



Association of McKenzie Friends

voluntary public interest advocacy

www.mckenzie-friends.co.uk

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COMPLAINTS and RAISING CONCERNS

Response to the Inquiry of the Health Select Committee

1. Introduction as Context

This submission is written from the experience of McKenzie Friends (lay legal advisors) who have been assisting litigants in person *pro bono* on an *ad hoc* basis. Since Select Committees don't deal with individual cases, the following questions need to be asked:

- How many individuals need to be hurt / killed / damaged, before NHS culture and management change?
- Who ensures victims get satisfaction, if not compensation?
- Who compensates the families of victims who have taken their lives?

2. The NHS as a 'honey trap' for child snatchers

'Child snatching' is the term used by Christopher Booker in his weekly column in The Telegraph about the child 'care' and 'protection' system that often includes the NHS and its Mental Health units.

When the Government commissioned research into 'experts' who are being used by the 'care' system, Professore Jane L. Ireland of University of Central Lancashire published:

- [Evaluating Expert Witness Psychological Reports: Exploring Quality](#)¹ which resulted in
- [One in five family 'experts' not qualified](#)² – on *the Justice Gap*.

After the GMC found nothing wrong with a Swindon doctor's 'expertise', it must be expected that the same will be found equally 'correct' in Wales – no matter how many victims or even dead bodies they each are responsible for.

In fact, there are suicides taking place that nobody takes any notice of and we can't trust the coroners conclusions.

In particular, a Swindon doctor facilitated 'child snatching' for Social Services. Some of the many links online:

- [The doctor who took my baby away](#)³ – an 'expert' child-care psychiatrist – The Telegraph
- [Why is doctor in GMC probe STILL begin allowed to break up families?](#)⁴ – Daily Mail

¹ http://www.mfjc.co.uk/home/mfjccou1/public_ftp/resources/FINALVERSIONFEB2012.pdf

² <http://thejusticegap.com/2012/03/one-in-five-family-experts-not-qualified/>

³ <http://www.telegraph.co.uk/women/mother-tongue/9178021/The-doctor-who-took-my-baby-away.html>

A voluntary Initiative of Public Interest Advocates – Assisting Litigants in Person

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- [Leading psychiatrist accused of breaking up families cleared of failing vulnerable patients](#)⁵ – Daily Mail
- [“Leading Psychiatrist” – misleading and dishonest actions – faces a hearing into allegations of malpractice](#)⁶ – PsychSearch.net

In London, one NHS hospital colluded in criminalising innocent parents on behalf of a local authority.

In Wales, a prominent victim has been in and out of prison for 4 years after a false diagnosis was made by one doctor which nobody in the NHS was willing to contradict.

The Clinical Director of the responsible prison refused crutches and wheelchair after 35 days of hunger strike.

3. When Complaints become Legal Cases

The first serious case was a woman in Lincolnshire who owned not only profitable businesses, but also a great mansion. While she published her experiences as *The Forensics of Legal Fraud*, her partner is highly suspicious of the circumstances leading up to her avoidable and premature death.

Unfortunately, her case is NOT unique. Hence we are asking:

- Has anybody in the NHS ever recognised ‘*legal abuse syndrome*’ as a condition that is comparable to ‘*post-traumatic stress disorder*’?
- Who is recording avoidable deaths and suicides as a consequence of NHS neglect?

4. The NHS as a ‘cover up’ for sectioning Litigants in Person

The Committee will be surprised to read the petition [“to end a practice worse than the gas chambers’ – in Britain!”](#)⁷ It refers to the ‘medical disposal’ and abuse of psychiatry for the purposes of ‘sectioning’ and putting people into ‘high security mental health clinics’.

I am aware of one victim who was imprisoned and released with a ‘Community Treatment Order’, i.e. a monthly injection for two years that clearly numbed her down.

5. Recommendation

Given that we are only aware of a few individual cases, one includes an avoidable death among the elderly who are being neglected badly, our recommendation limits itself to a very general statement.

Professional self-regulation by the GMC is clearly not working for staff and patients of the NHS. It leads to protectionism and causes ‘*integrity gaps*’ between *rules* and *practice* that lead to ‘*justice gaps*’.

We therefore propose to set up independent ombudsman-type websites and tribunals where not only satisfaction and compensation, but also justice are addressed.

⁴ <http://www.dailymail.co.uk/news/article-2237637/Why-doctor-George-Hibbert-GMC-probe-STILL-allowed-break-families.html>

⁵ <http://www.dailymail.co.uk/news/article-2570737/Leading-psychiatrist-accused-breaking-families-cleared-failing-vulnerable-patient.html>

⁶ <http://www.psychsearch.net/leading-psychiatrist-george-hibbert-misleading-and-dishonest-actions-faces-a-hearing-into-allegations-of-malpractice/>

⁷ https://secure.avaaz.org/en/petition/To_end_a_practice_Worse_than_the_Gas_Chambers_in_Britain/?enZKldb