

**Investigation into the circumstances surrounding the  
death of a man on 30 September 2009, following his  
release from HMP Nottingham**

**Report by the Prisons and Probation Ombudsman  
for England and Wales**

**July 2010**

This is a report of an investigation into the death of a man, who died following his release from HMP Nottingham on 30 September 2009. The man died less than 12 hours after his release from prison. I have carried out this investigation under my discretionary power to consider those deaths following release from custody, where issues are raised about the care provided by the Prison Service.

I would like to extend my condolences to the man's family and to all those affected by his death. I would also like to apologise for the delay issuing my report, and for any additional distress this may have caused.

One of the Ombudsman's investigators was appointed to carry out my enquiries into the circumstances of the man's death. In addition, a clinical review was commissioned by Nottinghamshire Primary Care Trust, who appointed a clinical reviewer to carry out the review. I am grateful for her timely contribution to the investigation. I am also grateful to the Governor at HMP Nottingham and his staff for their assistance during this investigation. In particular, I would like to thank the prison's liaison officer.

The man was released from Nottingham on 30 September. His death was recorded at 9.38pm the same day. A post-mortem report concluded that the man had taken heroin and died shortly afterwards, possibly as he had lost tolerance to morphine.

I make one recommendation to the National Offender Management Service.

**Jane Webb**  
**Acting Prisons and Probation Ombudsman**

**July 2010**

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## SUMMARY

The man was sentenced to 18 months imprisonment in September 2008 for an alcohol related offence and was taken into custody at HMP Nottingham. He was prescribed methadone daily (as he had been in the community) and began attending a substance misuse programme. He also spent a short time on Assessment, Care in Custody and Teamwork monitoring (ACCT, the Prison Service monitoring system for those at risk of suicide or self harm) , as he said he felt stressed and concerned about his housing situation.

The man remained at Nottingham for just over four months, after which he was transferred to HMP Ranby and then on to HMP Stocken. Whilst at Stocken, he was assessed by their Counselling, Assessment, Referral, Advice and Throughcare (CARATs) Team. They identified that he had last used heroin in November 2007 and had been on methadone for the last 18 months. The man said he did not want to work with the CARATs Team as he was now free of drugs. On 16 June, he was released on licence.

On 30 July, the man committed a public order offence for which he was recalled to prison. When he arrived back at Nottingham he told staff that he had no fixed abode and no next of kin to record. He also said that he had no problems with drugs or alcohol and had “been clean” for the last three months. He said he did not want to be referred to the CARATs Team.

On 3 August, he was interviewed by a resettlement officer with a view to discussing his offending behaviour and plans for his release. However, as the man was due to be released on licence at the end of his sentence, the responsibility for this fell to his probation officer. She carried out an Offender Assessment System (OASys) review on the man the next day and noted that being homeless was a major contributory factor in his offending behaviour. She contacted Nacro (a charity which helps people find accommodation) on a number of occasions, but was unable to get any reply (and still had not by the time he was released).

A CARATs worker saw him on 23 September. She had only been alerted the day before that he had previously had dealings with the CARATs team at Stocken. The man told her that he did not want or need any support as he had been drug free for some time.

The man was released on licence on 30 September. He met his probation officer at 12.30pm that day. She had been unable to help him secure accommodation and so he should report to the emergency accommodation unit. He said he did not want to do this as it would be “full of drugs”. He was disheartened and disappointed that he still had nowhere to live and said that it had been pointless remaining free of drugs and alcohol. He said he intended to drink later that day. He said he felt that if he committed a more serious offence, his housing needs would be taken more seriously.

Police reports explain briefly what happened to the man later that day. It seems that he did indeed drink some alcohol and at some point in the evening

became involved in a fight in the street. He sustained a head injury when he fell to the pavement. Later that night he injected some heroin into his forearm and fell asleep. His companion was unable to wake him and called for an ambulance. The man was pronounced dead at 9.38pm, just 12 hours after he was released from prison.

I make one recommendation to the National Offender Management Service. This concerns communication between themselves, Nacro and other housing organisations.

## THE INVESTIGATION PROCESS

1. The Investigator was appointed to conduct this investigation after the office was notified of the man's death. She received all the necessary paperwork shortly after he died and visited HMP Nottingham on 17 November 2009 to conduct recorded interviews with staff. One of the people interviewed was the man's Probation Officer. This was to find out what happened to him after he left prison, and what support and assistance he given to him.
2. Notices were issued to both prisoners and staff inviting anyone who had information regarding the man to make themselves known to the Investigator, no further witnesses came forward.
3. One of the Ombudsman's Family Liaison Officers contacted the man's family to explain the role of the Prisons and Probation Ombudsman and offer the opportunity to participate in the investigation. The man's family said they were frustrated at the lack of information they received from the police surrounding his death. They were concerned about the circumstances of his death and had not received all of his personal effects either. The man's mother also told the Family Liaison Officer that the family had not been aware that the man had been in prison prior to his death and did not know why he had been in custody. The man's mother spoke very positively about the contact she received from the Governor at Nottingham. I hope this report answers any questions the man's family may have and helps them better understand events leading up to the man's death.
4. Nottinghamshire Primary Care Trust (PCT) were commissioned to conduct a clinical review into the standard of care the man received. The Clinical Reviewer led the review.
5. In response to the draft report, the man's parents said it appeared that their son was well looked after and treated fairly whilst at Nottingham. They feel, however, that the man was let down by the Probation Service who they believe did not do enough to support their son. They feel strongly that had more been done to assist him in finding suitable drug free accommodation on his release from prison, the outcome may have been different.

## **HMP NOTTINGHAM**

6. HMP Nottingham is a prison that serves the courts in the Nottinghamshire area. The prison holds 550 prisoners. It has four residential wings and a segregation unit. G wing is the first night centre and induction unit which holds 130 prisoners. F wing is predominately used as a drug treatment wing. Approximately 50 per cent of the population are remanded by the courts, the remainder being convicted prisoners either awaiting sentence or undergoing an initial assessment of needs before transfer to a suitable prison.
7. Although there are full time healthcare staff, the prison does not have a separate healthcare wing or area. A number of cells are allocated on a wing which can accommodate prisoners with additional health needs. This is known as 'enhanced care'.

### **Her Majesty's Chief Inspector of Prisons**

8. Nottingham was most recently inspected by the HM Inspectorate of Prisons in an unannounced short follow-up inspection in October 2007. In her report, the Chief Inspector, said:

"Nottingham remained a generally safe prison, despite a transient population with multiple needs. However, the reception area was unchanged and remained unsuitable for its task.

"Both detoxification and drug treatment arrangements had improved with the introduction of the integrated drug treatment system.

"Nottingham continues to provide reasonable resettlement provision, although there was scope for improvement."

### **Independent Monitoring Board (IMB)**

9. An IMB is appointed to each prison by the Secretary of State for Justice. Its members are made up from members of the local community and are wholly independent of the Prison Service and the prison's management team. Each IMB is required to produce an annual report to the Secretary of State about the prison, highlighting good practice and areas of concern.
10. The latest report from the Nottingham IMB covers the period 1 March to 28 February 2009. The IMB said:

"The strategic aim set out by National Offender Management Service (NOMS) is 'to increase the proportion of socially excluded adults in settled accommodation and employment,

education or training' and the harm caused by drugs alcohol drives the resettlement work at the prison."

"Referrals for accommodation within Nottingham City are made through Gateway. This single point of access has cut down options but HMP Nottingham prisoners are prioritised wherever possible."

## **Nacro**

11. Nacro provides a range of services across England and Wales to help people access basic services such as housing and education and provide opportunities for re-habilitation.

## **Assessment, Care in Custody and Teamwork (ACCT)**

12. ACCT is a care-planning system whereby staff can work together to provide individual care to prisoners identified as being a risk of harming themselves or of suicide. Any member of staff can open an ACCT on a prisoner, and scheduled meetings are held to monitor and review the prisoner's care and progress.

## **Counselling, Assessment, Referral, Advice and Throughcare (CARATS)**

13. There are drug workers in most prisons from organisations specialising in the treatment of substance abuse. CARATS workers run programmes, and offer counselling, support and referral to rehabilitation centres to prisoners and on release. Access to CARATS is voluntary.

## **Offender Assessment System (OASys)**

14. The system is used as part of sentence planning. It is a risk assessment tool to make a proper assessment of a prisoner's needs and to help select an appropriate prison for a sentenced prisoner.

## KEY FINDINGS

15. The man arrived at HMP Nottingham on 17 September 2008 for an alcohol related offence for which he was sentenced to 18 months imprisonment. Upon his reception at Nottingham, he was seen by a mental health nurse (RMN). He had been prescribed 60 millilitres of methadone daily whilst in the community and it was noted that he took drugs intravenously. The man was given one 20 mls dose of methadone that evening with 40 mls prescribed daily from the following day.
16. The man said he was concerned about housing issues and stress at home so, after a week into his sentence the ACCT procedures were opened. It was noted that he seemed very low and twice mentioned the possibility of taking his own life. However, a day later, he said it had all been a misunderstanding. He apologised for wasting time and appeared happy and confident. The ACCT book was therefore closed.
17. On 8 October, the man refused his methadone treatment, as he said he wanted to attend the gym instead. Staff were advised to withhold treatment, although there is no further record to explain if this was done and for how long.
18. It was noted in medical records on 2 January 2009 that the man was attending a substance misuse programme. At some point his methadone prescription had been reduced from 40 mls to 30 mls, but it is not clear from the records when this happened.
19. He remained at Nottingham for just over four months when he transferred to HMP Ranby. Three months later he moved to HMP Stocken. On 20 April, the man was assessed by the CARATs team. The CARATs worker identified that he had last used heroin in November 2007 and had been taking methadone for the last 18 months. The man said he did not want to engage with the CARATs team as he said that he knew what the triggers for a relapse were (being homeless, bored and unemployed). He appeared to be free of methadone, but was told that he could use the CARATs service if he wanted to and his file would remain open. On 16 June 2009, he was released on licence from Stocken.
20. On 30 July, the man committed a public order offence. The man's Probation Officer, thought the offence was serious enough for him to be recalled to prison. In any event he was sentenced to four months imprisonment and returned to Nottingham.
21. When he arrived back at Nottingham, it was noted at reception that he said he had no next of kin and no fixed abode. He said at interview that he had no problems with drugs or alcohol and no thoughts of

harming himself or of suicide. He said he had “been clean” for the last three months. He did not identify himself as a drug user and, despite being asked whether he had been referred to CARATs before, he did not make himself known to staff. (Unless a prisoner is automatically referred by staff because drug problems are evident or the prisoner already has a prescription for methadone, it is for an individual to refer themselves.)

22. However, all prisoners passing through reception are seen by a CARATs team member. They explain what the service can offer, reassure prisoners that the service is confidential, and mention the assistance with alcohol issues and referrals that is available once a prisoner is in the community. They also speak about harm reduction, including the risks of injecting drugs and reduced intolerance following abstinence. The man did not choose to speak to anyone from CARATs.
23. On 3 August, he saw a Senior Officer (SO) (the Resettlement Manager). The Resettlement Manager’s role is to interview all new prisoners with regard to reducing offending and re-establishing prisoners into the community.
24. The Resettlement Manager told the investigator that the purpose of the interview is to discuss a prisoner’s accommodation issues, employment training, education, finance and benefit problems and family issues. On the day he saw the man, he had approximately 12 prisoners to interview in an hour, so he was only able to spend about ten minutes with him. The purpose was to gather information about the likelihood of him re-offending. The Resettlement Manager added that, as the man was due to be released on licence at the end of his sentence, his probation officer, would be responsible for dealing with his accommodation problems.
25. The probation officer carried out an OASys assessment for the man on 4 August. In the assessment she noted that, when he was previously released from Nottingham, he did not have anywhere to live. She believed that this was a factor in his offending behaviour. He had been referred to a housing organisation, but did not attend. He had been accepted on a Nacro housing list, to look at housing on release. (Nacro housing in Derby and Staffordshire provides supported accommodation for single homeless people in Derby and Stoke-on-Trent. The probation officer contacted them on 3, 23, 24 and 28 September to check the status of the man’s application, but nobody returned her messages. This matter was still outstanding when he was released.)
26. The man told his probation officer that he had mainly lived on the streets since 2001, although occasionally he was able to sleep at friends’ houses. He said this would be the case when he was released at the end of this sentence.

27. The man told his probation officer that he was drug free when he was released from Stocken and had attended a detoxification programme there. (The CARATs team at Nottingham later confirmed to his probation officer that the man would not have a methadone prescription on release and he had been free from methadone for eight weeks.) The man told his probation officer that he had failed to attend a relapse prevention session because he “couldn’t be bothered”. He said he did not believe drugs were an issue for him anymore, but he had been drinking alcohol which had led to his last offence. He said he tried to take his own life a number of times over the last three or four years. He had regularly thought about suicide, but these feelings had diminished.
28. The man agreed on a plan of action with his probation officer. It included remaining drug free, trying to reduce his alcohol consumption, that he would attend any appointments with housing providers and behave appropriately so as not to jeopardise his chances of obtaining suitable accommodation.
29. On 10 September, the man was asked to supply a urine sample for a drugs test. He failed to provide a sample. (The prison rules state that prisoners are allowed to refuse to comply once, but will be tested within a week.) He supplied a sample five days later. This was negative and indicated that he was drug free.
30. Nearly a fortnight later, on 22 September, just over a week before he was due for release, the man’s CARATs file arrived from Stocken. (It is not clear why the file took so long to arrive at Nottingham, but it seems likely that it was not known that the man had returned to prison.)
31. A CARATs worker, saw the man the next day. She told him she had received a file from Stocken and wanted to know whether he had any ongoing drug issues or needed any support. The man said that he did not and that he had been drug free for some time. The CARATs worker said that, as he was due for release in the next few days, she could make an appointment with a local drugs intervention programme, which he could visit after release. The man declined saying he was fine. The man’s probation officer left him some harm reduction advice (about the risk of taking drugs again and reduced level of tolerance to drugs after abstaining) which is normal practice for prisoners due for release. The probation officer told the investigator that, although they obviously do not encourage drug use, if released prisoners do decide to use then it is better to smoke, rather than inject, the drug. The man signed to confirm that he had received the paperwork.
32. The man was released on licence from Nottingham on the morning of 30 September. The usual discharge checks were made but, as he had not engaged with CARATs at the prison, he was not reminded about the dangers of drug use after release.

33. The man's Probation Officer completed a Form PD1 – Pre-Discharge report (which she had faxed to the prison a few days before his release). She confirmed that he did not have a discharge address. She added that he had been accepted by Nacro, but they had not confirmed whether a vacancy existed for him on 30 September. The man was referred to emergency accommodation on release.
34. The man's licence showed that his supervision began on 30 September and was due to expire on 16 March 2010. Conditions on his licence included that he should be well behaved, not commit any offence, keep in touch with his probation officer, and permanently reside at an address approved by his probation officer.
35. A section on the need for additional licence conditions said:
- “You are to comply with any requirements reasonably imposed by your supervising officer for the purpose of ensuring that you address your alcohol and drug offending behaviour problems, including attendance at a substance misuse agency for an initial assessment and support sessions if so required.”
36. The Probation Officer also requested that the man should be given a higher discharge grant (£46 and an additional £5) payable to Derby City Council. The man was offered overdose prevention information for prisoners, but he wrote “N/A” when asked to sign for the paperwork.
37. The Senior Officer (SO) in reception recalled the man's discharge. He remembered asking about accommodation and whether anything had been arranged. The SO in reception had no information about accommodation, but he was to report to his probation officer as soon as possible. The man told the Senior Officer that he did not normally “do his full licence” and usually got recalled. He said “I'll see you before Christmas”. The SO in reception said the man seemed quite happy, apart from the accommodation issue.
38. Although he was due to see his probation officer at 12.00pm, the man arrived at 12.30pm. He said he did not know what time he had been required to report, but just knew it was that day. The man's probation officer explained his licence conditions and what was expected from him. They discussed his lack of accommodation. The probation officer told him she had contacted Nacro, but had not heard back (she contacted them again later that day, but still got no reply). She advised the man to go to an organisation at Milestone House that provided emergency accommodation in Derby. The man said he was not willing to go there and saying that he did not want to live in a hostel because it would be “full of drugs”. The probation officer said it was his best option at that time, but he said he had a friend he could stay with. If he was unable to stay there, he would remain homeless.

39. The man also said that he fully intended to drink alcohol that day and would go back to prison because he had nowhere to live. He went on to explain that he had friends who were a higher risk than him who had been found accommodation on release. He said he may as well commit a more serious offence, for example stabbing someone, as he would then stand a better chance of finding somewhere to live in the long run. The probation officer advised him against this. The man added that as well as drink he might as well take drugs, as there was no point in staying clean for so long. They discussed this at some length and eventually his probation officer made another appointment to see him on 1 October at 12.00pm. After the meeting, the probation officer spoke to her supervisor about what the man had said about re-offending and also spoke to the police. The police logged that these threats had been made.
40. Reports from officers from Derbyshire Police explain what is known of the man's final hours. He had met another man, most likely the friend he intended to stay with, who bought him a can of extra strong lager. They went back to the man's flat, where he fell asleep for approximately half an hour. He got up to have a shower, although he also fell asleep there. Finally he got up and went into town. He saw an Asian man, and became verbally abusive towards him. The Asian man made a telephone call, and two more men attended. One of the men punched him in the face, he fell to the ground and hit his head. It is possible there were additional blows. The men were eventually separated and the man returned to his friend's flat. Police visited the flat, and were verbally abused by the man.
41. At some point later that night, he apparently had with him a bag of heroin. It is not clear where or when he got this. It seems that he put the heroin into a syringe and injected it into his right forearm. The other man also took drugs. The man fell asleep on the bed, and his friend on the floor. After a period of about 40 minutes, the man's friend noticed that he was lying face up on the bed and looked unwell. He tried to wake him, but was unsuccessful. He rang for an ambulance which attended at 9.10pm. The man was pronounced dead by paramedics at 9.38pm.
42. A toxicology examination was held at the East Midlands Forensic Pathology Unit at the University of Leicester the next day. The cause of death was morphine and alcohol toxicity. The pathologist noted that:
- “A period of incarceration within a prison would cause a loss of tolerance. In addition to taking the morphine he has also in my opinion imbibed alcohol ..... alcohol can potentiate the effects of morphine and lower its minimal fatal concentration.”
43. Nottingham prison was informed of the man's death the next day, when police rang for any next of kin details. (They had noticed that he had

prison literature with him.) The prison did not have any information as the man had not given any details on his reception into the prison.

44. The prison Governor wrote to the man's family, which he passed to the coroner to be forwarded. The letter expressed his condolences and gave contact details, should the family wish to speak to him. A family member did contact him and they had a long conversation about the man. The Governor offered to pay for the man's funeral, which the family accepted. The Governor and the Liaison Officer attended the funeral, on 3 November, and the Liaison Officer provided on-going support to the family, helping to fill in the gaps since their last contact with him. The family spoke very positively about help and support they received from the prison which they should be commended for.

## **ISSUES**

### **Records from previous prisons**

45. It took at least eight weeks for the CARATs records from Stocken to arrive at Nottingham. As the man did not make himself known to the CARATs team at Nottingham, they were unaware of his previous involvement until the files arrived. However, Stocken knew that he had been released on licence and would not have immediately known that he had been recalled to Nottingham. Whilst I make no formal recommendation, I suggest that the system for ensuring that prison records are forwarded between prisons is reviewed for its effectiveness.

### **Drug tolerance advice**

46. The man was again given advice by the CARATS team on his reception into Nottingham and during his meeting with his probation officer. He was warned that taking drugs again after a prolonged period of abstinence could be dangerous. He was also offered leaflets on his discharge from the prison which also explained this. However, he signed a discharge form to say "N/A" meaning the forms were not applicable to him.

### **Accommodation**

47. It appears that the man's concerns about his lack of accommodation were a big factor in his attitude to offending and alcohol and drug taking. The prison's resettlement team were not responsible for assisting him, as he was to be released on licence and the

responsibility therefore fell to his probation officer. She attempted to secure somewhere for him to live via Nacro, whom she contacted on a number of occasions. It seems that the probation officer never received a reply from them and so could only refer him to emergency accommodation on release, where he did not want to go. It is clear from his discussion with the probation officer after his release, that he was disheartened about the lack of help, and that he felt that avoiding drugs and alcohol was pointless. It appears that his probation officer's help was limited and there was no other alternative that she could suggest. Although I cannot be certain that this contributed to the man's decision to take drugs and drink later that day, it seems to have been a major factor.

**The National Offender Management Service should look at ways to improve communication between Nacro and housing associations.**

## **CONCLUSION**

48. When the man was recalled to custody on 31 July and returned to Nottingham prison, he said that he had no alcohol or drug problems. Records from his time in other jails suggest otherwise but did not arrive at the prison with him as he was a licence revokee who had been released from another prison.
49. The man was offered the services of the CARATs team, but said he was drug free and did not require any support. However, it seems that an area where he did need support was to find him accommodation upon his release. It appears that he attributed much of his offending and lifestyle to the fact that he had nowhere to live.
50. The Resettlement Unit at the prison deal with prisoners who are not released on licence, but leave the prison at the end of their sentence. As he was released on licence, it fell to the probation officer to try to help him secure accommodation.
51. His Probation Officer did try to help the man find somewhere to live, but her attempts to contact Nacro proved fruitless. During his meeting with his Probation Officer on 30 September, he seemed frustrated that he remained homeless, thought he would be better off in prison, and threatened to commit a more serious offence to stand a better chance of accommodation.

52. It seems that the man met a friend who offered him somewhere to stay. At some point during 30 September, he drank alcohol and injected heroin. As he had been free from drugs for some time, it is likely that his intolerance led to his death.

## **RECOMMENDATIONS**

### **To the Probation Service:**

1. The National Offender Management Service should look at ways to improve communication between Nacro and housing associations.

**This recommendation was accepted.**