**IN THE WORCESTERSHIRE CORONER’S COURT**

**INQUEST TOUCHING UPON**

**THE DEATH OF ……………………..**

First / Second /Third Statement

Date:

**WITNESS STATEMENT OF**

xxxxx (*Name*)

1. I agree that this statement may be used in inquest proceedings. It may be provided to those persons recognised by the Coroner as having a proper interest in the death of and may be read out (whether in whole or in part) in Court.

**Introduction**

1. I am …………………..(*insert full name*) and I have been asked to prepare a statement to assist the Coroner regarding my ……(*state family connection*) …(*insert name of deceased*) / or regarding my involvement with ………..….(*insert name of deceased*).
2. *Give relevant personal details – if a professional provide brief details of your job title and employer, any professional qualifications and relevant experience.*
3. *If relevant, set out the extent of your recollection of the deceased and the relevant events. If there is a reason your recollection is good or poor provide a brief explanation*

**Sources of information**

1. *Set out any documents (such as the medical records and other documentation) that you have considered prior to preparing your statement.*

**My account**

1. *Give an account of relevant matters*
* *Set out in chronological order the details of your involvement with the deceased*
* *Explain any relevant background:*
* *Set out the facts, what you saw or did or said, or saw others do or say.*
* *Avoid providing any opinion and comment*

*If you are a medical professional involved in the care of the deceased, please include details of any assessment and/or treatment you and/or your team provided, including;*

* *The place*
* *The date*
* *The relevant history at the point of assessment/treatment*
* *Condition on assessment*
* *Outcome of investigations*
* *The diagnosis (and the basis for it)*
* *Treatment given*
* *Any complications that arose*
* *Progress and response to treatment.*
* *Your opinion on the likely medical cause of death, if you are able to give one.*

**Statement of Truth**

1. I believe that the facts stated in this witness statement are true.
2. I understand that proceedings for contempt of court may be brought against anyone who makes, or causes to be made, a false statement in a document verified by a statement of truth without an honest belief in its truth.

Signed: ……………………………………………………… Date: …………………

NAME: ……………………………..