With Neither Utility nor Humanity

An account of repeat institutional failings within St John Ambulance

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Bottom Line Up Front

St John Ambulance (SJA) is broken, and has demonstrated no interest in changing. As a result, SJA poses a danger both to those who provide its services and to those who receive them.

A toxic internal culture has led to an apparent proliferation of both employees and volunteers, from the front-line up to the highest reaches of directorship, who are at best woefully under-equipped to perform their roles effectively and, at worst, active participants in abusive behaviour towards their colleagues, up to and including incredibly serious acts of malicious dishonesty.

Serious concerns, when raised, are minimised or utterly disregarded. From recklessly sending out unsupported volunteers in order to achieve pledged staffing targets to maintaining an investigatory process that is both powerfully counterproductive and utterly neglectful of the rights and well-being of those under investigation, SJA leadership have failed to safeguard their staff and volunteers and have put patients and members of the public at risk.

Having spent well over a year attempting to get SJA to accept responsibility for its actions to no avail, it is clear that no internal process is able to result in change. Equally, it is clear that SJA is not capable, let alone interested, in doing so. In addition, neither applicable regulator appears to have taken any action on the concerns raised. I do not believe that not speaking up is a valid option, leaving only the public release of this account as the appropriate course of action.

It is my belief that the worst-case scenario of the current state of things continuing is that, under exceptional circumstances, an SJA employee or volunteer, patient or member of the public may come to serious harm. I would rather raise the alarm now and risk being seen as overreacting, than to not do so and for the same realisation to only occur following an inquest.

PUBLIC

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1. Introduction

This report details my experience with St John Ambulance (SJA) over the period of Mar 2020–Aug 2021, which has exposed two distinct causes for serious concern.

Firstly, between Mar–May 2020, I allege that SJA ignored their own safeguards and cut corners in order to fulfil their target of having '100 ambulances on the road per day'. This resulted in the provision of inexperienced and unsupported ambulance crews, which put those crews, their vehicles, their patients and members of the public at risk.

Secondly, between May–Aug 2020, I was suspended and investigated for alleged clinical misconduct during the preceding period. During the course of this investigation, it became clear that procedures were not being correctly followed and that I was not being treated fairly. My attempts to raise these concerns during the investigation were repeatedly ignored,² even when it could be clearly demonstrated that witness testimony was easily disproved and that SJA procedures were being brazenly ignored. Though the investigation concluded with almost all of the allegations having been dropped (silently, again in direct breach of SJA procedure), I was nonetheless dismissed from the organisation. My appeal was then rejected, again on misleading grounds.

Subsequently, I made the decision to blow the whistle to the relevant regulatory bodies—the CQC and the Charity Commission. The former forwarded the report to their investigator, but no further comment was received; the latter advised that, as no direct breach of charity law was alleged, the matter should be referred to the SJA board of trustees. I followed this suggestion, resulting in two internal investigations of the allegations by the SJA Internal Audit team. After 10 months, 6 missed deadlines, having made no requests to view any of my collected evidence and having at one point made an absolutely bizarre attempt to issue a conclusion that simply ignored the bulk of the allegations made (before rapidly backpedalling), the investigation concluded with no admission of error, apology or formal retraction of any of the spurious (and in one case criminal) allegations levelled against me.

This report is structured as follows:

• in ch. 2, I shall briefly introduce myself in order to provide the reader with some useful

¹See ch. 4, ¶ 20.

²However, I give thanks to the two Freedom to Speak Up Guardians who, though unable to affect any change, did act with commendable integrity once engaged on the matter, including by attending one of the hearings as an impartial observer and submitting a witness statement during my appeal.

context;

- in ch. 3, I shall detail my full allegations against SJA;
- in ch. 4, I shall construct an in-depth, evidence-backed timeline of the events of the period to provide a narrative of SJA's myriad of failures; and finally
- in ch. 5, I shall present my concluding remarks.

Following the body of the report itself, there shall be a number of appendices.

Please note: all internal references within this report are hyperlinked; click on them to jump to the part being referenced (e.g., see ch. 2). Throughout this report I have used § and ¶ symbols for internal references and 's' and 'para' for external references.

2. About the Author

I joined SJA as a volunteer in Sep 2017, initially serving in the Lancaster Universities Unit (then known as the Lancaster LINKS Unit) and later in the Lancaster Event Services Unit (initially known as the Lancaster Adults Unit). Having joined as a First Aider, I upskilled to an Advanced First Aider in Jun 2019, and again to an Emergency Ambulance Crew (initially known as Emergency Medical Technician) in Mar 2020. That same month, I became a (probationary) member of the North Region Medical Response Team (MRT).

Outside of this clinical work, I also served as the Unit Training Lead for the two Lancaster Units from Dec 2018, delivering regular first aid sessions and organising community engagement events such as school visits.¹

At the time of my dismissal in Jul 2020, I had volunteered over 1,000 hours with SJA, some 300 of which took place between Apr–May 2020 alone. However, as was made clear when applying for the EMT course, this sizeable time commitment had only translated to a relatively limited number of actual casualties treated, none of which were particularly serious. These hours also include non-clinical time, such as receiving or delivering training and community engagement events.

In this report, unless otherwise specified, any references to:

- 'Regional' roles refers to the SJA North Region;
- 'District' roles refers to SJA Cumbria & Lancashire District:
- 'Area' roles refers to SJA South Cumbria Area prior to Jul 3 and the Fylde Coast & North Lancs Area afterwards; and
- 'Unit' roles refers to the SJA Lancaster Event Services Unit.

Professionally, I am not a clinician by trade; I work in IT security. However, I do have a semi-professional pre-hospital emergency care role elsewhere, and a couple of first aid-related

¹It is unclear how official this appointment was, however. On the one hand, I was appointed to the role by the Unit Manager and led a successful training programme throughout this period, which in my mind means the title is appropriate. However, upon taking up the post (and having never visited either of the units or attended any of the training sessions), our new District Manager (DM) (about whom we shall hear more later) declared that the Unit was 'too small' for a UTL. Nonetheless, I continued organising local training until my dismissal, and if it looks like a duck, and leads training like a duck...

roles with other volunteer organisations. Colleagues from both of these provided supportive references during the initial SJA investigation, though to no effect.

My circumstances in early 2020 deserve comment. Though not eligible for furlough, I had been released by my then-employer to volunteer full-time with SJA over the three months Apr—Jun. I also chose to remain living alone in the north, rather than with family, during the first lockdown due to my front-line role. As a result, when I was suspended in May 2020, my intentional lack of distractions rather backfired; this may go some way to explaining why I found the experience to be particularly distressing.

Finally, three aspects of my personality may provide additional useful context. Whilst honest self-assessment of one's personality is difficult at the best of times, please note that many of the following claims were echoed by others in the character references they provided (fruitlessly) to the SJA investigation.

First, I am capable of maintaining prolonged periods of intense focus when personally invested in a topic, or when motivated by a sense of injustice. This may go some way to explaining the volume of written material collected and generated during this process.

Secondly, I have a near-pathological inability to refuse others the benefit of the doubt, even in the face of overwhelming evidence that such benefit is unmerited. This must be borne in mind when considering the allegations made below; it takes an incredible amount for me to make such confident assertations of misconduct and dishonesty, rather than excusing them as possible misunderstandings and honest errors.

Thirdly, I strive (though, of course, not always successfully) to be tolerant and forgiving of unintentional errors, but absolutely cannot abide dishonesty, particularly from those in a position of power or seniority, or when used to obfuscate corruption. This, paired with the aforementioned relentlessness, is why I am continuing to prosecute this matter well over a year on.

3. Allegations Against SJA

In this chapter I present my allegations regarding SJA and those acting on its behalf, with reference to relevant events in the timeline found in ch. 4.

These same allegations were initially presented to the appropriate regulatory bodies—the CQC and the Charity Commission—and to SJA itself. The CQC claimed to have passed them on to its inspector, but to my knowledge no further action has since been taken. The Charity Commission advised that, as the allegations did not amount to a breach of charity law, they could take no action. SJA, following a repeatedly-delayed internal investigation (that made no requests to see any of my collected evidence), concluded that they had done nothing wrong, on the grounds that there had not been a serious incident as a result. A second internal investigation again concluded that SJA had done nothing wrong, although it conceded that internal process issues and 'the impact of the [COVID-19] pandemic [had] affected the efficiency and timeliness of the process' in such a way that 'would have supported your assessment that information was being routinely withheld, and of allegations not being put to you in a timely manner'. No apology was provided at any point.

3.1 Provision of Ambulance Crews

On Mar 24, SJA published their plans to support the NHS during the COVID-19 pandemic. The target was publicly set at '200 ambulance crew to provide 100 ambulances a day'. In order to fulfil this goal, I allege that SJA ignored its own safeguards and repeatedly cut corners (whether intentionally or through incompentence), resulting in underprepared and unsupported crews being sent out into a national emergency (or, in the words of SJA's own Investigating Officer, 'chucked in at the deep end very quickly'⁶).

¹See ch. 4, ¶¶ 438–448.

²See ch. 4, ¶ 474.

³Email from Internal Audit to author (26 August 2021).

⁴See ch. 4, ¶ 496.

⁵See ch. 4, ¶ 20.

⁶Phone call between Investigating Officer and author (recording held by author, 29 May 2020) 01:45–02:12.

3.1.1 Waived Supernumerary Shifts

I completed the SJA EMT course (comprising three weekends of training and one of assessment) on Mar 8, and normal SJA policy would have required me to undertake a minimum of three supernumerary shifts involving the conveyance of a patient to hospital before I could crew normally.⁷ Though I repeatedly pointed this out when volunteering for block deployments,⁸ SJA waived this requirement at the start of April.⁹ Ultimately, I was given only one supernumerary shift: Apr 1, during which no patients were conveyed to hospital.¹⁰ On Apr 19 (after completing our tenth ambulance shift), I was told that I would finally have another supernumerary shift with another EAC and a paramedic on Apr 25.¹¹ After travelling to Newcastle (from my home in the north-west) for this, I was instead crewed with a single EAC.¹²

3.1.2 Waived Driver Training

I undertook an operational check drive on Mar 29, consisting of a 45-min drive in an ambulance with an assessor. I was upfront about my lack of driving experience (i.e., that I had passed my test only a few years previously, and have never owned a car). I was nontheless approved as an operational driver¹³ without having to complete any of the usual training.¹⁴ This COVID-19 derogation was originally slated to last a few months, but was later extended to the end of 2020.¹⁵

3.1.3 Hepatitis B Immunisation

I was assigned to 20 shifts, despite having never received a Hepatitis B immunisation. Though this status is clearly visible on SJA personnel's records, this was never raised with me. Nonetheless, I attempted multiple times to find out how to arrange the immunisation, but was ignored.¹⁶

⁷For reference, a prospective EMT working for an NHS ambulance trust is required to undertake a 12–18-month apprenticeship before they are considered qualified.

⁸See ch. 4, ¶¶ 13–14, 17–18 & 27–29.

⁹See ch. 4, ¶¶ 35 & 38.

¹⁰See ch. 4, ¶¶ 39–41.

¹¹See ch. 4, ¶ 67.

¹²See ch. 4, ¶ 72.

¹³ Operational Driver' means that I was allowed to drive ambulances with patients in the back, but not under response conditions.

¹⁴See ch. 4, ¶¶ 33–34 & 40.

¹⁵See ch. **4**, ¶ **??**.

¹⁶See ch. 4, ¶¶ 66, 75, 81, 93 & 110.

3.1.4 Information Not Shared with Crews

Whilst working for NHS ambulance trusts, SJA personnel were denied access to trust standard operating procedures (SOPs) and other such documents. Later, one of the allegations against me seemingly revolved around failure to follow such protocols, in spite of my inability to access them.¹⁷

3.1.5 Pairing of Inexperienced Crews

For my third ambulance shift (Apr 3), I was paired with an equally-inexperienced crewmate, who commented at the time that it was strange that SJA had put such a 'virgin crew' together. Later, on Apr 16, I was informed by an AUM that I would only be paired with experience crewmates from then on. It became clear that this was not the case, however, on Apr 29, when I had to intervene to stop my crewmate from harming a patient during a routine hospital transfer and learnt that they had only been crewing on ambulances for a week. 20

3.1.6 Failure to Provide Support

During my fourth shift (Apr 4), I struck a traffic calming measure with the ambulance, sustaining some cosmetic damage to the side of the vehicle; I reported this to the best of our ability at the end of the shift.²¹ Unbeknownst to me, my crewmate then brought the incident to the attention of their AUM the next day, who began covertly investigating me for an undisclosed length of time.²² In their investigation report, they concluded the following:

BG has demonstrated a lack of ability to drive, mostly based down to confidence and exposure — howerver as patients and crew-mates have picked up on this, BG needs ongoing support... It is unclear if all of the COVID-19 Driver Training competencies have been met for the category of 'new driver', however having informally spoken to [redacted in the author's copy, most likely the RDTL] — I undertand there are pressures on the organisation and that at present it is impossible for BG to undertake an operational driving course, which he needs. But BG would benefit from some 1-to-1 tuition from a driver trainer or a more experienced colleague.²³

¹⁷See ch. 4, ¶¶ 206–207 & 345.

¹⁸See ch. 4, ¶ 45.

¹⁹See ch. 4, ¶ 59.

²⁰See ch. 4, ¶¶ 78–80.

²¹See ch. 4, ¶ 48.

²²See ch. 4, ¶¶ 53–55.

²³MSY Investigation Report.

This conclusion was echoed by at least one other former crewmate, in the witness statement they provided to the covert investigation.²⁴ No action was taken as a result of this, nor any support provided. I was not even informed that driving concerns had been raised or that the investigation had been conducted until Jun 30,²⁵ and did not receive a copy of the investigation report until Jul 14, and only then after significant cajoling on our part.²⁶

At the time, I believed that all of these corner-cutting decisions were being made by people senior to me who could be expected to have considered the risks and appropriately mitigated them. I believed that, in light of the pandemic, imperfect solutions would have to be tolerated in light of the circumstances, but that as long as I was consistently open about my skill level and potential shortcomings, those responsible would be able to make informed decisions about how best to safely utilise me, and that when issues arose and errors occurred they would be dealt with fairly. This was wrong. There was no joined-up thinking, no risk assessment, no informed decision-making. SJA was interested only in fulfilling its ambulance target, staff and volunteers be damned. I did what I felt was my duty, and was later punished for this to spare SJA's blushes.

3.2 The SJA Investigatory Process

On May 23 I was informed of my suspension from clinical activity, pending an investigation into clinical concerns that had been raised.²⁷ This ultimately concluded with my dismissal from SJA on Jul 23, just under nine weeks later.²⁸ I appealed the decision, and my appeal was rejected on Aug 25 (i.e., just over thirteen weeks on from the initial suspension).²⁹

During this period, I:

- was not told the initial allegations against me in a timely manner, despite repeat requests;³⁰
- was not provided with any form of support during any of the three investigations into the allegations, in direct contravention of SJA procedure;³¹
- was repeatedly denied permission to record my hearings, despite showing that the written minutes of previous hearings were inaccurate;³²

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<sup>24</sup>See ch. 4, ¶¶ 295–296.

<sup>25</sup>See ch. 4, ¶ 268.

<sup>26</sup>See ch. 4, ¶¶ 341–344.

<sup>27</sup>See ch. 4, ¶¶ 382–384.

<sup>29</sup>See ch. 4, ¶¶ 431–432.

<sup>30</sup>See ch. 4, ¶¶ 134, 136, 138–141, 147, 149–151 & 153–159.

<sup>31</sup>See Appendix ??.

<sup>32</sup>See ch. 4, ¶¶ 167–168, 175–176, 282, 299–301, 311 & 402–403 & Appendix ??.
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- did not receive minutes of my Jul 16 disciplinary hearing until the rejection of my appeal on Aug 25 (i.e., almost six weeks later),³³ at which point they were unsurprisingly revealed to be inaccurate;³⁴
- had evidence routinely withheld from me, and had to get the then-Freedom to Speak Up Guardian and the Director of Governance involved in order to get (some of) it shared;³⁵
- had new allegations pile up without being informed (to a grand total of 13, including one of document falsification—a criminal offence),³⁶ only for them to be almost all abandoned (again without me being informed, in direct contravention of SJA procedure);
- had a crewmate told that they were not allowed to provide a positive reference for me;³⁷
 and
- was punished for refusing to delete evidence of this misconduct.³⁸

During this period it became clear that:

- the SJA investigatory process, as written, is fundamentally unsound and harmful; and
- in my particular case (and presumably others), that process was not being correctly followed anyway.

I can think of three possible explanations for what I experienced. Either:

- those entrusted with the handling of investigations are incompetent and do not know their own procedures;
- those entrusted with the handling of investigations have access to a separate set of procedures that are different to those accessible by other staff and volunteers; or
- those handling my investigation had an ulterior motive and ignored their own procedures in order to achieve their goal.

Personally, I find myself leaning towards the third explanation. I simply cannot fathom that mere incompetence could be so pernicious and widespread, and so believe it is more likely that I was unfairly dismissed in order to absolve SJA of responsibility for their many errors. This feeling was reinforced by the Head of Volunteering's appeal outcome letter, which

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<sup>33</sup>See ch. 4, ¶¶ 426–431.
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³⁴See Appendix ??.

³⁵See ch. 4, ¶¶ 197, 235–237, 254, 259–267, 293, 314, 330, 334–336, 340, 349–351, 363–368, 373–375, 377 & 415.

³⁶See ch. 4, ¶¶ 266–271.

³⁷See ch. 4, ¶¶ 273–274.

³⁸See ch. 4, ¶¶ 357–358, 363–368 & 384.

explicitly attempted to blame me for not reigning in SJA's irresponsibility (in direct contravention of SJA's *Volunteer Charter*, amongst other things). As a volunteer, I have no recourse to anything like an employment tribunal, so this makes a certain perverse sense.

4. Timeline

What follows is as detailed a timeline of the events in question as it has been possible to construct, in spite of SJA's opacity.

SJA and those whose actions are featured below have been repeatedly provided with opportunities to dispute or amend any statement made as part of this timeline. At no point have they done so, from which we conclude that they accept this record as accurate.

- (1) **2020**
- (2) MAR 5 The first two UK COVID-19 deaths are reported.¹
- (3) :
- (4) MAR 8 I complete the fourth and final weekend of my SJA EMT course and qualify.
- (5) MAR 9 My employer instructs my colleagues and me to work from home.
- (6)
- (7) MAR 12 The UK CMO raise the risk level from 'moderate' to 'high'.² SJA establish a 'Gold Command' group.³
- (8)
- (9) MAR 15 I attend an MRT initial training and selection weekend.
- (10) MAR 16 ICL release a much-publicised report that predicts that there will 'in the order of 250,000 deaths' in the UK if current trends hold.⁴

 $^{^1}BBC$ News, 'Coronavirus: Woman in 70s becomes first virus fatality in UK' (*BBC News*, 5 March 2020) $\langle https://www.bbc.com/news/uk-51759602\rangle$ accessed 12 July 2020; BBC News, 'Coronavirus: Man in 80s is second person to die of virus in UK' (*BBC News*, 7 March 2020) $\langle https://www.bbc.com/news/uk-51771815\rangle$ accessed 12 July 2020.

²Department of Health and Social Care, 'COVID-19: government announces moving out of contain phase and into delay' (*Gov.uk*, 12 March 2020) (https://www.gov.uk/government/news/covid-19-government-announces-moving-out-of-contain-phase-and-into-delay) accessed 12 July 2020.

 $^{^3}$ 'COVID-19: Gold Command Group' (SJA CONNECT, 12 March 2020) $\langle https://sjaconnect.me/Communicating/News-and-announcements/Latest-News/Pages/COVID-19-Gold-Command-Group.aspx accessed 12 July 2020.$

⁴Neil Ferguson and others, 'Report 9: Impact of non-pharmaceutical interventions (NPIs) to reduce COVID19 mortality and healthcare demand' [2020], p 16.

- (11) MAR 17
- (12) MAR 18 SJA suspend all event first aid cover.⁵
- (13) I email AO North and the NHS-Shifts team with my availability for shifts, making clear that I have no prior ambulance experience.⁶
- They reply to ask if I am looking to third-man (i.e., act as a supernumerary crewmate) or not;⁷ my line manager replies to them that I need to third man.⁸
- (15) MAR 19 SJA suspend all workplace training.9
- (16) MAR 20 The Regional MRT Lead emails me to confirm that I have been successful in my application, and provides feedback and areas for further development.¹⁰
- (17) The NHS-Shifts team also reply,¹¹ and I reiterate to them my need to complete supernumerary shifts.¹²
- (18) : At some point in March the JOCC release an online form through which one can register for block deployments around the country. I register my availability for the whole of April, and make clear that I have only just qualified and will require supernumerary shifts to begin with.
- (19) MAR 23 The UK's first lockdown begins. 13
- (20) MAR 24 SJA publish their plans to support the NHS. 'From 1 April', the COVID-19 National TC writes, 'we need 200 ambulance crew to provide 100 ambulances a day'.¹⁴

 $^{^5}$ Project Manager, 'Event first aid cover suspended' (*SJA CONNECT*, 18 March 2020) $\langle \text{https://sjaconnect.} \text{me/Communicating/News-and-announcements/Latest-News/Pages/Event-first-aid-cover-suspended.aspx} accessed 12 July 2020.$

⁶Email to Ambulance Operations North and NHS-Shifts from author (18 March 2020).

⁷Email from Ambulance Operations North to author (18 March 2020).

⁸Email to Ambulance Operations North from then-line manager (18 March 2020).

⁹Director of Training & Enterprise, 'St John suspends workplace training courses' (*SJA CONNECT*, 19 March 2020) (https://sjaconnect.me/Communicating/News-and-announcements/Latest-News/Pages/St-John-suspends-training-courses-.aspx) accessed 12 July 2020.

¹⁰Email from Regional MRT Lead to author (20 March 2020).

¹¹Email from NHS-Shifts to author (20 March 2020).

¹²Email to NHS-Shifts from author (20 March 2020).

¹³BBC News, 'Coronavirus: Strict new curbs on life in UK announced by PM' (*BBC News*, 24 March 2020) (https://www.bbc.com/news/uk-52012432) accessed 12 July 2020.

¹⁴COVID-19 National Tactical Commander, 'COVID-19 response: How you can help' (*SJA CONNECT*, 24 March 2020) (https://sjaconnect.me/Communicating/News-and-announcements/Latest-News/Pages/COVID-19-response-how-you-can-help.aspx) accessed 12 July 2020.

(21) After quietly observing colleagues in both the MRT group chat and a group chat that was set up during our EMT course being dismissive of SJA volunteers being utilised in the organisation's COVID-19 response, I feel I need to have my say. I post a long message in the MRT Discord channel:

First, the FA/AFAs in ED... @[MRT colleague]'s comment about 'budget HCAs' is accurate. You don't get the budget version of something if you can avoid it, and it would be better if the NHS could receive an influx of highly-trained help with previous experience in hospitals. Unfortunately, they've already gone to the retired HCP well so now they have to open the search wider - if the only toilet paper available is scratchy one-ply, it's still better than using your hands...

I've seen an HCP complain elsewhere about babysitting FAs. But think what they'll be doing: obs, moving & handling, simple stuff. Even if they're crap at it now, the sooner they get in and start building experience, the smoother things'll go later when they're really needed. The nature of something like this is that there are no good options, only variably-bad ones. Yes, adding relatively inexperienced and unskilled people into hospitals may impact patient care, but is that impact going to be greater than the impact of an HCA having to do work an FA can do rather than something only they can (repeat up the hierarchy of skill levels as necessary)? Clearly those whose heads grace fancier epaulettes than mine have decided no, and I'm in no position to question that decision...

SJA is...the nation's ambulance auxiliary; like any reserve force - the Army Reserves, the special constabulary, retained firefighters, etc. - it not anybody's first choice. However, in a situation like this where all hands are on deck and they still might not be enough, those reserve forces stepping up may make a crucial difference...

This isn't anyone's idea of an ideal situation, but please don't treat SJA volunteers you may soon be working alongside soon like they're the enemy or an encumbrance; you're going to need them.¹⁵

¹⁵Discord messages between Regional MRT members and author (24 March 2020).

- (22) Though I am specifically talking about the use of FAs and AFAs in hospitals, my statements also represent how I consider my own position as an ambulance crewman. My new MRT colleagues are supportive, even when they do not fully concur.¹⁶
- (23) Throughout this whole period the news is constantly reporting on harrowing scenes from Spain and Italy, with the expectation that the UK will be next.¹⁷
- My DM wants me to cancel the Essential Education course I am booked onto this weekend in favour of one that they hope to run in our District at some undefined point in the future. The course is intended to bring all of SJA's various ambulance qualifications (including EMT) up to the same standard of the newly-introduced EAC scope of practice. More importantly, fit-testing for FFP3 masks will also be delivered on the course. I resist my DM on the basis that I will be out ambulancing from Apr 1 and require the training.
- (25) At some point around here I am informed by the JOCC that I have been allocated a four-week block deployment, and that the ROCC will be in touch soon.
- (26) MAR 26 The number of daily deaths increases by more than 100 in a day for the first time, rising to 578.¹⁸
- (27) As part of the back-and-forth over the EE courses, I email the AM (District Support) to lay out why I will not be cancelling my course booking. 19 I copy in my DM.
- (28) That evening, the AM (District Support) emails out a request for ambulance crews to book onto shifts.²⁰ I send the ROCC my availability, including my need to complete supernumerary shifts.²¹

¹⁶Discord messages between Regional MRT members and author (n 15).

 $^{^{17}}$ 'spain coronavirus - Google Search' (Google Search, March 2020) (https://www.google.com/search? q=spain+coronavirus&sxsrf=ALeKk02yWsEMprYX51qezGs8M0KS5dkqEw%3A1594573365696&source=lnt&tbs=cdr%3A1%2Ccd_min%3A3%2F1%2F2020%2Ccd_max%3A3%2F31%2F2020&tbm=> accessed 12 July 2020; 'italy coronavirus - Google Search' (Google Search, March 2020) (https://www.google.com/search? q=italy+coronavirus&sxsrf=ALeKk02yWsEMprYX51qezGs8M0KS5dkqEw%3A1594573365696&source=lnt&tbs=cdr%3A1%2Ccd_min%3A3%2F1%2F2020%2Ccd_max%3A3%2F31%2F2020&tbm=> accessed 12 July 2020.

¹⁸BBC News, 'Coronavirus: UK deaths rise by more than 100 in a day' (*BBC News*, 26 March 2020) (https://www.bbc.com/news/uk-52056534) accessed 12 July 2020.

¹⁹Email to Area Manager - District Support (later Investigating Officer) from author (26 March 2020).

²⁰Email from Area Manager - District Support (later Investigating Officer) to regional mailing list (26 March 2020).

²¹Email to ROCC North from author (26 March 2020).

- (29) I also discuss the supernumerary shifts in the MRT WhatsApp group.²²
- (30) :
- (31) MAR 29 The PM announces plans to send a letter to 30 million households declaring that things will 'get worse before they get better'.²³
- (32) I complete the EE upskill modules to qualify as an SJA EAC. We find out at the end of the course that the FFP3 fit-testing shall not be taking place after all.
- (33) I also arrange an Operational check drive with the RDTL. I tell them that I have not owned a car since passing my test in 2016, that I have driven a van-sized vehicle once for around 40 minutes and that I have only driven on a motorway once before.
- (34) At the end of the drive they ask whether 'I would be comfortable with me driving if it was my parents in the back'. I reply that I would obviously prefer for it to be the most experienced, skilled driver available, but in light of current circumstances I would rather there be a driver at all. They agree and grant me a COVID-19 derogation that will last a few months, after which I will have to complete driver training to continue driving.²⁴
- (35) I also find out from the ROCC that they are waiving the supernumerary shifts requirement.²⁵
- (36) My employer gives me April off to volunteer with SJA.
- (37) Mar 30
- (38) MAR 31 The ROCC inform me that I am on shift Apr 1–4, 'third manning to-morrow and crewing for the other shifts'.²⁶
- (39) APR 1 First ambulance shift with Crewmates A & B. Crewmate B and I are both drivers. The ROCC have waived the normal requirement for a minimum of three supernumerary shifts post-qualification, but I have insisted on at least one.

²²WhatsApp messages between SJA colleagues and author (26 March 2020).

²³BBC News, 'Coronavirus: Things will get worse before getting better, PM warns' (*BBC News*, 29 March 2020) (https://www.bbc.com/news/uk-politics-52079922) accessed 12 July 2020.

²⁴Conversation between Regional Driver Training Lead and author (29 March 2020).

²⁵WhatsApp messages to author's friends from author (29 March 2020).

²⁶Email from ROCC North to author (31 March 2020).

(40)	At 10:53 the RDTL sends me my driver identification number and a
	link to a driving e-learning course ²⁷ —as our shift starts at 10:00, I
	do not have an opportunity to complete it, and there is nothing in
	the email to suggest that is it mandatory or urgent (the URL calls it
	'Module 1 - Know Your Vehicle').

- (41) We only attend two jobs all day: one stroke where we support another crew and I never leave the vehicle and one set of observations followed by four hours of trying to get through to control to clear.
- (42) The number of confirmed deaths increases by 563, with the total now exceeding 2,000.²⁸
- (43) APR 2 Ambulance shift with Crewmate B. We spend the whole day grounded at the ROCC waiting to be fit-tested for FFP3 masks.
- (44) APR 3 Ambulance shift with Crewmate A. I am the only driver, and drive for the full 12-hour shift; prior to this, the most driving I have ever done in a single day is a single four-hour trip some years ago.
- We are both newly-qualified EACs (me more so), and my crewmate comments that it is strange that they have put such a 'virgin crew' together. We have three calls: a patient transfer who is already gone by the time we arrive, an elderly faller and a bariatric patient (?UTI and ?sepsis). This third patient is effectively my first complex job as an ambulance crewman. I struggle to find a brachial pulse during a manual BP, realise I'm starting to flap and ask my crewmate to take over.
- (46) APR 4 Ambulance shift with Crewmate A. Another 12 hours of driving.
- (47) During our VDI that morning I practice taking a manual BP on my crewmate. They give me some pointers and I have no further difficulties.
- (48) Later in the day I misjudge the approach to a traffic calming measure and scrape the side of the vehicle, sustaining some cosmetic damage and leaving the vehicle temporary beached. Unsure of how to report this I submit a VDR.
- (49) : At some point around this time (or close to it), SJA announce that volunteers will be eligible for death-in-service payments.

²⁷Email from Regional Driver Training Lead to author (1 April 2020).

²⁸BBC News, 'Coronavirus: Boris Johnson vows more virus tests as UK deaths exceed 2,000' (*BBC News*, 1 April 2020) (https://www.bbc.com/news/uk-52122761) accessed 12 July 2020.

- (50) APR 8 Ambulance shift with Crewmate C. I am the only driver.
- (51) APR 9 Ambulance shift with Crewmate C.
- (52) APR 10 Ambulance shift with Crewmate A. During a routine hospital discharge for a COVID-19-positive (but stable) patient, I believe I may have seen an injured pedestrian. After considering the best course of action, I decide to perform a U-turn and re-assess to see if someone requires urgent aid, but I am unable to find anyone and continue on to our initial destination. After we clear from the job, I explain what had happened to my crewmate, who states that they do not believe I should have returned to the scene given that we were already on a job. I disagree, and we move on.
- (53) APR 11 At some point, Crewmate A complains to their AUM about me.²⁹ They do not mention that the patient I struggled to find a brachial pulse on was bariatric, claim that I almost hit them (and that I apparently *did* hit a pedestrian) whilst beached on the traffic calming measure and claim that I repeatedly failed to assist in the cleaning and restocking of the vehicle.³⁰ They have made no mention of any of these issues to me.
- (54) The C&M AUM decides to conduct an 'informal information gathering exercise' and raises the concerns to my DM at some point prior to May 22. At no point does the AUM contact me to provide a statement on any of the allegations, nor inform me that the investigation is taking place.³¹
- Later that day, the RDTL emails me to ask if I have completed an IRF for the incident on Apr 4th;³² I had not (as I had submitted a VDR already), but I submit one as well.³³ The RDTL's email includes the line 'if you [hav]e no idea what I'm referring to please let me know'; I do not think anything of this at the time, assuming that my VDR has prompted the email. In fact, they were informed by the ROCC,³⁴ presumably prompted by Crewmate A's comments to their AUM.

²⁹District Manager, *Investigation Report* (2.0) s 3.

³⁰MSY Investigation Report (n 23).

³¹See ¶ 268; the AUM concludes that I require driver mentoring, but my DM does not appear to have acted on this suggestion. I only find some of this out on May 25 (see ¶ 164) and the remainder on Jul 14 (see ¶ 341).

³²Email from North Regional Driver Training Lead to author (11 April 2020).

³³Email to North Regional Driver Training Lead from author (11 April 2020).

³⁴Phone call between North Region Driver Training Lead and author (recording held by author, 15 June 2020).

- (56) APR 12 At 16:13 I submit my availability over the next week to the ROCC.³⁵
- (57) COVID-19 deaths in the UK exceed 10,000 for the first time.³⁶
- (58) Meanwhile, the much-delayed new SJA *Driving Policy* is finally released.³⁷ They also release supplementary COVID-19 driver training guidance. My three-month derogation will now last until the end of the year.³⁸
- (59) APR 16 The C&M AUM calls to tell me that they would like to make sure that inexperienced crews are not being paired up, and so I will not be able to crew with Crewmate A any longer. They make no reference to Crewmate A's allegations or to their own 'informal information gathering exercise'.³⁹
- (60) My employer gives me until the end of June off to volunteer with SJA.
- (61) APR 17 Ambulance shift with Crewmate D. I am the only driver.
- (62) Meanwhile, Crewmate I (with whom I have yet to crew, and who I have only met once before) tells my UM that they are apprehensive about crewing with me in case they have to 'carry me'. 40
- (63) **APR 18 Ambulance shift with Crewmate E.** We are both drivers.
- (64) At one point we end up playing musical ambulances due to vehicle issues. The ROCC assign us a bariatric ambulance—which requires a category C driving license, which I lack—by mistake. It is my crewmate who notices this; had they not been aware of the difference, I would have spent the rest of the day driving it illegally.⁴¹
- (65) APR 19 Ambulance shift with Crewmate E.

³⁵Email to North ROCC from author (12 April 2020).

³⁶BBC News, 'Coronavirus: 'Sombre day' as UK deaths hit 10,000' (*BBC News*, 12 April 2020) (https://www.bbc.com/news/uk-52264145) accessed 12 July 2020.

³⁷Driving Standards Verification Lead, 'New Driving Policy hits the road...' (*SJA CONNECT*, St John Ambulance 15 April 2020) (https://sjaconnect.me/Communicating/News-and-announcements/Latest-News/Pages/New-Driving-Policy-hits-the-road.aspx); St John Ambulance, *Driving Policy* (1.0, 2020).

³⁸St John Ambulance, COVID-19 Support and Derogation Process (2020).

³⁹Phone call between Cheshire & Merseyside Ambulance Unit Manager and author (April 2020); I do not recall the exact date of this conversation.

⁴⁰See ¶ 126.

⁴¹I do not know the exact date that this occurred, but I am sure it was with Crewmate E.

- (66) : Around this time (I do not know the exact date), I contact my GP Practice to ask about getting a Hep. B vaccination now that I am doing ambulance work. They tell me that I will have to go through SJA's Occupational Health department.⁴²
- (67) I am also told by the ROCC that I will be third-manning with an EAC and a paramedic on Sat.⁴³
- (68) APR 23 Ambulance shift with Crewmate F. I am the only driver.
- (69) At the start of the shift, Crewmate F signs on with the ROCC and tells them that we have fitted FFP3 masks despite me having told them that I am not fit-tested on the ones we have. The ambulance service immediately give us an FFP3-requiring job. I refuse to attend without being fit-tested and get a lot of grief from the ROCC for having said I was, despite the fact that I was conducting vehicle checks whilst my crewmate made the call. Crewmate F denies that they said anything, and later claims to have been unaware that fit-tests were needed for each make of mask.⁴⁴
- (70) I also somehow get signed on as a response driver (i.e., capable of driving under blue light conditions), and again have to argue with my crewmate to correct this.
- (71) **APR 24 Ambulance shift with Crewmate G.** I am the only driver.
- (72) APR 25 Ambulance shift with Crewmate G.
- (73) **APR 26 Ambulance shift with Crewmate H.** I am the only driver.
- (74) **APR 27**
- (75) APR 28 As my UM has taken a step back from SJA to focus on their role in the NHS, I email my AM to ask them to arrange a Hep. B vaccination for me.⁴⁵ They reply that they are not sure how to, and that they got theirs by going to their GP.⁴⁶
- (76) APR 29 Ambulance shift with Crewmate F.

⁴²Phone call between GP Practice and author (April 2020).

⁴³WhatsApp message to SJA colleagues from author (21 April 2020).

⁴⁴I am pretty certain that this was my first shift with Crewmate F, but it may have been one of the others.

⁴⁵Email to then-Area Manager from author (28 April 2020).

⁴⁶Email from then-Area Manager to author (28 April 2020).

(77)	On our first job of the day, we require assistance to transfer the pa-
	tient onto a carry chair. A family member asks a neighbour to as-
	sist, ⁴⁷ and the neighbour agrees to do so.

- On our last job of the shift, I have to stop my crewmate and a hospital HCA when they come close to seriously harming a patient during a routine bed transfer. I then also have to spur them into action when the patient vomits whilst on their back and begins to choke.
- I raise this with my crewmate on the drive back to the station, and they blame the HCA, claiming that they don't feel comfortable disagreeing with 'an HCP'. Having previously told me that they have been in SJA for five years and ambulance-qualified for one, they now tell me that they have only been doing actual ambulance work for a week and have never done a hospital bed transfer before. I give them some tips on assertiveness and tell them to remember that HCPs are not infallible.
- (80) My crewmate is clearly not happy, but nonetheless drives me back to my hotel. They tell me that they will report what has happened to the ROCC. I tell them that I don't see any need to, as I'm happy that the problem is now resolved and won't happen in future. I tell them to sleep on it first, but they insist. If anything is reported, I am not copied in.
- (81) That evening, I email my DM asking them if they know what I should do about the Hep. B vaccinations.⁴⁹ I never receive a reply.
- (82) Official figures include deaths in the community, such as in care homes, for the first time; the total number of deaths passes 26,000.⁵⁰

(83) APR 30 Ambulance shift with Crewmate F.

(84) The shift is tense after yesterday's incident. Whilst I am supposed to crew with Crewmate F again tomorrow, I decide to ask the ROCC if I can crew with someone else instead; they tell me to leave it with them.

⁴⁷This may have been me or my crewmate's idea, or on their own initiative.

⁴⁸Whilst, technically, an HCA *is* a professional who works in healthcare, within SJA the term 'HCP' generally refers to *registered* healthcare professionals (e.g., doctors, nurses).

⁴⁹Email to District Manager from author (29 April 2020).

⁵⁰BBC News, 'Coronavirus: UK deaths pass 26,000 as figures include care home cases' (*BBC News*, 29 April 2020) (https://www.bbc.com/news/uk-52478085) accessed 12 July 2020.

(85) Our final job of the day is a three-hour job that is both medically and logistically challenging. We enlist the help of a doctor who lives down the road (offering them the use of our PPE), and by the end of it we are supported by two statutory ambulance service crews.

(86) As we finally clear from the job, I see that the ROCC Travel Coordinator has left me a message so I call them back. They tell me that no additional crewmates are available tomorrow, and so they have taken me off the shift.

I tell Crewmate F that I will not be crewing with them tomorrow. This prompts them to finally bring up the previous night's events. We pull up at the ambulance station and get into an argument. After it is out of our systems, we have a calmer discussion and (as far as I can tell) resolve the issue. They tell me that they reported the incident to the ROCC the night before, apparently adding that they felt I had unfairly blamed them for it and given my feedback insensitively. I decide it will be best to give each other some space and leave tomorrow's shift un-covered even though we have seemingly made amends.

- (88) Apr 31
- (89) **May 1**
- (90) MAY 2 I email the ROCC a list of detailed feedback points based on my first month of ambulance crewing. One of them relates to the Apr 29 incident with Crewmate F, though I do not specifically reference it or them.
- (91) I write the following:

...when assessing experience consideration definitely needs to be paid to a) how long they've been ambulance crew (i.e. not just how long they've been in SJA) and b) how much of that time was spent on events and how much was doing trust support shifts, as otherwise you risk pairing a newbie with someone who's been an ETA [a common SJA legacy ambulance qualification] for ages but only ever done events as a fancy first aider and has limited experience with hospital admissions, patient extrication, etc.⁵¹

⁵¹Email to North ROCC from author (2 May 2020).

- (92) May 3
- (93) **MAY 4** The Practice Nurse from my **GP** Practice emails me to confirm that Hep. B for occupational health purposes should be offered by my employer's occupational health department.⁵²
- (94) May 5 Ambulance shift with Crewmate G.
- (95) The UK death toll becomes the highest in Europe, and the second-highest in the world.⁵³
- (96) MAY 6 Ambulance shift with Crewmate G. I am due to crew with Crewmate G again tomorrow, but due to fatigue I do not feel safe to drive for three 12-hour blocks in a row and cancel the shift. I reflect that I am growing more aware of my limitations as I bed into the role.
- (97) At 20:08, the ROCC Duty Manager replies to each of my feedback points from May 2. Regarding my point about crew pairing, they assert that experience *is* being taken into account when pairing people (despite my experience suggesting otherwise), and instead focus critically on my use of the phrase 'fancy first aider'.⁵⁴
- (98) **May 7**
- (99) May 8 Ambulance shift with Crewmate E.
- (100) May 9
- (101) MAY 10 I submit my availability for the remainder of May (i.e., all of it) to the ROCC.⁵⁵ Back-and-forth ensues between me and Call Handler B for the next four days as we try to arrange shifts, and the email chain eventually grows to 20 emails.⁵⁶
- (102) **MAY 11** Whilst I am waiting, I suddenly remember the e-learning course the RDTL sent me back on Apr 1 and complete it.

⁵²Email from GP Practice Nurse to author (4 May 2020).

⁵³Jon Sharman, Peter Stubley, and Vincent Wood, 'Coronavirus news – live: Key government adviser resigns over lockdown breach as UK becomes Europe's virus epicentre' (*Microsoft News*, 5 May 2020) (https://www.msn.com/en-gb/news/uknews/coronavirus-news-live-uk-death-toll-now-second-highest-in-the-world-as-dominic-raab-gives-daily-briefing/ar-BB13BwQk) accessed 12 July 2020.

⁵⁴Email from North ROCC to author (6 May 2020).

⁵⁵Email to North ROCC from author (10 May 2020).

⁵⁶Multiple emails between ROCC and author (12–14 May 2020).

(103) At 14:08, the ROCC TC emails me and Crewmate E for our response to an IRF alleging that we left an ambulance in an unclean state.⁵⁷ I call Crewmate E to discuss it⁵⁸ and we realise that we have no record of having ever been assigned the ambulance in question. I send a response back,⁵⁹ and Crewmate E then concurs.⁶⁰

(104) :

- (105) May 14 Call Handler B and myself eventually settle on some shifts.
- (106) May 15 At 14:59, the ROCC Travel Coordinator books me a hotel in Liverpool from May 17–21 and return train tickets. Roughly five minutes later, both are cancelled. They call me to ask if I would like to crew out of Preston instead as it is 'easier' and they have a crewmate for me. I say sure; the Travel Coordinator books new train tickets. 3
- (107) **May 16**
- (108) **May 17**
- (109) MAY 18 Ambulance shift with Crewmate I. We attend two simple jobs and a running call that doesn't amount to anything; most of our day is spent on standby. At one point my crewmate asks me, seemingly apropos of nothing, if I know how to perform a manual BP.⁶⁴
- (110) At another point, I mention that I have had no luck getting a Hep. B vaccination and ask if they know what the process is. They say they will ask the C&M AUM on my behalf and let me know.⁶⁵

⁵⁷Email from North ROCC Tactical Commander to author & Crewmate E (11 May 2020).

⁵⁸Phone call between Crewmate E and author (11 May 2020).

⁵⁹Email to North ROCC Tactical Commander from author (11 May 2020).

⁶⁰Email from Crewmate E to North ROCC Tactical Commander (11 May 2020).

⁶¹ Email from Click Travel to author (15 May 2020); Email from Click Travel to author (15 May 2020).

⁶²Email from Click Travel to author (15 May 2020); Email from Click Travel to author (15 May 2020).

⁶³Email from Click Travel to author (15 May 2020); Email from Click Travel to author (15 May 2020); Email from Click Travel to author (15 May 2020).

⁶⁴This may have been on the May 19 shift instead.

⁶⁵Conversations between Crewmate I and author (18 May 2020).

- (111) MAY 19 Ambulance shift with Crewmate I. At 12:40 I receive an email from the C&M AUM inviting me to a virtual training session the following evening, as well as asking for my availability for a phone conversation. They tell me the call is 'only in relation' to our conversation from the previous month. I reply to say that I will be on-shift tomorrow evening, but that I will give them a ring shortly. At 13:42 I call, but get no response.
- (112) Later, we return to the ROCC at Crewmate I's urging to change vehicles, as they claim to be able to hear a concerning noise. Whilst I am inspecting the new vehicle, they visit the ROCC office. They eventually return and say that we have been stood down by the ambulance service as there is 'nothing happening' in this area.
- (113) I ask whether it would be worth asking ambulance control if they'd like us to cover another area, as we both live out-of-area anyway. My crewmate tells me to go up and ask the ROCC, where the Duty Manager says they don't think there's any point and that we should just go home.
- On the drive back home, I call the C&M AUM again (at 16:20). They pick up, say they're in the middle of something and will call me back shortly.⁶⁸ They never do.
- (115) The ROCC email me at 20:51 to say that Crewmate I is unable to make tomorrow's shift and there is nobody else available to crew with me.⁶⁹ I ask Crewmate I if everything is okay; they tell me that they've had some bad news and apologise, so I tell them not to worry and that I hope everything's okay.⁷⁰
- Unbeknownst to me, Crewmate I is in fact submitting a whollyspurious IRF against me.
- (117) May 20
- (118) May 21
- (119) MAY 22 At 14:54 I call the C&M AUM again; no reply.

⁶⁶Email from Cheshire & Merseyside Ambulance Unit Manager to author (19 May 2020); see ¶ 59.

⁶⁷Email to Cheshire & Merseyside Ambulance Unit Manager from author (19 May 2020).

⁶⁸Phone call between Cheshire & Merseyside Ambulance Unit Manager and author (19 May 2020).

⁶⁹Email from North ROCC to author (19 May 2020).

⁷⁰SMS messages between author and Crewmate I (19 May 2020).

(120) At 15:33 my UM—the two of us having specifically requested to crew together on the 23rd so that they can give me a clinical review and provide any feedback—tells me that the ROCC have put us both down for shifts that day, but not together.⁷¹ At 16:16 I call the ROCC to ask if they've decided where my shifts the following week will be yet. Call Handler C informs me that there are no crewmates available on those dates, including the 23rd and 24th, where I had booked on with *specific* crewmates. I bring this up and am told they will have a look at my email chain with Call Handler B and get back to me.⁷² I update my UM.⁷³

At 16:35 I copy the C&M AUM in an email chain I am having with another AUM regarding which virtual AU I wish to attach to (as C&L District does not currently have one); I ask to be assigned to the C&M AU. I add that I've been struggling to get through to the AUM for the conversation they requested and ask if they could 'let me know when's a good time';⁷⁴ I do not receive a reply.

At 18:29 my UM tells me they have received a confirmation email for their shift tomorrow and that they are not crewing with me. Having heard nothing for two hours, I call the ROCC back at 18:32. Call Handler C claims that they had written an email and forgotten to send it; I then receive a terse email saying that there are no available shifts out of that location on the 24th or 25th May and therefore I am not booked on.⁷⁵ I am annoyed to have lost my chance for a muchneeded clinical review, and inform them that I will be submitting a complaint. They ask me to send over my availability for the rest of the month.

- (123) I submit my complaint at 19:11.⁷⁶ The ROCC TC replies at 19:51 to say that they will contact me once Assurance have responded.⁷⁷
- Whilst all of this is going on, and of course unbeknownst to me, my DM is contacting the AM (District Support) to ask if they will conduct an investigation into IMF 76723, submitted by Crewmate I; they agree.

⁷¹WhatsApp messages between then-Unit Manager and author (22 May 2020).

⁷²Phone call between North ROCC and author (22 May 2020).

⁷³WhatsApp messages between then-Unit Manager and author (n 71).

⁷⁴Email to Greater Manchester and Cheshire & Merseyside Ambulance Unit Managers from author (22 May 2020).

⁷⁵Email from North ROCC to author (22 May 2020).

⁷⁶Email to Assurance from author (22 May 2020).

⁷⁷Email from North ROCC Tactical Commander to author (22 May 2020).

- (125) At 23:12 I ask my UM if they have 'heard anything that might suggest there's more to this than just the ROCC being shit? because i'm getting a little suspicious about [Crewmate I] bailing on the third shift last-minute, all this with the ROCC today, [and then the C&M AUM] asking for a phone chat...'..⁷⁸
- (126) May 23 My UM replies at 00:14, saying that some people had raised concerns with them that I had been sent out too soon, adding that they had assured them of my ability and asked that any future concerns be raised with them. They assure me that they haven't heard anything further.
- (127) However, they do tell me about Crewmate I's comments on Apr 16 that they were apprehensive about crewing with me in case they had to 'carry [me]'.
- (128) I share my "it's not a conspiracy" theory with my UM:

[Call Handler B] put me down as available on those dates and for those locations but didn't assign crews, someone's come along later with none of the backstory and just assigned the two highest-ranked people available for that date and location to a crew (you and [my AM]), and then for the shifts next week they've done the same...and had an odd number of people so I got left out again.⁷⁹

Poking fun at my earlier worries, I tell them that 'between that weird string of coincidences and the ROCC grounding me last month when I had that issue with leave (but not telling me) my spidey sense was tingling a bit'.

- (129) I get to bed shortly afterwards.
- (130) The AM (District Support), in their capacity as the IO, wakes me up with a phone call at 11:08 to inform me I am under investigation and suspended. At the end of the call I ask for an email summary of our call, and at 11:42 I update my UM, writing that it 'turns out I had too much faith in them, got a call from [the IO] saying someone's IRF's[sic] me and I'm non-op[erational] whilst they conduct an investigation into my clinical ability'.

⁷⁸WhatsApp messages between then-Unit Manager and author (n 71).

⁷⁹WhatsApp messages between then-Unit Manager and author (23 May 2020).

⁸⁰Phone call between Investigating Officer and author (23 May 2020).

- (131) My UM says that they'll see if they can find anything out from the ROCC, and says I can talk to them if I need to.⁸¹
- I receive the call summary email at 18:17. The email states only that 'clinical concerns have been raised and as a result of this the IRF[sic] system has been instigated...' and that that I 'have been requested not to take part in any clinical facing roles'. The IO explains that their 'role is to look at all the information and present this to you durning[sic] a meeting [as] this will give you the opportunity to respond', and that the DHRL will also be present in the meeting to take notes, a copy of which I will then receive.⁸²
- (133) At 18:22 I forward the email to my UM⁸³ and reply to the IO, asking for the UM to be copied into subsequent emails.⁸⁴
- (134) May 24 At 12:14 I follow up with another email, this time asking whether 'I [can] hear the substance of the complaint made against me? Or the rough gist of it at the very least?' I add that 'it's rather disconcerting being excluded from an investigation into one's own alleged wrongdoing' and ask if they can 'give me a rough sense of how long you expect this process to last'.85
- (135) Separately, I also follow up my earlier complaint about the ROCC stating that 'I've now been informed that there is another ongoing IMF process involving me that may be responsible for the issues I raised below' and asking them to 'consider this complaint on-hold until that has been resolved'.86
- (136) At 16:42 I receive a response from the IO. It states that 'all information regarding the clinical concerns will be presented to you during the meeting, it can then be documented and a true record can be recorded'. They reiterate that 'my role is to obtain the information and return my findings' and that 'timescale wise it will be as quickly as possible'.

⁸¹WhatsApp messages between then-Unit Manager and author (n 79).

⁸²Email from Investigating Officer to author (23 May 2020).

⁸³Forwarded email to then-Unit Manager from author (23 May 2020).

⁸⁴Email to Investigating Officer from author (23 May 2020).

⁸⁵Email to Investigating Officer from author (24 May 2020).

⁸⁶Email to North ROCC Tactical Commander and Assurance from author (24 May 2020).

They also advise me that my UM cannot be copied in as 'if it is felt that the investigation need to be moved into a formal process, this would then involve them and may hinder the process', but stress that they are 'not suggesting in anyway[sic] at this stage that this will happen'.87

(138) May 25 At 13:07 I receive another email from the IO, with the DHRL now copied in. The IO announces that they 'have now got all the information I require to proceed with the investigation and carry out a meeting with you' and that, 'additional to the clinical concerns that were raised, some information has been disclosed about driving concerns' that they will also be asking questions about these during our interview.⁸⁸

- (139) A letter is attached that formally invites me to an investigatory meeting via Microsoft Teams on May 29 that 'has been arranged because we are in the process of investigating allegations that have been made relating to your conduct in the workplace'.
- It states that the 'alleged misconduct includes Clinical Concerns and Driving Capabilities' and clarifies 'the meeting is entirely a fact-finding exercise and it does not form part of the St John Ambulance's formal disciplinary procedure', meaning that I 'do not have the automatic right to be accompanied at this stage'. It explains that the meeting may lead to a decision to 'institute formal disciplinary proceedings against you'. It ends with a request to 'please bring...any information that might be of assistance to the investigation', ⁸⁹ despite the fact that I have not been told what is being investigated.

(141) At 13:29 I reply, stating that I am concerned about not being told the allegations against me (which, from the language in the letter, appear to have jumped in seriousness). I also ask if it would be possible to have the meeting earlier. At 14:13 I follow this up with a request for the IMF number for this incident, which I notice has not been mentioned thus far. 91

⁸⁷Email from Investigating Officer to author (24 May 2020); despite being required to do so (see St John Ambulance, *Volunteer Disciplinary Procedure* (2.0, 2015) s 2.10.5), no VSO is ever provided for me. I am left with nobody to talk to and having to work out everything about this process on my own.

⁸⁸Email from Investigating Officer to author (25 May 2020).

⁸⁹Letter from Investigating Officer to author (25 May 2020).

⁹⁰Email to Investigating Officer from author (25 May 2020).

⁹¹Email to Investigating Officer from author (25 May 2020).

- (142) At 22:54 I let my UM know that '[the IO] said I couldn't have you CC'd into things because you're my line manager and if it goes to a disciplinary process then you'll need to be involved in that and it'll cause dramas...'.92
- (143) May 26 The Data, Incidents & Feedback Manager sends me an email at 08:03 regarding my earlier complaint against the ROCC, informing me that it has been assigned reference number 1105 and IO B.⁹³ I reply with a copy of my earlier email asking for the complaint to be put on hold and for them to pass the message on to IO B.⁹⁴ They confirm that they will.⁹⁵
- (144) May 27 I wake up at 01:30 and can't get back to sleep so I begin drafting a complaint to submit once everything has wrapped.
- (145) I call the Regional MRT Lead at 12:29, but get no response. I send them a message on WhatsApp asking if I can invite Crewmate F (who is not a member of the MRT) to a virtual training session tonight that is relevant to our Apr 30 job, but get no response.
- (146) I call the C&M AUM at 12:32, but get no response.
- I call the IO at 12:35, but get no response. I call them again at 12:45 and leave a message asking them to respond to my email as soon as they can. I call them again at 19:07; no response. At 19:17 I email them again, copying in Assurance, reiterating my wish to hear what I have been accused of and pointing out that this experience is contrary to my past IMF experiences. I declare that I will not participate in the interview unless I am told the allegations against me by close-of-play tomorrow.⁹⁶
- (148) Something feels off, so from this point on I am recording my phone calls.

⁹²WhatsApp messages between then-Unit Manager and author (25 May 2020).

⁹³Email from Data, Incidents & Feedback Manager to author (26 May 2020).

⁹⁴Email to Data, Incidents & Feedback Manager from author (26 May 2020).

⁹⁵Email from Data, Incidents & Feedback Manager to author (26 May 2020).

⁹⁶Email to Investigating Officer from author (27 May 2020).

(149)	At 21:56 the IO replies, apologising for not getting back sooner due to work commitments. The IO claims that 'at no point in any communications or phone calls have Linformed you that you are sue
	munications or phone calls have I informed you that you are sus-
	pended', and that my clinical suspension 'doesn't prevent you from
	carrying out any other support roles for SJA'.97 They again stress
	that the scheduled meeting 'is not a disciplinary process and is a
	fact finding meeting to the concerns raised from an IRF generated
	and other concerns shared with the district team'—the first time the
	involvement of the District Team has been mentioned.

- (150) They state that 'it is not normal practice to send documentation in advance of these meetings'98 and assures me that 'no one is trying to withhold information or cause you undue stress or worry'; unfortunately, the 29th is the earliest date on which everyone is available.99
- (151) I reply at 23:15, clarifying that as I have no non-clinical roles in SJA a clinical-only suspension is tantamount to a full suspension, stating in no uncertain terms the harmful effect that this situation is having on me and absolutely refusing to take part in the interview.¹⁰⁰
- I also continue drafting my complaint and collecting evidence that I will be submitting when the investigation wraps. That complaint eventually expands into the whistleblowing report that will prompt an internal investigation by SJA, and which I will later adapt into the present document.
- (153) May 28 The IO replies at 08:26, saying that they have 'sent an email to HR to ask for clarification of what pre information could be send over to support you and myself with this meeting taking place', but stating that they are 'following what is a normal practice with these types of meeting and what advice was given to me on my training of being an IO from [NHQ]'.101

⁹⁷I don't think the IO had writing this report in mind.

⁹⁸It is presumably also not normal practice to hold these meetings over Teams, but that appeared to be lost on the IO

⁹⁹Email from Investigating Officer to author (27 May 2020).

¹⁰⁰Email to Investigating Officer from author (27 May 2020); in retrospect I realise that this would make a good case study for non-clinical applications of the PACE model of graded assertiveness.

¹⁰¹Email from Investigating Officer to author (28 May 2020).

I receive a call from the IO at 13:48. The Regional HR & Admin. Manager has confirmed that the IO doesn't 'have to disclose any information before an investigatory meeting'. The IO explains that 'when I first spoke to you it was about a clinical concern [but that] when that information pack came through there was some information about a driving incident [and I] just need to clarify some further questions about it'. They tell me that the driving incident was on Apr 4 and, when I express surprised that it was so long ago, say that this was 'probably one of the quickest turnarounds I've done on an investigation meeting'.

They express sympathy when I say I am 'disappointed by this whole process [having only been told] that "something's been raised" and it's apparently severe enough that I've been suspended effectively completely in the middle of a pandemic, but [that they've] not given me any sort of hint as to what it is'. The IO says that they are 'having to work with the policies and procedures that are there' and assure me that I will be within my rights to raise a complaint if I feel it necessary.

(156)

(157)

(158)

I mention that nobody is returning my calls and ask if this is because they have been told not to interact with me during the investigation (a la my UM); the IO assures me that only my UM has been told to keep a distance.

Accepting that I will not be told the substance of the clinical concerns, I try to glean some information as to whether they relate to 'an acute thing that I've done that somebody's reported' or 'a chronic concern'; the IO replies that the concerns are 'around practice' and that there is an 'ongoing concern across a number of different people', but that they 'wouldn't say it is critical'. In disbelief, I point out that 'it's critical enough to suspend me from clinical stuff in the middle of a pandemic'.

I ask further questions as to when my suspension was put in place, and the IO says that I was suspended on Sat 23. I ask if the ROCC might have known this was coming earlier as they had been behaving suspiciously with my shifts, but the IO says that they shouldn't have done; they advise me to follow that up with them afterwards.

(159)

I express further disbelief at the fact that some of the concerns had been raised in early April, but that nobody had mentioned anything and I hadn't been suspended until a month and a half later. The IO says that this is 'human nature sometimes'; I reply that there was 'nothing human about it' and that it was 'fucked up'. I conclude by saying that I had no faith in the process, but will nonetheless give them the benefit of the doubt and participate in the interview.¹⁰²

(160)

I write a transcript of the call and email this to the IO at 16:57; I also change the subject for the email chain to "IMF76723". 103

(161) May 29

The interview starts at 11:55 and runs for 1 hr 46 min. I ask if I can record the video call, but am told no. The IO reads an initial spiel that explains how the interview will take place, and states that 'this investigation is being carried out in accordance with the St John Ambulance [Disciplinary/Grievance¹⁰⁴/Bullying and Harassment] Policy'.¹⁰⁵ They then read questions from a script regarding the various allegations, as well as about related matters like my past driving history. The DHRL takes notes.

(162)

As many of the allegations relate to events that happened over a month and a half previous, much of the time is wasted on me attempting to jog my memory, exactly as I had said it would be in my earlier emails. Some of the allegations relate to genuine mistakes on my part, committed during my first few shifts. Some (I believe) are a result of my initial unfamiliarity with certain processes having been misconstrued as unhelpfulness.

(163)

A number of the allegations are vague (e.g., 'it is alleged that...you did not contribute to any treatment or monitoring of a patient'), which I can only dispute in vague or double negative terms (e.g., 'I don't think I *didn't* treat the patient because in other cases I definitely do').

¹⁰²Phone call between Investigating Officer and author (recording and transcript held by author, 28 May 2020).

¹⁰³Email to Investigating Officer from author (28 May 2020).

¹⁰⁴It was not specified whether this referred to the *Volunteer grievance procedure* or the *Grievance Procedure* (which is only for SJA employees); as Crewmate I is an SJA employee and was responsible for submitting the grievance I assume the latter.

¹⁰⁵FAO whoever wrote this spiel: when spoken aloud, this 'delete as appropriate' slash-separated list of options sounds like 'the St John Ambulance Disciplinary, Grievance, Bullying & Harassment Policy', which is more than a little disconcerting for the accused.

(164)	One allegation related to my decision to perform a U-turn to assess
	what I believed may have been an injured pedestrian whilst trans-
	porting a COVID-19-positive patient home. 106 They ask me if I am
	aware of the Infection Prevention and Control Procedure. I state that
	I am aware of what I have been taught in my training.

- (165) Some allegations are utterly without merit (e.g., 'you were unaware of what a [GCS] was') and would have been immediately shown to be such had a) the complainant asked a question at the time or b) the allegation been put to me at the beginning of the investigation.¹⁰⁷
- (166) At 16:01 I email the IO a wealth of supporting documents. I also ask if they could pass a message on to the complainants with advice on how to speak up in person, as I consider it to be 'vital to the safety of oneself and one's patients'. 108
- At 20:29 the IO emails me the transcript of the interview and asks if I have any amendments. The transcript contains the text of each of the questions they had asked me, followed by a series of bullet points summarising my response. Looking over it, I am concerned to find that many of the notes lack detail, that some put words in my mouth or make what had been a 'Ben said this *might* have happened' into a 'Ben said this *did* happen' and that some even say the direct opposite of what I had said. 110
- (168) I call the IO at 20:50 to clarify whether this document will be sent to my DM as-is or if it will form the basis of a report written by the IO. They say that the notes will serve as prompts for the IO when writing a summary to each question, which will then be forwarded on along with supporting documents to my DM to make a final decision.
- In the 22 min 10 s call that follows, I say that I would have much preferred to have just received the document containing the questions back on the 23rd so that I could write my own responses in; they reply that '[the policy] doesn't allow for that'111 but that 'somebody higher up than me must have written that policy for a reason'.

¹⁰⁶See ¶ 52; having discussed this incident with multiple colleagues since, I have concluded that there was no obvious correct response and that the situation was particularly difficult and any response unavoidably controversial.

¹⁰⁷Interview (29 May 2020).

¹⁰⁸Email to Investigating Officer from author (29 May 2020).

¹⁰⁹Email from Investigating Officer to author (29 May 2020).

¹¹⁰District HR Lead, *Transcript - Investigation Interview* (2020).

¹¹¹This is false; see *Vol. Disc. Proc* (n 87) s 2.11.2.

(170)	I ask what policy the concerns had originally been raised under. The
	IO replies that the IRF(s) from the early April shifts came under the
	Incident Management Framework (IMF) policy and the complaints
	from the mid-May shifts under the <i>Grievance Procedure</i> . 112

(171) The IO comments that these latter complaints had been raised 'loosely' under the procedure (both of which state that attempts must be made to resolve matters informally first).

113 I challenge the fact that this had not been the case, to which the IO claims that the investigation represents the final informal step, after which the formal procedures may begin. They acknowledge that 'reading through the documents it doesn't really jump out like that to you'.
114

(172) The IO lets me know that, 'from my point of view, my thought process is that this is very much of you've been chucked in at the deep end very quickly, and that had you had a bit more of third-manning opportunity and development time that I don't think things like this would have been raised.'115

(173) The IO tells me that my DM is aware that they might be receiving the final report hopefully by the end of the weekend. I ask some more questions about the process:

Do you tell the complainants the outcome? No.

Is there anything restricting me from talking to the complainants about the issues raised? '[I] don't suppose there is, just be mindful of how they might perceive it'.

Do I find out the full list of incidents and grievances raised at the end of the process? 'I'll need to check'.

They did not clarify whether this was the *Volunteer grievance procedure* or the *Grievance Procedure* for employees; I have again assumed the latter, but it does not make much practical difference. At any rate, this is false; there was no early April IRF, and the mid-May 'grievance' was the IRF that started this whole investigation.

¹¹³St John Ambulance, *Grievance Procedure* (2.0, 2019) ss 4.1.1 & 6.5.1; St John Ambulance, *Volunteer grievance procedure* (1.1, 2014) s 15.

¹¹⁴This is false; both grievance procedures clearly list investigations under the headings of 'Formal Process' (*Griev. Proc.* [n 113] s 5.4; *Vol. griev. proc.* [n 113] ss 22–26), as does the *Volunteer Disciplinary Procedure* (*Vol. Disc. Proc* [n 87] s 2.5.3), as does basic common sense.

¹¹⁵Phone call between Investigating Officer and author (n 6) 01:45–02:12.

I follow up the question in my email about passing on a message about the need to be assertive. The IO says that they will raise this within the newly-formed virtual Regional AU. Finally, I ask if the IO has contacted anybody else in the course of their investigation who is now aware of my suspension, and whether they will be contacted with the final outcome or if I will have to clear my own name. The IO says that they have contacted a few people for clarity, but that they have not made anybody aware of the suspension as this would not be fair on me.¹¹⁶

- (175) At 22:44 I submit a list of amendments for the fifteen most glaring inaccuracies in the transcript.¹¹⁷
- (176) May 30 The IO calls me at 14:24 to ask if I am happy for them to add my corrections to the transcript in a different colour to their notes before 'send[ing] it off'. Understanding 'it' to mean the final report that will be written from these prompts and not the transcript as-is, I say that's fine. They email me the updated transcript, 119 but I miss that they are now asking me to 'confirm you are happy for me to forward this onto [the DM] for review' and say yes. 120
- (177) May 31
- (178) **Jun 1** I email three points of feedback to the new RAL who, in their previous role as a RACTO, was the lead instructor on my EMT course. This feedback relates to the need to teach some form of graded assertiveness, as well as more focus on the more mundane aspects of crewing, like cleaning and restocking the vehicle and putting up with someone for 12 hours.¹²¹
- (179) Jun 2
- (180) **Jun 3** At 13:13 I email the IO to ask if there are any updates and whether their report is now with my DM. 122
- (181) The IO replies at 17:22, confirming that 'this information is now with [the DM], who is working on the document'. 123

¹¹⁶Phone call between Investigating Officer and author (n 6).

¹¹⁷Email to Investigating Officer from author (29 May 2020).

¹¹⁸Investigating Officer, *Transcript - Investigation Interview* (2020); Phone call between Investigating Officer and author (recording held by author, 30 May 2020).

¹¹⁹Email from Investigating Officer to author (30 May 2020).

¹²⁰Email to Investigating Officer from author (30 May 2020).

¹²¹Email to North Regional Ambulance Lead from author (1 June 2020).

¹²²Email to Investigating Officer from author (3 June 2020).

¹²³Email from Investigating Officer to author (3 June 2020); due to this constant shifting of responsibility, it is

- (182) Jun 4
- (183) **Jun 5** At 16:10 I call my **DM** to ask if they can give me an idea of when to expect a resolution. They tell me that further points of clarification were needed and that they are currently waiting on Assurance; with the weekend about to start, nothing will be happening until next week.
- (184) They also repeat the IO's disingenuous claim that I am only 'clinically suspended', and thank me for my patience. 124
- (185) A little later, I open my letterbox to find a letter from the COVID-19 National TC thanking me for my 'truly remarkable' contribution of 'more than 200 hours' in April.
- (186) The letter is dated May 21; two days before the start of my suspension. 125
- (187) **Jun 6**
- (188) **Jun 7**
- (189) **Jun 8** Shortly after midnight I message the Regional MRT WhatsApp group to ask if I can share a recording of a virtual training session with Crewmate F as it is relevant to our Apr 30 job. Some colleagues urge me to share more details about the job. I state that I am 'a bit wary of having a bunch of HCPs jump down my throat for making some obvious (to them) mistake', but at 00:40 I put my worries aside and share a reflective report. The report is fully-compliant with the Caldicott Principles and multiple people provide constructive feedback. 128
- (190) At 12:19 I call the FSU Guardian, but don't get through. I try again at 13:35 and leave a message asking them to call me back.
- (191) **Jun 9** Laying awake at 03:00 (as has by now become tradition) I realise that I have been unjustifiably patient towards an organisation that has so far treated me with contempt for two and a half weeks, and I've put my life on hold for long enough.

unclear if the author of the *Investigation Report* is the IO or the DM.

¹²⁴Phone call between District Manager and author (recording held by author, 5 June 2020).

¹²⁵Letter of commendation from COVID-19 National Tactical Commander to author (21 May 2020).

¹²⁶I had previously asked the Regional MRT Lead but had received no response; see ¶ 144.

¹²⁷See ¶ 85.

¹²⁸WhatApp messages between Regional MRT members and author (8 June 2020).

- (192) At 12:53 I call both the IO and my DM; no answers. At 13:38 I email them both demanding that I be kept in the loop on decisions that affect me, and asking why the process is continuing to drag on over a fortnight later.¹²⁹
- (193) I call my employer a little later to tell them that I'm happy to come back to work early, and I start making plans to head down south to be with my family.
- (194) **Jun 10** I talk to the **FSU Guardian** about my concerns and the first draft of what would later become my whistleblowing report.¹³⁰
- (195) That evening I catch up with my UM, who tells me they have resigned from the role. 131 My line manager is now, presumably, my AM, but nobody seems sure, least of all my AM.
- (196) **Jun 11** At 09:34 the ROCC TC asks me to comment on a new IRF (IMF 78000). The email includes the text of the IRF, which was submitted on Jun 8 at 21:00 and states the following:

Ben Goldsworthy (EMT[sic]) uploaded his reflection to a[sic] MRT WhatsApp group of a[n ambulance service] job that they attended and concerns was[sic] raised by members within the team.

Please contact me for full details¹³²

It is categorised under 'failed to obtain consent' and, bizarrely, the TC feels the need to 'to remind [me] of the implications in uploading pictures without consent' have, of course, at no point shared (nor taken) any pictures of any patients.

At 12:00 the IO emails me to say that two IRFs have been submitted relating to the MRT WhatsApp group (the previously-mentioned IMF 78000 and a new IMF 78026). They include no details of either, writing only that 'this relates to clinical practice'. It appears that they are unaware that the TC has already shared with me the full details of IMF 78000.

¹²⁹Email to Investigating Officer and District Manager from author (9 June 2020).

¹³⁰Phone call between then-Freedom to Speak Up Guardian and author (10 June 2020); Email to then-Freedom to Speak Up Guardian from author (10 June 2020).

¹³¹Phone call between then-Unit Manager and author (10 June 2020).

¹³²Harry G Frankfurt, On Bullshit (Princeton University Press 30 January 2005).

¹³³Email from North ROCC Tactical Commander to author (11 June 2020).

(198)	HR have decided to include both of these under the ongoing
	IMF 76723 investigation. The IO asks me to provide information on
	when and where the incident from my reflective report took place and
	who my crewmate was. 134

- I wake up, read this fresh onslaught of nonsense and reply to the TC's email, copying in the IO, at 12:27. I explain what happened and include a copy of my reflective report, as it does not appear that the the IRF submitter(s) have done so. I ask for them to consider my reply as the lodging of a formal grievance against the reporter(s) as their allegations are patently spurious. I also refuse to assist the IO and say that I will be contacting my crewmate to give them a heads up that they may be contacted.¹³⁵ I am not diplomatic.
- (200) I call Crewmate F and let them know what is going on. We talk for some time and catch up. They also express amazement at what has been going on. Whilst talking, I begin to remember that there are a lot of fantastic people in SJA; they just wear blank epaulettes.¹³⁶
- (201) All of my SJA interactions lately have taken place in an adversarial or inquisitorial context, but between this catch-up and talking to my UM the night before, I am reminded that there is still good in this organisation.
- (202) This is, once again, what we would call 'dramatic irony'.
- (203) The TC replies, copying in the Regional HR & Admin. Manager as they 'cannot take my direction to raise a grievance' and advising me that I will 'need to follow the correct procedure'. 137 I reply that 'recent experience suggests that following correct procedure is optional' and that I consider my part over. 138
- Just to make absolutely sure that confidentiality does not mean something different in healthcare, I show my reflective report to an MRT colleague who is also an HCP, who confirms that there is nothing wrong with it.¹³⁹

¹³⁴Email from Investigating Officer to author (11 June 2020).

¹³⁵Email to North ROCC Tactical Commander from author (11 June 2020).

¹³⁶Phone call between Crewmate F and author (recording held by author, 11 June 2020).

¹³⁷Email from North ROCC Tactical Commander to author (11 June 2020).

¹³⁸Email to North ROCC Tactical Commander from author (11 June 2020); I do not expect that the Regional HR & Admin. Manager ever did anything with my grievance.

¹³⁹WhatsApp messages between SJA colleague and author (11 June 2020).

At 13:13 I receive a call from the North East ALM about a complaint
from the ambulance service against me and my crewmate relating to
the job on Apr 29.140 In the context of the recent MRT allegations,
I spend a long time arguing that they are in fact calling about a job
on Apr 30. Things are not helped by the fact that both jobs were
with the same crewmate, both patients were elderly men and in both
incidents we received assistance from neighbours.

- (206) The ALM says that it is 'protocol' to call for an additional crew to assist with any patient lifts, though they do not specify whether they mean SJA or ambulance service protocol. I tell them I have never been told this before.¹⁴¹
- I call Crewmate F again and ask what they remember about the Apr 29 job. They jog my memory and confirm that they are also not aware of the apparent protocol. I comment that it's strange that they weren't contacted too; they reply that they'll 'probably get a call from [the ALM] after this one'. 142 I then email the North East ALM back with my recollections, copying in Crewmate F in case they have anything to add. 143
- (208) The IO replies at 14:22 to acknowledge my response to the MRT allegations and my refusal to provide the requested information.¹⁴⁴ I inform them that my UM has resigned and that I'm not sure who is now my line manager.¹⁴⁵
- (209) I realise later that the North East ALM's call was a probably a coincidence and not related to the ongoing investigation. I follow up my previous email, apologising for being unnecessarily exasperated and providing a few additional comments.¹⁴⁶
- (210) At 17:19 I have cooled down and follow up my email to the IO to apologise for being out of line earlier.¹⁴⁷

¹⁴⁰See ¶ 77.

¹⁴¹Phone call between North East Ambulance Locality Manager and author (recording held by author, 11 June 2020).

¹⁴²Phone call between Crewmate F and author (recording held by author, 11 June 2020).

¹⁴³Email to North East Ambulance Locality Manager from author (11 June 2020).

¹⁴⁴Email from Investigating Officer to author (11 June 2020).

¹⁴⁵Email to Investigating Officer from author (11 June 2020).

¹⁴⁶Email to North East Ambulance Locality Manager from author (11 June 2020).

¹⁴⁷Email to Investigating Officer from author (11 June 2020).

- The IO calls me at 18:23 and we discuss the investigation and the newly-submitted IRFs. 148 Regarding some reflective practice reports I submitted as evidence, the IO tells me 'I didn't read through them all, I just sent them on to [the DM]'. They also say that the IRF 78000 submission came with a screenshot of my report, rather than a copy of it. I tell them about the feedback I have already received regarding errors on the Apr 30 job.
- We talk about the May 19 job where Crewmate I has accused me of not recording patient observation values. We discuss my handwriting, and the IO says they have looked at the PRF and 'can see the variance'.
- (213) They say they will contact Crewmate F for their account of the Apr 30 job. I tell them that I will send Crewmate F my report first to help jog their memory. At 19:14 I email Crewmate F a heads-up, including my reflective report for the job. I also send them some training material on graded assertiveness I had promised to previously, in relation to the incident on our Apr 29 shift.¹⁴⁹
- (214) At 19:52 I post a message in the Regional MRT WhatsApp group about the IRFs.¹⁵⁰ A couple people post supportive or neutral replies and one HCP messages me privately to discuss the reflective log and to reassure me that, as an HCP, they would never 'jump down my throat'.¹⁵¹
- (215) At 21:11, the Regional MRT Lead removes me from the group. They email me almost an hour and a half later to tell me that this is 'for my own safety whilst investigations are ongoing'. They finish by asking me to get in touch if I have any questions or issues.
- (216) 15 mins later I reply, reiterating my question about sharing the training recording for the third time. 154 I receive no reply.
- (217) **JUN 12** Crewmate F texts me to thank me for the training material, and says that the IO got in touch last night to ask for the PRF number of the Apr 29 job.

¹⁴⁸Phone call between Investigating Officer and author (recording held by author, 11 June 2020).

¹⁴⁹Email to Crewmate F from author (11 June 2020).

¹⁵⁰WhatApp message between Regional MRT and author (11 June 2020).

¹⁵¹WhatsApp messages between SJA colleague and author (11 June 2020).

¹⁵²The one and only time in this whole process that *anything* is done 'for my safety', and it's removing me from a group of supportive colleagues.

¹⁵³Email from Regional MRT Lead to author (11 June 2020).

¹⁵⁴Email to Regional MRT Lead from author (11 June 2020); see ¶¶ 144 & 189.

- (218) They tell me to go home, saying that 'nothing beats drama [like] being with family' and telling me to let them know if I need anything. 155
- (219) **JUN 13** Before heading off to stay with family for an indeterminate amount of time, I try to call both the IO and my DM to see if it's worth me bringing my uniform with me. Neither pick up; I err on the side of caution and decide to take it.
- On the drive home I discuss the investigation with a parent. They express worry that, regardless of whether I can respond to each and every allegation with clarification, at some point people will draw conclusions based on the number alone. They also comment that if, as it seems, somebody has it in for me, there is unlikely to be anything I can do about it. I am surprised to find myself arguing against their cynicism and saying that, despite all of my recent experiences, I have faith in SJA.¹⁵⁶
- (221) **Jun 14** I come up with some questions to ask people, but decide to give myself (and everyone else) a day off.
- (222) **Jun 15** At 09:24 I call the North East ALM to ask them why they chose to speak to me first rather than Crewmate F, who is from their District; they reply that they *had* spoken to my crewmate first (despite Crewmate F's claim to me at the time). I also ask what the reference number for the complaint was, but am told that they don't have it and have already submitted their findings. I explain why I was being a bit paranoid and they tell me that they had no idea about the ongoing investigation until I mentioned it.¹⁵⁷
- (223) At 10:45 I call the IO and leave a voicemail. They text me to say they are in a conference at work and will call me back when they can. I reply that I want to catch up and ask them a question, but that it isn't urgent. 158 I do not receive a call back.
- (224) At 10:48 I call the RDTL to ask what prompted their email on Apr 11: my VDR, an IRF from Crewmate A or the C&M AUM?¹⁵⁹ They reply that they were told informally by the ROCC.¹⁶⁰

¹⁵⁵SMS messages between Crewmate F and author (12 June 2020).

¹⁵⁶Conversation between author's parent and author (13 June 2020).

¹⁵⁷Phone call between North East Ambulance Locality Manager and author (recording held by author, 15 June 2020).

¹⁵⁸SMS messages between Investigating Officer and author (15 June 2020).

¹⁵⁹See ¶ 55.

¹⁶⁰Phone call between North Region Driver Training Lead and author (n 34).

(225) At 15:04 I message a RAQO to ask how I can find the reference number for a complaint. They tell me to contact the Regional HR Manager or the Regulatory Assurance Manager;¹⁶¹ looking them up on CONNECT and reasoning that they are likely to be busy, I try to call one of the Regional HR Manager's direct reports instead. The number listed connects me to SJA Stockport, who put me through to the Training Coordinator (Volunteer/Employee); I go through to voicemail, and leave a message asking them to call me back.¹⁶²

Whilst saying 'I don't want to tell you too much until it's wrapped since...I don't want to get either of us in trouble', I tell the RAQO about my inconsistent experience with IRF disclosure and ask what the official policy is. They say that it is strange and that, as far as they're aware, only person-identifiable information of the complainant should be withheld from the IRF subject.¹⁶³

Also, having now been accused of unfamiliarity with the *Infection Prevention and Control Procedure* on two separate occasions, ¹⁶⁴ I decide to read it cover-to-cover and see for myself. ¹⁶⁵ The document contains nothing relevant to either of the situations in which I am alleged to have breached it. Nor is either situation addressed in the supplementary COVID-19 IPC guidance. ¹⁶⁶

(228) **Jun 16** The Training Coordinator (Volunteer/Employee) calls me back at 12:05 and tells me to contact the HR Advisor. I do so, and they tell me to put my request for the complaint reference in an email so they can verify that I am who I say I am. I do so. I

¹⁶¹WhatsApp messages between Regional Assurance & Quality Officer and author (15 June 2020).

¹⁶²Phone call to HR from author (recording held by author, 15 June 2020).

¹⁶³WhatsApp messages between Regional Assurance & Quality Officer and author (n 161).

¹⁶⁴See ¶¶ 164 & 205.

¹⁶⁵St John Ambulance, *Infection Prevention and Control Procedure* (5, 2019).

¹⁶⁶St John Ambulance, COVID-19 Infection Prevention and Control Ambulance Service and Community First Responders Guidance (12, 2020).

¹⁶⁷Phone call between Training Coordinator (Volunteer/Employee) and author (recording held by author, 16 June 2020).

¹⁶⁸Phone call between HR Advisor and author (recording held by author, 16 June 2020).

¹⁶⁹Email to HR Advisor from author (16 June 2020).

- (229) They reply at 16:10, telling me that they have forwarded my query on to the Regional HR & Admin. Manager.¹⁷⁰ Noting the '(Employees)' in their email signature, I inform them that I am a volunteer.¹⁷¹ They reply that they and the Regional HR & Admin. Manager are currently covering both employees and volunteers.¹⁷²
- (230) **Jun 17** At 09:32 I send the IO a message asking them to call me at some point during the day. 173
- (231) At 17:35 my AM calls me and I catch them up on what has been happening so far, as well as the restrictions on their involvement (under the assumption that they are, in fact, now my line manager).¹⁷⁴
- At 20:00 the IO calls me. I ask for an update and they tell me that everything is now with my DM and I should hopefully have a conclusion by the end of week. Pointing out that we were in this same position almost three weeks ago, I ask that they let me know if anything comes up that will delay the process further; they agree to, and say they will send my DM an email that evening to see where we're at.
- (233) The IO also says that they have closed IMF 78000 as 'not requiring a reply'. This will go on to be the *only* one of the many withdrawn allegations whose withdrawal I am informed about in writing, as per SJA procedure.
- They also relay that the RCL has reviewed the Apr 30 job report. The only feedback that the RCL has provided above and beyond that already provided by others is to say that we should not have introduced the neighbour/doctor to the scene. I ask if I will be shown the feedback, and the IO says 'I presume so'. They also say that, regarding the concerns about getting third parties involved, 'it's not overly clear, looking at the documentation, who instigated that'.

¹⁷⁰Email from HR Advisor to author (16 June 2020).

¹⁷¹Email to HR Advisor from author (16 June 2020).

¹⁷²Email from HR Advisor to author (16 June 2020).

¹⁷³SMS message to Investigating Officer from author (17 June 2020).

¹⁷⁴Phone call between then-Area Manager and author (17 June 2020).

(235)	I question why the ROCC TC sent me the exact text, date and time
	of IRF 78000, as is consistent with every single other IMF I've been
	involved in, whilst the IO only sent me the two reference numbers
	for that and IRF 78026 and a vague description of what they relate
	to. The IO reiterates that it is normal for a defendant to first hear the
	allegations against them at their interview (despite the fact that both
	IMFs were received post-interview).

I ask them to forget about what happened weeks ago, as I am only referring to now. I ask if they would be willing to share with me the full details of all of the allegations that are now a part of the IMF 76723 investigation, both for my own reference and (though I do not state this) to assist in the production of this report. To my surprise, they say yes.¹⁷⁵

(237) At 20:27 I submit my request for the allegations to the IO in writing. 176

(238) **Jun 18**

(239) **Jun 19** In the morning, the IO calls Crewmate F to discuss the Apr 30 job. 177

At 13:31, the IO emails Crewmate F ask them to 'confirm that the signature on PRF 136891 is not yours'; ¹⁷⁸ Crewmate F replies stating that 'as I said today on the phone to yourself, I don't believe that signature to be mine' and that 'I still stand by this, as it is completely different to that of my normal signature on the other PRF's[sic], as you yourself can see'. ¹⁷⁹ This all occurs unbeknownst to me.

(241) At 17:09 I call my DM and leave a message asking them to call me back at some point over the weekend to give me an update on the investigation. 180

(242) **Jun 20** It has now been four weeks since my suspension began.

(243) Jun 21

¹⁷⁵Phone call between Investigating Officer and author (recording held by author, 17 June 2020).

¹⁷⁶Email to Investigating Officer from author (17 June 2020).

¹⁷⁷Phone call between Investigating Officer and Crewmate F (19 July 2020).

¹⁷⁸Email from Investigating Officer to Crewmate F (19 July 2020).

¹⁷⁹Email to Investigating Officer from Crewmate F (19 July 2020).

¹⁸⁰Phone call to District Manager from author (recording held by author, 19 June 2020).

(244) Jun 22 At 10:22 I again call my DM and get through, though the connection is poor. They tell me that they received the last of the material on Jun 19 and that the HR Advisor will post me a letter to arrange a hearing date. At this hearing we will discuss the evidence that has been gathered and I'll be able to give my version of events. At some point after this, my DM will come to a final decision.

I tell them that I am not currently living in my flat and will need the letter emailed to me. I ask if it would be possible to email me over the questions I will be asked in the hearing so I can respond in my own time, which will be faster than waiting for the three of us to all be available. The DM tells me that this will not be possible as it will be 'more of a conversation' than a set of questions.

I ask whether the request for a formal hearing is an indication of the way that the process is going or whether it is just business-as-usual. They say that it is business-as-usual (but that it probably doesn't feel like that for me), but also state that the hearing will determine whether it is dealt with it as a 'performance management issue' or a 'formal disciplinary issue', with an outcome 'up to and including dismissal from the organisation', which suggests that the fact that there is an issue—i.e., some or all of the allegations have been upheld—is being taken as a given. This is a new and alarming development.

The DM tells me that the hearing will be my opportunity to 'answer more openly...about things that have been missed during the evidence-gathering phase, or...that'[ve] been misunderstood, because sometimes the documents don't always reflect what someone's trying [to say¹⁸¹]'.¹⁸²

I ask what sort of timescales we are looking at for the hearing and they tell me that I will hopefully hear from the HR Advisor by the end of the day, but adds that the Advisor is very busy at the moment and will have to read the report first. They add that they are not optimistic about the hearing itself being this week. I thank them for picking up, and they say they will chase the Advisor. 184

¹⁸¹These exact words are unintelligible on the recording.

 $^{^{182}}$ See ¶ 151 for me raising raising these concerns with the IO prior to our May 29 interview, and ¶ 167 for exactly this then happening as a result of those concerns being ignored.

¹⁸³It only occurred to me later that there is no need for the Advisor to be familiar with the report to schedule a meeting between two other people to discuss it.

¹⁸⁴Phone call between District Manager and author (recording held by author, 22 June 2020).

(249)	At 12:14 I follow up my previous email ¹⁸⁵ to the FSU Guardian to
	let them know that any report submission will not be for some time
	yet. ¹⁸⁶

- (250) Perturbed by my DM's mention of possible dismissal and the negative direction the investigation appeared to be taking, I begin putting in place contingency measures (e.g., backing up my SJA emails, ensuring I have downloaded copies of all relevant policy and procedure documents, recording the email addresses of everyone I intend to submit my report to) in case I suddenly find myself locked out of my SJA account.
- (251) **Jun 23** At 20:46 the Regional Coordinator sends out a mass email, subject "Urgent Help Required", asking whether anybody is available to attend an event tomorrow.¹⁸⁷ My instinctive response is to reach for my calendar to see if I am available, but alas.
- (252) **Jun 24** The **FSU** Guardian gives me some feedback on the draft report. 188 I reply with rough details of my plan for submitting it. 189
- (253) Jun 25
- (254) **Jun 26** At 09:25, I follow up my Jun 17 email to the IO repeating my request for details of all the IRFs, grievances, etc. that are now a part of IMF 76723.¹⁹⁰
- (255) At 09:49, I email the HR Advisor asking about the hearing date. 191
- (256) I do not receive a reply from either.
- (257) Jun 27 Laying awake at midnight, I consider my position. I consider the five weeks of my life I have wasted on this investigation. I consider the 200 hours I spent supporting SJA in April. I consider the well-over-1,000 hours I have given SJA since I first joined. And I consider what I have to show for it.

¹⁸⁵See ¶ 194.

¹⁸⁶Email to then-Freedom to Speak Up Guardian from author (22 June 2020).

¹⁸⁷Email from Regional Coordinator to regional mailing list (23 June 2020).

¹⁸⁸Email from then-Freedom to Speak Up Guardian to author (24 June 2020).

¹⁸⁹Email to then-Freedom to Speak Up Guardian from author (24 June 2020).

¹⁹⁰Email to Investigating Officer from author (26 June 2020).

¹⁹¹Email to HR Advisor from author (26 June 2020).

(258)	02:00 rolls around, and I am still unable to sleep. I have been fooled
	by the sunk cost fallacy. I have allowed SJA to treat me with ut-
	ter contempt because of how much I value my roles. I have bent
	over backwards to assume that my treatment has been due to in-
	competence, not malice. But sufficiently-advanced incompetence is
	indistinguishable from malice.

- (259) I draft a list of red lines that I shall not allow myself to cross. I will call the HR Advisor on Monday morning. I will call my DM if I do not get through. I will email both if I do not get through, asking to forego the hearing in favour of receiving a copy of the IO's report to comment on directly. And if I have not seen the content of the investigator's report and been given a fixed date for a resolution by close-of-play Friday, I will leave SJA.
- (260) I tell my AM what my plan is. I tell them that, whilst they cannot advocate for any particular outcome, if they wanted to put some pressure on the DM to encourage actually getting to an outcome at all it would be appreciated.¹⁹²
- (261) **Jun 28** My AM tells me that they will talk to my DM on Monday or Tuesday. 193
- (262) **Jun 29** At 10:31, I call the HR Advisor; no answer. I call my DM; no answer.

I wait 45 minutes, in case I caught either of them in the middle of something and giving them a chance to call me back; nothing.

- (263) At 11:16, I email them both my ultimatum, copying in my AM and the IO.¹⁹⁴
- (264) At 15:28 the FSU Guardian (unaware of these developments) emails me to arrange a phone call for tomorrow.¹⁹⁵
- (265) **Jun 30** At 14:01 the **FSU** Guardian calls and asks how things are going. I update them, they ask if they can help at all. I say I'm happy for them to make some calls and see if they can find out what's going on. The call ends at 14:23, and at 14:25 I forward them my ultimatum email. 197

¹⁹²WhatsApp messages to then-Area Manager from author (27 June 2020).

¹⁹³WhatsApp messages from then-Area Manager to author (28 June 2020).

¹⁹⁴Email to HR Advisor and District Manager from author (29 June 2020).

¹⁹⁵Email from then-Freedom to Speak Up Guardiancharmaineemail to author (29 June 2020); Email to then-Freedom to Speak Up Guardian from author (29 June 2020).

¹⁹⁶Phone call between then-Freedom to Speak Up Guardian and author (30 June 2020).

¹⁹⁷Email to then-Freedom to Speak Up Guardian from author (30 June 2020).

(266)	15 minutes later, I suddenly receive an email from my DM containing
	summons to a hearing on Jul 7, a copy of the Investigation Report
	and copies of the Volunteer Disciplinary Procedure and Conduct and
	Performance Policy. 198

- (267) The report is a hot mess. In seven short, typo-ridden pages, it takes the reader on a wild ride through both wild, unsupported accusations and subtle, misleading inaccuracies. It is truly a tour de force of nonsense.
- lt does, however, reveal many interesting and concerning things. I learn that I have not been provided with the written allegations thus far not due to any policy or procedure, but because they do not exist in the first place. The lion's share of the allegations come not from IRFs (of which there is only one beyond the MRT ones that I am already aware of: IRF 76723, submitted by Crewmate I on May 19) or formal grievances (of which there are none, despite the IO's earlier insistence), but rather from an 'informal information gathering exercise' on the part of the C&M AUM, which began on Apr 11 and continued until some point prior to May 22.¹⁹⁹
- (269) It also appears that Crewmate F may have thrown me under the bus in order to avoid their own accountability (it is revealed that they are also under investigation for the Apr 30 job), and that the report author has been peculiarly credulous about their claims despite the lack of compelling supporting evidence and their obvious incentive now to deny responsibility.
- (270) This includes a new allegation—which I am first hearing about now, and which the report author is happy to assert as a proven fact with barely any evidence to support it—that I have falsified Crewmate F's signature on a PRF; a criminal offence.²⁰⁰

¹⁹⁸Email from District Manager to author (30 June 2020); Email from District Manager to author (30 June 2020); Letter from District Manager to author (30 June 2020).

¹⁹⁹District Manager (n 29) s 3.

²⁰⁰ibid p 5 & 6, although, as my DM only suggests I am facing dismissal from the organisation, it seems that they have either not noticed the severity of the new allegation or (more likely) is very aware that the paucity of evidence would never stand up in a court and is hoping I won't notice.

- (271) The charge now facing me is one of 'gross misconduct', which includes (but is not limited to):
 - p. any criminal offence likely to involve police proceedings which may affect a volunteer's duties or ability to carry out those duties
 - q. threatening or abusive behaviour or assault
 - r. theft, fraud, falsification of records, corruption or other serious unlawful conduct
 - s. victimisation of a volunteer or employee who has raised concerns via the Whistleblowing policy or relevant Grievance Procedure
 - t. incapability whilst on SJA business brought on my alcohol or illegal drugs
 - u. sabotage of SJA event or ambulance business
 - v. serious breaches under the headings [of what can be considered a disciplinary offence] listed in paragraph 2.1.1 above²⁰¹
- (272) The thought that I am being scapegoated goes from being one of many plausible interpretations to the most credible one. I begin drafting my response. I also begin soliciting personal statements from friends and colleagues, both SJA and otherwise, from as far afield as Finland, testifying to my integrity and competence.²⁰²
- (273) **JUL 1** I call Crewmate H to ask if they will provide me with a character reference. They say they are happy to, but due to their role in the HR team they will have to ask first.²⁰³
- Unsurprisingly, given my belief that my Region may be hanging me out to dry, the Regional HR & Admin. Manager denies this request.²⁰⁴ This is despite the fact that Crewmate H is entirely uninvolved in this process, and that their HR role is purely advisory and so they would have no ability to influence anything even if this was not the case.

²⁰¹ Vol. Disc. Proc (n 87) s 2.1.2.

²⁰²WhatsApp message to Crewmate E from author (30 June 2020); WhatsApp message to Crewmate H from author (30 June 2020); Email to Crewmate D from author (1 July 2020).

²⁰³Phone call between Crewmate H and author (recording held by author, 1 July 2020).

²⁰⁴Email from Crewmate H to author (1 July 2020).

- (275) Crewmate D has no such restrictions, and agrees to provide a reference.²⁰⁵
- (276) Crewmate E does not reply.
- (277) **JUL 2** I gather additional references.
- (278) I ask my former UM, as they are probably the person within SJA who knows me best. They say they would prefer not to get involved.²⁰⁶ I respect their decision, but that doesn't mean it doesn't still sting.
- (279) **JUL 3** At 13:26 I call the HoV and leave a message asking them to call me back;²⁰⁷ I have been advised by Crewmate H to bring the C&M AUM's off-piste activities to their attention.
- At 14:23, I reply to my DM's hearing invitation with an email linking to evidence of over seven years of 'rigid, verifiable, unwavering integrity', attaching my response to the *Investigation Report* and the nine references I've received so far (as well as the letter of commendation from the COVID-19 National TC).²⁰⁸ I copy in the HR Advisor, the FSU Guardian (for reference) and the IO (so as not to criticise their work behind their back, as I initially belived that they had authored the report, though I now believe that the DM was responsible). The email, viewed now, is somewhat histrionic, but given my mental state at this point and the shock of having just been accused of falsifying medicolegal documentation out of nowhere, I think this is understandable.
- My 29-page response is a minutely detailed, evidence-backed point-by-point rebuttal of the DM's 7-page last-minute homework assignment.²⁰⁹ I propose my grounds for suspecting that I am being scape-goated by my Region in a 5-page conclusion,²¹⁰ but I state in the introduction that this is only the most likely-seeming explanation and that I would very much like to be wrong.

²⁰⁵Multiple emails between Crewmate D and author (1–2 Jul 2020).

²⁰⁶WhatsApp messages between former Unit manager and author (2 July 2020); this sentiment was shared by a few other people I asked as well. I believe this was in part due to the escalation of severity with the addition of the document falsification allegation, and in part due to those people being familiar with the SJA (or, more broadly, healthcare) approach to investigation and wanting nothing to do with it, which I can empathise with.

²⁰⁷Phone call to Head of Volunteering from author (recording held by author, 3 July 2020).

²⁰⁸Email to District Manager from author (3 July 2020); multiple character references (3 Jul 2020).

²⁰⁹Ben Goldsworthy, *Investigation Response* (v 1, 2020).

²¹⁰ibid pp 25–29; see also Appendix ??.

I state that I will participate in the hearing if and only if my DM explicitly grants me permission to record it. I add that this would be a purely symbolic gesture, as it would be lawful for me to do so anyway without requiring permission, but that it would nonetheless provide 'a compelling counterargument to my conspiracy hypothesis'.²¹¹

I also submit a redacted portion of the response to Crewmate F, as I do not wish to criticise them behind their back or to add to the weight of their own investigation if any allegations will be dealt with as cackhandedly as my own, but I have had to breach confidentiality by naming them as my crewmate in a reflective practice report of the Apr 29 incident.²¹²

In my response to my DM, I highlight being put in such a position as 'a direct and obvious consequence of *your* choices in running this investigation'. I admonish them that 'the next time you or anyone else involved in this process tries to talk about "humanity" or "teamwork" or "excellence", the words should curdle in your mouths.'213

(285) At 15:14 the HoV calls me back. They advise me to provide only a brief overview of what is happening, as they may end up involved in the process in the event of an appeal. I give them a rough summary and outline my concerns. They express sympathy and advise me to follow the process.²¹⁴

My former UM messages me that evening to let me know that our Unit has switched Area, from South Cumbria to Fylde Coast & North Lancs.²¹⁵ This presumably means that my line manager has changed again, to my new AM.

That's a shame, as I know from experience that my new AM is utterly dismissive of non-HCPs. At an event I covered in 2019, where they were managing a Treatment Centre, I had one colleague immediately introduce themself as a student paramedic because they 'had been told that that's the way to get them to like you', and I had to dissuade another from taking them to task for how rudely they had been treating me. Back then, I thought that they represented a toxic minority within the organisation.

(286)

²¹¹Goldsworthy, *Investigation Response* (n 209) pp 1–2.

²¹²Email to Crewmate F from author (3 July 2020).

²¹³Goldsworthy, *Investigation Response* (n 209) p 22; see also St John Ambulance, *Our values*.

²¹⁴Phone call between Head of Volunteering and author (recording held by author, 3 July 2020).

²¹⁵WhatsApp messages between ex-Unit Manager and author (3 July 2020).

- (288) I no longer have anybody above me that I trust or respect. I'm on my own.
- (289) **JUL 4** I gather additional references.
- (290) **JUL 5** I gather additional references, and submit a second batch of five to my DM.²¹⁶
- I ask Crewmate G for a reference, as an earlier message turns out to have not sent. With Crewmates A, B, C, F & I all seemingly involved in this investigation, ²¹⁷ H told that they can't give me a reference and E not replying, D and G are the only crewmates I have been able to ask. This is perhaps not ideal in the case of D, who I have only crewed with once, but I have done four shifts with Crewmate G; more than with anyone else. It is heartening that they agree without hesitation. ²¹⁸
- (292) Plotting out my shift history to make the above point, I realise something peculiar. The IO's report lists 'Info from [Crewmate B]', and the same for Crewmates A & C, under the folder 'Concerns raised by [Cheshire &] Merseyside Amb[ulance] Unit'.²¹⁹ I have only crewed with Crewmate B twice, once as a supernumerary and once when we spent the whole day grounded waiting for mask fit-testing.²²⁰
- As is tradition, this 'info' has not been shared with me. I wonder what info Crewmate B could have *possibly* provided, considering our clinical experience amounts to one job where I stayed with the vehicle and one where we performed a set of observations, tried to clear for three hours, took another set (at my instigation) and then took another hour to clear.
- l also do some back-of-the napkin calculations. Assuming I kept up my 200-hours-per-month rate of shifts throughout the full three months of my leave from work, and with the NHS paying SJA £100/hr for each crew on the road, this month-and-a-half-long suspension has so far potentially resulted in as much as £15,000 in lost earnings for SJA (£50 \times 300 hours).

²¹⁶Email to District Manager from author (5 July 2020); multiple character references (3 Jul 2020).

²¹⁷Although, as far as I can tell, only Crewmate I maliciously so—some or all of A, B and C appear to have been exploited unwittingly by the C&M AUM and F seems to have thrown me under the bus in self-defence, which I consider unethical but understandable.

²¹⁸WhatsApp messages between Crewmate G and author (6 July 2020).

²¹⁹District Manager (n 29) p 6.

²²⁰See ¶¶ 39 & 43.

(295)	Jun 7	The Crewmate B thing is still bugging me. Crewmate C is a bit of
		an unknown quantity due to them also being in the MRT, but as far
		as I am aware Crewmate B and I got on well during our brief time
		working together, and they would have been well aware of my limited
		experience. The same goes for Crewmate A, who I worked with far
		more and with whom I believe I was still on friendly terms when all
		this started.

- I also read through the *Volunteer Disciplinary Procedure* again after someone expresses a concern that perhaps refusing to attend a hearing will waive my right to appeal, and that this is what my DM is counting on. This is not the case. However, whilst reading, I realise that the fact that this is being handled as a disciplinary matter means that I am being accused of 'under-performance caused by negligence and/or non-compliance', rather than 'lack of skill and/or capability'.²²¹
- I also notice that copy of the *Procedure* I have been emailed is 357.5 kB, whilst the one downloaded from CONNECT is 392.4 kB. Has my DM removed some lines that might be helpful to me? I compare the two both visually and using an automated file-checking tool, but they are identical. I'm losing my marbles here.
- I wonder if Crewmates A & B know what is being done in their name, based on what appear to have been off-the-cuff comments and gripes that have been picked up by an AUM with an ulterior motive. I decide, ultimately, that it is too risky to contact them myself, as this could work against me if someone claimed I was harassing witnesses.
- (299) At 10:11 I email my DM and HR Advisor asking to know their position regarding my recording of the hearing by 12:00.²²²
- (300) At 11:02 I call the FSU Guardian to give them a heads up of what may be coming their way in an hour²²³

²²¹This is despite my DM's own words a mere 15 days ago; see ¶ 246.

²²²Email to District Manager from author (7 July 2020).

²²³Phone call between then-Freedom to Speak Up Guardian and author (7 July 2020).

(301)	At 11:57, the HR Advisor replies to my email to say that 'we both do
	not agree to the recording of today's hearing', ending with 'see you
	at 2pm'.224 They have clearly not read any of my response, as the
	very first page says that my attendance is conditional on the right to
	record.

- (302) I escalate to the CEO and DP&O, highlighting my concerns and stating that 'I am not asking you to rule on the validity of the allegations, but I fundamentally do not believe I am able to receive a fair trial in the North Region [and that] I am happy for the allegations to be assessed in another Region or nationally'.²²⁵
- (303) I also inform the HR Advisor and my DM that I will not be attending the hearing.²²⁶ I also submit three additional character references.²²⁷
- (304) **JUL 8** Another thought: why have Crewmate F and I been pitted against one another in this bizarre Prisoners' Dilemma setup?²²⁸ Particularly when Crewmate E and I were contacted as a crew when an IRF was submitted against us back in May.²²⁹ Cluelessness or sadism? With SJA, it's impossible to tell.
- (305) The DP&O replies at 09:54, saying that they discussed my email with the CEO yesterday and that they want to talk to the FSU Guardian and HR Advisor before getting back to me. They ask me which HR Advisor I am dealing with.²³⁰ I pass on the information, but add that (to the best of my knowledge) the HR Advisor has only been involved since Jun 16.²³¹ They reply that they will talk to the Advisor later that day.²³²
- (306) **JUL 9** I leave Crewmate E a message asking them to get back to me.²³³ I don't know if they missed my earlier message, if they're ignoring me as others seem to be or if they're just somewhere out-of-the-way with work.

²²⁴Email from HR Advisor to author and District Manager (7 July 2020).

²²⁵Email to Chief Executive Officer & Director of People & Organisation from author (7 July 2020).

²²⁶Email to HR Advisor and District Manager from author (7 July 2020).

²²⁷Multiple character references (7 Jul 2020).

²²⁸Having belatedly realised that this the situation Crewmate F and myself have been placed in, Crewmate F's defection *does* represent the optimal strategy, game theoretically-speaking. However, in the event that I remain in SJA and we encounter each other again in the future, my transparent and forgiving TIT-FOR-TAT approach may well promote co-operation in the long run; see Robert Axelrod, *The Evolution of Cooperation* (first published 1984, Penguin 26 April 1990).

²²⁹See ¶ 103

²³⁰Email from Director of People & Organisation to author (8 July 2020).

²³¹Email to Director of People & Organisation from author (8 July 2020).

²³²Email from Director of People & Organisation to author (8 July 2020).

²³³Phone call to Crewmate E from author (recording held by author, 9 July 2020).

(307)	I also prompt Crewmate G, who said they would write me a refer-
	ence and then suddenly stopped replying. Has Crewmate F said
	something to them? I feel like a leper.

- (308) Some good news though: re-reading this timeline I'm reminded that I asked the IO if I could contact complainants and was told yes.²³⁴ I'm safe to contact Crewmates A & B, provided I am cautious. 'Cautious' is my middle name.
- (309) I call Crewmate B and ask for an honest assessment of me as an ambulance crewman. Sure enough, they echo my own conclusions: rough around the edges, quick to learn, could do with additional support. More interestingly, when I ask if they would provide me with that in writing for the investigation they say that they already submitted an email along those lines as a witness statement. They also tell me that their statement concluded with a list of mitigating factors, as well as a suggestion that I could do with a mentor.²³⁵
- (310) I wonder if the other 'Info from's are of a similar nature. Interesting how none of this made it into the *Investigation Report*. My leprosy starts to clear.
- (311) At 15:09 my DM emails me a letter inviting me to a rescheduled hearing on Jul 16.²³⁶ Absolutely no concessions have been made. They tell me I cannot record the hearing 'due to the confidentiality and the discussion of personal and sensitive data'.²³⁷ They also try to scare me into deleting my phone call recordings, either themself unaware, or hoping I will be, that consent is only one of six grounds for lawful data processing under the GDPR.
- (312) At 15:31 I call the FSU Guardian to ask for the phone number of the person who will be taking over the role at the end of the week (as the current Guardian is leaving SJA). Before I can get to that, they ask if anything new has happened and I mention the new hearing. They are uncomfortable about this and tells me that they will contact the DP&O and get back to me.²³⁸

²³⁴See ¶ 173.

²³⁵Phone call between Crewmate B and author (9 July 2020).

²³⁶Email from District Manager to author (9 July 2020); Email from District Manager to author (9 July 2020); Letter from District Manager to author (9 July 2020).

²³⁷This is false; Vol. Disc. Proc (n 87) s 2.18.1 clearly states that 'this is not a confidential process'.

²³⁸Phone call between then-Freedom to Speak Up Guardian and author (9 July 2020).

- (313) **JUL 10** At 09:04 I message the FSU Guardian asking if they have heard anything, and asking for the new role-holder's contact details. They reply with the DoG's email address and tell me that the DP&O will give me an update by Jul 13.²³⁹
- (314) At 12:42 I reply to my DM's email, asking to see the evidence against me before I can make any decision and presenting my bases in SJA procedure²⁴⁰ for doing so.²⁴¹
- At 16:05 the DP&O emails me. They say that, having spoken to the FSU Guardian and the Regional HR & Admin. Manager, they have come to the conclusion that I was 'fast-tracked through the training to become a member of ambulance crew' (an interesting way to phrase 'was rushed out irresponsibly quickly with no support'), that 'there were multiple issues relating to your actions that caused colleagues to raise concerns about you' (an interesting way to phrase 'we spied on you, Crewmate I made stuff up about you and we incentivised Crewmate F to lie about you to save their own skin') and that 'the organisation has [not] handled this particularly well' (an interesting way to phrase...you know what, words can't do it justice).
- (316) Despite this, they say that I 'have a case to answer around the issues that your colleagues raised' and urges me to take part in the hearing and 'address any learnings that come from it'.²⁴²
- (317) No mention is made of the fact that I *have* answered the case, but that my DM has ignored my response.

No mention is made of the fact that my initial concerns were about the very same HR & Admin. Manager with whom they have spoken, or that I expressly consider my DM to be either an untrustworthy bully or an incompetent bungler.

No mention is made of the fact that being falsely dismissed for gross misconduct is unlikely to provide many 'learnings'.

- (318) At midnight I realise I'm no longer fighting to remain in SJA; I'm fighting to leave it with the clean record I deserve.
- (319) **Jul 11** I draft a response to the DP&O.

²³⁹SMS messages between then-Freedom to Speak Up Guardian and author (10 July 2020).

²⁴⁰ Vol. Disc. Proc (n 87) ss 2.12.2 & 2.18.1; multiple conversations with SJA colleagues (May–Jul 2020); basic common sense.

²⁴¹Email to District Manager from author (10 July 2020).

²⁴²Email from Director of People & Organisation to author (10 July 2020).

(320) Jul 12	I reason that if I'm sat thinking about this on a Sunday, my DM can be
	as well. At 09:51 I email them a follow-up to my request to see the
	evidence, as well as two additional character references (bringing
	the total now up to 19, plus the letter of commendation). ²⁴³

- (321) Later in the day I look at Crewmate I's Twitter profile to fact-check some things before I put them into this timeline.²⁴⁴
- (322) On May 22—a few days after making spurious allegations against me—they have shared a GIF that apparently 'really resonates today'; the caption reads 'TREAT PEOPLE LIKE they are PEOPLE, people!'
- On May 31, they boast about having volunteered over 230 ambulance hours in May and wonder how many hours they will be able to get in in June; I am at that point in time suspended because of their spurious allegations, and will be getting in 0 hours.
- (324) And on Jun 5, they share a letter of commendation they have received from the CEO and CC, praising them for 'always mak[ing] new people welcome [and] mak[ing] a person fit right in'.²⁴⁵
- (325) I also find an article from Crewmate I's Masonic Provincial Grand Lodge about their volunteering with SJA. The article states that 'the values of Freemasonry are based on integrity, kindness, honesty and fairness'.²⁴⁶
- (326) To quote a colleague, 'Get rid of the whole organisation. At this point I dont[*sic*] care if there's anything left for me to go back after this pandemic'.²⁴⁷
- (327) I draft an email to my DM. My intention is to send it in the morning, along with the email I've drafted to the DP&O. It is not diplomatic.
- (328) **Jul 13** Morning arrives. I've decided to head back to my flat in the North for the week for a change of scenery. I'm about to send both emails before heading off, when I pause. I decide to email the DoG instead, who has taken over the role of FSU Guardian, asking for a phone conversation.²⁴⁸

²⁴³Email to District Manager from author (12 July 2020); multiple character references (12 Jul 2020).

²⁴⁴See ¶ 145.

²⁴⁵ 'Crewmate I's Twitter profile'.

²⁴⁶Masonic Provincial Grand Lodge, 'Online article about Crewmate I' (10 June 2019).

²⁴⁷WhatsApp messages between SJA colleague and author (1 July 2020).

²⁴⁸Email to Director of Governance from author (13 July 2020).

(329)	I have a four-hour drive, and it's just what I needed to clear my mind.
	Halfway through I stop and see that the DoG has invited me to a call
	at 15:00. ²⁴⁹

- (330) I arrive and get unpacked just in time for the call.²⁵⁰ We discuss the events leading to this point, my unaddressed concerns and the status of the rescheduled hearing. I ask if they would be willing to accompany me to the hearing, and they agree. They also say they will see if they can find out why evidence is being withheld from me.²⁵¹
- (331) At 17:01 they email my DM asking if the hearing can be delayed 30 minutes so that they can attend.²⁵²
- (332) The system is still inconceivably broken, but at least I feel like I have a fighting chance at a fair(ish) hearing again.
- (333) I also reflect on my earlier feeling of 'fighting to leave the organisation with the clean record I deserve'. I have, unfortunately, been responsible for bringing people into this organisation. Even if my card is punched, I am now determined to use my exit to try and gather as much evidence as I can of this broken system in the hopes that I can contribute some small part to the rebuilding of something better.
- (334) **JUL 14** At midday, my DM replies to me and to the DoG. to say they are happy to delay the hearing start time, ²⁵³ and that they will send over the evidence I have requested later in the afternoon. ²⁵⁴
- (335) At 15:49, they do so. *Kinda*.²⁵⁵

²⁴⁹Email from Director of Governance to author (13 July 2020).

²⁵⁰Email to Director of Governance from author (13 July 2020); Email from Director of Governance to author (13 July 2020).

²⁵¹Phone call between Director of Governance and author (13 July 2020).

²⁵²Email from Director of Governance to District Manager (13 July 2020).

²⁵³Email to Director of Governance from District Manager (13 July 2020).

²⁵⁴Email from District Manager to author (13 July 2020).

²⁵⁵Email from District Manager to author (13 July 2020).

(336)

They only send me the five documents I have highlighted specifically as ones for which absolutely no confidentiality argument could possibly be made, and do so over email rather than just inviting me to the OneDrive (which I had told them would be more secure and therefore preferable). They have also redacted people's names from the documents, despite the fact that I already know who is involved. They have chosen to invisibly redact using white rather than visually with black, which means I am unable to tell on the PRFs whether details like the patient's names and dates of birth have been missed off by my crewmates and I in the first place or if they have just been redacted by my DM.

(337)

I strongly suspect that it's the latter, although I note with gruesome fascination that for all of their talk of 'confidentiality', my DM has neglected to redact the patients' home addresses, next-of-kin details (names and phone numbers) and, in one case, a doctor's name and GMC PIN.

(338)

Reviewing my reflective report from the Apr 30 job that prompted the submission of IRF 78026, the RCL mostly concurs with the feedback I had already received many times over by this point. Though their conclusion is critical, I believe it to be fair based on the reflective report.²⁵⁶

(339)

One interesting comment they make is that 'it is not clear whether [something has not been indicated in the report] due to his inexperience or personality', which is the exact kind of collegiate charity that has been refused by the submitter of the spurious IRF. It does make me realise though—before it was a reflective report, the description of the job was a long WhatsApp message to a friend and colleague which I later copy-pasted into the report template, and it reflects both that context and the gap between the event in question and its recollection.

(340)

The RCL also alludes to an additional formal report by the RPL (Paramedics) which has, of course, not been shared with me. Having not been listed in the Appendix of the *Investigation Report*, it may well not have been shared with anyone. I hope the RPL (Paramedics) didn't spend too much time writing it.

²⁵⁶Email from Regional Clinical Lead to Investigating Officer (13 June 2020).

²⁵⁷District Manager (n 29) s 8.

(341)

The document 'MSY Investigation Report' contains no information as to precisely when it was written or by whom—I assume the C&M AUM, but if the mysterious 'MSY' are the author's initials that can't be the case—but it again says little that I disagree with. My driving was almost certainly below-standard back in early April; I had barely driven in the four years since passing my test, and I had effectively never driven a vehicle of such size. It does contain some errors, though, such as accusing me of not reporting something as a near miss that I was not aware had happened until the IO brought it up in our interview two months later (and the full details of which I am only finding out now).

(342)

It also addressed the U-turn incident, accusing me of having apparently 'forgot that [I was] transporting a COVID positive patient', rather than having weighed up the risks before choosing a course of action. Interestingly, the author of the report has actually cited the specific point of the *Infection, Prevention and Control Procedure* that I am alleged to have contravened. This is the section on 'IPC and Vehicles', which describes what to do after every patient contact, how to clean after a shift, etc. However, no part of it is directly applicable to the incident in question.

(343)

The closest it gets is the description of what to do 'after transporting an ill patient with a known or suspected infection' (emphasis mine), and the introductory statement that 'it is important that vehicles used as [a] treatment area for patients...are kept in a clean and safe state'. As the risk was that I may have infected the pedestrian, not the passenger, the latter point is moot; on the basis that we were midtransfer the former is as well. As I had U-turned to investigate what I believed may have been a pedestrian with a serious injury, which I could have done from the cabin and whom I could have treated outside the ambulance whilst awaiting support (if it proved to be necessary), I maintain that this was a justified risk to take.

(344)

Most alarmingly, particularly if the report is from early April as I assume, is the fact that it concludes that I could do with 'some 1-on-1 tuition from a driver trainer or a more experienced colleague'; despite it having been submitted to my DM, nothing ever came of this.

²⁵⁸MSY Investigation Report (n 23).

(345)	The other Investigation Report, written by the North East ALM and
	relating to the Apr 29 job attended by Crewmate F and myself, is
	mostly made up of emails from me, but it does include the claim
	that calling through to the ambulance service and requesting another
	crew 'was protocol', again without citing a protocol. ²⁶⁰ This appears
	to be false; I can find no evidence for this in any document I have
	access to.

(346) Finally, the PRFs. PRF 192598 relates to one of the two jobs where Crewmate I alleges that I failed to carry out observations and record information. The PRF for the other such job is not listed as being on the investigation OneDrive, despite which the report author has nonetheless concluded that 'there is no clear evidence to suggest if this was the case, but there is some probability from other evidence'.

(347) And now, the main event: did I falsify Crewmate F's signature on PRF 136891, from our Apr 30 job?²⁶¹
Um, no.
Obviously not.

(348) The document 'PRF info for Reflective Practice Log' contains three PRFs (and continuation sheets) from our three Apr 30 jobs; more than enough to tear the allegation to shreds with (see Appendix ??.)

- (349) I email back to ask for the remaining evidence. ²⁶²
- (350) **Jul 15** At 09:39 I follow up my email to request a copy of IRF 76723, submitted by Crewmate I, as I am entitled.²⁶³
- At 16:07, the HR Advisor replies to my email request for further evidence to be shared prior to the rescheduled hearing. They say that, as we will be going through the remaining evidence in the hearing tomorrow, 'nothing further will be sent to you'. Quite how this would be fair if I were unable to attend the hearing and had to submit a written statement instead is left unsaid.

²⁶⁰North East Ambulance Locality Manager, *Investigation [Crewmate F] & BG*.

²⁶¹Ben Goldsworthy and Crewmate F, *PRF 136891* (2020).

²⁶²Email to District Manager from author (13 July 2020).

²⁶³Email to District Manager from author (14 July 2020).

(352)	They also say that my DM has had to pull out due to 'personal cir-
	cumstances' and that the (an?) RVM ²⁶⁴ will be chairing it instead.
	They do not say whether my DM will still be responsible for the verdict or not. ²⁶⁵
	dict of flot.

- (353) I reply at 16:23 to say 'Okay, see everyone tomorrow'. 266
- (354) I then work late to update this timeline and to finalise my response to the *Investigation Report*.
- (355) **JUL 16** At 12:09 I email everyone over a copy of this timeline, version 3 of my response to the *Investigation Report* and all 19 character references (plus the letter of commendation), with the intention of referencing them repeatedly in the hearing.²⁶⁷
- (356) The hearing begins at 14:30. The RVM chairs. The HR Advisor takes notes. The DoG is accompanying me, on the understanding that they are a neutral observer and not there to take my side.
- (357) The first question put to me is around my refusal to delete my phone call recordings, which the RVM warns me may result in further charges. I explain the five bases for lawful data processing besides consent provided by the GDPR, although I acknowledge that 'the St John GDPR e-learning doesn't really address [them] very well'.
- (358) I also state that if anyone can present me a procedural or legislative reason to delete the recordings, I of course will. Nobody does.
- (359) After a few reasonable questions around my early April awareness of the various SJA driving procedures comes the biggest stinker of the event: 'why did you falsify your crewmate's signature on the Apr 30 PRF?'
- The allegation itself collapses like wet tissue paper, but I challenge this brazen question-begging. After asking why they chose to ask the question as 'why did you' rather than just 'did you', the RVM and the HR Advisor both attempt to deny that they did so (bearing in mind the HR Advisor's whole purpose is to be taking notes, this cannot possibly be an innocent mistake). The DoG corrects them.

²⁶⁴Searching their name on CONNECT suggests that they are/were a DM in the North East.

²⁶⁵Email from HR Advisor to author (15 July 2020).

²⁶⁶Email to HR Advisor from author (15 July 2020).

²⁶⁷Ben Goldsworthy, *Investigation Response* (v 3, 2020).

Further questions are asked around my knowledge of IPC procedures and apparent (but never evidenced) protocols for requesting additional crews, my use of dynamic risk assessments when enlisting outside help with the Apr 29 and 30 jobs and various clinical aspects of the Apr 30 job. It is clear from the clinical questions that the RVM has not looked at the PRF and is going solely off of my reflective report. For example, asking if we escalated to ambulance control after the patient first seized, which is clear from the PRF but ambiguous in my reflective log, and citing the patient's oxygen sats as 70% when this was an incorrect figure I had given in my log.

(362) At one point the HR Advisor (who I had assumed was supposed to be a neutral party) presses me on the allegation that I neglected to clean an ambulance with Crewmate I; I grow increasingly exasperated that they are asking me to state whether I 'don't remember not cleaning an ambulance'.

After the questions I note that, despite the claims of the HR Advisor's email the day before, I have not been shown a single additional piece of evidence in the hearing and ask them to explain.

The HR Advisor's first response is not a comprehensible sentence. They then claim that the evidence I have not been shown is not relevant to what we have discussed in the hearing, which is both patently false (e.g., Crewmate F's claim that I falsified their signature) and utterly irrelevant (as the DoG points out, the *Investigation Report* and the RVM's final decision will both take the totality of allegations and evidence into account).

I am told that I can't be trusted with evidence, because I have recorded phone calls and apparently 'threatened' to release them. The HR Advisor then has the *gall* to claim that doing so is not in line with the SJA HEART values (the third of which is 'Accountability');²⁶⁸ they clearly know they have no procedural or legislative basis to be upset with me, but are nonetheless still mad.

(363)

²⁶⁸ Our values (n 213).

(366)	I state that I did not 'threaten' to do anything, and that me stating that
	I had the recordings 'would only be a threatif they recorded some-
	thing embarrassing—I'm on those recordings and I have no qualms
	with them being releasedif you considered it a threat, or if [my
	DM] considered it a threat, then I think that says more about your
	behaviour and [my DM's] behaviour than it does mine.'

- The DoG chips in to say that it is only fair for me to see any evidence that will be used to come to a decision. The HR Advisor begins arguing with *their own DoG* about it and repeatedly attempts to deflect and answer questions we haven't asked or go off on tangents about how busy everyone is.
- Realising we're getting nowhere, I ask the HR Advisor to specifically confirm that a) there is a file listed in the *Investigation Report* called '[Crewmate F]', which b) from context presumably contains the allegation that I falsified their signature, and c) that they are claiming that this file is *not* relevant to any of the matters discussed in this hearing. They mutter something about not realising I hadn't been sent that file (having previously replied to say it would not be shared with me only the day before).
- (369) During this whole period, the RVM says nothing. I wonder if they regret accepting this gig.²⁶⁹
- (370) Concluding, I ask the HR Advisor whether my tearing down of the document falsification allegation means that we are no longer looking at gross misconduct; they tell me that the alleged gross misconduct is 'everything' and that I am still facing dismissal as a worst-case scenario.
- (371) I ask the RVM when they might come to a conclusion, and they suggest by this time next week. I ask them to inform me if this is delayed, and they say they will.
- (372) I chat to the DoG after the hearing and thank them for accompanying me. I confess that 'I'm not going to hold my breath for any more evidence to get shared with me'.²⁷⁰

²⁶⁹Disciplinary Hearing (recording of author's side only available from the author, 16 July 2020); HR Advisor, *Disciplinary Hearing Notes*, p 7.

²⁷⁰Microsoft Teams messages between Director of Governance and author (16 July 2020).

(373) Quelle surprise! At 18:57, the HR Advisor emails over the file '[Crewmate F]'. Astonishingly, it only contains their statement in relation to the Apr 29 job, not the Apr 30 one where they have apparently accused me of falsifying their signature. I raise this discrepancy in my usual timid manner. 273

(374) **JUL 17** At 09:48, the IO emails the HR Advisor with some information.²⁷⁴

At 10:34, the HR Advisor replies to my email, this time with Crewmate F's statement regarding the Apr 30 job.²⁷⁵ They also include a Jul 7 statement from the North East ALM on Crewmate F's statement on the Apr 29 job, which the IO had emailed the Advisor earlier that morning (so, clearly, neither was included in the investigation's evidence OneDrive).²⁷⁶ If I had not been shown Crewmate F's direct statement on the Apr 29 job yesterday, I would now be receiving it fifth-hand.

(376) Regarding the Apr 30 statement, until this point I have been holding out hope that the allegation would turn out to have been merely the product of my DM's fevered imagination, but I now know this is not the case. It is more than a little heartbreaking, but at least now I know.

I also now know that Crewmate F was presented with a copy of the PRF without fanfare back in mid-Jun, whilst I had to fight tooth and nail (and eventually get *the DoG* involved) to see it in mid-Jul. I email the HR Advisor back, outlining precisely which evidence I have *still* yet to be shown.²⁷⁷ I never hear from them again.

²⁷¹Email from HR Advisor to author (16 July 2020).

²⁷²Crewmate F, [Crewmate F] (June 2020).

²⁷³Email to HR Advisor from author (16 July 2020).

²⁷⁴Email from Investigating Officer to HR Advisor (17 July 2020).

²⁷⁵Email from HR Advisor to author (17 July 2020); see also ¶ 240.

²⁷⁶Email from North East Ambulance Locality Manager to Investigating Officer (7 July 2020).

²⁷⁷Email to HR Advisor from author (17 July 2020).

(378) Re-reading the *Volunteer Disciplinary Procedure* in the evening I notice a possible reason for the sudden, last-minute change of hearing manager (emphasis mine):

The individual's line manager will normally chair the hearing and undertake the role of 'hearing manager'. In some circumstances where the allegations are of such a serious nature, or where it is felt that the case is of a complicated nature, another appropriate hearing manager not linked to the case may chair the hearing.²⁷⁸

'Complicated' barely does it justice.

(379) :

- (380) **JUL 22** Tomorrow is one week on from the hearing. There has been no transcript presented by the HR Advisor, no further evidence shared and no statement that further evidence is irrelevant.
- (381) I expect things will not go my way tomorrow. I ensure the backups I made previously are up-to-date.²⁷⁹
- (382) **Jul 23** At 10:48 the RVM calls me to inform me that they have come to the verdict of dismissal.²⁸⁰
- (383) At 11:01 they email me a letter containing their justifications.²⁸¹ The decision has allegedly been made 'following careful consideration of the allegations and with the evidence available'.

²⁷⁸ Vol. Disc. Proc (n 87) s 2.12.7.

²⁷⁹See ¶ 250.

²⁸⁰Phone call between Regional Volunteer Manager and author (recording held by author, 23 July 2020). ²⁸¹Email from Regional Volunteer Manager to author (23 July 2020).

- (384) The cited bases for the decision are:
 - clinical concerns relating to the Apr 30 job;
 - failure to escalate promptly to ambulance control and trusting that the neighbour was a real doctor on the same job;
 - failure to follow correct damage notification procedures following the Apr 4 vehicle incident;
 - putting members of the public at risk of injury and illness and potentially breaching patient confidentiality (i.e., accepting bystander assistance) on the Apr 29 & 30 jobs;
 - · 'Professional Misconduct', which is not elaborated upon; and
 - 'breach of confidence and trust', presumably relating to my recording of calls and refusal to delete them.²⁸²
- (385) The letter also claims that my line manager will be in touch about collecting my uniform.
- (386) I email the RVM back asking them to elaborate on what they mean by 'professional misconduct'. 283
- (387) I am then locked out of my SJA email account.
- (388) The RVM's letter tells me to submit my appeal to the HoV, although it conveniently neglects to mention that I only have seven calendar days to do so.²⁸⁴ I submit away...²⁸⁵
- (389) ...only to receive an automated out-of-office to say that the HoV is on annual leave until Aug 3.²⁸⁶ If the issue is urgent (which this clearly is), I am advised to send my message to two people: the Regional Coordinator; and the RVM.
- (390) I email both asking them who my appeal needs to go to.²⁸⁷

²⁸²Letter from Regional Volunteer Manager to author (23 July 2020).

²⁸³Email to Regional Volunteer Manager from author (23 July 2020).

²⁸⁴ Vol. Disc. Proc (n 87) s 2.13.2.

²⁸⁵Email to Head of Volunteering from author (23 July 2020); Ben Goldsworthy, Appeal letter (v 1, 23 July 2020).

²⁸⁶Automated email reply from Head of Volunteering to author (23 July 2020).

²⁸⁷Email to Regional Volunteer Manager and Regional Coordinator from author (23 July 2020).

(391) Jul 24	At 09:56 the Regional Coordinator replies, telling me to contact
	HR. ²⁸⁸ They CC in someone who they assure me 'will be happy
	to help'—the Regional HR & Admin. Manager.

- (392) The Manager emails back at 10:01, confirming receipt and telling me that the HoV will be in touch on their return.²⁸⁹
- (393) Nine weeks to the day since this trainwreck began, I am told to wait another week and a half.
- I reply, including the HoV, to state that I have belatedly realised that I am in fact appealing on all *four* of the grounds laid out in the *Volunteer Disciplinary Procedure*; my new account of the Apr 30 job is based on the contemporary evidence from the PRF, rather than the previous report that I produced casually days after the fact and which is incorrect on a number of points.²⁹⁰
- (395) **Jul 25**
- (396) **JUL 26** I send the HoV an updated version of my appeal letter.²⁹¹
- (397) :
- (398) **Aug 3** At 20:29, the HoV emails me to confirm receipt of my appeal, saying they will be in touch in the next couple of days.²⁹² I reply with all of the documents together in one place for convenience.²⁹³
- (399) Aug 4
- (400) **Aug 5** The HoV sends me an invitation to an appeal hearing on Aug 12. The Regional HR & Admin. Manager will be note-taking. Recording is not mentioned.²⁹⁴

²⁸⁸Email from Regional Coordinator to author (24 July 2020).

²⁸⁹Email from Regional HR & Admin. Manager to author (24 July 2020).

²⁹⁰ Vol. Disc. Proc (n 87) s 2.13.3; Email to Regional HR & Admin. Manager from author (24 July 2020).

²⁹¹Email to Head of Volunteering from author (26 July 2020); Ben Goldsworthy, Appeal letter (v 2, 26 July 2020)

²⁹²Email from Head of Volunteering to author (3 August 2020).

²⁹³Email to Head of Volunteering from author (3 August 2020).

²⁹⁴Email from Head of Volunteering to author (5 August 2020); Letter from Head of Volunteering to author (5 August 2020).

(401) Aug 6 I call the DoG to let them know about the hearing and to ask if they

are available to accompany me again. They are not, but they tell me they will be happy to submit a written witness statement about the disciplinary hearing. They ask me what I'd like them to focus on, but I tell them that as they were there as an independent observer rather than on my behalf I don't want to editorialise.²⁹⁵

(402)

I reply to the HoV with a couple questions, with the primary one being whether I can record the hearing. I lay out my past experiences and why 'I do not trust live note-taking in general' and 'do not trust [the Regional HR & Admin. Manager] or [their] note-taking in particular'.296

(403) **Aug 7**

The HoV responds, saying that I do not have their permission to record the hearing, but that they will respond to the concerns I have raised when they are next in the office on Aug 11.297 I let them know the SJA colleague who will be accompanying me to the hearing.²⁹⁸ They send them an invitation.²⁹⁹

(404) **:**

(405) Aug 11 The HoV emails to let me know that a different HR Manager will be note-taking instead. 300 I'm still very wary, but this at least seems like a promising development.301

(406)Discussing my expectations of tomorrow's appeal hearing with someone, I explain that I don't really know what to expect, but that there is one line of questioning that the HoV may embark down that will be a major red flag: anything to do with my future intentions.³⁰² Doing so will demonstrate that, rather than limiting their appeal to an objective assessment of the fairness (or lack thereof) of the original process and outcome, the HoV is making a calculation about what will best

suit SJA's interests.

At 07:40, the DoG sends their witness statement to the HoV.303 (407) **Aug 12**

²⁹⁵Phone call between Director of Governance and author (6 August 2020).

²⁹⁶Email to Head of Volunteering from author (6 August 2020).

²⁹⁷Email from Head of Volunteering to author (7 August 2020).

²⁹⁸Email to Head of Volunteering from author (7 August 2020).

²⁹⁹Email from Head of Volunteering to author (7 August 2020).

³⁰⁰Email from Head of Volunteering to author (11 August 2020). ³⁰¹Email to Head of Volunteering from author (11 August 2020).

³⁰²Conversation between author and author's parent (August 2020).

³⁰³Email from Director of Governance to Head of Volunteering (12 August 2020).

(408)	The appeal hearing is mostly uneventful. ³⁰⁴ The HoV begins by stat-
	ing that the purpose of the appeal is only to look at the grounds the
	appeal has been made on, and not to re-examine the actual accu-
	sations themselves. This seems a bit of a meaningless distinction,
	since one of those grounds is that action has been taken on un-
	founded grounds and another is that new evidence exists.

- (409) I talk though each section of my appeal letter in turn, providing elaborations where prompted and clarifying some points. The HoV asks quite a few questions about the withholding of evidence; the HR Manager seems shocked when I point out that the HR Advisor claimed that this was because I could not be trusted with it.
- (410) At one point I discuss how my crewmate must have been the one taking patient observations on Apr 30 as I had been recording them on the PRF. The HoV asks me to clarify how the work is shared across a crew; it is at this point that I realise they are non-clinical.
- (411) As we conclude, the HoV tells me that I should have a final outcome within two weeks, though they will aim for sooner. They say they will contact me by the end of the week with a clearer idea of when to expect a resolution.
- (412) After the hearing I email the DoG to say that 'I'm (very, very, very cautiously) optimistic'. 305 I also ask if they will re-send a copy of their witness statement to my current email address, as the HoV had mentioned that they had sent it to my SJA address.
- (413) **Aug 13** I email the HoV some further clarification on the HR Advisor's behaviour in the disciplinary hearing and whether or not I raised the fact of my inexperience and and lack of provided support with anyone (yes, many times). I attach multiple items of supporting evidence, including the recording I took of myself (and only myself) during the disciplinary hearing.³⁰⁶
- (414) They confirm receipt.³⁰⁷

³⁰⁴Appeal Hearing (recording of author's side only available from the author, 12 August 2020).

³⁰⁵Email to Director of Governance from author (12 August 2020).

³⁰⁶Email to Head of Volunteering from author (13 August 2020).

³⁰⁷Email from Head of Volunteering to author (13 August 2020).

(415)

The DoG forwards me their witness statement.³⁰⁸ They limit their comments only to what they had observed during the disciplinary hearing, writing that 'Ben has not consistently been provided with details of the allegations made against him', and that when 'he has requested details so that he can prepare, these were either not provided or not done in a timely manner.' They also write that whilst they thought the hearing was otherwise fair, the 'why did you sign your crewmate's signature?' question was concerning.

(416) Aug 14

The HoV emails me to say that they are still looking into things and will contact me mid-week with a further update.³⁰⁹

(417)

It is immensely refreshing to have someone providing updates, sticking to promises and generally treating me like a human being. However, the bar should never have been lowered to such a point that that becomes remarkable.

(418) :

(419) Aug 19

The HoV emails again to invite me to a follow-up call with them and the HR Manager (and my accompanying colleague) on Aug 21.³¹⁰ I confirm, but point out that I've not received any notes from the previous week's appeal hearing. I make an ill-advised quip about hoping that the HR Manager has 'just been busy rather than doing a[n HR Advisor]'.³¹¹

(420)

The HoV replies to say that they do not consider the comment acceptable.³¹² I apologise to the HR Manager.³¹³

(421) **Aug 20**

(422) Aug 21

The follow-up call is to discuss the nature of the vague 'professional misconduct' from the disciplinary outcome letter.³¹⁴ The HoV clarifies that it relates to two things: my occasional use of unprofessional language (e.g., the 'really *fucking* mad' from the first version of my investigation report response, and the comment from a couple days ago) and the fact that I recorded (my side of) the disciplinary hearing after having apparently agreed not to.

³⁰⁸Email from Director of Governance to author (13 August 2020).

³⁰⁹Email from Head of Volunteering to author (14 August 2020); Email to Head of Volunteering from author (14 August 2020).

³¹⁰Email from Head of Volunteering to author (19 August 2020).

³¹¹Email to Head of Volunteering from author (19 August 2020).

³¹²Email from Head of Volunteering to author (19 August 2020).

³¹³Email to Head of Volunteering from author (19 August 2020).

³¹⁴ Videocall between Head of Volunteering and author (recording of author's side only available from the

(423)	I accept that I have occasionally let myself down in terms of pro-
	fessionalism, but that this has usually been apologised for shortly
	afterwards and is surely explainable, if not excusable, by the stress
	of the situation that I have been placed in for the last thirteen-plus
	weeks. The HoV repeatedly asks if I believe that this is a sufficient
	mitigation; I repeatedly say that it's not my place to decide, and that
	I'm more than happy to accept responsibility and some proportionate
	sanction.

- (424) Then the HoV asks if, 'from where I am, if I am to move forward and if you were to come back, are we going to be in the same situation again?'
- (425) My red flag has been tripped. This appeal will surely fail.
- (426) We then move on to the recording of (my side of) the disciplinary hearing. I explain that I don't believe the characterisation of me apparently agreeing not to record was accurate, but again point out that no notes seem to exist. The HoV says that notes do exist, and that they will be given to me at the same time as the appeal hearing notes. I point out that that's absurd, as the disciplinary hearing was weeks ago, not to mention absolutely material to my current appeal.
- (427) Concluding, I say that whilst I have said some things that I shouldn't have, I have been through a quarter-year ordeal and my patience is not what it once was. The HoV says they will get an outcome to me early next week.
- (428) **Aug 22** This process has taken an extraordinary toll on me mentally. Lately, I alternate between bad days and good days. Today is a very bad day. I sleep for a large portion of it.
- (429) Not long to go now.
- (430) Aug 23
- (431) **Aug 24** At 20:10, the HoV emails me the appeal outcome, as well as notes from the appeal hearing (and follow-up call). They also attach the disciplinary hearing notes, writing that I had 'stated during the appeal that [I] had not received [them]'.

author, 21 August 2020).

³¹⁵See ¶ 406.

³¹⁶Email from Head of Volunteering to author (24 August 2020); Letter from Head of Volunteering to author (24 August 2020); HR Advisor (n 269); HR Manager, *Appeal against dismissal Ben Goldsworthy 12 August 2020*; HR Manager, *Additional meeting supplementary to Appeal Hearing*.

(432)	In their letter, they uphold the original decision and dismiss all four
	of the grounds of my appeal, whilst also ignoring many of my ex-
	amples of procedural misconduct and even directly lying about what
	the procedure document says at one point (see Appendix ?? for my
	response).

- (433): I am busy with other things for the next couple of weeks.
- (434) **SEP 1** I finish my report³¹⁷ and email it to the DoG.³¹⁸ They reply that they had not been told about my appeal's rejection and that they are sorry to hear it, but that they will be pursuing a number of points that have come out of the process.³¹⁹
- (435) During this time, I contact Protect to ask for whistleblowing advice.
- (436) **SEP 9** A former **SJA** colleague sends me a screenshot of the a new driving policy that has been issued. In large, bold text the document states that 'AT NO TIME will **SJA** cut corners and compromise safety'. Realising that this is a blatant lie and that **SJA**'s refusal to accept accountability poses a real risk, I get back to work.
- (437) :
- (438) **SEP 24** I blow the whistle to the Charity Commission and the CQC, emailing them both an updated version of my report and a cover letter explaining my allegations against SJA in brief.³²¹ I also CC in the NCVO.³²²
- (439) The NCVO reply to state that they are 'not able to comment nor intervene in any complaints, whistleblowing or disputes.'323
- (440) **SEP 25** The Charity Commission contact me to arrange a phone call to discuss my concerns.³²⁴ I reply with my availability.³²⁵
- (441) Later that day, the CQC also contact me to say that the information I have provided 'has been passed to the Inspector for St John Ambulance North Region'. 326

³¹⁷Ben Goldsworthy, Unsafe and Counterproductive Investigatory Practices: with specific reference to St John Ambulance and a suggestion that the issues may be endemic to the wider healthcare & volunteering sectors (2019).

³¹⁸Email to FSU Guardian from author (1 September 2020).

³¹⁹Email from FSU Guardian to author (1 September 2020).

³²⁰WhatsApp message from SJA colleague to author (6 September 2020).

³²¹Letter to Charity Commission and CQC from author (23 September 2020).

³²²Email to Charity Commission and CQC from author (24 September 2020).

³²³Email from NCVO to author (24 September 2020).

³²⁴Email from Charity Commission to author (25 September 2020).

³²⁵Email to Charity Commission from author (25 September 2020).

³²⁶Email from CQC to author (25 September 2020).

(442)	٠.
(

- (443) **OCT 5** The Charity Commission get in touch again, apologising for the delay and proposing a time for a call..³²⁷
- (444) OCT 6 I discuss my report with the Charity Commission case worker. 328
- (445) Oct 7
- (446) **OCT 8** I receive an email from the Charity Commission advising that as the issues raised 'do not contravene any aspect of charity law', they 'do not fall within [their] remit'. They advise me to send my report to the SJA trustees instead, and provide me with contact information.³²⁹
- (447) I forward my report and cover letter to the SJA Assistant Company Secretary, as proposed.³³⁰
- (448) **OCT 9** They reply, saying that the issue has been referred to the SJA Internal Audit team to investigate.³³¹
- (449) :
- (450) **OCT 12** The Ambulance & Community Response Team Coordinator emails me with a letter from the Ambulance & Community Response Director (and former COVID-19 National TC).³³²
- In the letter, the Director informs me that they have 'commissioned a formal investigation' into the concerns I have raised, and that I will hear from the investigating officer shortly. They add that they 'appreciate that this may be a difficult time for you' and that they will ensure that I have access to the SJA MyWellbeing Hub despite having left the organisation. They make no reference to the Internal Audit team.³³³
- (452) I reply to the Team Coordinator to thank them for passing the letter on.³³⁴

³²⁷Email from Charity Commission to author (5 October 2020).

³²⁸Phone call between Charity Commission and author (6 October 2020).

³²⁹Email from Charity Commission to author (8 October 2020).

³³⁰Email to Assistant Company Secretary from author (8 October 2020).

³³¹Email from Assistant Company Secretary to author (9 October 2020).

³³²Email from Ambulance & Community Response Team Coordinator to author (12 October 2020).

³³³Letter from Ambulance & Community Response Director to author (12 October 2020).

³³⁴Email to Ambulance & Community Response Team Coordinator from author (12 October 2020).

(453) **Oct 13** I am emailed by an Internal Auditor 'to confirm that the concerns you have recently raised relating to (i) the safe onboarding and deployment of EAC, and (ii) the fitness for purpose of the charity's investigation process have been passed to Internal Audit for consideration under the charity's whistleblowing policy'. They explain that 'Internal Audit will determine whether the concerns you have raised are qualifying public interest disclosures, decide if investigation is appropriate, and if so, what form that investigation should take' and detail the process by which I will be informed of the outcome. 335

- (454) As it is unclear from the previously-received letter whether or not two concurrent investigations are now running, I reply to the Auditor to make sure that they are aware of the letter.³³⁶
- (455) **Oct 14** The Auditor replies that they 'have been signposted to [the Ambulance & Community Response Director]' and 'shall be liaising with [them] to ensure any duplication of effort is kept to a minimum'. From this, it appears that there are in fact two investigations underway: one under the Ambulance & Community Reponse Directorate and one under Internal Audit.

(456) :

- (457) **DEC 2** I email the Internal Auditor to say that it has been 90 days since I first submitted my report, and that I had said in it that I 'would destroy my phone call recordings, shared evidence, etc.—provided they are not likely to serve any evidential purpose' at this point.³³⁸ I ask whether I should retain the documents or not.³³⁹
- I send a similar query to the Ambulance & Community Response Team Coordinator. I also inform them that I have not yet heard from an Investigating Officer (from the Ambulance & Community Response Directorate), and that whilst 'it's probably not worth chasing at this stage as I'm in a much better state now', I had also never received access to the MyWellbeing Hub as promised. 340

³³⁵Email from Internal Auditor to author (13 October 2020).

³³⁶Email to Internal Auditor from author (13 October 2020).

³³⁷Email from Internal Auditor to author (14 October 2020).

³³⁸Goldsworthy, Unsafe and Counterproductive Investigatory Practices (n 317) Appendix L.

³³⁹Email to Internal Auditor from author (2 December 2020).

³⁴⁰ Email to Ambulance & Community Response Team Coordinator from author (2 December 2020).

(459)	The Team Coordinator replies to say that they have arranged a meet-
	ing between the Director and the Internal Auditor to discuss the in-
	vestigation, and suggesting that I 'hold off destroying documents until
	perhaps the end of next week'.341 I agree to do so,342 and follow up
	my email to the Internal Auditor to let them know.343

(460) The Internal Auditor replies, asking me to retain the evidence until the investigation is concluded.³⁴⁴

(461) :

(462) **DEC 18** Third Sector publish an article alleging that SJA has a 'pervading culture of bullying'. SJA 'strongly reject' the allegations.³⁴⁵

(463) :

(464) **DEC 23** The Internal Auditor informs that, whilst 'Internal Audit had hoped to be in a position to conclude the investigation of your concerns prior to the SJA Christmas closedown', that has not been possible. They state that the investigation will be 'concluded early in the New Year'. 346 I wish them a happy new year. 347

(465) :

(466) **2021**

(467) :

(468) **Jan 13** In response to their previous article, *Third Sector* have received further allegations of bullying and a toxic culture within SJA..³⁴⁸

(469) :

(470) **Jan 25** In a third article, *Third Sector* interview the **SJA CEO** about the bullying allegations. The **CEO** 'apologised to current and former staff and volunteers who have experienced a culture of bullying at the charity and vowed to do better'..³⁴⁹

³⁴¹Email from Ambulance & Community Response Team Coordinator to author (2 December 2020).

³⁴²Email to Ambulance & Community Response Team Coordinator from author (2 December 2020).

³⁴³Email to Internal Auditor from author (2 December 2020).

³⁴⁴Email from Internal Auditor to author (2 December 2020).

³⁴⁵Rebecca Cooney, 'Further claims of bullying behaviour at St John Ambulance emerge' (*Third Sector*, 13 January 2021) (https://www.thirdsector.co.uk/further-claims-bullying-behaviour-st-john-ambulance-emerge/management/article/1704480) accessed 26 August 2021.

³⁴⁶Email from Internal Auditor to author (23 December 2020).

³⁴⁷Email to Internal Auditor from author (23 December 2020).

³⁴⁸Cooney, 'Further claims of bullying behaviour at St John Ambulance emerge' (n 345).

³⁴⁹Rebecca Cooney, 'St John Ambulance chief apologises to bullied staff and volunteers and vows to do better' (*Third Sector*, 25 January 2021) (https://www.thirdsector.co.uk/further-claims-bullying-behaviour-st-

(471) **:**

(472) **FEB 25**

I contact the Internal Auditor to ask for a rough ETA on the investigation's conclusion, as well as for the Ambulance & Community Response Directorate's parallel investigation.³⁵⁰ They respond to clarify that the Internal Audit investigation is the only investigation that has taken place, and that I will be 'informed of the investigation outcome within a matter of days, most probably next week'.³⁵¹ I thank them for the update.³⁵²

(473) :

(474) MAR 4

Internal Audit email me with the apparent conclusion of their investigation. They claim that 'the investigation found that SJA management did not intentionally compromise safeguards to meet NHS ambulance crew deployment targets', and that any deviation from 'existing policy and procedure' was 'based on a considered assessment of the risks in the context of the pandemic.' They add, however, that 'the investigation did...validate some of your concerns in relation to the deployment of volunteer ambulance crews', that these had been separately identified by SJA management prior to my disclosure, and that new immunisation procedures and minimum standards for ambulance crews had been introduced as a result. They conclude that a report has been submitted to the CQC, that 'no serious incidents occurred during the pandemic response'. 353

- (475) I reply to thank them for their investigative efforts, and to ask what has happened to the other half of the concerns I had originally raised.³⁵⁴
- (476) MAR 5 I follow up my email with the direct quote from the Internal Auditor's first email to me, in which they explicitly listed both sets of concerns, and a number of questions. I copy in the Internal Auditor and the Ambulance & Community Response Team Coordinator. 355
- (477) The Internal Auditor replies to say that they must 'liaise with the Head of Internal Audit regarding your follow-up questions'. 356

john-ambulance-emerge/management/article/1704480> accessed 26 August 2021.

³⁵⁰Email to Internal Auditor from author (25 February 2021).

³⁵¹Email from Internal Auditor to author (25 February 2021).

³⁵²Email to Internal Auditor from author (25 February 2021).

³⁵³Email from Internal Audit to author (4 March 2021).

³⁵⁴Email to Internal Audit from author (4 March 2021).

³⁵⁵Email to Internal Audit from author (5 March 2021).

³⁵⁶Email from Internal Audited to author (5 March 2021).

(478) **:**

(479) MAR 11 The Internal Audit team reply to 'confirm that your concern regarding the fitness for purpose of the Charity's investigation process was deemed to be a public interest disclosure and that investigation by Internal Audit was therefore deemed appropriate' and that it is antic-

ipated that I shall be informed of the conclusion of the investigation 'before 31 March'. ³⁵⁷ I reply, thanking them for the clarification. ³⁵⁸

(480) :

(481) APR 1 The Internal Audit team contact me again—'as a matter of

courtesy'—to inform me that the investigation 'has not been concluded by the 31 March deadline as we envisaged', but that it I 'will be advised of the outcome when it is concluded after Easter'. 359 I

thank them for the heads up. 360

(482) :

(483) May 14 I email the Internal Audit team to ask for an 'update and/or ETA'.³⁶¹

(484) The Internal Auditor replies to tell me that 'the investigation by In-

ternal Audit has almost been concluded and it is anticipated you will be informed of the outcome next week, but no later than the week

ending 28 May.'362

(485) :

(486) May 28 The Internal Auditor again emails me, this time to let me know that

'Internal Audit is not yet in a position to share the outcome of the second phase of the whistleblowing investigation with you'—the first mention of it having been split into 'phases'. 363 I thank them for letting

me know, and state that 'I'll keep my fingers crossed for June'. 364

(487) :

³⁵⁷Email from Internal Audit to author (11 March 2021).

³⁵⁸Email to Internal Audit from author (11 March 2021).

³⁵⁹Email from Internal Audit to author (1 April 2021).

³⁶⁰Email to Internal Audit from author (1 April 2021).

³⁶¹Email to Internal Audit from author (14 May 2021).

³⁶²Email from Internal Auditor to author (14 May 2021).

³⁶³Email from Internal Auditor to author (28 May 2021).

³⁶⁴Email to Internal Auditor from author (28 May 2021).

(488) Jun 25 I meet up with some former SJA colleagues for drinks. Whilst talking, I learn that Crewmate F is apparently still in the organisation (though downgraded from EAC to AFA), whilst my former DM has stepped down from the role (but is also still in the organisation).

(489) :

(490) **Jun 28** I email the Internal Auditor, saying that 'it sounded like things were wrapping up back in May, but I've not heard anything since; do you think a conclusion is likely to come before the end of the month, or has there been a new delay?'³⁶⁵ They reply, confirming that the Internal Audit investigation 'has been completed', and that they are 'currently in the process of obtaining responses from key stakeholders regarding the provisional investigation findings'.³⁶⁶

(491) :

(492) **JUL 27** The Internal Auditor again emails me, 'mindful that the outcome of the investigation has still not yet been communicated' to me. They say that 'the process of obtaining management responses from relevant stakeholders regarding the investigation findings has substantially progressed since the previous communication to you [and that] it is therefore anticipated that the SJA management response will be finalised shortly'. They also say that they are about to go on annual leave and will give me an update 'w/c 9 August'. I thank them for the update. 368

(493) **:**

(494) **Aug 17** The Internal Auditor emails me to 'provide an update as promised' (a week later than promised), saying that 'you should receive a communication concerning the outcome of the investigation very shortly, and I understand will[*sic*] be next week at the latest'. ³⁶⁹

(495) :

(496) **Aug 26** Finally, the Internal Audit team provide the conclusions of their 'second investigation'. They have not upheld either of my concerns.

³⁶⁵Email to Internal Auditor from author (28 June 2021).

³⁶⁶Email from Internal Auditor to author (28 June 2021).

³⁶⁷Email from Internal Auditor to author (27 July 2021).

³⁶⁸Email to Internal Auditor from author (28 July 2021).

³⁶⁹Email from Internal Auditor to author (17 August 2021).

(497)

Regarding SJA's failure to provide support, particularly after 'urgent training needs were identified', they conclude that 'Regional management's initial intention was to support your training needs' but that 'this view was not communicated to you as it was superseded, due to the reporting of further incidents and concerns relating to you, and culminating in a disciplinary process.'

(498)

Regarding the unfitness for purpose of SJA's 'disciplinary process', they conclude that 'the charity's disciplinary process is of adequate design and, when initiated, was followed though resource constraints at that time, due to the impact of the pandemic, affected the efficiency and timeliness of the process.' Unable to defend SJA's demonstrably broken 'investigatory' process, about which I had *actually* raised concerns about—the title of my report was *Unsafe and counterproductive investigatory practices*, after all, and the Internal Auditor explicitly characterised my concern in their initial email as relating to 'the fitness for purpose of the charity's investigation process'³⁷⁰—they have seemingly chosen to ignore it and pretend I was talking about something else instead.

(499)

They do, however, acknowledge that 'investigating your concerns has...helped St John to identify an issue with inconsistent reporting and triaging of incidents and concerns across the charity's various speaking-up channels', and they detail a few woolly actions to be taken such as 'placing incidents, grievances and complaints as a standing item on operational management team meeting agendas' and 'continuing to educate SJA people about incident reporting and speaking-up procedures'.

³⁷⁰Email from Internal Auditor to author (n 335).

(500) There is no apology provided for my treatment by SJA. There is no official retraction of any of the spurious, and in one case *criminal*, allegations made against me. There is no mention of any action being taken against any of:

- Crewmate F, who made the baseless criminal allegation;
- Crewmate I, whose spurious allegations began the entire process;
- my DM, whose *Investigation Report* upheld the spurious allegations without any evidential support;
- the HR Advisor, who was shown to lie repeatedly during the disciplinary hearing; or
- the HoV, who misrepresented SJA procedure in their dismissal of my appeal.
- They also attempt to claim that 'inconsistent reporting and triaging of incidents and concerns across the charity's various speaking-up channels...contributed to management not initially identifying that there were multiple concurrent allegations relating to you [and] as a consequence, you were not advised of these allegations, and the investigations thereof, in an order consistent with the chronology of events [which] would have supported your assessment that information was being routinely withheld, and of allegations not being put to you in a timely manner.' This is despite the fact much of the evidence that was being withheld from me, and which I had to fight tooth-and-nail to gain access to, was *listed in the Investigation Report*—trying to claim that it was unknown to my prosecutors is ridiculous.
- (502) If SJA was still capable of shocking me, my jaw might never again lift from the ground.
- (503) Aug 27+ I finish up this document and prepare to release it.
- (504) I also get in touch with a former colleague to ask them to pick up my old uniform and unit training equipment, as it's been a year since my dismissal and nobody has contacted me about it.³⁷¹
- (505) And on the 540th day, Ben rested.

³⁷¹See ch. 4, ¶ 385.

5. Conclusion

...it's characteristic of this judicial system that a man is condemned...in ignorance of the facts¹

I have said all that I have to say about SJA. I remain proud of the service I was able to render at the beginning of the COVID-19 pandemic, and disgusted at the organisation I rendered it through.

The 3R promise, to which St John Ambulance (SJA) was an early signatory, pledges three things:

- We will endeavour to get it RIGHT from the beginning;
- We will offer means to achieve RECONCILIATION if things go wrong; and
- We accept our RESPONSIBILITY.²

As with so many nice statements made by SJA and its management, however, this promise is worthless without action. I believe I have demonstrated comprehensively that SJA are incapable of getting anything right from the beginning, that they are uninterested in offering reconciliation and that they are pathologically unwilling to accept their responsibility. The services that they offer, however, are valuable, and many of their people are honest, well-meaning and genuinely selfless.

Just as destructive fires are paradoxically vital to the health of a forest ecosystem, sweeping through and burning away dead and diseased vegetation to release nutrients and free up space for new plants, hopefully SJA's post-COVID-19 financial issues can have a similar effect.

Inan	k you	tor I	read	lıng.
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- Ben

¹Franz Kafka, *The Trial* (Richard Stokes tr, first published 1925, Alma Books 2018).

²Volunteer Rights Inquiry, Volunteer Rights Inquiry: Recommendations and call to action (2011) p 4.

A. Allegations Against the Author

This marathon process has involved many allegations made against me, of varying degrees of severity, and mostly silently abandoned once confronted with contrary evidence.

In my opinion, the allegations can be broadly classified into four types:

- 1. genuine errors on my part (e.g., 4.1E), which were mostly self-reported;
- misunderstandings in which my inexperience was construed as unhelpfulness (e.g., 4.1D);
- 3. allegations that I could not refute with certainty, either due to their vagueness or how much time had elapsed since (e.g., 4.2B, given that I was not shown the PRF¹); and
- 4. allegations that were utterly spurious (e.g., all of Crewmate I's).

The below table captures all of these allegations, as well as the various points at which they were introduced, dropped or upheld:

- upheld allegations are denoted by a '√';
- partially-upheld allegations are denoted by a 'P'; and
- dismissed allegations are denoted by a 'X'. Please note that in some cases (e.g., the driving incidents), this represents a decision to treat the matter as a capability issue rather than a disciplinary one.

The stages are:

- the covert investigation conducted between Apr 10 and an unknown date;
- the Investigation Report issued on Jul 14;
- my response to that report; and
- the disciplinary hearing that resulted in my dismissal on Jul 23.

¹Although, when we later were, it became clear that 4.2B was entirely spurious.

²Note that in all but one case, there was no explicit notification of the allegations being dropped, contrary to SJA procedure.

No.	Description	Source	Covert Inv.	Inv. Report	Inv. Response	Disc. Hearing
4.1A	Vehicle collision (Apr 4)	Crewmate A	1	1	1	×
	Failure to properly report vehicle damage	Investigation Report		✓	1	✓
4.1B	Failure to contribute to patient treatment (Apr 3)	Crewmate A		Р	Р	×
4.1C	U-turn incident (Apr 10)	Crewmate A	✓	✓	✓	X
4.1D	Failure to assist in cleaning/restocking vehicle	Crewmate A	×	Р	Р	×
4.1E	Had to perform an emergency stop (Apr 3)	Crewmate A	✓	✓	✓	×
4.1F	Failure to drive smoothly	Crewmates A-C	✓	✓	✓	×
4.2A	Failure to assist in care of patient	Crewmate I		Р	×	×
	Did not know what 'GCS' was	Crewmate I		×		
4.2B	Failure to take and document patient observations (May 18)	Crewmate I		Р	×	×
	Left crewmate at hospital to return to vehicle	Crewmate I		✓	×	×
4.2C	Did not know what 'CVA' or 'KED' were, or how to use a traction splint	Crewmate I		×	×	
4.3A	Failure to properly treat patient (Apr 30 job)	Unknown MRT member		Р	✓	✓
	Falsification of crewmate's signature	Crewmate F		✓	×	X
	Took word of neighbour that they were a doctor	RVM				✓
4.3B	Failure to obtain patient consent	Unknown MRT member		×	×	
4.4	Risk to member of public (i.e., use of bystander on Apr 29 job), allegedly contrary to protocol	Ambulance service complaint		✓	✓	✓
5	Professional misconduct	RVM				✓
6	Breach of confidence & trust	RVM				/

Following the disciplinary hearing, I was dismissed from SJA on the following grounds:

- Failure to properly treat a patient and prolonged scene time (Apr 30 job), despite the
 fact that Crewmate F was not similarly punished for their work on the same job, that
 the job was both logistically and medically complex, that we *did* call for backup who
 similarly took their time extricating the patient and that the whole allegation only came
 about *because* I was seeking critical feedback on the job in the knowledge that the
 level of the care was not ideal;
- accepting a neighbour's word that they were a doctor at the same job, allegedly 'with no evidence', despite the fact that they were known to the patient's family and that they provided their GMC PIN;
- twice breaching IPC procedures/ambulance protocols (i.e., through the use of bystander assistance on Apr 29 & 30), despite the fact that nobody has been able to demonstrate that such protocols actually exist (as, in the absence of such, conducting a dynamic risk assessment as I did would be appropriate);
- failure to treat those responsible for driving me out of the organisation with sufficient collegiality; and
- taking steps to protect myself and hold those people accountable through legal recording, which was not appreciated.

What you'll note is that not one of these upheld allegations came from anyone I crewed with. On the flip side, I received an outpouring of support from those who knew what I was going through, and had no difficulties amassing a substantial collection of positive references within a short space of time. Reading them was incredibly uplifting; whilst SJA were lying about me, withholding evidence and playing fast and loose with their own rules, my determination to resist was bolstered by a steady stream of evidence showing just how spurious their claims were.

B. Data Protection Statement

The following data is held securely by the data controller:

- correspondence (emails, WhatsApp messages, etc.);
- all shared evidence;
- · recordings of all phone calls indicated;
- recordings of the author's side only of all hearings indicated;
- all relevant SJA policy and procedure documents.

The data controller is the author.

The data subjects are the author, along with any individuals featured on recordings or in correspondence or items of evidence.

The lawful basis for processing under the GDPR is 'legitimate purposes'; that is, the production of this report and the provision of evidence to back up its claims if challenged.¹ For email correspondence and one phone call recording,² there is an additional basis of 'consent'.³ For the hearing recordings, the author is the only data subject and so data processing is at his discretion.

Any data subject is entitled to receive a copy of any document that features them from the author.⁴ The right to erasure does not apply due to the legitimate purposes basis for processing,⁵ but requests will nonetheless be considered on a case-by-case basis.

After 30 days from the publication date on the cover page of this document, provided they are not currently serving or likely to serve any evidential purpose, all shared evidence, internal SJA documents, email backups and phone call recordings will be destroyed. All email correspondence received following our dismissal from the organisation (i.e., to our personal

¹Regulation on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC (General Data Protection Regulation) [2016] OJ L119/1 (GDPR) art. 6, s 1(f).

²Phone call between Investigating Officer and author (n 102).

³GDPR, art. 6, s 1(a).

⁴GDPR, art. 15.

⁵GDPR, art. 17.

email account) will be retained indefinitely. The hearing recordings will remain available indefinitely.

Acronyms

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AFA Advanced First Aider. 4, 14, 15, 80
ALM Ambulance Locality Manager. 40, 42, 62, 66
AM Area Manager. 15, 20, 26, 27, 38, 44, 48, 52
AO Ambulance Operations. 13
AU Ambulance Unit. 26, 36
AUM Ambulance Unit Manager. 8, 18, 19, 24–27, 30, 42, 49, 51, 53, 54, 61
BP blood pressure. 17, 24
C&L Cumbria & Lancashire. 26
C&M Cheshire & Merseyside. 18, 19, 24–27, 30, 42, 49, 51, 53, 61
CC carbon copy. 30, 69, 74
CC Chief Commissioner. 58
CEO Chief Executive Officer. 55, 58, 77
CMO Chief Medical Officer, 12
COVID-19 Coronavirus disease 2019. 6–8, 12–14, 16, 18, 19, 34, 37, 43, 51, 75, 83
CQC Care Quality Commission CHECK ME. 2, 6, 74, 78
CVA Cerebrovascular accident. 85
DHRL District HR Lead. 28, 29, 33
DM District Manager. 4, 15, 18, 21, 26, 34–38, 41, 42, 44–49, 51–61, 63, 65, 66, 80, 82
DoG Director of Governance. 10, 57–59, 63–66, 70–72, 74
DP&O Director of People & Organisation. 55–58
EAC Emergency Ambulance Crew. 4, 7, 15–17, 20, 76, 80
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ED Emergency Department. 14

EE Essential Education. 15, 16

EMT Emergency Medical Technician. 4, 7, 12, 14, 15, 36, 38

ETA Emergency Transport Attendant. 22

FA First Aider. 4, 14, 15

FFP filtering facepiece. 15-17, 20

FSU Guardian Freedom to Speak Up Guardian. 2, 10, 37, 38, 47, 48, 51, 54–58

GCS Glasgow Coma Score. 34, 85

GDPR General Data Protection Regulations. 56, 63, 87

GMC General Medical Council. 60, 86

GP General Practitioner. 20, 23

HCA Healthcare Assistant. 14, 21

HCP Healthcare Professional. 14, 21, 37, 39, 41, 52

HEART Humanity, Excellence, Accountability, Responsiveness, Teamwork. 64

HoV Head of Volunteering. 10, 51, 52, 68–73, 82

HR Human Resources. 31, 32, 39, 43, 44, 46–48, 50, 51, 54, 55, 57, 62–67, 69–72, 82

ICL Imperial College, London. 12

IMF Incident Management Framework. 26, 28–30, 35, 38, 39, 44, 45, 47

IO Investigating Officer. 6, 27–42, 44–49, 51, 53, 56, 61, 66

IPC Infection Prevention & Control. 43, 61, 64, 86

IRF Incident Report Form. 18, 24, 25, 27, 28, 31, 35, 38, 39, 41–43, 45, 47, 49, 55, 60, 62

IT information technology. 4

JOCC Joint Operational Coordination Cell. 13, 15

KED Kendrick extrication device. 85

MRT Medical Response Team. 4, 12–16, 30, 37–41, 49, 54, 85

MSY unknown. 61

NCVO National Council for Voluntary Organisations. 74

NHQ National Headquarters. 31

NHS National Health Service. 6–8, 13, 14, 20, 53, 78

PACE Probe, Alert, Challenge, Escalate. 31

PIN Personal Identification Number. 60, 86

PM Prime Minister, 16

PPE Personal Protective Equipment. 22

PRF Patient Report Form. 41, 45, 49, 60, 62–64, 66, 69, 71, 84

RACTO Regional Ambulance & Clinical Training Officer. 36

RAL Regional Ambulance Lead. 36

RAQO Regional Assurance & Quality Officer. 43

RCL Regional Clinical Lead. 44, 60

RDTL Regional Driver Training Lead. 8, 16–18, 23, 42

ROCC Regional Operational Coordination Cell. 15–28, 30, 32, 38, 42, 45

RPL (Paramedics) Regional Professional Lead (Paramedics). 60

RVM Regional Volunteer Manager. 63–65, 67, 68, 85

SJA St John Ambulance. 1–17, 19–22, 31, 33, 39, 40, 42–44, 47, 48, 50, 51, 53, 55–58, 63, 64, 68, 70, 71, 74, 75, 77, 78, 80–84, 86, 87

SOP standard operating procedure. 8

TC Tactical Commander. 13, 24, 26, 37–39, 45, 51, 75

UK United Kingdom. 12, 13, 15, 19, 23

UM Unit Manager. 4, 19, 20, 26–30, 32, 38–40, 51, 52

URL Uniform Resource Locator. 17

UTI urinary tract infection. 17

UTL Unit Training Lead. 4

VDI Vehicle Daily Inspection. 17

VDR Vehicle Defect Report. 17, 18, 42

VSO Volunteer Support Officer. 29

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