicalutamide. FOR SJR. Patient not aware. Sarah to follow up.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 26

Personal Information redacted by the USI

HNC:

Datix :

Personal
Information

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	21/12/21
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information
Grade of Incident:	
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Mr Keane at OPD clinic in Independent Sector Current management plan in place with MDH but needs an SJR for previous episodes
Summary of Discussions	Discussed at screening 20/12/21. Off license dose of Bic 50mg, delay in referral for radiotherapy. FOR SJR. Sarah to inform patient.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 32

Personal Information redacted by the USI

HNC:

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	13/12/2021
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Mr Keane at OPD clinic in Independent Sector SJR as appears to have been on hormones for longer than should be and has FU planned
Summary of Discussions	Discussed at screening 20/12/21- Intermediate risk -MDT- started Bicalutamide 50mg Feb 2014, switched to LHRHa May 2015, Radiotherapy Dec 2015. Issues off license dose of Nic and delay in referral for radiotherapy. Sarah to inform patient, PSA due March 2022. For SJR
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 24

HNC:

Datix :

Personal Information redacted by the USI

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	13/12/2021
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Mr Keane at OPD clinic in Independent Sector SJR for appropriateness of radical prostatectomy
Summary of Discussions	Discussed at screening 20.12.21. Limited information 1998 PSA 26, High grade prostate cancer, placed on hormone treatment before radiotherapy. PSA of 26 would not normally perform surgery, however query evidence base at the time, pt was not offered radical treatment, what was the standard practice in 1998. Mr Haynes is unable to advise. 2 issues identified : pt should have had prostatectomy for high grade disease; should have had hormone treatment then radiotherapy; 29 years on hormone therapy. FOR SJR. Sarah to advise patient, next PSA due March 2022 , Sarah to arrange appt with Mr Haynes before March 2022.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 76

Personal Information redacted by the USI

HNC:

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	13/12/21
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Mr K at OPD clinic in Independent patient was diagnosed with Gleason 4+5 adenocarcinoma in 2011. He was then put on minimal androgen blockade using 50mg of bicalutamide and tamoxifen. There was no MDM discussion and he eventually ended up in the BCH system as he was referred on for radiotherapy on which he has done very well. obviously treating somebody with Gleason 9 adenocarcinoma of the prostate with 50mg of bicalutamide would need to be looked into
Summary of Discussions	Discussed at screening 20.12.21. Personal Information redacted by the USI yr old at the time, PSA 10.9, Gleason 9 on biopsy, locally advanced on MRI. 2011 Commenced bicalutamide 50mg, 2014 referred for radiotherapy, Unsure if missed at MDM in 2010/2011. Patient has since deceased Personal Information redacted by the USI, unsure of cause of death, Sarah to follow up. FOR SJR
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 78

HNC:

Datix :

Personal Information redacted by the USI

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	13/12/2021
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Mr Keane at OPD clinic in Independent Sector He was last seen in 2017 and hasn't been seen since nor his PSA checked. He is still fit and well and the issue of radiation therapy might still arise or intermittent androgen therapy with delayed radiation treatment but this still needs discussed with the oncology and the surgeons
Summary of Discussions	Discussed at screening 10.01.2022 . Mr Haynes unable to see MDT notes. Personal Information redacted by the USI yr old male, appears started hormone alone, intermediate risk for prostate cancer, should have been offered radical treatment. Commenced off license dose of bicalutamide 50mg increasing to 150mg. Did not refer for radiotherapy. FOR SJR. Pt is awaiting clinic appt with Mr Haynes.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 70
HNC: Personal Information redacted by the USI
Datix : Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	01/12/2021
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Mr Keane at OPD clinic in Independent Sector SJR (bicalutamide - medication unlicensed dose)
Summary of Discussions	2013 Bicalutamide 50mg, switch LHRh 2016, discussion had about radiotherapy, felt best to proceed with drug therapy, who made decision? Letter 2019 documented declined radical radiotherapy. Off license dose of androgen dep therapy. For SJR . Sarah to follow up with patient letter to advise of SJR, patient is on Mr Haynes waiting list to be reviewed.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 57

HNC:

Personal Information redacted by the USI

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	22/11/2021
Date of Screening	29/11/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Raymond McKee Mr Mark Haynes Mr Ronan Carroll Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Highlighted by Mr K OPD clinic in Independent Sector SJR - Bicalutamide - medication unlicensed dose
Summary of Discussions	28/11/2021 Discussed at screening. Off licence dose of Bicalutamide, prolonged period of ADT, subsequently referred to Oncology in 2014, , completed radiotherapy 2015. Has had good outcome and done well. FOR SJR
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 39

Personal Information redacted by the USI

HNC:

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	01/12/2021
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Mr Keane at OPD clinic in Independent Sector SJR started on Bicalutamide 50mg and never offered radiotherapy
Summary of Discussions	SCREENED 20.12.21. 2008 Patient prescribed off license dose of Bicalutamide 50mg, no referral made to oncology at the until January 2021, pt developed metastatic disease. Pt was not offered appropriate treatment FOR SJR. Sarah to book into Mr Haynes clinic.
Level and Type of Review	SJR
Review Team	

RECORD OF SCREENING

Patient 18
 HNC: [Redacted]
 Datix : [Redacted]

Directorate:	Acute Services
Reporting Division:	SEC/ Urology
Date of Incident:	22.11.21
Date of Screening	29/11/21
Incident (IR1) ID:	[Redacted]
Grade of Incident:	moderate
Screening Team:	Dr Ted McNaboe Dr Raymond McKee Mr Mark Haynes Mr Ronan Carroll Mrs Sarah Ward Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Highlighted by Mr K at OPD clinic in Independent Sector 'you may wish to review the hormone initial management of Mr [Redacted]
Summary of Discussions	29/11/2021 Discussed at screening. Initial hormone treatment with Bicalutamide 50mg. Discontinued himself because of side effects, then referred later for radiotherapy. Initial diagnosis was Sept 2011. Seen for discussion re surgery Nov 12, then referred to Radiotherapy. There was a delay in referral for radical treatment. Has now had treatment and has had a good outcome, patient unaware. FOR SJR.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

Patient 81

Personal Information redacted by the USI

HNC:

Datix :

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	01/12/2021
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Dr Raymond McKee Mr Chris Wamsley Mrs Sarah Ward Mrs Carly Connolly
Summary of Incident	Highlighted by Mr Keane at OPD clinic in Independent Sector He is entering a hormone refractory period and his management and follow up will need to be reviewed at MDT at Craigavon
Summary of Discussions	2012 intermediate risk prostate cancer. Patient was commenced on Bicalutamide 50mg, not referred to Radiology at the time. Patient had rectal bleeding and was referred to surgery. Unlicensed dose of Bicalutamide, failure to referral to oncology. FOR SJR. Patient not aware, Sarah to book into clinic, due PSA check January 2021.
Level and Type of Review	SJR
Review Team	

UROLOGY RECORD OF SCREENING

HNC :

Datix:

Patient 76

Personal Information redacted by the USI

Personal Information redacted by the USI

Directorate:	Acute Services
Reporting Division:	SEC
Date of Incident:	13/12/2021
Date of Screening	20/12/21
Incident (IR1) ID:	Personal Information redacted by the USI
Grade of Incident:	moderate
Screening Team:	Mr Mark Haynes Dr Raymond McKee Dr Damian Scullion Dr Ted McNaboe Mr Ronan Carroll Ms Sarah Ward Head of Service Mr Chris Wamsley Mrs Carly Connolly
Summary of Incident	Highlighted by Professor Sethia This Personal Information redacted by the USI year old man was placed on a waiting list in August 2014 for elective admission for prostatic resection to relieve bladder outlet obstruction. His prostate gland was resected on 19 December 2019. Histopathological examination of resected tissue found Gleason 3+3 adenocarcinoma involving approximately 7% of tissue. There was no perineural or lymphovascular infiltration. He has had severe urinary incontinence since surgery.
Summary of Discussions	Urodynamic study – 2012 no evidence of bladder issues. 2014 added to waiting list for TURP. Question was consent acquired, where risks and benefits explained- complication incontinence. Decision making odd. There is no record for indication/justification for procedure in notes, investigations showed no obstruction. Cancer was an incidental finding.. Sarah to book patient an apt with Mr Haynes clinic. FOR SJR review
Level and Type of Review	SJR
Review Team	



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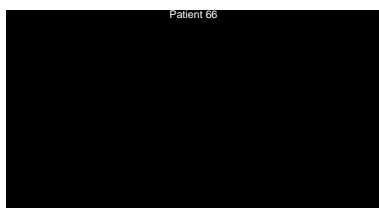
Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential



Dear Patient 66

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2019 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you initially came into the Urology service in 2019 with an elevated PSA (prostate specific antigen blood test which indicates possible prostate cancer) and urinary symptoms consistent with a probable cancer. Following review with Mr O'Brien you were commenced on a medication. You were also added to the waiting list to have surgical resection of your prostate and biopsies. Mr Haynes, Consultant Urologist reviewed you in December 2020. The decision to add you to the surgical waiting list was discussed and Mr Haynes advised he felt this was to address your urinary issues and notes that this didn't proceed as your blood sugars associated with your diabetes were quite high. Mr Haynes advised you that the medication you had been prescribed was below the recommended dose for managing prostate cancer. As no biopsies had been obtained to confirm the diagnosis, continuing on this medication was not required at present and this was stopped. Mr Haynes advised repeating your PSA and completing CT scans of your chest, abdomen and pelvis. These were completed and your PSA was noted to be reducing since stopping the medication. Mr Haynes advised this was expected and should continue to stabilise. Your CT scan noted some kidney stones for which Mr Haynes requested a scope. This is still to be completed. With regards to your PSA I note your next review is due in March 2022. You will continue to be updated on the results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential



Dear

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2012 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you have been under review of the Belfast Oncology Team from 2017 and seen most recently in April 2021 with a further telephone review planned for April 2022.

We hope your reviews with Belfast Oncology Team has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

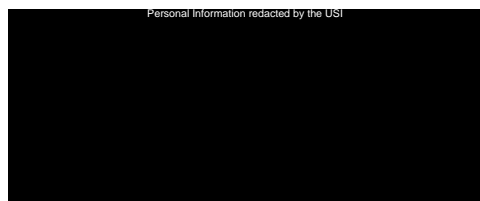
Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential



Dear Personal Information redacted by the USI

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2010 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with prostate cancer in 2010. Mr Haynes, Consultant Urologist reviewed you on the 6th December 2021 and advised you that the treatment pathway you were given in 2010 was potentially not appropriate. Mr Haynes detailed that the medication (Bicalutimide) you were prescribed was not a standard management dose and at your time of diagnosis your treatment options would have been medication in conjunction with radiotherapy or a surveillance pathway involving monitoring of your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer). Mr Haynes also detailed that the timeframe between diagnosis and having radiotherapy was prolonged as there did not seem to be a referral completed to the Oncology Team. I note Mr Haynes did advise that despite this delay you have had a successful outcome and continue to be under review annually with Professor Jain in Belfast.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The Liaison Team attempted to call you on the 4th January to discuss this letter prior to sending but there was no answer and no option to leave a message. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



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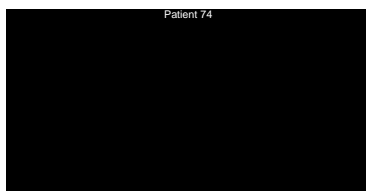
Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential



Dear Patient 74

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

I note you had raised a complaint regarding your treatment under Mr O'Brien. The external independent Consultant has determined that the treatment plan you were given in 2013 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. Your initial diagnosis was of bladder cancer in 2011 and further diagnosis of prostate cancer in 2015. Mr Haynes, Consultant Urologist reviewed you in April 2021. Mr Haynes noted you had surgical resection of your bladder in 2011 as part of your bladder cancer treatment. You also had surgical resection of your prostate in 2013 prior to the diagnosis of Prostate cancer for urinary flow issues. Following diagnosis in 2015 you completed radiotherapy treatment in 2017. Your ongoing care for your bladder and prostate cancer is managed by the Belfast Cancer Centre and their Urology Team.

We hope your review with Mr Haynes and your ongoing input from the Belfast Oncology and Urology Teams has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 57
Personal Information redacted by the USI

Dear Patient 57

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2011 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed prostate cancer in 2011. Mr O'Brien commenced a surveillance plan involving monitoring of your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer). I note in discussion with Mr O'Brien in September 2011 you indicated you were keen for radiotherapy. In January 2012 your PSA was noted to have increased and Mr O'Brien commenced you on a medication, Bicalutimide. Your next review with Mr O'Brien in January 2013 your Bicalutimide dose was increased further. In October 2014 I note Mr O'Brien advised on a referral to the Oncology Team. In August 2015 you completed radiotherapy treatment in Belfast. I note they have been completing yearly reviews with you and in November 2020 discharged you back to the care of your GP with ongoing monitoring of your PSA.

I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 76

Personal Information redacted by the USI

Dear Patient 76

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2019 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I note you received communication from Mr Haynes, Consultant Urologist in March 2021 following a check of your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) which was found to be stable and satisfactory. You will soon receive if you have not done so already an appointment to see Mr Haynes on the 12th January. Mr Haynes will discuss this letter in further detail with you at this review.

We hope your communication from Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely,

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

17 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 27
Personal Information redacted by the USI

Dear Patient 27

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2014 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with prostate cancer in 2014. Mr O'Brien at the time of diagnosis commenced you on a medication (Bicalutimide) which was subsequently increased in dosage in 2020. In early 2021 Mr Khan, Consultant Urologist reviewed you and reviewed this medication as your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) was rising and prescribed an injectable medication. Mr Haynes, Consultant Urologist also reviewed your records in May 2021 and advised that an updated CT scan was required and a referral to the Oncology Team in Belfast was being completed. I note the Oncology Team reviewed you on the 21st May as they advised you that at the time of your diagnosis the treatment options available to you would have been medication in conjunction with radiotherapy or a surveillance pathway involving monitoring of your PSA. I note you were subsequently diagnosed with a tumour in your kidney in June 2021 which following discussion with Mr Haynes you decided to follow the surveillance pathway for this. Mr Haynes last reviewed you on the 19th November and advised that a further discussion with the Oncology Team in Belfast was required as your PSA had risen slightly. I believe this review is currently awaited.

We hope your review with Mr Haynes and subsequent reviews with the Oncology Team has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully.

Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 77
Personal Information redacted by the USI

Dear Patient 77

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2018 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note in 2018 you had a raised PSA. (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) You were commenced on a medication for a short period before discontinuing then in 2019 you recommenced this medication. You were reviewed by Mr Haynes in May 2021 where he advised that a rising PSA level could be indicative of prostate cancer. As such the medication you were prescribed potentially should have been offered in conjunction with radiotherapy in 2018. At this stage Mr Haynes advised that the medication should be stopped and you should continue on a “watchful wait” treatment plan involving regular PSA checks and ongoing reviews. I note your last PSA was reported as being satisfactory since stopping your medication and a further check is due in January 2022. You will continue to be updated with the results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The Liaison Team attempted to contact you on the 8th and 15th December leaving messages on both occasions to discuss this letter prior to sending. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I wish to apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 82's Daughter
Personal Information redacted by the USI

Dear Patient 82's Daughter

RE: Urology Record Review

RE: Patient 82

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your Father's medical records. I can now advise following this review of your Father's care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record

Review (SCRR) of your Fathers care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan [Patient 82] was given in 2010 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

Firstly can I pass on my condolences on the passing of [Patient 82] in [Personal Information redacted by the ULS] this year.

I note [Patient 82] was initially diagnosed with prostate cancer in 2010 under the care of Mr O'Brien. Mr Haynes, Consultant Urologist reviewed him in November 2020 and he advised that at the time of diagnosis he did not recall being advised of the treatment options of radiotherapy or a surveillance pathway involving monitoring of his PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer). Mr Haynes advised that you were commenced on a medication only (Bicalutimide) which was at a potentially lower dose than should have been for the management of the prostate cancer. Mr Haynes discussed the options going forward and agreed with you that the medication should stop and a surveillance pathway be commenced. I note [Patient 82]s PSA was being monitored 3 monthly and the results indicated this was stable within normal range.

We appreciate that up until you have received this letter this may have been a worrying time. The Liaison Team attempted to contact you on the 8th, 9th and 15th December to discuss this letter prior to sending. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully.

Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 38
Personal Information redacted by the USI

Dear Patient 38

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review

(SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2009 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. You had a telephone consultation with Mr Haynes, Urology Consultant in April 2021. As discussed with you, your initial diagnosis in 2009 you potentially should have been offered radiotherapy in conjunction with the medication. It was noted in 2020 your PSA level (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) was rising above the normal range and the medication was no longer controlling this. Mr Haynes advised this medication should be stopped and a CT scan of your chest, abdomen and pelvis and a bone scan be completed. These were completed and reported as normal. Whilst your PSA returned to within normal limits, I note Mr Haynes discussed the option of radiotherapy with you and completed a referral to the Oncology Team in Belfast. You completed your radiotherapy in October this year. The Oncology Team will be reviewing you annually for the next 5 years with checks of your PSA every 3 months

We hope your review with Mr Haynes and subsequent reviews in Belfast has provided you some assurance. I do fully appreciate that up until you received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purposes of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was

reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

8 February 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 30
Personal Information redacted by the USI

Dear Patient 30

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2019 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you have been reviewed by Mr O'Donoghue, Consultant Urologist in October 2021. Mr O'Donoghue wrote to advise you of your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) check due this month and he will update you on the results of this.

We hope your review with Mr O' Donoghue has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely,

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

20 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 68
Personal Information redacted by the USI

Dear Patient 68

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2012 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you have been under the Oncology Team in Belfast with ongoing reviews since completing your radiotherapy in 2017 and most recently in May 2021 with a further telephone review planned

We hope your ongoing care under the Oncology Team has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

17 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 64
Personal Information redacted by the USI

Dear Patient 64

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2018 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate and I note you remain under the care of the Oncology Team in Belfast, most recently having a telephone consultation with their Oncology Nurse Specialist on 22nd November this year with a further review planned for March 2022.

We hope your ongoing reviews with the Oncology Team in Belfast has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 79
Personal Information redacted by the USI

Dear Patient 79

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant and Mr Haynes have determined that the treatment plans you were given beginning in 2006 were potentially not appropriate. These plans may be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

Mr Haynes, Consultant Urologist had a telephone consultation with you on the 24th April 2021. Mr Haynes explained that you were a previous patient of Mr O'Brien and had been discharged from his care in 2016. You reported to Mr Haynes that you had been seen by Mr O'Brien on numerous occasions from 2006 and had a number of treatments including Cystodistension, Prostate Resection, Botox injections to the bladder, an Epididymectomy and an Orchidectomy. Mr Haynes explained that unfortunately he has limited documentation pertaining to these on the Northern Ireland Electronic Care Record (NIECR). There are records of the procedures performed on [Personal Information redacted by the USI] (dilatation of bladder and Botox treatment), [Personal Information redacted by the USI] [Personal Information redacted by the USI] (Epididymectomy and further Botox treatment) [Personal Information redacted by the USI] (Orchidectomy and further Botox treatment), [Personal Information redacted by the USI] (Botox treatment) and [Personal Information redacted by the USI] (Cystoscopy and further Botox treatment). In addition there are private patient letters on NIECR dated 22nd August 2014 and 2nd December 2016.

Mr Haynes reviewed your current urinary symptoms. You advised you continued to experience issues with urinary flow, reduced bladder capacity and pain in the location of the previous Orchidectomy which you can currently manage but expressed you were keen to have further investigations. Mr Haynes reassured you that your most recent MRI scan in 2020 did not identify anything of concern and advised that chronic pain management would be essential in managing your symptoms. I note you have had the opportunity to attend the Pain Clinic and have had nerve block injections in June 2021. Mr Haynes discussed the options going forward and suggested beginning with a bladder diary and completion of an International Prostate Symptom Score (IPSS). I note Mr Haynes provided you with these for completion prior to a further appointment with him.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 41
Personal Information redacted by the USI

Dear Patient 41

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2014 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with prostate cancer in 2014. Mr Haynes reviewed you in clinic in November 2020 with your daughter. Mr Haynes explained that on diagnosis the treatment options available to you were a surveillance pathway involving regular checks of your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) or medication in conjunction with radiotherapy. Mr Haynes advised you were started on a medication only and radiotherapy was not discussed. You reported the initial dosage of medication was resulting in hot flushes and was subsequently reduced. Mr Haynes advised that your current PSA was suitable for a surveillance pathway and the medication should be discontinued. Mr Haynes had provided you with updates of your PSA monitoring since stopping the medication and I note from his last letter this is stable and satisfactory. I note your next PSA check is in February 2022 and you will be updated with the result.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 70
Personal Information redacted by the USI

Dear Patient 70

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2013 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate and I note you remain under the care of the Oncology Team in Belfast, most recently having a telephone consultation with Professor Jain in June last year with further reviews planned.

We hope your ongoing reviews with the Oncology Team in Belfast has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

17 January 2022

Healthcare Ref: 

Private & Confidential

Patient 62
Personal Information redacted by the
USI

Dear 

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2018 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you have been reviewed by Mr Haynes, Consultant Urologist in Craigavon Area Hospital since 2021 with his most recent letter in September 2021 advising you that the CT scan you had was entirely satisfactory. Mr Haynes also advised he will see you again in September 2022 with plans to complete a further scan and blood tests.

We hope your reviews with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 80

Personal Information redacted by the USI

Dear Patient 80

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2012 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with prostate cancer in 2012. Mr Haynes Consultant Urologist reviewed you in November 2020 and advised that in 2012 your treatment options would have been medication in conjunction with radiotherapy or a surveillance pathway involving monitoring of your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer). Mr Haynes explained as your PSA was less than 10 the surveillance pathway would have been an entirely reasonable option at that time. Mr Haynes advised you were commenced on a low dose medication only in 2012 (Bicalutimide) and other options of treatment appear to have not been discussed. Mr Haynes discussed the options going forward and you agreed that moving to a surveillance pathway and stopping the medication with regular checks of your PSA was the preferred option. I note Mr Haynes has been updating you on your PSA results most recently in July this year where your levels were found to be normal since discontinuing the medication. Your next PSA check is due in March 2022 and you will continue to be updated on the results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was

reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 18
Personal Information redacted by the USI

Dear Patient 18

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2011 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were under the care of the Oncology Team in Belfast until 2018 whereby they reviewed you for 5 years following completion of radiotherapy. Your GP has been checking your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) annually and I note this remains entirely satisfactory.

We hope your reviews with the Oncology Team in Belfast has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review whereby the process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref:

Personal Information redacted by the
USI

Private & Confidential

Patient 20
Personal Information redacted by
the USI

Dear

Patient 20

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2014 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were seen by Mr Haynes, Urology Consultant in April 2021. As discussed with you on your initial diagnosis in 2014 you potentially should have been offered radiotherapy treatment in conjunction with the medication you were prescribed. Whilst your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) remained within normal limits, having had radiotherapy at the time may have resulted in you not having to continue to take the medication. I note Mr Haynes referred you on to the Oncology team in Belfast and you have completed your radiotherapy treatment in September 2021. I also note they are monitoring your PSA every 6 months and will be following you up annually for the next 5 years.

We hope your review with Mr Haynes and subsequent reviews in Belfast has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 26
Personal Information redacted by the USI

Dear Patient 26

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2009 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note your initial diagnosis of Prostate cancer in 2009. Mr Haynes reviewed you with your daughter in November 2020 and explained that at the time of your diagnosis the treatment options that were available to you were either surveillance of your PSA (prostate specific antigen blood test which indicates possible prostate cancer) or intervention including medication, radiotherapy or surgery.. Mr Haynes explains you were commenced on a medication by Mr O'Brien which was of a lower dose recommended for this treatment and did not provide any benefit. Mr Haynes discussed stopping this medication and moving to a surveillance pathway where your PSA would be monitored and you would be updated with the results, I note your most recent PSA was reported by Mr Haynes as stable and your next check is due in January 2022. You will continue to be updated on this.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 32
Personal Information redacted by the USI

Dear Patient 32

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2012 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were under the care of the Oncology Team in Belfast until April 2021 where they completed annual reviews with you following completion of radiotherapy in 2015. They advised your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) was very satisfactory and your GP has been asked to check your PSA again in April this year.

We hope your reviews with the Oncology Team in Belfast has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

17 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 28
Personal Information redacted by the USI

Dear Patient 28

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2017 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with prostate cancer in 2017. Mr Haynes, Consultant Urologist reviewed you in May 2021 and advised at the time of diagnosis you were treated with medication only and at this stage your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) had risen indicating the medication was not working. Mr Haynes advised you of a change to an injectable medication, an MRI scan and referral to the Oncology Team in Belfast. Mr Haynes wrote to you to advise that your MRI scan was entirely normal. In May 2021 I note the Oncology Team in Belfast reviewed you and detailed that they did not receive a referral for you as would have been expected on diagnosis in 2017. They advised that they would have discussed the option of radiotherapy at that time. The Oncology Team in Belfast transferred your care to the Oncology Team in Altnagelvin and I note you have completed radiotherapy in September 2021. They have requested to review you in January 2022 with your PSA being checked every 3 months.

We hope your review with Mr Haynes and subsequent reviews with the Oncology Teams in Belfast and Altnagelvin has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref:

Personal Information redacted by the USI

Private & Confidential

Patient 39
Personal Information redacted by the USI

Dear

Patient 39

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2011 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you are currently under the care of Dr Brady, Consultant Oncologist in the Western Trust who continues to review you, most recently in May of 2021.

We hope your reviews with Dr Brady and his team has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref:

Personal Information redacted by the USI

Private & Confidential

Patient 35's Wife

Personal Information
redacted by the USI

Dear

Patient 35's Wife

RE: Urology Record Review

RE:

Patient 35

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your Husband Patient 35's medical records. I can now advise following this review, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review

(SCRR) of your Husband Patient
35's care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan your Husband was given in 2009 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

We appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref:

Personal Information redacted by the
USI

Private & Confidential

Patient 37
Personal Information redacted by
the USI

Dear Patient 37

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review

(SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2020 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were seen by Mr Haynes, Urology Consultant in April 2021. As discussed with you on your initial diagnosis in 2020 you potentially should have been offered radiotherapy in conjunction with the medication you were prescribed. Whilst your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) remained within normal limits, Mr Haynes discussed the option of radiotherapy with you and completed a referral to the Oncology team in Belfast. I note in October this year you completed your radiotherapy treatment with plans to monitor your PSA every 3 months with review by the team annually for the next 5 years.

We hope your review with Mr Haynes and subsequent reviews in Belfast has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 43
Personal Information redacted by the USI

Dear Patient 43

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

As we have determined that the treatment plan you were given in 2018 was potentially not appropriate, this is what will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note Mr Haynes had a telephone consultation with you and your daughter in May of this year where he explained the previous treatment given to you for urine retention did not include a recommendation for an alternative treatment that required only one surgical procedure. Mr Haynes also noted your recent issues with dizziness and a subsequent fall which could have been related to the medication you had been prescribed in 2018. It was also noted that no discussion was had with you in 2018 regarding the use of this medication or potential side effects. At this time Mr Haynes advised this medication should be stopped and he was requesting a scan of your bladder and urinary tracts. I note this was completed in August this year and the results forwarded to you indicated no concerns with your bladder and urinary tracts but that your prostate remained enlarged accounting for the symptoms you were experiencing. You attended an assessment clinic in August this year and had further examinations of your urinary flow which was found to be slightly obstructive due to your prostate. Following discussion with the Doctor it was agreed a pathway without medication would be best (you reported your dizziness had stopped since ceasing the previous medication) and you were referred to the community continence team for ongoing support.

We hope your reviews with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref:

Personal Information redacted by the
USI

Private & Confidential

Patient 42
Personal Information redacted
by the USI

Dear Patient 42

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2017 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I note your initial referral into the Urology Service in 2017 and diagnosis of prostate cancer in 2018. Mr Haynes, Consultant Urologist contacted you in December 2020 to discuss your previous care under Mr O'Brien. I note you had voiced issues with accessing blood results in 2017 and not having calls returned which resulted in the Head of Service at that time having your care transferred to another Urology Consultant. Mr Haynes offered apologies for this. Mr Young seen you in 2019 and Mr Haynes again apologised for the delay in getting your appointment and explained the capacity issues at that time. Mr Haynes advised that your diagnosis indicated early stage prostate cancer and the delay from 2017 did not likely impact on your treatment options and outcome. I note you completed your radiotherapy in August 2020 and you continue under the care of the Western Trust Oncology Team having annual reviews and 6 monthly PSA (prostate specific antigen blood test which indicates possible prostate cancer) checks.

We hope your review with Mr Haynes and the Oncology Team has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 51
Personal Information redacted by the USI

Dear Patient 51

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2013 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely appropriate. You were reviewed by Mr Haynes, Consultant Urologist in April 2021. You were diagnosed initially with prostate cancer in 2013. Mr Haynes discussed that in 2013 you were commenced on a medication for this and potentially you should have been offered Radiotherapy treatment at this time also. Mr Haynes advised that an updated PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) be checked and the medication you had been taking since 2013 should stop and your PSA should be monitored regularly. I note in September of this year your PSA result was normal for having stopped the medication. Mr Haynes advised this be monitored every 3-4 months and a further check is due in January 2022. Mr Haynes also requested an update MRI scan of your prostate which is currently awaited. Mr Haynes will review you following this.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

8 February 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 54's Wife
Personal Information redacted by the USI

Dear Patient 54's Wife

RE: Urology Record Review

RE: Patient 54

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your husband's medical records. I can now advise following this review, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your husband's care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan your husband was given in 2010 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

We appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely,

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 56's Daughter

Personal Information
redacted by the USI

Dear Patient 56's Daughter

RE: Urology Record Review

RE: Patient 56

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your Father's care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical

Record Review (SCRR) of your Fathers care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan [REDACTED] Patient 56 was given in 2003 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your Fathers current care is completely safe and appropriate. I note your Father was initially diagnosed in 2003 with prostate cancer. Mr Haynes had a discussion with you regarding your Fathers treatment in December 2020. I note Mr Haynes advised you that at the time of diagnosis in 2003 the type of cancer your Father had was deemed low risk and therefore the treatment pathway potentially should have been surveillance involving regular checks of the PSA only (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer). Mr Haynes advised the medication (Bicalutimide) which had been prescribed in 2003 was potentially not required and noted your Father remained on this until this review in 2020. Following discussion with Mr Haynes it was agreed that the medication should stop and your Father should move to the surveillance pathway. I note Mr Haynes monitored the PSA and reported this to be within normal ranges. In April of this year I note Mr Haynes in a further conversation with you and agreed that no further PSA blood tests would be taken. Your Fathers GP has been advised should any further support from the Urology Service be required that contact can be made with Mr Haynes.

We hope the reviews with Mr Haynes have provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

17 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 59
Personal Information redacted by the USI

Dear Patient 59

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2018 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with prostate cancer in 2006. Mr Haynes, Consultant Urologist completed a telephone consultation with you in May 2021. At this time he advised you that following your check PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) in 2019 under Mr O'Brien indicated a rise you were commenced on a medication (Bicalutimide) at a dosage of 50 milligrams (mgs) daily. Mr Haynes advised he could not locate any records of discussion with you regarding the treatment options available to you. Mr Haynes informed you of the options available to you at that time including a surveillance pathway, involving monitoring of your PSA, medication in conjunction with radiotherapy or the medication you were prescribed at a recommended dose of 150mg daily. The dose you were given was potentially not considered standard treatment. Following discussion with Mr Haynes you were advised the medication could be stopped and your PSA would be closely monitored. I note Mr Haynes wrote to you most recently in September 2021 to advise that your PSA level was entirely satisfactory. Your next check is due January 2022 and Mr Haynes will continue to update you on the results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully.

Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 60

Personal Information redacted by the USI

Dear Patient 60

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2017 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note your initial diagnosis of Prostate cancer in 2017. Mr Haynes, Consultant Urologist reviewed you with your daughter in clinic in May 2021. It was discussed with you at the time of diagnosis you were commenced on a medication which should be taken in conjunction with radiotherapy. You advised that radiotherapy was not discussed with you at that time. Mr Haynes advised that a repeat PSA (prostate specific antigen blood test which indicates possible prostate cancer) should be completed along with an MRI Scan. I note your MRI scan was reported as normal and your PSA result was slightly elevated outside of the normal range. Mr Haynes then advised you of a referral to the Belfast Oncology Team for discussion and consideration of radiotherapy. I note you decided not to proceed with this and instead opted to have your PSA checked regularly and commence a medication in injection formulation administered every 12 weeks. Your next PSA check is due in February 2022 and you will be updated on the results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 6
Personal Information redacted by the USI

Dear Patient 6

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2019 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note your initial diagnosis of Prostate cancer in 2019. Mr Haynes, Consultant Urologist reviewed you in October 2020 and advised the treatment options available to you were medication in conjunction with radiotherapy treatment or a “watchful wait” pathway involving regular PSA (prostate specific antigen blood test which indicates possible prostate cancer) monitoring. I note in this discussion with Mr Haynes you did not recall a discussion with Mr O'Brien regarding radiotherapy or a “surveillance” pathway and received medication only. Mr Haynes advised you that the medication you were prescribed was not a recommended treatment dose and not recommended without the associated radiotherapy treatment. Mr Haynes noted you had stopped taking the medication in February 2020. Following discussion of your options for future treatment your preference was to continue with monitoring of your PSA and regular reviews. I note your PSA has remained stable and is due to be checked again in January 2022. You will continue to be updated on the results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

22 February 2022

Healthcare Ref:

Personal Information redacted by the
USI

Private & Confidential

Patient 75's Son

Personal Information redacted by the USI

Dear Patient 75's Son

RE: Urology Record Review

RE: Patient 75

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your Father's medical records. I can now advise following this review of your Father's care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record

Review (SCRR) of your Fathers care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan your father was given in 2013 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

We appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely,

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref:

Personal Information redacted by the
USI

Private & Confidential

Patient 78
Personal Information
redacted by the USI

Dear

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2009 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I note you received communication from Mr Haynes, Consultant Urologist in October 2020 following a check of your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) which was noted to be reduced from the previous result (improved). Mr Haynes advises a review appointment will be forwarded to you shortly to come and see him at his clinic.

We hope your communication from Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 63
Personal Information redacted by the USI

Dear Patient 63

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2018 when a coincidental “nodule” was noted in your lung on the CT Scan completed of your Chest, Abdomen and Pelvis as part of your follow up for your previous bladder and prostate cancer was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I note you have been under the care of the Oncology Team in Belfast for radiotherapy treatment to your lung. They continue to review you since completing this in July 2021.

We hope your reviews with the Oncology Team has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 25
Personal Information redacted by the USI

Dear Patient 25

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2011 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were seen by Mr Keane, Consultant Urologist in the Orthoderm Clinic in 2020. Mr Haynes, Consultant Urologist in the Southern Health and Social Care Trust wrote to you following this review and advised of your PSA result (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer). This was found to be satisfactory and also advised on the outcome of the MRI scan you had completed of your spine. This indicated some degenerative disease in some discs. Mr Haynes advised of a completed referral to the Spinal Orthopaedic Team in Belfast. Mr Haynes also noted you have been under the care of Dr Jain, Oncology Consultant in Belfast since 2017 and will remain under his care.

We hope your most recent review with the Oncology Team in Belfast in October has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 67
Personal Information redacted by the USI

Dear Patient 67

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review

(SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2017 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note your initial diagnosis of bladder cancer in 2017. Mr Haynes, Consultant Urologist wrote to you in September 2020 regarding your last PSA result (prostate blood test) that was checked in 2017. Mr Haynes requested an updated check PSA which was reported as being the same as your 2017 result. Mr Haynes advised you to have this repeated in Feb 2021. Following this and an updated scan of your prostate Mr Haynes advised you that your PSA level was elevated and was not in keeping with the results of your scan (which showed a minimally enlarged prostate). An MRI scan of your prostate was arranged and Mr Haynes advised you that there was an area of suspicion which required a biopsy. Following this Mr Haynes contacted you to advise of the positive results and referral to the Oncology team in Belfast. I note you proceeded to radiotherapy and completed this in October this year with Oncology Team in Belfast planning to review you for the next 5 years with 6 monthly PSA checks.

We hope your review with Mr Haynes and the Oncology Team in Belfast has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The Liaison Team did attempt to contact you on the 8th and 15th December and left messages on both occasions to discuss this letter prior to posting. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 40
Personal Information redacted by the USI

Dear Patient 40

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2008 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely appropriate. I note you were diagnosed with prostate cancer in 2008. Mr Haynes, Consultant Urologist reviewed you in April 2021 after a concern was raised by you regarding the time lapse from diagnosis to receiving your radiotherapy treatment in 2013. Mr Haynes notes in this review a discussion regarding the initial travel concerns to Belfast daily for this treatment but following your first appointment you were advised of transport that could be provided for you. This does not appear to have been pursued. Mr Haynes advised that the time between diagnoses to receiving radiotherapy, whilst prolonged did not have any negative impact on your outcome. I note Mr Haynes discussed that having the radiotherapy sooner may have resulted in you being able to stop the medication quicker but your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) was low and controlled and you were discharged back to the care of your GP.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The Liaison Team did attempt to make contact with you on the 9th and 15th December and left a message on both occasions to advise of this letter being posted. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

17 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 47
Personal Information redacted by the USI

Dear Patient 47

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2010 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

In October 2020 Mr O' Donoghue Consultant Urologist reviewed you at his outpatient clinic. At this review Mr O'Donoghue noted that you were initially diagnosed with Prostate cancer in 2010 but he was unable to find any records of your reviews with Mr O'Brien, results of samples that would have been sent to confirm the diagnosis or discussions at the Urology Multidisciplinary Meeting (MDM) where your prostate cancer would be discussed with a range of specialists and a management plan would be recommended. Mr O' Donoghue reported your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) was significantly raised in 2010 and notes you were treated with a medication (Bicalutimide) which had been stopped prior to this review. Mr O'Donoghue advised that an updated bone scan was required and he would refer you to the Urology MDM for discussion and treatment options going forward. I note you did not wish to proceed with the scan or any further treatment and Mr O'Donoghue wrote to you to advise you of the plan to monitor your PSA regularly. This was checked on the 23rd November 2021 and Mr O'Donoghue will continue to write to you to update you on results.

We hope your review with Mr O'Donoghue has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully.

Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

8 February 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Personal Information redacted by the USI

Dear Personal Information redacted by the USI

RE: Personal Information redacted by the USI

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your husband's medical records. I can now advise following this review, aspects have been identified that require a further review. This means an

independent Consultant will complete a Structured Clinical Record Review (SCRR) of your husbands care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan your husband was given in 2014/2015 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I note you and your husband met with Mr Haynes, Consultant Urologist on the 22 December 2021 whereby he discussed the timeline of your husbands care, the potential issues/ delays and the need for his records to be escalated through the Trusts screening process for a structured clinical record review.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely,

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

17 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 58
Personal Information redacted by the USI

Dear Patient 58

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail

The external independent Consultant has determined that the treatment plan you were given in 2017 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with prostate cancer in 2008. In July 2021 Mr Haynes, Consultant Urologist reviewed you and advised that in 2017 and confirmation of further cancer within your prostate your treatment options would have been a surveillance pathway in keeping with your treatment in 2008 or medication given in conjunction with radiotherapy. Mr Haynes notes you did not recall being offered radiotherapy. At this time Mr Haynes advised you of a referral to the Oncology Team in Belfast to consider radiotherapy treatment. I note in July 2021 you were reviewed by the team and following discussion of options you decided to proceed with the radiotherapy which you subsequently completed in October.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

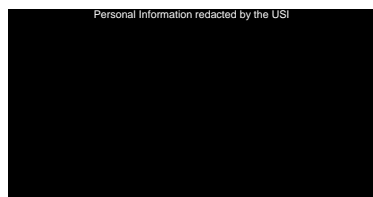
Chair
Eileen Mullan

Chief Executive
Shane Devlin

8 February 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential



Dear Personal Information redacted by the USI

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant may complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2019 was potentially not appropriate. This treatment plan may be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were reviewed by Mr Haynes, Consultant Urologist on 22nd December 2021 whereby he explained there was a delay in the dictation of your clinic review which resulted in a delay in the referral for radiotherapy and review by the Oncology Team. Mr Haynes did reassure you that despite this delay you appeared to have had a good response to the treatment.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

16 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 17's Wife

Personal Information redacted by the USI

Dear Patient 17's Wife

RE: Urology Record Review

RE: Patient 17

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your husband's medical records. I can now advise following this review of your husband's care, aspects have been identified that require a further review. This means an independent Consultant will complete a

Structured Clinical Record Review (SCRR) of your husbands care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan your husband was given in 2011 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

Firstly can I pass on my condolences on the passing on Patient 17 in Irrelevant information redacted by the USI this year.

I note your husband was initially diagnosed with prostate cancer in 2011. Mr Haynes, Consultant Urologist reviewed him in April 2021 and advised that at the time of diagnosis the treatment options available was medication in conjunction with radiotherapy or a surveillance pathway involving monitoring of the PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer). Mr Haynes noted he was only prescribed the medication and was potentially not offered radiotherapy. Mr Haynes advised that his care was reviewed by the Multidisciplinary Team (MDT) which involves a discussion with a number of specialities to agree on a treatment pathway. They agreed that he did not require the medication and should move to a surveillance pathway and continue to monitor his PSA. Patient 17 was in agreement with this plan.

We appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was

reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely,

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 23
Personal Information redacted by the USI

Dear Patient 23

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review

(SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2011 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were seen by Mr Haynes, Urology Consultant in April 2021. As discussed with you on your initial diagnosis in 2011 you potentially should have been offered radiotherapy or surgical treatment in conjunction with the medication you were prescribed. Whilst your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) remained within normal range, I note Mr Haynes advised you that he would like an updated MRI scan of your prostate, which was completed in November 2021 and reported as satisfactory. Mr Haynes has also requested an updated biopsy of your prostate for which you are currently awaiting. Mr Haynes will review you again following this.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

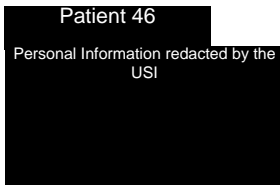
Chair
Eileen Mullan

Chief Executive
Shane Devlin

17 January 2022

Healthcare Ref: 

Private & Confidential

Patient 46

Personal Information redacted by the
USI

Dear 

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2013 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with prostate cancer in 2013. Mr Haynes, Consultant Urologist reviewed your records in September 2021. A PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) was checked and reported as being entirely normal. Mr Haynes wrote to advise you of this and the need to have this monitored. You will continue to be updated on the results.

We hope your communication from Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. The Liaison Team did attempt to contact you prior to sending this letter but there was no answer and no ability to leave a message. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 55
Personal Information redacted by the USI

Dear Patient 55

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

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The external independent Consultant has determined that the treatment plan you were given in 2012 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you are currently under the care of the Oncology Team in the Belfast Trust, with them seeing you most recently in November of this year and planned review due in March 2022.

We hope your reviews with the Oncology Team in Belfast has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref:

Personal Information redacted by the
USI

Private & Confidential

Patient 19
Personal Information redacted by the USI

Dear Patient 19

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2012 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were seen by Mr Haynes, Urology Consultant in April 2021. As discussed with you and your son at your appointment there were potential issues identified with the medication you had been prescribed previously for managing your prostate cancer. Mr Haynes discussed options and advised you of the appropriate treatment at this time and discontinued these medications and advised your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) would be rechecked every 3 months. I note your last check was in October this year with your next check due January 2022. You will be reviewed again following this next PSA check and Mr Haynes will continue to update you.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely,

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 36
Personal Information redacted by the USI

Dear Patient 36

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

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The external independent Consultant has determined that the treatment plan you were given in 2017 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I note you were initially diagnosed with prostate cancer in 2017. One of our Consultant Urologists has attempted to make contact with you on a few occasions to arrange a review appointment to discuss your treatment plan from 2017. They also contacted your GP in July 2021 to ask them to review your medication as they noted that you had been on a medication (Bicalutimide) since 2017 and they were concerned you were still on this. I note you cancelled appointments in October and November this year and therefore we have been unable to discuss the potential concerns with you and advise you of the treatment plan going forward. On your diagnosis in 2017 the treatment options available to you were medication in conjunction with radiotherapy or a surveillance pathway involving monitoring of your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer). It appears from the records you were commenced on the medication only and potentially were not offered radiotherapy or the option of surveillance. We are keen to discuss this with you in person and would encourage you to make contact to arrange this.

We appreciate this may be a worrying letter to receive. We attempted to call you on the 8th, 9th and 15th December to discuss the contents of this letter. We left a voicemail of how to contact us. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 45
Personal Information redacted by the USI

Dear Patient 45

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

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The external independent Consultant has determined that the treatment plan you were given in 2015 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note your diagnosis of prostate cancer in 2015. Mr Haynes, Consultant Urologist reviewed you in November 2020 and advised you that at your time of diagnosis your treatment options should have been a surveillance pathway involving monitoring of your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) or medication in conjunction with radiotherapy. Mr Haynes advised you were prescribed medication and it does not appear that radiotherapy was discussed with you. Mr Haynes discussed your options and advised that the medication could be stopped and your PSA monitored. I note your PSA has remained low and stable since stopping the medication and Mr Haynes continues to update you on the results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 81
Personal Information redacted by the USI

Dear Patient 81

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2012 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note Mr Haynes, Consultant Urologist wrote to you in September of this year advising of the need to switch the medication you were taking (Bicalutimide) to an injectable formulation given by your GP every 12 weeks. Mr Haynes has also advised you to have your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) rechecked in January 2022 and he will update you on the results. You will shortly receive if you have not done so already an appointment with Mr Haynes on the 12th January where he will discuss this in further detail.

We hope the communication from Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 34
Personal Information redacted by the USI

Dear Patient 34

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2013 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you are under the care of the Oncology Team in Belfast and they have completed annual reviews with you following completion of radiotherapy in 2017, most recently in February 2021. They advised your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) was very satisfactory and your GP has been asked to check your PSA at 6 monthly intervals and the Oncology Team plan to continue to review you annually.

We hope your reviews with the Oncology Team in Belfast has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 24
Personal Information redacted by the USI

Dear Patient 24

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail

The external independent Consultant has determined that the treatment plan you were given in 2000 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you have had recent communication from Mr Haynes, Consultant Urologist from the Southern Trust in September 2021. Mr Haynes advised that your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) was extremely low and very satisfactory and has requested this be repeated in March this year. Mr Haynes will continue to update you on these results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 49
Personal Information redacted by the USI

Dear Patient 49

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2015 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with a suspicion of prostate cancer in 2015. Mr Haynes reviewed you in November 2020 and discussed with you that in 2015 you were commenced on a medication (Bicalutimide) for managing your raised PSA (prostate specific antigen in blood which indicates possible prostate cancer or progression of cancer) and have remained on this since. Mr Haynes advised that there was no evidence of biopsies being taken to establish if you did have prostate cancer, but despite this the medication you were prescribed is intended to only be used for a short period of time and is generally given in conjunction with radiotherapy once cancer has been confirmed. Mr Haynes also advised the dose you were prescribed was a lower dose than recommended. The other option that would have been available to you at the time was a surveillance pathway involving close monitoring of your PSA. Following discussion with Mr Haynes you decided on a surveillance pathway and the medication was stopped. I note Mr Haynes has been monitoring your PSA and your most recent result was reported as entirely normal. Mr Haynes has advised you to have a further check of your PSA in February 2022 and you will be updated on the results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was

reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

4 January 2022

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 33
Email to: Personal Information redacted by the USI

Dear Patient 33

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2014 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with prostate cancer in 2014. Mr Haynes, Consultant Urologist reviewed you in November 2020 and advised that on your diagnosis in 2014 your treatment options would have been a surveillance pathway, involving regular checks of your PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) or medication in conjunction with radiotherapy. Mr Haynes advised you were commenced on medication only, and at a lower dose that is recommended for this treatment, and radiotherapy was not offered. Mr Haynes completed a check of your PSA and advised this was appropriate for a surveillance pathway and the medication should be stopped. Mr Haynes also completed an updated assessment of your urinary tracts as you reported some symptoms of urgency and increased frequency. I note this assessment was found to be satisfactory. Mr Haynes has continued to monitor your PSA and I note this has remained at a stable level and continued surveillance is ongoing. Your next PSA is in February 2022 and you will be updated on this result.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

I apologise it has taken some time to complete. This was due to the volume of patients involved and wanting to assure ourselves that every patient record was reviewed fully. Finally you have the right to expect the very best care and treatment every time you use our services, for this expectation not being met I apologise.

Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

29 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 31
Personal Information redacted by the USI

Dear Patient 31

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2011 for prostate cancer was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you have been seen by Mr Haynes, Consultant Urologist in May 2021 and one of the Urology Nurse Specialists in December 2021.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. An additional leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely,

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref:

Personal Information redacted by the
USI

Private & Confidential

Patient 48

Personal Information redacted by the USI

Dear Patient 48

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2010 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were initially diagnosed with Prostate cancer in 2010. Mr Haynes, Consultant Urologist reviewed you in December 2020. It was explained to you that since your diagnosis you have remained on a medication (Bicalutimide) which is for managing your PSA (prostate specific antigen in blood which indicates possible prostate cancer or progression of cancer). Mr Haynes advised this medication is not intended to be given for prolonged periods, and normally is given in conjunction with radiotherapy. The other treatment option that would have been available to you at the time of diagnosis was a surveillance pathway which would have involved close monitoring of your PSA. Mr Haynes notes these options were not discussed with you when you were diagnosed. Following discussion of treatment going forward with Mr Haynes you decided to opt for the surveillance pathway and the medication was stopped. I note Mr Haynes requested regular monitoring of your PSA and your most recent result was noted to be entirely normal. Your next check PSA is scheduled for January 2022 and you will continue to be updated on the results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 61
Personal Information redacted by the USI

Dear Patient 61

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquires Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review (SCRR) of your care. We have included a leaflet to explain this process in further detail.

The external independent Consultant has determined that the treatment plan you were given in 2012 was potentially not appropriate. This treatment plan will be reviewed in the SCRR. Once this is complete we will write to you to inform you of the outcome.

I want to assure you that your current care is completely safe and appropriate. I note you were diagnosed initially with prostate cancer in 2012. Mr Haynes reviewed you in April 2021 and discussed the medication you were currently taking. He advised that alongside this medication you potentially should have been offered radiotherapy treatment. This would have potentially allowed you to stop taking the medication sooner. Mr Haynes notes you had a scan whilst taking this medication and were informed that this didn't show any abnormalities and therefore you believed your cancer was no longer present. Mr Haynes explained the options of having radiotherapy now or moving to a "surveillance" plan. I note you were not keen for radiotherapy and decided with Mr Haynes to discontinue the medication and commence regular PSA (prostate specific antigen blood test which indicates possible prostate cancer or progression of cancer) monitoring and ongoing reviews. I note your most recent PSA completed in October 2021 was reported as satisfactory and a further check is due in January 2022. You will continue to be updated on these results.

We hope your review with Mr Haynes has provided you some assurance but I do appreciate that up until you have received this letter this may have been a worrying time. The leaflet included with this letter outlines the support services available to you. Dedicated Trust Liaison Officers who are trained professional staff are available for any queries, concerns or questions you may have. This is a strictly confidential service for the purpose of this review process.

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Yours Sincerely

Shane Devlin

CHIEF EXECUTIVE



Quality Care - for you, with you

Chair
Eileen Mullan

Chief Executive
Shane Devlin

31 December 2021

Healthcare Ref: Personal Information redacted by the USI

Private & Confidential

Patient 38
Personal Information redacted by the USI

Dear Patient 38

RE: Urology Record Review

On the 31st August 2021 the Minister for Health announced in the Assembly that he was commissioning a Public Inquiry under the Inquiries Act 2005 into the circumstances surrounding Urology Services in the Southern Health and Social Care Trust (Southern Trust).

As the Chief Executive of the Southern Trust I instructed that a lookback exercise of all patients under the care of Mr Aidan O'Brien for the period January 2019 to June 2020, when Mr O'Brien retired be undertaken. All the patients who were under Mr O'Brien's care during this 18 month period have been shared with the Urology Services Inquiry (USI). I advise you of this as you may receive communication from the USI.

In order to provide the necessary assurance for this lookback exercise we commissioned Consultant Urologists who were external and independent to the Trust to undertake a review of your medical records. I can now advise following this review of your care, aspects have been identified that require a further review. This means an independent Consultant will complete a Structured Clinical Record Review