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| **Neutral Citation No: [2026] NICoroner 12**<br><br>*Judgment: approved by the court for handing down (subject to editorial corrections)** | *Ref:* **ROO13067**<br><br>*ICOS No:*<br><br>*Delivered:* **05/06/2026** |

**IN THE CORONER'S COURT IN NORTHERN IRELAND**

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**IN THE MATTER OF AN INQUEST TOUCHING UPON THE DEATH OF NOAH DONOHOE**

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**APPLICATION BY PSNI AND DARYL PAUL FOR DISCLOSURE OF MEDICAL INFORMATION RELATING TO THE NEXT OF KIN AS CONTAINED IN AN NOTE OF A MEETING WITH THE NOK AND A JOINT EXPERTS' NOTE**

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**ROONEY J (*Sitting as Presiding Coroner*)**

***Introduction***

[1] On the instructions of the previous coroner, expert reports were obtained from Dr Louise Bowers, Consultant Forensic Psychologist, dated 28 October 2021 and Dr Seena Fazel, Consultant Psychiatrist, dated 1 November 2001. At the request of the next of kin ("NOK") a report was obtained from Dr Richard Church, Consultant Psychiatrist, dated 26 September 2025. At my direction, a report was also obtained from Dr Girish Vaidya, Consultant Psychiatrist, on 24 December 2025.

[2] Following a meeting of the experts, a detailed joint note dated 25 February 2026, was produced highlighting areas of agreement and divergence.

[3] Para [17] of the said joint note states as follows:

> "17. Do the experts consider that Noah was suffering from an acute mental illness such as psychosis? If so, what were the signs of that illness and how would they have impacted on his behaviour and/or mental state prior to his disappearance.
>
> Areas of agreement: No, he was not suffering from an acute mental illness."

[4] At para [16] of the joint note, the psychiatrists agreed that there was no clear evidence that Noah was displaying signs of an early prodromal phase of a psychotic mental illness.

[5] Para [18] of the joint note states as follows:

> "18. Do the experts consider that Noah was showing signs of psychological disturbance? If yes, what were those signs?
>
> Do the experts consider that any such signs would have impacted or could explain Noah's behaviour and/or mental state prior to his disappearance."

[6] Dr Church answered this question by stating that "Noah certainly displayed some unusual behaviours, but the cause of these is not clear, and they are not necessarily indicative of psychological disturbance." Dr Bowers' response was "… whilst some form of psychological disturbance is a possibility, based on current evidence, it is not possible to say with certainty that this was the cause of the behaviour." Dr Vaidya stated that although Noah displayed unusual behaviours, there was "insufficient evidence of a psychological disturbance." Dr Fazel stated that "Noah's behaviour can suggest psychological disturbance of unknown cause."

[7] At para [5] of the joint note, the following question was raised:

> "5. Do the experts agree that when making an assessment of a child's psychological/psychiatric state, it is standard/good practice to enquire whether that person has a family history of mental ill health? If so, to what extent has this been taken into account in this case?
>
> Areas of agreement: All experts agree that when making an assessment of a child's psychological/psychiatric state, it is standard/good practice to enquire whether that person has a family history of mental ill health. Dr Vaidya was able to speak to Noah's mother. Dr Church attempted to do so but was not able to. Dr Bowers and Dr Fazel considered that the trauma was too recent when they were undertaking their assessments and, hence, chose not to. They note that [the next of kin's] statement is fairly detailed and informative."

[8] Focus was then placed on the content of Dr Vaidya's note of his conversation with the NOK on 19 December 2025. Three "versions" of the note have been produced. For the purpose of this ruling, I do not intend to interrogate the content

of each note. However, the notes do indicate that the NOK provided details of her family history, to include familial mental illness.

[9] Significantly, after consideration of Dr Vaidya's notes of his consultation with the NOK, it was observed that Dr Vaidya had not specifically asked the NOK about her own mental health history.

[10] Hearings to consider the psychiatric/psychological evidence on 13 March 2026 and 28 April 2026 were adjourned, prompted by applications by Mr Lunny KC, senior counsel for the PSNI and Mr Skelt KC, senior counsel for Daryl Paul ("DP") to obtain more details of the familial mental health history and the NOK's personal history of mental ill health, for further consideration by the experts.

[11] On 28 April 2026, the NOK's medical notes and records were voluntarily obtained and disclosed to me. I determined that some of the medical records were potentially relevant and should be disclosed to the experts. Other records I assessed were not potentially relevant. Lawyers for the NOK, presumably to ensure complete transparency, suggested that all the NOK's medical notes and records would be forwarded to the experts.

[12] Following disclosure of said medical records, the NOK participated in an online consultation with Dr Church and Dr Bowers. The purpose of this interview was to explore Noah's family history of mental health difficulties and, in particular, the NOK's mental health history. A typed note of the interview is dated 4 May 2026. Details from the NOK's medical records were extensively incorporated into the note of the interview, to include details of medical issues which were plainly not relevant to the assessment of the NOK's mental health history. At my direction, and for the reasons considered below, the note of this interview has not been forwarded to the PIPs.

[13] The experts met again on 5 May 2026. Prior to the meeting, the experts indicated they had reviewed the NOK's GP notes and records and also the note of the meeting dated 4 May 2026 between the NOK and Dr Bowers and Dr Church. Following the meeting, the experts produced a joint note dated 5 May 2026. Paras [2] and [3] of the joint note stated as follows:

> "2. … the purpose of the joint experts' meeting was to consider whether any previously expressed opinions required revision in light of this additional information.
>
> 3. It was agreed that there were two primary areas for discussion. First, whether the new information altered our views regarding Noah's mental/psychological state at the time he went missing. Second, whether this information affected our assessment of Fiona and her parenting of Noah."

[14] At this juncture, I make the observation that the experts had only been requested to consider whether the history of familial and maternal mental ill health was relevant to an assessment of Noah's psychological/psychiatric state at the time he went missing. No application had been made by any of the PIPs for a further assessment of Noah's family life and parental relationship in light of the disclosed maternal medical records.

[15] Notwithstanding the above, I am cognisant of para [1] of the agreed experts' note dated 25 February 2026 which states as follows:

> "1. Do the experts agree that when making an assessment of a child's psychological/psychiatric state, it is standard/good practice to enquire into that child's family life and parental relationship(s)? If so, to what extent are Noah's family life and parental relationship relevant to your assessment in this case?
>
> Areas of agreement: All experts agree that when making an assessment of a child's psychological/psychiatric state, it is standard/good practice to enquire into that child's family life and parental relationship(s). Noah's family life and relationship with his mother are therefore relevant to our assessment in this case."

[16] Returning to the note of the experts' meeting dated 5 May 2026, it is significant that, having considered and assessed the further information provided in the NOK's medical notes and records and the note of the consultation with Dr Church and Dr Bowers, the experts concluded that their overall opinions remain unchanged.

[17] To summarise, the experts have previously concluded that, prior to Noah's disappearance, he was not suffering from an acute mental illness, such as a psychosis. The "new information" contained in the NOK's GP notes and records and the said joint note of the consultation with the NOK, did not change their opinions. Similarly, regarding the NOK's parenting of Noah, their opinions remain unchanged and the new information did not provide an explanation as to what happened to Noah.

[18] Ms Campbell KC, senior counsel on behalf of the NOK, for reasons considered below, submits that the NOK's medical notes and records and a note of her consultation with Dr Church and Dr Bowers should not be disclosed to the other PIPs. Furthermore, only a redacted version of the joint experts' meeting dated 5 May 2026 should be disclosed. Detailed written submissions on behalf of the NOK dated 5 May 2026 and 23 May 2026 were provided to me in advance of the oral hearing on 2 June 2026.

[19] Mr Lunny, senior counsel for the PSNI and Mr Skelt, senior counsel for DP, in comprehensive submissions dated 18 May 2026 and 20 May 2026 argue that both the said note dated 4 May 2026 and an unredacted copy of the joint expert's note dated 5 May 2026 must be disclosed. Both counsel emphasise that the PIPs are not seeking access to the NOK's medical notes and records.

[20] I remain most grateful to counsel for their detailed and thought-provoking written submissions and succinct oral submissions. The oral submissions were heard on the 2 June 2026. Due to the fact that the experts are scheduled to give evidence on 9 June, I indicated that I would provide an urgent ruling.

***The Coroner's disclosure powers and an analysis of the competing submissions***

[21] The coroner's power to require evidence to be given or produced, to include the power to compel disclosure, is found in section 17A of the Coroners Act (Northern Ireland) 1959:

> "(1) A coroner who proceeds to hold an inquest may by notice, require a person to attend at a time and place sated in the notice and—
>
> (a) to give evidence at the inquest,
>
> (b) to produce any documents in the custody or under the control of the person which relate to a matter that is relevant to the inquest, or
>
> (c) to produce for inspection, examination or testing any other thing in the custody or under the control of the person which relates to a matter that is relevant to the inquest."

[22] In most inquests there is an expectation that relevant records, to include medical records, will be provided to the coroner. This will include a deceased's personal medical records. In this inquest, all Noah's medical notes and records were disclosed as potentially relevant and provided to the PIPs and the experts.

[23] The application in this case is exceptional in that a request has been made that the NOK herself disclose potentially relevant personal and sensitive medical notes and records to the coroner.

[24] A coroner is obliged to provide copies of documents held by the coroner to interested persons where those documents are relevant to the inquest, subject to any redactions deemed necessary by the coroner in the exercise of their judicial

discretion. Thus, generally speaking, if medical records are disclosed to the coroner, they are likely to be disclosed to all of the interested persons.

[25] Unlike the powers of the High Court contained in Order 24 of the Rules of the Court of Judicature (NI) 1980, a coroner has no power to order that a party give disclosure of documents directly to another interested person. Control over documentary evidence, to include medical records, and decisions about their relevance are within the coroner's discretion, although such discretion must be exercised reasonably and fairly. As stated in the Chief Coroners' Bench Guidance, chapter 12 (January 2025) at para [18], where a coroner decides to withhold a potentially relevant document from other interested parties, the coroner should generally hear submissions on the matter in open court insofar as practicable.

***Submissions of PSNI and Daryl Paul***

[26] The PSNI and DP submit that the information contained in the said interview note produced by Dr Church and Dr Bowers (4 May 2026) constituted material which the experts considered potentially relevant to their assessment of Noah's mental/psychological state at the time he went missing. It is also clear that the experts considered the information potentially relevant to the NOK's parenting of Noah. It is submitted that the fact that the experts' assessment of the information did not change their conclusions does not mean that it is irrelevant and should not be disclosed. Rather, the information was assessed to be potentially relevant by the experts, and consequently it remains relevant whatever their conclusions.

[27] As further submitted by the PSNI and DP, one aspect that remains unclear in the absence of the information contained in the said note of the interview dated 4 May, is the extent to which the NOK was able to assist the experts not only with her mental health history but also with the "totality of the familial mental health history" that the experts considered potentially relevant.

[28] The PIPs are at pains to emphasise that there is no suggestion by them that the NOK has not been forthcoming in relation to her own mental health history. It is acknowledged that the NOK has taken the proactive step of obtaining and sharing her own medical notes and records. However, it is submitted that maternal mental health was not the sole potentially relevant information. Also, information relating to Noah's father, aunts, uncles and grandparents is also potentially relevant. It is argued that there is nothing in the redacted joint expert's note that casts any light on whether the NOK was in a position to provide fulsome information in relation to, for example, Noah's paternal family's mental health history.

[29] The PSNI and DP accept that, given the limited contact the NOK had with Noah's paternal family, the NOK might not have any knowledge of potentially relevant information, despite the NOK's best efforts and full candour with the experts. In such circumstances, it is submitted that it would be appropriate to make enquiries, for example, from Noah's paternal aunts. It is stated that the experts were

clear that the relevant information did not begin and end with the NOK's mental health history. For the avoidance of any doubt, the record of the interview with the NOK on 4 May makes no mention of paternal mental ill health.

[30] The PSNI and DP submit that without sight of the withheld information, it is not possible for them to make an assessment of the experts' opinions and whether the experts can be questioned about their opinions. Even though the experts have affirmed their previous opinions, these opinions have been based on relevant information that the PIPs have been prevented from seeing. Furthermore, it is argued that the jury are entitled to understand how the experts reached their conclusions and to assure themselves that all relevant and potentially relevant material has been taken into account. The weight which has been attached to relevant information, and the reasons why it is not considered to be determinative by the experts, are key pieces of information the jury is entitled to know and understand.

[31] Both the PSNI and DP submit that providing the information contained in the said note of the interview will enable them to consider whether further questioning of the experts is required.

***Submissions of the Next of Kin***

[32] I have considered carefully the NOK's submissions. Without intending a disservice to the comprehensive nature of the submissions, I would summarise the main arguments as follows. Firstly, the NOK has a guaranteed right to privacy pursuant to article 8 ECHR. The right to privacy extends to the protection of personal data, to include her medical notes and records.

[33] Secondly, having assessed the new information contained in the experts' note of the 4 May 2026 and the joint experts' note dated 5 May 2026, the experts concluded that their original opinions remained unchanged. Therefore, the new information was not relevant to the issues which the inquest is required to consider.

[34] Thirdly, in order to be compatible with the NOK's article 8 rights, disclosure of her private and confidential medical information can only be justified if it is necessary and proportionate to meet a legitimate aim. In the circumstances of this case, disclosure of the information is not necessary to meet a legitimate aim. Furthermore, when balancing the relevant factors, the disclosure of the information constitutes a real interference with the NOK's article 8 rights and it would be disproportionate to any perceived benefit to the inquest that would arise from disclosure.

*Matters for determination*

[32] The PSNI and DP seek disclosure of (a) the note produced by Dr Church and Dr Bowers dated 4 May 2026 following their interview of the NOK on 28 April 2026 and (b) an unredacted copy of the joint experts' addendum note dated 5 May 2026.

[33] The NOK submit that, in the exercise of my discretion, disclosure of the said documents should be withheld.

*Decision*

[32] The purpose of this inquest is to examine the circumstances surrounding the tragic death of a 14-year-old schoolboy, Noah Donohoe. As part of this investigation, three psychiatrists and a psychologist were instructed to analyse the evidence and to provide their expert opinions, inter alia, as to whether Noah was suffering from an acute mental illness or a psychological disturbance prior to his disappearance and whether they could assist in explaining Noah's behaviour and what happened to him.

[33] The experts agreed that when making an assessment of Noah's psychological/psychiatric state, it was standard and good practice to enquire into Noah's medical history. Consequently, Noah's medical records were considered potentially relevant and disclosed to the experts. The PIPs also had access to Noah's medical records. At para [4] of the experts' joint note dated 25 February 2026, the experts concluded that there was nothing in Noah's medical history which was relevant to the assessment of Noah's behaviour prior to his disappearance.

[34] In addition to their consideration of Noah's medical notes, the experts also agreed that when making an assessment of a child's psychological/psychiatric state, it was standard and good practice to enquire whether the child had a family history of mental ill health.

[35] For reasons discussed above, Dr Bowers, Dr Church and Dr Fazel did not, when consulting initially with the NOK, take a history of family mental ill health. Dr Vaidya did attempt to take a family history, but it was incomplete and did not include a maternal health history.

[36] It would be unusual in coronial proceedings for the NOK to be asked to provide a family history of mental ill health. It would be exceptional to request NOK to disclose their personal medical notes and records.

[37] It is disappointing and unsatisfactory that all the experts, when interviewing Ms Donohoe for the purpose of compiling their reports, did not take from her a detailed and complete family history of mental health, particularly since they all agreed that it was standard and good practice to do so. The failure to do so has resulted in a postponement of the experts' evidence until the NOK was finally

interviewed by Dr Church and Dr Bowers on 4 May 2026 in relation to the familial and maternal ill health.

[38] The purpose of the interview by Dr Bowers and Dr Church was to fully and completely explore Noah's family history of mental health difficulties, and particularly his mother's mental health history, to the extent that the NOK was able to provide these details. As highlighted above, the interview was considered necessary for the purpose of making an assessment on Noah's psychological and mental state at the time of disappearance.

[39] Prior to the interview, Dr Bowers and Dr Church had access to the NOK's medical notes and records which were provided with the NOK's consent. It is acknowledged that at no time did the NOK consent to disclosure of her personal medical notes and records to the PIPs.

[40] The note of the meeting dated 4 May 2026 has not been disclosed to the PIPs at my direction. This decision was made subject to hearing submissions from the PIPs which have been discussed above. In summary, counsel for the PSNI and DP argue that the note of 4 May 2026 must contain information from the NOK which was relevant to the experts' assessment of Noah's mental and psychological state at the time he went missing and to the NOK's parenting of Noah. The PSNI and DP submit that without sight of the withheld information, it is not possible for them to fully consider the experts' opinions and, thereafter, whether the experts could be questioned on the reasons for their conclusions. Accordingly, it is argued that this new information, which remains potentially relevant, must be disclosed to the PIPs.

[41] In my judgement, the PSNI and DP are correct that information derived from the NOK's interview and the experts' analysis of the NOK's medical notes and records as contained in the said note are potentially relevant. Specific entries from the NOK's medical notes and records have been incorporated into the note of the meeting. On the other hand, some of the details contained in the note refer to personal sensitive matters which are clearly irrelevant. The PIPs submit that they only require disclosure of relevant information.

[42] All the experts met on 5 May 2026. Prior to the meeting, the experts had access to and had reviewed the NOK's medical notes and records. They also had the said note of the meeting dated 4 May 2026. The purpose of the joint experts' meeting was to consider whether any previously expressed opinions require revision in light of the additional information provided to them. This was referred to as "new information." The experts concluded that the new information did not alter their previous opinions. In essence, the experts maintained their previously held conclusions that there was nothing in Noah's mental and psychological state of mind which could explain his disappearance. The experts reasserted their previously expressed opinions that Noah was not suffering from an acute mental illness or any psychological disturbance which would explain his behaviour prior to his

disappearance. In summary, the experts concluded that the new information did not provide an explanation as to what happened to Noah.

[43] Having carefully considered the submissions advanced by the parties, I agree with Mr Lunny and Mr Skelt that, when considering this new information arising out of the interview with the NOK and having access to the NOK's medical notes and records, the experts did assess potentially relevant personal data. The fact that the experts' assessment of the information did not change their conclusions does not mean, as claimed by Ms Campbell, that the information is irrelevant and, accordingly, should not be disclosed.

[44] However, that is not the end of the matter. The decision to withhold potentially relevant documents, materials or information, remains at the discretion of the coroner. Such discretion must be exercised fairly and legitimately following a balanced and proportionate analysis of the circumstances of the individual case.

[45] It is not disputed by any party that the information contained within the NOK's medical notes and records is inherently private and sensitive. For the same reason, in my judgement, the information contained within the note of the interview dated 4 May 2026 and the redacted joint experts' note dated 5 May 2026, includes personal medical data which is of fundamental importance to a person's enjoyment of their right to respect for private and family life as guaranteed by article 8 of the ECHR.

[46] As stated by the ECtHR in *Z v Finland* (1997) 25 EHRR 371:

> "95. In this connection, the Court will take into account that the protection of personal data, not least medical data, is of fundamental importance to a person's enjoyment of his or her right to respect for private and family life as guaranteed by Article 8 of the Convention. Respecting the confidentiality of health data is a vital principle in the legal systems of all the Contracting Parties to the Convention. It is crucial not only to respect the sense of privacy of a patient but also to preserve his or her confidence in the medical profession and in the health services in general.
> …
> The domestic law must therefore afford appropriate safeguards to prevent any such communication or disclosure of personal health data as may be inconsistent with the guarantees in Article 8 of the Convention."

[47] Article 8 ECHR states as follows:

> "1. Everyone has the right to respect for his private and family life, his home and his correspondence.
>
> 2. There shall be no interference by a public authority with the exercise of this right except such as is in accordance with the law and is necessary in a democratic society in the interests of national security, public safety or the economic well-being of the country, for the prevention of disorder or crime, for the protection of health or morals, or for the protection of the rights and freedoms of others."

[48] In my judgement, the NOK's article 8 ECHR rights have been engaged. Therefore, in order to ensure compatibility with the NOK's article 8 rights, disclosure of her private medical information must be justified as being no more than is necessary and proportionate to meet a legitimate aim.

[49] In *Bank Mellat v Her Majesty's Treasury (No.2)* [2013] UKSC 39 at [74], Lord Reed summarised the analysis of proportionality into distinct elements, stating:

> "It is necessary to determine (1) whether the objective of the measure is sufficiently important to justify the limitation of a protected right, (2) whether the measure is rationally connected to the objective, (3) whether a less intrusive measure could have been used without unacceptably compromising the achievement of the objective, and (4) whether, balancing the severity of the measure's effects on the rights of the persons to whom it applies against the importance of the objective, to the extent that the measure will contribute to its achievement, the former outweighs the latter."

[50] In carrying out the proportionality assessment, I have taken into consideration the following relevant factors.

[51] Firstly, the objective of the disclosure of the NOK's medical notes and records to the experts in tandem with an interview of the NOK, was to ascertain whether the new information caused the experts to revise or alter their opinions on Noah's mental and psychological state at the time he went missing and also the NOK's parenting of Noah. It is a material factor in the proportionality assessment that the objective was achieved. The fact that the experts did not change their opinions is another relevant factor which carries considerable weight.

[52] Secondly, as part of the process, the NOK voluntarily provided all her medical notes and records to the experts. This reflected an attitude not only of compliance and cooperation with the process, but also a determination to ensure that

the experts had available to them all potentially relevant information. The NOK's consent to disclose her confidential medical notes and records to the experts only was plainly to avoid any potential criticism that she had been selective in the disclosure of her personal data to the coroner and the experts. In essence, the experts had access to all the relevant materials in the NOK's possession to assist them in coming to their decisions.

[53] Thirdly, the request for disclosure of the NOK's medical notes and records and thereafter to subject the NOK to a meeting with the experts is plainly exceptional in coronial proceedings. This process, with a particular focus on the NOK's maternal mental health, was unquestionably distressing and intrusive for the NOK. However, the NOK was willing to do so because the experts considered it necessary to complete their assessment of Noah's mental health with a view to finding a possible explanation for Noah's behaviour prior to his disappearance. This was the legitimate aim of the process.

[54] Fourthly, the PSNI and DP have not instructed psychiatric and psychological experts. This was their choice. It is not a criticism. The PIPs can reasonably expect that the experts instructed would be independent and impartial and will reach their conclusions solely on their expertise when assessing all the materials, to include the relevant medical notes and records. The PIPs already have the reports of the experts. They have the detailed expert joint note dated 25 February 2026. In my view, the redacted joint experts' note dated 5 May 2026 amounts to a "less intrusive measure" which can ensure that the general objective of the disclosure has been achieved. The PSNI and DP submit that without sight of the withheld information, it was not possible for them to assess how the experts reached their conclusions and to question them on their opinions. I am not persuaded by this argument. Firstly, without the benefit of an expert opinion which questions the conclusions reached by the psychiatrists and the psychologists, challenging their opinions will be difficult. Secondly, the contents of the redacted note provide sufficient information to interrogate the experts' opinions, should the PIPs decide to go down that route.

[55] Fifthly, and fundamental to the circumstances of this exceptional case, I refer to an email from Dr Bowers, Forensic Psychologist, dated 1 May 2026 to the coroner's office in which she states as follows:

> "My second concern relates to the information contained within Ms Donohoe's medical records. These records include highly sensitive personal and medical information which may potentially be relevant to the inquest. When Dr Church and I discussed this information with Ms Donohoe, she was very open with us, but she was understandably very anxious and distressed.

> As the medical records appropriately conclude at the point Noah went missing, we do not have information regarding Ms Donohoe's current mental state. However, I am mindful that, in addition to the loss of her son, she has experienced sustained and exceptional stress and pressure over a prolonged period of nearly six years. As a registered healthcare professional, I have a duty of care to all individuals I have professional contact with irrespective of the circumstances. *I am therefore concerned to avoid contributing further to Ms Donohoe's distress, including through the potential disclosure of highly sensitive personal and medical information*.
>
> *In light of this, I wish to formally raise my concern regarding the potential impact on Ms Donohoe should her personal and medical information enter the public domain. I wanted to bring this to your attention so that any appropriate steps to mitigate further distress to Ms Donohoe can be considered."*

[56] The content of this email is alarming and must be considered as a relevant factor in the proportionality assessment as to whether or not the withheld information should be disclosed.

[57] Finally, counsel for the NOK and DP have each cited various provisions of the Data Protection Act 2018 ("DPA 2018") and the General Data Protection Regulations ("GDPR") in support of their arguments. For the purpose of this ruling, in my judgement, it is not necessary to analyse in detail the relevant provisions and principles from the said legislation. Such an analysis can be found in Jervis on Coroners, 15th edition, at paras 7-51 to 7-94. Nevertheless, I have taken into consideration that processing of sensitive personal data in connection with legal proceedings or under direction of the court is permitted pursuant to Schedule 2, paras 1 and 5 to the DPA 2018. In my judgement, disclosure of such personal data, which includes medical information, remains at the discretion of the coroner.

***Conclusion***

[57] Having carefully considered the detailed submissions made on behalf of the NOK and the other PIPs, for the reasons given above, it is my decision, in the circumstances of this exceptional case, that the NOK's article 8 ECHR rights outweigh disclosure of the experts' interview notes with the NOK on 4 May and an unredacted copy of the joint note of the experts on 5 May. The material contained within these documents is inherently private and personal. The experts who have considered the material, have confirmed that their expert opinions remain unchanged. Disclosure of such inherently private material would require strong justification, in particular, some identifiable benefit to the task undertaken by this inquest. For the reasons given, in my view, no such benefit arises. Any claimed

benefit from such disclosure would be minimal and insufficient to justify the interference with the NOK's article 8 ECHR rights.

[58] I am conscious that the application is that the withheld information should only be disclosed to the PIPs at this stage before consideration of any deployment. It was canvassed that I could set up a confidentiality ring and limit disclosure only to the lawyers. I am not persuaded that any such arrangement is sufficient to protect the NOK's article 8 rights. I remain of the view that disclosure of the said new information, even to a limited extent, is disproportionate and fails to strike a fair balance.

[59] In reaching this overall conclusion, I have taken into consideration in the proportionality assessment, Dr Bowers clearly articulated concern for the NOK's mental state, following the potential disclosure of highly sensitive personal and medical information.