

Sharon Shore
3 Richview Court
Thornhill, Ont. L3T 7S9
Tel (w): (905) 764-8388, x18
Tel (h): (905) 764-6202
Fax: (905) 764-8640
e-mail: sshore@idirect.com

January 19, 2001

Dr. James G. Young
Chief Coroner for Ontario
26 Grenville St., 2nd floor
Toronto, Ont.
M7A 2G9

Re: Upcoming Sanchia Bulgin inquest

Dear Dr. Young,

I would like to advise you that pursuant to Section 41 of the Coroners Act, R.S.O. 1990 Chapter C.37, I will be seeking standing at the Sanchia Bulgin inquest.

I submit that I have a substantial and direct interest in this inquest. I submit that the public interest would be served by my participation. Given my personal experience, I am confident I can offer a distinct and unique perspective to the inquest process; one that will contribute and add value to it.

The attached enclosure explains my interest and reasons for requesting standing.

I know that standing is officially granted at the commencement of the inquest. As a courtesy to you and in deference to the inquest process, I am sending you this letter now. I have advised Mrs. Clarke-Bulgin and her lawyer Frank Gomberg of my request for standing. They have both told me that they will support my application.

In order for me to make the appropriate future plans, would you please advise me as soon as possible whether you intend to grant me standing.

Yours very truly,



Sharon Shore

cc:	Stephanie Clarke-Bulgin	Mother of Sanchia Bulgin
	Frank Gomberg	Lawyer for Stephanie Clarke-Bulgin
	Dr. James Cairns	Investigating Coroner
	Al O'Marra	Counsel to the Coroner

REQUEST FOR STANDING AT THE SANCHIA BULGIN INQUEST

1) Sanchia's death has many similarities to Lisa's death.

Sanchia's death occurred on September 14, 2000, on the same ward of the Hospital for Sick Children as my daughter Lisa's. Sanchia's death occurred a mere seven months after the conclusion of the Coroner's inquest investigating Lisa's death. Dr. James G. Young, Chief Coroner for Ontario, has been quoted (Toronto Star, Dec. 9, 2000) as stating that Sanchia's inquest was called because the circumstances surrounding her death closely resembled those of Lisa's.

I believe I am rightfully entitled to learn the circumstances of Sanchia Bulgin's death to determine the full extent of any similarities to Lisa's. In order to obtain this information in a comprehensive and satisfactory manner, a representative of Lisa Shore's family should have the right to question witnesses, present arguments, and address the Bulgin jury.

It is in the interest of the Shore family to fully understand what similarities exist between the deaths of the two girls, and the reasons for recurrent, uncorrected problems on Ward 5A/B of the Hospital for Sick Children. The Shore family proposed recommendations to the jury at the Lisa Shore inquest in the hope that implementation of these recommendations would ensure that no other child would die unnecessarily. It appears that we were unsuccessful in our attempts, given the indications that Sanchia's death was preventable. Accordingly, it is submitted that the Shore family deserves the right to address the jury at Sanchia's inquest and propose recommendations to it in the family's ongoing attempts to prevent unnecessary deaths at the Hospital for Sick Children.

2) Some of the jury recommendations from the Lisa Shore inquest may have a bearing on the circumstances and issues surrounding Sanchia's death.

The Bulgin inquest will need to consider which of the Shore recommendations were implemented by the Hospital for Sick Children and to what extent. The inquest will further need to consider which recommendations from the Shore inquest were not implemented, why they were not implemented, and to what extent the failure to implement them contributed to Sanchia's death.

While the Coroner's counsel will undoubtedly address these issues, it should be noted that many of the jury recommendations at the Lisa Shore inquest were proposed by the Shore family and wholly adopted by the jury. I have personally been immersed in the details of Lisa's death over the past two years and as a by-product have acquired substantial hospital and medical knowledge. This knowledge will enable me to propose useful recommendations at the Bulgin inquest over and above those that may be proposed by Coroner's counsel or other parties with standing. The jury should have an opportunity to consider my proposals, which will contribute to the inquest's main objective: to ensure that no similar deaths occur in the future.

3) Suggestions made at the Shore inquest were rejected by the Hospital for Sick Children and may need to be revisited at the Bulgin inquest.

Several suggestions proposed by the Shore family at Lisa's inquest were never presented to the jury as a result of the Hospital for Sick Children's adamant opposition. The hospital claimed that the suggestions a) had already been implemented and thus were unnecessary, or b) would be too difficult or costly to implement and were therefore unrealistic. We acquiesced to these requests, and the suggestions were not put forward. As these discussions took place "behind the scenes", there are no transcripts or notes of these proposals available for Coroner's counsel.

Accordingly, in order to ascertain whether the proposals rejected by the Hospital for Sick Children at the Shore inquest should be presented to the Bulgin inquest jury, it is in my private interest and in the public interest that I be given standing. In light of the apparent similarities between Lisa's and Sanchia's deaths, it is possible that the Bulgin inquest jury may wish to consider these proposals regardless of the Hospital for Sick Children's continuing opposition.

4) At the Lisa Shore inquest, the Hospital for Sick Children was not forthcoming in disclosing information, and was adversarial. The Shore family contributed greatly to the investigative process and the uncovering of information that the hospital did not voluntarily disclose.

During the recent Shore inquest, the presiding Coroner, Deputy Chief Coroner Dr. Jim Cairns, called the inquest "very unusual" compared to others, and likened it to an investigation rather than an inquest. Evidence was disclosed at the inquest for the first time that should have been disclosed earlier both to the Coroner's office and other counsel; a spurious theory about malfunctioning machinery was presented for the first time at the inquest without prior warning or the opportunity for the Coroner's office to obtain expert testimony to investigate it; new information kept coming out throughout the inquest, requiring critical witnesses to be recalled for re-examination; some witnesses presented by the hospital were not very knowledgeable about their supposed areas of expertise; one witness, a hospital employee, gave expert nursing opinions which were contradictory to established nursing standards of practice; this employee/expert was discovered by the inquest jury to be coaching the key witness during the latter's testimony, by way of body language and hand signals; and the existence of crucial hospital documents and audiotapes was discovered by me and my lawyer "on the fly" when cross-examining hospital employees.

The Hospital for Sick Children may or may not act in such an adversarial manner at the Bulgin inquest. Should the Hospital for Sick Children act in such a manner, however, I believe I am well qualified to assist the Coroner's office in the investigative process. Much of the information that was elicited from the hospital during Lisa's inquest resulted directly from questions posed by my counsel, based on my family's persistent efforts and

the assistance of a forensic nurse. Without that nurse's expert assistance, many of the facts revealed over the course of the inquest would not have been discovered. The Coroner's office did not use a forensic nurse in its investigation of Lisa's death; without us, the evidence would have been deficient and the jury would not have learned all of the facts.

I believe that my by now extensive knowledge of the systems and processes of the Hospital for Sick Children, coupled with the assistance of the experts whom I can call upon for advice and assistance, will enable me to be a valuable participant in the inquest. Giving me standing, with the right to examine witnesses, will contribute and add value to the Bulgin inquest.

5) Lisa's death should not be in vain.

The Shore jury found that the means of death was homicide. Without any finding of fault, it is nonetheless evident that actions or omissions of hospital employees caused or contributed to Lisa's death. The intention of the inquest and the jury's recommendations were to prevent any similar deaths from occurring in the future, to ensure, as Dr. Cairns said in his closing address to the inquest jury, that "Lisa's death does not have to go in vain". Yet only months after the inquest's conclusion, the Coroner's office is investigating another child's death on the same ward of the same hospital, under circumstances that are remarkably similar.

I worked very hard - with the help of the Coroner's office and many other people - to obtain the truth about the circumstances of Lisa's death and to ensure that her death was not in vain. I do not want any more children to die unnecessarily at the Hospital for Sick Children, and I believe I am in a unique position to help the Coroner's office and the inquest jury to achieve this goal.

6) The public interest will be served by giving me standing, as I will represent, in addition to my own private interests, parents whose children are or will become patients at the Hospital for Sick Children.

The Coroner's counsel at the Bulgin inquest will assist the Coroner in determining the circumstances of Sanchia's death. The other parties who will have standing include Mrs. Clarke-Bulgin, the Hospital for Sick Children, the nurses, and the doctors, none of whom represent the interests of parents of pediatric patients. As the parent of a child who died unnecessarily at the Hospital for Sick Children, my intention is to do my best to ensure that no other unnecessary deaths occur there. I wish to contribute to the process of improving the standards at the Hospital for Sick Children, so that parents can eventually become confident that their children will receive a high standard of care.