

**Prisons &  
Probation**

**Ombudsman**  
Independent Investigations

# **Independent investigation into the death of Mr Terrence Clover, a prisoner at HMP Swaleside, on 27 February 2024**

**A report by the Prisons and Probation Ombudsman**

Third Floor, 10 South Colonnade  
Canary Wharf, London E14 4PU

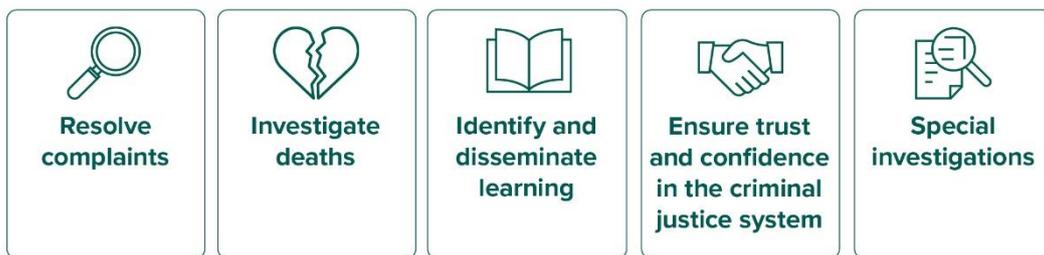
Email: [mail@ppo.gov.uk](mailto:mail@ppo.gov.uk)  
Web: [www.ppo.gov.uk](http://www.ppo.gov.uk)

T | 020 7633 4100

## OUR VISION

To deliver high quality and timely independent investigations and work closely with partners to achieve tangible benefits for the safety and confidence of those in custody and under community supervision.

## WHAT WE DO



## WHAT WE VALUE



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1. The Prisons and Probation Ombudsman aims to make a significant contribution to safer, fairer custody and community supervision. One of the most important ways in which we work towards that aim is by carrying out independent investigations into deaths, due to any cause, of prisoners, young people in detention, residents of approved premises and detainees in immigration centres.
2. If my office is to best assist His Majesty's Prison and Probation Service (HMPPS) in ensuring the standard of care received by those within service remit is appropriate, our recommendations should be focused, evidenced and viable. This is especially the case if there is evidence of systemic failure.
3. In September 2019, Mr Terrence Clover received an extended determinate sentence of nine years for sexual offences. He died of lymphoma (a type of blood cancer that affects the lymphatic system) on 27 February 2024, while a prisoner at HMP Swaleside. He was 82 years old.
4. The prison told us that Mr Clover had no identified next of kin. We nonetheless offer our condolences to those who knew him.
5. NHS England commissioned an independent clinical reviewer to review Mr Clover's clinical care at HMP Swaleside.
6. The clinical reviewer concluded that the clinical care Mr Clover received at HMP Swaleside was of a good standard and equivalent to that which he could have expected to receive in the community. She found good practice in the patient-centred prescribing of end-of-life medications and the good documentation of Mr Clover's care plans. She also found that healthcare staff maintained good communication and professional relationships with the hospital. In recognition of the good practice identified, we make the following recommendation:  
  
**The Head of Healthcare should provide timely feedback to healthcare staff about the good practice identified in the clinical review and consider how this can continue to be role modelled to staff to ensure ongoing good quality care and patient experience for patients receiving end-of-life care.**
7. The PPO investigator investigated the non-clinical issues relating to Mr Clover's care. We did not find any significant learning related to his death.

**Governor to note**

8. While Mr Clover was appropriately not restrained when he attended hospital in the months before his death, the prison was unable to find the escort risk assessments and bed watch logs for his hospital admissions between December 2023 and February 2024 and for his transfer to a hospice on 7 February 2024.
9. Cell bell records were also unavailable as the cell bell system's memory was full and prison staff did not know how to clear it.

10. The initial report was shared with HM Prison and Probation Service (HMPPS). HMPPS did not find any factual inaccuracies.
11. At an inquest held on 13 August 2024, the Coroner concluded that Mr Clover died of natural causes.

**Adrian Usher**  
**Prisons and Probation Ombudsman**

**July 2024**

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