

Coroner's Inquests into the London Bombings of 7 July 2005

Hearing transcripts - 26 January 2011 - Morning session

1 Wednesday, 26 January 2011

2 (10.00 am)

3 LADY JUSTICE HALLETT: Mr Keith?

4 MR KEITH: Good morning, my Lady. My Lady, may I invite you  
5 to call Dr Dunn who is, as we can see from the video, in  
6 Belfast. Good morning, Doctor.

7 THE WITNESS: Good morning.

8 MR KEITH: You can obviously hear me clearly.

9 THE WITNESS: I can.

10 MR KEITH: My Lady is in court and so we're now in session.

11 My name is Hugo Keith, I'm Counsel to the Inquests.

12 Could I invite you, please, to take the oath or the  
13 affirmation, if it's there in front of you, before I ask  
14 you questions.

15 THE WITNESS: Yes.

16 DR JAMES BRIAN DUNN (sworn)

17 Questions by MR KEITH

18 MR KEITH: Thank you, Doctor. I obviously propose to ask  
19 you questions about the events on 7 July 2005. May  
20 I commence by asking you what your professional capacity  
21 was at that time which had caused you to be in  
22 Tavistock Square that morning?

23 A. I am chairman of the BMA in Northern Ireland GPs'  
24 Committee and I'm one of the chief team negotiators and  
25 we were having a negotiation meeting.

1 Q. Was it for that reason that you were in the BMA building  
2 itself, which is to one side, the east side, of  
3 Tavistock Square?

4 A. It is.

5 Q. I think the meeting was due to commence at 10.00, but  
6 you had arrived a little before that, in order to  
7 prepare. Is that right?

8 A. That is correct.

9 Q. Shortly before 10.00, the other attendants at the  
10 meeting had all arrived, had they not?

11 A. They had, all except Andrew Deardon.

12 Q. Did they include Dr Peter Holden, Dr Drage and  
13 Dr Mary Church?

14 A. That is correct, yes.

15 Q. You don't have the photographs, in fact, in front of you  
16 that we have which show the courtyard in the BMA  
17 building to the east of Tavistock Square, but do you  
18 recall whether or not the meeting room was to the rear,  
19 the east side of that courtyard away from the main  
20 entrance on Tavistock Square, or on the other side of  
21 the courtyard facing east?

22 A. I honestly am confused with the geography of BMA House,  
23 but my belief is it was away from Tavistock Square.

24 Q. Tell us, please, what happened just prior to the meeting  
25 starting?

1 A. Well, we had -- we saw a helicopter hovering and  
2 Dr Peter Holden is into emergency medicine, and knows  
3 a lot about helicopters, so he recognised this  
4 helicopter and said, "There's something important going  
5 on", so he switched on the television in the meeting  
6 room. We heard about the power surges on the  
7 Underground --

8 Q. Could you just pause there, Doctor? I'm sorry, Doctor,  
9 we've actually lost you. The screen has frozen and your  
10 voice is beginning to lower. I wonder whether,  
11 technically, we can have the volume raised a little bit  
12 and see whether or not we can --

13 A. Sorry, can you hear me now?

14 Q. That's better. Thank you very much.

15 You were saying you turned on the television, or  
16 rather, Dr Holden turned on the television and there  
17 were reports of power surges. Did you begin to suspect  
18 that there was some major incident, perhaps a terrorist  
19 attack, in London?

20 A. We did. We thought it was a bit suspicious there were  
21 several power surges and we were concerned also with the  
22 helicopter being in the air.

23 Q. Then what happened?

24 A. Well, then we heard an explosion and I think it was  
25 obvious to everyone in the room that that had been

1 a bomb.

2 Q. Were you able to detect from which direction the sound  
3 of the explosion had come?

4 A. No, we didn't know where it had come from.

5 Q. Did you then give immediate consideration to whether or  
6 not you should stay in the meeting room or take cover or  
7 evacuate the building?

8 A. We did, we had a brief discussion and Dr Holden and  
9 I presumed it there could have been a secondary device,  
10 so we advised the others to remain in the room for a few  
11 minutes before we evacuated.

12 Q. When you left the room, do you recall where you went?

13 A. We remained in the room, and then, after a few minutes,  
14 I went into the main GPC office to look out the window  
15 and, from there, I went to the office of the  
16 Consultants' Committee, which directly overlooked the  
17 incident.

18 Q. When you looked out of the window, could you see the  
19 shattered remains of the bus?

20 A. When I looked out of the window, I saw the bus with its  
21 roof blown off. I saw cars abandoned, but at that  
22 stage, actually, it was quite quiet outside.

23 Q. Did you see, for example, people beginning to rush  
24 towards the bus or people running in the locality of the  
25 bus, or was it quite still at that stage?

1 A. At that stage, it was quite still.

2 Q. What did you do next?

3 A. I went back to our meeting room, I informed the others  
4 of what had happened and we decided to leave the room  
5 and go and see if we could do something to help.

6 Q. So did you go down into the courtyard that my Lady has  
7 seen and which we've examined?

8 A. We went down into the courtyard, yes.

9 Q. What did you find in the courtyard?

10 A. In the courtyard there were a lot of casualties lying on  
11 makeshift stretchers. There was a lot of milling  
12 around, and at that stage (break in connection) arrived  
13 with supplies of intravenous fluids and cannulas.

14 Q. Doctor, I'm afraid we lost your last answer over the  
15 videolink. Could you please repeat it?

16 A. Sorry, apologies.

17 Q. Please don't apologise.

18 A. There was a lot of milling around, there were casualties  
19 lying on makeshift stretchers, and it was apparent that  
20 I think either an ambulance or a paramedic had arrived  
21 with supplies of intravenous fluids and cannulas.

22 Q. When you went to the courtyard, did you gain any  
23 impression as to whether or not the medical attention  
24 that was being given to those persons who were in the  
25 courtyard was being organised in any way?

1 A. Sorry, I lost you at that stage, I missed the question.

2 Q. When you first entered the courtyard, did you gain an  
3 impression as to the level of organisation that was  
4 being applied? Did there appear to be any structure or  
5 system to the way in which those persons in the  
6 courtyard were being looked after?

7 A. I think, at that stage, it was still fairly chaotic.  
8 I think most casualties had either one or two doctors  
9 looking after them, but it was -- at that stage, there  
10 was very little organisation.

11 Q. Did you recognise that some of your colleagues, or some  
12 other medical colleagues who had been inside the BMA  
13 building were already in the courtyard, that a first  
14 group of doctors appeared to have reached the courtyard?

15 A. I did recognise that, yes.

16 Q. In terms of equipment, you've made reference to the fact  
17 that there were cannulas and drips. Were you able to  
18 see whether or not they were being applied to all those  
19 who seemed to you to require them, or was there any  
20 sense that there was a shortage of equipment in terms of  
21 what the doctors were able to do?

22 A. Well, there wasn't really any equipment. I mean, the  
23 BMA office is an office.

24 Q. Of course.

25 A. It's manned mainly by clerical staff. Doctors arrive

1 there occasionally for meetings. So most people there  
2 had no equipment and the only equipment we had was what  
3 was brought by the ambulance.

4 Q. This is what I'm driving at. How much arrived from the  
5 ambulance? Do you recall?

6 A. No, it's impossible to know, because I think most people  
7 were concentrating on either one -- usually one or two  
8 casualties and were doing their best for those people,  
9 and at that stage I think there was a senior fireman or  
10 policeman and a senior ambulance man there, I remember  
11 meeting them with Dr Holden as we came down the stairs,  
12 and I think they were beginning to coordinate the care.

13 Q. May I ask you about Dr Holden? Her Ladyship has heard  
14 some evidence about how Dr Holden took control of some  
15 aspects of the operation to tend for those in the  
16 courtyard.

17 A. Yes.

18 Q. Do you recall that occurring?

19 A. I do. I remember I came down the stairs with Dr Holden  
20 and he approached the senior ambulance man and the --  
21 either policeman or fireman. Dr Holden is experienced  
22 in emergency medicine and he introduced himself, he told  
23 them his qualifications, and I think they recognised his  
24 expertise and he then seemed to take control of the  
25 situation.

1 Q. Do you recall a rudimentary system of triage being put  
2 into place at that stage?

3 A. I do, yes.

4 Q. Can you help us with the timing? How long do you  
5 suppose after the explosion do you think that you and  
6 Dr Holden entered the courtyard?

7 A. I think it was probably 10 to 15 minutes. But I can't  
8 guarantee that.

9 Q. Now, you spent most of your time, did you not, caring  
10 for a young Vietnamese gentleman called Sam Ly. Where  
11 was he?

12 A. Well, I presume it was Sam Ly. He was -- I thought  
13 ethnic Chinese. He was lying on the left-hand side of  
14 the courtyard as you face the BMA House. As  
15 I approached him, someone was just about to insert  
16 a cannula. I assisted in that process and we set up  
17 intravenous fluids for him.

18 Q. There was a high degree of confusion at this stage and  
19 people coming to and forth, but it would assist us if we  
20 had some idea of who it was who had inserted, alongside  
21 you, the cannula into Mr Ly. Did you recognise that  
22 person?

23 A. Unfortunately, no. Obviously I presumed he was a BMA  
24 member, but I didn't recognise him.

25 Q. We presume, therefore, that you would have said if it

1 was a paramedic or if the person was an ambulance  
2 officer by way of their overalls. The person appeared  
3 to you to be one of the BMA doctors or a doctor from --

4 A. He was wearing civilian clothes, yes.

5 Q. Did you know then a doctor called Dr Kieran Walsh who  
6 was the editor of the British Medical Journal?

7 A. No, I don't know Kieran Walsh.

8 Q. Or a doctor called Dr Awani Choudhary?

9 A. No, I don't.

10 Q. All right. In what condition was Mr Ly when you first  
11 approached him?

12 A. I'm sorry, that question was lost.

13 Q. We've got you back. For a moment there, I'm afraid we  
14 lost sight of you as well, Dr Dunn. In what condition  
15 was Mr Ly when you first approached him?

16 A. He was actually very quiet. I think he was conscious,  
17 but he wasn't making a lot of noise. In fact, the whole  
18 courtyard was quite quiet. He had a dressing on his  
19 left shoulder, left side of his chest, and we  
20 established the intravenous fluids. The other doctor  
21 moved away and I stayed with Mr Ly at that stage.

22 Q. Were you able to get some impression of the severity of  
23 the injury to his shoulder and chest?

24 A. No, I didn't, because there was a dressing on it, there  
25 was no blood oozing through the dressing and I didn't

1 think it was appropriate to remove the dressing.

2 Q. Do you recall whether the doctor had encountered  
3 difficulties inserting the cannula or whether or not it  
4 had succeeded fairly readily?

5 A. From memory, I think it was quite readily done. I don't  
6 think there was (break in connection).

7 Q. I don't know whether you can hear me, Doctor, but we've  
8 lost you again. Could you repeat the answer?

9 A. I can hear you as well.

10 Q. I'm afraid you have the disadvantage, then, Doctor.  
11 Could you repeat your last answer then?

12 A. I didn't see any great difficulty the doctor had in  
13 establishing the intravenous access.

14 Q. You've told us that you stayed with this gentleman for  
15 some time. Can you recall whether or not there was  
16 a change in his condition?

17 A. I do. He was fairly quiet all the way through the time  
18 I was looking after him and, at one stage, he shouted  
19 quite loudly, "I just want to go to Australia". After  
20 that, his level of consciousness did seem to decrease  
21 and he became less and less responsive.

22 Q. You were no doubt concerned by that?

23 A. I was, yes.

24 Q. Were you able to take any steps to ensure that he  
25 received more prompt and additional medical attention or

1 was there very little that you were able to do?

2 A. Well (break in connection) to the attention of Dr Holden  
3 and we both presumed that this patient had internal head  
4 injuries as well as his chest injuries, and Dr Holden  
5 said he would ensure that he was transferred as the  
6 first casualty to hospital and, as far as I know, when  
7 the ambulances did arrive, he was the first casualty to  
8 be transferred.

9 Q. What was it that led you to suspect that he may have  
10 suffered a head injury as well?

11 A. Well, I think just the level of consciousness going  
12 down. I monitored his pulse, his pulse was quite strong  
13 and I don't think there was a drop in blood pressure.  
14 He had some minor injuries around his head, but just,  
15 with the loss of consciousness and the level of  
16 consciousness decreasing, it was a presumption that he  
17 possibly had head injuries as well.

18 Q. Before he was removed by ambulance, do you recall him  
19 being moved to somewhere else in the BMA building,  
20 a place that you knew to be called the Hastings room?

21 A. (Break in connection) most of the casualties were  
22 carried into the Hastings room where they remained until  
23 the ambulances came.

24 Q. Doctor, I'm afraid we only caught the second half of  
25 your answer. Could you again please repeat it?

1 A. Sorry, yes, apologies for the link. At one stage, it  
2 started to rain and all of the casualties were lifted  
3 and carried into the Hastings room where they could be  
4 cared for in the dry.

5 Q. Do you recall on what Mr Ly was carried?

6 A. I think it was a table-top. The BMA meetings have all  
7 got tables with removable table-tops and that's what it  
8 appeared to be.

9 Q. May we presume that the drip was carried alongside him  
10 as he was moved to the Hastings room?

11 A. It was, yes.

12 Q. Did you, at any stage, have to seek a further drip or to  
13 seek any specific medical equipment to give to Mr Ly  
14 while you were tending to him?

15 A. Well, I didn't have access to any further medical  
16 equipment. The drip seemed to run quite freely. There  
17 wasn't a problem with the drip. And I'm trying remember  
18 whether he had -- I think he possibly had oxygen at that  
19 stage but I -- my memory of it, I'm afraid, is quite  
20 remote. I've tried not to dwell on these things over  
21 the past five years. But I think he had oxygen at that  
22 stage.

23 Q. I quite understand. May I ask you one or two more  
24 questions about the events inside the Hastings room?

25 Do you recall, when he was in the Hastings room,

1 another doctor, or other doctors, coming up to you and  
2 him and checking his condition and assisting you,  
3 temporarily at any rate, in looking after Mr Ly?

4 A. Not specifically. I remember Dr Holden going around the  
5 various casualties, assessing how they were, asking the  
6 doctor caring for them what their state was and trying  
7 to keep tabs on what was happening.

8 Q. By the time that Mr Ly and yourself were in the Hastings  
9 room, did it seem to you that the casualties who had  
10 been placed in there had all been subject to some sort  
11 of triage and there was a general appreciation of the  
12 priority cases?

13 A. Well, I was looking after him, but it did appear that  
14 the care of the patients was much more organised.  
15 I think Dr Holden had approached most of the casualties,  
16 I think probably all of the casualties, and I think he  
17 had an appreciation of the severity of the injuries of  
18 each of the casualties.

19 Q. When Mr Ly was taken away in the ambulance, did you  
20 assist in the carrying down to the rear of the BMA  
21 entrance, where the ambulance pulled up?

22 A. Yes. The Hastings room is just beside that entrance and  
23 I did assist in carrying Mr Ly to the ambulance, yes.

24 Q. After he departed, did you stay in the building and  
25 assist with other casualties?

1 A. I did. After he left, there were several, quite a few,  
2 walking wounded, people who had blankets and actually  
3 were extremely well-behaved, and we looked at those,  
4 assessed their injuries and then they moved off to  
5 a nearby hotel.

6 Q. I think you didn't come to leave the building for  
7 several hours thereafter, until around lunchtime.

8 A. That's correct, yes.

9 Q. I think you were trying to get to Heathrow to fly out of  
10 London, but you were unable to do so, so you went back  
11 to the building and stayed there overnight?

12 A. That's correct, I had a surgery booked the next morning  
13 at my practice, so I was trying to get home.

14 MR KEITH: Dr Dunn, thank you very much for answering those  
15 questions. There may be some further questions for you  
16 from my fellow lawyers who represent the interested  
17 persons.

18 A. Thank you.

19 LADY JUSTICE HALLETT: Mr Coltart?

20 Questions by MR COLTART

21 MR COLTART: Good morning, Doctor.

22 A. Good morning.

23 Q. I've only a very few questions for you and I'm sorry to  
24 dwell further on the treatment that Mr Ly received, but  
25 I just want to ask a few questions about that, if I may.

1 A. Yes.

2 Q. You say in your witness statement and you've described  
3 to us this morning that, as you approached Mr Ly for the  
4 first time, someone was already inserting a cannula into  
5 this male and you assisted by continually assessing him  
6 and maintaining his airway.

7 Was there sufficient fluid for Mr Ly from the time  
8 that you first approached him until the time that he was  
9 taken to hospital?

10 A. I'm sorry, I lost the link there, I missed the first  
11 part of the question.

12 Q. Yes, the question was: was there sufficient fluid for  
13 Mr Ly from the moment that you first approached him  
14 until the moment that he was taken to hospital?

15 A. In my opinion, there was, yes.

16 Q. Are you able to recall now, after all this time, what it  
17 was that was being administered to him? Was it, for  
18 example, Hartmann's solution or was it perhaps saline?  
19 Are you able to tell us what it was that he was  
20 receiving?

21 A. From memory, I think it was saline, but obviously there  
22 was a lot of confusion, it was five years ago, and  
23 I can't say that for definite.

24 Q. Yes, of course. It may be important for witnesses who  
25 are coming later this week as to his state of

1     consciousness during his period in the courtyard and  
2     then when he was taken to hospital. I just want to ask  
3     you about that. You say this in your witness statement:  
4     "I probably spent an hour with this male through  
5     which time his level of consciousness was diminishing  
6     rapidly. I remember that the last words he spoke before  
7     losing consciousness completely were 'I want to go to  
8     Australia', and he spoke those words whilst he was lying  
9     in the courtyard."

10    Is it your recollection that he regained  
11    consciousness at any point thereafter; for example, once  
12    he'd been moved to the Hastings room?

13    A. I'm sorry, I missed some of that, but I presume you were  
14    reading my statement, and it was just the beginning of  
15    the statement then, I did hear the question.

16    I don't think he did regain consciousness at any  
17    stage, no.

18    Q. Because we may hear some evidence later this morning  
19    from others who had dealings with Mr Ly -- their  
20    recollection is different -- and that he was still  
21    conscious as he went into the ambulance, for example.

22    How confident can you be in relation to your own  
23    recollection of events?

24    A. Well, my recollection of events is that he did not, at  
25    any stage after he was moved to the Hastings room, speak

1 or make any spontaneous movement.

2 Q. You told us a little earlier this morning that you had  
3 concerns through his diminishing consciousness that he  
4 had suffered from internal head injuries.

5 Was there anything else, that being the case, that  
6 could have been done for him at the scene or was the  
7 priority in those circumstances to get him to hospital  
8 as quickly as possible?

9 A. Well, in my opinion, it would be to get him to hospital  
10 as soon as possible.

11 Q. Because in terms of the administration of fluid,  
12 application of dressing and so on, those are all  
13 important first aid procedures to stem blood loss, keep  
14 the blood pressure up and so on, but they're not going  
15 to assist in relation to a serious head injury. Is that  
16 right?

17 A. That's correct, yes. Although I'm speaking as a general  
18 practitioner, not as a hospital practitioner or an  
19 emergency medicine specialist.

20 MR COLTART: Don't worry, we're going to hear from the  
21 neurosurgeons later in the week, so no doubt we'll be  
22 asking them the same questions. Yes, thank you very  
23 much indeed.

24 LADY JUSTICE HALLETT: Ms Gallagher?

25 MS GALLAGHER: Nothing, thank you:

1 LADY JUSTICE HALLETT: Mr Saunders?

2 Questions by MR SAUNDERS

3 MR SAUNDERS: Just one matter, Doctor. At the time you were  
4 upstairs after the explosion and before you and the  
5 other committee, including Dr Holden, go downstairs,  
6 I think in your statement back in 2005 you believed you  
7 were upstairs for about 10 to 15 minutes before going  
8 down.

9 A. I think so, yes.

10 Q. Does that include from the time from the explosion or  
11 from the time you've come back from looking at the  
12 devastation after it?

13 A. That's from the time of the explosion.

14 MR SAUNDERS: Thank you very much, Doctor. My Lady, I know  
15 that Ms Sheff has no questions.

16 LADY JUSTICE HALLETT: Thank you. Yes, Ms Simcock?

17 Questions by MS SIMCOCK

18 MS SIMCOCK: Thank you, my Lady. Doctor, in your statement,  
19 you refer to the large, open wound that Mr Ly had  
20 sustained to his shoulder and you specifically stated  
21 there that it was his left shoulder and left chest.

22 If I say that the hospital notes seem to record that  
23 the serious injury was to his right shoulder, do you  
24 think that you just might be mistaken about that now?

25 A. I could well have been mistaken, yes.

1 MS SIMCOCK: Thank you very much. My Lady, for your note  
2 the hospital note is INQ9572-6.

3 LADY JUSTICE HALLETT: Thank you. Any other questions for  
4 Dr Dunn?

5 Dr Dunn, I'm Lady Justice Hallett, the coroner  
6 conducting these inquests. I do understand why you've  
7 done your best to forget the events of that day, I'm  
8 sure we all do. Thank you for helping the casualties  
9 and for what you did to try to help Mr Ly, and I'm sorry  
10 I've had to ask you to try to remember that terrible  
11 day. Thank you very much.

12 A. Thank you very much. Thank you.

13 LADY JUSTICE HALLETT: Mr Keith?

14 MR KEITH: My Lady, may I invite you to call Dr Peters,  
15 please.

16 DR MICHAEL DAVID PETERS (affirmed)

17 Questions by MR KEITH

18 MR KEITH: Good morning, Doctor. Could I invite you to give  
19 your full name, please?

20 A. Michael David Peters.

21 Q. Dr Peters, on Thursday, 7 July, you were, of course, in  
22 the BMA office. In what role were you there?

23 A. I run a support service called Doctors for Doctors.  
24 It's a national peer support service for doctors in  
25 difficulty, and I'm an employee of the BMA as opposed to

1 the committee members who were present on the day.

2 Q. Were you there that morning in your office?

3 A. I was there in the office, and I was on the BBC website  
4 looking at what the news was as I came into the office  
5 and read about the power surges, thought nothing of it,  
6 heard a massive "Bang!", and sort of, being a Londoner  
7 and hearing lots of noises all of the time, thought of  
8 some gas explosion, car, big backfiring sort of,  
9 couldn't really make anything of it, and then got down  
10 to work.

11 Then a minute later, somebody came into the office,  
12 because we're on the top floor --

13 Q. Can I just pause you there, if I may, Doctor. Where  
14 exactly is your office located in terms of the layout of  
15 the courtyard?

16 A. It's on the right-hand corner, on the fourth floor,  
17 which I think would be south-east corner.

18 Q. If we were to look, please, at a photograph of the  
19 courtyard, it's INQ10348 [INQ10348-1], it will appear on the screen  
20 next to you. This is a view from just within the  
21 archway that leads from the courtyard to  
22 Tavistock Square, so the view is to the east, and that's  
23 the rear of the courtyard?

24 A. The far right-hand corner.

25 Q. Of that photograph?

1 A. Of that photograph, but on the fourth floor, which isn't  
2 shown here, it's almost in the attic area.

3 Q. So you were actually a little bit back from  
4 Tavistock Square, of course?

5 A. Yes.

6 Q. Sorry, yes. So you were in your office and you carried  
7 on with your work and about a minute later ...?

8 A. Somebody came in and said, "We need to evacuate the  
9 building". I'm not sure, at that time, that I actually  
10 had a fire alarm in my office -- I mean, there is one  
11 now -- so I wouldn't have heard -- I'm not sure, one  
12 normally hears these things when they're at a distance,  
13 but I didn't then. "We've got to evacuate". Went down  
14 the stairs with all the other people who were in the  
15 building at the time, and then, when we got to the  
16 bottom, somebody said, "There's been a bomb, there's  
17 a bomb out the front and we need doctors".

18 Q. Were there people in the courtyard other than those  
19 persons who appeared to be leaving the building?

20 A. No.

21 Q. So did you go across the courtyard and through the  
22 archway that leads into Tavistock Square?

23 A. I went in the courtyard, through the archway and saw  
24 this scene of devastation, total silence except for  
25 seagull noises, there are always seagulls around the

1 roof of the BMA, and the eeriness of the silence was  
2 just punctuated by these -- the seagulls who were  
3 outside.

4 Q. Punctuated by ...?

5 A. The noise of the seagulls, sort of.

6 Q. You no doubt paused, as you entered Tavistock Square, to  
7 take in the enormity of the scene that confronted you.  
8 As you did so, did you particularly notice anybody or  
9 somebody lying on the pavement to your left as you stood  
10 out looking at the square?

11 A. As I stood out, looked from BMA House -- when I go to it  
12 in my mind, I'm on the outside looking in, so I'm on the  
13 outside looking in. I thought I saw a torso. There was  
14 a sort of mass of sort of tissue, red, about one metre  
15 by a metre there. And then, on the other side, to the  
16 left as I was looking from the square in, there was  
17 a body of, I think, a black woman who was wearing  
18 a dress. The body seemed to be swollen, motionless, and  
19 I presumed she was dead.

20 Q. I'd like to ask you, please, about that lady to see  
21 whether we can discern a little bit more detail about  
22 your recollection.

23 Could you look, please, at a photograph INQ10345 [not for publication]  
24 which is a photograph from the northern side of the  
25 scene looking back southwards along Tavistock Square?

1 The BMA entrance or exit is to the left, at the bottom  
2 left-hand corner of the photograph.

3 As you came out, can you, by reference to this  
4 photograph, tell us where you think that lady was whom  
5 you saw, the black lady?

6 A. I thought she was on the right -- thought -- and that  
7 the torso was on the left.

8 Q. By reference to the lamp post, can you see that there is  
9 a gentleman in green uniform --

10 A. Yes.

11 Q. -- and a number of other people, and they appear to be  
12 tending to someone on the pavement?

13 A. Yes.

14 Q. Was that the place where you recollect the lady being or  
15 somewhere else?

16 A. No, I thought it was much nearer to the actual entrance  
17 to BMA House than that.

18 Q. You mean away from the road?

19 A. Yes, I thought.

20 Q. Might you be mistaken? I appreciate it's very difficult  
21 now to recollect the detail.

22 A. Yes, yes.

23 Q. There obviously were a number of people, Doctor, who  
24 were lying in the road after the explosion, and it's  
25 important that we try to identify where they were and in

1 what condition they were in.

2 Do you recollect anything more of that person, in  
3 particular their age or their size?

4 A. Yes, I think this was a sort of relatively heavily-built  
5 person who would have been in their 30s -- late 30s or  
6 early 40s.

7 Q. When you say that you thought that she was a black lady,  
8 do you mean Afro-Caribbean or is it possible that her  
9 skin colour was lighter, olive-skinned perhaps?

10 A. I sort of felt -- well, the memory that's stuck with me  
11 has been the Afro-Caribbean.

12 Q. All right. It might assist if we come at it from  
13 another direction, which is to ask you about your  
14 recollections of her condition.

15 What was it that made you think that she was dead?

16 A. Her eyes were open, staring. There was no movement of  
17 her chest cage. I thought her body was -- there was no  
18 spontaneous movement at all anywhere, and her body was  
19 motionless and she seemed distended, swollen.

20 Q. Did you go to her and seek to discover a pulse or to  
21 examine her directly to see whether or not she was  
22 alive?

23 A. I can't remember, but I -- the recollection is that  
24 I don't think I did.

25 Q. All right. Were you in some quandary as to what you

1 should do?

2 A. Oh yes. I mean, there was Sam Everington,  
3 Dr Sam Everington was out then, so there was basically  
4 three of us for these first few minutes. There was  
5 Sam Everington and myself, and an Asian doctor who  
6 I don't remember the name.

7 Q. If I were to say Dr Choudhary, would that ring a bell?

8 A. Yes, I think so, yes.

9 Q. Or Khan?

10 A. Yes -- oh gosh!

11 Q. I don't want you to guess.

12 A. I don't want to guess. I didn't recognise them. I knew  
13 Dr Everington from previous contact with him, but the  
14 other doctor I didn't know.

15 Q. All right. What did the three of you do?

16 A. Well, Dr Everington took charge and he -- I think we --  
17 several things that sort of -- I can't remember the  
18 details of what happened, but there're several images  
19 with me, and one is some -- a young lady trapped under  
20 the taxi that was on the other side of the road and that  
21 she was screaming in pain, and I remember somebody -- us  
22 trying to push the taxi to dislodge her, and then  
23 somebody coming out with a table-top stretcher, as it  
24 were and us putting her on the stretcher and her being  
25 taken in. I don't think I -- I may have been one of the

1 carriers of the stretcher.

2 Q. When you went over to the taxi, were there people  
3 already treating the lady?

4 A. Yes, yes, or trying to move the taxi off her, because it  
5 was sort of, physically, you had to push the thing. So  
6 I was another pair of arms, and, yes.

7 Q. Do you recall whether or not the taxi was moved to any  
8 significant extent by you?

9 A. No, I don't -- no, no, I think it was -- I don't think  
10 we're talking about feet that were moved. I think it  
11 was inches, I think, to dislodge her.

12 Q. I don't suppose you can recall whether or not the taxi  
13 was moved back or forward?

14 A. I sort of, in my mind --

15 Q. Just dislodged slightly?

16 A. In my mind, I would say forward. Going northwards, as  
17 it were.

18 Q. Yes. It might help if you look again at our picture  
19 INQ10345 [not for publication]. You can see there the black taxi just  
20 adjacent to the tree.

21 A. Yes.

22 Q. In front of it there is, in fact, a Golf. You can't see  
23 it, but there was another car, a Honda 4x4, which is  
24 concealed by the tree.

25 A. Yes.

1 Q. The lady was, as you can see there from the pixelation,  
2 very near to the taxi, in fact underneath the taxi.  
3 A. Yes.  
4 Q. Do you recall the taxi moving forward to such an extent  
5 that it hit or collided with any of the other vehicles  
6 nearby or not?  
7 A. I don't think so.  
8 Q. From what you said, it appears that it was only a matter  
9 of inches.  
10 A. Yes, yes.  
11 Q. Was she freed with difficulty?  
12 A. Once we got the taxi off, I think it was relatively  
13 easy.  
14 Q. Whilst you were there, do you recollect there being  
15 anybody else lying in the road in the near vicinity of  
16 the taxi?  
17 A. Well, my other memory is of a person with horrific  
18 shoulder injuries where the whole of the skin from the  
19 shoulder -- and I think the right shoulder -- was taken  
20 off and I was looking at bare muscle fibres.  
21 Q. Where do you think that person was?  
22 A. Around the vicinity -- and I think a little bit nearer  
23 to the building and nearer to the bus than the lady  
24 where -- from the cab, under the cab.  
25 Q. Perhaps we could start, then, with, again, INQ10345 [not for  
publication]. If

1 you look at the screen, you can plainly see the bus  
2 there, of course. Could you estimate, please, where you  
3 think the other person was located?

4 A. It sort of feels like, in my mind, and from what I can  
5 recollect, there's a white van behind the lady who was  
6 trapped, and it was almost a bit more forward, forward  
7 and nearer the building than the white van, just almost  
8 behind where the two people are bending over the woman.  
9 Around there, it's got a feel of that. It certainly  
10 wasn't -- didn't feel like, you know, right by the zebra  
11 crossing part or further back or further in. It was  
12 around that area, as far as I can --

13 Q. Can you help us as to whether or not, in your  
14 recollection, the person with that injury was male or  
15 female?

16 A. In my mind -- I mean, this is again -- I think male,  
17 because I think about -- I was thinking about the muscle  
18 bulk, actually, apart from -- that's an image that  
19 stayed with me. But I think, looking at that, I would  
20 say a male.

21 Q. All right. Once the lady, Emma Plunkett, was carried in  
22 and away from the area of the taxi, where did you go?

23 A. Well, I -- around about this time, I was hearing noises  
24 from the bus and I looked at the bus and there was a man  
25 who, when the top was blown off, must have been on the

1 top deck of the bus and had half fallen through, because  
2 of the explosion, into a hole in the bottom part of the  
3 bus.

4 So I had this image of somebody almost from their  
5 upper chest and head, and I -- the person was in pain  
6 and I can't remember what they were saying, and  
7 I tried -- I was -- sort of climbed up on the bus, tried  
8 to climb up on the bus to try and at least to make  
9 contact with person to do what I could do.

10 Q. Were you able to reach them?

11 A. No. The trouble was that there was so much sharp  
12 edges -- I remember cutting myself a little bit on, you  
13 know, one of them. But I had to give up, I just  
14 couldn't get across to him.

15 Q. Was anybody else endeavouring to assist this person, do  
16 you recall?

17 A. No, no, I think there was -- there were people round,  
18 I don't know whether they were just shocked by the  
19 thing, but people were looking at me get on -- you know,  
20 trying to climb up, I remember a policeman, and I didn't  
21 say, "Well, come on", you know, people, I don't know,  
22 were perhaps a bit numbed by the events, so I don't know  
23 why.

24 Q. Did you subsequently see that person moving at all in  
25 the wreckage of the bus?

1 A. Yes, I mean, I think later on -- and this is later on,  
2 I think, when we were told, you know, because of  
3 a possible secondary device, not to get back on the bus,  
4 and I almost have this vision of him falling through  
5 into the lower deck of the bus and that was the last,  
6 you know, that I heard.

7 Q. All right. You went back, did you, into the courtyard?

8 A. Yes, at that time, you know, the ambulances arrived,  
9 there was a lot of action happening. It seemed as  
10 though, you know, there was a small group out the front  
11 and there was the main group doing the triaging in the  
12 courtyard of BMA House with all the victims and the  
13 injuries, and then I moved back into BMA House because  
14 I don't think there was any more work to be done  
15 outside.

16 Q. In the courtyard.

17 Could I ask you about the courtyard? Your statement  
18 refers to a white female being treated by a female  
19 doctor and describes how you joined the doctor and  
20 assisted in trying to insert a cannula, but there was  
21 a difficulty in finding a vein.

22 A. Yes, I couldn't -- I mean, the woman was collapsed and  
23 I tried unsuccessfully, and then I asked -- there was  
24 another doctor who was a surgeon just -- who was either  
25 there at the beginning or had just appeared on the

1 scene -- not on the scene generally, but I mean in that  
2 area with this particular patient and I think either  
3 I asked him, "Could I ask you to insert?", and he did  
4 that quite easily.

5 Q. Your statement records how you think that the doctor who  
6 came to assist was a Dr Khan?

7 A. Yes.

8 Q. Might that be right?

9 A. It may be, but again, I don't know why I thought that at  
10 the beginning, but I must have -- to have a definite  
11 name, I must have been quite sure, but now I can't  
12 recall and I don't know a Dr Khan.

13 Q. In order to try to distinguish between those who  
14 survived and those who, tragically, did not, can you  
15 assist in recollecting any more details about that lady,  
16 the lady being tended to?

17 A. I have a feeling that some time later she was again  
18 triaged and being looked after by several other doctors  
19 and I can remember later on -- an hour, maybe half,  
20 three-quarters of an hour later -- I think somebody said  
21 that she had died. I'm not sure, but -- because it had  
22 a relevance for me for somebody I'd in some ways been  
23 involved in the care of.

24 Q. I understand. But you're not able to give us any  
25 further description of her clothing or of her

1 appearance?

2 A. No.

3 Q. All right. Then turning to the Hastings room, to where  
4 you went after you'd been in the courtyard, did you come  
5 across a young gentleman whom you thought was Asian --

6 A. Yes.

7 Q. -- who spoke good English with a slight Asian accent?

8 A. Yes, he was quite a cheerful chap, and there was me and  
9 I think the taxi driver from the taxi that had been  
10 outside. He already had a drip inserted and I -- he had  
11 some severe burns, I think, to his lower legs. I'm not  
12 sure what we had in the way of dressings at the time.  
13 I think -- I can't be sure.

14 But he -- I think we were doing basic things like  
15 just changing the drip bag, just monitoring him as best  
16 we could. But he was, compared to a lot of the others,  
17 relatively well.

18 Q. There was in the Hastings room a man called Mr Sam Ly,  
19 who was Vietnamese, who was subsequently taken by  
20 ambulance as the first P1, priority 1, case. I want to  
21 just make sure that this wasn't that person. It doesn't  
22 seem as if it was.

23 A. No, no, this chap wasn't severely, severely --

24 Q. He wasn't severely injured --

25 A. No.

1 Q. -- or fading out of consciousness?

2 A. No, no.

3 Q. You don't recall him making any reference to Australia  
4 or having an Australian accent?

5 A. No.

6 Q. All right. Do you recall whether or not he was taken  
7 away by ambulance?

8 A. No, I can't. He would have been -- what Dr Peter Holden  
9 did, I think -- thinking about it, I think he put  
10 numbers on, in terms of -- on each casualty about the  
11 priority, and I don't think he would have been a high --  
12 I think he would have needed hospital treatment for  
13 sure, this guy.

14 Q. But he wasn't a P1?

15 A. Yes.

16 Q. Then, having attended to him, did it seem to you that  
17 there were, by now, quite a number of paramedics and  
18 ambulance staff able to assist with treating people in  
19 the Hastings room?

20 A. Yes, exactly. I mean, and I felt, you know, there were  
21 people with far more expertise than me at that stage,  
22 and I was around just trying to comfort people, talk to  
23 people. I remember actually trying to find addresses or  
24 make contact with relatives, because I think the phones  
25 were up then because they'd been down, I think, all the

1 time. So to do simple tasks in a way.

2 Q. Do you recall what time you were able to leave the BMA?

3 A. 1.30, 2.00, something like that, I can't remember.

4 I remember, with Sam Everington, what we did is we  
5 raided the BMA canteens and we opened it up for all the  
6 ambulancemen, all the helpers to kind of actually at  
7 least give them some sustenance to help them through the  
8 work they were doing.

9 MR KEITH: All right. Doctor, thank you very much. Those  
10 are all the questions that I have for you, but there may  
11 be some from my colleagues.

12 LADY JUSTICE HALLETT: Mr Coltart?

13 MR COLTART: No, thank you.

14 LADY JUSTICE HALLETT: Mr Saunders? Ms Sheff? Sorry,  
15 Ms Gallagher?

16 Questions by MS GALLAGHER

17 MS GALLAGHER: Thank you. Apologies, my Lady, I know the  
18 reverse with Mr Coltart may have caused some confusion.

19 LADY JUSTICE HALLETT: My fault, Ms Gallagher. I forgot  
20 that you were there.

21 MS GALLAGHER: No problem at all. Dr Peters, could I just  
22 start by confirming when you gave your statement to the  
23 police? I believe it was 31 October 2005, so almost  
24 four months after the bombing. Is that right?

25 A. Yes.

1 Q. So, Dr Peters, did you make any notes closer to the time  
2 of the bombing?

3 A. No notes.

4 Q. So, in fact, when you made your statement to the police,  
5 you were trying to remember this really quite  
6 devastating scene some four months later, and we're now  
7 asking you quite detailed questions some five and a half  
8 years later and your reference point is that statement  
9 from October 2005?

10 A. The reference point is also the memory and the pains and  
11 the things that one -- the odd things that one's blocked  
12 out as well.

13 Q. Of course. Dr Peters, the first thing I just wanted to  
14 deal with was the timing of your arrival on to the  
15 street.

16 From the evidence you've given, it seems as if it  
17 was very early. You've described immediately leaving  
18 from your fourth floor office and not recalling the  
19 alarm even having gone off by then, and you've described  
20 this scene outside being eerily silent and you've  
21 referred to the seagull sound.

22 You've told us that Dr Everington was outside  
23 already when you got there and, in fact, your evidence  
24 echoes the way he described the scene when he arrived on  
25 to the scene -- my Lady, I'm referring to Day 48 at

1 pages 3 and 4 -- and he described, Dr Peters, tearing  
2 down the stairs and straight out after hearing the noise  
3 and his best estimate was that he was outside within  
4 seconds to a minute. So really at a very early stage.  
5 Could you assist us at all with how quickly you  
6 think you were outside? It sounds as if it was also  
7 a matter of minutes.

8 A. Yes, I mean, there were whole throngs of people going  
9 down the stairs at this stage. So fourth floor, going  
10 down, not really knowing -- we didn't know -- the people  
11 who were going down the stairs did not know that there  
12 had been a bomb. It's only when we were greeted by  
13 people who were in the courtyard, and then straight out  
14 the front. So two, three -- three minutes more, yes.

15 Q. Certainly. The other reference point we have is  
16 Emma Plunkett, a survivor who gave evidence yesterday,  
17 who was over by the taxi. She estimated that, before  
18 a doctor came to her, at the time that she was dealing  
19 with the taxi driver only before anyone came from the  
20 BMA, her best guess was five minutes, which would also  
21 fit in with your rough timing.

22 A. Mm.

23 Q. Could we have on screen INQ10345 [not for publication]? Dr Peters, I've  
got  
24 some more questions about the lady whom you described  
25 seeing when you came out of the building. The reason

1 for that is that I represent the family of Miriam Hyman,  
2 who survived for a period of time after leaving the bus  
3 and then died on the street.

4 Her body is covered by a brown blanket, which is on  
5 the left, just beside the building a little way up from  
6 the blue-covered area, if you can see underneath the  
7 NatWest sign. Just so you get your bearings, the  
8 blue-covered area is where the torso of Hasib Hussain,  
9 the bomber, was found -- and you've quite vividly  
10 described seeing a torso in that area -- and the brown  
11 blanketed area is where Ms Hyman was found. I'm afraid  
12 I do have some more questions just about the lady in the  
13 light of that.

14 The difficulty, Dr Peters, is this: there are two  
15 women in that area, both of whom were wearing skirts.  
16 You've described a lady in a dress. One of them is  
17 Miriam Hyman, who's in that area with the brown, and the  
18 other is an Afro-Caribbean lady, who survived, who is  
19 just underneath the lamp post where there's a flurry of  
20 activity. You can see there's a tall, male paramedic in  
21 green. In fact, we believe he's from a private  
22 ambulance service rather than London Ambulance Service.  
23 So there's two people there.

24 The difficulty that we have, Dr Peters, is your  
25 description sounds much closer to the Afro-Caribbean

1 lady who survived, but the location you've described is  
2 obviously much more similar to where Ms Hyman was found  
3 so immediately outside the door. If it would assist,  
4 I'll give you a little more information about those two  
5 people.

6 Miriam Hyman was white, although she did have  
7 olive-coloured skin. She certainly wasn't heavily  
8 built, she was a slim lady. She was in her early 30s  
9 but she looked younger, a number of other witnesses have  
10 referred to her looking as if she was in her early to  
11 mid-20s.

12 The black lady who survived, the Afro-Caribbean  
13 lady, looked older than Ms Hyman. Hard to say, but my  
14 best guess would be late 30s to early 40s, and they are  
15 in those two areas.

16 Is it possible, Dr Peters, that given the scene that  
17 greeted you when you exited the building, you're  
18 conflating those two sites, so possibly the site of  
19 a white lady on the left and then an Afro-Caribbean lady  
20 just a few steps further ahead of you?

21 A. It's funny, because I never -- I've seen pictures of  
22 Miriam Hyman, you know, obviously from the press and  
23 everything, and it's never even jogged in my memory that  
24 this could have been one of the victims, and even in  
25 my -- as I say, the picture that I have doesn't --

1 she's -- she doesn't appear in it. I know what that's  
2 saying, but I can only say what --

3 Q. Of course. It may be, then, that the lady you're  
4 referring to is the Afro-Caribbean lady?

5 A. Yes.

6 Q. I can certainly assure you that she survived. That's  
7 the location she's in. So very close, not quite where  
8 you've described, but very close to. In case,  
9 Dr Peters, it is, given the location -- in case you are  
10 describing a fleeting glimpse of Ms Hyman, I've just got  
11 some further questions on that.

12 You're certain that this person was unattended at  
13 the time?

14 A. Yes.

15 Q. Because we know both of these ladies were attended to  
16 certainly within the first ten minutes by a number of  
17 people. We can see from that photograph that the  
18 Afro-Caribbean lady was being attended to and we've  
19 heard evidence from at least two witnesses who attended  
20 to Ms Hyman within the first ten minutes, that's  
21 Mr Clive Featherstone from the BMA and  
22 Mr Richard Collins, a passer-by, and in fact we've  
23 subsequently obtained footage from a passer-by, mobile  
24 phone footage, which shows very clearly Mr Collins in  
25 a blue shirt when the scene is quite chaotic -- so not

1 eerily silent in the way you've described -- tending to  
2 her. So it's clear that there were people who tended to  
3 her probably after the time that you are describing at  
4 this very early stage.

5 A. This was a very early -- this was the instant picture of  
6 having walked out the building.

7 Q. Certainly. So even if this was Miriam, it may be that  
8 it doesn't matter much about why you formed the view  
9 that you did about her being dead, because we've heard  
10 evidence from other witnesses and it appears to suggest  
11 that they arrived on the scene after you, in any event,  
12 and we've got their evidence from tending to her and her  
13 being alive. Just for completeness, I'll ask you some  
14 brief questions about that.

15 I should also say, Dr Peters, just on behalf of the  
16 family, in case it is Miriam whom you're referring to,  
17 there's absolutely no criticism whatsoever of you for  
18 failing to check the body. In your statement, you  
19 obviously describe a feeling of helplessness and not  
20 knowing what to do, and we know that you almost  
21 instantly went and gave assistance to somebody else. So  
22 there's no criticism whatsoever, either from me or from  
23 the family about it, but I do need to ask you some  
24 questions about it.

25 So you said in your statement that you could tell

1 immediately that she was dead and, today, when asked by  
2 Mr Keith, you said you don't think you did approach her.  
3 If you had checked her pulse, it would seem quite likely  
4 you would have remembered that, Dr Peters, given that  
5 you remember so clearly the first casualty at the taxi  
6 that you tended to, it would be an odd thing to forget  
7 even four months later or five and a half years later.

8 A. Yes.

9 Q. So it's probably right that this is a fleeting glimpse  
10 as you exit the building. It's in the context of you  
11 seeing a torso on one side and what appears to be a body  
12 on the other and, in that context, you think you're  
13 seeing two dead people, a torso, the remains of a person  
14 and a lady who's died. Would that be fair?

15 A. Yes, but I still think the Afro-Caribbean -- what's  
16 actually in my mind is the Afro-Caribbean lady. That --  
17 I don't have the -- I have seen pictures of Miriam Hyman  
18 and I know the sort of body build. It's not what I am  
19 recalling, actually. And I don't think I did, I don't  
20 think I did get them -- would have -- I hear what you're  
21 saying in the inconsistency, but on the other hand,  
22 I don't think that I -- that, you know -- I have that  
23 picture of -- the Afro-Caribbean picture in my mind and  
24 the size.

25 Q. Certainly. Dr Peters, our best guess is that you're

1 referring to the Afro-Caribbean lady, who survived, who  
2 was a little ahead.  
3 I'm afraid the Hyman family isn't in court, so I do  
4 have instructions from them to ask you questions on the  
5 off-chance that you are mistaken, so I'm just going to  
6 ask you some very brief questions about that, but  
7 certainly we would agree with your estimate that this is  
8 probably the Afro-Caribbean survivor. But given that  
9 the family aren't here, I must just put some more  
10 matters to you.

11 My Lady, I hope that's acceptable.

12 LADY JUSTICE HALLETT: Of course.

13 MS GALLAGHER: Really, you gave four reasons, Dr Peters, for  
14 suggesting that you thought she was dead today. So  
15 first of all, you said her eyes were open and staring.  
16 Now, of course, if it's the Afro-Caribbean survivor, we  
17 know that she survived in any event. If it was  
18 Miriam Hyman, on the off-chance that it was  
19 Miriam Hyman, the evidence of both Mr Collins and  
20 Mr Featherstone last week was that her eyes were open  
21 and staring but there was, in fact, a physical response  
22 when they approached her, held her hand and touched her.  
23 So her eyes being open and staring clearly isn't  
24 definitive.  
25 The second reason that you gave was not seeing

1 movement of her chest cage, but you've told us this is  
2 a fleeting glimpse on exiting the building, seeing this  
3 horrific scene, so again, that wouldn't be definitive.

4 A. Mm-hmm.

5 Q. The third issue which you raised is that you couldn't  
6 see any spontaneous movement, she was motionless when  
7 you saw her. Again, on the off-chance that it's  
8 Miriam Hyman, the evidence of Mr Featherstone and  
9 Mr Collins last week was that, when they held her hand,  
10 she did, in fact, move.

11 My Lady you'll recall Mr Featherstone initially  
12 describing her grasping his hand and then some movement  
13 in her torso, and also Mr Collins describing the same  
14 thing, but also describing, probably at a later stage  
15 a few minutes later, some shaking on her right side. So  
16 even if it is Miriam Hyman, and even if there was no  
17 spontaneous movement at that stage, we've got evidence  
18 which suggests there was movement later and response to  
19 people holding her hand.

20 Then the last reason which you gave, Dr Peters, was  
21 that her body seemed distended or swollen and this seems  
22 to fit in with you having the impression that the lady  
23 was of a heavy build. Again, this may just come down to  
24 the fact that the person you appear to be describing is  
25 the slightly heavier, Afro-Caribbean lady who survived

1 rather than Ms Hyman, because that's not a description  
2 of her body as it was found or described in the  
3 post-mortem.

4 A. Yes. And the other thing was that, in terms of  
5 prioritising, because there were only two or three of us  
6 there at that stage, it was actually the people who were  
7 screaming in pain who were -- you know, were a part of  
8 that scene, and I suppose, yes, it was very fleeting,  
9 but then to go over to try and help somebody who, you  
10 know -- it was a calculation one had to make.

11 MS GALLAGHER: Of course, and, Dr Peters, as I said on  
12 behalf of the family, it's entirely understandable.  
13 There were people who plainly needed your help, and  
14 making an assessment of others who may have appeared at  
15 the time as if they didn't need any assistance, and  
16 prioritising them below people who were screaming  
17 obviously in pain and were having no medical assistance  
18 at the time, absolutely no one is criticising you for  
19 that. It's a very understandable decision, and one with  
20 which I'm sure the family would agree. I've nothing  
21 further, thank you.

22 LADY JUSTICE HALLETT: Ms Sheff?

23 Questions by MS SHEFF

24 MS SHEFF: Thank you, my Lady.

25 Dr Peters, I represent the family of Giles Hart.

1 Now, he was a gentleman who died at the scene and he was  
2 later found and photographed underneath that same taxi  
3 that you originally went to and found the casualty  
4 Emma Plunkett?

5 A. Sorry, could you say that again?

6 Q. I'm so sorry, Dr Peters. It appears that I didn't  
7 effectively put the microphone on, so I'll just briefly  
8 summarise that question for you.

9 On behalf of the family of Giles Hart, he was found  
10 underneath the taxi at a later stage. He was  
11 photographed there face down. Now, by that time, it  
12 appeared that the taxi had moved. You were shown the  
13 inquest photograph INQ10345 [not for publication] -- perhaps we could just  
14 have that back on screen again, thank you. This was  
15 taken at an earlier stage and you can see that the taxi  
16 is located with some distance between the car in front.  
17 That distance was later effectively wiped out  
18 because the taxi came forward and collided with  
19 a vehicle which we can't see because it's concealed by  
20 those trees. Perhaps we can see it from the other  
21 photograph that we've got taken from that side view,  
22 thank you very much.

23 Can you see now how the taxi has moved so that the  
24 distance between it and the car in front, that Golf, has  
25 diminished, and in fact it collides with that people

1 carrier coming out of the other side of

2 Tavistock Square?

3 Now, am I right in saying that, when you went over

4 to that taxi, it was further up, closer to the van with

5 the gold star on it?

6 A. I think it was, yes.

7 Q. What I want to ask you is whether you saw it situated in

8 that later position, it having moved further down the

9 road?

10 A. As I said, my recollection is that we didn't sort of

11 move it that far, but I don't know whether it was moved

12 again subsequently. I'm not sure.

13 Q. How did you effect the dislodging? Was it all done

14 manually?

15 A. Oh yes, yes.

16 Q. How many of you were there who moved the taxi?

17 A. It felt like three, four people.

18 Q. Did anybody check in the vehicle to see if there were

19 keys that had been left in the car, the taxi?

20 A. No. I'm not sure whether the taxi driver was -- I can't

21 recall whether the taxi driver was around and I can't

22 remember.

23 Q. But in any event, it was decided --

24 A. People were already pushing, and it was sort of to try

25 and aid them, really, to try to dislodge.

1 Q. Yes. Emma Plunkett, the casualty that you attended to,  
2 was held by the rear tyre of the taxi, I think, from  
3 what you're saying, on the offside. Is that right?

4 A. Yes, yes.

5 Q. So by moving the taxi, you were trying to move that back  
6 wheel away from her?

7 A. I think that's what we were doing, yes.

8 Q. Wouldn't it have been more effective, then, to push it  
9 up rather than down the road, as it were, in the  
10 opposite direction of travel from which it's facing?

11 A. I can't remember exactly. I mean, I know that her legs  
12 were trapped, but I can't -- we were doing what was the  
13 right -- you know, it was right, in terms of the  
14 mechanics of it, to try to dislodge it. But I can't  
15 recall -- it felt like -- I don't know whether we were  
16 lifting or whether we were just pushing or both. But  
17 I remember pushing.

18 Q. You remember pushing. Do you have a recollection of  
19 which direction you pushed it in?

20 A. As I said, it seemed to be in the direction of -- that  
21 was -- that it was travelling.

22 Q. I think, as you said, going northwards?

23 A. North, yes.

24 Q. So going down towards Euston?

25 A. Yes.

1 Q. But you don't recollect it moving that far?

2 A. I didn't until -- you know, I see this picture, yes.

3 Q. But it's possible, then, that the taxi may have moved  
4 subsequently on its own after you left the vehicle.

5 A. I don't think it could have -- I would be surprised,  
6 because we -- if we had that amount of -- I would be  
7 surprised if it could have moved on its own.

8 Q. I suppose it depends whether it was a manual or an  
9 automatic car and what sort of traction it had.

10 What I'd like to ask you about, then, is you don't  
11 recollect it moving that far down, but you were asked  
12 about other bodies and casualties in the area. Do you  
13 remember seeing anybody on the ground who might have  
14 been trapped by the vehicle in its current position; in  
15 other words, as you were working on Emma Plunkett to the  
16 right and further down the road from where you were  
17 working?

18 A. I can't recall anyone.

19 Q. I don't know if it's worth me giving you a description  
20 which might jog your memory. I'll just tell you this,  
21 that it was a man in his 50s with grey hair, he was  
22 balding, he was face down and wearing a jacket and he'd  
23 suffered a traumatic amputation of his right leg near  
24 the thigh?

25 A. I can't directly recall.

1 Q. No. But in any event, your efforts to extricate  
2 Emma Plunkett were successful, you were able to take her  
3 out from under the taxi, were you, and treat her more  
4 effectively?

5 A. Yes.

6 MS SHEFF: Thank you very much, Dr Peters.

7 LADY JUSTICE HALLETT: Any other questions for Dr Peters?

8 Dr Peters, if I've learnt one thing amongst the  
9 many, many things during the course of this inquest, it  
10 is: don't underestimate the importance of what you call  
11 the simple tasks.

12 I know you must have many awful memories of that  
13 day, I hope the knowledge that you helped save at least  
14 one casualty will be some comfort to you in coming to  
15 terms with 7 July.

16 A. Thank you.

17 LADY JUSTICE HALLETT: Thank you.

18 MR KEITH: My Lady, I hope it assists, I stray into the area  
19 of the facts with some degree of diffidence, but there  
20 are obviously a number of factual issues arising out of  
21 Dr Peters' evidence.

22 May I simply say this: that we would certainly  
23 support the notion that there was no suggestion that the  
24 black female whom he described was Gladys Wundowa,  
25 because, of course, my Lady knows she was taken into the

1 courtyard and treated by Dr Choudhary.  
2 It does not appear that she was or could have been  
3 Miriam Hyman -- and to that extent I certainly agree  
4 with my learned friend -- on account of the description  
5 and the location and the description of the lady that  
6 the doctor described as being dead, and it is certainly  
7 right to say that there was a third person, a black,  
8 middle-aged lady who was treated and who survived, but  
9 was treated in that near vicinity as well.

10 So my learned friend's supposition, although not  
11 accepted necessarily wholeheartedly by the doctor, may  
12 well be right. I say that, that is our considered view  
13 on looking at the evidence for what it is worth.

14 My Lady, may I invite you to call Reverend Hodge,  
15 please.

16 REVEREND DEBORAH JANE HODGE (sworn)

17 Questions by MR KEITH

18 MR KEITH: Good morning, Reverend, could you give your full  
19 name, please?

20 A. Deborah Jane Hodge.

21 Q. Reverend Hodge, on Thursday, 7 July, were you working in  
22 your office in Tavistock Square?

23 A. Yes.

24 Q. Is that the location of the Free Church and, in  
25 particular, your profession, which is to be the

1 secretary of the healthcare chaplaincy there?

2 A. Yes.

3 Q. Could you look, please, at one of our maps? It's  
4 [INQ10285-3]. Could you just tell us in which part of  
5 Tavistock Square your office is located? You will see  
6 towards the top of the page the bus, which is on the  
7 eastern side of Tavistock Square.

8 A. Yes.

9 Q. The northern side, which you may find of more use, is  
10 Woburn House and Tavistock Court?

11 A. My office is on the ground floor, the first door from  
12 the BMA in Tavistock Court. So in Tavistock Court there  
13 are two door entrances --

14 Q. Yes.

15 A. -- and mine is the one nearest the incident.

16 Q. So the one closest to Woburn House?

17 A. Yes.

18 Q. Thank you very much. You were at work that morning.  
19 Your statement describes how, after about 9.30, you  
20 heard a bang.

21 A. Yes.

22 Q. Did you immediately suspect the cause?

23 A. Yes.

24 Q. You feared that it was a bomb?

25 A. My previous working life was as a nurse and I trained at

1 St Bartholomew's Hospital in the 1970s, and was familiar  
2 with the sound of a bomb from the IRA activity at that  
3 time. So that echoed and my first reaction was "That's  
4 a bomb".

5 Q. So you went immediately to the window --

6 A. Yes.

7 Q. -- to look out to see what had occurred?

8 A. Yes.

9 Q. Did you see debris falling in the square?

10 A. It was as if someone had up-ended a bucket of metal  
11 confetti. There was this raining down of bits and  
12 pieces.

13 Q. From where you were, could you see the remains of the  
14 bus?

15 A. Not from the window, no.

16 Q. What could you see by way of that corner of the square?

17 A. From the window, you look to the opposite corner, so to  
18 speak. From the window, you can see the entrance to the  
19 square gardens and, if you move along that, you come to  
20 the corner, and I could see a car or a van there, but  
21 that was about it, and there was something stopped on  
22 the left as I looked out of the window, but I couldn't  
23 have said what it was, but there was a car or a van, but  
24 the main picture is of stuff raining down.

25 Q. Your statement records how you were, from somewhere near

1 your office, able to see the bus, the remains of the  
2 roof, so did you go somewhere else to look at it?

3 A. To the door, the door of our office. Once I got to the  
4 door, then I could look to the left, and you could see  
5 the remains of the bus and debris and cars appearing to  
6 have had an accident.

7 Q. Showing, if you will allow me to say so, great presence  
8 of mind, did you and a colleague start carrying out some  
9 practical preparations?

10 A. Yes, as I say, from my previous experience, if things  
11 would happen quickly, and there would be walking wounded  
12 as well as seriously injured. In our offices we have  
13 a large meeting space, we have a first aid officer, we  
14 have standard office first aid stuff, but we knew  
15 that -- and I knew from my previous experience that, if  
16 this was a bomb, terrorists, then people might not be  
17 able to move. Once they get into a building, you might  
18 not be able to leave, so we knew we had to make  
19 provision in case there were things that needed to be  
20 done.

21 Q. Did you start assembling flasks and filling them so  
22 people could have a drink?

23 A. Yes.

24 Q. And also trying to locate the first aid boxes in your  
25 building?

1 A. Yes.

2 Q. Having opened the door on to the street, as you  
3 suspected would be the case, did, in fact, somebody then  
4 come into your building, a young man who had obviously  
5 been cut by flying debris from the explosion?

6 A. Yes, and from what I recall, his name was Paul, and it's  
7 quite hazy now, you tend to remember the conversation,  
8 not the picture, and I think, not long after him, there  
9 was a woman too, and the woman was wrapped in a sheet  
10 and she had quite serious cuts and abrasions and we took  
11 her into the meeting room, which is where we'd sort of  
12 moved furniture and put things, and then she didn't want  
13 to stay and I -- I think a policewoman appeared and  
14 I said "She needs to go to hospital", and then  
15 somewhere, somewhere out of it all, a woman appeared  
16 driving a white car and she was bundled off and taken to  
17 hospital.

18 Q. So the lady with the injuries was placed in the back of  
19 the car and taken off?

20 A. Yes, and I think Paul went and sat and had a cup of tea  
21 because I wasn't there all the time.

22 Q. Those are the first two people, then, that you looked  
23 after?

24 A. Yes.

25 Q. One you took inside, and one you assisted in their

1 transportation to hospital. You mentioned

2 a policewoman.

3 A. Yes.

4 Q. As a result of your observations about the need for  
5 medical treatment, did the policewoman realise that you  
6 might be able to assist other injured and wounded at the  
7 scene?

8 A. Yes, she asked me to help with people along the side of  
9 the square, going away from the incident.

10 Q. So did you go out into the road and to the adjacent  
11 building --

12 A. Yes.

13 Q. -- and try to start helping those persons who had been  
14 cut, the walking wounded?

15 A. The majority hadn't got cuts and bruises particularly,  
16 cuts and abrasions. There were some folk who complained  
17 they couldn't hear and some folk who said they -- their  
18 chest hurt and, having done an assessment of whether  
19 their pulse was okay and not -- didn't -- and they were  
20 conscious and able to speak, I just gave the people that  
21 were with them sufficient advice until formal help came.

22 Q. Around this time, it seems from your statement that you  
23 also collected sheets and towels and blankets. To what  
24 end did you decide that was a sensible step to take?

25 A. One of the problems was these people felt cold and, if

1 you have shock, you become cold, and I knew that, if  
2 they could be kept warm and reassured and given sips of  
3 water rather than anything else to drink, then when  
4 formal help came, they might be in a better state to be  
5 able to receive that more formal help. Simple first  
6 aid, really.

7 Q. Having done that, did you find yourself walking along  
8 the north side of Tavistock Square, that is the side  
9 outside your office?

10 A. Yes.

11 Q. Did you come across a lady lying on the ground near to  
12 the gates --

13 A. Yes.

14 Q. -- to the gardens?

15 A. Yes.

16 Q. Could you look, please, at [INQ10285-3] again, which is  
17 the map, and just describe where you think the person  
18 was who was being tended to near the gate to the garden?

19 A. Where "Tavistock Square" is written and the number "5",  
20 there's an entrance to the Tavistock Square gardens.

21 Q. In the middle, yes?

22 A. Yes, she was just there. I think she was on the --  
23 I can't remember whether she was on the pavement or on  
24 the actual entrance to the -- because cars can go in  
25 there. I don't know whether she was on the pavement or

1 the bit where the cars travel.

2 Q. Was she being tended to by some people whom you  
3 discovered were doctors from the BMA?

4 A. Yes.

5 Q. Having seen whether there was anything you could do for  
6 her, did the policewoman then ask you to enter the BMA  
7 building itself and see whether you could help out  
8 there?

9 A. The two -- I think it was two people with the woman.  
10 I asked if there was anything I could get, thinking,  
11 "Well, first aid kit's in the office", and actually,  
12 what they needed was a pen, and I don't know what --  
13 I assumed the pen was either to write on her hand or  
14 something about --

15 Q. Her condition, and her priority?

16 A. Her condition or something, yes, but I went and got the  
17 pen, and then the policewoman said, "Can you come to the  
18 BMA?".

19 Q. When you entered the BMA, do you have any sense of what  
20 time that was? How long after the explosion you were  
21 there?

22 A. I've no idea, because time went. I've heard this  
23 morning and recall quite clearly the silence and time  
24 freezing, because that's what happens.

25 It must have been 20 minutes, maybe 20 minutes,

1 quarter of an hour. It must have been, just by

2 recalling where I walked and who I talked to and what

3 I did. It wasn't in the immediate.

4 Q. When you entered the courtyard, what do you recollect of  
5 the general scene?

6 A. Ordered chaos. It was chaotic, but actually it was  
7 quite ordered. Those with injuries predominantly were  
8 on something.

9 Q. Tables?

10 A. Tables, predominantly, and most had people with them.

11 Q. Did they appear to be the same sort of people whom you  
12 had seen outside in the square?

13 A. Yes, they weren't paramedics or -- they weren't in  
14 uniform.

15 Q. They were in suits or shirt sleeves?

16 A. Yes, yes.

17 Q. Did it seem to you that most of the people being treated  
18 in the courtyard, therefore, had somebody tending to  
19 them?

20 A. Yes.

21 Q. Do you recollect a significant number or any number of  
22 paramedics or persons in medical uniforms?

23 A. I remember a few ambulance, green uniforms, ambulance.

24 I remember firemen appearing with towels from

25 County Hotel because we had nothing to keep people warm

1 with. I can't recall paramedics particularly.

2 Q. We know from your statement that you came to offer your  
3 assistance and to look after a gentleman who you  
4 gathered was from Australia in some way, and we know  
5 that that was a man called Mr Sam Ly.

6 Could you just tell her Ladyship how you came to  
7 offer your assistance to him in particular?

8 A. I think it was just because that was the first person  
9 there as I walked -- as I came in to the courtyard. He  
10 was on the left and I think somebody said to me "Hold  
11 this", and that was an infusion bag, and that's when it  
12 began.

13 Q. He was conscious, was he not?

14 A. Yes.

15 Q. Because he told you repeatedly that he wanted to go  
16 home?

17 A. To Melbourne.

18 Q. To Melbourne. Were you able to see the extent or the  
19 nature of his injuries?

20 A. Shoulder, what was remaining of shoulder, and it was the  
21 right side, he was lying on his left side. He --  
22 I can't recall what I thought -- I knew the shoulder  
23 injury was significant, but I can't recall whether  
24 the -- I did some -- tried to do some work with this in  
25 trying to get it out of my head and I thought he had

1 some minor scalp or head injury, but I can't recall that  
2 significantly. But he was cold, he wanted to go home,  
3 it was cold, it was rainy, and Melbourne is warm.

4 Q. You've made reference to the fact that there was already  
5 a drip bag, so therefore a cannula.

6 A. Yes.

7 Q. Do you also recall that there was some form of dressing  
8 on his shoulder as well?

9 A. Yes, yes.

10 Q. While you were with him, do you recall there also being  
11 one or two other people?

12 A. Yes.

13 Q. An ambulance woman called Jess, Jessica Green?

14 A. Yes, she held his head.

15 Q. She held his head. Also, you will have seen this  
16 morning, or you will have seen through the videolink,  
17 I should say, a doctor with a Northern Irish accent?

18 A. Yes, and I can't recall that at all.

19 Q. You don't recall him at all?

20 A. But I do remember someone else coming. Not sure of the  
21 name, because there was thinking whether another line  
22 might be helpful, as supplies had arrived, and thinking  
23 about whether that would be put in his ankle, because  
24 that was a bit of him that was accessible, and  
25 I remember thinking he had sort of brown suede-y

1 trainers on.

2 Q. Did that person appear to you, therefore, to be one --  
3 an additional, one more of the doctors --

4 A. Yes.

5 Q. -- who was working inside the BMA?

6 A. Yes.

7 Q. Did Mr Ly's condition change or alter during the time  
8 that you were caring for him and reassuring him, holding  
9 his hand?

10 A. He became quieter, and I can't remember whether it  
11 changed significantly once we moved into the Hastings  
12 room.

13 Q. Did you assist in carrying him up to the Hastings room?

14 A. Well, I had the bag, and I can't -- there's a slight  
15 recollection that, once he was transferred to  
16 a stretcher to go into the ambulance, by then I think  
17 his head was bandaged and other things had happened, and  
18 I've got a recollection of a conversation but that might  
19 be just hazy.

20 Q. All right. I don't want to press you about detail that,  
21 for obvious and understandable reasons, you've tried to  
22 put out of your mind, but may I ask you this finally in  
23 relation to your care of Sam Ly: do you recall there  
24 being a time when there was some discussion of the  
25 priority with which he should be, or would be, expected

1 to be removed by ambulance from the BMA building?

2 A. Yes. I think at one stage there was even a board with  
3 information on it about who was here and how it would go  
4 and I think he was probably the first, or certainly very  
5 nearly the first, to go.

6 Q. In your statement you specifically recall there being  
7 a gentleman from the BMA building who was coordinating  
8 casualties and listing the order of priorities and  
9 taking personal details from the casualties and trying  
10 to apply some form of order to their care.

11 A. Yes.

12 Q. There must have been equipment bags, dressings, debris  
13 everywhere?

14 A. When we moved into the Hastings room, equipment arrived,  
15 and my background in nursing was operating theatres and  
16 one of the things you're taught is about tidying up and  
17 being ordered and making sure people can find the right  
18 things at the right time. So there was a little --

19 I did a little bit of, sort of -- I suppose tidying up  
20 is the best description, but trying to make some order.

21 And there was one guy who had burns to his legs and we  
22 were -- they were soaking dressings in saline and  
23 I remember putting some of these dressings in a bag and  
24 tidying up.

25 Q. Were more casualties being brought in all the time, into

1 the Hastings room?

2 A. The first lot were the serious casualties from the bus.

3 Over time, the folk that were at, I think, County Hotel

4 were brought through and sort of triaged. I remember

5 a lady having what we -- the doctor probably diagnosed

6 as a broken collar bone, but clearly shaken and couldn't

7 go anywhere, and they were then organised and triaged

8 and cared for, like in any accident and emergency

9 department.

10 Q. Amongst their number, do you recall there being a black

11 lady who was wrapped in a blanket?

12 A. Yes.

13 Q. Did you look after her at all?

14 A. I think she was the one with the broken collar bone.

15 Q. She was the one with the broken collar bone?

16 A. I think so. Well, that's the recollection I have,

17 a quite large lady who had had an argument with her

18 daughter that morning.

19 Q. All right. Well, we have no information as to that,

20 I won't explore that with you. She was obviously

21 brought in from Tavistock Square into the Hastings room.

22 Can you recall anything else by way of the nature of her

23 injuries or her appearance, her age for example?

24 A. She was probably late 40s, early 50s. I want to say she

25 was wearing something green, but that may not be right.

1 Q. Did you gain any impression as to whether or not she was  
2 brought in directly from the bus or whether or not she  
3 was somebody who had been on the pavement or the road?

4 A. No, I think she came -- she talked about being on the  
5 bus.

6 Q. Do you recall whether or not she was taken from the bus  
7 to the Hastings room or whether she'd been brought in  
8 from somewhere else?

9 A. I don't know, I think she'd been brought in from  
10 somewhere else.

11 Q. Thank you very much. Did you assist in taking Sam Ly to  
12 the ambulance, which we know from other evidence came to  
13 the rear of the BMA building to take him away at around  
14 11.00?

15 A. Yes, I remember walking with the stretcher to the  
16 ambulance.

17 Q. After he departed, and after you continued to assist the  
18 other casualties in the Hastings room, for how long did  
19 you remain in the BMA building, do you think?

20 A. I think I made my first attempt to get back to my own  
21 office probably about 3.30, 4.00. I think I eventually  
22 got back to my office at 5.30.

23 Q. Was there some briefing process conducted in the BMA, as  
24 far as you can recall?

25 A. Yes, yes.

1 Q. Did you take part in that?

2 A. I remember we were concerned that, having dealt with the  
3 casualties, there was lots of people who needed to go  
4 places, and how could we organise that in terms of  
5 whether -- because transport was obviously not working  
6 well, communications weren't working well, and there  
7 were people that needed to go back to airports, and  
8 I think -- I think they were grouped together to travel  
9 together. Whether that was on foot or anything else,  
10 I'm not sure.

11 Q. You made it back to your office in due course?

12 A. Yes. I couldn't go out the front door. I went round  
13 the back of the BMA to try to get back to the office one  
14 way, and they said, "You can't get in there at all", and  
15 I returned to the BMA and one of the BMJ staff said,  
16 "Well here's £10" and somebody else said, "Here's  
17 a spare mobile phone" so that I could get home, because  
18 I had assumed, because I couldn't get through to the  
19 office, that my office had been evacuated and was  
20 closed.

21 But then I had -- then I thought, "No, I really do  
22 need to try to get back", and when I got back to the  
23 office, two people had waited in the office all day to  
24 see what had happened to me.

25 Q. Finally, you were able to get to Euston, I think, and

1 get a train home?

2 A. Yes, yes.

3 MR KEITH: Reverend, thank you very much for answering those  
4 questions. There may be some more for you from my  
5 colleagues:

6 LADY JUSTICE HALLETT: Mr Coltart?

7 Questions by MR COLTART

8 MR COLTART: Reverend, just briefly, if I may, in relation  
9 to Mr Ly, can we assume that it was perfectly obvious to  
10 you and, indeed, to the paramedic, Jessica, that Mr Ly  
11 was urgently in need of hospital treatment?  
12 You have to answer, I'm afraid, because the  
13 transcript won't pick up a nod, that's all.

14 A. Sorry, yes.

15 Q. I'm grateful. You've mentioned in your witness  
16 statement that you thought it was perhaps for a period  
17 of about 40 minutes that you were with Mr Ly while you  
18 were waiting for that evacuation process to take place?

19 A. Yes, that would probably be about right, I think.

20 Q. Was there a sense of anxiety or agitation during the  
21 course of that 40-minute period that the ambulance  
22 didn't appear to be arriving?

23 A. Not particularly on my part, and that's due, again, to  
24 experience. I was hospital chaplain at North and  
25 East Herts, and that was during the time of the

1 Potters Bar and Hatfield train problems, crashes, so  
2 I knew that actually to get the right people to the  
3 right place would take half an hour, probably, minimum,  
4 and so, although I was concerned, I couldn't say I was  
5 actually saying, "Come on, come on, come on, you know,  
6 you've got to get him to hospital, you've got to get him  
7 to hospital", because actually that wouldn't have helped  
8 him either.

9 Q. Your assumption, presumably, was that the ambulances had  
10 been ordered, as it were --

11 A. Yes, I ...

12 Q. -- but that it was going to take a while logistically --

13 A. Yes.

14 Q. -- in order to effect their arrival --

15 A. Yes.

16 Q. -- at where you were at the BMA?

17 A. Yes.

18 Q. Can I ask you this in relation to Mr Ly: you've talked  
19 about Ms Green, Jessica -- who we're going to hear from  
20 later this morning -- holding his head in order to keep  
21 him comfortable. Do you recall Mr Ly complaining about  
22 pain that he was suffering in his neck?

23 A. No.

24 LADY JUSTICE HALLETT: Sorry, before you go on, Mr Coltart,  
25 can we just go back one question?

1 MR COLTART: Yes.

2 LADY JUSTICE HALLETT: You said that it wouldn't have helped  
3 Mr Ly just for him to be rushed to hospital and you  
4 assumed the ambulances had been ordered and it would  
5 take a while to effect their arrival.

6 Do I understand, from what you've been saying, that  
7 you thought it would take a while to effect the arrival  
8 of ambulances who knew where to take the people involved  
9 in a major incident?

10 A. Yes, and --

11 LADY JUSTICE HALLETT: In other words, not just take them  
12 off to the nearest A&E, but take them to an A&E that  
13 could cope with people from a major incident. Is that  
14 what you meant?

15 A. Yes, but, also, I also meant that me getting agitated  
16 wouldn't have helped him. That if -- yes, you can be  
17 agitated inside, but you don't want to distress the  
18 person any further by showing your distress and  
19 crossness at a system not working.

20 LADY JUSTICE HALLETT: Sorry, Mr Coltart, I didn't mean to  
21 interrupt.

22 MR COLTART: That's helpful, thank you. Because I think he  
23 was being reassured, wasn't he, by yourself and by  
24 Ms Green, that everyone was doing everything they could  
25 to get him to hospital as quickly as possible?

1 A. Yes.

2 Q. Just going back to the holding of his head and you say  
3 that, as far as you recall, there was no complaint made  
4 by him, at that point, of suffering pain in his neck.

5 Do you recall there ever being any discussion about  
6 getting a spinal collar for him or whether one of those  
7 might be either appropriate or available?

8 A. I don't recall that kind of conversation at all, but it  
9 may have happened.

10 MR COLTART: Thank you. I have no further questions.

11 LADY JUSTICE HALLETT: Thank you. Ms Gallagher?

12 MS GALLAGHER: Nothing, thank you, my Lady.

13 LADY JUSTICE HALLETT: Mr Saunders? Ms Sheff? Yes,  
14 Ms Simcock?

15 Questions by MS SIMCOCK

16 MS SIMCOCK: Thank you.

17 I wonder if we could just explore whether you could  
18 give us any more assistance on the timing of the  
19 ambulance that takes Sam Ly to the hospital leaving?

20 We know that he has arrived in the accident and  
21 emergency department of the UCH, indeed he's arrived in  
22 resus, and a note made by 11.00. So it stands to reason  
23 that the ambulance must have arrived and he had been  
24 loaded and driven away some minutes before that.

25 Do you have any further recollection of the timing?

1 A. If I think back to perhaps going out of the office just  
2 before 10.00 to arriving at the BMA about 10.15, then  
3 that 40 minutes of his care would be about right,  
4 knowing the location of the BMA and the A&E department  
5 at UCLH. Bearing in mind that there was no traffic, his  
6 journey from the BMA to UCLH A&E would have been  
7 uninterrupted. About maximum 5 minutes, I would have  
8 thought, knowing the situation and the geography.

9 Q. Yes. Do you recall hearing a secondary explosion,  
10 a controlled explosion, occurring at all?

11 A. No, I remember we were -- had to move because they  
12 thought there might be a second device, but I don't  
13 remember the second -- a controlled explosion. That may  
14 have happened, but it's five and a half years ago.

15 Q. I just wondered whether that might be another reference  
16 point, but I'll leave it there. My Lady, just for your  
17 note, the resus note is at two different pages:

18 INQ9572-20 and page INQ9572-22.

19 LADY JUSTICE HALLETT: Thank you. Any other questions for  
20 Reverend Hodge?

21 Reverend Hodge, you realised quite soon after this  
22 incident, I suspect, that anyone involved was going to  
23 need counselling. Was that coming from your experience  
24 as a chaplain or as a nurse?

25 A. Both.

1 LADY JUSTICE HALLETT: Did you follow your own advice?  
2 A. Yes.  
3 LADY JUSTICE HALLETT: Good. Thank you very much for  
4 everything that you did that day.  
5 A. Thank you.  
6 LADY JUSTICE HALLETT: Shall we take a break now, Mr Keith?  
7 MR KEITH: By all means, my Lady.  
8 (11.40 am)  
9 (A short break)  
10 (11.55 am)  
11 LADY JUSTICE HALLETT: Mr Keith?  
12 MR KEITH: My Lady, may I invite you to call Jessica Green,  
13 please?  
14 MRS JESSICA LAUREN ASHFORD (affirmed)  
15 Questions by MR KEITH  
16 MR KEITH: Good morning.  
17 A. Good morning.  
18 Q. Because your statement is in your maiden name, could  
19 I invite you to give, when you give your name, your  
20 maiden name and your married name, please?  
21 A. Yes, my maiden name is Jessica Lauren Green, my married  
22 name Jessica Lauren Ashford.  
23 Q. Thank you very much. Mrs Ashford, in 2005, you were an  
24 EMT3, were you not?  
25 A. That's correct, sir.

1 Q. Were you based Edmonton ambulance station?  
2 A. Yes.  
3 Q. I think that morning, Thursday 7 July, you'd started  
4 your shift at 6.00?  
5 A. That's correct.  
6 Q. Were you posted to an ambulance, H, Hotel, 301?  
7 A. That's right.  
8 Q. You were one of the two people posted to the ambulance.  
9 Who was the driver?  
10 A. My crew mate, Nadene Conway.  
11 Q. The records show, Mrs Ashford, that morning, you'd been  
12 tasked by Central Ambulance Control to go to the  
13 North Middlesex Hospital to pick up a patient and  
14 transfer him to University College Hospital. Is that  
15 right?  
16 A. That's right.  
17 Q. I think, having transferred him, you were waiting in or  
18 just outside UCH doing the necessary paperwork?  
19 A. That's right.  
20 Q. While you were in the ambulance doing that paperwork,  
21 did you notice something somewhat unusual in terms of  
22 another ambulance going past you?  
23 A. That's right. We noticed we'd just caught up with  
24 a person we hadn't seen for a while, we noticed him  
25 drive off quite quickly in his ambulance with sirens on

1 and we could hear other sirens from around the area  
2 also.

3 Q. So what did you decide to do?

4 A. I think we were listening to, sort of, commercial radio  
5 at the time and we'd heard that there was an incident or  
6 a power surge reported on the news. We turned to our  
7 major -- our radio channel in our ambulance and could  
8 hear that there was activity going on via -- about an  
9 incident in London.

10 Q. So did you decide that you should speak to your own  
11 Control and tell them that you were available to help,  
12 if you were needed?

13 A. That's right. I don't think we had quite finished our  
14 paperwork, but with something that you can hear is  
15 urgent going on, we made ourselves available at that  
16 point.

17 Q. Could we perhaps have on the screen [INQ8997-2]? If it  
18 could be rotated, is that the paperwork? It's a summary  
19 of the journey that you'd made that morning, dispatch  
20 time and, towards the right-hand side of the page, the  
21 next call time, and then you can see that the second  
22 entry relates to a location of a call to  
23 Tavistock Square?

24 A. That's right.

25 Q. But the entry ends at that point.

1 A. Yes, I would have made that entry about Tavistock Square  
2 after we'd been to Tavistock Square and dealt with that  
3 incident.

4 Q. Of course, but the first entry would have been the entry  
5 you were compiling in the ambulance?

6 A. Yes, and each patient has a report form specifically  
7 about them and their treatment, and I would have been  
8 completing that necessary paperwork on my first patient  
9 of that day that we'd just conveyed.

10 Q. Let's look, please, then, at the calls that you made to  
11 Central Ambulance Control and their responses. Can we  
12 have, please, [LAS565-40]?

13 At 09.48, at the top of the page there, you can see  
14 H301. That's you, isn't it?

15 A. Yes.

16 Q. The first entry, and then there's a radio channel 9  
17 indicated under "Mode".

18 A. That's right.

19 Q. H301:

20 "301 reporting as requested, over."

21 Then the Control says:

22 "Go ahead with your report.

23 "We did a transfer to UCH. We're standing by here,  
24 sent by channel 2, over, to this channel 9, over."

25 The Control replies by saying:

1 "Thank you. [We] show you [as] standing by."

2 A little further down the page there seems to be  
3 another message done by way of electronic log, H301, at  
4 09.48.14, standing by. So that may be the result of  
5 your earlier call.

6 A. Yes, I believe so.

7 Q. A log showing that you're standing by. Then, at  
8 09.48.35, we can see there H301 to go to Russell Square.

9 A. Yes.

10 Q. So, having spoken to your Central Ambulance Control, it  
11 seems that you weren't sent to Tavistock Square; you  
12 were being sent to Russell Square, in fact?

13 A. That's right.

14 Q. You set off for Russell Square. What happened on the  
15 way?

16 A. We were -- as we're not a local crew to that area, we  
17 would have had to look on the map to see which way to go  
18 to get to Russell Square. I think -- I believe, as we  
19 were driving down Woburn Place, we would have turned  
20 right to go towards Russell Square, and at that junction  
21 we could see some police cordon tape and someone waving  
22 at us to turn left rather than right.

23 Q. Did you stop and speak to the person who was waving at  
24 you?

25 A. Yes, we did. We stopped in front of the cordons and,

1 from that side, I believe we were south of the bus, so  
2 I could see the front of the bus and the roof missing  
3 and the person who was speaking to us, he was in  
4 a uniform, saying, "I believe you're needed in here".

5 Q. You weren't able to drive your ambulance through that  
6 cordon. So where did you go?

7 A. Because we had been sent to an RVP, a rendezvous point,  
8 at Russell Square, we were -- we wanted to go to that  
9 RVP point rather than to an incident. We should always  
10 go to where we're sent, for safety reasons.

11 So I said to Nadene, "I don't think we should go in  
12 here, I think we should try to find where we're being  
13 sent to". We believed there would be other LAS staff  
14 there to let us know what we were going to deal with.

15 So, in an attempt to do this, we drove around the  
16 block but just ended up on the north side of the bus  
17 looking down.

18 Q. So having appeared, first of all, on the south side, on  
19 the front of the bus or towards the south of the bus, on  
20 the front side, you went all the way round the block and  
21 came up from the Euston Road up towards the rear of the  
22 bus?

23 A. That's right.

24 Q. There were cordons, were there, on that side as well?

25 A. Yes.

1 Q. Did you then speak to some other police officers who  
2 told you a bit more about what had happened in  
3 Tavistock Square?

4 A. Yes. As we approached the cordon, Nadene and I both  
5 said "We're going to have to pull over, there's" --  
6 there were two police people, I believe, coming towards  
7 our ambulance, and we stopped and I wound down my window  
8 and the policewoman, from what I remember, was half sort  
9 of trying to open my door in an attempt to get me out to  
10 go and help.

11 I can't remember exactly what she described the  
12 incident as, but we -- Nadene and I agreed we needed to  
13 report our location and ask our Central Control whether  
14 we were in the right place, whether we were at the  
15 location we'd been sent or at the actual incident. We  
16 had no idea, really.

17 Q. Could we please have [LAS565-48]? At 09.57, we can see  
18 there H301:

19 "I don't know if you know we've got to our  
20 rendezvous point. We've pulled up on scene at a bus  
21 explosion. Police [are] on scene. Can't see any other  
22 ambulance crews ..."

23 You were, of course, the first crew.

24 "... or officers, over."

25 Then Control replies:

1 "Can you just confirm which RVP you're at."

2 You respond:

3 "On our screen we're showing Upper Woburn Street  
4 just going down to Tavistock Square. As I said, we're  
5 the only ambulance on scene, we're going to have to get  
6 out and go and deal with the patients, dead and injured,  
7 over."

8 Then they respond by saying:

9 "All received. Believe an officer is on his way to  
10 you now."

11 Before turning to what you did next, do you  
12 recollect, in the time that passed after that, coming  
13 across any ambulance officer who might have been an  
14 officer who was being sent, according to that message,  
15 to you?

16 A. No, not previous to that time, no.

17 Q. No, after that time. There's a reference there to  
18 "believe an officer is on the way to you". Was there  
19 ever a time after that when somebody came up to you and  
20 said, "I am now the officer who's been" --

21 A. Not until much later.

22 Q. -- "sent to take charge"?

23 A. Sorry to interrupt. Not until much later.

24 Q. Do you recall how much later?

25 A. I would have said half hour, 40 minutes.

1 Q. There was a gentleman called Paul Gibson, who became  
2 Silver medic, who arrived around about 10.29, so about  
3 half an hour later.

4 A. Okay.

5 Q. Do you know Mr Gibson?

6 A. At that point, only by sight, really.

7 Q. All right. Was that the person whom you understood to  
8 be the officer who came to take charge?

9 A. Yes, yes.

10 Q. So having passed that message, what did you do next?

11 A. Nadene and I both got out of the ambulance. We --  
12 I grabbed two kit bags from the side of our ambulance,  
13 one an oxygen bag and the other a response bag.

14 I believe Nadene took over her paramedic bag and we  
15 walked towards the -- we walked with the police officer  
16 towards the scene.

17 Q. To the bus?

18 A. Not directly to the bus. I believe we approached more  
19 the arch of the BMA building, more in that direction  
20 first.

21 Q. We have a witness statement from your colleague,  
22 Nadene Conway, who refers to possibly using a trolley  
23 bed to carry medical equipment on from the ambulance.

24 Do you recall that at any stage?

25 A. I don't remember.

1 Q. You don't remember that?

2 A. It may have happened, but I don't recall that.

3 Q. Were there people walking around the scene?

4 A. I don't remember -- I remember people sort of standing  
5 or looking down at people on the floor. I don't really  
6 remember a lot of people walking around as such.

7 Q. The scene, we know from the evidence, was plainly  
8 a terrible one. Were you able to see bodies lying on  
9 the ground and human parts scattered around the near  
10 vicinity of the bus?

11 A. Yes, it was only when I sort of approached the arch of  
12 the BMA that I remember slipping on something and  
13 realising that it was parts of bodies, and then looking  
14 around and seeing just body parts and noticed up the  
15 wall of the BMA building, that was sort of splattered.

16 Q. Approaching that scene, what did you think your first  
17 priority was?

18 A. To look for how many patients we had, how many were  
19 dead, how many were alive, how many were walking  
20 wounded.

21 Q. How did you go about assessing that? Did you and your  
22 colleague try to take in the enormity of scene and count  
23 how many people were there and what the proper response  
24 might be, or did you go round and start tending to  
25 individual casualties?

1 A. We decided to split up, and obviously I can only speak  
2 for myself. It seemed that bodies on the floor  
3 generally had a couple of people around them and we  
4 approached -- well, I approached each person that was  
5 lying on the floor, just to look to see if they were  
6 dead, very badly injured or mildly injured, and briefly  
7 spoke to anyone that was dealing with them, those  
8 people. I walked towards the arch. Then I walked  
9 around to the right side of the bus, as I was looking at  
10 it, and I remember --

11 Q. The garden side?

12 A. Yes, I walked down the garden side between the cars and  
13 the bus to see if I could just look inside the bus, if  
14 there was any movement or injured people in there.

15 Q. As you approached each casualty, was it a question of  
16 assessing whether or not they were conscious or  
17 unconscious, whether they were, of course, alive or  
18 dead, and trying to prioritise the response?

19 A. Yes.

20 Q. We know from the records -- could we have [LAS565-54] --  
21 that there was a call at 10.05, so not long after your  
22 call at 09.57, H301:

23 "We're on [the] scene Upper Woburn Place. We've got  
24 no officers here at the moment. We appear to be the  
25 only ambulance as it stands at the moment after my ..."

1 Then there's a reference to a question mark and  
2 "look":  
3 "Eight casualties with serious injuries, amputations  
4 and burns. Gonna go back and assess the rest. We're  
5 going to need some more vehicles down here. Present  
6 location is Upper Woburn Place just coming up to  
7 Tavistock Square.

8 "Roger, all received."

9 It seems from the witness statement -- we're not  
10 hearing from her directly, but her statement is being  
11 read -- that Nadene Conway made that call and you  
12 didn't.

13 A. Yes.

14 Q. But did you discuss with her, prior to her making that  
15 call, what information should be given to the control  
16 room about the nature and extent of the casualties that  
17 you saw?

18 A. Yes, we did. We -- as I said, we'd split up to go and  
19 assess the situation. We then met up what I had in my  
20 head as sort of five minutes later to go and give  
21 a further report to Central Ambulance Control.

22 I believe we discussed how many approximately patients  
23 we could see severely injured and Nadene said, "I'll go  
24 back to the ambulance and give that report".

25 Q. Your earlier message had referred to dead and injured.

1 This message doesn't in fact, because it refers to, on  
2 the face of the transcript "serious injuries,  
3 amputations and burns".

4 Did you understand, by the time that that message  
5 was sent, that there were people who had died but for  
6 whom nothing could be done and, therefore, your priority  
7 was to ensure that the correct response was available  
8 for those who were living?

9 A. Yes, yes, we were both very aware there were people that  
10 were dead that couldn't be helped any further. There  
11 was no point in mentioning them -- there would have been  
12 no point in mentioning them on the radio to  
13 Ambulance Control, because we needed resources that  
14 could deal with the people that needed assistance.

15 Q. A Fast Response Unit crewed by a gentleman called  
16 Michael Cole appeared around that time, 09.58. Do you  
17 recollect there being any other ambulance men, ambulance  
18 officer or ambulance staff from LAS, present while you  
19 were carrying out this triage, essential triage?

20 A. No.

21 Q. Your statement refers to one particular person, a white  
22 lady who was on the ground, whom you recalled was not  
23 breathing and whom, after a quick examination, you  
24 believed to be dead.

25 I'd like to ask you about that person, if I may, and

1 start by asking you to look at a map, or a photograph,  
2 INQ10345 [not for publication].

3 Do you recall where that person whom you examined  
4 and whom you believed not to be alive was? I appreciate  
5 it's very difficult because of the sheer number of dead  
6 and the elapse of time, but do the best you can.

7 A. I believe she was on the -- on the road in front of  
8 the -- is it a Jaguar car that's half on the zebra  
9 crossing there?

10 I can see on that picture there's maybe two areas --  
11 oh, thank you -- there's two, maybe two patients lying  
12 in that area, and I couldn't say which of the two that  
13 lady was positioned at, but I believe it was in the  
14 middle of that road somewhere.

15 Q. You will see there that there is somebody crouched over  
16 in a yellow reflective jacket, a high-vis jacket.

17 A. Yes.

18 Q. That's the area in front of the Jaguar. Is that where  
19 you had in mind or somewhere further to the right or  
20 perhaps the left?

21 A. I couldn't say, to be honest. All I remember was she  
22 was lying in the middle of the road.

23 Q. Can you recall anything else of her appearance, her  
24 clothing or age or hair? Again, I appreciate it's very  
25 difficult.

1 A. I remember, when I approached her, she was lying half on  
2 her front, so face down on the road, and I believe there  
3 were two people with her. From what I remember, they  
4 were trying to put a cannula in her arm maybe.

5 Q. Did you assume that they were doctors from the BMA?

6 A. I did assume that, yes. I remember saying, "We need to  
7 assess this lady more fully, we need to get her on to  
8 her back". I said, "We will do a log roll. So I will  
9 stabilise the patient's head, if you wouldn't mind  
10 assisting helping with her body, roll her over on to her  
11 back so we can assess her more fully", which we did do.  
12 Looking down at her, I believe she was a white lady.

13 She had dark hair. I would have said in her sort of  
14 early 30s. I believe she had her eyes open. There was  
15 no breathing and no pulse and, when I was holding her  
16 head, it just -- her skull didn't really feel intact.

17 As there was no breathing and no pulse, I said,  
18 "I believe this lady's passed away, we need to cover her  
19 up and move on", and I think I closed her eyes.

20 Q. From what you've said -- and we understand that this is  
21 a terrible thing to have to recall -- you had no doubt  
22 that she was dead?

23 A. From feeling and finding no pulse and no breathing, by  
24 our protocols, a person who is dead in a major incident  
25 situation, there's nothing more that you can do.

1 Q. The scene was a very confused one and remained so,  
2 Mrs Ashford, because it's plain from other evidence that  
3 there was somebody who was on the pavement much nearer  
4 the BMA building who tragically died and was covered in  
5 a blanket, but the casualty nearest the Jaguar -- in  
6 fact, to the left of the Jaguar -- and if we have the  
7 photograph back on the screen, you can see people  
8 treating somebody towards the left to the front of the  
9 Jaguar -- may have been brought inside the building and,  
10 in fact, a cannula was placed by a doctor from whom  
11 her Ladyship has heard, a Dr Choudhary, inside the BMA  
12 building.

13 So I must ask you whether, firstly, you're sure that  
14 the person whom you saw and whom you believed to be dead  
15 was actually in the road --

16 A. Yes.

17 Q. -- or whether there is any possibility that, if they  
18 were in the road, in fact they weren't dead? But from  
19 what you've said, you seem to be sure on both points.

20 A. Yes, I'm sure.

21 Q. The one question I haven't asked you yet is whether you  
22 recollect anything of their clothing or of their skin  
23 colour. Can you help us with either of those issues?

24 A. I believe she was a white lady, but I don't remember  
25 anything about her clothing at all.

1 Q. All right. When you moved away, did the doctors who had  
2 been there with you move away also?

3 A. I don't think so, no. After I had -- after I had said  
4 that I believe the lady was dead, it was just then,  
5 after then, that I walked back and spoke with Nadene,  
6 reference going back to the ambulance to make that  
7 further report, and I think, when I looked back around,  
8 the doctors were still dealing with her and --

9 Q. The ambulance wasn't far away?

10 A. No.

11 Q. So this must have occurred, then, perhaps around about  
12 two or three minutes after 10.00? The first call was at  
13 9.57, and the second call was at 10.05.

14 A. Yes, yes, I see, yes.

15 Q. Nadene having made the call and you having completed  
16 your initial assessment, having been round as far as you  
17 were able, you made reference to the courtyard. How was  
18 it that you came to be inside the BMA building?

19 A. I think it was not long after that conversation with  
20 Nadene we were told to move everybody inside the  
21 courtyard of this building, that only then I sort of  
22 found out was the BMA building. Table-tops appeared.  
23 We put people on to table-tops and I remember carrying,  
24 I think, maybe just one or two patients into that  
25 courtyard.

1 Q. By lifting the boards or table-tops on which they were  
2 lying?

3 A. Yes, yes, that's right. We were told there was  
4 a secondary device, they were going to perform  
5 a controlled explosion and that we would need to turn  
6 our mobile phones off.

7 Q. By this stage, you would have been aware of the sheer  
8 number of casualties. Did you have to go back to the  
9 ambulance and get more equipment to deal with the  
10 numbers that you could see were inside the courtyard?

11 A. I remember returning to the ambulance and I remember  
12 Nadene returning to the ambulance to get as much kit as  
13 we possibly could off of it, but I don't remember what  
14 times that would have been.

15 It was -- certainly it was before we were moved  
16 inside the BMA. From what I remember, after that point  
17 we weren't allowed back out to our ambulance.

18 Q. Do you recall what sort of equipment it was that she'd  
19 gone back to get or what further equipment you'd gone  
20 back to get?

21 A. I think we'd gone back to get all the -- we carry two  
22 types of stretcher boards, I believe we took both of  
23 those back, collars for spinal injuries, suction units,  
24 everything that I think we could carry.

25 Q. Everything could you get out of the ambulance?

1 A. Yes, pretty much.

2 Q. Do we take it that you went back to get the further  
3 equipment because the equipment that you had initially  
4 taken out of the ambulance had run out?

5 A. I don't think it -- it was -- it was different kit.  
6 I think the first -- the first thing I took over was an  
7 oxygen bag. It would have been to go back to get  
8 different equipment rather than replacements.

9 Q. All right.

10 A. There weren't really any replacements. What you carry  
11 on an ambulance is to treat one patient normally, you  
12 don't sort of --

13 Q. You didn't have equipment to treat multiple casualties?

14 A. No.

15 Q. Inside the courtyard, you came across a man who was  
16 lying on a board who had very severe injuries to his  
17 right shoulder and right chest. Did you start to tend  
18 to him?

19 A. I believe I went over to him. I think I still had my  
20 oxygen bag in my hand and I was trying to work out who  
21 needed the oxygen the most out of all of these patients  
22 that were lying on the floor, because I only had one  
23 cylinder to give it to, and he was conscious and  
24 breathing and responsive, so I went round to other  
25 patients before returning back to him.

1 Q. Did you stay with him for some time after that?

2 A. On my return, yes.

3 Q. He was conscious. He was talking, was he not?

4 A. Yes.

5 Q. Were you able to see the extent of his injuries or was  
6 it plain that it was just focused on -- or were you just  
7 focused on his shoulder and chest?

8 A. I could see he had an obvious wound to his right  
9 shoulder moving into his chest. I noticed maybe small  
10 cuts or abrasions to his face. The rest of his body was  
11 intact. I don't believe we had any further -- I'm not  
12 sure if he had a collar on him at that point, but  
13 I realised he needed to be in a stable, immobile  
14 position, so I took hold of his head so that he couldn't  
15 move any further, assuming that what had happened -- if  
16 you don't know a history, you only assume for the worst,  
17 and that I would keep his head still in case of any  
18 spinal or neck injuries.

19 Q. To see whether he had suffered any such injuries, did  
20 you ask him whether he could move his legs?

21 A. Yes, he could look at me, he was speaking fine, he could  
22 move his legs. I have a vague recollection of looking  
23 down the rest of his body and not seeing any other open  
24 wounds, but I didn't want to move him around too much to  
25 look.

1 Q. He was sufficiently alert to be able to tell you his  
2 name, Sam Ly, and his age and where he was from,  
3 Melbourne in Australia. You discussed or you told him  
4 what you believed had happened to him, that he had been  
5 on the bus and there had been a bomb.

6 Did his degree or level of consciousness remain  
7 stable or was there any deterioration in his condition  
8 while you were looking after him?

9 A. I would say he stayed pretty much the same. When  
10 I first went to him, I introduced myself and, like you  
11 said, he gave his name and age, where he was from. He  
12 asked -- I remember him asking me what had happened and  
13 I said there had been an explosion on the bus, I didn't  
14 want to -- I remember not wanting to say specifically  
15 "There's been a bomb", because it would be more  
16 distressing to him, I thought. He was moaning and  
17 crying out in a little pain.

18 Q. In terms of the treatment, was it possible to insert  
19 a cannula into him, do you recall?

20 A. I wouldn't have been able to make that decision. As  
21 a technician --

22 Q. No, but do you recall anybody inserting a cannula, with  
23 difficulty or not?

24 A. Yes, I remember, I believe it was an Asian doctor  
25 approaching us. First, he tried a couple of times,

1 I believe, to insert a cannula into his left arm and  
2 wasn't successful. I remember Sam crying out, telling  
3 me to make him stop. Then he moved on to his right arm  
4 and managed to get a cannula into his right arm,  
5 I believe, and set a bag of fluids up.

6 Q. Were you also helped by a lady you may have seen this  
7 morning, Deborah Hodge, Reverend Hodge, whom you knew to  
8 be called Debbie?

9 A. Yes, that's right. I remember us introducing ourselves  
10 and she was on the right side of Sam, I believe, holding  
11 the fluids.

12 Q. We know from the chronology and the time at which he was  
13 removed -- because we know the time that he arrived  
14 subsequently at hospital in the resuscitation room at  
15 11.00 -- that he must have been in the courtyard with  
16 you for quite some time.

17 Did you become concerned as to his condition and the  
18 overriding need to get him to hospital?

19 A. I knew he needed to get to hospital as soon as possible,  
20 but I wouldn't have said his condition was deteriorating  
21 that rapidly.

22 Q. Was there a debate between yourself and any of the  
23 doctors who were there as to the priority with which he  
24 should be removed?

25 A. I don't remember that, no.

1 Q. Was he moved at all to somewhere inside the BMA  
2 building, from the courtyard to a room?

3 A. Yes, we carried him across the courtyard into a room  
4 at -- well, on the other side of the building, that  
5 I now believe was the Hastings suite. Is that correct?  
6 He was moved into that room, yes.

7 Q. Were you helped when you moved him by some of the  
8 doctors? We heard this morning from a doctor from  
9 Northern Ireland who had a Northern Irish accent. Do  
10 you recall people assisting you when he was moved to the  
11 Hastings room?

12 A. I remember other people helping carry, but the only  
13 other person I remember throughout really was the lady  
14 we heard from earlier.

15 Q. Reverend Hodge?

16 A. That's right.

17 Q. All right. Once inside the Hastings room, was there any  
18 particular change in his condition that you can recall?

19 A. I believe he was a bit quieter, he wasn't shouting in  
20 pain as much as he had been. He didn't seem as  
21 distressed as he had been out in the courtyard. But  
22 I wouldn't have said -- he was still focused on me,  
23 answering my questions.

24 Q. Was there an attempt to insert a second cannula, do you  
25 recall --

1 A. No, I don't.

2 Q. -- or to change his drip?

3 A. No, I don't remember that.

4 Q. When the ambulance arrived, did you assist in carrying

5 Sam down to the rear entrance of the BMA where the

6 ambulance was parked?

7 A. Yes, throughout my time with Sam he kept asking -- kept

8 asking me not to leave him, so I was determined to see

9 him, myself, into the ambulance.

10 When we took him into the ambulance, I asked the

11 name of the ambulance -- one of the ambulance crews that

12 was going to be taking him to hospital just so that

13 I could say, "Look, Sam, this is" -- I think his name

14 was Eric, "He's going to take care of you from now on,

15 I'm going to have to go", and I think he just said

16 "Okay" at that point.

17 Q. After Sam Ly departed in the ambulance, did you stay and

18 assist with looking after other casualties, both in the

19 Hastings room and the courtyard?

20 A. Yes, I couldn't really say anything specifically that

21 I did, but I remember going up and assisting with

22 removal of the couple of other patients, just carrying,

23 really. I remember holding one lady's hand, because it

24 didn't seem there was anything else that I could do at

25 that point.

1 Q. While you were looking after Sam, did you gain any  
2 impression as to whether or not the other people in the  
3 room had a sufficient number of people tending to them  
4 and perhaps equipment as well, or did you ever gain  
5 a sense that people were being left unattended?

6 A. No, I don't remember anyone calling out for help "Over  
7 here" or anything like that. It all seemed quite quiet  
8 and -- yes, it seemed that everyone was being dealt with  
9 at that point. So far as to the -- I think in the end  
10 I started tidying up and putting bits of equipment  
11 together and making things look more organised, I guess.

12 Q. You stayed there until later, when you went, I think  
13 straightaway, to a debrief at Millwall. Is that right?

14 A. That's right.

15 Q. And then only after that were you able to go off-duty?

16 A. Yes.

17 MR KEITH: Mrs Ashford, thank you very much. Those are all  
18 the questions that I have for you, but there may be some  
19 more from the lawyers representing the interested  
20 persons.

21 LADY JUSTICE HALLETT: Mr Coltart?

22 Questions by MR COLTART

23 MR COLTART: Thank you. Only a few, if I may.

24 Can I ask you some questions, please, about when you  
25 first arrived at the bus and what you were able to see?

1 If we could just get the aerial photograph of the bus  
2 back up, please, on the screen. I represent the  
3 interests of a young man called Philip Russell, who died  
4 on the bus that morning, and his parents are here today.  
5 You mentioned that, when you arrived -- did you do  
6 a sort of tour of the bus? Am I right in thinking that  
7 you said you went round the bus to the park side of it,  
8 the offside of the bus as we're looking at it?

9 A. That's right.

10 Q. Were you able to get all the way round?

11 A. No.

12 Q. All the evidence suggests that Mr Russell died  
13 immediately on the bus and he was located on the lower  
14 deck on the offside, so the bottom right-hand corner of  
15 the bus as we're looking at it here.

16 When his body was recovered, he was partly hanging  
17 out of the bus, although he may have been covered by  
18 a blanket which had been placed over him by a fireman.

19 Do you recall, are you able to recall, seeing anyone  
20 in that position as you went round the bus when you  
21 first arrived?

22 A. No, I don't recall, no, sorry. I remember seeing body  
23 parts around that area, but I don't recall anything as  
24 you've described.

25 Q. No one in that position as I've described it to you this

1 morning?

2 A. Not that I remember, sorry.

3 Q. Not at all, we quite understand, thank you.

4 In which case, can I just ask you a few more general  
5 questions, if I may, about the circumstances of your  
6 deployment that morning?

7 We know that yourself and Ms Conway had been to the  
8 North Middlesex Hospital, which is up in Edmonton,  
9 I think, isn't it?

10 A. That's right.

11 Q. You had arrived there at 8.34, according to the records  
12 that you completed later that day, and then you had  
13 driven from there back to University College Hospital to  
14 drop off the patient you had collected from  
15 North Middlesex. Is that right?

16 A. That's right.

17 Q. Can you recall now -- it's terribly difficult with the  
18 passage of time -- whether you had your ambulance radio  
19 on during the course of that journey back from Edmonton  
20 to UCH?

21 A. I was in the back of the ambulance with the patient the  
22 whole time. So if the radio had been on, I wouldn't  
23 have been able to hear it there anyway.

24 Q. So we would have to ask Ms Conway about that. She was  
25 driving the appliance, presumably, was she?

1 A. She was. I don't know whether she had the radio volume  
2 up or down.

3 LADY JUSTICE HALLETT: She didn't tell you afterwards, when  
4 you got out, "I've heard anything on the radio", she  
5 didn't suggest there was any message received --

6 A. No, not at all.

7 LADY JUSTICE HALLETT: -- or whether she'd heard anything on  
8 commercial radio or anything?

9 A. No, the first we came to hear of it was, as I said  
10 earlier, when we heard on commercial radio that there  
11 had been a power surge or incident over Aldgate sort of  
12 King's Cross way, and I believe then we were -- it was  
13 only at the hospital at the UCH we were aware that there  
14 was a major incident over that side of London.

15 LADY JUSTICE HALLETT: The two of you were together at that  
16 time?

17 A. Yes.

18 MR COLTART: You say in your statement that you put the  
19 radio on in the cab. When you saw your colleague  
20 departing at high speed, you put the radio on in the  
21 cab. So might it have been, in fact, in fairness to  
22 you, the radio had been off for a period of time before  
23 that happened?

24 A. Our ambulance radio would never have been off, but the  
25 volume may have been turned down, yes.

1 Q. I see. Presumably, all the while that you were at the  
2 hospital, I think Ms Conway explains in her statement  
3 you were still on status red because you were processing  
4 the patient who had been taken there, you were  
5 completing the paperwork and so on.

6 Does that mean there would have been no reason for  
7 you to receive information via your mobile data  
8 terminal, because would that only become active once  
9 you'd signalled to Central Ambulance Control that you  
10 were green and available for action again?

11 A. Yes, that's right.

12 Q. So one way or another, you'd received no information  
13 that morning, until about 9.50, about the various  
14 incidents which were taking place in London?

15 A. No, the channel that our radio in our ambulance would  
16 have been tuned to, channel 2, which we saw earlier,  
17 that would only cover the area that our ambulance is  
18 from, say, north London, Edmonton, that particular area  
19 of London. So we wouldn't have even heard -- Central  
20 London is covered by a different channel. So even if  
21 the volume had been up or if we had heard anything, we  
22 probably wouldn't have been informed anyway.

23 Q. It wouldn't have related to your particular geographical  
24 area?

25 A. That's right, yes.

1 Q. Because the major incident channel, channel 9, and later  
2 channel 7, that was designed to be on a pan-London  
3 basis, cover the whole of London. But before that,  
4 which channel you listened to depended upon which  
5 ambulance station you were positioned at, and it covered  
6 your immediate geographical area?

7 A. That's right.

8 Q. Could we just have back up on screen, please, [LAS565-54]?

9 This is the second of the two calls you make. You've  
10 already been in touch with your Ambulance Control room  
11 at 9.57 to give them your first report on arrival, and  
12 this is your second report, which Mr Keith has already  
13 asked you some questions about, but you refer to the  
14 serious nature of the injuries for people who have  
15 survived the initial blast and you request additional  
16 assistance, and you're told, we see in that final line  
17 there, by Central Ambulance Control:

18 "Roger, all received at 05."

19 In other words, at 10.05, the time that that  
20 transmission takes place.

21 From that point in time, you then went to the  
22 courtyard, you embarked upon your very considerable  
23 assistance that you provided to the people within that  
24 courtyard, but were you confident in the knowledge, at  
25 that stage, that you made a successful radio contact

1 with Central Ambulance Control and that further  
2 appliances were indeed in the process of being  
3 dispatched to you at Tavistock Square?

4 A. It was -- as I said earlier, it was Nadene that made  
5 this transmission, this message to Control. When she  
6 came back to me at the scene, she said, "I've sent  
7 a report", and I believe she said that it had been  
8 received but no further information had been given to us  
9 about approximate times of arrival of further resources  
10 or anything of that nature. It was just that her  
11 message had been received.

12 Q. It may have been, of course, that there was -- to be  
13 a delay, there could have been any number of reasons as  
14 to why the ambulances might not have arrived  
15 immediately, be it the traffic conditions, be it the  
16 logistical arrangements on that day, but the two of you,  
17 working in that courtyard, were at least confident, at  
18 that stage, you'd made a completed, successful  
19 transmission which appeared to have been received and  
20 that further assistance was now to be mobilised and sent  
21 to you at Tavistock Square?

22 A. Yes. As far as -- yes, as far as we were aware, we'd  
23 given that message, further resources, including  
24 officers, would be on their way. But once we were back  
25 inside and in that courtyard, we weren't allowed further

1 access to our ambulance to give any further reports or  
2 to receive them, so we just had to wait.

3 Q. We now know from our records -- and there's no dispute  
4 about this -- that, in fact, the next ambulances weren't  
5 dispatched to Tavistock Square until 10.42, some  
6 37 minutes after that message had been sent and  
7 received, and they arrived, the first of those  
8 ambulances, about ten minutes after that at about 10.50  
9 or so.

10 A. Okay.

11 Q. Did you become anxious in that intervening period of  
12 some 40 to 50 minutes that none of your colleagues had  
13 arrived, that no further ambulances were arriving to  
14 take away the seriously injured people you were dealing  
15 with?

16 A. Yes, I was concerned. It -- it was a very confusing  
17 time. I was very surprised when, after the incident,  
18 someone told me that that was the times the ambulances  
19 come up, come round to help, because in my head it might  
20 have only been 10 minutes. Time was very blurry.

21 Q. Fortunately, as it happened, in the meantime, patients  
22 were in good hands, they were in the BMA courtyard,  
23 being tended to by trained doctors and you had the HEMS  
24 team arrive at 10.20, and through a combination really  
25 of beg, borrow and steal there were sufficient supplies,

1 at least for the most part, of medical equipment and  
2 fluids and so on, but the priority must have been, in  
3 relation to some of the more seriously injured,  
4 evacuation rather than treatment at the scene?

5 A. Yes.

6 Q. Can we just deal with the issue of equipment? If we  
7 have a look at [LAS565-75], please. EC25 was another  
8 ambulance a bit like yours which had rather stumbled  
9 across the scene at Tavistock Square and, in fact, they  
10 left shortly after this message was sent, which we think  
11 was at about 10.27, to go to King's Cross. They say  
12 they are on scene at Woburn Place:

13 "Looks like there's a bomb gone off there. Doctors  
14 are requesting urgent more fluid please."

15 Then Central Ambulance Control ask them for their  
16 call sign again:

17 "EC25. We're treating casualties at Woburn Place.  
18 Doctors are on scene requiring urgent more fluids  
19 please. We're running out."

20 LADY JUSTICE HALLETT: Do we have a time for that,  
21 Mr Coltart?

22 MR COLTART: I think if we go back to the previous page [LAS565-74], at  
23 the bottom of the page, the entry immediately before it  
24 is at 10.27.

25 LADY JUSTICE HALLETT: Thank you.

1 MR COLTART: That might be the best I think we can do in  
2 relation to the timing of this message.

3 LADY JUSTICE HALLETT: After this?

4 MR COLTART: If we go over the page again, please [LAS565-76] still  
5 10.27, so it must be --

6 LADY JUSTICE HALLETT: Thank you.

7 MR COLTART: Thank you. So at this stage the doctors -- and  
8 one assumes by that we're talking about the BMA doctors,  
9 the treating doctors in the courtyard -- are urgently  
10 requesting fluids. Do you have a recollection of that  
11 call going out for more fluids or for more equipment of  
12 any other type?

13 A. No, I don't remember seeing another ambulance to make  
14 that report. I don't know what time anybody else  
15 arrived. It was all a bit hazy.

16 Q. I'm not sure that this particular crew ever made it into  
17 the courtyard, so you may not have seen them at the  
18 scene. I think they may have remained outside on  
19 Woburn Place because they drove off quite quickly from  
20 here to King's Cross. But do you recall, within the  
21 confines of the courtyard, requests being made by the  
22 treating doctors for more fluids or more equipment?

23 A. I don't remember as in voices shouting, "We need more of  
24 this, we need more of that". I only remember when  
25 I first -- when we first arrived at the scene and were

1 still out in the street, a doctor asking me, "Do you  
2 have this, do you have that?", I don't even remember  
3 what specifically they were asking for, and I remember  
4 saying that, "If it's not in this bag, then we haven't  
5 got it".

6 Q. We know, fortunately, as I say, that, periodically,  
7 supplies of fluids and other materials did arrive during  
8 the course of that 40- or 50-minute period. Could we  
9 just have a quick look also, please, at LAS696 [LAS696-2]? This is  
10 a document that was completed after the event by one of  
11 your colleagues, Mark Belkin. Do you remember him being  
12 there that morning? Do you know Mr Belkin?

13 A. I've only been introduced to him since the incident.

14 Q. Right.

15 A. I certainly didn't know him before it.

16 Q. Do you have a recollection of him being there that  
17 morning?

18 A. Yes, vaguely, yes.

19 Q. If we just go over the page, please -- perhaps we could  
20 just highlight the middle of that page, thank you -- he  
21 says that he was on the station doing some paperwork.  
22 He, too, was sent to Russell Square and he, too, came  
23 across the bus in the same way that you had. He talks  
24 about H301, another crew, being there, which was your  
25 crew, I believe, wasn't it, that was your call sign on

1 that day?

2 A. Yes, it was.

3 Q. Then towards the bottom of that page, he says:

4 "I had eight patients that I triaged into high  
5 priority 2s. At that time, I had lack of fluids and  
6 collars, what were the main shouts from the doctors."

7 Then he talks about the police moving everybody back  
8 for the controlled explosion which we know took place at  
9 about 10.45.

10 Again, were you conscious of requests being made for  
11 additional fluids or -- we assume that's spinal collars,  
12 is it, in relation to "collars"?

13 A. Yes, I believe so. I think by that point I was just  
14 with Sam, so my focus was pretty much just on him.

15 Q. Yes.

16 A. I was aware that other -- that this person, Mark, had  
17 arrived and I knew Nadene was still on scene. I think  
18 I just assumed that other equipment was being brought to  
19 us.

20 Q. It's perfectly obvious, if I may say so, that you were  
21 doing absolutely everything that you could to look after  
22 Mr Ly in those circumstances.

23 If there had been, for example, a spinal collar  
24 available for him, is that something which you would  
25 have considered applying or would that have been

1 inappropriate in the circumstances in which he found  
2 himself?

3 A. No, it would have been entirely appropriate. I don't  
4 remember whether he had a collar on or not. That sounds  
5 funny, but I was holding his head. Whether he had had  
6 a collar on or not, I still would have performed that  
7 action.

8 Q. For that very purpose, to protect his neck and his spine  
9 in the event that he suffered injuries of that  
10 description?

11 A. Yes, a collar isn't enough to immobilise someone fully.  
12 In a normal situation, you would have blocks either side  
13 of that person's head as well. So by my actions of  
14 holding his head, I was --

15 Q. He was in the best possible position that he could be in  
16 at that time?

17 A. I believe so, yes. If he had been in the explosion,  
18 then the danger would have been he could have had those  
19 sorts of injuries.

20 Q. Thank you. Finally this, if we could have a quick look  
21 at LAS232 [LAS232-2], please, this was the form which you completed  
22 after the event. If we go over the page, could we just  
23 enlarge the top half of that page for a moment, please?

24 Do you see that there's a section about "Major  
25 incident training sessions?"

1 A. Yes.

2 Q. You were asked on the form:

3 "Have you attended an LAS major incident training  
4 session?"

5 Yes, you had. When was that? It was in 1999.

6 Do you recall having received any refresher course  
7 or refresher training between that initial session  
8 and July 2005?

9 A. Yes, I believe when the triage cards were introduced to  
10 the service, I remember having the training on those.  
11 I don't recall a date, I'm afraid, but I remember it was  
12 between those two times.

13 Q. For the completion of the patient's details and  
14 according them a number as to how badly injured they  
15 were?

16 A. Yes.

17 Q. A little further down the page:

18 "Did you have the incident RT channel on your main  
19 set?"

20 You did, because I think you had been asked to  
21 switch to channel 9, which was the major incident  
22 channel, and you haven't circled "Yes" or "No" in  
23 relation to the handset.

24 A. Because we didn't have a handset, I didn't deem it  
25 applicable.

1 Q. Was that, can you recall at the time -- we may hear some  
2 other evidence about this -- but was that a fairly  
3 common complaint amongst ambulance crews at the time  
4 about a lack of handsets available to them for use when  
5 they were out and about and away from the ambulance?

6 A. In a general sense, yes, not related entirely to that  
7 incident, but in a general sense, yes, there was -- some  
8 ambulances had them, some didn't.

9 Q. Because I think you'd all been issued with a mobile  
10 phone at this point in time, but that was really  
11 designed for your own personal safety and protection,  
12 wasn't it, in case you got into a difficult situation?

13 A. Yes, I mean, I would have deemed this a situation to use  
14 that phone, but we'd been told by then not to use -- to  
15 turn off all of our mobile phones.

16 Q. For fear of triggering a further explosion?

17 A. Yes.

18 Q. Just to complete the picture, because we ought to, over  
19 the page, please, [LAS232-3] you were able to identify Mr Gibson as  
20 the senior officer that you were working for and that  
21 you felt supported and had leadership from him and that  
22 your equipment worked all right during the course of the  
23 treatment and evacuation process?

24 A. Yes.

25 MR COLTART: Thank you.

1 LADY JUSTICE HALLETT: Ms Gallagher?

2 Questions by MS GALLAGHER

3 MS GALLAGHER: Ms Green, could I just start by saying that,  
4 understandably, from the face of your statement where  
5 there's a reference to a lady in her 30s, one of the  
6 families I represent, the family of Miriam Hyman, who  
7 was a lady in her 30s who died at the scene, we are  
8 aware that that may be a reference to her.

9 As you know, we put some questions to you outside  
10 this process, through your counsel, Ms Simcock, and the  
11 family and I are very grateful for you answering their  
12 questions as did you through Ms Simcock. It's very  
13 helpful that they haven't had to wait on tenterhooks  
14 until today to get the answers which you have very  
15 clearly given in evidence to my learned friend Mr Keith  
16 earlier.

17 Just to confirm what you've told them, firstly, you  
18 are very certain about the location of that lady in her  
19 30s, so on the road in front of the black Jaguar, which  
20 confirms it's not Miriam.

21 Secondly, you've also told us that you recall this  
22 log roll, having to roll the lady over, and we know from  
23 other evidence that Miriam Hyman was lying on her back  
24 so there would have been no need for a log roll to have  
25 been performed on her.

1 Thirdly, you've told us in some detail about the  
2 head injury which you recall when you were supporting  
3 her head, which again indicates that it wasn't  
4 Miriam Hyman.

5 There's just one final matter on that which you've  
6 confirmed to us privately, but just to confirm in open  
7 court: do you recall anything about the build of this  
8 lady in her 30s?

9 A. I believe she was -- she wasn't a slim lady, she would  
10 have been more heavily built.

11 Q. Thank you very much. That certainly assists and, again,  
12 that would confirm that it's not Miriam Hyman. So the  
13 family are grateful for you giving that information so  
14 speedily when they put those questions and it's meant  
15 they haven't had to come to court today to wait to hear  
16 the rabbit out of a hat, as it were. So thank you very  
17 much.

18 I just have some other questions for you. I'll be  
19 as brief as possible. I can see the time, my Lady.

20 I think I'm probably likely to be under ten minutes, but  
21 it will be close to 1.00.

22 LADY JUSTICE HALLETT: Shall we see if we can complete her  
23 evidence? Thank you, Ms Gallagher.

24 MS GALLAGHER: Firstly, Ms Green, you've described your  
25 first sight of the scene when you approached from the

1 rear of the bus and you've told us that you approached  
2 more towards the arch of the BMA building. Today in  
3 evidence you've said that you recall seeing body parts  
4 in that area and also you've mentioned the blood on the  
5 side of the building.

6 In your statement, made much closer to the time, you  
7 made a reference to a torso or torsos. Do you recall  
8 seeing something of that description in the area?

9 A. May I just refer to my statement, please?

10 Q. Yes, of course. It's on page 2 of your statement,  
11 Ms Green, it's about halfway down. It's the paragraph  
12 just above:

13 "After this initial shock, my training took  
14 over ..."

15 A. Yes.

16 Q. You do recall that?

17 A. Yes.

18 Q. That was in this area that you've initially described by  
19 the arch of the BMA building?

20 A. Yes, that's right.

21 Q. Do you recall in that area, Ms Green, seeing any persons  
22 or any parts, body parts, covered in blankets at that  
23 stage?

24 A. I don't remember.

25 Q. That fits with your colleague, Ms Conway, who also

1 recalled seeing a torso in that area and doesn't make  
2 any reference to coverings.  
3 Could we have the photograph INQ10345 [not for publication] on screen,  
4 please, the hotel photograph? Could we just zoom in on  
5 the left, please? Ms Green, if you can see on the left,  
6 can you see the NatWest sign?  
7 A. Yes.  
8 Q. There's a blue-blanketed area there and then a brown  
9 area a little higher up.  
10 A. Yes.  
11 Q. The blue-blanketed area is where the torso of  
12 Hasib Hussain, the bomber, was found. The  
13 brown-blanketed area is where the body of Miriam Hyman  
14 is eventually covered.  
15 Is this roughly the area where you're referring to  
16 slipping, seeing body parts?  
17 A. Yes, it would have been pretty much underneath the bus  
18 lane sign there, underneath that lamp post, that's where  
19 I remember slipping.  
20 Q. Certainly. There's some uncertainty about the timing of  
21 this photo, my Lady, you will recall, because  
22 Inspector Perry at first thought it might have been  
23 about 10.25 when he was leaving and then he later  
24 thought it's around the time of his arrival at 9.58.  
25 I can give you the INQ reference for your note; it's

1 INQ10121-1.

2 But Ms Green, obviously, we know arrives, sends --  
3 the message is sent at 9.57, so it's around that time,  
4 and, at this stage, it appears clear that that covering  
5 hasn't happened. We can see from the photograph that  
6 Inspector Perry is some distance away in conversation at  
7 the top of the photograph.

8 There's just one other issue about this photograph,  
9 Ms Green. Can you see, just to the right of the area  
10 we've been looking at, there are two individuals in  
11 green uniforms? There's a taller gentleman with dark  
12 hair, and there's a lady with red hair. Quite obviously  
13 that's not your crew, yourself and Ms Conway. Do you  
14 recall seeing those two people?

15 A. I think so. I'm not too sure, to be honest.

16 Q. We think from other evidence that, rather than London  
17 Ambulance Service personnel, they're in fact from  
18 a private ambulance and they were on scene before you.  
19 You don't recall speaking to them at any stage?

20 A. I think I only recall speaking to them afterwards.  
21 I think they attended the debrief we went to at  
22 Millwall. I think that was the only time I spoke to  
23 them.

24 Q. Thank you very much. Just a few more bits of the jigsaw  
25 in relation to the timing of arrival at the scene and

1 your colleagues. We know, obviously, that you were  
2 assigned, at about 9.48, 9.49, to attend Russell Square  
3 and then you were diverted here to this other scene, so  
4 understandably, you are arriving on the scene with no  
5 information.

6 Could we have [LAS714-2] on screen, please? This is  
7 a summary attendance sheet, so we can see first  
8 ambulance on scene, H301, at 9.57. Running call, that's  
9 obviously you. First fast response on scene EC53 at  
10 10.03. I think that's Mr Cole. Is that right?

11 A. I don't know.

12 Q. There was a reference made earlier to when the first  
13 officer was on scene. You will recall a reference was  
14 made to the message you sent at 10.05, when it appeared  
15 you were told an officer was on the way to you, and then  
16 you thought it was quite some time before an officer in  
17 fact arrived. This attendance sheet suggests the first  
18 officer was on scene at 10.33, or certainly by 10.33,  
19 which would roughly fit with your recollection.

20 Can I go to a debrief document from Mr Cole, who's  
21 the Fast Response Unit individual whom I referred to.

22 It's LAS693, please. If we could go to page 4 [LAS693-4], it's at  
23 the bottom under "Best Practice".

24 Before I put these questions, I just want to make  
25 clear he does say the incident eventually went very

1 smoothly. He obviously uses the word "eventually", but  
2 he is complimentary about how it eventually went.  
3 Further up that page he lists a number of problems  
4 and I want to see if you agree with any of those  
5 difficulties. Could we go up to the top of the page,  
6 please?

7 LADY JUSTICE HALLETT: Sorry, this was who again?

8 MS GALLAGHER: It's Michael Cole, he's the first Fast  
9 Response Unit.

10 LADY JUSTICE HALLETT: Indeed, thank you.

11 MS GALLAGHER: I'm going to come back to the issue of  
12 communications in a moment, but if we look at the second  
13 bullet point, he says initial crews didn't really know  
14 what they were going to.

15 It's understandable why you didn't know what you  
16 were going to, because you'd actually been assigned to  
17 Russell Square, but he seems concerned at the lack of  
18 information that you had initially. Was that a problem  
19 that you felt you had?

20 A. Yes, it was a -- yes, it was a huge problem. Usually in  
21 our job we know pretty much what we're going to before  
22 we get there. Firstly, we'd been sent to an RVP at  
23 Russell Square. I believe all it said was  
24 "an explosion". That doesn't -- it's not any --  
25 descriptive any further than that. So we certainly

1 weren't expecting to come across any sort of -- the RVP  
2 is meant to be the safe area that you get briefed at  
3 before approaching a location, an incident. So to come  
4 across that scene was devastating, I guess.

5 Q. Certainly. Of course. At the end of that sentence, he  
6 makes reference to steps 1, 2, 3 being ignored, and then  
7 a little further down, at the bottom of the screen that  
8 we can see, he says:

9 "Not sure major incident procedure fully implemented  
10 by initial crews (myself included)."

11 You've told us today about the difficulties you had  
12 in communicating, which, understandably, made it  
13 impossible for you to relay further information back,  
14 but again, would you agree with that, that there were  
15 difficulties in implementing the major incident  
16 procedure and that the major incident procedure initial  
17 steps weren't followed?

18 A. Yes, when we got there, we didn't know what we were  
19 facing or dealing with. We did an initial survey of the  
20 scene and reported back as per procedure. By the time  
21 it came to where we would have been using the triage  
22 cards, we were inside the courtyard and weren't allowed  
23 access back to our ambulance.

24 Q. Of course.

25 A. I believe we were performing the right procedure but

1 didn't necessarily have the communication or the cards  
2 to show for it, I suppose.

3 Q. You were certainly very hampered and that's the  
4 impression that you get from Mr Cole's debrief also. He  
5 does then say -- it's the fourth bullet point down:  
6 "Silver medic, presumably OS [on site], done a good  
7 job. But maybe could have been activated earlier!"  
8 Then below it:  
9 "PTS done a good job, but again maybe could have  
10 been activated earlier to clear ..."  
11 It's actually quite difficult to read.  
12 "... to clear scene quicker", I think is our best  
13 estimate of the handwriting.  
14 But there's obviously a concern about that delay.  
15 That fits with what you've told Mr Coltart about how you  
16 felt during that period of time when you were quite  
17 isolated on the scene focusing on Sam Ly. So presumably  
18 they are concerns you'd agree with too?

19 A. Yes, yes.

20 LADY JUSTICE HALLETT: "PTS"?

21 MS GALLAGHER: Yes?

22 A. Patient transport service.

23 LADY JUSTICE HALLETT: Yes, I think I've heard it before,  
24 but I'm afraid I have so many acronyms I don't remember  
25 them all.

1 A. I think that's probably referring to the other private  
2 ambulance crew that were on scene as PTS because we were  
3 an emergency ambulance.

4 LADY JUSTICE HALLETT: Right, thank you.

5 MS GALLAGHER: Ms Green, just at the very bottom of that  
6 screen, the last point in relation to Mr Cole until  
7 I come to communications, just at the very bottom, after  
8 he says "myself included" he says:

9 "Not sure giving crews a pack of cards and told to  
10 read them is sufficient training, given the nature and  
11 gravity of such calls."

12 You've told Mr Coltart that you had training in 1999  
13 and then some more limited training just in relation to  
14 the triage cards in between. Do you agree with  
15 Mr Cole's concern there that the training available was  
16 insufficient to deal with an incident such as this?

17 A. I think the training's sufficient. I don't know how  
18 much training you can give on when something like that  
19 happened. You just never think it's going to happen to  
20 you.

21 I don't know how you can possibly train someone to  
22 react in that situation and, being faced with that, the  
23 first thing that comes to your mind isn't a pack of  
24 cards, to be honest.

25 Q. No, of course.

1 A. And our usual job is to treat people, not to look at  
2 them and move away, and it's very, very difficult to do  
3 that.

4 Q. Ms Green, just one final issue on training just for  
5 completeness. Have you had any training on major  
6 incident procedure after 7/7, so since 2005?

7 A. I think we had a refresher training session.

8 Q. Do you recall roughly when that was?

9 A. I can't, I'm afraid. Sorry.

10 Q. No problem at all. There are just two further brief  
11 matters, my Lady. I can see it's 1.00. They're very  
12 short.

13 LADY JUSTICE HALLETT: Given Mrs Green's condition, I think  
14 I'd like to make sure we get through her evidence this  
15 morning.

16 MS GALLAGHER: I'm certainly sympathetic to that, my Lady.

17 LADY JUSTICE HALLETT: Exactly. You, if anybody, ought to  
18 be.

19 MS GALLAGHER: Just two further brief matters.

20 MS SHEFF: Before my learned friend carries on, I would also  
21 like to say I also have two or three brief matters.

22 LADY JUSTICE HALLETT: I would still like to try to finish  
23 Mrs Green, thank you.

24 MS GALLAGHER: Just in relation to equipment, Ms Green,  
25 could we have [LAS232-2] on screen, please? It's just the

1 very bottom of this page, Mr Coltart took you to this.  
2 It's the debrief form which you completed. The very  
3 bottom of the page, you say:  
4 "We then attended casualties to the best of our  
5 ability with [the] equipment available until further LAS  
6 arrived."  
7 A similar comment is made if we could go to  
8 [INQ8943-3]. It's the handwritten part in the centre. It  
9 just says:  
10 "PTS", I think you are referring to "patients"  
11 rather than the acronym?  
12 A. Yes.  
13 Q. "Patients dealt with as well as possible with kit  
14 available."  
15 Both those comments seem to suggest, as the evidence  
16 did, that you did the best you could with limited kit?  
17 A. Yes, as I said earlier, the kit on an ambulance is  
18 generally to treat one or two patients at the most. To  
19 spread that out amongst eight to ten casualties, you  
20 have to prioritise who needs it the most.  
21 Q. Of course. Ms Green, there's just one final matter  
22 relating to communications. You've also described how  
23 you'd no access to the ambulance to send messages  
24 because you weren't allowed to return to it and, also,  
25 there was the issue about the mobile phone network, or

1 the mobile phones not being used because of the risk of  
2 a secondary explosion.

3 We've heard evidence about particular problems with  
4 communications at other scenes because of them being  
5 underground and one maybe would have thought that you  
6 wouldn't have those difficulties when dealing with an  
7 overground scene. In fact, there are two very  
8 particular problems that you've referred to.

9 Mr Cole, in his debrief, also refers to this issue,  
10 and if we could go again to [LAS693-3], you will recall  
11 my Lady, at page 4, he had made a reference to the  
12 ability to communicate, the system being inadequate, but  
13 at page 3 -- it's the second paragraph -- he describes  
14 a particular problem he had. He tries to contact  
15 Central Ambulance Control to give an update:

16 "... but the mobile system went down. I then tried  
17 to return to my vehicle ... fears of a secondary device  
18 and I was not allowed to return to my vehicle. With the  
19 assistance of BMA security, I secured a landline.  
20 However, this was at the entrance of the BMA building  
21 and we with all the [it seems to be 'patients'] were  
22 moved to the back of the courtyard for safety. At this  
23 point I had no immediate way of contacting Central  
24 Ambulance Control."

25 That's an additional problem. As well as the two

1 that you referred to, not being able to return to your  
2 ambulance to send a message, not being able to use your  
3 mobile phone, even using a landline proved difficult for  
4 Mr Cole. Did he speak to you about that problem at any  
5 stage? Were you aware of it?

6 A. I don't remember him doing so.

7 MS GALLAGHER: Ms Green, I have nothing further for you.  
8 Thank you again on behalf of the family for the  
9 assistance you've given in relation to Ms Hyman.

10 LADY JUSTICE HALLETT: Thank you very much, Ms Gallagher.

11 MR SAUNDERS: I've nothing at all.

12 Questions by MS SHEFF

13 MS SHEFF: Mrs Ashford, I just want to ask you a couple of  
14 questions. First of all, the major incident channel  
15 that you have on your ambulance. Is that only  
16 a communication system between the Ambulance Service and  
17 the ambulances that have been dispatched?

18 A. Yes.

19 Q. It doesn't connect to any other of the rescue services?

20 A. No, especially not at that point, sort of five, six  
21 years ago, no.

22 Q. No. The calls that were made, 9.57 was the first call  
23 that you made to your main control, to tell them that  
24 you were at the scene, and then there was the second  
25 call at 10.05. You said that you went around assessing

1 casualties. Was that done between the two calls or was  
2 it done after the second call was made?

3 A. Between the two calls. The first one would have been  
4 when we arrived on scene. We both got out and surveyed  
5 the scene and then Nadene went back to the ambulance to  
6 give that further report.

7 Q. Right. You said that the purpose of that was that so  
8 you were aware of the people who were dead and,  
9 therefore, effectively didn't require resources?

10 A. Yes.

11 Q. Now, I'd like to ask you how wide an area you covered  
12 when you assessed those people, those who were alive and  
13 did need your assistance and equipment, and those who  
14 weren't. If we could just have the hotel photograph  
15 back up, we know from what you've told us already that  
16 you went around the area towards the bottom left of our  
17 picture where we see the two blankets that were covering  
18 up those people who were deceased. We know you also  
19 went around the bus area.

20 A. Yes, I've walked pretty much around the lamp post where  
21 the blue sign is, across the back of the bus and then  
22 just towards where the white van is to look into the --  
23 briefly look into the bus, and then I walked back  
24 towards the Jaguar car here at the bottom of the screen.

25 Q. You walked round the bottom section -- sorry, the rear

1 section of the bus where the top of the bus, the upper  
2 deck, had collapsed down into the lower section. Did  
3 you look inside the bus to see if there was anybody  
4 moving in the bus?

5 A. Yes, I looked over and I couldn't see anyone moving and  
6 I wasn't going to go any further into that situation.

7 Q. Because of all the debris that was lying around, it was  
8 dangerous for you to get any further?

9 A. For my own safety, yes.

10 Q. But from your assessment of looking -- and did you look  
11 on both sides of that bus? You said you went near  
12 towards where the white van was, so did you look in from  
13 either side at the rear?

14 A. I would have only looked in from the side of the white  
15 van, so the right side of the bus as we look at it.

16 Q. Not the lamp post side?

17 A. No, I didn't go down that side.

18 Q. Right. How clear an observation were you able to make?  
19 How long did you look for and were you able to see  
20 through the debris?

21 A. Inside the bus?

22 Q. Yes.

23 A. I think, from what I remember, I just remember seeing  
24 parts of bodies.

25 Q. Nothing that seemed saveable to you?

1 A. No, no.

2 Q. The reason I ask that is because I represent the family  
3 of Anat Rosenberg, who died on that bus, and although  
4 it's believed that she died instantly, obviously I'd  
5 like to hear from you whether you thought there was any  
6 movement at the time that you were assessing it, which  
7 would have been between 10.00-ish and 10.05, then, would  
8 it?

9 A. That's right, I would estimate it's about 10.00 that  
10 I walked round that side.

11 Q. So approximately 10 to 15 minutes after the incident  
12 occurred.

13 I also represent the family of Giles Hart. Now, he  
14 was thrown from the bus and he landed on this photograph  
15 between the taxi and the car in front, which looks like  
16 a silver Golf. Now, the taxi actually moved its  
17 position and came forward. I'm not sure, when you were  
18 looking at the scene, whether the taxi had moved forward  
19 or not. Do you have any recollection of that, whether  
20 there was a gap between those cars or whether it was  
21 right on the car in front?

22 A. No, I really don't remember. I remember a taxi being  
23 there, but that's as far as it goes.

24 Q. Yes. Perhaps it will help if I just quickly show you  
25 the inquest diagram, which is [INQ10285-8].

1 If you follow the dotted line from Giles Hart, which  
2 is the third name along, just underneath -- between  
3 Lynton House and Tavistock Square, can you see that?

4 A. Yes.

5 Q. You can see that connects to the red dot. The green  
6 vehicle is the taxi before it moved and collided with  
7 the car in front. Did you assess that area and the  
8 casualties in that area?

9 A. I don't remember seeing a casualty lying in that area.

10 Q. Right. You say you recollect a taxi. Do you remember  
11 seeing anybody underneath the taxi?

12 A. No.

13 Q. Do you remember seeing anybody in front of the taxi?

14 A. No.

15 Q. Can I just ask you this: when you did find somebody who  
16 you thought had passed away, did you check their bodily  
17 signs?

18 A. The lady that I spoke of earlier in the middle of the  
19 road?

20 Q. Yes.

21 A. Yes, I checked for --

22 Q. Was she the only one that you checked for a pulse and  
23 breathing?

24 A. At that point, yes.

25 Q. So there was no other body that you checked that you

1 found to be dead because they had no vital signs?  
2 A. I didn't physically check anybody else at that point,  
3 no.  
4 MS SHEFF: Thank you very much indeed, Mrs Ashford.  
5 LADY JUSTICE HALLETT: Any other questions for Ms Green?  
6 We have completed your evidence, Ms Green. I'm glad  
7 we did so before you tested the medical skills of  
8 anybody present.  
9 I'm sorry that we've had to ask you to relive the  
10 events of that day. I'm sure, with all that you have to  
11 cope with at the moment, you could have done without it,  
12 but it is terribly important, as I'm sure you  
13 understand, to the families of the bereaved. So thank  
14 you very much. I wish you all the luck with the birth.  
15 Twins, I gather. Is that right?  
16 A. That's right, yes.  
17 LADY JUSTICE HALLETT: Very best of luck.  
18 A. Thank you very much.  
19 LADY JUSTICE HALLETT: 2.20 pm.  
20 (1.13 pm)  
21 (The short adjournment)  
22  
23