

Friday 9th June 2023

**Cross-examination of Lucy Letby by Nick Johnson KC - Day 10
(Transcribed from audio/hard-coded subtitles)**

Q. I'm going to move on to events that happened after the events concerning the children, and I'm going to tell you the headlines of the topics I'm going to deal with. Alright?

I'm going to start with the texts that you sent and received, that were in the post-indictment sequence of events that's on the iPads. Then I'm going to go to the Gang of Four, and your allegation that there was a conspiracy between four named doctors. I'm then going to deal with your searches for parents on Facebook. Then to the circumstances in which you said you were isolated from your friends, and finally, your arrest. Alright? So that's the menu.

You said in evidence that you found that you would not be going back to the neonatal unit the day before you were due to go back to work. Do you remember saying that?

A. Yes.

Q. Did you receive some sort of communication telling you that there was an issue?

A. Yes.

Q. And from whom was that communication received?

A. Yvonne Griffiths, I think.

Q. Yvonne Griffiths?

A. I think it was, yes.

Q. Alright. I'm going to ask, with Mr Murphy's help, just to put up the sequence of events, showing the post-indictment texts. The 26th, which is tile 1, shows that Sunday, 26 June was a day off. That of course was the day after [Baby Q] had collapsed.

A. Yes.

Q. At this stage, you liked [Dr B], didn't you?

A. I liked all of the doctors at that point, yes.

Q. But if we go to tile 4, for example: "I like [Dr B]"

A. Yes.

Q. That's a reference to [Dr B]?

A. It is, yes.

Q. At tile 58, this was the evening of Monday the 27th, and this was a point at which you were worried about what was going on, isn't it?

A. Yes.

Q. What did you think the issue was?

A. I didn't know what the issue was. That's why I was asking if there was a problem. I had not been informed about what was happening.

Q. Yes, but what was your -- you must have been trying to work out what might have been the problem, so what was going through your head?

A. That potentially I'd done something wrong.

Q. In what sense?

A. That I'd made a mistake.

Q. Tile 62 may help you. Does that help any more in --

A. Yes, I was worried I was in trouble if I'd made a mistake, yes.

Q. At tile 65, the timing seems to have been playing on your mind, is that right?

A. Yes, the time of the call, yes.

Q. Yes. Why did that specifically worry you?

A. Because it was very late in the day to ring me to say, "Don't come in to work the night shift", and also it's out of hours for the management team as well.

Q. So you realised something unusual was going on, didn't you?

A. I was concerned that something was wrong, yes.

Q. Yes, but unusual because management don't usually work at the time of day you received the call?

A. No, not after 5 o'clock, no.

Q. And the very fact that this was an issue being raised out of hours, so to speak, made you think that it might be something serious?

A. Yes.

Q. This, of course, was all in the context of you having told us that Doctor Gibbs was making inquiries about the circumstances of [Baby Q]'s collapse, in the immediate aftermath?

A. Yes.

Q. You realised, didn't you, that there were serious concerns about you at this stage?

A. No.

Q. No?

A. No.

Q. Did you have a bit of a meltdown?

A. I was upset about it, yes. I didn't know what was happening.

Q. There's a difference between being upset about something, and having a meltdown, isn't there?

A. I think that depends on how somebody perceives that word. Yes, I was upset about it, yes, and worried.

Q. So "upset and worried" is as high as you'd put it?

A. I would class a meltdown as the same thing. I was very upset, yes.

Q. Very upset?

A. Well, I'm not...

Q. I'm genuinely interested in how you categorise this, so you help us.

A. I was upset, and I was concerned that something was wrong.

Q. [Dr A], Tile 74, said that: "Ravi [that's Dr Jayaram] and the medical director. . ." Who is the medical director?

A. Can I name him?

Q. Yes.

A. Ian Harvey.

Q. So is he the chief -- was he in charge of the whole hospital?

A. Of the doctors' side, yes. The medical director, yes.

Q. "[They] had met this morning and said they wouldn't accept [Baby N] back."

A. Yes.

Q. Another child with whom you had had contact?

A. Yes.

Q. Did that get you worried?

A. No.

Q. That didn't get you worried?

A. That the unit weren't accepting [Baby N] back? No.

Q. Let's look at 76, please. Were you having a meltdown?

A. Yes.

Q. And you were very worried, weren't you, that this had gone all the way to the top?

A. No, I was concerned about the next day. I didn't have any concerns about it being raised higher than that, no.

Q. Tile 85, please. Can you just read that out, please?

A. "Messes with your head a bit to be told that at this time. Would have sounded more reasonable if had done it earlier, which is why I wonder if it's come from higher up, as she usually finishes at 4."

Q. You were worried that this had gone all the way to the top, weren't you?

A. From this, yes.

Q. You are familiar with these messages, aren't you?

A. Yes.

Q. You knew they were on to you, didn't you?

A. No.

Q. Tile 88. This is [Dr A] to you saying: "There is no problem. I suspect my head is in about the same place. The management was appropriate and your...". So he is reassuring you there, isn't he, at tile 88?

A. Yes.

Q. Do you remember how you responded to that?

A. No.

Q. I will remind you. Tile 89. You were in a meltdown, weren't you?

A. Yes.

Q. Tile 92, please. You read it out, please. Sent 12 minutes later.

A. "Sorry, that was rude. Felt completely overwhelmed and panicked for a minute. We all worked tirelessly and did everything possible. I don't see how anyone can question that. [redacted] has always been very supportive. "

Q. What were you doing in those 12 minutes?

A. I can't answer that.

Q. This was a big moment in your life, wasn't it? Do you agree?

A. I can't answer that, what I was doing.

Q. Was it a big moment in your life?

A. I don't think it was a big moment in my whole life in respect of everything that's gone on, no.

Q. The fact is that you were worried that the authorities in the hospital might have sussed out what you had been up to?

A. No, that's not right.

Q. Tile 94, please. Can you read out that, please?

A. "I'm having a meltdown ++ but think that's what I need to do."

Q. What grade of meltdown were you having?

A. At this point, quite a dramatic one, yes.

Q. Not just upset?

A. Well, I can't define every emotion that I felt at that moment, no.

Q. What was dramatic about it?

A. What -- I've said it's dramatic? (Pause) I don't know where I've said that, sorry.

Q. You said it's about 20 seconds ago.

A. That it was a dramatic moment?

Q. I said: "Question: What grade of meltdown were you having?"
"Answer: At this point, quite a dramatic one. "

A. Yes.

Q. What was dramatic about it?

A. That it was all happening very last minute into the evening.

Q. So it's just the timing of a phone call was enough to send you into a ++ meltdown, was it?

A. Yes, because that's not normal.

Q. Well, babies collapsing isn't normal, is it?

A. No, it isn't, no.

Q. Babies dying isn't normal, is it?

A. No.

Q. Many people have remarked when these things were happening, you were very calm.

A. It's a professional role.

Q. So what was it that sent you into a ++ meltdown here, that you are very capable of dealing with dying babies very calmly?

A. Because this is personal. At work I put on a professional head and I can control my emotions at work. This is a home event in my personal life.

Q. Yes. You were worried they'd sussed you out, weren't you?

A. No.

Q. Now, this is 18.16, so just after a quarter past six, is that right?

A. Yes.

Q. What did you spend that evening doing?

A. I don't recall.

Q. Were you trying to work out how you were going to deal with the problems that you thought might be just around the corner?

A. I didn't know what problems were just around the corner.

Q. Oh, you did.

A. No, I didn't.

Q. Let's look at tile 107, please. This was made at 23.29.

A. Okay.

Q. About 5 hours after your ++ meltdown.

A. Yes, if that's the time, yes.

Q. You had your thinking cap on, didn't you?

A. Yes.

Q. Yes. What were you thinking?

A. There were things that I needed to document when I next went back to work, that I hadn't documented so far.

Q. Yes. What was the purpose of these documents, please?

A. They're the documents of the babies I'd been caring for, which I hadn't completed yet.

Q. Yes. We're going to go to one now. It's a Datix form for the baby JA. Alright? But just before we go to it, I want to move forward in the sequence to tile 134. So this is [Nurse E] telling you that she'd been chatting to [Dr A] and: "[Dr A] had told her about J's being changed, and I said it hadn't and he told me about the open port."

A. Yes.

Q. You will remember, having given evidence about this, and having told the jury that this was in relation to a clinical incident that you had witnessed --

A. Yes.

Q. -- and there was a baby who, on his intravenous access, there'd been an uncapped port?

A. Yes.

Q. At tile 137, you say: "Thank goodness I did a Datix." Is that right?

A. Yes.

Q. And at 140: "Thought it was a massive infection risk and risk of air embolism."

A. Yes.

Q. Let's go to the Datix form now, please. This is the Datix form for the child JA. There we see that you made this report at 20.55 on 30 June 2016.

A. No, I believe the date -- the opened date when I've started the form is 1 July.

Q. I see. Alright. So the incident is the 30th?

A. From reading that, I would say yes.

Q. So just to put that in context, this is an incident being recorded 4 days after the text that we were just looking at when I was suggesting you had your thinking cap on, relating to an incident that happened 3 days after that text.

A. Okay.

Q. So if we can go back to the form in general, please, Mr Murphy. A clinical incident was how you described it and: "Equipment problem: malfunction or unavailable." Is that right?

A. Yes.

Q. Is this your selection from the drop-down menu?

A. Yes.

Q. "No harm. Low potential harm." What you then record is that on the 30th, as you said, at 15:00 hours. So let's just put that into context, please: this is 5 hours or so before the end of the day shift that you were on?

A. If I was working that shift, yes.

Q. Well, you're reporting an incident that's happened on a shift, aren't you?

A. Yes.

Q. Yes. So 5 hours before the end of the shift, about 7 hours after the start of the shift?

A. Yes.

Q. Yes. So 7 hours after you first met this child, JA.

A. Yes, if I was looking after JA, yes.

Q. What you say is: "Upon administering IV medication via UVC, the port on one of the lumens was noted not to have a bung on the end, and was therefore open."

A. Yes.

Q. "Registrar Informed." Was that [Dr A]?

A. I couldn't say who it was.

Q. "Lumen not accessed, bung added and line labelled not to be used." If we go on to the next page, please. We see your name appears there as the person reporting it.

A. Yes.

Q. And the next page please, and the next, the next, and the next. No further information here, is there, as we scroll through?

A. Not from me, no.

Q. So we have a case the jury are considering, relating to allegations of pumping air into the circulation of several children, don't we?

A. Yes.

Q. On 27 June, after the final of these incidents, we have you in a meltdown ++?

A. Yes, if that was the date, yes.

Q. And a couple of days after that, we have you reporting an incident in which you are identifying the risk of an accidental air embolus, don't we?

A. Yes.

Q. Yes. You had your thinking cap on, didn't you?

A. No, that's what I found with this baby and I felt it needed to be documented.

Q. Had you missed it in the previous 7 hours of the shift before 15.00?

A. Yes, I don't believe the port needed to be accessed until 15:00.

Q. You remember that?

A. No, but it says there I've accessed it for medication, which would assume that I hadn't gone to that port prior to that.

Q. As part of your checks as a QIS qualified band 5 nurse, do you look at the children that you're dealing with?

A. Yes.

Q. Do you note whether the bungs are on the ports?

A. Yes, I should have checked, yes.

Q. Yes. You removed the port and then reported it as a clinical incident didn't you --

A. No, I didn't, no.

Q. -- to cover yourself -- there's a bit of an insurance policy going on here, isn't there --

A. No.

Q. -- so you can suggest that this was a hospital where things were so lax, that people even left the bungs off the intravenous access for these children?

A. No, that's what I found.

Q. And it covered you for a suggestion of accidental air embolus, didn't it?

A. No.

Q. Can we go to tile 232, please. You talking about children going off within hours of handover.

A. Within hours or on handover, yes.

Q. And that is a characteristic, isn't it, of many of these cases towards the end of the indictment?

A. Yes.

Q. Tile 234. "Or were acutely unwell when [you] took over." This is you getting your defence in with your mates, isn't it?

A. No, this is me stating what was happening at that time.

Q. Which children did you have in mind at this point?

A. I can't say.

Q. Well, we've spent the last few days going through them, can you really not remember?

A. Not every child on the unit, no, that I looked after, no.

Q. 239. Can you read that out, please?

A. "Hoping to get as much info together as possible. If they have nothing or minimal on me, they'll look silly not me."

Q. What did you mean by that?

A. So at that point I'd been removed from the unit, and I was wanting to get as much information together, to provide the Royal College of nursing with the information on what had been happening in the last few months.

Q. Did you think attack was the best form of defence?

A. Sorry?

Q. Did you think attack was the best form of defence?

A. I don't think this is attack. This is me responding to what's happening to me.

Q. 253. Tony was your rep, was he, did you say?

A. Yes.

Q. "Going to speak to Karen..." Is she one of the nurses at the hospital?

A. The director of nursing.

Q. "...and insist on the review being no later than first week of September. Wouldn't advise pushing to get back to the unit until it's taken place. I feel like I'm being shoved in a corner and forgotten about by the trust." Were you seeking to get sympathy from [Nurse E]?

A. Well, yes, it was a very difficult time. I had been completely isolated and yes, she was my best friend.

Q. Yes, completely isolated. How were you isolated? Just remind us.

A. Being removed from the job that I loved, and put into an area where I didn't know anyone, where I was having to pretend that I was there because I wanted to be.

Q. Mm. How was the isolating manifesting itself in other ways?

A. Can you re-word that, please?

Q. Of course. Were there any other features of the isolation?

A. I'm sorry, I don't understand.

Q. Well, you know where we're going, don't you?

A. No, I was not able to speak to anybody on the unit at that point.

Q. And who had told you that?

A. It was told to me at the meeting with Sian Williams, and also my reps advised it as well.

Q. So that's 8 August when you're not allowed to talk to anybody, you say. Did you abide by that direction?

A. No, I talked to some friends that had been allowed to be spoken to, yes.

Q. Give us the list again, please.

A. It was Minna, [Nurse E] and [Dr A].

Q. No others?

A. Not about any of the details, no.

Q. 258. This is another example of what you were saying about your isolation, isn't it?

A. Yes.

Q. This is what you told the jury back on 2 May, wasn't it, that you weren't allowed to speak to anyone?

A. Yes, about the reasons for being moved, yes.

Q. Oh no. What you said was you weren't allowed to speak to anyone apart from [Nurse E].

A. That is correct, yes.

Q. It wasn't limited to discussing the reasons for your removal, it was "Do not communicate with" wasn't it?

A. Yes, and also with the colleagues in my new work role, I was not to tell them why I was there.

Q. Well, they weren't your friends anyway, were they?

A. No.

Q. And you knew, didn't you, by this stage, that you were being blamed for the collapses and deaths of these children?

A. No.

Q. I want to move on to the Gang of Four and the conspiracy between these doctors, okay?

A. Okay.

Q. On 18 May, I asked you this question:

"Are you suggesting that there is some sort of agreement between any of the medical staff who have given evidence in this case, some sort of agreement to get you?

You replied: "In a consultant group, yes, I do believe that."

I said: "Who's in the conspiracy group then?"

And you replied: "Which individuals?"

I said: "Oh yes"

And you replied: "I believe Ravi Jayaram, Stephen Brearey, [Dr B] and John Gibbs."

I replied: "So the Gang of Four? I'll refer to them in that way, rather than repeating their names."

I then said: "And what is the conspiracy between the Gang of Four?"

And you replied: "They have apportioned blame on to me."

I then said: "And the motive for apportioning blame on to you is what, please?"

And you replied: "I believe to cover failings at the hospital."

Do you remember that exchange?

A. Yes.

Q. And you will remember that each time we've moved to a different case, I have asked you the same or substantially the same questions about what you alleged to have been the shortcomings.

A. Yes.

Q. What I'm going to do now is to go through what you have said in relation to the shortcomings, and see whether that matches up to a motive to make these serious allegations against you, alright?

A. Okay.

Q. So far as [Baby A]'s case was concerned, you raised staffing levels in the context of the delay in inserting a long line to give him dextrose. That was the shortcoming?

A. Yes.

Q. Nothing else. For [Baby B], you raised nothing.

A. No.

Q. [Baby C], you raised nothing.

For [Baby D], you said that the fact that her antibiotics were delayed may have had an impact on her. But as for anything else, you raised nothing.

For [Baby E], you said that it was the delay in giving him a blood transfusion, but otherwise you raised nothing.

For [Baby F], you raised nothing.

For [Baby G], initially you suggested that your friend [Nurse E] may have over fed [Baby G], but then you retracted that and otherwise raised nothing.

For [Baby H], you said the location and how the drains -- whether the drains were securely put in may have had an influence, but otherwise you raised nothing.

For [Baby I]. Event 1, nothing. Event 2, you suggested that Ashleigh Hudson should have had her on a monitor, because she hadn't been off antibiotics for more than 48 hours. Event 3, you raised nothing. Event 4, you said that potentially Dr Chang being called away may have had an influence.

For [Baby J], you raised nothing.

For [Baby M], you raised nothing.

For [Baby N], you raised nothing, other than to say it was busy and there were issues with intubation.

For [Baby O], you raised nothing, save for the way that concerns raised by Sophie Ellis were dealt with, and you confirmed when we went through the charts that there was nothing untoward on the charts.

[Baby P], you raised nothing, other than to say potentially an issue with a chest drain.

[Baby Q], you raised nothing.

What are you suggesting was the motive, for the Gang of Four to make false allegations against you?

A. At this time I did not know who -- what babies they were discussing, what the allegations were. I felt at the time anything that could have gone wrong, they were potentially putting on me. I didn't have exact details at that point of which babies and why.

Q. No, no, we're talking about the trial. You were telling the jury that these doctors' evidence has been influenced by a conspiracy.

A. Yes, that's what I believe, yes.

Q. So given that we now know the details of what you are suggesting were the shortcomings, how do those shortcomings account for their conspiracy?

A. But I'm not saying a specific issue, I'm saying in general I don't think a lot of the babies were cared for on the unit properly.

Q. So does it come to this: because in your view care at the Countess wasn't very good, they have made these allegations against you?

A. Yes, I believe there are shortcomings from the medical team, and that has been put on to me, yes.

Q. And the best you can come up with for the shortcomings, is what you have detailed and what I have just summarised?

A. No, because I'm not a medical professional to know exactly what should and shouldn't have happened with those babies.

Q. Well, so, what, you're saying it's above your pay grade to determine, in effect, what the shortcomings are? Is that what you're saying?

A. Of a medical professional, yes.

Q. Well, I'm going to ask you about something then in your defence statement, if that's the position. Can we go to paragraph 11 of the defence statement, please? Just to put this into context, so far as staffing levels are concerned and these children, the two you've actually raised are Doctor Harkness being on his own, in effect, with [Baby A] and having to deal with all the children, and Doctor Chang, on the occasion that [Baby I] died, when she was called away. Is that right?

A. Yes.

Q. Your defence statement, though, says this -- and this is before you have any medical opinion to support your case, isn't it? 11 February 2022.

A. What do you mean by medical opinion?

Q. You're not relying on any expert report - to make the suggestions that you're making in your defence statement on 11 February 2022?

A. No.

Q. No. You see, I've just asked you about what you're saying are the failings and you said, well, it's really above my pay grade to say that.

A. No, to say specifically from a medical capacity.

Q. Yes, exactly. But what we can see you say in paragraph 11, is the following: "I don't believe that the staffing levels at the Countess of Chester were at the level they should have been over the relevant period"

A. Yes.

Q. We've dealt with all these cases individually, haven't we?

A. Yes.

Q. And you, I suggest, have failed to identify specifically, in specific cases, where there is a deficiency in staffing levels.

A. Okay.

Q. Well, do you agree with that?

A. No, I think it has been raised at times where the nursing staff acuity wasn't quite right. I have not talked about medical staff here.

Q. No, but in each of these babies' cases I have asked you: has the nursing staff or the medical staff levels contributed to the collapse or death of this child?

A. Yes. That doesn't mean I'm not -- the overall care that they received, I was referring to the actual collapse, that I think some of the babies didn't have adequate care over a period of time.

Q. But, you see, the point in this case, is whether the collapses and deaths of these children is attributable to you sabotaging them, or to some naturally occurring phenomenon, which is exacerbated by a deficiency in the level of care, isn't it?

A. Yes.

Q. So you are raising these issues as a general complaint in paragraph 11, but you cannot give specifics, can you?

A. No.

Q. No. Paragraph 13: "The defence question the quality of care, irrespective of the allegations made against me. The defence raise the possibility that sub-optimal care has caused or contributed to the deteriorations and deaths in this case. This concern is raised with regard to each and every count on this indictment. It is beyond my ability to analyse and enlarge upon this topic comprehensively, or to deal with all possible questions of negligence, but I include this in the defence statement to identify the issue."

So you are raising the point, aren't you?

A. Yes.

Q. And you have been given by me an opportunity to expand on it, haven't you?

A. Yes.

Q. Is there anything else you want to say about it?

A. No.

Q. I'll move on to the parents, please. On 25 June 2015, 21:50, you searched for [Mother of Babies A and B]. One minute later, at 21:51, you searched for [Mother of Baby D] and for [Father of Baby D], the parents of the baby who you don't remember. What was the connection in your mind between those three people?

A. That they're babies that have died or been seriously unwell.

Q. On 5 October 2015, a Monday, at 01:16 you searched for [Mother of Baby I]. A minute later, for [Father of Babies E and F]. A minute after that, [Mother of Baby H]. What did they have in common?

A. Again, they're babies that had significant things happen to them, and were on my mind.

Q. All at the same time?

A. Yes, as well as possibly other families as well, yes.

Q. You weren't searching for them though, were you?

A. I don't know. I haven't got the information in front of me.

Q. Why didn't you give that answer to the police?

A. Which answer?

Q. That these were babies who had died or been seriously unwell, and they were on my mind.

A. Because I couldn't recall why I'd looked at some of them.

Q. Is that a true answer?

A. Yes.

Q. You were checking up on your victims, weren't you?

A. No. I look at a variety of parents and people.

Q. On 5 October, [Baby I] was still a patient at the Countess of Chester. So why is [Baby I]'s mother in the same group as [Father of Babies E and F] and [Mother of Baby H]?

A. I can't say that they're in a group, but they're on my mind at that time.

Q. They are in a group, aren't they, because they're searched for at 1.16, 1.17, and 1.18?

A. Yes, and there's nothing else around that time either. But yes, they were on my mind.

Q. I'm not interested in anybody but the children in this case, alright?

You are a killer who was looking at your victims, aren't you?

A. No.

Q. On 5 November, a Thursday, 23:40, searching for [Mother of Babies E and F], 23:41 [Mother of Baby G], 23:44, [Mother of Baby I]. How do you spell [Mother of Baby G]'s name?

A. I'm not sure right now.

Q. Come on, you've got a very good memory. How do you spell it? It's an unusual name, isn't it?

A. Yes.

Q. Isn't it?

A. Yes.

Q. How do you spell it?

A. I think it's [redacted].

Q. No. You were reading it off a handover sheet, weren't you?

A. No.

Q. Seven handover sheets there with the name?

A. Yes.

Q. That's your memory refreshing document or documents, isn't it?

A. No.

Q. What did [Mother of Babies E and F], [Mother of Baby G] and [Mother of Baby I] have in common?

A. They're babies that were on my mind.

Q. Why were they all on your mind at the same time?

A. I can't answer that. Sometimes a lot of babies and families are on my mind.

Q. Because you had either killed them or tried to kill them, hadn't you?

A. No.

Q. [Mother of Baby G] and [Mother of Babies E and F] were on your mind again at 21:34 and 21:37 on 14 November. Any particular reason there?

A. No.

Q. 17 December, 22:46, [Mother of Baby J], 22:48 [Father of Baby J], 23:27 [Mother of Babies E and F]. What's the connection?

A. They're on my mind at that time.

Q. On 25 December, Christmas Day, you searched for [Mother of Babies E and F]. Any particular reason that [Mother of Babies E and F] was on your mind, yet again?

A. No, just -- I often thought of [Mother of Babies E and F].

Q. She was the person that caught you in the act, wasn't she?

A. No.

Q. A good reason to remember her, isn't it?

A. No, we had a good relationship at the time.

Q. On 23 June 2017, on the anniversary of their birth, you searched for [Babies O, P and R]?

A. Yes.

Q. Why did you write the note to all three of the lads?

A. I can't recall. They're triplets, so...

Q. Yes, but two of them were dead, [Baby O] and [Baby P]. The third, [Baby R], was still alive.

A. Okay. I don't recall how I've directed the note to them.

(A short break)

Q. On 2 May this year, you were asked by your counsel surrounding your suspension from the neonatal unit, do you remember?

A. Yes.

Q. And you told the jury that you just changed as a person, your mental health deteriorated and you felt very isolated, and -- these are your words:

"I felt very isolated from my friends and family on the unit."

A. Yes.

Q. You went on to say:

"We were a very supportive unit. Regardless of whether we were personal friends, we were a very supportive nursing team."

Do you remember that?

A. Yes.

Q. You don't want to change that, do you?

A. No.

Q. "At the time the hospital advised me not to communicate with anybody on the unit, and to sort of go with the pretence that it was a voluntary secondment. And it was identified at the time that there were two or three friends that I would be able to speak to, but otherwise I was not to have contact."

"Not to have contact with anyone on the unit". That's what you said, isn't it?

A. Yes.

Q. Was it true?

A. Yes.

Q. Did you abide by that direction?

A. Yes.

Q. So you didn't have contact with anyone but the people who you were told you could have contact with?

A. At that very beginning part, yes. It did change as time went on.

Q. Ah. Well, you didn't tell us about that. You were given a document this morning, weren't you?

A. Yes.

Q. What's in the document?

A. My social life.

Q. Your social life. Where did the document come from?

A. You've made it.

Q. Yes, it's come from the prosecution, hasn't it?

A. Yes.

Q. And it was given to you this morning before we started?

A. Yes.

Q. And you have read it, haven't you?

A. Yes.

Q. And you know that it disproves everything you said about your contact with your friends, doesn't it?

A. I disagree, no.

Q. You disagree?

A. Mm.

Q. So are you saying there's nothing in that document showing you in contact with people other than [Nurse E], [Dr A] and Minna Lappalainen?

A. No.

Q. You're not saying that? That was what you were telling the jury was the position on 2 May, isn't it?

A. Yes.

Q. Yes. Every day I have asked you the same question, haven't I --

A. Yes.

Q. -- whether there's anything that you have said which you would like to change?

A. Yes.

Q. And you were telling the jury on 2 May that, from your suspension through to your arrest, you were not allowed to have contact with anyone from the unit other than [Nurse E], [Dr A] and Minna Lappalainen.

A. Yes.

Q. Yes. Why did you tell that lie?

A. I was mistaken. So as time went on -- it was in the table document in the post-indictment, that I was allowed to start communicating with the unit, but I was not to tell them any of the details of my secondment.

Q. You were exaggerating, weren't you?

A. No.

Q. You were telling the jury a sob story, weren't you --

A. No.

Q. -- that you had been cut off from your family, as you defined them?

A. Yes.

Q. Yes. Were you looking for sympathy?

A. Yes, it was a very difficult time, yes.

Q. Mm. You thought you'd get sympathy by telling a lie, didn't you?

A. No.

Q. Was it just a mistake?

A. Yes.

Q. If we go through this 26-page document, we will find times and more times and more times, of you out drinking with other people from the unit --

A. Yes.

Q. -- won't we? Going on days out with other people from the unit? Days out?

A. I don't know. I can't...

Q. Oh, come on. You've read it, haven't you? Where did you go with [Dr A]?

A. London.

Q. To London. How many times did you go to London with [Dr A]?

A. Once.

Q. Are you sure about that?

A. Yes.

Q. [Dr A], who was not your boyfriend?

A. That's right.

Q. 8 June 2017. Is that right?

A. What, sorry?

Q. You and [Dr A]'s away-day in London.

A. I don't remember the exact date.

Q. Have a look on page 18 of 26. We'll put it on the screen as well.

A. Yes.

Q. Actually, can we just go back to the previous page, please, scroll down please. If we stop there, we can see all sorts of stuff here, can't we, from April, May, the beginning of June? Liz and Minna, phoned [Dr A], "[Dr A] Hertford". What's that on 6 May?

A. I think it's where I met [Dr A], in Hertford.

Q. Where did you meet him on 7 May?

A. Cheshire Oaks.

Q. CO, Cheshire Oaks. Where did you meet him on 26 May?

A. Starbucks.

Q. 2 June?

A. Cheshire Oaks.

Q. Yes. And 8 June was your away-day, wasn't it?

A. Yes.

Q. Did you stay overnight?

A. No.

Q. 16.14: "I'm near the park next to where you are. Let me know when you're finishing up and I'll see you outside."

A. Yes.

Q. And his response?

A. "Okay, will do. See you soon."

Q. You've missed a bit out.

A. "Okay, will do. See you soon."

Q. You've missed a bit out.

A. That he's put an emoji?

Q. Yes. What's the emoji?

A. A heart.

Q. And your response?

A. A smiley face and a heart.

Q. He wasn't your boyfriend?

A. No, [Dr A]'s a married man. it's not a relationship at all, it's a friendship.

Q. This document, it may be we don't need to go through it page by page, it is peppered with you out socialising with lots of different people from that unit, isn't it?

A. Yes, at times, yes.

Q. All the time, really. Not just at times. You had a very, very active social life, didn't you?

A. Yes.

Q. Yes. Can we go to page 19 of 26, please, 28 September 2017, two diary entries. What do they say on the same day?

A. Which, sorry?

Q. 28 September there are two diary entries which have been reproduced in this document. What do they say?

A. "London. [Dr A]."

Q. How many times did you go to London with [Dr A]?

A. Once. We had to cancel this time because [Dr A] had a medical appointment.

Q. But he wasn't your boyfriend?

A. No, [Dr A] is a married man.

Q. You have deliberately misled this jury about your background, haven't you?

A. No.

Q. You have deliberately misled them about your circumstances following your suspension from that unit, haven't you?

A. No.

Q. And you have also deliberately misled them about the circumstances of your arrest, haven't you?

A. No.

Q. Well, just remind us about what happened when you were arrested?

A. What do you mean?

Q. You really don't remember?

A. You want me to describe how I was arrested?

Q. Yes, how awful it was, and why it was so awful.

A. I've already explained that once.

Q. Yes, well, it's a long time ago, and I'd like you to remind us, please.

A. They knocked at my door at 6 o'clock in the morning, and they arrested me.

Q. And how were you dressed when you left the house?

A. I think I had a nightie on, and then a tracksuit bottom and top and trainers.

Q. Oh, but you told the jury you were taken away in your nightwear, in your pyjamas, I think was how you put it.

A. Yes.

Q. You were taken away in a blue Lee Cooper leisure suit, weren't you?

A. I don't recall exactly. I just know I had a nightie on.

Q. Do you want me to show you a video of it?

A. No.

Q. Well, I'll ask you again. You were taken away in a blue Lee Cooper leisure suit, weren't you?

A. Yes.

Q. On 10 June 2019, when you answered the door, you answered in your nightie.

A. No, I didn't answer the door in 2019.

Q. Oh, you've got a very clear memory of this then, haven't you?

A. Yes, I remember this through the -- the arrests, yes.

Q. When the police came face-to-face with you, you had a nightie on, didn't you?

A. In 2019?

Q. Yes.

A. I had my pyjamas on, yes.

Q. No, you had a nightie on.

A. Okay.

Q. Do you want to see a video?

A. No.

Q. Do you remember having a nightie on?

A. I can't recall specifically which night. I was in bed.

Q. Do you remember what you left the house wearing?

A. Um... No. I know I was unable to get dressed, and I think I took a dressing gown as well.

Q. You put your blue Lee Cooper leisure suit on again, didn't you?

A. Yes.

Q. Then you asked them to let you put your dressing gown on over the Lee Cooper leisure suit, didn't you?

A. Yes.

Q. So you weren't taken away in your pyjamas, were you?

A. No.

Q. And you remember this, don't you?

A. Yes.

Q. Why did you lie to the jury about it?

A. I don't know.

Q. You don't know? What advantage were you looking for by telling the jury that you were taken away by the police in your pyjamas? What benefit was there?

A. Because that's what happened on the first time. That was how quickly everything happened.

Q. No, no. On the first time you were taken away in your blue Lee Cooper -- do you want to watch the video?

(Pause)

You are a very calculating woman, aren't you, Lucy Letby?

A. No.

Q. You tell lies deliberately, don't you?

A. No.

Q. And the reason you tell lies is to try to get sympathy from people, isn't it?

A. No.

Q. You try to get attention from people, don't you?

A. No.

Q. In killing these children, you got quite a lot of attention, didn't you?

A. I didn't kill the children.

Q. And you're getting quite a lot of attention now, aren't you?

(Pause)

On the third arrest, you left the house in a pink or salmon pink coloured GAP leisure suit, didn't you?

A. I can't recall. Again, I don't know.

Q. You weren't in your pyjamas, were you?

A. No.

Q. I'm just going to finish by asking you about some of the notes that you wrote. Can we start with image 9, please? This is a note to [Baby O], [Baby P] and [Baby R], isn't it?

A. Yes, the names are there, yes.

Q. Yes. Why were you writing to the three of them?

A. It's not set out as a formal letter. I'm writing how I felt at that time, and it was their birthday, and I've mentioned all three of them.

Q. Yes. It's slightly difficult to interpret it exactly, but what it says is: "[Baby P]". Above it, it says: "love is all we needed", which you've told us is a Craig David song. Then it says: "[Baby O], [Baby P] and [Baby R] today is your birthday but you aren't here and I'm so sorry for that." We know that [Baby O] and [Baby P] were no longer with us. Why were you including [Baby R] in that?

A. I've just written three names. I've also written [Dr A].

Q. But this isn't "[Dr A], today is your birthday but you aren't here", is it?

A. No.

Q. Answer the question, please.

A. I can't answer that.

Q. Is it because in your mind, as [Dr B] perhaps anticipated, there was a terminal end in store for [Baby R] if he'd stayed with you?

A. No.

Q. Was that your objective, to kill all three?

A. No.

Q. Was the prospect of that exciting you?

A. Absolutely not, no.

Q. Is that why you reacted the way you did, about which we were told by [Dr B]?

A. No.

Q. If we can enlarge the following image, please. There's a lot going on in this note, isn't there?

A. Yes.

Q. "I am an awful person", you write down in the top right-hand corner, don't you?

A. Yes.

Q. And that is true, isn't it?

A. No, that's how I felt at that time: I was not good enough and I must be an awful person.

Q. "I'll never know what it's like to have a family", appears on this note, doesn't it?

A. Yes.

Q. But you had done nothing wrong?

A. No.

Q. What made you think at the time you wrote this, that you would never have a family?

A. Because despite having done nothing wrong, I was still in the position that I was in, and I could not see how that was going to end.

Q. So you had a good job?

A. Yes.

Q. Working in the patient safety department at the Countess of Chester?

A. Sorry?

Q. You had a good job working in the patient safety department at the Countess of Chester?

A. Well, when you say good job, no, that wasn't a choice for me, no.

Q. It was a different job.

A. Yes.

Q. Still a good job, isn't it?

A. Good as in enjoyable?

Q. Well, it's a secure job.

A. Yes.

Q. It's with a very secure employer?

A. Yes.

Q. It pays well?

A. Not as much as my nursing, but yes.

Q. Still pays well. You had a house?

A. Yes.

Q. You had a car?

A. Yes.

Q. You had a boyfriend?

A. Yes.

Q. So why would you never know what it's like to have a family?

A. That's how I felt at that time. I could not see a future for myself.

Q. We don't need to go back through the social media stuff to show you out on the razz with your friends, do we?

A. No.

Q. You were having a good time, weren't you?

A. Yes, there were times in those years that I did have good times, yes.

Q. Drinking fizz, going to the races?

A. Yes.

Q. Yes. You felt like this because you knew that you had killed and grievously injured these children.

A. No.

Q. And that is the truth, isn't it?

A. No, it's not the truth.

Q. You are a murderer.

A. No, I am not.

Q. You have murdered many children.

A. I've never murdered a child, or harmed any of them.

Q. I have nothing further. Thank you.