

**Prisons &
Probation**

Ombudsman
Independent Investigations

Independent investigation into the death of Mr Shamraze Hussain, on 20 January 2026, following his release from HMP Doncaster

A report by the Prisons and Probation Ombudsman

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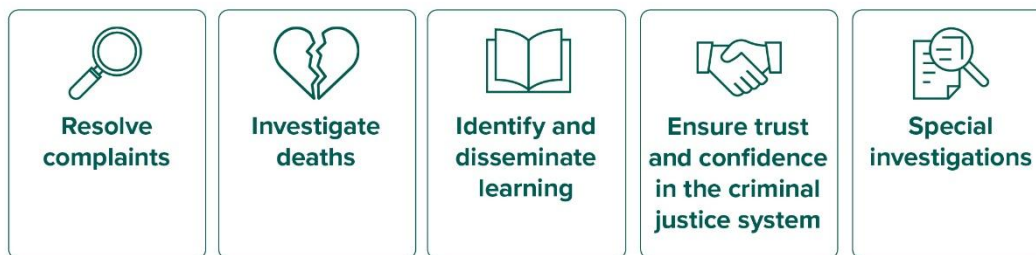
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OUR VISION

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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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 investigated post-release deaths that occur within 14 days of the person's release from prison.
3. 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.
4. Mr Shamraze Hussain died from heroin toxicity on 20 January 2026, two weeks after his release from HMP Doncaster. He was 36 years old. We offer our condolences to those who knew him.
5. Mr Hussain had a long history of illicit drug use. Although he had been offered drug rehabilitation services during previous periods of imprisonment, Doncaster did not identify Mr Hussain's drug history. As a result, he was not offered drug support during his 34 days there.
6. The healthcare provider at Doncaster has since implemented a policy that ensures all new receptions are subjected to additional scrutiny and a historical medical history notes review, to identify concerns about drug use that require referral to services for ongoing support.
7. We found no issues with Mr Hussain's post-release supervision.
8. We make no recommendations.

The Investigation Process

9. HMPPS notified us of Mr Hussain's death on 21 January 2026.
10. The PPO investigator obtained copies of relevant extracts from Mr Hussain's prison and probation records.
11. The investigator spoke to a member of staff from HMP Doncaster and two members of staff from the Probation Service, responsible for supervising Mr Hussain in the community.
12. We informed HM Coroner for Bradford of the investigation. They gave us the results of the post-mortem examination. We have sent the coroner a copy of this report.
13. The Ombudsman's office contacted Mr Hussain's next of kin to explain the investigation and to ask they had any matters they wanted us to consider. They had no questions but asked for a copy of our report.
14. We shared our initial report with HMPPS. They found no factual inaccuracies.
15. We sent a copy of our initial report to Mr Hussain's next of kin. They did not notify us of any factual inaccuracies.

Background Information

HMP Doncaster

16. HMP Doncaster is a category B prison which holds convicted male prisoners. It is managed by Serco. Practice Plus Group provides healthcare services and substance misuse services.

Probation Service

17. The Probation Service works with all individuals subject to custodial and community sentences. During a person's imprisonment, they oversee their sentence plan to assist in rehabilitation, prepare reports to advise the Parole Board and have links with local partnerships to which they refer people for resettlement services, where appropriate. Post-release, the Probation Service supervises people throughout their licence period and post-sentence supervision.

Deaths following release from prison

18. Between September 2021 and the end of March 2026, the PPO started investigations into approximately 300 deaths of people who died within 14 days of release from prison. The PPO has published two learning lessons bulletins about post-release deaths, most recently in July 2024. Our investigations highlight the acute vulnerability of prison leavers, especially during the first few days post-release, and indicate that prison leavers often have multiple risk factors such as mental health and substance use issues and homelessness which further increase their vulnerability and risk of death following release from prison.

Previous deaths following release from HMP Doncaster

19. Mr Hussain was the ninth man to die within 14 days of release from Doncaster since January 2023. Up to the end of June 2026, there have been no further deaths. All the previous deaths were drug related apart from one that was self-inflicted. One is still under investigation. We found that in all cases, the men received appropriate pre-release planning and post-release supervision.

Key Events

Background

20. On 4 December 2025, Mr Shamraze Hussain was convicted of arson and sentenced to 12 weeks in prison. He was sent to HMP Doncaster.
21. During his reception health screen, Mr Hussain told the nurse that he was an alcoholic and had drunk a litre of vodka prior to his arrest. He also told the nurse he had previously used drugs, but he refused to discuss further. He refused to undergo a drug test. The nurse offered to refer him to a specialist alcohol treatment service but he declined. The nurse recorded that Mr Hussain did not have any acute substance misuse issues and did not refer him for support with his past drug use.
22. Mr Hussain told the nurse he had paranoid schizophrenia, and that he received medication using a depot injection (an injection of slow-release antipsychotic medicine given every few weeks for the long-term management of mental health conditions such as schizophrenia). He told the nurse his mental health was currently stable, but he was concerned that he had not received his medication recently. The nurse made an urgent referral to the mental health team.
23. On 5 December, the psychiatrist at Doncaster noted that Mr Hussain had been released unexpectedly from HMP Leeds on 2 December (he had been held on remand for a month after being charged with assaulting police and probation staff, but the case was discontinued), and it was not clear whether Mr Hussain had received his depot medication, due on 4 December. The psychiatrist asked for Mr Hussain's medication to be urgently reviewed and for Mr Hussain to be referred to the mental health team.
24. On 8 December, a mental health nurse saw Mr Hussain. He told the nurse he was worried about not receiving his depot injection because it was overdue. The nurse made an urgent referral to the psychiatrist. Mr Hussain also asked to be prescribed diazepam to help him sleep.
25. On 9 December, the psychiatrist saw Mr Hussain again and noted that Mr Hussain was not in crisis, had no acute psychotic elements, and agreed to restart his depot injection. Mr Hussain received his depot injection the following day. Because Mr Hussain's next depot injection was due on 7 January, a day after his release date, the psychiatrist arranged for Mr Hussain to be given this injection on 5 January, the day before his release. The psychiatrist also prescribed diazepam,
26. On 13 December, Mr Hussain attacked another prisoner. He was placed in the segregation unit (where prisoners are kept apart from other prisoners and receive a reduced regime). He was seen daily by healthcare staff and returned to standard location on 23 December.
27. On 24 December, staff suspected Mr Hussain was concealing his diazepam medication as he refused to open his mouth and walked off after being given his medication.

28. On 25 December, Mr Hussain again refused to open his mouth when given his medication. An officer checked and found Mr Hussain had concealed his diazepam tablet under his tongue (indicating he might be trying to divert or sell his medication to other prisoners).
29. On 29 December, the psychiatrist noted that Mr Hussain had tried to conceal medication but as he was due to be released on 6 January, no action was needed other than a warning.
30. On 1 January 2026, Mr Hussain was seen with his diazepam tablet in his mouth after he claimed he had swallowed it.

Pre-release planning

31. On 9 December, Doncaster's Pre-Release Team completed a Basic Custody Screening Part 2 (BCST2) assessment with Mr Hussain. They wrote to Mr Hussain's community offender manager (COM) and offered to meet with him to discuss Mr Hussain's release planning. The COM told them he would meet with Mr Hussain on 15 December to discuss his release plan. He said Mr Hussain was a complex case, with mental health and drug use concerns. He also explained that Mr Hussain was a high risk to staff, and he did not recommend probation staff seeing Mr Hussain alone.
32. The Pre-Release Team discussed with the COM referring Mr Hussain to Reconnect (an NHS initiative designed to support individuals with health needs as they transition from prison back to community-based services). The COM thought any additional help Mr Hussain could access would be useful.
33. On 12 December, the COM began to consider suitable accommodation for Mr Hussain on release. The COM informed the community mental health team (CMHT) to ensure continuity of mental health support wherever Mr Hussain was living after his release.
34. On 15 December, the COM met Mr Hussain and told him that he was trying to arrange either an approved premises or accommodation through the Community Accommodation Service (CAS) for him on his release. Mr Hussain told him he wanted neither and wanted to live at his family home. After meeting Mr Hussain, the COM also checked with the prison to confirm Mr Hussain had received his depot injection.
35. On the same day, the COM contacted Mr Hussain's sister who he thought had a good understanding of Mr Hussain's behaviour and needs. Mr Hussain's sister said that she was not concerned if Mr Hussain returned to the family home and thought her brother would not settle well in either an approved premises or CAS accommodation. The COM considered it was not yet appropriate for Mr Hussain to return to his family home.
36. On 16 December, healthcare staff at the prison discussed Mr Hussain with the CMHT.
37. On 19 December, Ingeus, a company that supports people in the justice system to successfully transition back into the community through specialist rehabilitative

services, informed the COM they had contacted Mr Hussain after a referral from the prison. They arranged an appointment to see Mr Hussain in the community on 9 January 2026. The COM advised them of Mr Hussain's risk to staff.

38. On 22 December, the COM met with Mr Hussain and discussed housing options. The COM told Mr Hussain he could not return to his family home, and CAS accommodation had been found for him in Bradford close to his family so they could visit each other. The COM offered to support Mr Hussain in the future, to find his own accommodation in the area.
39. Mr Hussain said had not used heroin or crack for three months and intended to remain drug free. He said he felt much better. He was told he had to report to the probation office on 6 January.
40. On 23 December, Mr Hussain's release licence was approved. The licence included a requirement for Mr Hussain to undergo drug testing and to address his dependency on, or propensity to misuse, drugs and alcohol.
41. On 31 December, healthcare staff at Doncaster confirmed with the CMHT that Mr Hussain would be under their care on release.
42. On 5 January, healthcare staff told the COM and the CMHT that Mr Hussain had received his depot injection before his release.

Post-release management/release from HMP Doncaster

43. On 6 January 2026, Mr Hussain was released from Doncaster. He attended his initial appointment with the COM as required. Mr Hussain appeared to be under the influence of either drugs or alcohol. Mr Hussain was polite and engaged but was seen outside the probation office premises due to his presentation and possible risk to staff. Mr Hussain understood the requirements of his licence and the consequences of breaching them. He was given keys to his accommodation, a map of how to get there, and his bus fare. He was told to report again on 12 January.
44. On 9 January, Mr Hussain was taken to hospital by ambulance in a drowsy state. He refused treatment and was discharged.
45. On 12 January, Mr Hussain attended his appointment with the probation service. Also present was a member of staff from Ingeus, and his CAS accommodation provider. Mr Hussain was clean and engaged reasonably well. He said that he had not used any drugs since his release from prison. He also said he had an appointment to attend the job centre with his sister that afternoon. He said that the key to his property did not work and he had been sleeping in the hallway but did not report this. The housing provider offered to resolve this immediately. Mr Hussain said he was happy with his accommodation as it was a five-minute walk from his family home. He was told to report again on 19 January.
46. On 19 January, Mr Hussain attended his probation appointment. Also present were a member of staff from Ingeus, his accommodation provider, a member of the CMHT and another probation officer. Mr Hussain engaged reasonably well. He said he was staying at his accommodation every night. The CMHT worker told Mr

Hussain that he would be leaving his role in February but would arrange the scheduling of Mr Hussain's depot injection.

47. Mr Hussain said he was eating well, washing, and looking after himself. He said that he had been using heroin and crack cocaine daily since his last appointment. He asked for support from New Vision Bradford (NVB) who support people with alcohol and/or drug issues, to stop or cut down.
48. Mr Hussain said that he had not seen his mental health care coordinator. The COM said he would contact them and arrange for them to contact Mr Hussain via his sister. Staff from Ingeus tried to review Mr Hussain's needs. He said he did not want support or further appointments with Ingeus. The COM talked this through with Mr Hussain who then agreed for Ingeus to continue attending probation appointments to see Mr Hussain. The COM arranged to visit Mr Hussain at home on 26 January
49. The COM sent a referral to NVB. They agreed to see Mr Hussain. On 20 January they confirmed they had arranged with Mr Hussain to see him on 2 February.

Circumstances of Mr Hussain's death

50. On 20 January, Mr Hussain's sister contacted police, as she was concerned Mr Hussain had not met her as expected. At about 10.50pm, police discovered Mr Hussain dead at his home.

Post-mortem report

51. The post-mortem report concluded that Mr Hussain died from heroin toxicity.

Findings

52. Mr Hussain had a long history of drug use, including opiates. He had been in prison previously and as recently as November 2025. During previous terms of imprisonment, Mr Hussain told prison staff about his drug dependency. Although he did not always engage with attempts to help him with his drug addiction, he was previously referred for substance misuse support in prison and received risk minimisation advice, and training on how to use naloxone (a medicine that can rapidly reverse an opiate overdose).
53. During his initial reception screening at Doncaster, Mr Hussain disclosed issues concerning alcohol abuse. He said that he had previously used drugs, but refused to discuss this further. A cursory look thorough Mr Hussain's medical history by healthcare staff at Doncaster would have quickly revealed his drug dependency. The reception nurse offered to refer Mr Hussain for support with his alcohol dependency, but he declined. He was not referred for support with his past drug use. He was not given advice about drug use, risk minimisation, or naloxone during his sentence or in preparation for his release.
54. The Head of Healthcare at Doncaster reviewed the quality of Mr Hussain's reception screening. She agreed that Mr Hussain's considerable history of drug use was not identified during or after his reception screening. As a result, he was not offered support relating to drug use in prison or in preparation for his release. He declined assistance regarding alcohol misuse.
55. The Head of Healthcare told the investigation that Practice Plus Group had since implemented an integrated care pathway called, 'Early Days In Custody.' This policy ensures that all new receptions into Doncaster are subjected to additional scrutiny and a historical medical history notes review, to identify any information indicating ongoing substance misuse, mental health concerns, physical health or prescribing needs, that require referral to services for ongoing support. Daily meetings occur for new receptions and are followed up to ensure appropriate referrals and assessments are completed. All staff have been briefed via a learning bulletin.
56. The Pre-Release Team at Doncaster identified Mr Hussain's drug use history and made a referral for support in the community on his release.
57. Mr Hussain's mental health needs were quickly identified by healthcare staff at Doncaster, who acted promptly to provide mental health support and resolve concerns relating to Mr Hussain's depot injection including ensuring that he was not released again into the community without his depot medication. The investigation found good liaison between the mental health staff at Doncaster, the probation service and community mental health services.
58. Staff at Doncaster ensured that Mr Hussain received his depot injection the day before he left prison.
59. Mr Hussain's support and treatment in the community was disrupted by his returns to different prisons for short periods, undoubtedly affecting his ability to make use of the referrals for him to community support services.

60. Mr Hussain was not drug tested after his release from Doncaster. The COM told the investigator that he was not aware that Mr Hussain was taken to hospital possibly under the influence of either drugs or alcohol on 9 January as there was not a system in place in which that information is shared with an offender's COM.
61. The COM said that once Mr Hussain had settled into the community and his mental health was stable, he would have begun drug testing Mr Hussain. The COM said if he had he known about the incident on 9 January he may have started drug testing earlier. However, a positive test would not have meant his recall to prison, but a warning and a referral to a drug service.
62. When Mr Hussain told the COM that he had been taking drugs, the COM immediately referred Mr Hussain to a drug use support service.
63. Mr Hussain was assessed as violent and a high risk to staff. He had previously assaulted prison officers, prisoners, probation practitioners, family members, support workers, and had damaged property at support service buildings. This risk was heightened when Mr Hussain was under the influence of drugs or alcohol, or during a mental health crisis. This meant professionals could not see Mr Hussain alone and may have limited the opportunity for open and meaningful conversation between Mr Hussain and those trying to manage and support him.
64. We wish to highlight the persistent effort by the COM to source accommodation for Mr Hussain so that he was not homeless when released from prison, and his coordination of support for Mr Hussain despite the risk he posed to staff. The COM also liaised with Mr Hussain's family to gain a better understanding of Mr Hussain's needs and behaviours.
65. We are satisfied that Mr Hussain had good pre-release planning and appropriate post-release supervision. We make no recommendations.
66. At the inquest, held on 26 August 2026, the Coroner concluded that Mr Hussain's death was drug related.

Adrian Usher
Prisons and Probation Ombudsman

September 2026

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