

**Prisons &  
Probation**

**Ombudsman**  
Independent Investigations

# Independent investigation into the death of Mr John Pitt, a prisoner at HMP Humber, on 22 March 2021

**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. My office carries out investigations to understand what happened and identify how the organisations whose actions we oversee can improve their work in the future.
3. Mr John Pitt died in hospital of COVID-19 on 22 March 2021, while a prisoner at HMP Humber. He was 53 years old. I offer my condolences to Mr Pitt's family and friends.
4. The clinical reviewer considered that the care Mr Pitt received at Humber was in part equivalent to that which he could have expected to receive in the community.
5. However, she was concerned that when Mr Pitt tested positive for COVID-19, healthcare staff did not take his clinical observations and he was not monitored to see if he became symptomatic. Mr Pitt was obese, which meant that he was at a higher risk of developing complications, and he should, therefore, have been closely monitored and his observations taken regularly.
6. We are also concerned that when a prison nurse saw Mr Pitt and noted that he had a National Early Warning Score (NEWS – a tool to assess clinical deterioration) of 6, she advised him to sit upright in a chair to improve his oxygen levels and told him she would check on him again later. A NEWS score of 6 should have prompted an urgent clinical response. The nurse did not return for over an hour, by which time Mr Pitt had got into bed because he felt so unwell, and then an ambulance was called.
7. The clinical reviewer was also concerned that Mr Pitt's diabetes was not monitored regularly and there were no follow up checks or reviews documented in his clinical record.
8. This version of my report, published on my website, has been amended to remove the names of staff and prisoners involved in my investigation.

## Recommendations

- The Head of Healthcare should ensure that prisoners with long-term conditions are referred to the long-term conditions clinic and monitored regularly.
- The Head of Healthcare should ensure that prisoners who test positive for COVID-19 and are obese, are closely monitored and have their observations taken regularly.
- The Head of Healthcare should ensure that staff are fully competent in the NEWS scoring system and understand the appropriate clinical response.

## The Investigation Process

9. NHS England commissioned an independent clinical reviewer to review Mr Pitt's clinical care at the prison.
10. The PPO investigator investigated non-clinical issues, including the prison's response to COVID-19 and shielding prisoners, the security arrangements for Mr Pitt's hospital escorts, liaison with his next of kin and whether compassionate release was considered.
11. We informed HM Coroner for East Riding and Kingston Upon Hull of the investigation. We have sent the Coroner a copy of this report.
12. The Ombudsman's family liaison officer contacted Mr Pitt's son to explain the investigation and to ask if he had any matters he wanted the investigation to consider. He did not respond.
13. The initial report was shared with the Prison Service. The Prison Service did not find any factual inaccuracies.

## Background Information

### HMP Humber

14. HMP Humber is a medium security prison in Yorkshire that holds approximately 1,000 men. City Health Care Partnership provides healthcare services between the hours of 7.00am and 8.30pm.

### Previous deaths at HMP Humber

15. Mr Pitt was the sixth prisoner at Humber to die since March 2019. Of the previous deaths, one was drug-related, two were self-inflicted and two were from COVID-19. There has been one further death from COVID-19 since.

### COVID-19 (coronavirus)

16. COVID-19 is an infectious disease that affects the lungs and airways. It is mainly spread through droplets when an infected person coughs, or sneezes. The first reported case of COVID-19 in the UK was in February 2020. On 11 March, the World Health Organisation (WHO) declared COVID-19 as a worldwide pandemic.
17. COVID-19 can make anyone seriously ill, but the risk is higher for some people. There are two levels of higher risk: high-risk (clinically extremely vulnerable); and moderate risk (clinically vulnerable). People at high risk include those who have had an organ transplant; have a severe lung condition; or are having certain types of treatment for cancer; or have a condition with a very high risk of getting infections. Those at moderate risk include people over 70; people with a lung condition; or a chronic medical condition, such as diabetes, heart, liver, lung, or chronic kidney disease; or those who are very obese (this list is not exhaustive).

18. To reduce the spread of the virus, the Government introduced voluntary and mandatory actions, such as 'social distancing' and 'lockdown' (on 16 and 23 March, respectively). Public Health England (PHE), HM Prison & Probation Service (HMPPS) and NHS England worked together to devise measures to contain the outbreak, achieve social distancing, reduce the risk to the most vulnerable in prisons in England and protect the NHS (by reducing the number of people requiring specialist care in community-based hospitals).

## Key Events

19. In July 2009, Mr John Pitt was given an imprisonment for public protection (IPP) sentence for false imprisonment with a minimum term of four years and six months. (Once an IPP prisoner has served their minimum term, they have to satisfy the Parole Board that they no longer pose a risk to the public before they can be released.) On 17 January 2019, Mr Pitt was moved to HMP Humber.
20. Mr Pitt was taking regular medication for schizophrenia, asthma, high blood pressure and depression. He had diabetes and was insulin dependent. He was also obese.
21. At his annual diabetic review in February 2020, a nurse noted that Mr Pitt's diabetes was poorly managed. She advised him to check his blood sugars regularly and offered dietary advice. She noted that Mr Pitt seemed unconcerned about his diabetes and dismissive of the severity of his condition.
22. In May 2020, at the start of the COVID-19 pandemic, staff assessed Mr Pitt as 'clinically vulnerable' (at moderate risk of complications if he were to catch COVID -19). Prison staff did not offer Mr Pitt the opportunity to shield because Humber offered shielding only to prisoners in the 'clinically extremely vulnerable' group.
23. On 30 September, a prison GP saw Mr Pitt. Mr Pitt told the doctor that he was administering his insulin into his abdomen, however, the doctor was concerned that this was not true because there were no skin puncture marks on Mr Pitt's abdomen. When the GP suggested that a nurse should administer the insulin, Mr Pitt became abusive and insisted that he would do it himself.
24. The prison GP asked a health practitioner to go to Mr Pitt's cell to check his technique for injecting insulin. She went to Mr Pitt's cell and said that Mr Pitt had administered his insulin while she was there, and she raised no further concerns.
25. In November, staff noted that Mr Pitt continued to have high blood sugar levels and ignored dietary and lifestyle advice that was given to him. On 28 November, Mr Pitt told a nurse that he had forgotten to collect his insulin prescription. The nurse noted that he did not appear to be taking his insulin or checking his blood sugars correctly.
26. On 25 February 2021, during an extensive COVID-19 outbreak at Humber, Mr Pitt tested positive for COVID-19. Mr Pitt was told that he would need to isolate in his cell and medication would be brought to him.
27. On 2 March at 10.35am, Mr Pitt told a nurse that he was feeling unwell. She took his observations and noted that he had a National Early Warning Score (NEWS) of 6. (NEWS is a tool used to assess clinical deterioration in adult patients – a score of 6 indicates high clinical risk.). She advised Mr Pitt to sit upright in his chair to improve his oxygen levels and told him she would check on him again at lunchtime.
28. Just over an hour later, the nurse went back to check on Mr Pitt. He told her that he had to go back to bed because he was feeling too unwell to sit in the chair.

She noted that his breathing was laboured, and he was pale. Healthcare staff called an ambulance and Mr Pitt was taken to hospital.

29. While in hospital, Mr Pitt's health deteriorated, and he was taken to the intensive care unit where he was put on a ventilator. Mr Pitt died on 22 March.

### **Post-mortem report**

30. The Coroner has not yet shared the post-mortem report with us but gave the interim cause of death as COVID-19. Diabetes, heart disease and peripheral vascular disease were listed as contributing factors.

## **Findings**

### **Management of Mr Pitt's risk of catching COVID-19**

31. Mr Pitt had not left the prison in the weeks before he became ill and it appears, therefore, that he caught COVID-19 in prison. Humber had a significant outbreak of COVID-19 infections in February and March 2021, which is when Mr Pitt tested positive. We have looked at whether the prison took appropriate steps to protect him from COVID-19.
32. In line with national guidance for the general population, prisons were expected to identify prisoners at risk of serious illness if they contracted COVID-19 and provide them with the opportunity to shield.
33. Mr Pitt had underlying health conditions which made him clinically vulnerable and at moderate risk of complications if he were to catch COVID-19. Healthcare staff were only required to offer shielding to those that were clinically extremely vulnerable. Mr Pitt was not offered shielding and we are satisfied that this was in line with guidance.

### **Clinical Findings**

34. The clinical reviewer considered that the care Mr Pitt received at Humber was in part equivalent to that which he could have expected to receive in the community. The clinical reviewer was satisfied that the care Mr Pitt received for his mental health was equivalent, but she had some concerns about aspects of his physical healthcare.
35. When Mr Pitt tested positive for COVID-19, he should have been monitored closely as patients who are obese are at higher risk of developing complications. We are concerned Mr Pitt was not monitored in prison throughout the time that he had COVID-19.
36. The clinical reviewer was also concerned about the response of the nurse on 2 March, when Mr Pitt had a NEWS score of 6. The nurse advised Mr Pitt to sit upright in his chair to improve his oxygen levels. She told him to tell wing staff if his symptoms became 'unbearable'. This was inappropriate. A NEWS score of 6 should have prompted an urgent clinical response. The nurse did not return to check on Mr Pitt for over an hour.

37. We make the following recommendations:

**The Head of Healthcare should ensure that prisoners who test positive for COVID-19 and are obese, are closely monitored and have their observations taken regularly.**

**The Head of Healthcare should ensure that staff are fully competent in the NEWS scoring system and understand the appropriate clinical response.**

38. The clinical reviewer was also concerned that, even though it had been documented that Mr Pitt's diabetes control was poor, he was not referred to the long-term conditions clinic for monitoring and support. We recommend:

**The Head of Healthcare should ensure that prisoners with long-term conditions are referred to the long-term conditions clinic and monitored regularly.**

**Sue McAllister CB  
Prisons and Probation Ombudsman**

**December 2021**

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