Strictly Private and Confidential

NHSScotland Workforce Policies Investigation Report

Operation stringent: theatre logbooks investigation under NHS Scotland workforce policies investigation process

Date Started:	18 September 2025
Date Completed:	27 October 2025
Date Report Submitted:	30 October 2025

Contents

1. Introduction

On 28 August 2025, the Head of Health Records contacted the Clinical Care Group Manager for Theatres, Anaesthesia and Critical Care regarding a request from Operation Stringent, which is the Police Scotland investigation into Mr Eljamel. This request was to seize theatre logbooks containing information regarding the surgical practice of Mr Eljamel dating from May 1995 to November 2014. Upon receipt of this request from Operation Stringent, it was discovered that all logbooks over eight (8) years' old pertaining to the theatre in which Mr Eljamel would typically operate, were removed from their location on 28 July 2025 and added to the confidential waste stream to be destroyed.

A "Do Not Destroy" notice was received from The Eljamel Inquiry in October 2024, requesting that no material of potential relevance to the Inquiry be destroyed, deleted or disposed of. The Do Not Destroy directive was communicated to individuals and across the organisation in November 2024. A high level SBAR commissioned by the Chief Officer, Acute Services, outlining the background and assessment of the circumstances of the destruction of the logbooks, was provided to the Eljamel Oversight Board on 12 September 2025. Following its consideration, it was agreed that the NHS Tayside executive members of the Oversight Board should consider next steps.

In the absence of Executive Medical Director who is Responsible Officer (on planned leave), the Board Secretary, Director of Communications and Director of People & Culture made a recommendation to the Chief Executive that a full investigation should be commissioned to establish more detailed facts of the incident than those included in the SBAR. This was primarily an investigation into people and their actions, and therefore it was agreed via the above executive group, that the NHS Scotland Workforce Policies Investigation Process was most appropriate, applying a "Just Culture" lens. The situation was investigated under the terms of the Once for Scotland Workforce Policy Investigation Process.

Those appointed to conduct the investigation were:

- Lynn Smith, Chief Officer Acute Services (Chair).
- Lesley Sharkey, Nurse Director Acute Services.
- Wendy Farquharson, Head of HR Business Relations.

2. Remit

The investigation was initiated to consider the following (see Appendix 1):

- Establish the detailed facts of what transpired that resulted in the decision to make arrangements for the destruction of the logbooks from the theatre in which Mr Eljamel would typically operate.
- Assess if there are any capability or conduct concerns on the part of the individuals involved, or any failure of responsibility on the part of senior staff, considering the "Do Not Destroy" notice and its implementation.
- Provide a comprehensive assessment of how information that would have been available through the provision of the logbooks can be provided from other documentation.
- Provide a detailed assessment of the preventability of this incident and detail all steps and mitigations which are required to ensure it does not happen in the future.
- Make any further necessary recommendations in response to learning from this incident.

3. Methodology

Relevant information and witness evidence was gathered to establish the facts and to support recommendations.

The investigation included interviews with the following people:

- Olivia Smallbone, Staff Nurse.
- Shauni Scott, Operating Department Practitioner.
- Sarah Kerr, Senior Charge Nurse.
- Michelle Kettles, Operational Theatre Manager.
- Angela Oglivy, Staff Nurse.
- Heather Anderson, Head of Health Records.
- Jacqueline McDermott, Charge Nurse.
- Jenny Clarke, Senior Nurse.
- Stuart Davidson, Assistant Health Records Manager.

Further documentation gathered during the investigation included:

- Memo to Investigating manager re Commissioning Document (Appendix 1).
- Email from Chief Officer Acute Services to Acute Leadership Team re Do Not Destroy Notice (Appendix 6).
- Log Book Info Held (Appendix 12).

4. Evidence

4.1 Witness interviews

Below is a summary of the main points from each interview:

1. Witness 1 - Olivia Smallbone, Staff Nurse (Appendix 2)

Olivia Smallbone was involved in the disposal process alongside Angela Ogilvy when cleaning the neurosurgery office. The Neurosurgery office is a shared space, not exclusive to the Charge Nurse, it is used by various staff for computer access and meetings.

Olivia informed:

- The office was cluttered with outdated documents, impacting workflow.
- Log books dated back to the 1960s and were stored in unlocked drawers.
- Olivia believed retaining such old documents could breach patient confidentiality.
- Consulted Sarah Casey, the new Charge Nurse, who advised contacting Medical Records.
- Medical Records staff (a female and a male supervisor) visited the office and advised:
  Retain documents up to 6 years old.
  Dispose of older documents using confidential waste bags.
- Olivia followed this advice and disposed of documents older than 6 years in confidential waste.
- No patient records other than the log books were noted to be stored in the office
- She regularly checked with senior staff (Sarah Kerr and Ortho Charge Nurses) during the clear-out.
- She did not consult Information Governance regarding retention policies.

In relation to the do not destroy Notice:

- Olivia was unaware of the Vital Signs Do Not Destroy Notice issued in November 2024.
- She cited lack of time and limited access to emails due to her clinical workload.
- Notices were not visibly posted in her area; communication was mostly verbal.
- She acknowledged that reading the notice might have prompted further discussion with senior staff.

- Olivia highlighted poor communication channels as a contributing factor.

2. Witness 2 - Shauni Scott, Operating Department Practitioner (Appendix 3)

Shauni was not directly involved in the office clear out. As far as she understands this was initiated by Staff Nurses Olivia Smallbone and Angela Ogilvy. This was to tidy the office ahead of a new Charge Nurse starting and contents disposed of included outdated materials and duplicated documents. She was informed (was not present or did not talk to) that medical records had been consulted, and they informed that all log books over 6 years old could be destroyed.

Shauni informed:

- Shauni helped place books in confidential waste bags.
- The log books include patient name, surgery date, surgeon, staff involved, procedure, and theatre time.
- No personal staff records or other patient-identifiable documents were disposed of by Shauni.
- Some log books less than 6 years old are still in the filing cabinet.
- Cabinet is unlocked and accessible. *(Please note this was immediate rectified by the panel).*

In relation to the do not destroy Notice:

- Shauni did not recall seeing the November 2024 notice.
- Vital Signs not routinely printed or displayed in the department.
- Email communication is the primary method, but staff often miss updates due to workload.

3. Witness 3 - Sarah Kerr, Senior Charge Nurse (Appendix 4)

Confirmed that the Neurosurgery office is a multi-use office. There is nothing in there that other staff would need access to in terms of forms etc; there are filing cabinets in the office and computers which staff might access as well as the brain lab computer used by the surgeons. She became aware on 10 September 2025 that the Theatre 8 log books had been disposed of in June/July as she was informed by a concerned staff member and a manager. The disposal occurred during a general tidy-up.

Sarah informed:

- Log books were used before the Opera system was introduced (10–11 years ago).
- They recorded patient names, CHI numbers, staff involved, and procedures.
- Sarah believed they should be retained for 8 years, though she couldn't recall formal guidance.
- The Theatre 8 log books were stored in an unlocked filing cabinet in the Neurosurgery office, which she acknowledged is not appropriate for patient data.
- Could not identify any other unsecured patient data in the department.
- Committed to checking if any log books remain and to consult the Senior Nurse if so.
- She stated that staff have access to emails and meetings for updates, but acknowledged that Vital Signs may not be effectively read or acted upon, suggesting a gap between policy and practice.
- urgent communications are shared via huddles or weekly meetings.

In relation to the do not destroy Notice:

- Sarah was aware of the notice but didn't connect it to the log books at the time.

- She assumed relevant documents would have already been gathered by the Inquiry team.

4. Michelle Kettles, Operational Theatre Manager (Appendix 5)

Michelle became aware of the disposal on 10 September, having been off on 9 September. Jenny Clark, Senior Nurse, discovered the disposal and spent time in the waste yard searching for the log books. Her understanding is that they were disposed of following a clear up of an office.

Michelle informed:

- Stated she was not aware that log books were still being stored or used in Theatres.
- She believed elective theatre log books had not been used for years and emergency theatre log books had stopped being used within the last year or two.
- She was uncertain why CEPOD retained log books suggesting it may have been a decision by the Clinical Director or Theatre Management Group.
- Michelle was not aware of other documentation containing patient data, except: Temporary paper records used during system outages (disposed of within 24 hours once uploaded to system).
  An A3 emergency case list posted in a staff-only area, discussed daily and disposed of once list complete.
- Did not take immediate action as she does not manage Theatre staff.
- She assumed the Clinical Care Group triumvirate was already aware, as Christina Navin (CCG Manager) had informed her.
- She briefed Sarah Kerr (Senior Charge Nurse) and instructed her not to dispose of anything further.
- She passed information to Jenny Clark (senior nurse) and did not hear more until the investigation meeting.

In relation to the do not destroy Notice:

- Was aware of the notice issued in November 2024.
- Did not forward the notice to Theatre staff as she does not line manage anyone in Theatres.
- Did share the most recent communication on 19 September 2025 with her direct reports (Appendix 6).

5. Witness 5 - Angela Oglivy, Staff Nurse (Appendix 7)

Angela was not involved in the clear up of the office. She became involved in the disposal of log books when she was asked to submit a request for a confidential waste collection. She submitted a request on 18 July for confidential waste bags to be uplifted. She was aware that the team were clearing out the office due to a new Charge Nurse starting. Angela confirmed she did not communicate with Medical Records herself and could not recall who did.

Angela informed:

- Log books dated back to 1965 and were stored in a filing cabinet.
- Patient information (e.g., requisition forms, printed email trails) was found and sorted into confidential waste.
- Confirmed there is still documentation in the office with patient information.
- Did not read the content of remaining emails and did not know if staff records were present.

- Stated the disposal was discussed with Charge Nurse and Senior Charge Nurse, but she could not recall who approved it.
- She initially did not know the process for confidential waste uplift and does not recall who she asked to clarify this.

In relation to the do not destroy Notice:

- Aware of the notice issued in November 2024 but did not link it to Theatre 8 information.
- Did not recall any team discussions about the notice.
- Believed the notice and follow-up email were ambiguous and that direct contact would have been more effective.

6. Witness 6 - Heather Anderson, Head of Health Records (Appendix 8)

Heather learned of the destruction through Operation Stringent and a FOISA request made by a patient. Initial discussions with Clinical Care Group Manager and Senior Nurse suggested the log books were retrievable. Later, it was discovered they had been destroyed, despite expectations they were retained by the service. It was discussed in the meeting that nursing teams recall contacting he medical records team for advice and subsequent visited the area, however when Heather was initially made aware of this no medical record staff could recall this interaction when she explored with the team. Heather is also a member of the Eljamel Co-ordination Group.

Heather informed:

- Medical Records follow national retention schedules and the medical records team should all be aware of this.
- Was not aware of any advice given by her team regarding the theatre log books and would not expect them to visit a clinical area routinely.
- Stated when initially discussed with medical records team no staff recall giving such advice or visiting the department to advise on destruction of the log books.
- NHS Tayside lacks a comprehensive inventory of all records held across services. A project manager would be needed to undertake this task, last completed in 2012.
- Due to the contradiction in understanding of advice provided Heather committed to speaking to the medical records supervisor to ascertain around visiting clinical area and provide contact details for the investigation team to discuss directly with them.

In relation to the do not destroy Notice:

- She is aware of the Do not destroy notice.
- Confirmed medical record staff are familiar with Do Not Destroy notices due to previous inquiries.
- Believes staff would reiterate these terms when giving advice.
- Unsure if the Eljamel Co-ordination Group gave specific instructions regarding the theatre log books.

7. Witness 7 - Jacqueline McDermott, Charge Nurse (Appendix 9)

Jacqueline is the substantive charge nurse for neurosurgery however at present (since April 2025) is undertaking the role of Emergency Theatre Co-Ordinator. The theatre log books have been in the office since she took up the role a number of years ago, having been passed over from the previous employee. She became aware of the office being cleared up and states this was without her knowledge or consent.

Jacqueline informed:

- Log books date from 1969 and were stored in an unlocked filing cabinet in the Neurosurgery office. She has never had a key to this – not available and had never raised this as a concern.
- Contain critical patient data, procedure details, and implant stickers. Used for (but not limited to): Tracking implants (especially for neuromodulation)
  Research and audit purposes.
- Previously objected to discontinuing use due to data loss concerns.
- Aware of the importance of retaining the log books due to inquiry.
- Was previously told to dispose of the books (unsure of by) but successfully argued for retention.
- No formal handover regarding documentation and contents of office when Jacqueline changed roles.
- Aware that the information is now being recorded and held within opera, however had concerns that this does not capture everything.
- Also, an implant book which is kept in theatres and records all implantable devices for records.

In relation to the do not destroy Notice:

- Aware of the notice and recent communication around it.

8. Witness 8 - Jenny Clarke, Senior Nurse (Appendix 10)

Jenny became aware of the disposal during a Teams meeting on 9 September 2025. She discovered the log books were missing and later learned they had been disposed of during an office clear-out in July 2025. Jenny searched through 700 bags of confidential waste within the store room but could not recover the books. Jenny confirmed the log books were stored in the Neurosurgery office and considered it appropriate as it was within the theatre area. The office is multi-use by different disciplines of staff. Jenny wasn't aware of the office being cleared out.

Jenny informed:

- Log books were not locked away, though the area was not publicly accessible.
- Log books were used for research and quick reference by surgeons.
- Transition to the Opera system began in 2012, with gradual phasing out of log books but not aware of a formal decision to stop using them.
- Opera captures patient journey data with mandatory and optional fields.
- Implant details are recorded in an implant book, nursing notes, and post-op notes.
- No formal SOP exists for handling implant stickers, Jenny acknowledged this as a gap and a possible learning point.
- A pilot to scan implant information for tracking and registering purposes into Opera was not rolled out.
- Log books are stored in a variety of rooms throughout NHS Tayside theatre suites
- Stated 8 years for retention of theatre log books.
- She plans to identify all registers in use and ensure proper storage.

In relation to the do not destroy Notice

- Aware the November 2024 Vital Signs.
- Assumed the inquiry team would collect relevant documents and store centrally.
- Communication of such notices relied on email and team meetings, with no specific forwarding of the notice.
- Each team has a weekly meeting.
- Jenny meets every fortnight with SCN team.

- Cannot recall discussing do not destroy notice in meetings specifically.

9. Witness 10 - Stuart Davidson, Assistant Health Records Manager (Appendix 11)

Stuart confirmed a member of the theatre nursing team contacted medical records for advice about retention periods for historical documentation. The query was passed to him from a member of medical records team. It was initially unclear as to what this pertained to therefore himself and another member of staff from medical records Stuart attended the theatre area and spoke with two nurses to understand the nature of the documents. This was in April / May 2025 however could not be certain of the date. The nurses described the log books as records of theatre activity not containing patient identifiable information. He did not personally inspect the log books; he relied on the verbal description provided by staff.

Stuart informed:

- Based on the description, Stuart provided standard retention guidance, assuming the documents were non-clinical and not patient-related.
- Stated that had he known the books contained patient identifiable information, his advice would have been different, especially given the known directive not to destroy Neurosurgery records.
- It is normal for the team to attend areas to assess documentation when uncertain, especially if no contact details are available like in this case.

In relation to the do not destroy Notice

- He is aware.

End of interview summaries.

4.3 Documentary Evidence

Below is a summary of the main points from the documentary evidence gathered:

- Commissiong Document (Appendix 6)
  Remit of investigation to be followed as in section 1-3 of this report.
- Log Book Information Held within Clinical Records (Appendix 12)
  List of data collected int he log book and where this is held within clinical records. Demonstrating no loss of data and accessible from other sources.
- Vital Signs (Appendix 13)
  Initial information sent via vital signs (all staff communication) sent via email.

5. Mitigation

Below is a summary of mitigation offered or identified during the investigation:

- Whilst it is recognised that the destruction of the log books was covered under the Do Not Destroy notice, the investigating team note that the clinical team did not directly attribute the theatre log books to information that would be required by the Public Inquiry or Operation Stringent.
- The information which is contained in the log books is also held and contained within differing clinical systems and there is no need for the theatre log books to now be used (Appendix 12) *(Please note assurance from the theatre management team has been received that no log books are now used in practice since October 2025)*

6. Findings in Fact

Based on the interviews conducted and the documentary evidence, the following findings in fact were reached:

Lack of Clarity Among Staff

- A number of staff interviewed were not clear about the process for managing or storing of theatre logbooks, especially around retention periods.
- Clinical team correctly sought information and advice from medical record staff prior to destruction of the log books.
- No single point of responsibility was identified for ensuring log books or relevant documents relating to the inquiry were secured or archived correctly.
- Whilst staff were aware of the Do Not Destroy communication there was a lack of clarity around what this would include and many interviewed did not make the link to this notification and the theatre log books

Physical Storage Conditions

- The office area where the log books are stored was described as *messy and in the process of being cleaned up*.
- Log books were found with no centralised or locked storage facility.
- No way to secure patient identifiable information as the filling cabinet was not locked and did not have a key in use.

Documentation and Accountability

- All witnesses spoke about the ‘normalisation’ of receiving vital signs which meant they did not always realise the significance of information held within them.
- Procedures for digital backup or scanning of log books are not in place.
- There was no evidence of malicious intent or deliberate mishandling, issues appear to stem from unclear processes.
- Lack of ownership and accountability around procedures and policies in relation to information governance from operational management.
- There’s a disconnect between expectations that staff read emails and the practical limitations of clinical roles.
- Lack of awareness of the do not destroy notice was due to systemic communication gaps, not negligence.
- Policy vs. Practice: Disposal was reportedly “as per policy,” yet the presence of sensitive information (e.g., patient ID and information related to Professor Eljamel) suggests a gap in oversight or understanding of what was being discarded.
- The current staff had limited organisational historical knowledge or memory, which affected their understanding of what information needed to be retained and archived.

7. Recommendations

On the basis of the above findings, the following recommendations are suggested:

Staff Capability and Conduct Management

- No action is taken with individual members of staff in relation to capability or conduct concerns

Information Governance and Compliance

- Deliver targeted training with support from medical records and information governance team on information governance to all staff to reinforce compliance with data protection and record management standards including but not limited to storage and retention periods.

Review of Clinical Record Storage

- Conduct a comprehensive review across all clinical areas within NHS Tayside to confirm that patient identification records are securely stored and managed.
- Ensure storage practices align with statutory and organisational retention schedules and that the rationale for retention is clearly documented.

Digital Tracking of Theatre Documentation

- Implement a digital tracking system for key procedural documentation within theatre settings to enhance traceability, accuracy, and governance.

Communication of Critical Information

- Review and strengthen mechanisms for communicating urgent or critical information to all staff, which is not Vital Signs.

Integration of Key Communications in Team Huddles

- Ensure that important organisational updates and safety communications are routinely included in team huddles for all relevant staff groups.

Establishment of a Central Information Repository

- Create a secure central repository for all documentation related to the public inquiry and operation stringent processes, whether this is physical storage space in one identified area or a combined list of documents available and where data is held securely. This should include access controls, governance arrangements, and version management to safeguard the integrity of all key records.

Lynn Smith	Lesley Sharkey	Wendy Farquharson
Chief Officer Acute Services	Nurse Director Acute Services	Head of HR Business Relations

30/10/2025

Appendices

Appendix 1 – Memo to Investigating manager re Commissioning Document

Memo **NHS Tayside**

To:	Lynn Smith	**Your Ref:**	
From:	Nicky Connor	**Our Ref:**	NC/jr
Date:	18 September 2025	**Enquiries to:**	Nicky Connor

OPERATION STRINGENT: THEATRE LOGBOOKS INVESTIGATION UNDER NHS SCOTLAND WORKFORCE POLICIES INVESTIGATION PROCESS

On 28 August 2025, the Head of Health Records contacted the Clinical Care Group Manager for Theatres, Anaesthesia and Critical Care regarding a request from Operation Stringent, which is the Police Scotland investigation into Mr Eljamel. This request was to seize theatre logbooks containing information regarding the surgical practice of Mr Eljamel dating from May 1995 to November 2014.

Upon receipt of this request from Operation Stringent, it was discovered that all logbooks over eight (8) years' old pertaining to the theatre in which Mr Eljamel would typically operate, were removed from their location on 28 July 2025 and added to the confidential waste stream to be destroyed.

A "Do Not Destroy" notice was received from The Eljamel Inquiry in October 2024, requesting that no material of potential relevance to the Inquiry be destroyed, deleted or disposed of. The Do Not Destroy directive was communicated to individuals and across the organisation in November 2024.

A high level SBAR commissioned by the Chief Officer, Acute Services, outlining the background and assessment of the circumstances of the destruction of the logbooks, was provided to the Eljamel Oversight Board on 12 September 2025. Following its consideration, it was agreed that the NHS Tayside executive members of the Oversight Board should consider next steps.

In the absence of Executive Medical Director Dr James Cotton who is Responsible Officer (currently on annual leave), Margaret Dunning (Board Secretary), Jane Duncan (Director of Communications) and Elaine Watson (Director of People & Culture) made a recommendation to the Chief Executive that a full investigation should be commissioned to establish more detailed facts of the incident than those included in the SBAR. This is primarily an investigation into people and their actions, and therefore it is agreed that the NHS Scotland Workforce Policies Investigation Process is most appropriate, applying a "Just Culture" lens.

In response, I, as Chief Executive, am instructing the following commission:

Lynn Smith, Chief Officer, Acute Services will undertake an investigation under the NHS Scotland Workforce Policies Investigation Process to:

- **Establish the detailed facts of what transpired that resulted in the decision to make arrangements for the destruction of the logbooks from the theatre in which Mr Eljamel would typically operate.**

- **Assess if there are any capability or conduct concerns on the part of the individuals involved, or any failure of responsibility on the part of senior staff, in light of the "Do Not Destroy" notice and its implementation.**
- **Provide a comprehensive assessment of how information that would have been available through the provision of the logbooks can be provided from other documentation.**
- **Provide a detailed assessment of the preventability of this incident and detail all steps and mitigations which are required to ensure it does not happen in the future.**
- **Make any further necessary recommendations in response to learning from this incident.**

Lynn Smith will be supported by Wendy Farquharson, Head of HR Business Relations, and Lesley Sharkey, Nurse Director Acute.

The investigation should be concluded as soon as possible, and no later than 30 September 2025.

Nicky Connor
Chief Executive

Cc
Elaine Watson, Director of People & Culture
James Cotton, Executive Medical Director
Margaret Dunning, Board Secretary

Appendix 2 – Investigation Note – O Smallbone

NHSScotland Workforce Policies Investigation Process

Investigation Question

7 October 2025

Interviewee:	Olivia Smallbone, Staff Nurse
Staff Support:	Hannah Martin, Staff Nurse
Investigating Managers:	Lynn Smith, Chief Officer, Acute Services Lesley Sharkey, Nurse Director, Acute Services
HR Representative:	Wendy Farquharson, Head of HR Business Relations

Lynn Smith welcomed Olivia Smallbone to the meeting, acknowledging that Hannah Martin, Staff Nurse has accompanied Olivia in a supportive capacity. Lynn advised the purpose of the meeting today is to discuss the incident where the Theatre 8 log books were disposed of.

Wendy Farquharson noted that this meeting is being held under the Once for Scotland Workforce Investigation Process and confirmed that she, Lynn and Lesley have been commissioned by the Chief Executive to undertake an investigation into this incident. Wendy assured Olivia that the investigation is applying a 'just culture' lens and is not about apportioning blame, they are looking to investigate what happened, why it happened and to determine whether there is any learning that can be taken from this. Wendy confirmed that a report will be produced following the investigation and outcomes and recommendations shared with those involved.

Wendy confirmed that a note of the discussion will be taken and a copy of this will be provided to Olivia after the meeting to check for accuracy.

Question 1: Talk us through events that led to the theatre log books being disposed of.

Response:

Olivia advised the theatre log books were kept in the Neurosurgery office. The previous Charge Nurse had moved on to work in another area for a few months and a new Charge Nurse was commencing. She advised that over the last few months, the team were finding it difficult to find things within the office which was full oft outdated papers and it began to impact their work; the team started to sort through some of the old things that they no longer needed and disposed of anything outdated.

Olivia advised the theatre log books were kept in unlocked drawers within the Neurosurgery office and on review of these, found some dating back to 1960's. She noted that it was her understanding that this type of documentation only needed to be kept for a certain number of years and it would be a breach of patient confidentiality to keep them beyond a certain date; she didn't know at that time how long these were to be kept for.

Olivia advised that in the first instance, she contacted the Charge Nurse covering the area, Sarah Casey, to make her aware of what they were doing; Sarah advised her to contact Medical Records for advice around disposing the theatre log books. Olivia confirmed that Sarah was the new Charge Nurse but had been joint Charge Nurse within Neurosurgery for a long time.

Olivia confirmed that she spoke to someone in Medical Records to query the retention period of the theatre log books; she initially spoke to a female but was passed onto a male supervisor. Olivia described her reluctance to the Medical Records team about going through the log books as they contain patient information that she does not need to see.

Olivia confirmed that a female and male supervisor from Medical Records came down to the Neurosurgery office to look through some of the theatre log books; they advised that anything up to 6 years should be retained and anything older can be disposed of. Olivia queried how best to do this and if confidential waste bags were appropriate, to which the Medical Records staff confirmed they were. Olivia could not recall the names of the Medical Records staff but described the female as having dark hair and the male as tall and slender. Olivia confirmed the Medical Records staff did not sign in, noting codes are required to access the theatre area, but the office area does not have any locked doors, requiring codes or sign in.

Question 2: Who routinely uses the Neurosurgery office, would this just be a space for the Charge Nurse?

Response:

Olivia advised that as there is a computer in the office, that various members of the Neuro scrub team and Ortho team use and as it's the only 'closed door area' they will sometimes use the office for meetings. Olivia advised that the office isn't for the Charge Nurse specifically; she advised she was corrected after calling the office 'Jack's Office' (previous Charge Nurse), the office is known as the Neurosurgery Office, indicating this is known as a shared space.

Olivia confirmed that she and Angela (Ogilvy), were the main two staff who were involved in clearing out the office and disposing of the log books. Olivia confirmed there are lots of forms the team require stored in the office; normally the Charge Nurse would be the one accessing the forms, but the team needed access to these due to the Charge Nurse standing in being spread over two areas and not having as much dedicated time. Olivia added there was recruitment ongoing for a new Charge Nurse, so they also wanted to help make things easier for them starting.

Question 3: Did you seek approval during the clear out of the office from senior members of the team?

Response:

Olivia confirmed that she was always double checking throughout the clear out if there was any doubt about whether or not something needed to be retained, they would ask Sarah Kerr, Senior Charge Nurse or the Ortho Charge Nurses. The documentation they were querying was things such as brochures and manuals for systems or equipment they used to use and the rest of papers was notes etc. Olivia recalled speaking with Sarah Casey in particular, because Sarah had told her to remove the bindings from the log books before putting into the confidential waste.

Olivia confirmed that there were no staff personal records stored in this office. Olivia confirmed that the advice sought from Medical Records was in relation to the log books alone as there was nothing else within the office containing patient identifiable information; the advice was to dispose of anything older than 6 years. Olivia confirmed that anything less than 6 years old was retained.

Olivia confirmed that she did not ask anyone from Information Governance for advice around the retention of the theatre log books.

Question 4: Were you aware of the Do Not Destroy Notice issues via Vital Signs in November 2024 and what this meant?
Response:
Olivia admitted that she was not aware of the notice and that she doesn't have a lot of opportunity to check her emails, unless someone has asked to her to look at something specific. Olivia advised that it was particularly difficult for her last year as she started in post in October 2024 and was scrubbing for every case, every day as per the usual training process and therefore did not have much time to do admin. Olivia noted that she was not aware that Vital Signs posters are printed and pinned up on a staff notice board in the area. There is a notice board near twins theatre, but it doesn't have any alerts etc posted. Olivia confirmed that the team communicate any important notices through word of mouth, there is no staff meeting where the team are told about what's happening in the organisation. Olivia noted there are staffing huddles daily at 8am with the Ortho team but these tend to focus on any pertinent issues for the team that day in terms of the theatre list, any equipment issues. **Q. If you had read the Vital Signs, would you have linked this to the theatre log books?** Olivia felt that she would probably have had a longer conversation with her Charge Nurse and Senior Charge Nurse colleagues around this if she had read this as it may have triggered the thought that Professor Eljamel may have been operating at the time and the log books may be relevant. Olivia did not think she would necessarily have gone through the log books to identify if these would have been under the Do Not Destroy notice as they still contain patient information that she shouldn't be looking at.
Question 5: Is there anything you wish to ask us?
Response:
Olivia asked for clarity about the next steps. Wendy confirmed that Olivia will receive a note from the meeting today and will be asked to check this for accuracy. Wendy advised that once the investigation is complete, they will write a report for the Chief Executive outlining the events, any learning and with any recommendations for improvements; the outcome will be fed back to those involved in the investigation. Olivia felt that this was very much down to an issue around communication and that there is an expectation that staff check their emails constantly, however noted that this is not realistic for a lot of staff dependent on their role. Wendy acknowledged that this is an issue for a number of staff and whilst there is a responsibility for staff to check their emails there is also a responsibility that management ensure important messages are communicated in an effective way to that cohort of staff. Wendy highlighted this is a good point of learning that they can consider in their report and welcomed any further suggestions. Lesley thanked Olivia for attending the meeting and reminded her that this is still an active investigation and therefore this should not be discussed outside of this meeting.

Meeting concluded.

DO NOT DETACH

* I confirm these notes of the investigation meeting held on 7 October 2025 are an accurate description of the discussion.

Or

*I have made amendments to the notes of the investigation meeting held on 7 October 2025 for consideration.

Signed CAT C Date:24-20-2025

*Please delete as appropriate.

Appendix 3 - Investigation Note – S Scott

NHSScotland Workforce Policies Investigation Process

Investigation Question

7 October 2025

Interviewee:	Shauni Scott, Operating Department Practitioner
Representative:	Raymond Marshall, Unison Representative
Investigating Manager:	Lynn Smith, Chief Officer, Acute Services Lesley Sharkey, Nurse Director, Acute Services
HR Representative:	Wendy Farquharson, Head of HR Business Relations

Lynn Smith welcomed Shauni Scott to the meeting, acknowledging that Raymond Marshall, Unison Representative has accompanied Shauni in a supportive capacity. Lynn advised the purpose of the meeting today is to discuss the incident where the Theatre 8 log books were disposed of.

Wendy Farquharson noted that this meeting is being held under the Once for Scotland Workforce Investigation Process and confirmed that she, Lynn and Lesley have been commissioned by the Chief Executive to undertake an investigation into this incident. Wendy assured Shauni that the investigation is applying a 'just culture' lens and is not about apportioning blame, they are looking to investigate what happened, why it happened and to determine whether there is any learning that can be taken from this. Wendy confirmed that a report will be produced following the investigation and outcomes and recommendations shared with those involved.

Wendy confirmed that a note of the discussion will be taken and a copy of this will be provided to Shauni and Raymond after the meeting to check for accuracy.

Question 1: Talk us through events that led to the theatre log books being disposed of.

Response:

Shauni advised that she wasn't involved in terms of the plan to clear out the office and most of her knowledge from the incident have been from what people have said about it. Shauni noted that the team were getting a new Charge Nurse in post and the team decided that they would help to tidy up the office and get rid of anything that was no longer required, but taking up space. Shauni advised there was a filing cabinet with three drawers full of the theatre log books and one of the team had contacted the Charge Nurse or Senior Charge Nurse to ask how long they needed to be retained, or if they should be passed on to someone. Shauni said the advice was to speak to Medical Records; she is aware that two members of the Medical Records team came down to the office to look at the log books as they were unsure what they meant by the term 'theatre log books'. Shauni noted that Medical Records didn't want the log books and the team were advised that anything older than 6 years from the last entry in the book could be destroyed.

Shauni advised that it was Olivia Smallbone, Staff Nurse and Angela Ogilvy, Staff Nurse who had initiated the plans to tidy the office; she happened to be around when this was happening and helped as there was a lot to do and the books were heavy.

Shauni advised in terms of her involvement, she helped put the log books into the blue confidential waste bags; one of the team contacted someone to collect the bags and these were removed from the Neurosurgery office. Shauni confirmed that the office is used by the Charge Nurse, but anyone has access to it.

Shauni advised that the type of thing they were clearing out was a lot of duplication, old catalogues for instruments, they also condensed a lot of folders; anything they felt was no longer needed or out of date was disposed of with the intention of tidying up the office space. Shauni confirmed that there were no staff personal records within the paperwork. Shauni confirmed she was not aware of any documentation, other than the log books, that contained any patient identifiable information. Shauni advised that she had helped with the clear out, but this was completed whilst she was on leave, noting it took more than one day to complete.
Question 2: **Are you aware of any approval that was sought for this from senior members of the team or advice sought around what needed to be kept?**
Response:
Shauni confirmed that she was not present when the Medical Records staff came to the office, she was only made aware of this afterwards following discussion with Sarah Kerr, Senior Charge Nurse and Jenny Clarke, Senior Nurse when they told her that there was to be an investigation. Shauni confirmed her colleagues had relayed that Medical Records had advised that anything earlier than 6 years from the last date of entry could be disposed of; noting it was easy to identify these log books as they had dates on the cover indicating the first and last dates of entry. Shauni advised the information in the log books covers the date of surgery, patient name, surgeon name, theatre staff involved, the procedure undertaken and the time in theatre. Shauni confirmed that in terms of guidance sought around disposing of information, she was aware that her colleagues had sought advice in advance of undertaking the clear out. Shauni advised that theatre log books were used before the electronic system Opera came into place, for the most part, these are no longer used but the CEPOD theatres still use a log book.
Question 3: Were you aware of the Do Not Destroy Notice issues via Vital Signs in November 2024 and what this meant?
Response:
Shauni said that she couldn't honestly say that she remembered seeing this Vital Signs in her emails; noting doesn't get a lot of opportunity to check her emails so when she does she tends to scroll through looking for anything relevant to her. Shauni confirmed that the team do not tend to print off the Vital Signs and these are not displayed on a notice board in the department. Shauni noted her line manager will sometimes draw their attention to anything they need to know, most of this kind of information would be circulated through email as the staff huddles are more of a check in to ensure they are safe to run the theatre list, discuss staffing, kit etc.
Question 5: Is there anything you wish to add or to ask us?
Response:
Shauni noted that at the time they certainly didn't think that they were doing something that they shouldn't be doing. Raymond queried whether there were log books retained that are not over 6 years old. Shauni confirmed that there are and thought they are still in the same unlocked filing cabinet. Raymond highlighted the Vital Signs sent out to the organisation does state these should be printed off for staff, so perhaps a point of learning here. Lesley thanked Shauni and Raymond for attending the meeting and reminded Shauni that this is still an active investigation and therefore this should not be discussed outside of this meeting.

Meeting concluded.

DO NOT DETACH

* I confirm these notes of the investigation meeting held on 7 October 2025 are an accurate description of the discussion.

Or

*I have made amendments to the notes of the investigation meeting held on 7 October 2025 for consideration.

Signed:.....Date:.....
*Please delete as appropriate.

Appendix 4 – Investigation Note – S Kerr

NHSScotland Workforce Policies Investigation Process

Investigation Question

7 October 2025

Interviewee:	Sarah Kerr, Senior Charge Nurse
Representative:	Kevin Bye, RCN Rep
Investigating Manager:	Lynn Smith, Chief Officer, Acute Services Lesley Sharkey, Nurse Director, Acute Services
HR Representative:	Wendy Farquharson, Head of HR Business Relations

Lynn Smith welcomed Sarah Kerr to the meeting, acknowledging that Kevin Bye, RCN Representative has accompanied Sarah in a supportive capacity. Lynn advised the purpose of the meeting today is to discuss the incident where the Theatre 8 log books were disposed of.

Wendy Farquharson noted that this meeting is being held under the Once for Scotland Workforce Investigation Process and confirmed that she, Lynn and Lesley have been commissioned by the Chief Executive to undertake an investigation into this incident. Wendy assured Sarah that the investigation is applying a 'just culture' lens and is not about apportioning blame, they are looking to investigate what happened, why it happened and to determine whether there is any learning that can be taken from this. Wendy confirmed that a report will be produced following the investigation and outcomes and recommendations shared with those involved.

Wendy confirmed that a note of the discussion will be taken and a copy of this will be provided to Sarah and Kevin after the meeting to check for accuracy.

Question 1: Can you tell us when you first became aware of the Theatre 8 log books being disposed of.

Response:

Sarah advised she first became aware on 10th September that the log books had been disposed of in June/July; she had been on a day off on 9th September when it was apparent to colleagues that they were missing and colleagues were looking in the waste yard for the books. Sarah noted that she was approached by a member of staff who was quite worried about it and she was also informed by a manager about what happened. Sarah confirmed that she was aware that some of the staff were doing a general tidy of the department in their down time, it wasn't just specifically that office.

Sarah confirmed that the Neurosurgery office is used by the Charge Nurse and surgeons and there is nothing in there that other staff would need access to in terms of forms etc; there are filing cabinets in the office and computers which staff might access as well as the brain lab computer used by the surgeons.

Question 2: **Can you describe what the log books are used for and how these should be stored?**

Response:

Sarah confirmed that log books are no longer used in theatres following the introduction of the Opera system maybe 10-11 years ago as it was a duplication of work; she recalled that the Senior Nurse had confirmed they would stop using these a few years ago. Sarah noted there was a log book in each theatre for years prior to Opera; log books stayed in the theatre area and logged the

patient's name, CHI, the staff involved and the operation they had. Sarah advised in terms of guidance around holding the logbooks, her understanding is that these should have been kept for 8 years but could not recall a specific communication around the retention of these.

Sarah confirmed the Theatre 8 log books were stored in a filing cabinet in the Neurosurgery office and did not think it was a locked cabinet. Sarah noted it would not be normal to have patient data in unlocked cabinets, although she was aware they were there through informal conversation with Jacqueline McDermott, Charge Nurse who had advised the surgeons had asked that these were kept for audit purposes; she had questioned why they would be storing them. Sarah noted on reflection she wished she had followed up on this more robustly.

Question 3: Were you aware of the Do Not Destroy Notice issues via Vital Signs in November 2024 and what this meant?

Response:

Sarah confirmed that she was aware that the notice had come out. Sarah noted that she could not answer for the team, but if the disposal of the log books had been discussed with her, the thought might have triggered in her head that these may be relevant and would have sought guidance herself around the disposal of the books.

Sarah noted that she would have thought that any relevant information to the Inquiry would have been gathered by those leading the investigation didn't think for one minute there would be such important documentation 'lying around'.

Q. Is there a way that important organisational communications such as Vital Signs are disseminated to staff who may not have much access to their emails.

Sarah advised that she doesn't print Vital Signs off; all staff have their own emails via multiple computers within the department they have access to and have time out to complete the Learnpros etc. Sarah noted urgent communications will be communicated through daily huddles or their weekly staff meeting at 8am on a Thursday; their staff meeting doesn't have an agenda, but there is a sheet that staff can write up any point they wish to discuss at the meeting. Sarah confirmed she cascades information to the team from the Senior Nurse, or Triumvirate as necessary.

Question 4: Can you think of any other documentation containing patient identifiable information in the department that may not be locked.

Response:

Sarah confirmed there wasn't anything that she could think of. Sarah noted to her knowledge there are currently no log books in use within the theatre areas; when she took up post in 2022, the team had stopped using these in Orthopaedics and to her knowledge they are not stored within the theatres.

Sarah acknowledged the advice given to the team around retaining log books less than 8 years old and advised that she would check today if there were any still stored in the Neurosurgery office. Sarah confirmed she would speak to her Senior Nurse about storing these if there are still log books in the department.

Question 5: Is there anything you wish to ask or add?

Response:

Sarah noted that it might have been helpful for additional communications to have come out to relevant areas on the back of the Vital Signs highlighted that there might be important information still present in departments; she thought that this would have motivated her to check.

Kevin noted from his understanding of the log books, the information contained is also within the patient record, so may not be as relevant to ensure these are retained.

Lynn appreciated this, however highlighted that these have been available and destroyed following notification not to destroy.

Kevin acknowledged the challenge some staff might have with accessing emails and opportunity to read through Vital Signs as well as they should and opportunities to communicate differently to areas regarding specific incidents.

Wendy agreed and highlighted opportunities to communicating important messages to staff in other ways such as through team meetings and utilisation of staff notice boards.

Lesley thanked Sarah and Kevin for attending the meeting and reminded Sarah that this is still an active investigation and therefore this should not be discussed outside of this meeting.

Meeting concluded.

_____

DO NOT DETACH

* I confirm these notes of the investigation meeting held on 7 October 2025 are an accurate description of the discussion.

Or

~~*I have made amendments to the notes of the investigation meeting held on 7 October 2025 for consideration.~~

Signed:.....Date:22/10/25.....
*Please delete as appropriate.

Appendix 5 – Investigation Note – M Kettles

NHS Scotland Workforce Policies Investigation Process

Investigation Question

7 October 2025

Interviewee:	Michelle Kettles, Operational Manager
Representative:	Raymond Marshall, Unison Representative
Investigating Manager:	Lynn Smith, Chief Officer, Acute Services Lesley Sharkey, Nurse Director, Acute Services
HR Representative:	Wendy Farquharson, Head of HR Business Relations

Lynn Smith welcomed Michelle Kettles to the meeting, acknowledging that Raymond Marshall, Unison Representative has accompanied Michelle in a supportive capacity. Lynn advised the purpose of the meeting today is to discuss the incident where the Theatre 8 log books were disposed of.

Wendy Farquharson noted that this meeting is being held under the Once for Scotland Workforce Investigation Process and confirmed that she, Lynn and Lesley have been commissioned by the Chief Executive to undertake an investigation into this incident. Wendy assured Michelle that the investigation is applying a 'just culture' lens and is not about apportioning blame, they are looking to investigate what happened, why it happened and to determine whether there is any learning that can be taken from this. Wendy confirmed that a report will be produced following the investigation and outcomes and recommendations shared with those involved.

Wendy confirmed that a note of the discussion will be taken and a copy of this will be provided to Michelle and Raymond after the meeting to check for accuracy.

Question 1: Can you describe the events that led up to the disposal of the Theatre 8 log books

Response:

Michelle advised she was made aware of the destruction of the log books on 10 h September; she had a day off on 9th September when this became apparent to Jenny Clark, Senior Nurse. Michelle noted in a conversation with Jenny on the 10th, Jenny had told her about her 'terrible day' the previous day with a lot of time spent in the waste yard looking for the Theatre 8 log books which had been disposed of as per policy, however these had included information related to Professor Eljamel.

Question 2: **Were you aware of log books being stored within Theatres?**

Response:

Michelle confirmed that she was not aware of this, noting theatre log books for all elective theatres have not been used for years but couldn't give a precise date when this stopped but there should be none in use within Tayside. Michelle noted the team did continue to use the emergency theatre log books and thought it has been within the last year or two that they have stopped using these as they do not hold anything extra in terms of information and this is all available within in patient notes, or on the theatre system Opera.

Michelle noted that did not know the reason why these were retained in CEPOD; this might have been a decision made by the Clinical Director at the time, or Theatre Management Group or because it is an emergency theatre and used as a backup.

Michelle added that when a surgeon books an emergency patient, they complete a paper form which is transferred to Opera and disposed of in confidential waste.

Michelle confirmed that she was not aware that Theatre 8 log books had been or continue to be retained. Michelle acknowledged that it would be worth carrying out a walk-through to identify anything within the department that contains patient information and ensure that this is stored correctly.

Question 3: Are you aware of any other documentation within the department that contains patient information?

Response:

Michelle stated she is not aware of anything else within theatres that contains patient data; the only thing might be that whenever the systems are down due to outage or upgrade, the BCP instructs the team to use a paper record which are then updated onto the system retrospectively within 24 hours and then disposed of thorough confidential waste.

Michelle noted the only thing she could think of that had patient information on it was the A3 paper emergency list that is pinned up outside of the theatre hub where the Emergency Theatre Co-ordinator is based. Michelle noted the list is discussed at 8.30am daily and disposed of the next morning – it is used in a similar way others would use a whiteboard to show the list of patients. Michelle noted that the area that this is kept is in a staff only area, there is no public access.

Question 4: Do you have any SOPs/Processes in place for supporting the GDPR guidelines within your areas?

Response:

Michelle confirmed there are SOPs in place, noting there is about to be a planned upgrade of the system, and the SOPs have been updated in advance of that. Michelle confirmed that the plan for the upgrade will be communicated to relevant staff and SOPs shared for awareness.

Question 5: Were you aware of the Do Not Destroy Notice issues via Vital Signs in November 2024 and what this meant?

Response:

Michelle confirmed that she was aware but was on annual leave when it was circulated. Michelle noted she doesn't line manage nursing staff and only has 2 direct reports in Theatres so didn't send this onto staff, however, did circulate the new notification to her direct reports when this came out a few weeks ago.

Q. Following your discussion with Jenny Clarke on 10th September about the incident, did you take any immediate action or have any thoughts about what should happen?

Michelle noted that she didn't as she does not manage nursing staff within Theatres; the Care Group triumvirate are very clear that anything nursing staff related is dealt with by the Senior Nurses and anything else is dealt with by the Theatre Managers.

Michelle confirmed that she didn't raise it to the triumvirate as Christina Navin, Care Group Manager had already told her about it so she knew the triumvirate were aware. Michelle noted that she didn't ask too many questions, noting in her view she did her job in terms of sharing the notification with her direct reports, Andrew Hardie, ODO Team Leader and David Bell, Theatre Systems Lead.

Michelle advised that she will support Jenny as required, noting Jenny was on a day off the following day, so she had a conversation with Sarah Kerr, Senior Charge Nurse in Jenny's place

as it wasn't something that could wait until both nurses were back on shift together. Michelle confirmed that she made Sarah aware of the situation and asked questions around any awareness she had around this and gave instructions around not disposing of anything and to pass on anything as appropriate. Michelle noted she passed the information onto Jenny who was dealing with the situation with Christina Navin. Michelle hadn't heard anything more about it until she received the letter for this meeting.

Meeting concluded.

_____

DO NOT DETACH

~~* I confirm these notes of the investigation meeting held on 7 October 2025 are an accurate description of the discussion.~~

Or

I have made amendments to the notes of the investigation meeting held on 7 October 2025 for consideration.

Signed: .....

Date:.27.10.2025.....

Appendix 6 - Email from Chief Officer Acute Services to Acute Leadership Team re Do Not Destroy Notice

Outlook

Eljamel Inquiry

From Alison Gibb <[redacted]>
Date Fri 19/09/2025 15:19
To Christina Beecroft [redacted]; Christopher Schofield <[redacted]>; Douglas Lowdon <[redacted]; Gillian Birrell [redacted]; Jason Hardy [redacted]; Jessica Henderson [redacted]; Joanne Cowburgh [redacted]; Matthew Perrott [redacted]; Monica Doyle [redacted]; Wendy Croll [redacted]; Zoey Pullar [redacted]
Cc Lesley Sharkey <[redacted]; Sanjay Pillai <[redacted]>

Dear All,

You will be aware that the Eljamel Public Enquiry has commenced and that a Vital Signs was issued to all staff last week for awareness including a reminder of the Do Not Destroy notice which was issued to NHS Tayside in November 2024.

For clarity, the Do Not Destroy notice means:

- **All records, communications, and documents** that may be of potential relevance to the Inquiry **must not be destroyed, deleted, or disposed of**.
- This includes: MS Word, Excel, PowerPoint, Adobe PDF, emails, text messages, and WhatsApp messages created in the course of NHS Tayside business related to Professor Eljamel.
- The usual retention periods in NHS Tayside's Retention Schedules for these records are now **paused until further notice**.

I would be grateful if you could, as a priority, ensure that awareness and understanding of the above is cascaded through your service level teams.

If there are any queries or support needed by any individual or team relating to this, please let me know.

Many thanks

Lynn

Lynn Smith
Chief Officer
Acute Services
NHS Tayside

Personal Assistant:
Alison Gibb
[redacted]

Appendix 7 – Investigation Note – A Oglivy

NHSScotland Workforce Policies Investigation Process

Investigation Question

8 October 2025

Interviewee:	Angela Oglivy, Staff Nurse
Representative:	Michael Cafferty, RCN Rep (Teams)
Investigating Manager:	Lynn Smith, Chief Officer, Acute Services Lesley Sharkey, Nurse Director, Acute Services
HR Representative:	Wendy Farquharson, Head of HR Business Relations

Lynn Smith welcomed Angela Ogilvy to the meeting, acknowledging that Michael Cafferty has accompanied Angela via Microsoft Teams in a supportive capacity. Lynn advised the purpose of the meeting today is to discuss the incident where the Theatre 6 log books were disposed of.

Wendy Farquharson noted that this meeting is being held under the Once for Scotland Workforce Investigation Process and confirmed that she, Lynn and Lesley have been commissioned by the Chief Executive to undertake an investigation into this incident. Wendy assured Angela that the investigation is applying a 'just culture' lens and is not about apportioning blame, they are looking to investigate what happened, why it happened and to determine whether there is any learning that can be taken from this. Wendy confirmed that a report will be produced following the investigation and outcomes and recommendations shared with those involved.

Wendy confirmed that a note of the discussion will be taken and a copy of this will be provided to Angela and Michael after the meeting to check for accuracy.

Question 1: Talk us through events that led to the theatre log books being disposed of.

Response:

Angela advised that she couldn't comment on the events of the day as she was not there when the registers were removed, however noted she did complete and submit a request form on 18th July for the confidential waste bags to be uplifted, noting she cc'd Jenny Clarke into that email for her information.

Angela noted the Charge Nurse at the time had taken a 6-month secondment post, there was a new Charge Nurse coming in and as a team they decided to have a bit of a clear out of things that no longer needed to be kept, noting they were trying to make the Neurosurgery office less personal as opposed to being a Charge Nurse office.

Angela advised there was patient information within the documentation they were clearing out; there were things such as old requisition forms for things been ordered, there was occasionally an email trail printed out and attached to receipts with patient details on it. Angela noted she got rid of requisition order forms and separated email with anyone's details on it into the confidential waste. Angela confirmed that this type of documentation was stored in folders on the shelves.

Angela confirmed the log books were stored in a filing cabinet, there were a lot of these dating back to 1965.

Angela advised someone was in communication with Medical Records for advice around

I didn't cc Jenny in, I forwarded the email to her after the fact.

between the first do not destroy notice and the alleged destruction of the log books.

Lynn advised that they are not in a position answer that, their role is to carry out an investigation around the disposal of the theatre 8 log books.

Lesley thanked Angela and Mike for attending the meeting and reminded Angela that this is still an active investigation and therefore this should not be discussed outside of this meeting.

Meeting concluded.

DO NOT DETACH

~~*I confirm these notes of the investigation meeting held on 8 October 2025 are an accurate description of the discussion.~~

~~Or~~

*I have made amendments to the notes of the investigation meeting held on 8 October 2025 for consideration.

Signed: [redacted] CAT C Date: 221025

*Please delete as appropriate

Appendix 8 – Investigation Note – H Anderson

NHSScotland Workforce Policies Investigation Process

Investigation Question

8 October 2025

Interviewee:	Heather Anderson, Head of Health Records
Representative:	N/A
Investigating Manager:	Lynn Smith, Chief Officer, Acute Services Lesley Sharkey, Nurse Director, Acute Services
HR Representative:	Wendy Farquharson, Head of HR Business Relations

Lynn Smith welcomed Heather Anderson to the meeting. Heather confirmed that she was content to proceed unaccompanied by a Staffside Representative. Lynn advised the purpose of the meeting today is to discuss the incident where the Theatre 8 log books were disposed of.

Wendy Farquharson noted that this meeting is being held under the Once for Scotland Workforce Investigation Process and confirmed that she, Lynn and Lesley have been commissioned by the Chief Executive to undertake an investigation into this incident. Wendy assured Heather that the investigation is applying a 'just culture' lens and is not about apportioning blame, they are looking to investigate what happened, why it happened and to determine whether there is any learning that can be taken from this. Wendy confirmed that a report will be produced following the investigation and outcomes and recommendations shared with those involved.

Wendy confirmed that a note of the discussion will be taken and a copy of this will be provided to Heather after the meeting to check for accuracy.

Question 1: How did you come to know about the destruction of the theatre log books.

Response:

Heather advised that she has been dealing with Police Scotland through Operation Stringent with regards to the records required from NHS Tayside. Heather noted part of the records requested were the theatre log books; she believed a patient had obtained a copy themselves via a FOISA request and had raised that with Police Scotland.

Heather advised she spoke with Lynda Petrie in the Information Governance Team to try to locate the theatre log books, noting she had been dealing with the same patient in relation to the FOISA; Lynda had retained two of the log books and a theatre register in case there was any further request, but the rest were with the service and they were to be kept there.

Heather noted she arranged a Teams call with Christina Navin, Clinical Care Group Manager and Jenny Clarke, Senior Nurse to discuss obtaining the log books. Heather advised this conversation went well; the team felt there would be no issue in locating the log books, they discussed how they would retain copies as Police Scotland required the originals and Heather confirmed her team had staff available to support this. Heather advised that when Jenny went to locate the log books, she couldn't find them and subsequently discovered the books had been destroyed.

Heather added that she had contacted Anne Couser, Associate Nurse Director, to check if she had the log books, noting she had previously been involved, however Anne confirmed that the log books were with the service.

Question 2: **Can you tell us what process is for the Medical Records Team when the receive a call querying retention periods for certain documentation.**

Response:

Heather advised that the Medical Records team have national retention schedules that they follow, however they do not tend to get a lot of calls about this from staff, so any call would be memorable for the team. Heather noted generally, the call or email will come to herself or one of the senior managers within the team.

Lynn advised that the nursing team have described following a call to the Medical Records team, two members of staff, a female and a male supervisor, came down to theatres to get a better understanding of the what the log books were; the advice given, was that as the log books contained patient data, these need to be retained for 8 years and anything before that point can be disposed of and that blue confidential waste bags were an appropriate method of doing this.

Heather confirmed she is not aware of any conversation taking place with Medical Records around theatre log books; she noted it is concerning to her if this has happened and no-one mentioned it as this is not something the team will come across on a day-to-day basis. Heather confirmed that acute patient records are to be retained 6 years after last contact; but noted that if someone came to her to ask how long they need to retain theatre log books, she would have to look at the retention schedule as it's not something that they would come across often – she does not recall that happening.

Heather noted that she was later made aware that there had been a phone call made to Medical Records; she advised Christina Navin had told her the team spoke to a female and were told over the phone there was an 5year retention period. Heather confirmed that she had spoken to the female supervisors in her team, but none of the staff remember taking the call; she noted that she was not aware that two members of the team visited the department or that one involved was a male supervisor and would not have expected the team to do this without making her aware as it's not normal practice.

Heather noted in terms of the team structure within Ninewells, she has a deputy, 5 team managers and then team leaders. She confirmed only one of the managers is male; Heather agreed to go back to her team to make some further enquiries and come back to Lynn directly.

Question 3: Can you confirm if all of the Medical Records staff were aware of the Do Not Destroy Notice issued in November 2024 and what this meant, would they reiterate the terms of this notice when giving advice?

Response:

Heather confirmed that the team would reiterate the terms of the Do Not Destroy notice when giving advice, particularly if discussing anything within the timeframe in question; she highlighted the team are used to these types of reminders due to the Covid Inquiry and the Blood Inquiry, Do Not Destroy Orders. Heather felt that the detail of the documentation in question would have come out due to the questions the Medical Records team ask before giving advice.

Question 4: Where are the records that were held back by Information Governance and is there a central place where all records in relation to the Inquiry are stored?

Response:

Heather confirmed that the records that Information Governance had held back are now with Police Scotland and copies held in her locked office. Heather noted that there is now a central repository for corporate records, but it is different for patient records which need to be readily available for clinical care. Heather confirmed there are copies of other records that have been given to the police so far, held within the secure Health Records libraries

Heather advised the only area they know about who hold their own relevant patient records is Neurophysiology, these are in locked cupboards, and they have plans to add these documents into the patient records. Heather confirmed that the documentation is safe where it is at this time;

the Neurophysiology team are well aware that these are not to be destroyed and records have been collected and copied for the Inquiry as and when required. Heather advised she needs to speak to the Digital team to ensure there is enough space to add everything to Clinical Portal; once they have confirmation the team will do this as quickly as possible.

Heather confirmed there is no central repository for patient records specifically in relation to Operation Stringent; they can track the patient records through the case note tracking system iFit, the Neurophysiology documentation is not on iFit as these are records that the service have kept, but now they are aware of them, they want to add this into patient records. Heather confirmed that as the theatre log books contain patient data, this would be classed as a patient record.

Heather advised there was some consideration given to what should happen to the relevant records by the Eljamel Co-ordination Group and the decision was taken that these should remain within the service that held them; she thought this was because they then knew where everything was and could access as required.

Q. Do you know if the Eljamel Co-ordination Group were aware of the theatre log books and if any consideration was given to holding these is a central repository or instruction given around retaining them locally.

Heather noted that she was not sure if the FOISA requesting the log books would have come up in the discussion and was not aware of any thought was given to these being centrally retained. Heather advised that Anne Couser knew that these should be retained but was unsure if any specific instruction had come through the Co-ordination Group with regards to retaining the log books.

Q. At this time, we know that some services continue to have information relating to Professor Eljamel, his patients and his work. Do we have a list of everything we have and do we know where everything is being retained?

Heather advised the Inquiry have asked for all records; this has never been asked of NHS Tayside before. Heather noted she has 62 different contacts across NHS Tayside to check if they hold any of their own records; this was when they discovered Neurophysiology as well as a list of other areas who hold their own records. Heather confirmed that Health Records want to do an inventory of all the patient records held by services across the organisation, where they are, who the contact person would be; however, this is a huge undertaking and need a Project Manager to be able to do that and the last time this was done was in 2012 and this will be well out of date now.

Q. How is the request for records by Operation Stringent being co-ordinated.

Heather confirmed that this has been completed now; the requests have been fulfilled, and a record has been kept of what has been requested as well as the patient information that has been shared with them. Heather confirmed that the log books were asked for separately and not in the original request; a separate request was also made for MDT records, but she is unaware if they would expect further separate requests.

Heather noted in terms of ensuring that this doesn't happen again, a Health Records inventory needs to be a part of this; noting there are opportunities to improve records management such as digitising and tagging relevant records to ensure they have an accurate library of records held.

Q. When systems are down and teams revert to paper processes, how long should paper documentation be stored once uploaded onto the digital system.

Heather confirmed that paper copies of documentation scanned into an electronic system should be retained for 3 months before being destroyed; NHS Tayside have done this for some time, but it is now in the NHS Scotland Records Management Policy. Heather noted there is a central area in Health Records who scan anything produced at outpatient clinics onto Clinical Portal.

Meeting concluded.

DO NOT DETACH

~~* I confirm these notes of the investigation meeting held on 8 October 2025 are an accurate description of the discussion.~~

Or

*I have made amendments to the notes of the investigation meeting held on 8 October 2025 for consideration.

Signed:.....Date:..22/10/25.....
*Please delete as appropriate.

Appendix 9 – Investigation Note – J McDermott

NHSScotland Workforce Policies Investigation Process

Investigation Question

9 October 2025

Interviewee:	Jacqueline McDermott, Charge Nurse
Representative:	Stuart Fraser, RCN Representative
Investigating Manager:	Lynn Smith, Chief Officer, Acute Services Lesley Sharkey, Nurse Director, Acute Services
HR Representative:	Wendy Farquharson, Head of HR Business Relations

Lynn Smith welcomed Jacqueline McDermott to the meeting, acknowledging that Stuart Fraser, RCN Representative has accompanied Jacqueline in a supportive capacity. Lynn advised the purpose of the meeting today is to discuss the incident where the Theatre 8 log books were disposed of.

Wendy Farquharson noted that this meeting is being held under the Once for Scotland Workforce Investigation Process and confirmed that she, Lynn and Lesley have been commissioned by the Chief Executive to undertake an investigation into this incident. Wendy assured Jacqueline that the investigation is applying a 'just culture' lens and is not about apportioning blame, they are looking to investigate what happened, why it happened and to determine whether there is any learning that can be taken from this. Wendy confirmed that a report will be produced following the investigation and outcomes and recommendations shared with those involved.

Wendy confirmed that a note of the discussion will be taken and a copy of this will be provided to Jacqueline and Stuart after the meeting to check for accuracy.

Question 1: Can you clarify your current role.

Response:

Jacqueline noted her substantive role is Charge Nurse for Neurosurgery and confirmed her current role is Emergency Theatre Co-ordinator; she did a 5-month secondment in this role a few years ago and therefore had been asked to move back to this role to support the team for 6 months whilst they have been experiencing staffing issues. Jacqueline confirmed she has been in the role Emergency Theatre Co-ordinator since April 2025. Jacqueline added that a secondment opportunity was created for the Charge Nurse vacancy to backfill her post.

Question 2: Can you tell us what theatre log books are used for and why they were held centrally in the Neurosurgery office.

Response:

Jacqueline confirmed she kept the theatre 8 log books in a filing cabinet; these started in 1969 to the present day and have always been there since she started in the team 10 years ago. Jacqueline confirmed the log books contain the patient details, the procedure, theatre team, surgeon who delivered the procedure, date and start and finish times.

Jacqueline added that also contained within the register would be product stickers for implants used for the patients. Jacqueline advised that before she started in post, not all the stickers were added to the patient records by the Consultant (retired) at that time. Jacqueline informed that there are implants that go in for neuromodulation, the batteries for these implants deplete over time and the registers were a helpful resource to identify what implant had been used and therefore informed what battery was required when ordering replacements. Jacqueline noted that more recently, the new consultants put the stickers into the patient records and there is also an implant book which is also kept in the theatre.

Jacqueline advised the Senior Charge Nurse for Main Suite Theatres told her that the team were not allowed to use the theatre registers anymore, because it's a duplication of what they have on Opera. (When the new Senior Charge Nurse for Orthopaedics and Neurosurgery started, Jacqueline was asked about getting rid of the theatre registers, also at the request of the Senior Nurse). Jacqueline noted she put up a bit of an objection around the change of process because she worried that information would be lost, also because CEPOD continue to use a theatre log to this day. Jacqueline advised that because the implant sticker cannot be recorded on Opera, the team will print a neurosurgery patient care plan which they will add the sticker to, they also add another sticker to the implant book in theatre with details of the implant and the patient.

Jacqueline noted that she is quite 'strict' in terms of checking that staff have added all necessary information to the records for each patient; there is only so much information you can put onto Opera and depending on who updates it, a record may be completed more fully than others. Jacqueline confirmed there isn't a SOP for entering information onto Opera; the theatre support worker, scrub nurse or anaesthetic nurse are the ones who will update Opera and the team will agree on the day who will update the record, for example it would usually be the one who is 'flooring'.

Stuart noted that these staff would come under different line management structures and asked how inconsistencies would be fed back to colleagues or line managers to ensure expectations are being met by all staff.

Jacqueline noted when she is in theatre, she checks that the forms are completed correctly at each stage from anaesthetics to recovery and will raise issues individually.

Jacqueline confirmed that in terms of staff undertaking a training plan around completing Opera there are Clinical Educators who support the NQPs and ODPs through an induction programme which includes all the paperwork and documentation they will have to complete however didn't know if Opera was covered in this.

Q. You confirmed the theatre log books were already in the Neurosurgery office when you came into post, were you told that the log books needed to be retained because people needed to access the information within them.

Jacqueline noted these were kept for the Eljamel Inquiry, for VNS or implant information; they will also be used as a data source by the medics for research and audit purposes. Jacqueline noted that she wasn't sure how often staff would use these to go as far back as the 1970s as part of their research.

Question 3: Are you aware of any other documentation that is kept within theatres that contains patient information.

Response:

Jacqueline confirmed there is a specimen book that will record patient data, the procedure, how many specimens taken. Jacqueline noted they work with Dundee University for research purposes so some of that information is shared with them.

Jacqueline confirmed that there is only one of these books in theatre 8, there isn't several of them; she didn't know how long the current book has been in use.

Question 4: Were the log books stored in a locked filing cabinet or office?

Response:

Jacqueline confirmed the filing cabinet was unlocked, noting she has never had a key for this; she confirmed that the filing cabinet was labelled to indicate what was stored in it – theatre registers in date order from 1969 onwards. Jacqueline advised the office cannot be locked as the brain lab computer is in there and access to this is required during emergencies 24/7

Question 5: You described that you knew to retain the log books for the Eljamel Inquiry, can you tell us how you knew that and what to do.

Response:

Jacqueline noted Anne Couser had asked her a couple of years ago if she could take two of the registers as part of the investigation; Anne took these and brought them back, so she knew to keep a hold of these in case these were needed in future.

Jacqueline noted that she had also taken a phone call a number of years ago from a member of staff, Suzanne Wright, who worked in theatre 8 when Professor Eljamel worked there; she had been asked to provide a statement and needed to access dates and times of procedures that they both worked on. Jacqueline confirmed she had linked the fact that there was information relating to Professor Eljamel and knew not to destroy it.

Jacqueline had an email about requesting access to the theatre registers, from Anne Couser, however this email will have been deleted due to limited email storage; she confirmed however that she does not recall a conversation specifically about retaining the log books.

Jacqueline advised maybe around 2.5 years ago she was asked to 'get rid' of the registers by the Senior Charge Nurse for Ortho and Neuro, however after she had described the information these held and that it related to Professor Eljamel, it was agreed that these should be retained for now. Jacqueline confirmed that other members of the team knew not to destroy these and the importance of them.

Jacqueline noted that the team have cleaned out her office without telling her or checking with her around what needed to be kept, and she still feels quite angry about this. Jacqueline confirmed that she was not off work when this happened, she was undertaking the Emergency Theatre Co-ordinator post on a temporary basis, and this was her office to come back to. Jacqueline added that two of the staff have told her that they have been told not to approach her or ask questions about Neurosurgery whilst she is undertaking the Emergency Theatre Co-ordinator role; she feels that because this instruction was in place, the staff did not feel able to check in with her in terms of clearing out the office. Jacqueline advised she first heard about the office being cleared out when she received the letter to attend this meeting.

Jacqueline confirmed the office was specifically for her use, it also has the brain lab computer; this is the Neurosurgery office for their use and is not a multi-purpose office. Jacqueline confirmed there is another office that the Senior Charge Nurse and Charge Nurse for robotics uses. Jacqueline advised there was no personal information in here and she didn't retain staffing information in there, that was locked away in the Senior Charge Nurse office. Jacqueline confirmed she retained folders and files pertaining to theatres only – such as her VNS folder which included guidance and instructions about the procedures, she added that she also created her own VNS register for tracking purposes.

Question 6: When you agreed to the secondment, did you do a handover prior to leaving your Charge Nurse role.
Response:
Jacqueline advised that she is not on an official secondment; the team needed help due to staffing issues, and she was asked if she could take on the Emergency Theatre Co-ordinator role for 6 months. Jacqueline confirmed there has been no discussion around her moving back to her substantive role when the 6 months is up, which should be happening about now, however the Charge Nurse backfilling her post has a 6-month secondment confirmed. Jacqueline thought that she just needed to carry on until that secondment comes to an end. Jacqueline noted that Jenny Clarke, Senior Nurse, had let her know that they are revising the job description for the Emergency Theatre Co-ordinator and could apply for that once it is advertised, or return to her substantive post. Lesley noted that she will contact Jenny to ensure that she follows up with Jacqueline to ensure she is aware of the arrangement and next steps. Jacqueline confirmed that she did not have a handover in relation to the log books and how important it was to retain these with the interim Charge Nurse when she moved to the Emergency Theatre Co-ordinator role. Jacqueline noted that Sarah Kerr, Senior Charge Nurse, had instructed her to include Sarah Casey, Charge Nurse into any emails, but she went off work sick and then onto maternity leave. Jacqueline noted that the team really struggled without the leadership and in particular, because they were not allowed to speak to her about anything to do with Neurosurgery. Jacqueline thought that this instruction had come from Sarah Kerr, and it was so that she wasn't disturbed in her new role, but she felt uncomfortable about it because she does not work like that; if she can help then she will do so, no matter what role she is in.
Question 7: Were you aware of the Do Not Destroy Notice issued via Vital Signs in November 2024 and what this meant?
Response:
Jacqueline confirmed that she has been the most recent Vital Signs that were circulated, noting the Senior Charge Nurse and Senior Nurse had circulated these to the teams. Stuart acknowledged the Vital Signs was issued in November but understood the investigation has been ongoing for some time; he queried whether there was anything issued earlier than this that Jacqueline was not aware of despite her understanding not to dispose of the information she had. Wendy confirmed that they will be looking this, highlighting there was something that was released about HR files specifically.
Question 8: Do you have anything to add or wish to ask us?
Response:
Jacqueline had nothing further to add or ask. Lesley thanked Jacqueline and Stuart for attending the meeting and reminded Jacqueline that this is still an active investigation and therefore this should not be discussed outside of this meeting.

Meeting concluded.

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DO NOT DETACH

*I have made amendments to the notes of the investigation meeting held on 9 October 2025 for consideration.

Jacqueline McDermott 23rd October 2025

Signed:.....Date:.....
*Please delete as appropriate.

Appendix 10 – Investigation Note – J Clarke

NHSScotland Workforce Policies Investigation Process

Investigation Question

9 October 2025

Interviewee:	Jenny Clarke, Senior Nurse
Representative:	Kevin Bye, RCN Representative
Investigating Manager:	Lynn Smith, Chief Officer, Acute Services Lesley Sharkey, Nurse Director, Acute Services
HR Representative:	Wendy Farquharson, Head of HR Business Relations

Lynn Smith welcomed Jenny Clarke to the meeting, acknowledging that Kevin Bye has accompanied Jenny via Microsoft Teams in a supportive capacity. Lynn advised the purpose of the meeting today is to discuss the incident where the Theatre 8 log books were disposed of.

Wendy Farquharson noted that this meeting is being held under the Once for Scotland Workforce Investigation Process and confirmed that she, Lynn and Lesley have been commissioned by the Chief Executive to undertake an investigation into this incident. Wendy assured Jenny that the investigation is applying a 'just culture' lens and is not about apportioning blame, they are looking to investigate what happened, why it happened and to determine whether there is any learning that can be taken from this. Wendy confirmed that a report will be produced following the investigation and outcomes and recommendations shared with those involved.

Wendy confirmed that a note of the discussion will be taken and a copy of this will be provided to Jenny and Kevin after the meeting to check for accuracy.

Question 1: Were you aware of Theatre 8 log books being stored in Neurosurgery office and would it be normal practice for these to have been stored here?

Response:

Jenny confirmed that she was aware that the log books were stored in the Neurosurgery office and felt that this was an appropriate place for them to be stored as it was kept within the theatre area. Jenny confirmed log books were used for research purposes; the surgeons would use these as a quick reference guide when they wanted to look at the cases they had done and when they assisted.

Jenny advised the Opera system came into place in 2012; at the time it wasn't used in its full capacity, but they've got better at this as the years have gone on and there is much more information captured on it now. Jenny noted there was a while where Opera and the theatre log books were both used, however as time passed the log books were no longer used. Jenny added that CEPOD is the last theatre to use the log books, as it is multi-speciality, but they have also moved to only using Opera within the last few months due to a piece of work undertaken last year.

Lynn highlighted to Jenny that the team have shared varying accounts during this investigation process. Jenny confirmed that she will check that it is indeed the case that are no longer being used. Jenny confirmed the TACC Clinical Care Group Triumvirate formally decided that the log books should no longer be used as everything is captured on Opera and things were evolving to a more digital aspect.

Jenny thought that the Covid pandemic had a lot to do with things moving forward in this way. Jenny noted in terms of GDPR these were to be kept for a period of 8 years. Jenny noted there

was a gradual transition but is aware that some areas held onto more log books than others, there are books stored in main suite. Jenny confirmed she will check that these are appropriately stored in accordance with GDPR, acknowledging these tend not to be locked away but are accessible to anyone in the area.

Question 2: **Can you talk us through the information that was input into log books is now captured on Opera and if is there a SOP or guide to ensure how the information is accurately captured.**

Response:

Jenny advised that Opera works by validating patients at each stage as they move through their theatre journey from the anaesthetic room to theatre and onto recovery; a patient cannot leave recovery until every stage is validated. Jenny confirmed there are mandatory and non-mandatory fields that the team will complete and boxes for open text where staff can enter the details of the implant.

Jenny confirmed there is an implant book held in theatres and Neurosurgery which staff will input patient details, detail of the procedure and implant along with the implant product stickers. Jenny noted that most implants come with 3 stickers; these go in the implant book, nursing notes and post-op notes.

Jenny noted there is not a formal SOP to describe what should happen in terms of the stickers. Jenny accepted that the lack of a SOP provides no assurance that we are complying with the regulations around implants, leaving opportunities for variation in practice; she noted that this is learning for her and appreciated that they will need to ensure this is in place. Jenny noted however that regardless of whether the stickers are saved in the log book, these are still in the nursing notes. Jenny believed there is a function on Opera that lets you scan the implants and upload into the system; she understood that there was a pilot of this, but it wasn't rolled out. Jenny added the Operational Theatre Manager is looking at an ordering system that can capture and track implants and link to Opera.

Jenny noted that whilst there is duplication of effort by having the stickers in 3 separate locations, having the implant book is helpful for staff for a quick guide to check what has been used previously and that what they have is compatible. Jenny noted there is an element of 'keeping themselves right' and removes any doubt; there is always the possibility of human error when entering a 12-digit product code into a free text box. Jenny appreciated that updated software could support this being an issue but is mindful about how they ensure things remain safe whilst streamlining things.

Question 3: Can you tell us how you became aware of the incident where the Neurosurgery office was cleared out and theatre 8 log books disposed of.

Response:

Jenny advised that she was asked to attend a Teams meeting on 9th September with Christina Navin, Clinical Care Group Manager and Heather Anderson, Head of Health Records following an ask to obtain the theatre log books. Jenny had confirmed what timeframe was being asked for, noting the books are in date order and not specific to any one surgeon. Jenny noted that when she went to collect the log books, they were no longer in the filing cabinet that they were being stored in. Jenny confirmed she fed this back to Christina and tried to track down the Senior Charge Nurse, however she was not available.

Jenny advised she spoke to a senior Band 5 nurse to enquire about the location of the log books and was informed that they had been disposed of; she noted that the nurse was quite upset and anxious as she had then realised that this was something that shouldn't have happened. Jenny noted she sought further understanding of the situation and it had transpired that the Neurosurgery office had been cleared out at some point in July, a request to the waste yard to have the confidential waste uplifted was made on 18th July and the waste yard was emptied on 24h July.

Jenny noted that there was such a short space of time between the request and the waste yard being emptied that she couldn't, in good conscious, not search through the confidential waste that was there in hope of finding the log books. Jenny advised she and a member of the waste team went through around 700 bags of confidential waste; she didn't say what it was they were looking for but described that they'd be looking for heavy bags and that they would be recognisable by shape. Jenny added that Angela Ogilvy also came down to help towards the end of her shift. Jenny noted that there were probably around 40 or so log books, noting we might use 7 per year; these were disposed of in around 4-5 confidential waste bags.

Jenny advised that when it became clear that she was not going to find the log books, she contacted Heather Anderson and Aline Ramsay, Lead Nurse (as Christina Navin was on a day off), to advise that she had been unable to locate them. Jenny advised she signposted Angela Ogilvy to wellbeing support, noting she was distraught. Jenny noted that she also contacted Michelle Kettles, Operational Theatre Manager and let her know the situation; she asked Michelle to inform Sarah Kerr, Senior Charge Nurse in her absence, noting their days off meant that they were not going to be on shift until later in the week. Jenny advised Michelle had spoken to Sarah the following day to make her aware of the situation and to check in on Angela; she added that Michelle also provided Christina with an update on her return to work.

Q. Do you know aware if the Charge Nurses had a conversation with Sarah Kerr around the log books and the disposal of them?

Jenny confirmed that Sarah was aware that the team were looking to do some form of cleaning of the office; there was quite a bit of paperwork in there, so it was a challenging undertaking. Jenny believed the team did this with good intentions to help support the new Charge Nurse to come in with a fresh start. Jenny did not believe that any conversations had taken place with the Charge Nurse who was previously in post to query what should or should not be kept.

Question 4: Was the Neurosurgery office for specific use by the Charge Nurse?

Response:

Jenny confirmed that it is the Charge Nurse office, but it is also used by the surgeons who use the computer between cases.

Q. Can you tell us your thoughts about how appropriate the storing of these log books were, acknowledging the fact that they contain patient identifiable information.

Jenny accepted that the team will need to look into the guidance around storing this type of information and consider how they can have better governance around it. Jenny noted that the log books were not locked away, but noted the office is not in a publicly accessible area; she highlighted that members of the public can see patient names and details on the wards, however only staff can access the theatre areas. Jenny confirmed that all staff records held in the Senior Charge Nurse office in locked cabinet.

Question 5: Are you aware of any instruction provided to the Neurosurgery team around retaining any information in relation to Professor Eljamel in advance of the Do Not Destroy Notice issued via Vital Signs in November 2024?

Response:

Jenny confirmed that she did read the Vital Signs, she wasn't aware of any specific or formal directive from management before that to remove and retain documentation. Jenny noted that she had thought that the investigating team would come to collect any relevant information. Jenny confirmed the Vital Signs was not forwarded onto staff, noting all staff have access to their emails; there are 4 computers in the department, the team have good compliance with their Learnpro which tells her that they are on top of things and have time to look at their emails.

Jenny confirmed that any urgent or important information is cascaded by the Care Group triumvirate; she sends on important emails to the Senior Charge Nurses within TACC for them to share with their own teams. Jenny added that she also has 1:1s with her direct reports as well as team meetings where they discuss a variety of pertinent issues. Jenny confirmed staff will

also be alerted to any important emails have come in that they need to be aware of and significant updates are also verbally communicated to staff through daily huddle meetings or weekly staff meetings.
Question 6: Is there anything else you want to ask or add?
Response:
Jenny appreciated that we are in a different world now in terms of data and information storage and they have to do some work to ensure that what they have is required and stored appropriately. Jenny confirmed that she will touch base with the teams to identify all the of registers that they keep and ensure these are appropriately stored. Jenny highlighted that clinicians can ask a lot from the staff and many who go the extra mile to try to support and accommodate requests, however acknowledged that there should be more of a boundary in place in terms of whose role it might be to undertake some of these asks.

Meeting concluded.

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DO NOT DETACH

* I confirm these notes of the investigation meeting held on 9 October 2025 are an accurate description of the discussion.

Signed: Date: 23/10/25

Appendix 11 – Investigation Note – S Davidson

NHSScotland Workforce Policies Investigation Process

Investigation Question

9 October 2025

Interviewee:	Stuart Davidson, Assistant Health Records Manager
Representative:	N/A
Investigating Manager:	Lynn Smith, Chief Officer, Acute Services Lesley Sharkey, Nurse Director, Acute Services
HR Representative:	Wendy Farquharson, Head of HR Business Relations

Lynn Smith welcomed Stuart Davidson to the meeting. Stuart confirmed that he was content to proceed unaccompanied by a Staffside Representative. Lynn advised the purpose of the meeting today is to discuss the incident where the Theatre 8 log books were disposed of.

Wendy Farquharson noted that this meeting is being held under the Once for Scotland Workforce Investigation Process and confirmed that she, Lynn and Lesley have been commissioned by the Chief Executive to undertake an investigation into this incident. Wendy assured Stuart that the investigation is applying a 'just culture' lens and is not about apportioning blame, they are looking to investigate what happened, why it happened and to determine whether there is any learning that can be taken from this. Wendy confirmed that a report will be produced following the investigation and outcomes and recommendations shared with those involved.

Wendy confirmed that a note of the discussion will be taken and a copy of this will be provided to Stuart after the meeting to check for accuracy.

Question 1: Can you tell us from your perspective what happened in relation to the incident where Theatre 8 log books were disposed of.

Response:

Stuart advised that a member of staff called the Medical Records main office enquiring about retention periods for historical documentation; they spoke to a team leader who then passed the query onto him. Stuart noted that as they were unsure what type of documentation in question, they attended the area to find out more and spoke with two female nurses. Stuart confirmed the log books were described as holding theatre records but when he asked, he was told they did not hold any information pertaining to patients.

Stuart confirmed that he did not look at the log books as these were in an office based in Theatres; the staff had described what the books were - that these were used to record what happened in the theatre but were not linked back to patients. Stuart confirmed he asked the usual questions that his team would ask when trying to assess the retention period of specific documentation; these questions include whether there is patient identifiable information in the documents. Stuart noted a lot of areas keep manual records or logs of things that does not necessarily contain patient information.

Stuart confirmed the advice around standard retention was given to the team in relation to the type of documentation described; highlighting that there are guidelines for retention periods for different cohorts of patients that they need to be mindful of.

Stuart noted that this is considered in their assessment of retention periods for all different kinds of information they receive enquiries about.

Stuart confirmed that if the team had advised that there was patient identifiable information held within the log books, his advice certainly would have been different as he would have made the link that this was related to Neurosurgery and that there was a notice not to destroy these records.

Stuart thought the discussion with the staff had taken place in around April or May this year but couldn't be certain of the date; the discussion last no more than 5 minutes. Stuart confirmed that it would be normal practice to attend an area to review documentation if the team are uncertain about what exactly it is; on this occasion, they didn't have a contact number for the staff who called and attended the department to get more information.

Meeting concluded.

DO NOT DETACH

* I confirm these notes of the investigation meeting held on 9 October 2025 are an accurate description of the discussion.

Signed: CAT C .....Date:...16/10/25.....

Appendix 12 – Log Book Info Held

Theatre Log Book Entry	Location in Patient Casenote
Patient Name, CHI number and Ward	Peri-operative Care Record
Surgeon, First Assistant	Consent Form & Intraoperative Summary Sheet
Anaesthetist, Assistants	Anaesthetic Record
Anaesthetic Nurse, Scrub Nurse, Floor Nurse	Anaesthetic Nursing Record
Operation	Consent Form & Intraoperative Summary Sheet
Time into anaesthetic room, Op start and Finsh, Recovery	Anaesthetic Patient Monitoring Sheet

Appendix 13 – Vital Signs November 2024

If you require this bulletin in an alternative format, please contact tay.interpreterbookings@nhs.scot

Read accessible bulletin

VITAL SIGNS NHS Tayside

Eljamel Public Inquiry - DO NOT DESTROY notice

NHS Tayside has received a DO NOT DESTROY notice from The Eljamel Inquiry in relation to any relevant records and information.

The Scottish Government announced in September 2023 that a Public Inquiry is being held into former neurosurgeon Professor Eljamel. Further information about the progress of the independent public inquiry can be found on the Scottish Government website.

NHS Tayside has now received a formal **DO NOT DESTROY** legal notice from The Eljamel Inquiry. This notice advises that all records/information held that may be of potential relevance to the Inquiry must not be destroyed, deleted or disposed of.

Any information relating to Mr Eljamel, his work, his patients or any systems operated by NHS Tayside which may have any bearing (direct or indirect) on the work of the Inquiry related to Professor Eljamel should be retained until

further notice. This is to ensure any records required can be submitted, when requested, to the Inquiry.

Please note that we are required to retain all information which still exists relating to systems, processes, guidance and SOPs in place up to 2013, even if those systems etc have been updated since then.

Staff must ensure that all communication, information and documents including, but not limited to, MS Word, MS Excel, MS Powerpoint, Adobe PDF, emails, and text and WhatsApp messages created in the course of the business of NHS Tayside related to Professor Eljamel are retained and not destroyed. This means that the retention periods in NHS Tayside's Retention Schedules for these particular records are now paused until further notice.

Please note it is an offence under Section 35 of the Inquiries Act 2005 to alter, destroy, or prevent relevant documents from being provided to the Inquiry.

Further information on the Inquiry and the appropriate retention of information/records relating to it will be shared in due course.

If you have any queries relating to the retention of records regarding The Eljamel Inquiry please contact the Patient Liaison Response Team and/or Information Governance on tay.patientliaisonresponse@nhs.scot or tay.informationgovernance@nhs.scot

Public Inquiry Update **Issue 1783** **8 November 2024**

This email is sent to all NHS Tayside staff by tay.communications@nhs.scot