

**Prisons &
Probation**

Ombudsman
Independent Investigations

Independent investigation into the death of Mr Barry McKay a prisoner at HMP Lancaster Farms on 31 October 2019

A report by the Prisons and Probation Ombudsman

Our Vision

To carry out independent investigations to make custody and community supervision safer and fairer.

Our Values

We are:

Impartial: *we do not take sides*

Respectful: *we are considerate and courteous*

Inclusive: *we value diversity*

Dedicated: *we are determined and focused*

Fair: *we are honest and act with integrity*



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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. We carry out investigations to understand what happened and identify how the organisations whose actions we oversee can improve their work in the future.
3. Mr Barry McKay, who was 70 years old, died in hospital on 31 October 2019 of lung cancer, while a prisoner at HMP Lancaster Farms. We offer our condolences to Mr McKay's family and friends.
4. The clinical reviewer concluded that the clinical care Mr McKay received was of a good standard and equivalent to that which he could have expected to receive in the community. She made no recommendations.
5. We did not find any non-clinical issues of concern. We make no recommendations.

Investigation Process

6. NHS England commissioned an independent clinical reviewer to review Mr McKay's clinical care at Lancaster Farms. The clinical review is attached to this report as Annex 1.
7. The PPO has investigated the non-clinical issues in Mr McKay's care, including his location, the security arrangements for his hospital escorts, liaison with his family and whether compassionate release was considered.
8. One of our family liaison officers wrote to Mr McKay's next of kin, his son, to explain the investigation. He did not respond.
9. The initial report was shared with the Prison Service. The Prison Service did not find any factual inaccuracies.

Previous deaths at Lancaster Farms

10. Mr McKay was the fifth prisoner to die at Lancaster Farms since October 2017. Of the previous deaths, two were from natural causes, one was self-inflicted and one remains unclassified.

Key Events

11. In May 2019, Mr Barry McKay was recalled to prison. He was moved to HMP Lancaster Farms on 11 June.
12. In August, Mr McKay was diagnosed with lung and stomach cancer. He was told that his condition was terminal and that treatment would make him comfortable but would not cure him.
13. On 9 September, a biopsy was taken so that a treatment plan could be decided.
14. On 15 October, Mr McKay was taken to a hospital appointment. He was told that his cancer was aggressive and without treatment his life expectancy was 16-20 weeks.
15. On 16 October, a consultant oncologist saw Mr McKay. The consultant discussed treatment options with him and it was decided that he would have immunotherapy (a type of cancer treatment which helps your immune system to fight cancer). Mr McKay was told that his life expectancy with treatment was not known, but the treatment could be continued for up to two years.
16. On 22 October, Mr McKay was seen by a prison paramedic. She was concerned that Mr McKay had a high National Early Warning Score (NEWS – a tool used to identify clinical deterioration in adult patients). She asked the prison doctor for advice and he said that Mr McKay should be taken to hospital. He was taken to Royal Lancaster Infirmary where he was admitted.
17. On 25 October, Mr McKay's health deteriorated further. Hospital staff discussed a Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) order with Mr McKay, who agreed that if he stopped breathing he did not want to be resuscitated.
18. On 28 October, the prison started the process for early release on compassionate grounds. Unfortunately, Mr McKay died before this process was completed.
19. On 31 October at 4.00am, Mr McKay died in hospital.
20. There was no post-mortem examination as the coroner accepted the cause of death provided by a hospital doctor. The doctor recorded that Mr McKay died from lung cancer. Chronic obstructive pulmonary disease (COPD – the term for a collection of serious lung diseases) and atrial fibrillation (an abnormal heart rhythm) were listed as contributing factors.

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