

**Prisons &
Probation**

Ombudsman
Independent Investigations

Independent investigation into the death of Mr Michael Fox on 15 March 2022, following his release from HMP Humber

A report by the Prisons and Probation Ombudsman

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

Email: mail@ppo.gov.uk
Web: 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



© Crown copyright, 2025

This report is licensed under the terms of the Open Government Licence v3.0. To view this licence, visit nationalarchives.gov.uk/doc/open-government-licence/version/3

Where we have identified any third-party copyright information you will need to obtain permission from the copyright holders concerned.

Summary

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. Since 6 September 2021, the PPO has been investigating post-release deaths that occur within 14 days of a prisoner's release.
3. We carry out investigations to understand what happened and identify how the organisations whose actions we oversee can improve their work in the future.
4. Mr Michael Fox died of drug poisoning on 15 March 2022, the day after his release from HMP Humber. He was 43 years old. I offer my condolences to those who knew him.
5. Mr Fox had a long history of substance misuse, which was closely linked to his offending risk. We found that the resettlement team at Humber and probation services worked together to put appropriate measures in place to support Mr Fox on release and manage his risks in the community. This included training Mr Fox how to use naloxone, a medicine that rapidly reverses an opioid overdose and can significantly reduce or prevent harm or death. We are concerned that despite this, Mr Fox was not issued with a naloxone kit when he was released. The Head of Healthcare accepts that this was a serious oversight and Humber has initiated a review of the local policy, to ensure this does not happen again.

Recommendations

- The Head of Healthcare should ensure that prisoners who are assessed as at risk of opioid overdose are provided with a naloxone kit when they leave prison

The Investigation Process

6. The PPO investigator obtained copies of relevant extracts from Mr Fox's prison and probation records.
7. The investigator talked to healthcare staff and the service lead for Nacro BASS (Bail Accommodation and Support Services) North-East as part of her enquiries.
8. We informed HM Coroner for Hull and East Riding of the investigation. He gave us the results of the post-mortem examination. We have sent the coroner a copy of this report.
9. Our initial report was shared with HM Prison and Probation Service (HMPPS). HMPPS pointed out a factual inaccuracy and this report has been amended accordingly.

Background Information

HMP Humber

10. HMP Humber is a category C prison in Yorkshire that holds approximately 1,000 men. During the time that Mr Fox spent at Humber, City Health Care Partnership Community Interest Company delivered healthcare services, substance misuse treatment and mental health interventions.

HM Inspectorate of Prisons

11. The most recent inspection of HMP Humber was in November 2020. Inspectors reported that information sharing between the prison and community-based offender managers was reasonably good. At the time of the report, 147 prisoners had been released on Home Detention Curfew (HDC), also known as electronic tags, over the previous six months. However, 30 had been released late, mainly due to the shortage of suitable accommodation in the community or late responses for further referral information from community-based offender managers.
12. The report outlined how pre-release planning for prisoners with substance misuse needs was effective. Inspectors commended Drug and Alcohol Recovery Team (DART) workers for giving every prisoner harm reduction advice before release. However, at the time of the report naloxone, and the related training in its administration, were not available.

The Probation Service

13. The Probation Service supervises individuals serving community orders, provides offenders with resettlement services while they are in prison (in preparation for their release) and supervises all individuals for a minimum of 12 months when they are released from prison on licence. Supervision in the community is carried out by a community offender manager.

Home Detention Curfew (HDC)

14. HDC is a scheme that allows for prisoners serving at least 12 weeks but no more than 4 years to be released from prison early if they wear an electronic tag and stay at their address between set times.

Naloxone

15. Naloxone is an emergency medication that can reverse the effects of an overdose of opioids, such as heroin or methadone. Prisoners with a history of opioid use have a high risk of drug-related death in the first weeks after prison release. Since 2019 some prisons, including HMP Humber, have been issuing training and “take home” naloxone kits to every prisoner, meeting relevant criteria, on release.

Key Events

16. On 23 August 2021, Mr Fox was convicted of violent offences and burglary. On 1 December 2021 he was sentenced to 14 months in prison. Mr Fox was transferred to HMP Humber on 17 December.
17. Mr Fox's conditional release date was 24 March 2022. However, he was eligible for HDC from 15 December 2021, subject to appropriate accommodation being secured.
18. Mr Fox had a long history of substance misuse including alcohol, cannabis, amphetamines, heroin and crack cocaine. He engaged well with substance misuse agencies in prison and in the community.

Pre-release planning

19. On 12 January, Mr Fox met his prison offender manager (POM) to discuss resettlement planning. Mr Fox said that he was keen to find stable accommodation and stay away from drugs. The POM referred Mr Fox to the Drug and Alcohol Recovery Team (DART) in the community, who would be able to support his needs.
20. On 1 February, a DART practitioner trained Mr Fox on naloxone administration. This was a standard provision offered to those with opioid misuse issues and who were due to be released. She offered Mr Fox an optional appointment with the community DART on the day of his release, but he declined. Mr Fox said that he was comfortable with self-referring to the service if he needed it, as he had engaged with DART in the past.
21. On 10 February, an accommodation referral was made to Nacro BASS (a charity providing low level support and accommodation to people released from prison). This was made on the basis that Mr Fox needed suitable accommodation in the community in order to be considered for release on HDC.
22. On 28 February, the POM and Mr Fox's community offender manager (COM) discussed his plan for release. The COM confirmed that Mr Fox was on the waiting list for accommodation and could be released on HDC as soon as a space was available.
23. On 11 March, Mr Fox was informed that a room in hostel-type shared accommodation had been secured from 14 March. Mr Fox was allocated a new COM. He received a full handover from the first COM on 11 March.
24. On 14 March, the morning of his release, Mr Fox was given a copy of his licence containing the conditions he was expected to comply with in the community. Mr Fox's licence conditions included wearing an electronic tag, residing at his authorised address and remaining in the property between 7pm and 7am every night, and to comply with any instruction to address his alcohol or substance use with the community DART.

25. Before leaving the prison, Mr Fox was seen by a clinical manager in the prison healthcare team for a pre-release screening. She confirmed that Mr Fox was registered with a GP in the community. He was given the appropriate supply of his medication but was not given a naloxone kit as planned.

Post-release

26. Mr Fox reported to Hull probation office at 11.00am, as required. The COM explained his licence conditions and helped Mr Fox to set up his universal credit account. Mr Fox said he was feeling positive about staying away from drugs and engaging with the community DART.
27. The COM instructed Mr Fox to arrive at his accommodation at 3pm and told him he was required to attend his next probation supervision appointment on 21 March. He reminded Mr Fox to call the probation office if he had any concerns before then.

Circumstances of Mr Fox's death

28. Mr Fox arrived at his accommodation on time. He was met by the service lead, who carried out his induction. She said that he presented well on arrival. He told her that he had consumed three cans of lager but reported no use of drugs. Mr Fox told her that he had been drug free for seven months.
29. Following his induction, Mr Fox was required to remain in the property until 7am the following morning for his electronic tag to be fitted. At 7.30pm and 10.08pm, two Electronic Monitoring Service Officers came to the property and knocked at his room door. They recorded that Mr Fox did not respond to either of their visits. The officers reported that they could hear loud snoring at 7.30pm but that they heard nothing during the second visit. Another resident told them he believed that Mr Fox was still in his room. No staff were on duty in the property overnight.
30. At 7.12am on 15 March, a notification of Mr Fox's failure to comply with his tag fitting was submitted to Probation. Later that morning, a support worker went to the property to complete Mr Fox's follow up induction session. He got no response when knocking on Mr Fox's door. Another resident confirmed that Mr Fox was seen going into his room the previous evening but had not been seen since. The support worker followed the Nacro BASS welfare procedure and entered the room to find Mr Fox face down, deceased on the bed. They alerted the emergency services and did not start CPR as it was clear that Mr Fox had died.
31. Staff called the senior probation officer at Hull and informed her of Mr Fox's death.

Post-mortem report

32. The post-mortem report concluded that Mr Fox died of drug poisoning. Tests showed the presence of heroin, cocaine and some prescribed medications.

Findings

Substance misuse

33. Although Mr Fox was given training on how to use naloxone, staff at Humber failed to issue a naloxone kit when he was released from prison on 14 March. He died from drug poisoning (including heroin) one day after he was released.
34. Mr Fox was released early on HDC and at short notice. We found that the process for issuing naloxone did not capture those released in this way. The release data report used to issue packs was run around twice weekly and therefore did not capture HDC releases that fell outside of the period. This is being investigated as a serious incident by the healthcare providers City health Care partnership (CHCP). In response to the learning from Mr Fox's death, Humber are also undertaking a review of the naloxone policy. In the interim, they run updated release information twice a day, to capture any short notice discharges. We make the following recommendation:

The Head of Healthcare should ensure that prisoners who are assessed as at risk of opioid overdose are provided with a naloxone kit when they leave prison.

Inquest

35. The inquest into Mr Fox's death concluded on 25 March 2024, and concluded that his death was drug related.

Susannah Eagle
Deputy Prisons and Probation Ombudsman

July 2023

**Prisons &
Probation**

Ombudsman
Independent Investigations

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

Email: mail@ppo.gov.uk
Web: www.ppo.gov.uk

T | 020 7633 4100