

**Prisons &
Probation**

Ombudsman
Independent Investigations

Independent investigation into the death of Mr Anthony Fruin, a prisoner at HMP Haverigg, on 17 November 2020

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 Anthony Fruin died of lung cancer on 17 November 2020 at HMP Haverigg. He also had COVID-19 which did not cause but contributed to his death. He was 85 years old. We offer our condolences to those who knew him.
4. Mr Fruin's underlying medical conditions and age put him at high risk of becoming seriously ill if he contracted COVID-19. He followed the advice to shield from April until August 2020 and isolated when he returned to prison from hospital in July, September and November 2020. After his return from hospital in both September and November, Mr Fruin tested positive for COVID-19, and received treatment in prison. In September, he was asymptomatic. He died in November after his health deteriorated while receiving end-of-life care for cancer.
5. The clinical reviewer concluded that the clinical care that Mr Fruin received at Haverigg was equivalent to that which he could have expected to receive in the community. She found that he was managed with respect and compassion and she commended the staff who ensured that he received 24-hour nursing care in his last days of life.
6. Prison staff promptly and appropriately isolated Mr Fruin when he returned from hospital in July, September and November in line with national instructions to minimise the spread of COVID-19. It is highly likely that he contracted COVID-19 in hospital in both September and November 2020.
7. We found no non-clinical issues of concern, and we make no recommendations.

The Investigation Process

8. NHS England commissioned an independent clinical reviewer to review Mr Fruin's clinical care at Haverigg.
9. The PPO investigator has investigated non-clinical issues, including the prison's response to COVID-19 and shielding prisoners, Mr Fruin's location, the security arrangements for his hospital escorts, next-of-kin liaison and whether compassionate release was considered.
10. The PPO family liaison officer wrote to Mr Fruin's next of kin, his solicitor, to explain the investigation. They did not respond to our letter.
11. We informed HM Coroner for Cumbria of the investigation. We have sent the Coroner a copy of this report.
12. We shared our initial report with HM Prison and Probation Service (HMPPS). They found no factual inaccuracies in our report but pointed out an incorrect name in the clinical review report, which has been amended.

Previous deaths at HMP Haverigg

13. Mr Fruin was the first prisoner to die at Haverigg since November 2018.

COVID-19 (coronavirus)

14. COVID-19 is an infectious disease that affects the lungs and airways. It is mainly spread through droplets when an infected person coughs, sneezes, speaks or breathes heavily. On 11 March 2020, the World Health Organisation (WHO) declared COVID-19 a worldwide pandemic.
15. COVID-19 can make anyone seriously ill but some people are at higher risk of severe illness and developing complications from the infection. People at high risk (clinically extremely vulnerable) include those who have had an organ transplant, have severe lung or kidney disease or have certain types of cancer or other treatment which significantly increases the risk of infection. Examples of those at moderate risk (clinically vulnerable) are people over 70 years, people under 70 with an underlying health condition such as diabetes or chronic respiratory, heart, liver or kidney disease, those with a weakened immune system or who are very overweight. (These lists are not exhaustive.)

Key Events

16. In 2006, Mr Anthony Fruin received an indeterminate sentence for public protection for rape. On 16 January 2020, he was transferred from HMP Wymott to HMP Haverigg. He had several significant health conditions, including ischaemic heart disease, hypertension and chronic obstructive pulmonary disease (COPD, a lung disease). He was also a smoker.
17. On 28 February 2020, Mr Fruin had a chest X-ray which showed a small pleural effusion (a build-up of excess fluid between the layers of the lungs).
18. From the beginning of the COVID-19 pandemic in March, Mr Fruin followed advice to shield.
19. On 31 March, Mr Fruin had a further chest X-ray which showed no change but following an admission to hospital in July, he was diagnosed with lung cancer.
20. On 8 July, Mr Fruin was discharged to Haverigg, where he isolated for 14 days.
21. On 7 September, Mr Fruin was readmitted to hospital for chest X-rays, chest draining and blood transfusions. On 21 September, he was discharged to Haverigg's isolation unit, and tested positive for COVID-19. He stayed in the isolation unit for 14 days but remained asymptomatic.
22. On 5 October, Mr Fruin signed an order to confirm that he did not want to be resuscitated if his heart or breathing stopped.
23. On 18 October, Mr Fruin fell twice but refused hospital admission.
24. On 26 October, Mr Fruin told healthcare staff that he fell in the night, but he subsequently refused a physical health assessment. He was given pain relief for back pain. Two days later, he went to hospital for an X-ray which confirmed he had fractured his spine. He declined hospital admission and returned to Haverigg. The next day, Mr Fruin agreed to go to hospital to treat his fracture and have his chest drained.
25. On 2 November, Mr Fruin tested positive for COVID-19 in hospital.
26. On 5 November, Mr Fruin was discharged from hospital to Haverigg's isolation unit and he slipped during the night. The following day, he fell again. On 8 November, he was sent to a hospice but refused all care until he was returned to Haverigg. On 12 November, he returned to Haverigg. Although Haverigg does not provide 24-hour healthcare, they ensured that Mr Fruin had access to 24-hour healthcare.
27. Mr Fruin's health deteriorated and he died of lung cancer at Haverigg on 17 November. He also had COVID-19, which did not cause but contributed to his death.

Caroline Mills
Assistant Ombudsman

February 2022

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