Issue 8 - March 2025



# **CONSULTANCY SERVICES**

Welcome to the March 2025 edition of the AMG Newsletter!

This year, we are proud to celebrate AMG Consultancy Services' 40th anniversary! In this issue, we introduce our newly recruited experts and provide an updated overview of our expert witness panel. We also feature insightful articles, including guidance on giving oral evidence and a discussion on when to appoint a paramedic expert witness.



Thank you for your continued support—we look forward to another successful year ahead!



Tracey Connor Legal Services Manager

Welcome to our latest quarterly newsletter, the eight edition to be produced. As the winter comes to an end, I hope that as the flowers blossom from their buds, you feel the awakening of spring and the reminder that growth requires care and attention and a hope for a renewal of life and energy.

With our renewed 'energy' we have been busy recruiting ten new expert witness to our team, and I hope that you will take time to review their CVs which can be found in this newsletter.

Two of our expert witnesses have produced articles which we hope you will find interesting. Mike has provided guidance on when to instruct a paramedic, whilst Tony has provided an insight into his experiences of giving oral evidence during a trial, comparing the use of a video conferencing application versus evidence in a court room setting.

AMG Consultancy Services Ltd is pleased to be working with many leading solicitors and medical agencies across the whole of the United Kingdom building up strong relationships. We ensure our Expert witnesses are trained and supported, benchmarking the reports against the Civil Procedure Rules (Part 35), Practice Directions (Part 35) and the national guidelines, policies and procedures ensuring that each expert provides a report of a high standard. Quarterly Masterclass Meetings offer all of our expert witnesses an opportunity to gain insights into the pit falls and success stories of being an expert witness.

Each stage of the process is addressed in a comprehensive manner in order to help solicitors reach appropriate conclusions about their client's situations. We offer free estimates on all our reports as well as deferred payment terms if required.

Our Expert Witnesses can advise on care related matters on the telephone if required – and can provide information regarding the cost of care in extended letter format if needed. Furthermore, they carry out retrospective funding assessments and can also produce reports at short notice.

AMG Consultancy Services Ltd believe that the delivery of excellent customer service and communication is fundamental to continued future success and successful working partnerships.

We invite you to view our website or alternatively, if you are looking for immediate appointment availability or wish to discuss our range of services further, please do not hesitate to contact our Legal Office on 01785 719558 (Option 3) or email us direct via <u>tracey.connor@amgconsultancyservices.com</u> or through your completion of our website's online enquiry form at <u>https://form.jotform.com/233342174740047</u>

Alternatively we are more than happy to receive written approaches. In order for us to match your case to the correct expert, your letter of approach should include the following information; Claimant's Name, date of incident, cause and injuries sustained, brief outline of the case, address or postcode of any visits that may be needed and the type of report you require.



When to Appoint a Paramedic Expert Witness Michael Southworth - Expert Witness, Critical Care Paramedic, and Humanitarian Responder

## Introduction

In legal cases where ambulance services and prehospital emergency care are key issues, choosing the right expert witness is vital. Paramedics are registered healthcare professionals with specialised knowledge of emergency medical care outside hospital settings. However, understanding when a paramedic expert witness is required – and when another expert might be more suitable – ensures that the most relevant expertise is applied to the case.



## **Paramedics as Registered Healthcare Professionals**

Paramedics, regulated by the Health and Care Professions Council (HCPC), have a defined scope of practice that includes independent clinical decision-making,

advanced patient assessment, and pre-hospital emergency treatment. Their expertise is particularly relevant in cases assessing the appropriateness of emergency interventions, on-scene decision-making, and the standard of care provided by ambulance crews.

That said, paramedics are just one of many professional groups working in the ambulance service. Other key roles – such as emergency medical technicians (EMTs), emergency care assistants (ECAs), call handlers, and emergency medical dispatchers – each have distinct training and responsibilities. It is important to consider which expert witness is best suited to the specific details of a case.

## **Understanding Ambulance Service Roles**

Many of the functions within an ambulance service are performed by individuals who are not paramedics. For example:

Call handlers and triage staff – The first point of contact for 999 and NHS 111 calls, these individuals follow structured algorithms to prioritise ambulance dispatch. They typically have no clinical background and rely on computer-based triage systems.

Ambulance dispatchers – These non-clinical staff allocate resources based on triage outcomes, demand levels, and available ambulances.

Emergency medical technicians (EMTs) and emergency care assistants (ECAs) – Often working alongside paramedics, they respond to emergency and urgent calls but do not have the same level of clinical training or scope and are not a registered healthcare professional.



# When to Appoint a Paramedic Expert Witness

## The Role of Call Triage in Delayed Ambulance Response Cases

One of the most common areas where legal professionals seek expert input is in cases involving delayed ambulance response times. However, delays are often due to triage decisions made at the initial point of contact rather than actions taken by responding paramedics.

NHS ambulance services use structured triage systems such as the Medical Priority Dispatch System (MPDS) or NHS Pathways to categorise calls based on the symptoms reported by the caller. These systems prioritise life-threatening emergencies while managing finite resources across all levels of urgency. Crucially, these triage decisions are made by trained call handlers following strict algorithms rather than by clinicians.

As such, cases focused on ambulance response time delays may not necessarily require a paramedic expert witness unless they also have expertise in ambulance call triage systems and operational resource allocation.

## When to Appoint a Paramedic Expert Witness

A paramedic expert witness is most appropriate in cases that involve:

Clinical decision-making and treatment – Assessing whether the care provided by a paramedic met professional standards.

Patient assessment and triage at the scene – Evaluating how a paramedic prioritised treatment and whether their decisions were in line with best practice. This would often include the decision as to whether it is appropriate to discharge a patient at the scene rather than transport them to hospital.

Use of advanced interventions – Examining whether a paramedic appropriately administered advanced airway management, pain relief, or other critical interventions.

Inter-hospital transfers and secondary response care – Reviewing the adequacy of ongoing patient management during transport.



## When Another Expert May Be More Suitable

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In contrast, a paramedic expert witness may not be the best choice in cases where call handling and triage are central issues. A specialist in emergency call triage systems or NHS Pathways may be more appropriate. These roles do not have clearly defined titles within UK ambulance trusts, and while some experts in this area may be paramedics, most paramedic experts will not necessarily have specialist knowledge in this field.



# When to Appoint a Paramedic Expert Witness

## **Paramedics in Non-Ambulance Settings**

While paramedics are most commonly associated with emergency ambulance services, their expertise extends far beyond traditional pre-hospital emergency care. Increasingly, paramedics are employed in primary care settings, urgent care centres, and other healthcare environments where their clinical skills are applied in non-emergency scenarios.

For example, paramedics working in primary care often assess and manage patients with chronic conditions, minor illnesses, and acute presentations that do not require emergency response. They may be employed in GP surgeries, walk-in clinics, or out-of-hours services, where their role overlaps with that of other primary care clinicians.

In cases which involve the actions or decisions of a paramedic in a primary care setting, the expertise required from an expert witness will differ significantly from that of a paramedic with frontline ambulance experience. In such situations, it may be necessary to appoint either a paramedic expert witness with direct experience in primary care, who understands the scope, responsibilities, and limitations of paramedics in this environment. Alternatively, a primary care expert witness, such as a GP or nurse practitioner, may be better placed to assess whether the overall standard of care provided was appropriate in a primary care context.

Legal professionals should be mindful that paramedics working in non-traditional settings operate under different clinical frameworks compared to their ambulance service colleagues. Therefore, selecting an expert witness with the right background is essential to ensuring the evidence provided is relevant and authoritative.

## Conclusion

Selecting the right expert witness in legal cases involving ambulance service provision is crucial. While paramedics provide essential expertise in pre-hospital emergency care, their role does not typically include call triage or operational resource allocation. Legal professionals should carefully consider whether a paramedic expert witness or another specialist with knowledge of call handling and ambulance service logistics is the most appropriate choice for their case. Understanding these distinctions ensures that expert evidence is relevant, reliable, and directly aligned with the issues in question.

Mike Southworth is an expert witness for AMG and a critical care paramedic with an Air Ambulance Service. With extensive experience in pre-hospital emergency care, he specialises in critical care interventions, complex patient management, and the operational challenges of emergency medical response.



In addition to his frontline clinical work, Mike is the founder of Lynas Clinical Safety Limited, a patient safety organisation dedicated to delivering expert clinical advice in pre-hospital care. Through this role, he provides guidance on clinical governance, safety standards, and best practices in pre-hospital care.

Mike is also a humanitarian responder for the UK Emergency Medical Team, deploying to humanitarian disasters worldwide to provide emergency medical care in crisis situations. His work in global disaster response further reinforces his expertise in complex, high-pressure medical environments.

Mike Southworth



# **Expert Insights: Court Experience**

Anthony Barrett - Urology Advanced Clinical Practitioner Expert Witness

I started my nursing career in 1994 as a newly qualified Project 2000 nurse, the second cohort to have taken place. My first job was in a nursing home, but I very quickly secured a very scarce job on the urology ward in the local hospital as a "D" Grade staff nurse, and my initial plan was to only stay for 12 months and then rotate to other surgical fields.

However, 30 years later I'm now still in urology but working at the echelon of my practice as an advanced clinical practitioner with advanced skills and job roles that I never would have imagined I'd be involved with all those years ago.



**Tony Barrett** 

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If only I now could have told a younger me what was to come, then it may have helped me get through some of the days of doubt and disheartenment that I presume most nurses go through at some time.

During my career, I managed to work may way up through the urology ranks – I loved the speciality, and after being given opportunities that I never thought would have been in my remit, I stayed with the speciality. I was ward manger/charge nurse for nine years and successfully managed an integration of specialities when the trust combined the ENT and male urology wards, despite being so different in speciality applications. Despite the pressures and disruption to an established skill set in urology, I developed a good understanding of ENT patient care and procedures, but my heart was always with urology.

Even when I was seconded into a unique bespoke role of quality and education lead for the surgical division, I still had an affinity to urology and spent a great amount of time running educational sessions and trying to train the next generation of nurses into the care of urological patients. Of course, I had to incorporate the other surgical specialities, but my main role was to facilitate and delegate the training to the specialist teams, including the fledgling teams of specialist nurses. Actually, when I say I was seconded into this role, I do feel it was more "head hunted", as I was advised by my senior managers at the time that I should consider this role, and it was very heavily impressed on me that I should seriously consider applying, even though initially I was happy being a ward manager and did not contemplate this to be a career move I was considering in my immediate future. Nevertheless, I applied and was successful out of a total of eight applicants.

On my first day in this role, I asked about my job description and was given a blank sheet of paper and told that I could write my own and develop the job into whatever I wanted it to be. Obviously, whatever I did was successful as I was nominated for a trust award due to the success I had at the time.

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# **Expert Insights: Court Experience**

However, as a secondment, and NHS finances being as they were, this opportunity came to an end, and I was looking at going back to the ward to resume my previous role as ward manager. Like most things, once you have stepped away, it isn't always easy to go back. After a sort of epiphany, seeing how detrimental my previous role on the ward had been to my health, mental health, social life and family life, it felt а backwards step to restart my old position back as a charge nurse and having to deal with those issues that had given me some of the days of doubt and disheartenment that T mentioned before. But it was not until I stepped away that I realised this, and at the time I would have never contemplated leaving the position of charge nurse as it was a fantastic role and career pathway. Hindsight is always 20/20 though, and now, facing going back to that, the cons outweighed the pros!

It was at this point that another opportunity was presented, as the Band 8 lead nurse for the clinical nurse specialists (CNS) in urology had become vacant, and again, this is something I was encouraged to consider. An advanced position in urology,











away from the ward environment, involving a whole new set of skills and patient interactions. I suppose at the time I did have some "impostor syndrome" - did I have enough knowledge? Was I able to be good enough to work at this level? Could I do it?

However, the option was either to try this or go back to the ward. I discussed things at length with my family, colleagues, matron, managers and even the consultant body, and it was unanimous advice that I should apply – there was nothing to lose. And to cut a long story short, I was successful... More on the further career later.

It was about this time or just before that my matron had also been talking to me about expert work. witness had been involved with her during my time on the ward in dealing with complaints, root cause analysis, coroners courts etc. and she had always praised my doggedness and attention to detail in writing reports for these scenarios. She was doing expert witness reports for AMG at the time and thought that I would have transferrable skills from my previous experiences to the expert witness role. I must admit, this was a very scary scenario



# **Expert Insights: Court Experience**

she was selling at the time: legal reports, dealing with solicitors and courts and the possibility of having to attend court. However, with some "gentle" persuasion and after discussion with the legal team at AMG, I was accepted, with my matron agreeing to mentor me as an induction, and I awaited my first instruction.

My first report came in October 2015. (Wow – that's nearly 10 years now – I did not realise it was that long ago.) Anyway, it wasn't just a simple report – after reading the letter of instruction and background to the case, I was given eight large A4 lever arch files, full of printed notes (this was quite a while before "Dropbox" and electronic notes), paginated and covering the patient's whole life's medical history. I needed to find plenty of time to go through this pile of papers, and I diligently set to work.

After a while, I contacted my matron/mentor and desperately asked for help. Despite a template from AMG, I was feeling lost, did not know what I was doing and needed guidance. After spending a few hours going through the notes with my mentor, and after some advice, tips and tricks that she had developed, it suddenly started to make sense. Basically, I needed to construct a chronological timeline of events, find evidence of information to answer the solicitor's instructions and then develop my own opinions. This was a full report, with a time frame of 12-15 hours overall. I'm sure it took a lot longer than this, but as my first attempt, and retrospectively, looking back on the report, I do think it was quite good, very comprehensive and not bad for a first attempt. I did have good feedback, so, naturally, I continued with the reports.

My second instruction was a completely different outcome. This was a very complex case, which I won't go into, but after completing the report, I was duly summoned to court as a witness in a criminal manslaughter trial! I was always told that very few cases go to trial and most experts do not get to present in court. Luckily, I had been given the Bond Solon training in court skills, so I was able to draw on this. However, I can safely say that attending High Court in London and being in the dock was one of the worst and scariest experiences of my life, and the training we had been given cannot fully prepare you for these events.



Again, cutting a long story short, I sat in court from 10am until 3.30pm awaiting my turn, and then I was called in. I started to answer as best as I could, but I was getting caught up in the twists and turns of questioning, and the opposing counsel was trying everything to discredit me, including asking some very probing legally phrased questions which was way out of my remit. The session was then adjourned, and I was ordered to return the next day by the judge, otherwise I would be in contempt of court. So, I very quickly had to arrange travel with AMG and book a day off work as I was previously advised I would only be needed for the one day.

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# **Expert Insights: Court Experience**

I got home a little after 9pm, and I was then due to be up again at 5am to travel back to London for the second day.

When arriving back at court, I was met by the solicitor and told that the judge wasn't prepared to go ahead with the case until he had spoken to counsel. I had to sit, alone, in chambers until I was called. At 12.30pm I was told that court was breaking for lunch, and I would be called later in the afternoon, but I could not talk to anyone. I could go for lunch but had to return to chambers straight afterwards.



After about another hour, I was called into court – the jury was not there, and I was told to stand in the middle of court and address the judge directly. I was told that, although my expert witness record and experience could not be questioned, I did not know enough about law to give evidence! The judge had dismissed the jury and called for retrial. I was subsequently dismissed, not really understanding what had gone on... I was not there to understand law – I was there as a clinical expert witness...

I was told by my counsellor to wait for a debrief. When he came in to see me, both he and his associate were extremely angry and frustrated, but at least it was not at me. From the gist of what I was told, the judge was aiming for a mistrial as the evidence was not going the way it was expected, and I was made a scapegoat to dismiss the jury and start the trial again. I was not allowed to be recalled as an expert witness, but my counsel was very impressed with my report and wanted it submitted in the retrial as he felt it gave a very good supporting argument to his case. This was rejected, and the counsel were lodging a formal complaint as they felt the judge was creating bias to the case...

And in the midst of this, is me: not sure what was happening and not sure why the case had been dismissed or what it meant for me. I headed home, completely unsure as to whether I was in trouble or whether there would be any repercussions.

Over the next couple of days, I contacted AMG and my mentor to reflect on this and discuss what had happened. They were extremely supportive, and after consulting with the solicitors and counsel, it transpired that the judge had been replaced for the retrial, and I was thanked for my time and effort, and apologies were offered for what even they described as an unfair experience, and they were just as confused as to why the jury had been dismissed and the retrial ordered. However, I was not allowed to be expert witness for the retrial, although the solicitor did say he was going to use my report to guide and advise the next expert witness.

All in all, an horrendous experience, but I had some positive feedback from counsel on my report and decorum in court in spite of overwhelming pressure and negativity.

Nevertheless, I did persist with my expert witness reports and developing my career.



# **Expert Insights: Court Experience**

Since then, I have now totalled 42 reports and have only been back to court once. There have been at least five occasions where I have been asked to provide availability, but the cases had been settled prior to the dates.

In my career, I have evolved to become an advanced clinical practitioner in urology. I have attained a BSc (Hons) bachelor's degree in clinical practice and also completed my master's degree (MSc) in advanced clinical practice last year. I have also undertaken advanced skills in performing flexible cystoscopy and am the only nurse in our locale that performs local anaesthetic transperineal (LATP) prostatic biopsies, a role that had previously only been performed by senior registrars or consultant-level physicians. This is unique in this area, and nationally there are very few nurse practitioners performing this skill. I do believe that my experiences in these clinical practices and understanding the principles and risks behind developing and performing these roles have helped me in my application towards decision making in expert witness cases.

Hopefully, continued development within my job role can only help with future report writing and decision making.

During this time, I did have to attend a further court hearing. After COVID, things changed, and I was asked to attend an online court hearing from a case based in Scotland. This was altogether a different scenario. I was still given quite strict instructions on court etiquette, dress code etc. even though this was a Zoom/Teams online video trial. I did resist the temptation to only dress up on my top half as had been the case during many online meetings that occurred during lockdowns and the pandemic! So, I attended the video trial in full suit and sitting in my bedroom with the door closed awaiting my turn.

I was given a time slot where I was expected to be called, and my solicitor was regularly updating me by text message to advise where we were up to with the case. As expected, my time slot was delayed and nearly two hours late before I was asked to join online. I logged in to be greeted by the sheriff overseeing the trial and the two counsel members. There were other attendees on the screen but not actively seen, as they were dealing with administrations and support. I was asked to introduce myself and then sworn in and started with questioning. My counsel went over everything that he had already discussed ahead of the case, and then it was my turn to be crossexamined.



# **Expert Insights: Court Experience**

However, at this point, someone rang my doorbell, and my dog, ever excitable, was barking as if she was possessed and could be very clearly heard on the call. I apologised for the intrusion, and the sherif gave me permission to go and sort her out and quieten her down before returning. This is why I'm glad I dressed fully and not just the top half, as you can imagine as I had to go through the door in full vision of those online!

When I returned, I apologised and the sheriff was very pleasant about it and said that these are the tribulations we need to deal with when we do online cases, and we continued with my cross -examination.

This was very brief. Very few questions were asked and then it very quickly wrapped up – a completely polarising experience to my previous court attendance. I was thanked for my input and asked to leave the call.

And that was that. A very different and much more relaxed experience in comparison to my previous face-to-face exposure.

In the subsequent weeks, I was given feedback from the case, and I was specifically praised in the sheriff's summation for my credibility as an expert witness, with a "cogent and reasoned opinion" that was "consistent and persuasive". The instructing solicitor also commented that my evidence was "given well and received well".

This was completely the opposite to my previous experience, but I guess that's the world of expert witnesses.

Since then, I have continued my expert witness work, and now that my studies are completed, I have been able to take on more instructions and have been able to increase the number of considerations of approach. I have tried to recruit new experts and still actively recruiting. Despite my experiences, I would encourage other expert witnesses to not be put off by these, but to use them as learning experiences. I know I did, even the degrading negative experience.

Expert witness work is very rewarding. It questions your own practice and makes you internalise how you conduct your own job roles to ensure you are working within the expected equivocal standards of care. That can, surely, only be a good thing. It can be scary, and sometimes you do look at a case and just despair at the level of care provided, but ultimately it is our job to provide the factual evidence and considered opinion and not be judgemental.

Our duty is to the court, but at the centre of this is a patient who may have suffered a breach of duty of care, and it is through our expert witness writing that this can help to be decided in the legal process. If our report and opinions help to identify where a patient has been treated below expected standards of care, then just maybe, this can help improve care provision in the future.



**Anthony Barrett** 









We would like to extend a very warm welcome to our newly recruited expert witnesses.

# **REGISTERED GENERAL NURSE**



### Amanda Kelly

**REGISTERED GENERAL NURSE - ADULT - SURGICAL** 

SPECIALISMS: Basic Life Support, Continuing Health Care, Dementia, Deprivation of Liberty (DoLs), Elderly Care, Emergency Surgery, Employment & Sickness Management, End of Life Care, Falls, General Adult Nursing, General Surgery, Incident Reporting and Management, Intravenous Access, Intravenous Therapy, Medicines Management, Mental Capacity Act, Palliative Care/End of Life, Pressure Ulcers, Risk Management, Safeguarding Adults, Sepsis, Surgical Nursing Post-operative, Surgical Nursing Preoperative, Venepuncture/Cannulation, Wound Care

Amanda Kelly has been a registered nurse since 2014, specialising in acute surgical care, including preoperative and complex postoperative management. She has extensive experience working with medical patients with complex comorbidities, as well as orthopaedic patients.

Amanda possesses strong clinical expertise in patient assessment, care planning, implementation, and evaluation. She has held leadership roles, overseeing clinical governance, staff training, competency development, and clinical audits while driving quality improvement initiatives within her department.

Currently, Amanda works as a Complex Discharge Case Manager, responsible for managing patients with varying levels of complexity from admission through to discharge. Her role includes conducting comprehensive assessments of patients' medical needs, home environments, and long-term care requirements to ensure a seamless transition from hospital to home or appropriate care settings.

Amanda continues to practice clinically, maintaining her skills and competencies in adult nursing. Her combined expertise in direct patient care and hospital discharge planning enables her to provide holistic, patient-centred care while optimising hospital resources.

https://amgconsultancyservices.com/amanda-kelly



### Claire Beats

#### **REGISTERED GENERAL NURSE - ADULT - ENDOSCOPY**

SPECIALISMS: Basic Life Support, Bowel Cancer Screening, Endoscopy Nurse, Falls, Gastroenterology, Incident Reporting and Management, Intravenous Access, Intravenous Therapy, Manual Handling, Outpatient Department Services, Venepuncture/Cannulation

Claire Beats is a highly experienced Registered General Nurse and Lead Specialist Bowel Cancer Screening Practitioner with expertise in endoscopy. As a qualified Nurse Endoscopist, she specialises in bowel cancer screening, patient risk assessment, and clinical management. Claire has extensive experience in conducting endoscopic procedures, quality assurance, and clinical governance.

She has played a key role in developing and expanding bowel cancer screening services and is actively involved in ensuring compliance with national standards.

https://amgconsultancyservices.com/claire-beats



### Louise Johnson

REGISTERED GENERAL NURSE - ADULT - SEXUAL HEALTH NURSE PRACTITIONER

SPECIALISMS: Contraception, Family Planning & Sexual Health, Sexual Health, Sexual Health Nurse Practitioner

Louise Johnson is a highly experienced nurse specialising in sexual health and contraceptive services since 2009. She holds over two decades of healthcare experience. As a Band 7 Sexual Health Team Leader, Louise has extensive expertise in providing comprehensive sexual health care, including testing, diagnosis, and treatment of sexually transmitted infections, contraceptive services, and public health interventions.

Louise is skilled in clinical governance, risk assessment, and delivering high-quality, patient-focused care. Her professional expertise extends to procedures such as contraceptive implant and intrauterine device fitting and removal, venepuncture and microscopy.

https://amgconsultancyservices.com/louise-johnson





# **REGISTERED GENERAL NURSE**



#### Rachel Williams

REGISTERED GENERAL NURSE - ADULT - SEXUAL HEALTH NURSE PRACTITIONER SPECIALISMS: Contraception, Family Planning & Sexual Health, Sexual Health, Sexual Health Nurse Practitioner

Rachel Williams is a highly skilled Registered Nurse, qualified since 2006, and has specialised in contraception and sexual health since 2012. She is proficient in all aspects of contraception services, including the insertion and removal of long-acting reversible contraceptives such as implants and intrauterine devices.

With a foundation in general practice nursing, Rachel has developed extensive expertise in delivering comprehensive sexual health care, including screening and treatment of sexually transmitted infections, cervical cytology, and emergency contraception.

https://amgconsultancyservices.com/rachel-williams



#### Sian Francis

#### **REGISTERED GENERAL NURSE - ADULT - CARE EXPERT**

SPECIALISMS: Accident & Emergency Care, Allergies, Anaesthetics/Recovery Nursing, Anaphylaxis, Asthma/COPD, Basic Life Support, Bladder Management, Bowel Management, Blood Transfusion, Brain Injury, Cancer Care, Cardiology, Chronic Pain Management, Complex Health Care, Continuing Health Care, Critical Care/ICU/High Dependency, Diabetes monitoring & management, District & Community Nursing, Elderly Care, End of Life Care, Enteral Feeding, Falls, General Adult Nursing, Hand and Upper Limb Injury, Health & Safety, Infection Prevention and Control, Incident Reporting and Management, Incontinence (Faecal), Incontinence (Urinary), Leg Ulcers, Long Term/Chronic/Life Limiting Conditions, Manual Handling, Medicines Management, Nasogastric Feeding, Oncology, Orthopaedic, Outpatient Department Care, Pain Management, Parenteral Feeding, Pressure Ulcers, Quantum Reports, Registered General Nurse, Renal Care (Chronic), Respiratory Disease, Risk Management, Safeguarding Adults, Sensory Impairment, Speech Impairment, Spinal Injury, Stoma Care, Stroke, Surgical Nursing Preoperative, Surgical Nursing Post-operative, Tissue Viability, Tracheostomy, Wound Care

A Registered Nurse since 2010, Sian has developed extensive expertise across ICU, Emergency Department, surgical, medical, and community care, spanning private, NHS, and corporate sectors. Specialising in brain, catastrophic, and orthopaedic injuries, Sian brings a comprehensive clinical background to each role.

https://amgconsultancyservices.com/sian-francis

# **ADVANCED NURSE PRACTITIONER**



### Louise Kenyon

#### ADVANCED NURSE PRACTITIONER (PRIMARY CARE) - GENERAL PRACTICE NURSE

SPECIALISMS: Advanced Nurse Practitioner in Primary Care, Basic Life Support, Cervical Screening, Complex Health Care, Contraception, Diabetes monitoring & management, Family Planning & Sexual Health, General Adult Nursing, General Practice Nurse, GP Practice Nurse, Health & Safety, Health Care Education, Hormone Replacement Therapy, Hypertension, Immunisation Programmes, Menopause Management, Non-Medical Prescribing, Nurse Prescribing - Non-Medical, Practice Nursing, Respiratory Disease, Risk Management, Sexual Health, Triage Nursing - Face to Face and Remote, Vaccinations, Venepuncture/Cannulation, Women's Health

Louise Kenyon is a highly skilled Registered Nurse with extensive experience in primary care since 2009. She specialises in chronic disease management, non-medical prescribing, and women's health, including menopause care and contraception.

With a strong foundation in patient-centered care and evidence-based practice, she brings a wealth of expertise to both clinical and legal healthcare settings.

https://amgconsultancyservices.com/louise-kenyon



# **HEALTH VISITOR**



## Ann Guindi

HEALTH VISITOR

SPECIALISMS: Advanced Nurse Practitioner (Primary Care), Anxiety/Depression, Asperger's Disorder, Basic Life Support, Contraception, Health Visiting, Health Visitor, Mental Capacity Act, Non-Medical Prescribing, Paediatrics, Paediatric Nurse, Pregnancy Loss, Sexual Health

Ann Guindi is an experienced Health Visitor with an extensive career in community nursing, child health, and safeguarding. With significant experience as a health visitor, she has worked with families to promote child development, assess health needs, and provide early interventions to improve outcomes. Her expertise in safeguarding, multi-agency collaboration, and risk assessment makes her an invaluable asset in legal cases requiring expert analysis.

Throughout her career, Ann has played a key role in delivering the Healthy Child Program, conducting developmental assessments, and identifying early indicators of health or social concerns in young children. She has worked extensively with vulnerable families, supporting those affected by domestic abuse, mental health issues, and complex social circumstances. Her work has involved close collaboration with social services, education providers, and healthcare professionals to ensure the best possible outcomes for children and their families.

Ann has significant experience in safeguarding children, ensuring that the voice of the child is heard in every case she manages. She has provided detailed family needs assessments, made referrals to children's social care, and contributed to multi-agency risk assessments. Her specialist work supporting victims of domestic abuse, particularly within women's refuges, was recognised with the Queen's Nurse title for service improvement and advocacy for survivors.

https://amgconsultancyservices.com/ann-guindi

# **MIDWIFE**



### Louisa Mitchell

#### MIDWIFE

SPECIALISMS: Antenatal Care, Birth Injury/Development Injury, Brain Injury, Cardiotocography (CTG) Interpretation, Cerebral Palsy, Delivery Emergency, Hypoxic Ischaemic Encephalopathy (HIE), Incident Reporting and Management, Intrapartum Care, Labour Ward Care, Midwifery, Midwifery Led Care, Obstetric Emergencies, Pregnancy Loss, Risk Management, Water Births

Louisa Mitchell is a highly experienced and NMC-registered Midwife who has been practicing since 2008. Her extensive career spans all settings of maternity services, including antenatal, intrapartum, and postnatal care, as well as expertise in neonatal and obstetric emergencies. Louisa has significant experience in fetal monitoring, including cardiotocography (CTG) and intermittent auscultation.

Since 2018, Louisa has specialised in maternity governance, serving as the Lead Governance Midwife for University Hospital Coventry and Warwickshire NHS Trust. In this role, she has been instrumental in reviewing clinical incidents, ensuring compliance with national and local guidelines, and collaborating with legal teams to provide expert opinions on cases involving stillbirths, neonatal deaths, and complex claims such as cerebral palsy.

Associated with AMG Consultancy Services since 2024, Louisa brings her wealth of clinical and governance experience to her role as an Expert Witness. She is well-equipped to deliver high-quality liability reports on behalf of claimants and defendants, ensuring impartiality and professionalism in every case.

https://amgconsultancyservices.com/louisa-mitchell



# **OCCUPATIONAL THERAPIST**

Miriam Noonan



#### OCCUPATIONAL THERAPIST

SPECIALISMS: Anxiety/Depression, Acquired Brain Injury, Bipolar Disorder, Bone Fractures, Bowel Management, Brain Injury, Cancer Care, Cardiology, Care Expert, Care Home Nursing, Chronic Pain Management, Chronic Fatigue Syndrome, Cognitive Impairment, Community Rehabilitation - Physiotherapy/Occupational Therapy, Continence & Bowel Management, Continuing Health Care, Dementia, Deprivation of Liberty (DoLs), Falls, Fibromyalgia, Long Term/Chronic/Life Limiting Conditions, ME - Myalgic Encephalomyelitis, Mental Health, MS - Multiple Sclerosis, Musculoskeletal Assessment & Management, Occupational Therapist, Occupational Therapy & Reablement,Pain Management, Parkinson's Disease, Return to Work, Sensory Impairment

Dr Miriam Noonan is a highly specialist occupational therapist with extensive experience since qualifying in 2007. She holds a PhD in Medical Studies from the University of Exeter and a BSc (Hons) in Occupational Therapy from University College Cork.

Miriam's career encompasses expertise in assessing and addressing complex physical, sensory, and psychosocial needs across various inpatient, community, and vocational settings. Her roles have included developing and leading occupational therapy services in mental health, chronic fatigue, and vocational rehabilitation, as well as designing and delivering fatigue self-management programs.

In addition to her clinical work, Miriam has significant teaching and research experience, having served as a lecturer and pathway lead at the University of Plymouth. She remains an Honorary Lecturer and has supervised numerous PhD students, with a particular focus on chronic pain, learning disabilities, and carer support.

https://amgconsultancyservices.com/miriam-noonan

# SPEECH AND LANGUAGE THERAPIST



### Fazila Dawjee

#### SPEECH AND LANGUAGE THERAPIST

SPECIALISMS: Acquired Brain Injury, Brain Injury, Care of the Older Person, Cerebral Palsy, Cognitive Impairment, Communication Disorders, Critical Care/ICU/High Dependency, Dementia, Deprivation of Liberty (DOLS), Elderly Care, End of Life Care, ENT - Ear, Nose & Throat, Epilepsy, Hospital Acquired Infections, Huntington's Disease, Learning Disabilities, Major Trauma, Mental Capacity Act, MS - Multiple Sclerosis, Neuro Medicine, Neurodegenerative Disorders, Neurosurgical, Nutrition and Hydration, Palliative Care/End of Life, Parkinson's Disease, Rehabilitation, Respiratory Disease, Safeguarding Adults, Speech & Language Therapist, Speech Impairment, Stroke, Swallowing Disorders, Tracheotomy, Traumatic Brain Injury

Fazila Dawjee is a highly experienced Speech and Language Therapist with a strong background in acute hospital care, neuro-rehabilitation, and community-based stroke recovery. Since qualifying in 2017, she has specialised in assessing and managing complex communication and swallowing disorders, working across critical care, general medical, surgical, and rehabilitation settings.

Her expertise includes dysphagia (swallowing disorder) management, tracheostomy weaning, post-extubation assessments, and recognises the use of instrumental evaluations such as Fibreoptic Endoscopic Evaluation of Swallowing (FEES) and Videofluoroscopic Swallow Study (VFSS) to guide management. Fazila has also developed specialist knowledge in Head and Neck Cancer rehabilitation and stroke recovery, ensuring a patient-centred approach to care.

As an Expert Witness, Fazila applies her extensive clinical experience to provide independent assessments and reports in cases involving speech, language, and swallowing disorders.

https://amgconsultancyservices.com/fazila-dawjee



For further details on any of our experts or to view their CV, please click on their link displayed at the end of their profile.

# **REGISTERED GENERAL NURSE**



### Andrew Rowbottom

#### **REGISTERED GENERAL NURSE - PRISON & THEATRE**

SPECIALISMS: Advanced Life Support/Automated External Defibrillator, Anaesthetics/Recovery Nursing, Anaphylaxis, Basic Life Support, Blood Transfusion, Bowel Management, General Adult Nursing, Prison & Custody Health, Surgical Nursing Preoperative, Surgical Nursing Post-operative, Venepuncture/Cannulation, Wound Care (Not Pressure Ulcers)

https://amgconsultancyservices.com/andrew-rowbottom



### Angela Baggaley

#### **REGISTERED GENERAL NURSE - CARE HOME**

SPECIALISMS: Bladder Management, Bowel Management, Complex Health Care, Continuing Health Care, Dementia, Dementia / Elderly Care, Deprivation of Liberty (DOLS), Diabetes, District and Community Nursing, Elderly Care, End of Life Care, Falls, General Adult Nursing, Incident reporting and Management, Incontinence (faecal), Incontinence (urinary), Infection Prevention & Control, Leg Ulcers, Long Term/Chronic/Life Limiting Conditions, Manual Handling, Medicines Management, Mental Capacity Act, Nursing and Care Homes, Pain Management, Palliative Care/End of Life, Parkinson's Disease, Pressure Ulcers, Rehabilitation, Risk Management, Safeguarding Adults, Sepsis, Tissue Viability Nurse, Venepuncture, Wound Care.

https://amgconsultancyservices.com/angela-baggaley



### Clare Swain

#### **REGISTERED GENERAL NURSE - PALLITIVE CARE**

SPECIALISMS: Basic Life Support, Bladder Management, Blood Transfusion, Bowel Management, Breast Cancer, Cancer Care, Care Home Nursing, Care of the Older Person, Cauda Equina Syndrome, Cognitive Impairment, Continence & Bowl Management, Dementia, Deprivation of Liberty (DoLs), Elderly Care, Employment & Sickness Management, End of Life Care, Falls, General Adult Nursing, Hospice Nursing, Incident Reporting and Management, Incontinence (Faecal), Incontinence (Urinary), Infection Prevention & Control, Long Term/Chronic/Life Limiting Conditions, Manual Handling, Medicines Management, Mesothelioma, Neurodegenerative Disorders, Non-Medical Prescribing, Nursing Home Nursing, Nurse Prescribing - Non-Medical, Nutrition and Hydration, Pain Management, Palliative Care/End of Life, Palliative Care Nurse, Parkinson's Disease, Pressure Ulcers, Respiratory Disease, Return to Work, Safeguarding Adults, Stoma Care, Triage Nursing-Face to Face and Remote, Wound Care (Not Pressure Ulcers)

https://amgconsultancyservices.com/clare-swain



### **Robert Curtis**

#### **REGISTERED GENERAL NURSE - DISTRICT NURSE, CARE HOME NURSE & COMMUNITY NURSE**

SPECIALISMS: Amputation(s), Bladder Management, Bowel Management, Care Expert, Care Home Nursing, Care of the Older Person, Cognitive Impairment, Continence & Bowel Management, Dementia, Diabetes monitoring & management, District and Community Nursing, Elderly Care, End of Life Care, Falls, General Adult Nursing, Incontinence (Faecal), Incontinence (Urinary), Leg Ulcers (venous), Long Term/Chronic/Life Limiting Conditions, Loss of Service, Manual Handling, Medicines Management, Nursing Home Nursing, Nutrition and Hydration, Palliative Care/End of Life, Pressure Ulcers, Risk Management, Stoma Care, Stroke, Venepuncture/Cannulation, Wound Care (not pressure ulcers)

https://amgconsultancyservices.com/robert-curtis



#### Sarah Deacon

#### **REGISTERED GENERAL NURSE -THEATRE NURSE**

SPECIALISMS: Basic Life Support, Bladder management, Blood transfusion, Bowel management, Cardiology, Elderly Care, General Adult Nursing, Infection Prevention & Control, Medicines management, Nasogastric Feeding, Post-operative nursing care, Pre-operative nursing care, Registered General Nurse, Surgical, Venepuncture/cannulation, Wound Care, Wound closure and suturing



# REGISTERED GENERAL NURSE



### Sarah Wills-Lee

#### **REGISTERED GENERAL NURSE - UROLOGY**

SPECIALISMS: Bladder Management, Cancer Care, General Adult Nursing, Incontinence (Urinary), Surgical Nursing (Preoperative), Surgical Nursing (Post-Operative), Urology

https://amgconsultancyservices.com/sarah-wills-lee



### **Tony Barrett**

#### **REGISTERED GENERAL NURSE- UROLOGY**

SPECIALISMS: Bladder Management, Blood Transfusion, Cancer Care, Continence & Bowel Management, Dementia, Falls, General Adult Nursing, General Surgery, Hospital Acquired Infections, Incontinence (urinary), Infection Prevention & Control, Manual Handling, Medicines Management, Non-medical Prescribing, Postoperative Nursing Care, Pressure Ulcers, Registered General Nurse, Tissue Viability, Urological Nursing, Urology, Venepuncture/Cannulation, Wound Care, Wound Closure and Suturing

https://amgconsultancyservices.com/anthony-barrett



#### Trish Finnegan **REGISTERED GENERAL NURSE**

SPECIALISMS: Anaphylaxis, Basic Life Support, Bowel Management, Cancer Care, Complex Health Care, Continuing Health Care, District and Community Nursing, Elderly Care, ENT, Enteral feeding, General Adult Nursing, Infection Prevention & Control, Nasogastric Feeding, Oncology, Parenteral Feeding, Safeguarding Adults, Sepsis, Tracheotomy, Wound Care (excl pressure ulcers)

https://amgconsultancyservices.com/trish-finnegan

# ADVANCED NURSE PRACTITIONER



### Deborah Hill

#### **ADVANCED NURSE PRACTITIONER - CRITICAL CARE**

SPECIALISMS: Advanced Nurse Practitioner, Advanced Life Support/Automated External Defibrillation, Anaphylaxis, Basic Life Support, Blood Transfusion, Complex Health Care, Critical Care / ICU / High Dependency, Deprivation of Liberty (DoLs), Elderly Care, Emergency Assessment, Employment and Sickness Management, End of Life Care, Enteral Feeding, Falls, General Adult Nursing, General Surgery, HIV / AIDS, Incident Reporting and Management, Kidney Dialysis (Acute), Manual Handling, Medicines Management, Mental Capacity Act, Nasogastric Feeding, Pain Management, Palliative Care / End of Life, Parenteral Feeding, Prescribing (Non-Medical), Pressure Ulcers, Renal Care (Acute), Respiratory Disease, Risk Management, Safeguarding Adults, Sepsis, Surgical Nursing (Preoperative), Surgical Nursing (Post-Operative), Tracheostomy, Venepuncture / Cannulation, Wound Care (Not Pressure Ulcers)

https://amgconsultancyservices.com/deborah-hill



#### Joanne Hedley

#### ADVANCED NURSE PRACTIONER (PRIMARY CARE ) - GENERAL PRACTICE NURSE

SPECIALISMS: Advanced Nurse Practitioner, Asthma/COPD, Contraception, Diabetes monitoring & management, GP Practice Nurse, Immunisation Programmes, Non-Medical Prescribing, Nurse Prescribing - Non-Medical, Practice Nursing, Vaccinations, Wound Care (Not Pressure Ulcers)

https://amgconsultancyservices.com/joanne-hedley





# **ADVANCED NURSE PRACTITIONER**



#### Kerry Till

#### **ADVANCED NURSE PRACTITIONER & RENAL NURSE**

• SPECIALISMS: Advanced Nurse Practitioner, Care Home Nurse, Care of the Older Person, Community Nurse, Continence & Bowel Management, District & Community Nursing, Elderly Care, Employment & Sickness Management End of Life Care, Extravasation Injuries, Falls, General Practice Nurse, Incident Reporting and Management, Intravenous Therapy, IV Access-Central Venous Catheters/PICC Lines, Kidney Dialysis, Leg Ulcers (venous), Medicines Management, Nephrology, Non-Medical Prescribing, Nursing Home Nursing, Orthopaedic, Palliative Care/End of Life, Pressure Ulcers, Registered General Nurse, Renal Care (Acute), Renal Care (Chronic), Renal Nurse, Respiratory Disease, Tissue Viability, Triage Nursing - Face to Face and Remote, Venepuncture/Cannulation, Wound Care

https://amgconsultancyservices.com/kerry-till



#### Lisa Emery

#### **ADVANCED NURSE PRACTITIONER & TISSUE VIABILITY NURSE**

SPECIALISMS: Advanced Nurse Practitioner (Primary Care), Allergies, Anaphylaxis, Anaemia Management, Anxiety/Depression, Asthma/COPD, Bladder Management, Bone Fractures, Bowel Management, Care of the Older Person, Cauda Equina, Chronic Fatigue Syndrome, Continence & Bowel Management, Contraception, Covid 19 Vaccinations, Deep Vein Thrombosis, Diabetes monitoring & management, District and Community Nursing, Elderly Care, Emergency Wound Care, End of Life Care, Falls, Family Planning & Sexual Health, Fibromyalgia, General Adult Nursing, GP Practice Nurse, Hypertension, Immunisation Programmes, Incontinence (Faecal), Incontinence (Urinary), Leg Ulcers (venous), Long Term/Chronic/Life Limiting Conditions, Manual Triage (Hospital & NHS 111), Medicines Management, Men's Health, Minor Injuries/Walk in Centres, Needlestick Injuries, Non-Medical Prescribing, Nurse Prescribing - Non-Medical, Pain Management, Palliative Care/End of Life, Practice Nursing, Pressure Ulcers, Remote Assessment (including NHS 111), Respiratory Disease, Safeguarding Adults, Safeguarding Children, Sepsis, Sexual Health, Tissue Viability, Tissue Viability Nurse, Triage Nursing - Face to Face and Remote, Vaccinations, Women's Health, Wound Care (not pressure ulcers)

https://amgconsultancyservices.com/lisa-emery

# AESTHETICS



#### **Richard Peppiatt**

AESTHETICS - AESTHETICS NURSE PRACTITIONER SPECIALISMS: Aesthetics

https://amgconsultancyservices.com/richard-peppiatt

A&E



### Lindsay Swanson

<u>A&E</u>

SPECIALISMS: Accident and Emergency Care (Paediatrics), Accident and Emergency Care, Advanced Life Support/Automated External Defibrillator, Aesthetics/Cosmetic Surgery, Anaphylaxis, Asthma / COPD, Basic Life Support, Dementia, Diabetes, Elderly Care, End of Life Care, General Paediatric Nursing, Gynaecology, Hand and Upper Limb Injury, Incident Reporting and Management, Loss of Service, Major Trauma, Mental Health, Minor Injuries / Walk in Centres, Orthopaedics, Paediatrics, Palliative Care/End of Life, Pressure Ulcers, Respiratory Disease, Sepsis, Stroke, Surgical Nursing, Triage Nursing, Venepuncture/Cannulation, Wound Care

https://amgconsultancyservices.com/lindsay-swanson



# **BARIATRIC NURSE**



### Yvonne McKeown

BARIATRIC NURSE

SPECIALISMS: Bariatric Nurse, Bariatric Surgical Nursing Postoperative, Bariatric Surgical Nursing Preoperative, Diabetes, General Adult Nursing, Medicines management

https://amgconsultancyservices.com/yvonne-mckeown

# **CRITICAL CARE**



### Emma Waring

CRITICAL CARE

SPECIALISMS: Adult Critical Care/High Dependency, Anaesthetics / Recovery, Asthma / COPD, Audiology, Critical Care/ICU/High Dependency, Diabetes, Employment & Sickness Management, End of Life Care, Enteral feeding, General Adult Nursing, Incident Reporting and Management, Incontinence (urinary), Kidney Dialysis, Nasogastric Feeding, Neurosurgical Nursing Care, Palliative Care/End of Life, Pressure Ulcers, Renal Care, Respiratory Disease, Sepsis, Surgical Nursing, Tracheotomy, Triage Nursing, Wound Care

https://amgconsultancyservices.com/emma-waring

# **HEALTH VISITOR**



### **Annette Richards**

<u>HEALTH VISITOR</u> SPECIALISMS: Health Visiting, Health Visitor

https://amgconsultancyservices.com/annette-richards



Sue Cody

### HEALTH VISITOR

SPECIALISMS: Covid-19, Health Visiting, Health Visitor, Immunisation, Safeguarding Children, Vaccinations https://amgconsultancyservices.com/sue-cody

# MIDWIFE



Christine Hastings

SPECIALISMS: Anaphylaxis, Anaemia Management, Antenatal Care, Basic Life Support, Birth Injury/Development Injury, Bladder Management, Caesarean Section, Complex Pregnancy, Community Midwifery, Contraception, Delivery Emergency, Early Pregnancy, Family Planning & Sexual Health, Gynaecology, Home Birthing, Intrapartum Care, Intravenous Access, Labour Ward Care, Midwife, Midwifery Led Care, Neonatal, Obstetric Emergencies, Perineal Trauma, Sepsis, Sexual Health, Venepuncture/Cannulation, Water Births, Women's Health

https://amgconsultancyservices.com/christine-hastings



## MIDWIFE



### Katie Holland

#### **MIDWIFE**

SPECIALISMS: Accident & Emergency Care, Antenatal Care, Birth Injury/Development Injury, Bladder Management, Blood Transfusion, Bowel Management, Brain Injury, Caesarean Section, Cerebral Palsy, Complex Pregnancy, Community Midwifery, Continence & Bowel Management, Deep Vein Thrombosis, Delivery Emergency, Erbs Palsy, Extravasation Injuries, Health & Safety, Hypoxic Ischaemic Encephalopathy (HIE), Hysterectomy, Home Birthing, Hospital Acquired Infection, Hypertension, Incident Reporting and Management, Incontinence (Urinary), Incontinence (Faecal), Infection Prevention and Control, Intrapartum Care, Labour Ward Care, Manual Triage (Hospital & NHS 111), Maternal Death, Medicines Management, Mental Health, Midwifery, Midwifery Led Care, Miscarriage, Neonatal, Obstetric Emergencies, Pain Management, Perineal Trauma, Pregnancy Loss, Pressure Ulcers, Reduced Fetal Movement, Risk Management, Safeguarding Adults, Safeguarding Children, Sepsis, Sexual Health, Substance Abuse/Misuse, Tissue Viability, Vaccinations, Venepuncture/Cannulation, Water Births, Women's Health, Wound Care, Wound Closure and Suturing

https://amgconsultancyservices.com/katie-holland



### Louise Wake

#### **MIDWIFE**

SPECIALISMS: Basic Life Support, Birth Injury/Development Injury, Bladder Management, Blood Transfusion, Caesarean section, Delivery Emergency, Diabetes, Family Planning & Sexual Health, Maternity Triage (Hospital & NHS111), Midwife, Midwifery, Neonatal, Obstetric Emergencies, Patient Safety, Perineal Repair, Risk Management, Sepsis, Triage Nursing, Venepuncture/Cannulation, Wound Closure and Suturing

https://amgconsultancyservices.com/louise-wake



### Natalie Jones

#### MIDWIFE

SPECIALISMS: Antenatal Care, Birth Injury/Development Injury, Bladder Management, Cardiotocography (CTG) Interpretation, Care of the Late Preterm Infant, Care of the At Risk Neonate, Caesarean Section, Complex Pregnancy, Contraception, Delivery Emergency, Employment and Sickness Management, Incident Reporting and Management, Intrapartum Care, Labour Ward Care, Midwifery, Midwifery Led Care, Nasogastric Feeding, Neonatal, Neonatal Resuscitation, Neonatal Transitional Care, Obstetric Emergencies, Perineal Trauma, Water Births

https://amgconsultancyservices.com/natalie-jones



### Sharon Rapsey

#### MIDWIFE

SPECIALISMS: Antenatal Care, Basic Life Support, Birth Injury/Development Injury, Blood Transfusion, Caesarean Section, Complex Pregnancy, Community Midwifery, Delivery Emergency, Emergency Surgery, Fetal Heart Monitoring, Home Birthing, Hospital Acquired Infections, Intrapartum Care, Intravenous Access, Labour Ward Care, Medicines Management, Midwifery, Midwifery Led Care, Needlestick Injuries, Neonatal, Neonatal Resuscitation, Obstetric Emergencies, Pain Management, Perineal Trauma, Pregnancy Loss (after 22 weeks), Risk Management, Safeguarding Adults, Safeguarding Children, Sepsis, Venepuncture/Cannulation, Water Births, Wound Care (not pressure ulcers), Wound Closure and Suturing (Perineum)

https://amgconsultancyservices.com/sharon-rapsey

# MENTAL HEALTH NURSE



### Marcia Blackstock

#### MENTAL HEALTH PRACTITIONER

SPECIALISMS: Dementia, Deprivation of Liberty (DoLs), Epilepsy, Health & Safety, Incident Reporting and Management, Medicines Management, Mental Health, Mental Capacity Act, Risk Management, Safeguarding Adults, Safeguarding Children

https://amgconsultancyservices.com/marcia-blackstock





# NEONATAL NURSE, SKIN CAMOUFLAGE, PHE AND COVID



### **Carol Jackson**

SKIN CAMOUFLAGE NURSE

SPECIALISMS: Burns Management, Camouflage Cosmetics, Cleft Lip and Palate, Dog Attacks, Facial Trauma, Maxillofacial, Pigmentation, Quantum Reports, Rehabilitation, Skin Camouflage, Skin Grafts

#### NEONATAL NURSE

SPECIALISMS: Birth Injury/Development Injury, Brain Injury, General Adult Nursing, Health and Safety, Incident Reporting and Management, Loss of Service, Medicines Management, Neonatal, Neonatal Nurse, Safeguarding Children, Skin Camouflage, Venepuncture/Cannulation

UK HEALTH SECURITY AGENCY & COVID 19 SPECIALISMS: Covid-19, Infection Prevention & Control

https://amgconsultancyservices.com/carol-jackson

# **OCCUPATIONAL HEALTH**



### Nicola Wright

#### SPECIALIST NURSE PRACTITIONER IN OCCUPATIONAL HEALTH

SPECIALISMS: Advanced Life Support/Automated External Defibrillator, Audiology, Basic Life Support, Bladder management, Blood transfusion, Bowel management, Chronic Pain Management, Complex Health Care, Dementia, Elderly Care, Employment & Sickness Management, Falls, General Adult Nursing, Health and Safety, HIV/Aids, Immunisation, Manual Handling, Medicines management, Mental Health, Nursing and Care Homes, Occupational Health, Prison & Custody Health, Rehabilitation, Risk Management, Safeguarding adults, Safeguarding children, Specialist Nurse Practitioner, Spinal Injury, Stoma Care, Vaccinations, Venepuncture/cannulation, Wound Care

https://amgconsultancyservices.com/nicola-wright

# **OPHTHALMIC NURSE**



### **Sharon Owen**

#### **REGISTERED GENERAL NURSE - OPHTHALMOLOGY**

SPECIALISMS: Advanced Life Support / Automated External Defibrillator, Basic Life Support, General Adult Nursing, Gynaecology, Health & Safety, Infection Prevention and Management, Incident Reporting and Management, Loss of Service, Manual Handling, Medicines Management, Mental Capacity Act, Ophthalmology Nursing, Risk Management, Safeguarding Adults, Safeguarding Children, Surgical Nursing (Preoperative), Surgical Nursing (Post-Operative), Visual Impairment

https://amgconsultancyservices.com/sharon-owen

# **OCCUPATIONAL THERAPIST**



# Heather Roche

#### SPECIALISMS: Amputations, Audiology, Birth Injury/Development Injury, Brain Injury, Burns Management, Cancer Care, Cardiology, Cauda Equina, Cerebral Palsy, Chronic Pain Management, Complex Health Care, Continuing Health Care, Dementia, Deprivation of Liberty (DOLS), Elderly Care, End of Life Care, Epilepsy, Equipment Supply, Falls, Fibromyalgia, Hand and Upper Limb Injury, Huntington's Disease, Industrial Diseases, Long Term/Chronic/Life Limiting Conditions, Loss of Service, Major Trauma, Manual Handling, Mental Capacity Act, Mental Health, Minor Injuries / Walk in Centres, Nasogastric Feeding, Neuromedicine, Neurosurgical Nursing Care, Occupational Therapist, Occupational Therapy & Reablement, Oncology, Orthopaedics, Paediatrics, Pain Management, Palliative Care/End of Life, Parkinson's Disease, Quantum Reports, Rehabilitation, Respiratory Disease, Rheumatology, Safeguarding Adults, Spinal Injury, Stoma Care, Stroke, Tissue Viability



# **OCCUPATIONAL THERAPIST**



### Karla Walmsley-Morgan

#### OCCUPATIONAL THERAPIST

SPECIALISMS: Amputation(s), Asthma/COPD, Chronic Pain Management, Complex Health Care, Continuing Health Care, Dementia, Deprivation of Liberty (DoLs), Elderly Care, Employment and Sickness Management, End of Life Care, Equipment Supply, Falls, Fibromyalgia, Hand and Upper Limb Injury, Health & Safety, Long Term/Chronic/Life Limiting Conditions, Loss of Service, Manual Handling, Medicines Management, Mental Capacity Act, Nursing and Care Homes, Occupational Health, Occupational Therapist, Occupational Therapy & Reablement, Outpatient Department Care, Pain ManagementPalliative Care/End of Life, Parkinson's Disease, Pressure Ulcers, Risk Management, Safeguarding Adults

https://amgconsultancyservices.com/karla-walmsley-morgan



#### Julia Hudson

#### OCCUPATIONAL THERAPIST/OCCUPATIONAL HEALTH

SPECIALISMS: Asperger's Disorder, Asthma / COPD, Cancer Care, Cerebral Palsy, Chronic Pain Management, Cognitive Impairment, Dementia, Equipment Supply, Falls, Fibromyalgia, Hand and Upper Limb Injury, Long Term/Chronic/Life Limiting Conditions, ME, Mental Capacity Act, Mental Health, MS, Occupational Therapist, Occupational Therapy & Reablement, Orthopaedics, Pain Management, Parkinson's Disease, Post Covid-19 Syndrome, Quantum Reports, Rehabilitation, Rheumatology, Risk Management, Safeguarding Adults, Sensory Impairment, Stroke, Visual Impairment

https://amgconsultancyservices.com/julia-hudson

# PAEDIATRIC NURSE



### **Elizabeth Nicholls**

#### PAEDIATRIC NURSE

SPECIALISMS: Amputations, Basic Life Support, Burns Management, Chronic Pain Management, Enteral feeding, General Paediatric Nursing, Incident reporting and management, Infection Prevention & Control, Major Trauma, Medicines management, Nasogastric Feeding, Non-medical prescribing, Orthopaedics, Paediatric Nurse, Paediatrics, Pain Management, Post-operative nursing care, Pre-operative nursing care, Pressure Ulcers, Safeguarding children, Sepsis, Surgical Nursing, Tissue Viability, Tracheotomy, Venepuncture/cannulation, wound care (excl pressure ulcers), Wound closure and suturing

https://amgconsultancyservices.com/elizabeth-nicholls



### Miranda Hodgkin

PAEDIATRIC NURSE, REGISTERED GENERAL NURSE & ONCOLOGY SPECIALISMS: Aesthetics/Cosmetic Surgery, Cancer Care, General Adult Nursing, Medicines management, Nonmedical prescribing, Oncology, Paediatric Nursing

https://amgconsultancyservices.com/miranda-hodgkin



## Tracy Da Silva

#### PAEDIATRIC NURSE

SPECIALISMS: Bladder Management, Bowel Management, Brain Injury, Complex Health Care, Continuing Health Care, Enteral Feeding, General Paediatric Nursing, Medicines Management, Nasogastric Feeding, Outpatient Department Care, Paediatric Nurse, Paediatrics, Spinal Injury, Stoma Care, Tracheotomy

https://amgconsultancyservices.com/tracy-da-silva



# PARAMEDIC



### **Andrew Swain**

#### PARAMEDIC

SPECIALISMS: Accident and Emergency Care, Advance Life Support/Automated External Defibrilation (Paediatrics), Anaphylaxis, Asthma/COPD, Basic Life Support, Bladder Management, Bowel Management, Brain Injury, Burns Management, Cancer Care, Cardiology, Cauda Equina, Chronic Pain Management, Complex Health Care, Continuing Health Care, Delivery Emergency, Dementia, Dementia/Elderly Care, Diabetes, Elderly Care, Emergency Wound Care, End of Life Care, ENT, Falls, Gynaecology, Incontinence (Faecal), Incontinence (Urinary), Infection Prevention & Control, Leg Ulcers, Long Term/Chronic/Life Limiting Conditions, Major Trauma, Manual Handling, Medicines Management, Mental Capacity Act, Mental Health, Palliative Care/End of Life, Paramedic, Parkinson's Disease, Pressure Ulcers, Renal Care (Acute), Safeguarding Adults, Safeguarding Children, Sepsis, Spinal Injury, Stroke, Venepuncture/Cannulation, Wound Care

https://amgconsultancyservices.com/andrew-swain



### **Michael Southworth**

#### PARAMEDIC - ADVANCED NURSE PRACTITIONER (NON PRIMARY CARE), EMERGENCY CARE

SPECIALISMS: Accident and Emergency Care, Advanced Life Support/Automated External Defibrillation, Advanced Nurse Practitioner Non Primary Care, Anaphylaxis, Basic Life Support, Emergency Care, Major Trauma, Neonatal Resuscitation, Obstetric Emergencies, Pain Management, Paramedic, Polytrauma

https://amgconsultancyservices.com/michael-southworth



### Paul Atkinson

#### PARAMEDIC - ADVANCED PARAMEDIC PRACTITIONER

SPECIALISMS: Accident & Emergency Care, Advanced Life Support/Automated External Defibrillator, Anaphylaxis, Asthma/COPD, Basic Life Support, Burns Management, Cardiology, Cauda Equina Syndrome, Dementia, Diabetes monitoring & management, End of Life Care, Falls, Infection Prevention and Control, Long Term/Chronic/Life Limiting Conditions, Major Trauma, Manual Handling, Manual Triage (Hospitals & NHS 111), Medicines Management, Mental Capacity Act, Paramedic, Parkinson's Disease, Polytrauma, Safeguarding Adults, Safeguarding Children, Sepsis, Spinal Injury, Stroke, Venepuncture/Cannulation

https://amgconsultancyservices.com/paul-atkinson

## PHYSIOTHERAPIST



#### Akiva Lieberman

#### ADVANCED PHYSIOTHERAPY PRACTITIONER

SPECIALISMS: Amputation(s), Acquired Brain Injury, Bone Fractures, Brain Injury, Cauda Equina Syndrome, Chest Wall Injury, Chronic Pain Management, Complex Regional Pain Syndrome (CRPS), Community Rehabilitation -Physiotherapy/Occupational Therapy, Elective Surgery, Falls, Fibromyalgia, Fractures - Management of, Hand and Upper Limb Injury, Joint Dislocation, Major Trauma, Manual Handling, MS - Multiple Sclerosis, Multi-Limb Loss/Amputation, Musculoskeletal Assessment & Management, Neurodegenerative Disorders, Non-Medical Prescribing, Orthopaedic, Pain Management, Parkinson's Disease, Physiotherapist, Polytrauma, Rehabilitation, Rheumatology, Spinal Injury

https://amgconsultancyservices.com/akiva-lieberman



## Rachael Ordell

#### <u>PHYSIOTHERAPIST</u>

SPECIALISMS: Cauda Equina, Chronic Pain Management, Elderly Care, Long Term/Chronic/Life Limiting Conditions, Minor Injuries / Walk in Centres, Occupational Health, Orthopaedics, Pain Management, Physiotherapist, Quantum Reports, Spinal Injury

https://amgconsultancyservices.com/rachael-ordell



# PHYSIOTHERAPIST



### **Catherine Noble**

#### NEUROLOGICAL PHYSIOTHERAPIST

SPECIALISMS: Amputations, Acquired Brain Injury, Bone Fractures, Brain Injury, Care Expert, Care of the Older Person, Community Rehabilitation - Physiotherapy/Occupational Therapy, Elderly Care, Falls, Fractures -Management of, MS- Multiple Sclerosis, Neurodegenerative Disorders, Neurosurgical, Orthopaedic, Parkinson's Disease, Physiotherapist, Pressure Ulcers, Rehabilitation, Stroke, Traumatic Brain Injury, Wheelchairs, 24 hour Postural Management

https://amgconsultancyservices.com/catherine-noble

## **PRISON NURSE**



### Jacqueline Muchirahondo

#### PRISON NURSE and CRITICAL CARE NURSE

SPECIALISMS: Acute Medical Nursing, Antenatal Care, Asthma/COPD, Basic Life Support, Burns Management, Care Home Nursing, Care of the Older Person, Critical Care/ICU/High Dependency, Diabetes monitoring & management, District & Community Nursing, Elderly Care, General Adult Nursing, Hypertension, Incident Reporting and Management, Infection Prevention & Control, Leg Ulcers (venous), Manual Handling, Manual Triage (Hospitals & NHS 111), Medicines Management, Nasogastric Feeding, Needlestick Injuries, Non-Medical Prescribing, Nursing Home Nursing, Nurse Prescribing - Non-medical, Nutrition and Hydration, Pain Management, Parenteral Feeding, Pressure Ulcers, Prison & Custody Health, Safeguarding Adults, Sepsis, Stoma Care, Stroke, Substance Abuse/Misuse, Surgical Nursing Post-operativem, Tracheotomy, Vaccinations, Venepuncture/Cannulation, Wound Care (Not Pressure Ulcers)

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# SONOGRAPHER



#### Alison Hall

<u>RADIOGRAPHER/SONOGRAPHER - Musculoskeletal</u> SPECIALISMS: Deep Vein Thrombosis (DVT), Musculoskeletal Ultrasound, Sonographer, Ultrasound guided injections

https://amgconsultancyservices.com/alison-hall



### Donna Holdcroft

RADIOGRAPHER/SONOGRAPHER SPECIALISMS: Abdominal Sonography, Sonographer, Antenatal Care, Deep Vein Thrombosis, Diagnostic Ultrasound, Early Pregnancy Sonographer, Gynaecology, Obstetric Sonographer, Upper Abdominal Sonographer

https://amgconsultancyservices.com/donna-holdcroft



### Helen Payne

<u>RADIOGRAPHER/SONOGRAPHER</u> SPECIALISMS: Gynaecology, Obstetric Sonographer, Radiology (Interpreting),Sonographer

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# SONOGRAPHER



### **Shirley Andrews**

OBSTETRICS SONOGRAHER SPECIALISMS: Obstetric Sonographer, Ultrasound

https://amgconsultancyservices.com/shirley-andrews

# SPEECH AND LANGUAGE THERAPIST



### Mary Tondo

#### SPEECH AND LANGUAGE THERAPIST

SPECIALISMS: Cerebral Palsy, Complex Health Care, Continuing Health Care, Dementia, Deprivation of Liberty (DOLS), End of Life Care, ENT, Enteral feeding, Incident reporting and management, Mental Capacity Act, Mental Health, Nasogastric Feeding, Palliative Care/End of Life, Parkinson's Disease, Rehabilitation, Risk Management, Safeguarding adults, Safeguarding children, Speech & Language Therapist, Speech Impairment, Swallowing Disorders, Tracheotomy

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### Lindsay Walker

### SPEECH AND LANGUAGE THERAPIST - ADULT & PAEDIATRIC

SPECIALISMS: Assistive Technology and Augmentative and Alternative Communication assessment, devices and intervention, Autism, Birth Injury/Development Injury, Cerebral Palsy, Complex Health Care, Continuing Health Care, Deprivation of Liberty (DOLS), Incident Reporting and Management, Learning Disabilities, Mental Capacity Act, Mental Health, Risk Management, Safeguarding Adults, Safeguarding Children, Speech Impairment, Supporting needs of children and adults with 'Behaviours of Concern' Swallowing Disorders (Dysphagia), Trauma informed clinical practices

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# TISSUE VIABILITY NURSE



### Ann Bradshaw

### TISSUE VIABILITY NURSE & REGISTERED GENERAL NURSE

SPECIALISMS: Amputations, Asthma / COPD, Bladder Management, Bowel Management, Cancer Care, Cauda Equina, Chronic Pain Management, Dementia, District and Community Nursing, Elderly Care, End of Life Care, Falls, General Adult Nursing, Incontinence (faecal), Incontinence (urinary), Infection Prevention & Control, Leg Ulcers, Long Term/Chronic/Life Limiting Conditions, Medicines Management, Non-medical Prescribing, Nursing and Care Homes, Oncology, Pain Management, Palliative Care/End of Life, Parkinson's Disease, Pressure Ulcers, Registered General Nurse, Renal Care, Respiratory Disease, Sepsis, Stoma Care, Stroke, Tissue Viability, Tissue Viability Nurse, Venepuncture/Cannulation, Wound Care

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### Linda 'Jane' Oakey

#### CLINICAL NURSE SPECIALIST - TISSUE VIABILITY

SPECIALISMS: Accident & Emergency, Acute medical Nursing, District & Community Nursing, Elderly Care, Extravasation Injuries, General Adult Nursing, Leg Ulcers (venous),Pressure Ulcers, Tissue Viability, Tissue Viability Nurse, Wound Care (not pressure ulcers), 24 Hour Postural Management

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# **TISSUE VIABILITY NURSE**



### Maureen Benbow

#### TISSUE VIABILITY NURSE

SPECIALISMS: Accident & Emergency Care, Amputation(s), Bone Fractures, Care Home Nursing, Care of the Older Person, Cauda Equina Syndrome, District & Community Nursing, Elderly Care, Emergency Wound Care, End of Life Care, Equipment Supply, Extravasation Injuries, Falls, Fractures - Management of, General Adult Nursing, Hospice Nursing, Incident Reporting and Management, Intermediate Care, Leg Ulcers (venous), Long Term/Chronic/Life Limiting Conditions, Nursing Home Nursing, Orthopaedics, Palliative Care/End of Life, Practice Nursing, Pressure Ulcers, Risk Management, Safeguarding Adults, Sepsis, Skin Grafts, Spinal Injury, Tissue Viability, Tissue Viability Nurse, Wound Care, Wound Closure and Suturing

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### Victoria Vilchez

#### **TISSUE VIABILITY NURSE & GENERAL PRACTICE NURSE**

SPECIALISMS: Asthma/COPD, Burns Management, Dermatology, General Adult Nursing, GP Practice Nurse, Health Care Education, Immunisation Programmes, Leg Ulcers (venous), Non-Medical Prescribing, Tissue Viability, Tissue Viability Nurse, Venepuncture/Cannulation, Wound Care (not pressure ulcers)Wound Closure and Suturing

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