

Orientation Analytical Overview

1. Purpose and Scope

This orientation document provides counsel with a single, coherent overview of the suite and its evidentiary evolution. It is not an advocacy statement but a contextual digest explaining the architecture, method, and ongoing institutional dynamics, particularly the continuing reliance by the Professional Standards Department (PSD) on falsified records. The suite functions as an evidentiary engine designed to map causation between record tampering, procedural fraud, and resulting harm.

2. Methodology and Compilation Architecture

The compilation was built using forensic design principles. Every event within the chronology links to its primary source; every claim is traceable to a probative document. The HTML environment provides year-indexed navigation, a claims-to-evidence matrix, and embedded source references. The design permits verification offline and reflects a deliberate engineering approach to legal narrative construction. Its purpose is to allow counsel to engage with a verified evidentiary structure rather than rely on anecdotal narrative. Each event has been cross-validated through police, NHS, and thirdparty disclosures where available.

3. Chronological Overview of Key Failures

Civil Fraud Origin (Sharples)

The civil fraud originates in ASB Officer Sharples' conduct during 2017–2020. A false statutory declaration (N16A, 14 October 2020) and defective service (N205c, served 2 November 2020) rendered the injunction void ab initio. Misrepresentation of injuries and the fabrication of a hearing dated 16 September 2020 constituted fraud on the court. The checkbox exclusion of the Human Rights Act 1998 denied legal aid and initiated a cascade of arrests and imprisonment.

Foundational Record Tampering (EEAS)

The falsified Suffolk Constabulary Log Entry of 17 July 2018 omitted an assault and paramedic attendance, replacing it with a false "criminal damage" report. This falsification entered NHS and GP data and was later recycled by Dr J. Singh (16 November 2022) as authoritative clinical opinion. It is the earliest identifiable act of evidential contamination and the seed from which the later fraud grew.

Evidentiary Breaches and Procedural Misfeasance

Documentary review shows coordinated acts of deception and neglect across agencies: - Fraudulent declarations and false representation in Claim GO1NR161. - Misfeasance through malicious communications and police collusion. - Late service of injunction papers denying effective response. - Human Rights Act breaches (Articles 5–8) including unlawful detention and data misuse. - Repeated data sharing breaches and reputational defamation. - Professional abdication by legal representatives upon challenge to flawed evidence.

Systemic Rupture (Singh / Satchell Moran)

EEAS disclosure (1 July 2025) alongside re-evaluation of Hospital (Professionals Meeting) and GP (Mental Health self referral) records revealed the buried psychiatric report by Dr J. Singh (16 November 2022) and Satchell Moran's withdrawal (2 June 2023). Together they show how corrupted medical data became "expert" evidence, collapsing representation and violating Article 6 rights. This defines the systemic rupture: corrupted data legitimised within legal process, then re-imported as authority.

Cross-Domain Contamination (Professionals' Meeting 22 April 2021)

Minutes of the Professionals' Meeting held on 22 April 2021 confirm that ASB Officer Pete Sharples directly briefed NHS clinicians, presenting the same falsified narrative that underpinned the civil proceedings. Clinicians adopted that account as factual, creating psychiatric and risk entries that later informed Dr J. Singh's 2022 expert report and subsequent legal submissions. This meeting therefore marks the evidentiary crossover point at which the original civil falsification entered the healthcare domain, was institutionalised within clinical records, and reemerged as "expert" authority in later proceedings.

4. PSD Reliance on Falsified Record (2025)

Recent correspondence with PSD Ref: MI/743/25 (September–October 2025) confirms that the department continues to rely on the falsified 2018 "bell curve" record—a timeline distortion originating from ASB Officer Sharples' influence on Suffolk Constabulary logs. Despite the independent EEAS disclosure of 1 July 2025 confirming ambulance attendance at an assault on 17 July 2018, PSD have reiterated the later "criminal damage" version, ignoring contradictory external evidence.

This persistence demonstrates the live continuity of the fraud. The PSD's adherence to falsified records perpetuates institutional blindness: they assess complaints by reference to corrupted internal data rather than verified external disclosures. The result is a feedback loop where the poisoned record continues to shape current determinations, proving that the contamination first identified in 2018 remains active within present-day processes.

For counsel, this establishes both the ongoing relevance of this compilation and the necessity of addressing the fraud continuum as a living, not historical, problem. It also validates the strategy to pursue the **Application to Set Aside the Injunction and Committal on grounds of fraud upon the court under the Perjury Act 1911.**

5. Systemic Pattern Recognition

Across the full chronology the pattern is clear:

2018 falsification → 2020 procedural fraud → 2022–23 professional collapse → 2025 institutional recursion.

The same contaminated record set underpins actions by Suffolk Constabulary, NHS Norfolk and Suffolk Foundation Trust, and successive legal representatives. Each iteration strengthens the false narrative while marginalising the verified one. The persistence of this distortion within PSD review confirms that the "fraud continuum" remains the correct analytical framework.

6. Evidentiary Integrity and Counsel Orientation

The evidentiary corpus is complete and traceable. Every file has an index path within the HTML bundle, cross-linked to its chronological anchor. Independent datasets (EEAS, hospital correspondence, email audits, and custody records) validate each chain of inference.

Counsel should approach the suite as a structural map, not a pleading. Its analytical power lies in traceability: every assertion can be cross-checked to a probative source. The NHS/PSD continued reliance on falsified data underscores the bundle's evidentiary importance and supports the application to set aside the tainted orders. In light of more recent discovery the support bundle continues to function as a 'Live Record' and has been revised to reflect those discoveries.

7. Conclusion

The fraud identified in 2018 remains operational within current institutional processes. The counsel's task is therefore twofold: to recognise the evidentiary coherence of this suite and to act to purge the continuing taint from live proceedings.

The sequence is unbroken and demonstrable: falsified log (2018) → fraudulent injunction (2020) → unlawful committal (2022) → professional withdrawal (2023) → PSD recursion (2025). The record set proves both the mechanism and continuity of the fraud, providing the factual and procedural foundation for all remedial actions now pending.